

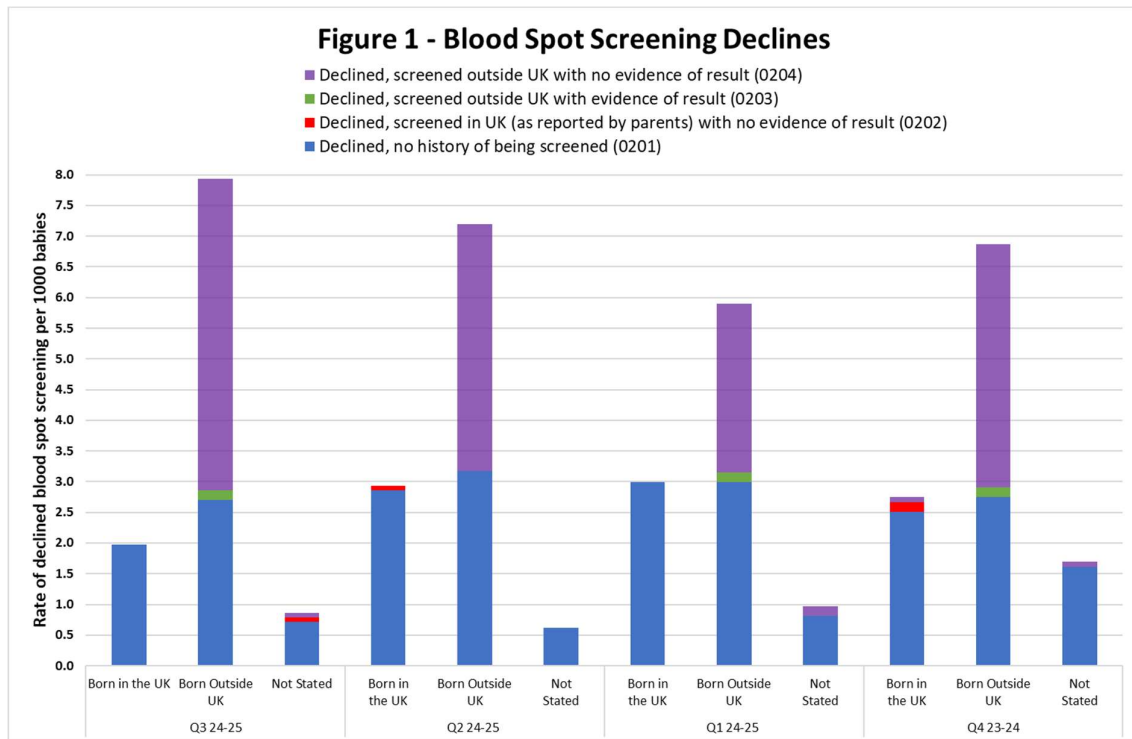
Manchester Newborn Screening Laboratory Quarterly Blood Spot Screening Report: Quarter 3 2024-25

Manchester Newborn Screening Laboratory, which serves babies born in Greater Manchester, Lancashire and South Cumbria, received 13486 blood spot samples between 1st October 2024 and 31st December 2024. This report describes performance against the NHS Newborn Blood Spot Screening Programme Standards. Full details of the standards including definitions and exclusions can be found at <https://www.gov.uk/government/publications/standards-for-nhs-newborn-blood-spot-screening>. The appendix of this document contains the data for standards 3-7 in table form.

The data for the laboratory reportable standards is presented by maternity unit/NHS trust of the sample taker. For accurate figures, please ensure the trust code is written/stamped on the blood spot card.

Declines

In Quarter 3 the laboratory received 136 notifications of declined blood spot screening. Figure 1 shows the trends in declined screens over the past year, by place of birth (born in UK or born outside of UK). The laboratory should be notified of all declines, including those for babies screened elsewhere, rather than directly notifying Child Health.



Key to colour coding

Met achievable threshold
Met acceptable threshold
Within 10% of acceptable threshold
More than 10% below acceptable threshold

Standard 3 – The proportion of blood spot cards received by the laboratory with the baby’s NHS number on a barcoded label

Acceptable: ≥ 90.0% of blood spot cards are received by the laboratory with the baby’s NHS number on a barcoded label.

Achievable: ≥ 95.0% of blood spot cards are received by the laboratory with the baby’s NHS number on a barcoded label.

Figure 2 displays performance against standard 3.

Overall, 84.9% of samples received in quarter 3 of 2024/25 had a barcoded NHS number label, which is lower than the previous quarter (86%). Of the 11 maternity units, 5 met the acceptable standard with 2 of these meeting the achievable threshold.

Standard 4 - The proportion of first blood spot samples taken on day 5

Acceptable: ≥ 90.0% of first blood spot samples are taken on day 5.

Achievable: ≥ 95.0% of first blood spot samples are taken on day 5.

Figure 3 displays performance against standard 4. Overall, 91.0% of samples received in quarter 3 of 2024/25 were collected on day 5, which is slightly lower than the previous quarter (91.5%). 7 out of the 11 maternity units met standard 4, and 4 of these met the achievable threshold.

