Maternity and Newborn Clinical Network Maternity News: November 2010

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Announcing the appointment of A/Prof Glyn Teale as the Obstetric Clinical Lead for the Maternity and Newborn Clinical Network.

Glyn Teale is an UK trained Obstetrician and Gynaecologist who has worked at Goulburn Valley Health in Shepparton since obtaining FRANZCOG in 2002. He is an Associate Professor at the Rural Clinical School, University of Melbourne, with research interests in obesity, utilisation of cord gases in quality improvement, vitamin D deficiency and reduction in stillbirth rates. He is Chair of the Safety and Quality committee of the Maternity & Newborn Program Department of Health, and a member of the Stillbirth Committee of Consultative Council of Obstetric & Paediatric Morbidity & Mortality (CCOPMM).



A/Prof Glyn Teal presenting at the recent IMPROVE workshop

Maternity and Newborn Clinical Network

The Maternity and Newborn Clinical Network was formed in 2007 with the aim of reducing variation in clinical practice within Victorian Maternity Services. The MNCN is comprised of four key contacts and is supported by a Leadership Group. The Leadership Group meets bimonthly and is comprised of obstetric, midwifery, neonatal representatives and health executives from across Victoria. For more details on the leadership group www.health.vic.gov.au/clinicalnetworks/maternity

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Statewide Clinical Forum

August 31st was the second Statewide Clinical Forum for the year. It proved very popular with 118 representatives attending. Results of the MARCH 2010 IOL and SCN survey and audit were presented, along with updates to the Neonatal Handbook, 3Centres guidelines, MNCN projects and consumer perspectives. The forum received excellent feedback, in particular the lunchtime showcase by health services. Power Point presentations from the forum can now be viewed on the MNCN website: www.health.vic.gov.au/clinicalnetworks/maternity

Engaging Parents as Partners in Care

The MNCN has recently established a 6 month working party designed to focus on ways to achieve meaningful engagement of parents as partners in the care of their baby. The group would like to develop principles relevant to assist facilitation of parent education and participation within SCN. The working party has developed a survey which will be sent to all Victorian SCN in the coming weeks looking at engaging parents as Partners in Care.

We are pleased to welcome the following people to this working party:

- Neil Roy (neonatologist)
- Di MacFarlane (Peninsula)
- Samantha Chandler (consumer)
- Wei Qi Fan (Northern)
- Bev O'Sullivan (The Women's)
- Sally Murray (The Women's)
- Brooke Jones, (The Women's)
- Helen Dorning (Ballarat),
- Lisa Oro (MNCN) and
- Junelle Rhodes (consumer)



IMPROVE Workshop

The next round of IMROVE workshops will be held November 19th and 20th at Southern Health Clayton. The workshops have proved very popular with all 84 places taken. MNCN hopes to hold more workshops in 2011.

The workshops are designed to address the educational needs of health professionals involved in managing perinatal death. Interactive stations are organised around the sections of the PSANZ perinatal mortality guidelines and include communication with families regarding autopsy, placental and post mortem examination, investigation of perinatal deaths, examination of babies who die in the perinatal period, perinatal mortality classifications and bereavement support.

Keeping Mothers and Babies Together

The KMBT project is due to finish next month. Recommendations from this working group will be presented to the Leadership Group for their considerations. The MNCN would like to thank Kym Davey, Kym Forrest, Amanda Cameron, Pam McGrath, Julianne Barclay, Nicole Smith, Jackie Keane, Ann Catchlove, Faye Kricak, Maureen Tobin and Andrea Moore for working so hard in making the project a success.



Clinical Question

"What is the safest way to sleep twins?"

The MNCN has been asked to comment on the safest way to sleep twins. After requesting information from health services around the state, it became clear there is a wide variation in clinical practice regarding sleeping multiples. Some health services have removed all twin cots on PNW, others promote face to face sleeping in the same cots, some top and tail twins, whilst others have no clear policy or information in this area.

So the question remains...should twins sleep together in the one cot or on their own separate cots?

Research has not yet provided a conclusive answer to this question. However the safest way to sleep twins on the post natal ward and at home, in the absence of evidence based research, is to place them in their own cot following the SIDS and Kids Guidelines (2010) steps to safe sleeping. The Department of Education and Early Childhood Development (DEECD) in conjunction with Maternal and Child Health Services in Victoria also supports and actively promote this stance for safe sleeping of twins. Until research proves otherwise, the MNCN recommends parent of twins are educated in safe sleeping practices in accordance with the SIDS and Kids FAQ – please see www.sidsandkidsvic.org:

Co-bedding in the hospital setting

Current research into the co-bedding of twins does not provide sufficient evidence to guide policy and guidelines for or against the practice in NICU/SCN. Premature and low birth weight babies are at increased risk of SUD. Health professionals must weigh up the risks and benefits for each baby. A significant consideration in this risk/benefit assessment must be the care and safety of babies when they are discharged home as many parents will continue infant care practices modelled by hospital staff.

The postnatal stay allows midwifery and neonatal staff an opportunity to target parents and staff with risk reduction messages. Demonstrating the back sleeping position for all babies prior to discharge establishes a safe sleeping model for parents to follow when their baby is discharged. It is important to ensure that the parents know how to reduce the risk of SUDI and fatal sleep accidents prior to discharge. Do not assume parents have this information already as they may have missed other opportunities to learn about safe sleeping environments for babies.

Sleeping twins safely at home¹

Current evidence, although limited, shows that the safest way to sleep twins at home is to place them in their own cot. Co-bedding twins could be dangerous if one part of the body of one twin were able to accidentally cover the face of the other causing an interference with breathing.

A small observational study of 10 twin pairs sleeping in various side by side and head to head configurations showed that twins sleeping side by side occasionally impinged on, although did not obstruct the airway of the other twin.

Sometimes parents and carers of twins may need to sleep twins in the same cot, for example when travelling or visiting, if there is insufficient space for two cots in the room. In these circumstances, ways to minimise the risks for twin babies sharing the same cot include:

- ♣ Place the babies head to head, at opposite ends of the cot.
- Wrap the babies according to SIDS and Kids guidelines (from birth until showing signs of being able to roll over)
- ♣ Sleep the babies in separate safe infant sleeping bags (for babies weighing 3.2kg and over)





How to sleep twins safely when there is insufficient space for two separate cots

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¹ Sidsandkidsvic.org



By three methods we may learn wisdom: First, by reflection, which is the noblest, Second, by imitation, which is the easiest, and third by experience, which is the bitterest.

Confucius

Reflection of practice

Case review undertaken as part of the deliberations of the Stillbirth Committee (CCOPMM) has highlighted the potential risks of inadequate recording of phone advice given to pregnant women.

As well as the obvious medico-legal risks of poor record keeping, clinical harm may result if the details of previous phone advice are not available to subsequent staff.

Some maternity services have developed specific telephone advice forms which may reduce the risk of such problems.

Many organisations mandate that the woman attend the hospital for review if she rings on more than two occasions. Examples of phone advice records are available on the MNCN website: www.health.vic.gov.au/clinicalnetworks/maternity

February 2011 Statewide Forum



Do you have a fantastic initiative at your health service that you would like to share?

Or is there something that another health service does that you would like to know more about?

Contact: Lisa Oro for more information lisa.oro@health.vic.gov.au or 0419 573 916.