

# **Newborn Blood Spot Failsafe Solution (NBSFS) Operational Level Agreements**

## **Part C: Laboratory Users**

**Public Health England leads the NHS Screening Programmes**

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# Introduction

The use of the national Newborn Blood Spot Failsafe Solution (NBSFS) is mandated in Service Specification No.19 sections 2.2, 3.1, 3.8 & 4.0 (NHS England, 2017)<sup>1</sup>

The regular and correct use of NBSFS promotes the achievements of the nationally agreed Standards for Newborn Blood Spot Screening (NHS England 2017)<sup>2</sup>, in particular:

- Standard 1a Coverage (CCG responsibility at birth)
- Standard 2 Timely identification of babies with a null or incomplete result recorded on the child health information system`
- Standard 4 Timely sample collection
- Standard 5 Timely receipt of a sample into the newborn screening laboratory
- Standard 6 Quality of the blood spot sample
- Standard 7a Timely taking of a second blood spot sample for CF screening
- Standard 7b Timely taking of a second blood spot sample following a borderline CHT screening
- Standard 7c Timely taking of a second blood spot sample for CHT screening for preterm infant
- Standard 9 Timely processing of CHT and IMD (excluding HCU) screen positive samples
- Standard 11 Timely entry into clinical care

The NBSFS OLAs outline standards for good practice for all users of the NBSFS and are designed to promote the achievement of these objectives.

The NBSFS OLAs are published in separate documents for different groups of user:

- Part A: Maternity users
- Part B: Child health record department users
- Part C: Newborn blood spot (NBS) screening laboratory users

## Terminology

‘Daily’ denotes Monday to Friday, excluding bank holidays.

‘Maternity user’ applies to all users who access the maternity NBSFS including those working in maternity hospitals, community midwifery units, neonatal units and special care baby units.

‘Laboratory user’ applies to all users who access the laboratory NBSFS including clinical scientists and administrators.

‘Child Health Record Department user’ applies to all users who access the CHRD NBSFS.



## PART C Laboratory users

### OLA C1: Timely upload of data onto NBSFS system

Statement	NBS screening data must be uploaded at least daily onto the NBSFS system to ensure that babies who may have missed screening can be followed up with minimal delay.
Responsibility of users:	<p>Screening data must be uploaded in to the NBSFS as soon as feasible so as to mitigate the effect of records going in to an amber status (12 days of age or older) and initiating checking processes by the maternity units.</p> <p>Receipt and screening outcome updates need to be uploaded in to the NBSFS within 24 hours of its availability within the laboratory (LIMs).</p>

### OLA C2: NBSFS Card File Upload Reporting of Issues to system provider

Statement	Where NBS cards cannot be uploaded in to the NBSFS the issue must be reported to the system provider (Northgate PS) as soon as practicable and on the day the issue is encountered.
Responsibility of users:	<p>Where a significant error is encountered in uploading NBS cards into the NBSFS the laboratory must ensure the system provider technical team is notified of the issue as soon as practicable and this must occur on the day the issue is encountered (eg via the NBSFS helpdesk).</p> <p>‘Significant error’ relates to a failure in uploading the file into the NBSFS, or where a large proportion of the records in the file are reported with errors. The term ‘errors’ does not include records reported that require:</p> <ul style="list-style-type: none"><li>• Manual matching</li><li>• Manual validation</li><li>• Duplicate records</li></ul> <p>Notification to the system provider of a failure to upload (irrespective of reason) will allow for appropriate information to be provided to maternity units, advising them of the possibility of a delay in matching sample cards with babies records and therefore there may be an increase in babies records going to an amber status.</p>



### OLA C3: Checking the uploaded data on the NBSFS system

Statement	The NBS screening data upload must be checked daily to ensure that the upload has been completed successfully and any errors must be corrected.
Responsibility of users:	<p>The NBSFS provides feedback when an upload of screening data is undertaken. Currently there are two routes to uploaded screening data in to the NBSFS:</p> <ol style="list-style-type: none"><li>1) Manual upload</li><li>2) Automated upload</li></ol> <p><b>Manual upload</b> - the user uploading the screening data is responsible for reviewing the confirmation information provided by the NBSFS on completion of the upload and for ensuring action is undertaken relating to any errors reported as part of the upload.</p> <p><b>Automated upload</b> - the user receiving the electronic confirmation message (usually e-mail) provided by the NBSFS on completion of the upload is responsible for ensuring action is undertaken relating to any errors reported as part of the upload.</p> <p><b>Periods of Absence.</b> Where there is a nominated laboratory user who receives the NBSFS upload confirmation message (screen or e-mail) the laboratory must ensure adequate coverage of the notification message during periods of absence. This may necessitate:</p> <ul style="list-style-type: none"><li>• setting up a 'forwarding rule' within their e-mail system</li><li>• ensuring the notification e-mail is directed to another user</li><li>• ensuring the notification e-mail is always directed to more than one recipient</li></ul>