Figure 2: Standard 3 - The proportion of blood spot cards received by the laboratory with the baby's NHS number on a barcoded label

Most recent quarter on right-hand side

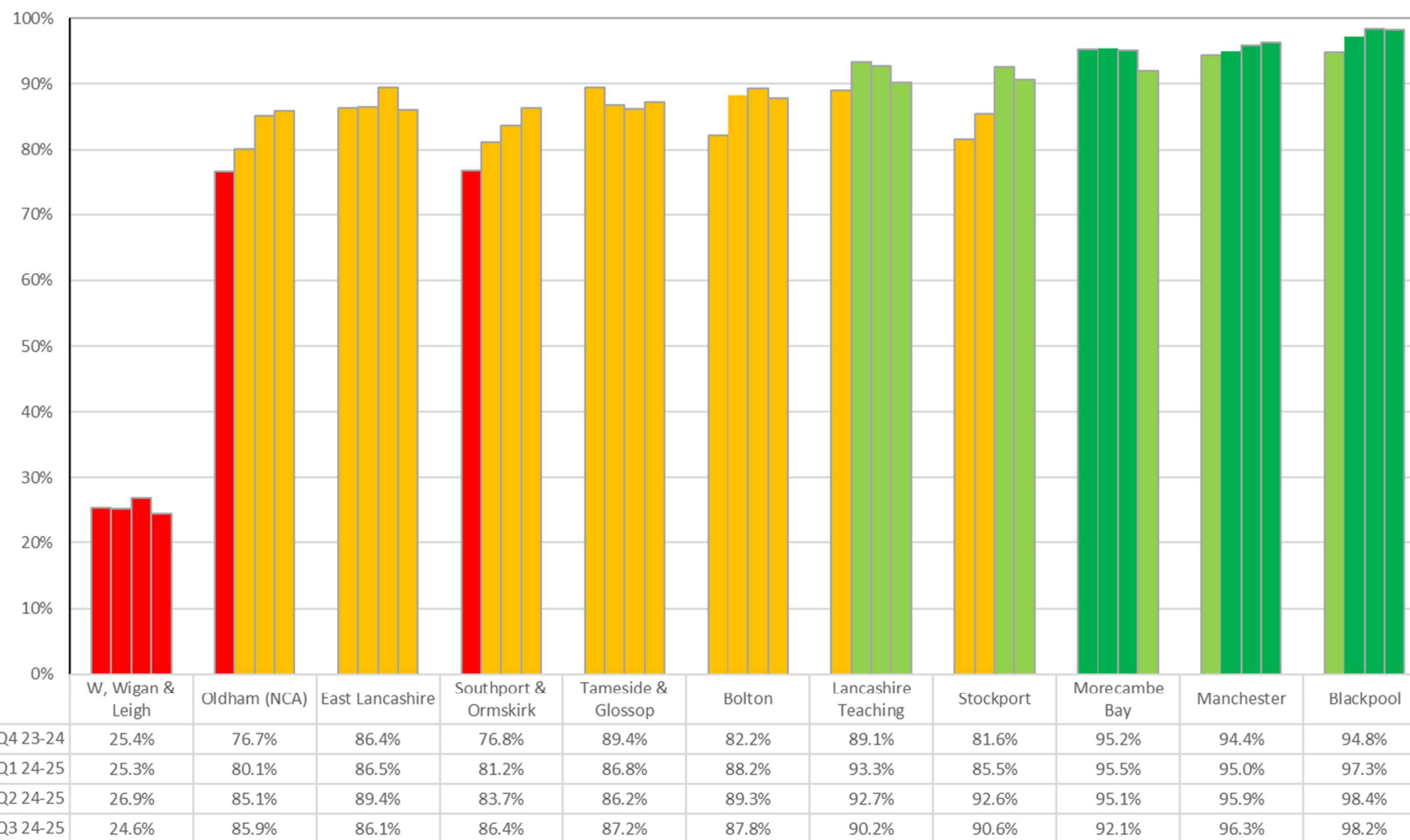


Figure 3: Standard 4 - The proportion of first blood spot samples taken on day 5

Most recent quarter on right-hand side



Standard 5 - The proportion of blood spot samples received less than or equal to 3 working days of sample collection

Acceptable: $\geq 95.0\%$ of all samples received less than or equal to 3 working days of sample collection.

Achievable: $\geq 99.0\%$ of all samples received less than or equal to 3 working days of sample collection.

Figure 4 displays performance against standard 5.

Overall, 97.9% of samples were received within 3 working days. Nine Trusts met the standard, with 4 of these reaching the achievable threshold. Performance was similar to the previous quarter (97.5% samples received within 3 working days).

