

# Follow-up after the NNU

Southwest neonatal network parent conference

14.11.2019

# Follow-up headlines

- General Clinic
- Specialist Clinics
- Allied Health Professionals
- Bayleys III

# General follow-up

- Designated consultant follow-up
- Point of contact for neonatal concerns
  - <32 weeks gestational age at birth
  - <1.5kg
  - Significant medical concerns in perinatal period
  - 6-8 weeks after discharge, then periodically till 2 years

# General Follow-up

- Growth and nutrition
  - Growth is key!
  - Growth charts, feeding, weaning
- Medical concerns – previously known and new
  - Co-ordination of specialist reviews if needed
  - Need for any referrals or Ix
- Development
  - Hearing, vision, language, motor, behaviour
  - Reference to 'expected' or milestones
- Medication
- Tip: Bring your red book & make a list of questions

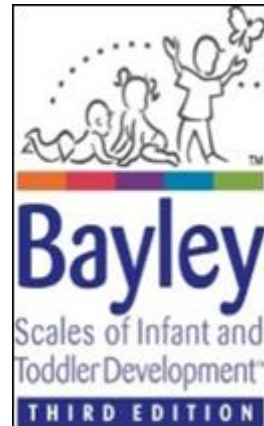
# Specialist Clinics

- Respiratory
  - Respiratory nurse for home oxygen and downloads
  - Synagis
- Cardiology – PEC or visiting consultant
- Neurology / neurosurgery
- Ophthalmology
- Audiology
- Renal / Haematology / Metabolic / Ortho / Dermatology
- TIP: DGH patients can be seen in outreach clinics

# Allied Health Professionals

- Health Visitors (wt, routines, general advice, behaviour, feeding)
- Physiotherapy – universal till walking
- Occupational therapy
  - only if required, esp round feeding, sitting and walking
- SALT – swallow focus in early years
- Dietician – especially if continued requirement for high calorie or cow's milk protein free diet
- And don't forget your GP!

# Bayley's III Scale of Toddler and Infant Development



# Bayley's – what is it?

- Structured test used internationally to assess multiple areas of infant's development
- Can be performed up to 42 months
- In UK performed between 2 year CGA & 30/12 actual age (+/-1yr)
- BPAM requirement and NICE guidance & reported to NNAP
- Multiple short tasks in succession delivered in uniform way
- One point awarded for every task achieved
- Stops when 5 tasks unsuccessful in succession
- Scores then compared to charts with ranges of scores 'expected' at that age
- Charts suggest if an infant's development is within normal limits or would benefit from intervention – NB large range of normal
- NOT AN INTELLIGENCE TEST
- Why do we do it?



# Criteria for assessment

- 30+1-32/40 plus 1.001-1.5kg – assessment at 2 years (BAPM)
- 1&2 years (NICE)
  - <30/40 +/- <1kgOr >30/40 with
  - HIE – grade 2 or 3
  - IVH grade 3 or 4 or PVL
  - Bacterial meningitis or viral encephalitis
  - Brain lesion or developmental disorder
  - Abnormal neurology on discharge examination
  - Other

# The assessment

- Parental opinion and concerns
  - Vision / squint
  - Hearing
  - Language skills
    - Understanding, speech, communication
  - Motor skills
    - Milestones, fine motor skills, gross motor skills (inc CP)
  - Social Skills
    - autisms,
  - global developmental delay and learning disability (intellectual disability)
  - Behaviour
    - Inattention, impulsivity, hyperactivity
    - Sleep, feeding

