

Introducing a GBS screening programme in a UK maternity setting

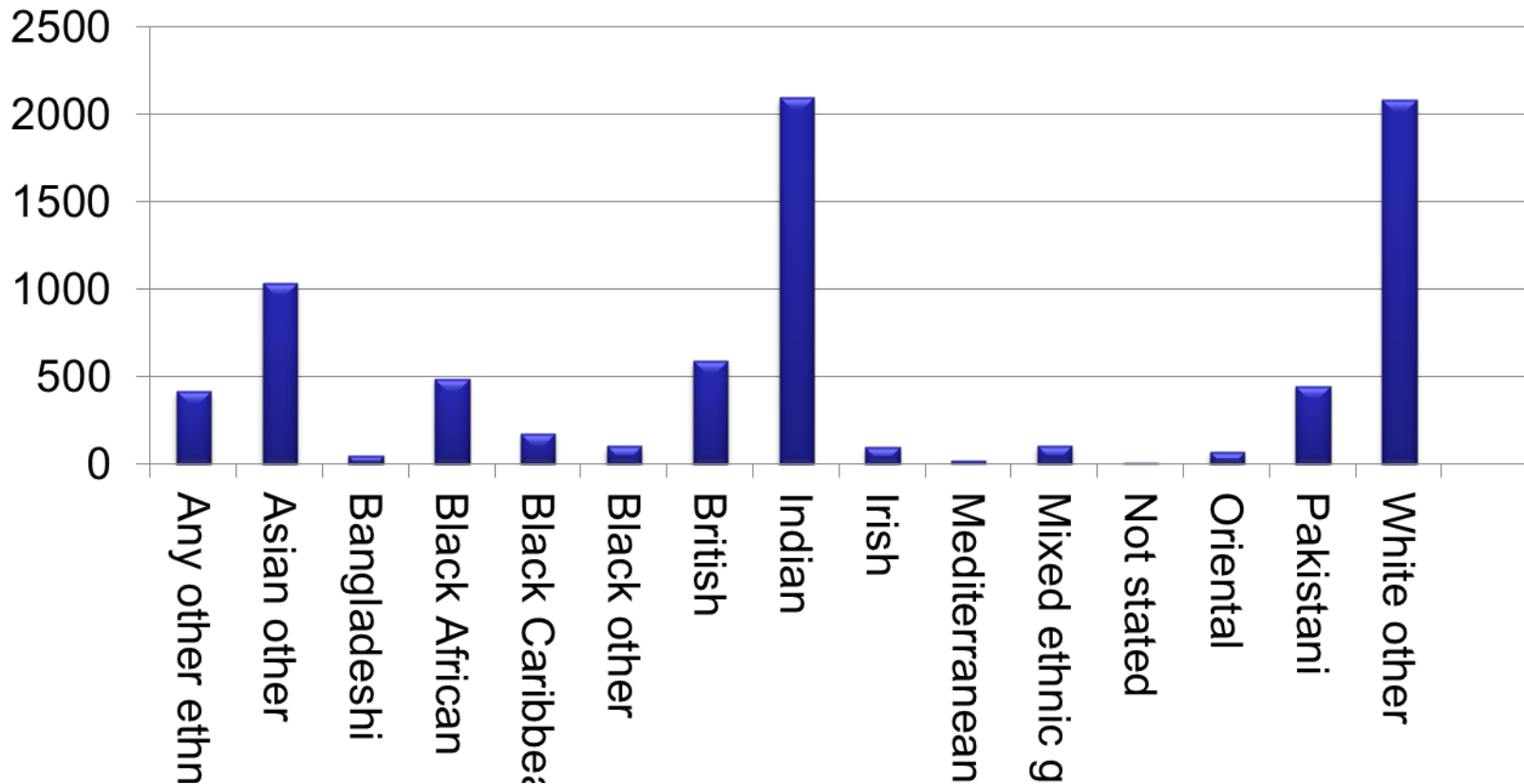
Grace Nartey

Public Health & Named
Safeguarding Lead Midwife

Demographics of all deliveries at NPH

Mar 2014 – Sept 2015

(n = 7817)