Standard 6 - The proportion of first blood spot samples that require repeating due to an avoidable failure in the sampling process

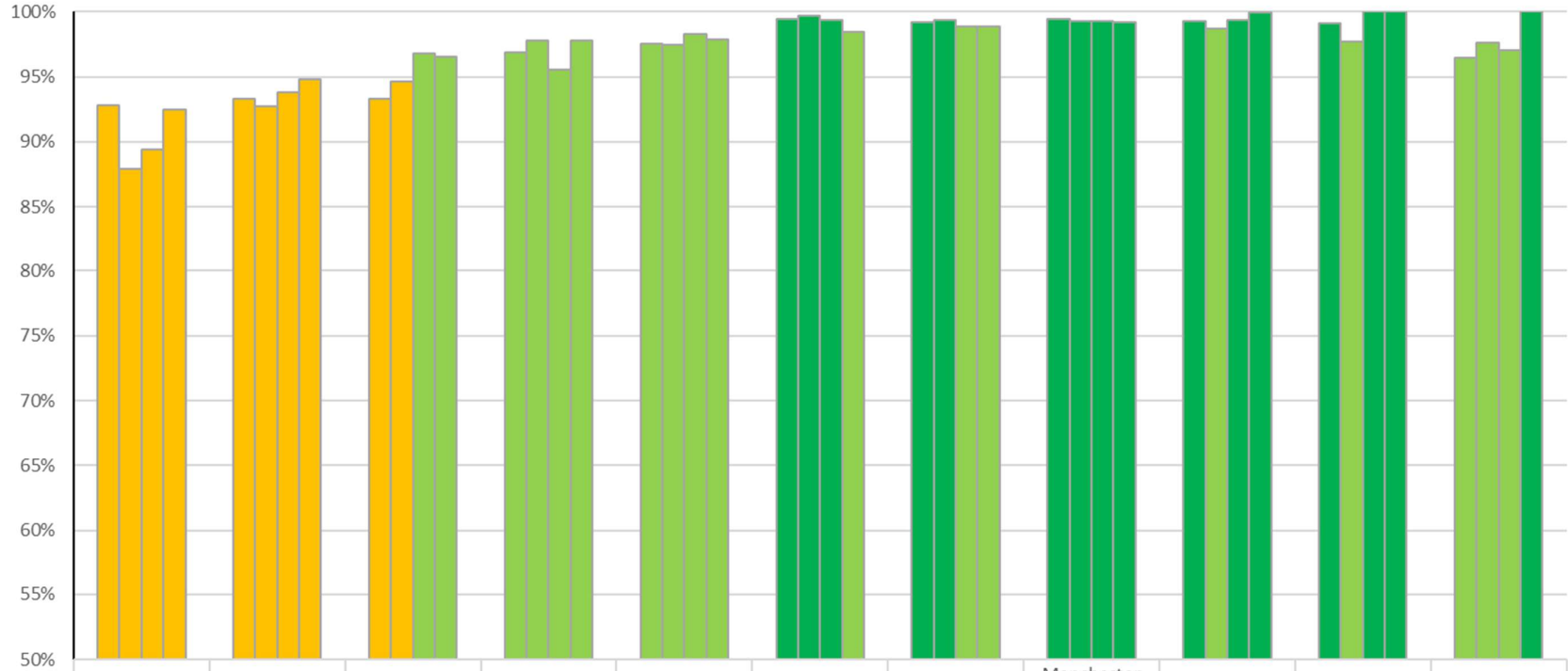
Acceptable: Avoidable repeat rate is $\leq 2.0\%$

Achievable: Avoidable repeat rate is $\leq 1.0\%$

The avoidable repeat rate for quarter 3 was 3.5%, which is slightly higher compared to quarter 2 (3.3%). The main reason for an avoidable repeat was insufficient blood, followed by a compressed/damaged sample. The performance for each trust is displayed in figure 5. Only one of the 11 Trusts met the achievable standard, with the rest falling below the acceptable standard. Figure 6 compares the avoidable repeat rate for samples collected from in-patients with samples collected from babies at home/in the community. The rate was 2.9% for babies at home (2.6% in quarter 2) and 8.7% for samples collected from in-patients (9.3% in quarter 2).

Figure 4: Standard 5 - The proportion of blood spot samples received less than or equal to 3 working days of sample collection

Most recent quarter on right-hand side



	Wrightington, Wigan and Leigh NHS FT	Southport & Ormskirk Hospital NHS Trust	Oldham (NCA)	Bolton NHS FT	Stockport NHS FT	Tameside And Glossop Integrated Care NHS FT	East Lancashire Hospitals NHS Trust	Manchester University NHS FT - SMH, RMCH, WH & NMGH	Lancashire Teaching Hospitals NHS FT	Blackpool Teaching Hospitals NHS FT	University Hospitals of Morecambe Bay NHS FT
Q4 23-24	92.8%	93.3%	93.3%	96.9%	97.6%	99.4%	99.2%	99.4%	99.3%	99.2%	96.4%
Q1 24-25	87.9%	92.8%	94.6%	97.8%	97.5%	99.7%	99.3%	99.3%	98.7%	97.7%	97.6%
Q2 24-25	89.4%	93.8%	96.8%	95.5%	98.3%	99.3%	98.8%	99.3%	99.4%	100.0%	97.0%
Q3 24-25	92.4%	94.8%	96.5%	97.8%	97.9%	98.5%	98.9%	99.2%	99.9%	100.0%	100.0%

