Advanced Neonatal Nurse Practioner Assessment Project
Confidential Enquiry: Assessment of Care

Study case number

Rater initials

Rating scales
The specific questions and their associated tick boxes are provided to focus the rater’s mind on the key issues in order to give an overall rating on each dimension in the Opinion box.

You are asked to give written opinions in the Opinion boxes and to rate each dimension on a 5 point scale of 0 to 4. The definitions of the scale are as follows:
0 Performance fell well below that which could be regarded as acceptable and could have contributed to a poor outcome.

1 Substandard performance, with significant omissions to the record, but not likely to have affected the outcome.

2 Adequate, safe care, but no frills. Most of the information there but not very well laid out.

3 Above average performance and care. Comprehensive record with all the necessary information.

4 Exemplary care. Clear, well structured record, full documentation, all necessary and no inappropriate actions.
A. Resuscitation

1. Personnel present for resuscitation
(record number of individuals in each category if possible; simply tick the box if not known)

<table>
<thead>
<tr>
<th>Personnel</th>
<th>Present at delivery</th>
<th>Arrived later</th>
</tr>
</thead>
<tbody>
<tr>
<td>Midwife</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neonatal Nurse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ANNP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultant paediatrician</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SpR in paediatrics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff grade in paediatrics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SHO in paediatrics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (specify if known)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Condition at birth
a) Was the heart rate present at birth? Yes No n/k
b) Was spontaneous respiration present within one minute of birth? Yes No n/k

3. Resuscitation in the first minute after birth
a) Was there absent or ineffective respiration or persistent heart rate <100/min? Yes No n/k
b) Was IPPV administered (by mask or intubation)? Yes No n/k

4. Resuscitation 5 minutes after birth
a) Was there absent or ineffective respiration or persistent heart rate <100/min? Yes No n/k
b) Was IPPV administered (by mask or intubation)? Yes No n/k

5. At any time during resuscitation
a) After effective IPPV had been established was the heart rate <60/min at any stage? Yes No n/k
b) Was external chest compression performed? Yes No n/k
6. Drugs administered during resuscitation

<table>
<thead>
<tr>
<th>Drug</th>
<th>Dose</th>
<th>Route</th>
<th>Age in hours and minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adrenaline</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bicarbonate</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Volume expander</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Glucose</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Other (specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Opinion - A
Detail any aspects of the resuscitation which you consider to be exemplary:

Detail any aspects of the resuscitation which you consider to be sub-standard:

Overall rating [ ]
B. Admission to Special Care

1. Age at admission to Special Care
   ............hours ...........minutes

2. Clinical status on admission
   a) Was there spontaneous and effective respiration on admission?  Yes No n/k
   b) Was IPPV with tracheal intubation given within the first postnatal hour?  Yes No n/k
   c) Was CPAP given within the first postnatal hour?  Yes No n/k
   d) What was the infant’s temperature when first recorded on admission to Special Care?  ..........°C n/k

3. Clinical examination
   Did the clinical examination after admission  All applicable Some None
to Special Care record:
   a) Respiratory (moans/grunts, rate, effort, colour, FiO2, ventilator settings)
   b) Cardiovascular (heart rate, perfusion, heart sounds)
   c) Neurological (tone, conscious level, spontaneous movements, abnormal movements)
   d) Abdominal (distension, umbilicus, genitalia)
   e) Other (specify)____________________________________________________________

Opinion - B
Detail any aspects of the admission to Special Care which you consider to be exemplary:

Detail any aspects of the admission to Special Care which you consider to be sub-standard:

Overall rating □
C. Stabilisation

a) Was surfactant administered?  
   Yes  No  n/k

<table>
<thead>
<tr>
<th>Dose</th>
<th>Name of surfactant</th>
<th>Age in hours and minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
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<td>3</td>
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<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
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</tr>
</tbody>
</table>

b) At what age was an intravenous infusion established? ..........hours ..........minutes n/k

c) How was oxygenation monitored? (tick all that apply)
   SpO2  TcPO2  Capillary sample  From arterial line  Not monitored n/k

d) How was carbon dioxide status monitored? (tick all that apply)
   TcPCO2  Capillary sample  From arterial line  Not monitored n/k

e) How was blood pressure monitored? (tick all that apply)
   From arterial line  Machine  Cuff + doppler or pulse oximeter  Not monitored n/k

f) How was the circulatory status assessed?
   Colour  Skin temperature  Capillary return  Not assessed n/k

Opinion - C

Detail any aspects of the stabilisation which you consider to be exemplary:

Detail any aspects of the stabilisation which you consider to be sub-standard:

Overall rating
D. Investigations

a) What investigations were done within 24 hours of admission, before and after 2 hours from admission? (tick all that apply)

*Blood gas
Haematocrit alone
*Full blood count
*Blood culture
Blood glucose reagent strip
*True blood glucose (including HemoCue)
*Urea and electrolytes

Other (specify)_____________________________________

b) Were important or abnormal results documented clearly in the narrative record? Yes No n/k

c) Was appropriate action taken on any abnormal results? Yes No n/k

d) Were appropriate initial investigations done for seizures? All Some n/k n/a
   (Those * above plus calcium & magnesium)

e) Were any inappropriate investigations done? Yes No
   Specify:_______________________________________________________________

Opinion - D
Detail any aspects of the investigations which you consider to be exemplary:

Detail any aspects of the investigations which you consider to be sub-standard:

Overall rating
E. Communication with parents

a) Was any record made of communication with parents in the delivery room? Yes No n/k

b) Was any record made of communication with parents around the time of admission? Yes No n/k

c) Was any record made of communication with parents from 1 hour after admission? Yes No n/k

Opinion - E
Detail any aspects of the communication with parents which you consider to be exemplary:

Detail any aspects of the communication with parents which you consider to be sub-standard:

Overall rating
F. Treatment

1. Respiratory support
   Is there evidence that support was adjusted according to clinical/monitor/blood gas information?
   Yes  No  n/k

2. Infection
   a) Were antibiotics started promptly after admission, if indicated?
      Yes  No  n/k
   b) For how many days was the baby treated during the primary course?
      ............days

3. Seizures
   a) Were seizures treated promptly?
      Yes  No  n/k
   b) Was the treatment appropriate?
      Yes  No  n/k

4. Other
   a) Did any other medical complication develop? Was it treated appropriately?
      ____________________________
      Yes  No  n/k
      ____________________________
      Yes  No  n/k

Opinion - F

Detail any aspects of the treatment which you consider to be exemplary:

Detail any aspects of the treatment which you consider to be sub-standard:

Overall rating
G. Transfer out

1. Reason for transfer (tick the main reason)
   - Medical (respiratory, prematurity, asphyxia etc)
   - Medical (subspecialty eg metabolic, nephrology)
   - Surgical
   - Cardiac
   - Other (specify)

2. Who undertook the transfer?
   a) Team from the unit of destination
   b) Staff from the referring unit (tick all that apply):
      - Nurse
      - ANNP
      - Paediatric Consultant
      - Paediatric SpR
      - Paediatric SHO

3. Was a copy of the transfer letter retained in the notes? Yes No

Opinion - G
Detail any aspects of the preparation for transfer which you consider to be exemplary:

Detail any aspects of the preparation for transfer which you consider to be sub-standard:

Overall rating
H. Palliative/Terminal Care

a) Was there a clear record of relevant discussions with parents?  
   Yes  No  n/k

b) Were the wishes of the parents recorded?  
   Yes  No  n/k

c) Was there a record of the personnel who supported the parents through the death?  
   Yes  No  n/k

d) Was there a statement of the plans for follow-up?  
   Yes  No  n/k

e) Was it recorded as to whether an autopsy was requested?  
   Yes  No  n/k

Opinion - H
Detail any aspects of palliative care which you consider to be exemplary:

Detail any aspects of palliative care which you consider to be sub-standard:

Overall rating