### OLA C4: Processing only NBS cards which are identified with the baby's NHS number<sup>2</sup>

Statement	Only NBS cards which include the baby's NHS number should be accepted and processed to maximise accuracy of the screening test.
Responsibility of users:	<p>Process (for reporting/NBSFS purposes) only NBS cards which include the baby's NHS number.</p> <p>Reject specimen (for reporting/NBSFS purposes) and request a repeat sample when the NBS card has been submitted without the NHS number included.</p>



## OLA C5: Processing NBS cards according to nationally agreed quality standards (laboratory users)<sup>2</sup>

Statement	<p>NBS cards must be processed according to the nationally agreed quality standards to maximise accuracy of the screening test.</p> <p>A good quality blood spot card has been taken at the right time, contains enough blood to perform all the tests, has not been contaminated, has data fields correctly completed, has not expired and has not been in transit for more than 14 days.</p>
Responsibility of users:	<p>Process (for reporting/NBSFS purposes) NBS cards according to nationally agreed quality standards.</p> <p>Reject (for reporting/NBSFS purposes) specimen and request a repeat sample when the NBS card has been submitted which does not meet the required standard.</p>

## OLA C6: NBSFS Manual Validation of Sample Cards

Statement	<p>NBS cards uploaded in to the NBSFS which go in to the Laboratory sites Manual Validation queue must be processed within 48 hours.</p> <p>Cards that go in to the NBSFS Manual Validation queue will not be matched with a baby's record until its validity has been assessed and confirmed by a Laboratory technician.</p>
Responsibility of users:	<p>Process NBS cards in the NBSFS Manual Validation queue within 48 hours.</p>

## OLA C7: Maintaining continuity of service (regular user away)

Statement	<p>When the regular user is away, on planned or unplanned leave, a substitute is appointed to take on NBSFS responsibilities.</p>
Responsibility of users:	<p>So that the NBSFS is checked daily, there must be cover when the regular user is away, by another authorised and competent NBSFS user.</p> <p>Ideally cover should be planned and handover given, but the user's manager should be aware of the user's NBSFS responsibilities and have arrangements in place for a substitute if leave is unplanned.</p>



## OLA C8: Maintaining continuity of service; new users

Statement	When the regular user leaves or changes role, a successor is appointed to take on NBSFS responsibilities.
Responsibility of users:	<p>The NBSFS laboratory site lead should contact the NBSFS helpdesk to terminate the access for the current user and arrange access for the new user.</p> <p>If the user leaving is the NBSFS laboratory site lead, the current site lead should, where possible, contact the NBSFS helpdesk with details of the new site lead, prior to their departure.</p>

## OLA C9: Reporting problems relating to the NBSFS system

Statement	<p>All problems with the NBSFS must be reported promptly to identify and resolve problems with the NBSFS as quickly as possible.</p> <p>Examples of system problems include: Delays in uploading data for any reason eg system failures, resourcing issues, postal problems, demographic download failures, automatic upload errors, unexplained errors in data upload, unexplained error messages.</p>
Responsibility of users:	<p>Report record problems as soon as they are identified using the record query form (RQF) which is emailed to the NBS laboratory or NBSFS helpdesk (as indicated on the form) email: NBSFS.helpdesk@nhs.net</p> <p>For urgent problems, and technical issues, telephone the NBSFS helpdesk: 0845 070 2778</p> <p>It is important to report problems, even if local solutions can be arranged, to ensure that all problems are recorded and monitored.</p> <p><b>Confidential information must not be given over non secure emails (only nhs.net can be used to send confidential and patient identifiable information such as name and NHS number).</b></p> <p>If the problem is not rectified appropriately, escalate the matter using the escalation process (OLA C10).</p> <p>Screening incidents and serious incidents related to NBSFS should also be reported using the existing incident procedures and the Screening Quality Assurance Service (SQAS) (regions) advised.</p>