Figure 5: Standard 6 - The proportion of first blood spot samples that require repeating due to an avoidable failure in the sampling process by Trust

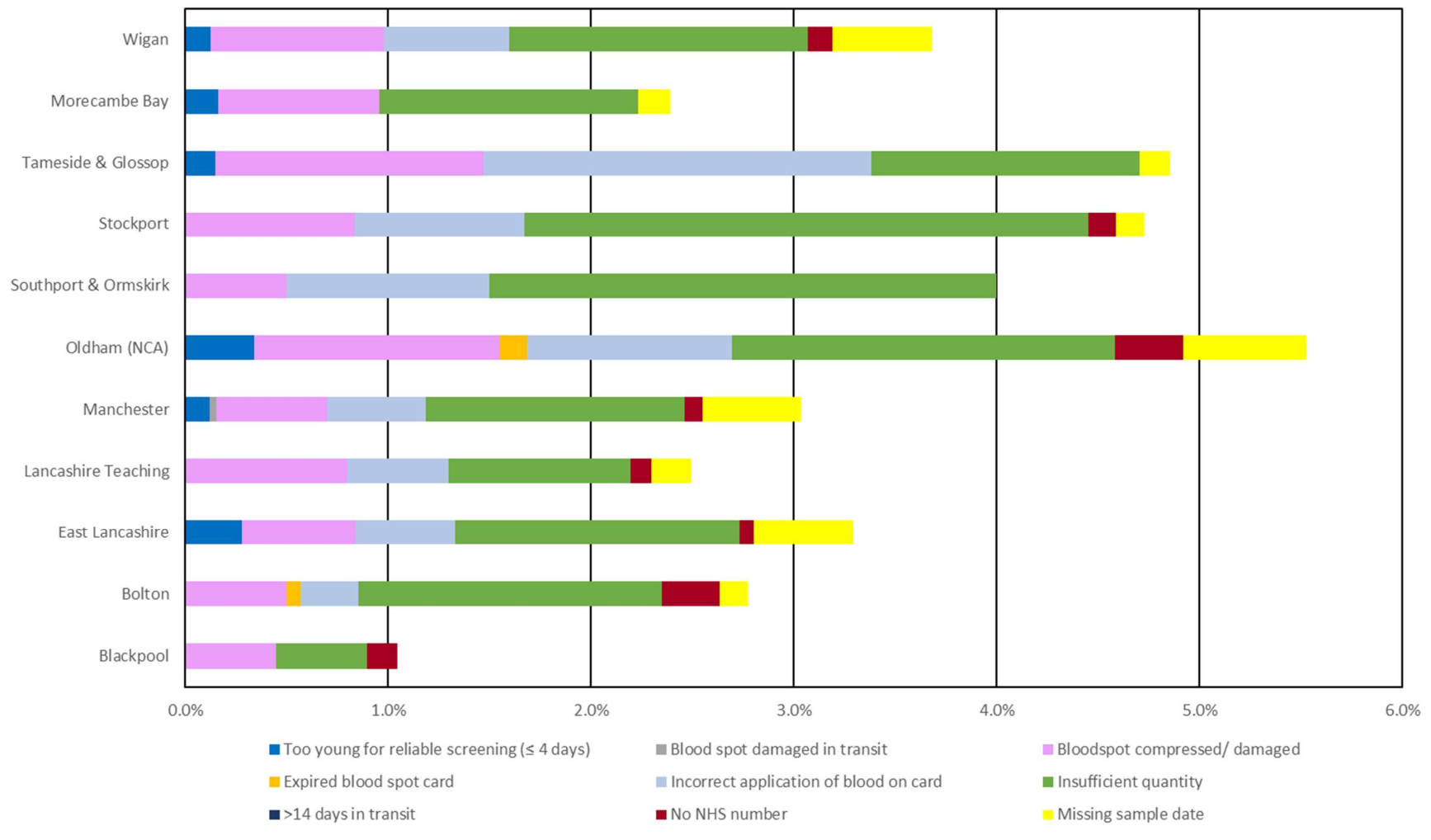
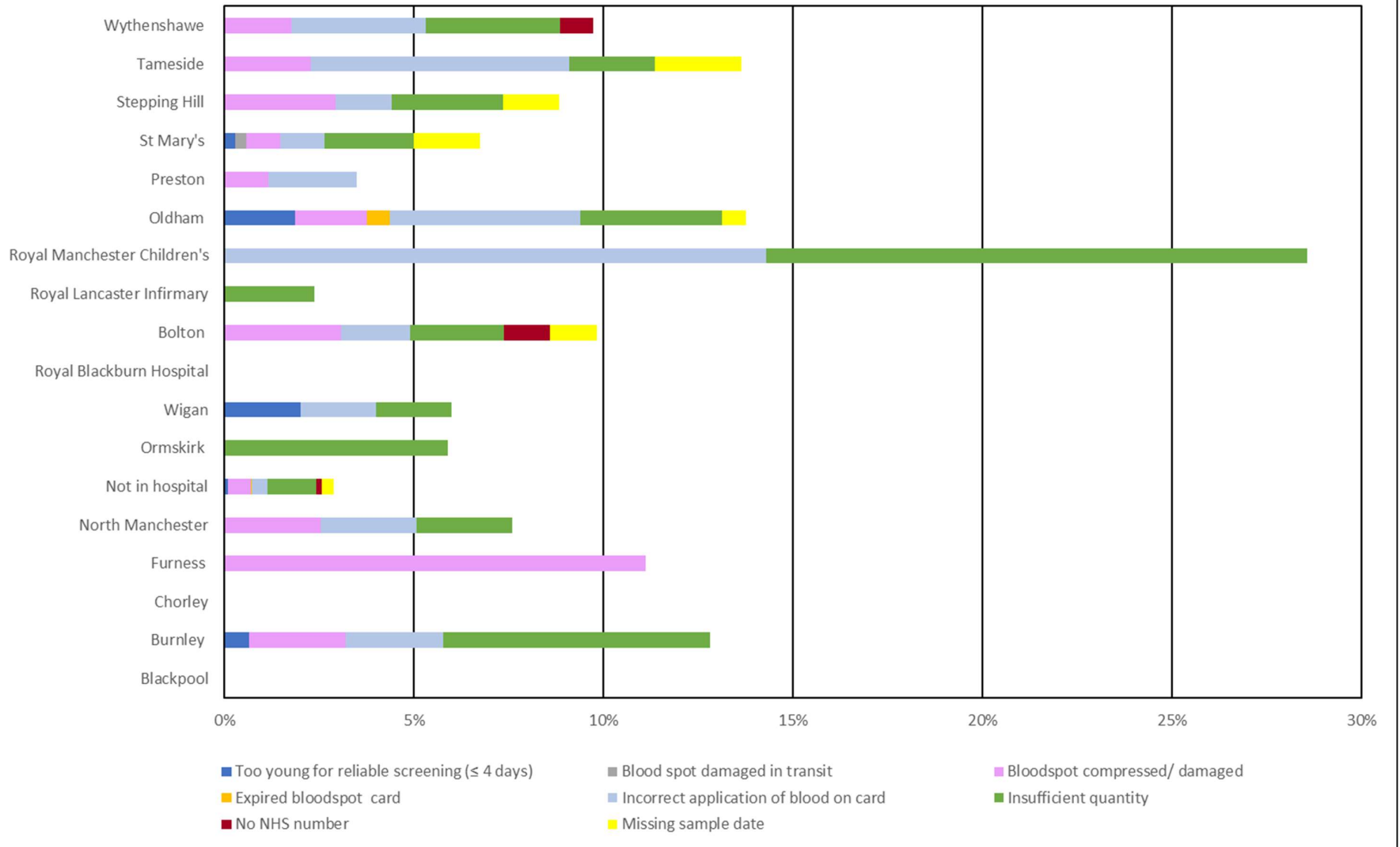