Stronger Together

London North West Healthcare



NHS Trust

Implementation

- March 2014
- Antenatal Clinics
 - Northwick Park Hospital Site
 - Central Middlesex Hospital Site
- Community Midwives – August 2014

Challenges

- Clinicians' & Midwives' beliefs and perceptions
- Women's beliefs
- Potential impact on normal birth
- Risk of anaphylaxis
- Risk of developing antibiotic resistant GBS


Implementation of GBS Programme

- Complete buy-in from all
- Staff education – FAQs
- On site training about GBS
- Supportive Clinical Guidelines and Algorithms
- Audit programme

Guidelines

Group B Streptococcal Disease Guideline:
Detection, Prevention and Management

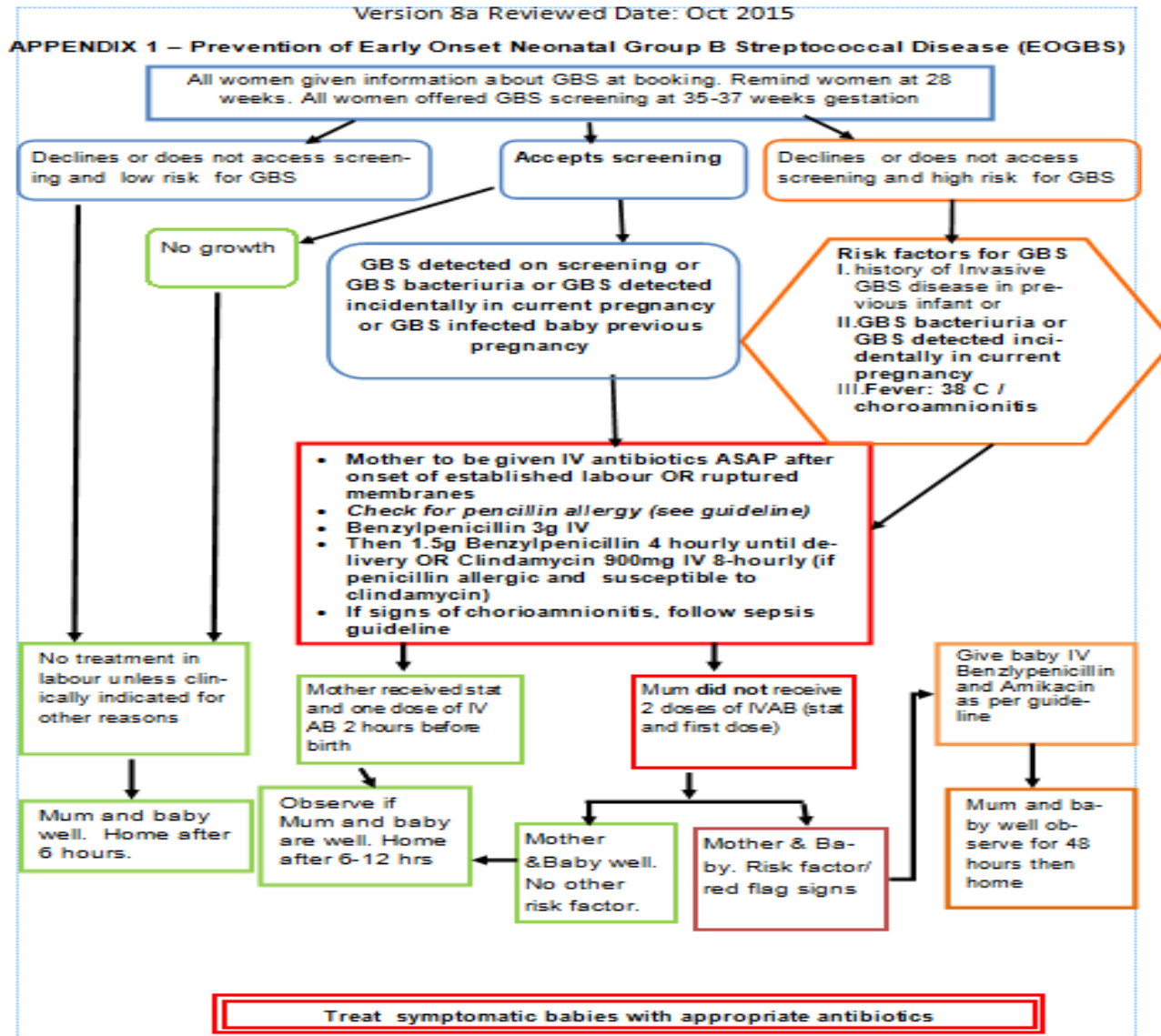
September 2015
Version 8

London North West Healthcare 

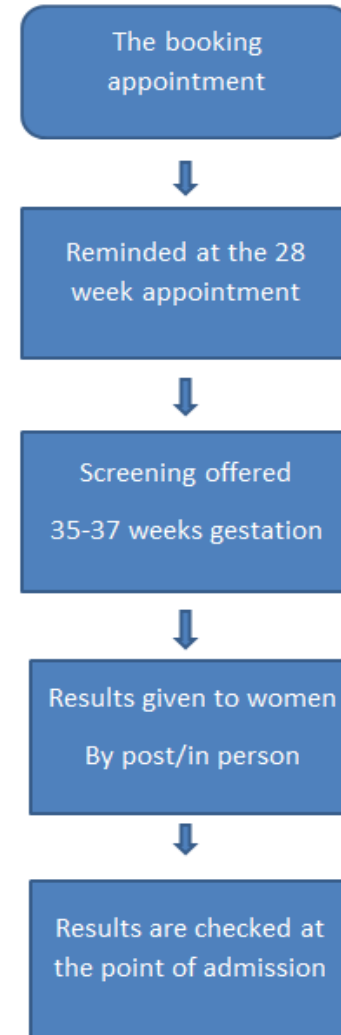
Group B Streptococcal Disease Guideline: Detection, Prevention and Management.

Policy Number	N/A
Ratified by:	Maternity Guidelines Group
Date ratified :	8 TH October 2015
Name of author:	Gopal Rao: Consultant Microbiologist Priya Khanna: Consultant Microbiologist Priyamvada Tripathi: Consultant Obstetrician Richard Nicholls :Consultant Neonatologist Grace Nartey, Public Health Lead Midwife Anne O'Reilly Senior Midwife Norma Doyle, Supervisor of Midwives
Name of ratifying committee:	Maternity Guidelines Group