## OLA C10: Reporting other problems relating to NBSFS, and escalation process

Statement	<p>Problems related to the NBSFS must be followed up promptly to identify and resolve them as quickly as possible.</p> <p>For NBSFS system problems see OLA C9. Examples of other problems include: maternity users not transferring or accepting transfers promptly, laboratories not uploading results in a timely way, CHRDs not communicating effectively, unsatisfactory response to Helpdesk enquiries.</p>			
Responsibility of users:	<p>MW administrators should first contact their NBS screening coordinator for advice.</p> <p>Laboratory administrators should first contact their laboratory director for advice.</p> <p>Minor problems and isolated events should be raised directly with the individual(s) concerned.</p> <p>Serious, persistent or unresolved problems should be managed as follows:</p>			
	<p>Problems arising from midwifery users</p> <p>Contact:</p> <p>Screening coordinator of the relevant maternity unit</p> <p>If unresolved escalate to:</p> <p>MW clinical manager (eg matron or head of midwifery)</p> <p>If unresolved escalate to:</p>	<p>Problems arising from CHRD users</p> <p>Contact:</p> <p>CHRD manager in the relevant CHRD</p> <p>If unresolved escalate to:</p>	<p>Problems arising from laboratory users</p> <p>Contact:</p> <p>Director of newborn screening in the relevant NBS laboratory</p> <p>If unresolved escalate to:</p>	<p>Problems arising from system provider (Northgate-PS)</p> <p>Contact:</p> <p>Newborn Blood Spot Failsafe Solution helpdesk NBSFS.helpdesk@nhs.net 0845 070 2778</p> <p>If unresolved escalate to:</p>
	<p>SQAS (regions)</p> <p>If unresolved escalate to:</p>			
	<p>NHS Newborn Blood Spot Screening Programme Team at PHE.screeninghelpdesk.nhs.net</p>			



## PART D Responsibility of NBSFS system provider (Northgate PS)

Statement	A detailed description of the Northgate PS service responsibilities is defined in the Newborn Blood Spot Failsafe Solution Contract, Schedule 4, Service Level Agreement (contact newborn blood spot programme team for details).
Responsibility of system provider (Northgate PS):	<p>Inform users in a timely way if there are system availability or performance problems which may affect users in line with the agreed Northgate and the Programme's SLA response and fix times. For example, a delay in the day's upload of data, or a significant problem which may lead to large numbers of screened infants appearing on the tracking page.</p> <p>Where laboratories have not uploaded data or have experienced a large number of errors in the upload, and where the laboratory notify Northgate of the issue Northgate will advise users of the issue by placing advisory information on the NBSFS login page.</p> <p>To process unmatched sample cards and match to appropriate birth records in a timely manner.</p> <p>Provide the users with information about when the daily laboratory upload in their area takes place so that users can select optimal time for using system.</p> <p>Provide data which may be accessed by SQAS and programme team for the purposes of monitoring quality.</p> <p>Ensure training materials are available and up to date.</p> <p>To generate and terminate user accounts in a timely way.</p> <p>Cascade information about significant system problems affecting users, as agreed with the programme team.</p> <p>Respond to enquiries/problems/serious incidents as agreed in the Service Level Agreement.</p> <p>To respond to complaints as specified in the Service Level Agreement.</p>



## Part E Responsibility of the NHS Newborn Blood Spot Screening Programme

Statement	<p>The NBSFS is delivered from the NHS Newborn Blood Spot Screening Programme.</p> <p>The remit and terms of reference of the NHS Newborn Blood Spot Screening Programme can be found at:  <a href="http://www.screening.nhs.uk/about">http://www.screening.nhs.uk/about</a></p>
Responsibility of NHS Newborn Blood Spot Screening Programme	<p>Report to the newborn screening programmes IT Software Delivery Board (or equivalent).</p> <p>Work with the system provider (Northgate Public Services) to provide a high quality NBSFS service.</p> <p>Monitor the quality of the service provided by the system provider.</p> <p>Monitor the support provided by the system provider including the service desk.</p> <p>Hold the system provider to account in line with contractual agreements.</p> <p>Maintain a risk register.</p> <p>Appoint a Clinical Safety Officer to oversee clinical safety.</p> <p>Develop the service in conjunction with NBSFS User Group.</p> <p>Respond to escalated issues.</p> <p>Escalate issues to National Programmes Lead (ANNB).</p> <p>Ensure training and information resources are available for users of system.</p> <p>Provide information and updates to users and other stakeholders.</p> <p>Monitor the use of the system and produce reports according to agreed criteria.</p> <p>Make available reports for Quality Assurance personnel and other stakeholders.</p>



## References

1. NHS public health functions agreement 2017-18 Service specification no.19 NHS Newborn Blood Spot Screening Programme  
<https://www.england.nhs.uk/commissioning/pub-hlth-res/> accessed 13/09/2017
2. NHS Newborn Blood Spot Screening Programme Standards (NHS England 2017)  
<http://newbornbloodspot.screening.nhs.uk/standards> accessed 13/09/2017