Figure 6: Standard 6 - Avoidable repeats for in-patients vs community



Q3 24-25 Table 1 - Summary of Performance				
Trust	Standard 3	Standard 4	Standard 5	Standard 6
Blackpool Teaching Hospitals NHS FT	98.2%	93.9%	100%	1.0%
Bolton NHS FT	87.8%	90.7%	97.8%	2.8%
East Lancashire Hospitals NHS Trust	86.1%	88.4%	98.9%	3.3%
Lancashire Teaching Hospitals NHS FT	90.2%	93.4%	99.9%	2.5%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	96.3%	95.2%	99.2%	3.0%
Oldham (NCA)	85.9%	87.9%	96.5%	5.5%
Southport & Ormskirk Hospital NHS Trust	86.4%	89.5%	94.8%	4.0%
Stockport NHS FT	90.6%	95.1%	97.9%	4.7%
Tameside And Glossop Integrated Care NHS FT	87.2%	89.3%	98.5%	4.9%
University Hospitals of Morecambe Bay NHS FT	92.1%	96.0%	100%	2.4%
Wrightington, Wigan and Leigh NHS FT	24.6%	95.8%	92.4%	3.7%

Standard 7a - The proportion of second blood spots for raised IRT taken on day 21 to day 24

Acceptable: ≥ 80% of second blood spot samples taken on day 21 to day 24

Achievable: ≥ 90% of second blood spot samples taken on day 21 to day 24

During quarter 3 there were 4 repeats for raised IRT (CF inconclusive). Of these, 100% were collected on day 21-24. CF inconclusive repeats are performed by Screening Link Health Visitors. The data is presented by Maternity Unit in table 2.