Responsible Executive Director	Chief Operating Officer
Date issued:	October 2015
Review date:	October 2018
Target audience:	All staff
Equality Impact Assessment	Not Completed
Associated documents	Antenatal Care Guideline Care of Women during Labour Spontaneous Rupture of Membranes (SRM) after 34 weeks Gestation Water birth Guideline
Relevant Legislation	Data Protection Act 1998 Freedom of Information Act 2000 Health and Safety Act 1974 Human Rights Act 1998 Race Relations Amendment Act 2000 Equalities Act 2006 The Mental Capacity Act 2005 The Bribery Act 2010

Algorithm



Implementation



Booking Information for Women



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Somali

Jeermiska Streptococci Qaybta B – ka ilaali ilmahaada

Xaashidan waxaa loogu talagalay in lagugu siiyo macluumaad dheeraad ah oo ku saabsan jeermiska Streptococci Qaybta B.

Xubin ka mid ah shaqaalaha ayaa kaala hadli doono macluumaadka ku qoran xaashidan, laakiin waad haysan kartaa si aad u akhrisato mar kale.

Waa maxay jeermiska Streptococci Qaybta B?

Streptococci Qaybta B (GBS) waa jeermis illaa boqolkiiba 30 dumarka uurka leh ay ku "sidaan" marinka uu dhallaanka ka soo baxo. Jeermiska si dabiici ah ayaa halkaas looga helaa, caadi ahaan wax-yeello ama calaamado kuma lahan haweenka uurka leh. Haddii aad tahay sidaha GBS, daaweyn looma baahna illaa foosha bilaabanto.