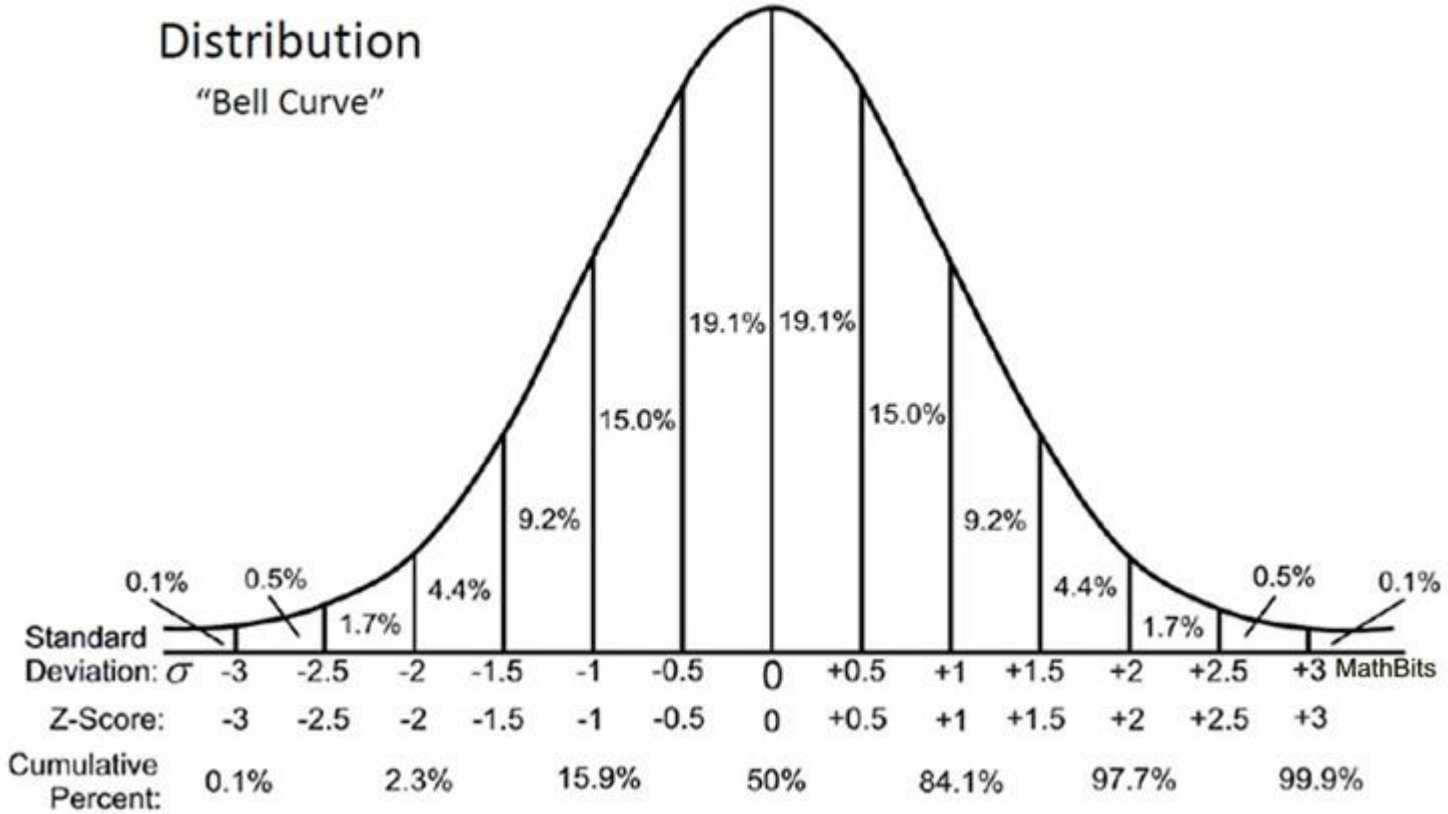


# Results

- Age corrected tables
- Composite scores
- Age equivalence
- 95% CI

# Normal

Standard Normal  
Distribution  
"Bell Curve"



# What do we do with the information

- Write a report
  - Parents, HV, GP, Key workers, Allied health professionals, Education
- Advise re supportive interventions
  - Cognitive – early years, portage
  - Language – SALT, SCOM
  - Motor – physio, OT
  - Behavioural – HV, Community paediatrician
- Report into NNAP
- Feedback to current parents on the unit

# Bayley's Top Tips

- It's long
- Don't take siblings
- Don't do it for them
- If areas are found which can be improved, see it as positive
- No other toys
- Take your red books
- It's not an intelligence test
- It's designed to find things they can't do!

QUESTIONS?