Quarter 3 204-25 - Standard 7a				
Maternity Unit	Age at collection of CF repeat		Total	% collected day 21-24
	21	22		
Manchester University NHS FT - SMH, RMCH, WH, NMGH	2		2	100%
Oldham (NCA)		1	1	100%
Stockport NHS FT	1		1	100%
Total	3	1	4	100%

Standard 7b - The proportion of second blood spot samples for borderline TSH taken between 7 and 10 calendar days after the initial borderline sample

Acceptable: ≥ 80.0% of repeat blood spot samples taken as defined

Achievable: ≥ 90.0% of repeat blood spot samples taken as defined

During quarter 3 there were 31 repeats for borderline TSH (CHT). Of these, 84% were collected 7-10 days after the original sample. Table 3 displays the information by Trust.

Quarter 3 204-25 - Standard 7b									
Trust	Number of days between original							Total	% collected 7-10 days after original sample
	7	8	9	10	11	12	17		
Bolton NHS FT				1		1		2	50%
East Lancashire Hospitals NHS Trust	2	1	1					4	100%
Lancashire Teaching Hospitals NHS FT	2			1	1			4	75%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	5		3					8	100%
Oldham (NCA)	2		1			1	1	5	60%
Stockport NHS FT		2	1		1			4	75%
Tameside And Glossop Integrated Care NHS FT		1		2				3	100%
Wrightington, Wigan and Leigh NHS FT			1					1	100%
Grand Total	11	4	7	4	2	2	1	31	84%

Standard 7c - The proportion of CHT pre-term repeats collected on day 28 or at discharge

Acceptable: ≥ 75.0% of repeat blood spot samples taken as defined

Achievable: ≥ 85.0% of repeat blood spot samples taken as defined

During quarter 3, 122 CHT pre-term repeats were received. Performance by trust is displayed in table 4. 81% were collected on day 28 or at discharge, 16% were collected after day 28.

Quarter 3 204-25 - Standard 7c					
Trust	Number of Pre-term CHT second samples collected:			Total	% Prem repeats collected on day 28 or at discharge
	EARLY	ON-TIME	LATE		
Blackpool Teaching Hospitals NHS FT		7	1	8	88%
Bolton NHS FT		11	4	15	73%
East Lancashire Hospitals NHS Trust	2	9	2	13	69%
Health Visitor		1		1	100%
Lancashire Teaching Hospitals NHS FT		12	2	14	86%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	1	28	3	32	88%
Oldham (NCA)		17	4	21	81%
Stockport NHS FT		6		6	100%
Tameside And Glossop Integrated Care NHS FT		2		2	100%
University Hospitals of Morecambe Bay NHS FT		4		4	100%
Wrightington, Wigan and Leigh NHS FT	1	2	3	6	33%
Grand Total	4	99	19	122	81%

Standard 9 - Timely processing of CHT and IMD (excluding HCU) screen positive samples

Acceptable: 100% of babies with a positive screening result (excluding HCU) have a clinical referral initiated within 3 working days of sample receipt

There were 9 screen positive samples for CHT and 3 for IMD in quarter 3. All were referred within 3 working days of sample receipt.

Standard 11 - Timely entry into clinical care

Data for standard 11 is displayed in table 5.

Table 5: Standard 11						
Condition	Criteria	Thresholds	Number of babies seen by specialist services by condition specific standard	Number of babies referred	Percentage seen by specialist services by condition specific standard	Comments
IMDs (excluding HCU)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	3	3	100%	1 x PKU, 2 x MCAD
CHT (suspected on first sample)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	9	9	100%	
CHT (suspected on repeat following borderline TSH)	Attend first clinical appointment by 21 days of age	Acceptable: 100%	4	5	80%	1 baby seen at day 23 (repeat sample collected 12 days after 1st sample)
CF (2 CFTR mutations detected)	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	0	0	0%	
HCU	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	0	0	0%	
CF (1 or no CFTR mutation detected)	Attend first clinical appointment by 35 days of age	Attend first clinical appointment by 35 days of age	0	0	0%	
SCD	Attend first clinical appointment by 90 days of age	Attend first clinical appointment by 90 days of age	7	7	100%	4 babies have been excluded as they have not yet reached 90 days of age.

Incidents

Details of incidents which have been referred to QA, either detected by the laboratory or occurred at MFT

Incident Number	Incident Date	Incident Severity	Incident Harm	Summary of incident	Further details	MFT or external	Lab/ Ward/ Maternity Unit	Local Area Team	QA informed
2567996	18/10/24	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated on movement in baby	MFT	Bolton Health Visitors	Greater Manchester	Yes
2571364	29/10/24	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated on movement in baby	MFT	Bolton Health Visitors	Greater Manchester	Yes