Waa maxay infekshanka GBS oo maxay daaweyntiisu muhiim utahay?

GBS wuxuu sababi karaa infekshan, gaar ahaan ilmaha goor dhow dhashay. Haddii aan la isticmaalin daaweyn ka hortag ah, ku-dhawaad hal kunug 1000kii kunugba ayuu ku dhici karaa infekshanka GBS. Kani badanaa wuxuu sababaa infekshanka dhiigga, oof-wareen iyo/ama xanuunka meningitis. Daaweyn fiican kadib carruurta badankooda si buuxa ayey ugu bogsadaan, laakiin nasiib-darro boqolkiiba toban carruurta infekshankan uu ku dhaco way dhintaan sida oo kale ugu yaraan boqolkiiba shan kuwa cudurka ka kacay waxaa ku dhaco dhibaato caafimaad daro oo daba-dheer.

Sidee looga hortagi karaa infekshanka ilmaha ee GBS?

Waxaa war fiican ah in laga hortagi karo badanaa infekshanka GBS ee ku dhaco ilmaha goor dhow dhashay haddii antibiotiko la siiyo hooyooyinka halista u ah inay qaadaan markay ay foolanayaan.

Waa kuwee hooyooyinka halista ku jiraa?

- Hooyooyinka qabo GBS muddada uurka (lagu ogaadey baaritaanka – faafaahinta hoos ka eeg)
- Hooyooyinka oo horey u dhalay kunug leh infekshanka GBS
- Hooyooyinka leh yummad (ganthal) muddada foosha

Macluumaadka Bukanada

Group B Streptococci – protect your baby

This leaflet has been provided to give you more information about Group B Streptococci.

A member of staff will talk to you about the information in this leaflet but you may want to keep it to read again later.

What is Group B Streptococci?

Group B Streptococci (GBS) are bacteria "carried" by up to 30 per cent of pregnant women in their birth passage. The bacteria occur naturally and typically cause no harm or symptoms for pregnant women. If you do carry GBS, treatment is not required until it starts.

What is GBS infection and why is treatment important?

GBS can cause infection, particularly in new-born babies. Without preventative medication around one in every 1,000 babies would develop the GBS infection. This usually develops as a blood infection, pneumonia and/or meningitis. With prompt medical care most babies recover fully, but unfortunately ten per cent of these infected babies die and a five per cent of survivors suffer long-term problems.

How can we prevent GBS infection in babies?

The good news is that most GBS infections in new born babies can be prevented by antibiotics to mothers who are at risk when they are in labour.

Which mothers are at risk?

- Mothers who carry GBS during pregnancy (detected by testing -details below)
- Mothers who had a previous baby with the GBS infection
- Mothers who have a fever during labour
- Mothers where labour starts or waters break before 37 weeks of pregnancy
- Mothers where waters have broken for 18 or more hours before the baby is born

When and how will I know if I am at risk?

Your midwife will offer you a free test to see if you are carrying GBS at 35 - 37 weeks of pregnancy. The test will consist of taking swabs from the vagina and rectum. These swabs will be tested for GBS in a laboratory.

Information for patients

Screening

- Low vaginal and anal swabs are obtained
- GBS Sticker placed on the front of the hand-held records



Results

- Women are informed by letter/telephone
- Results are reviewed at the next clinic appointment
- Results placed in the 'antenatal' and 'labour' risk section

Acting on the Results

Positive

- If positive explain results and document and complete sticker
- Offer Intra-Partum Antibiotics Prophylaxis (IAP)
- Choice to opt in or out of GBS treatment

Negative

- If negative result document and complete sticker

Birth Options & IAP

Water birth



Elective C-Section



Not required

Labour Ward



Home Birth



Moving Forward

- GPs
- ‘Un-booked’ mothers
- Mothers not offered
- Precipitate labour
- Homebirths – some mothers choose not to have screening
- Preterm births
- Transfer of care
- Mergers and acquisitions

Thank You!