Appendix

Quarter 3 2024-25: Standard 3							
Trust	Number of all samples (including repeats)	Number of blood spot cards including baby's NHS number	Number of blood spot cards including ISB label barcoded baby's NHS number	Unreadable Barcodes	Percentage of all blood spot cards including babies' NHS number	Percentage of all blood spot cards including ISB bar-coded babies' NHS number	Percentage of all Unreadable Barcodes
Blackpool Teaching Hospitals NHS FT	684	683	672	0	99.9%	98.2%	0.0%
Bolton NHS FT	1613	1609	1416	57	99.8%	87.8%	3.5%
East Lancashire Hospitals NHS Trust	1553	1552	1337	8	99.9%	86.1%	0.5%
Health Visitor	278	277	8	0	99.6%	2.9%	0.0%
Lancashire Teaching Hospitals NHS FT	1044	1043	942	23	99.9%	90.2%	2.2%
Manchester University NHS FT - SMH & RMCH & WH & NMGH	3520	3517	3390	25	99.9%	96.3%	0.7%
Not Stated	9	9	6	0	100.0%	66.7%	0.0%
Oldham (NCA)	1598	1593	1373	9	99.7%	85.9%	0.6%
Southport & Ormskirk Hospital NHS Trust	213	213	184	5	100.0%	86.4%	2.3%
Stockport NHS FT	757	756	686	31	99.9%	90.6%	4.1%
Tameside And Glossop Integrated Care NHS FT	719	719	627	15	100.0%	87.2%	2.1%
University Hospitals of Morecambe Bay NHS FT	643	643	592	2	100.0%	92.1%	0.3%
Wrightington, Wigan and Leigh NHS FT	855	854	210	505	99.9%	24.6%	59.1%
Grand Total	13486	13468	11443	680	99.9%	84.9%	5.0%

Quarter 3 2024-25: Standard 4												
Trust	Number of first samples taken on or before day 4	5	6	7	8	9+	4 or earlier	5	6	7	8	9 or later
Blackpool Teaching Hospitals NHS FT	0	630	30	5	0	6	0.0%	93.9%	4.5%	0.7%	0.0%	0.9%
Bolton NHS FT	1	1273	88	18	7	16	0.1%	90.7%	6.3%	1.3%	0.5%	1.1%
East Lancashire Hospitals NHS Trust	5	1259	117	16	5	22	0.4%	88.4%	8.2%	1.1%	0.4%	1.5%
Health Visitor	0	7	0	1	0	203	0.0%	3.3%	0.0%	0.5%	0.0%	96.2%
Lancashire Teaching Hospitals NHS FT	0	934	48	8	4	6	0.0%	93.4%	4.8%	0.8%	0.4%	0.6%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3	3131	105	16	7	26	0.1%	95.2%	3.2%	0.5%	0.2%	0.8%
Not Stated	0	3	1	0	0	0	0.0%	75.0%	25.0%	0.0%	0.0%	0.0%
Oldham (NCA)	6	1298	124	20	5	23	0.4%	87.9%	8.4%	1.4%	0.3%	1.6%
Southport & Ormskirk Hospital NHS Trust	1	179	14	4	0	2	0.5%	89.5%	7.0%	2.0%	0.0%	1.0%
Stockport NHS FT	0	684	31	3	0	1	0.0%	95.1%	4.3%	0.4%	0.0%	0.1%
Tameside And Glossop Integrated Care NHS FT	1	607	54	7	1	10	0.1%	89.3%	7.9%	1.0%	0.1%	1.5%
University Hospitals of Morecambe Bay NHS FT	1	602	18	2	1	3	0.2%	96.0%	2.9%	0.3%	0.2%	0.5%
Wrightington, Wigan and Leigh NHS FT	1	778	21	2	2	8	0.1%	95.8%	2.6%	0.2%	0.2%	1.0%
Grand Total	19	11385	651	102	32	326	0.2%	91.0%	5.2%	0.8%	0.3%	2.6%

Quarter 3 2024-25: Standard 5							
Trust	Number of samples received in 3 or fewer working days of sample being taken	Number of samples received in 4 or fewer working days of sample being taken	Number of samples received in 5 or more working days of sample being taken	Total number of samples received	Percentage of samples received by laboratories in 3 or fewer working days of sample being taken	Percentage of samples received by laboratories in 4 or fewer working days of sample being taken	Percentage of samples received by laboratories on or after 5 working days of sample being taken
Blackpool Teaching Hospitals NHS FT	684	684	0	684	100.0%	100.0%	0.0%
Bolton NHS FT	1439	1463	9	1472	97.8%	99.4%	0.6%
East Lancashire Hospitals NHS Trust	1471	1477	11	1488	98.9%	99.3%	0.7%
Health Visitor	191	201	26	227	84.1%	88.5%	11.5%
Lancashire Teaching Hospitals NHS FT	1036	1036	1	1037	99.9%	99.9%	0.1%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3407	3424	12	3436	99.2%	99.7%	0.3%
Not Stated	4	4	5	9	44.4%	44.4%	55.6%
Oldham (NCA)	1518	1560	13	1573	96.5%	99.2%	0.8%
Southport & Ormskirk Hospital NHS Trust	202	209	4	213	94.8%	98.1%	1.9%
Stockport NHS FT	740	752	4	756	97.9%	99.5%	0.5%
Tameside And Glossop Integrated Care NHS FT	707	713	5	718	98.5%	99.3%	0.7%
University Hospitals of Morecambe Bay NHS FT	642	642	0	642	100.0%	100.0%	0.0%
Wrightington, Wigan and Leigh NHS FT	783	810	37	847	92.4%	95.6%	4.4%
Grand Total	12824	12975	127	13102	97.9%	99.0%	1.0%

Quarter 3 2024-25: Standard 6 by Trust														
Status code and description of avoidable repeat	Blackpool Teaching Hospitals NHS FT	Bolton NHS FT	East Lancashire Hospitals NHS Trust	Health Visitor	Lancashire Teaching Hospitals NHS FT	Manchester University NHS FT - SMH & RMCH & WH & NMGH	Not Stated	Oldham (NCA)	Southport & Ormskirk Hospital NHS Trust	Stockport NHS FT	Tameside And Glossop Integrated Care NHS FT	University Hospitals of Morecambe Bay NHS FT	Wrightington, Wigan and Leigh NHS FT	Grand Total
0301: too young for reliable screening (≤ 4 days)	0	0	4	0	0	4	0	5	0	0	1	1	1	16
0302: too soon after transfusion (<72 hours)	0	3	1	0	2	2	0	0	0	1	0	0	0	9
0303: insufficient sample	3	21	20	6	9	42	0	28	5	20	9	8	12	183
0304: unsuitable sample (blood quality): incorrect blood application	0	4	7	8	5	16	0	15	2	6	13	0	5	81
0305: unsuitable sample (blood quality): compressed/damaged	3	7	8	2	8	18	0	18	1	6	9	5	7	92
0306: Unsuitable sample: day 0 and day 5 on same card	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0307: unsuitable sample for CF: possible faecal contamination	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0308: unsuitable sample: NHS number missing/not accurately recorded	1	4	1	1	1	3	0	5	0	1	0	0	1	18
0309: unsuitable sample: date of sample missing/not accurately recorded	0	2	7	3	2	16	0	9	0	1	1	1	4	46
0310: unsuitable sample: date of birth not accurately matched	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0311: unsuitable sample: expired card used	0	1	0	0	0	0	0	2	0	0	0	0	0	3
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	1	0	0	0	0	0	0	0	0	0	1
0313: unsuitable sample: damaged in transit	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Number of Avoidable Repeat Requests	7	39	47	21	25	100	0	82	8	34	33	15	30	441
Number of first samples received/ babies tested	670	1405	1428	150	1002	3294	4	1484	200	719	680	627	815	12478
Avoidable Repeat Requests Rate	1.0%	2.8%	3.3%	14.0%	2.5%	3.0%	0.0%	5.5%	4.0%	4.7%	4.9%	2.4%	3.7%	3.5%

Transfusion Repeats are not included in the Avoidable Repeat calculation

Quarter 3 2024-25: Standard 6 by Current Hospital																			
Status code and description of avoidable repeat	Blackpool Victoria Hospital	Burnley General Hospital	Chorley & South Ribble Hospital	Furness General Hospital	North Manchester General Hospital	Not in hospital	Ormskirk & District General	Royal Albert Edward Infirmary	Royal Blackburn Hospital	Royal Bolton Hospital	Royal Lancaster Infirmary	Royal Manchester Childrens Hospital	Royal Oldham Hospital	Royal Preston Hospital	St Mary's Hospital	Stepping Hill Hospital	Tameside General Hospital	Wythenshawe Hospital	Grand Total
0301: too young for reliable screening (≤ 4 days)	0	1	0	0	0	10	0	1	0	0	0	0	3	0	1	0	0	0	16
0302: too soon after transfusion (<72 hours)	0	1	0	0	0	0	0	0	0	3	0	0	0	2	2	1	0	0	9
0303: insufficient sample	0	11	0	0	2	141	1	1	0	4	1	1	6	0	8	2	1	4	183
0304: unsuitable sample (blood quality): incorrect blood application	0	4	0	0	2	48	0	1	0	3	0	1	8	2	4	1	3	4	81
0305: unsuitable sample (blood quality): compressed/damaged	0	4	0	2	2	67	0	0	0	5	0	0	3	1	3	2	1	2	92
0306: Unsuitable sample: day 0 and day 5 on same card	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0307: unsuitable sample for CF: possible faecal contamination	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0308: unsuitable sample: NHS number missing/not accurately recorded	0	0	0	0	0	15	0	0	0	2	0	0	0	0	0	0	0	1	18
0309: unsuitable sample: date of sample missing/not accurately recorded	0	0	0	0	0	35	0	0	0	2	0	0	1	0	6	1	1	0	46
0310: unsuitable sample: date of birth not accurately matched	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0311: unsuitable sample: expired card used	0	0	0	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	3
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
0313: unsuitable sample: damaged in transit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Number of Avoidable Repeat Requests	0	20	0	2	6	319	1	3	0	16	1	2	22	3	23	6	6	11	441
Number of first samples received/ babies tested	62	156	0	18	79	11072	17	50	0	163	42	7	160	86	341	68	44	113	12478
Avoidable Repeat Requests Rate	0.0%	12.8%	0.0%	11.1%	7.6%	2.9%	5.9%	6.0%	0.0%	9.8%	2.4%	28.6%	13.8%	3.5%	6.7%	8.8%	13.6%	9.7%	3.5%

Transfusion Repeats are not included in the Avoidable Repeat calculation