

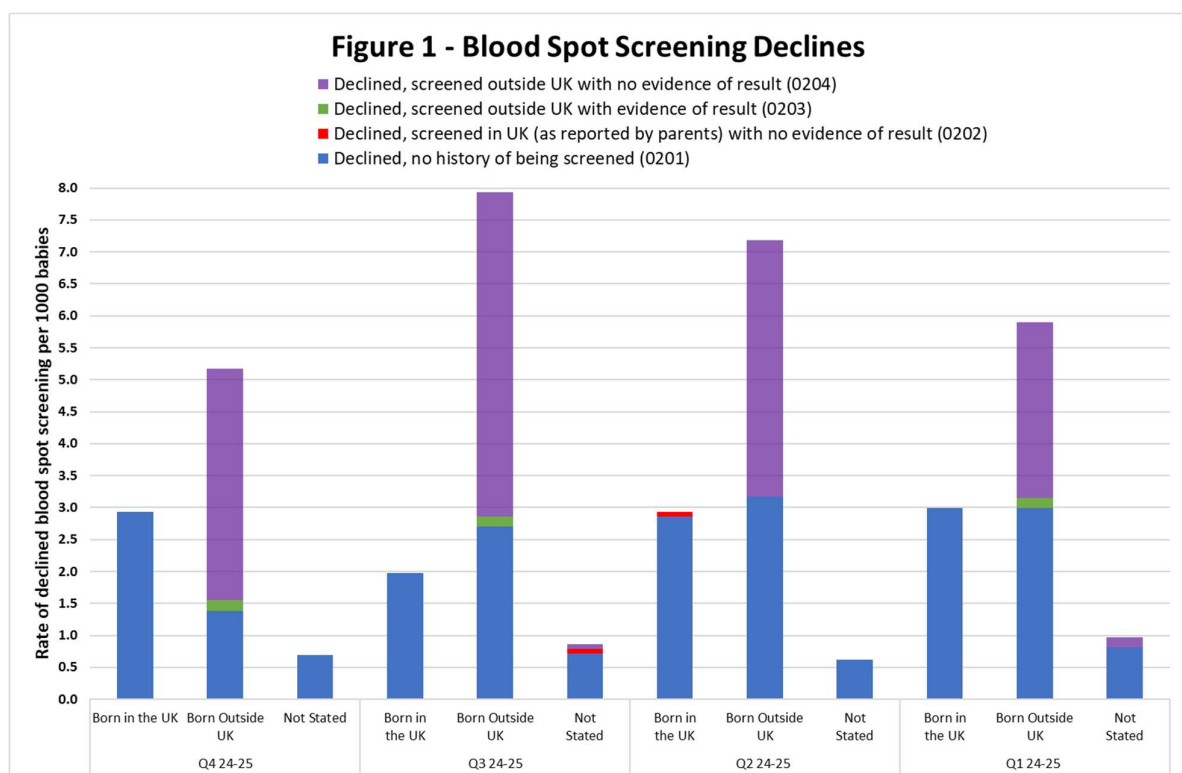
Manchester Newborn Screening Laboratory Quarterly Blood Spot Screening Report: Quarter 4 2024-25

Manchester Newborn Screening Laboratory, which serves babies born in Greater Manchester, Lancashire and South Cumbria, received 12466 blood spot samples between 1st January 2025 and 31st March 2025. 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 4 the laboratory received 102 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: $\geq 90.0\%$ of blood spot cards are received by the laboratory with the baby's NHS number on a barcoded label.

Achievable: $\geq 95.0\%$ 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, 84.4% of samples received in quarter 4 of 2024/25 had a barcoded NHS number label, which is similar to the previous quarter (84.9%). 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: $\geq 90.0\%$ of first blood spot samples are taken on day 5.

Achievable: $\geq 95.0\%$ of first blood spot samples are taken on day 5.

Figure 3 displays performance against standard 4. Overall, 91.7% of samples received in quarter 4 of 2024/25 were collected on day 5, which is slightly higher than the previous quarter (91.0%). 9 out of the 11 maternity units met standard 4, and 4 of these met the achievable threshold.

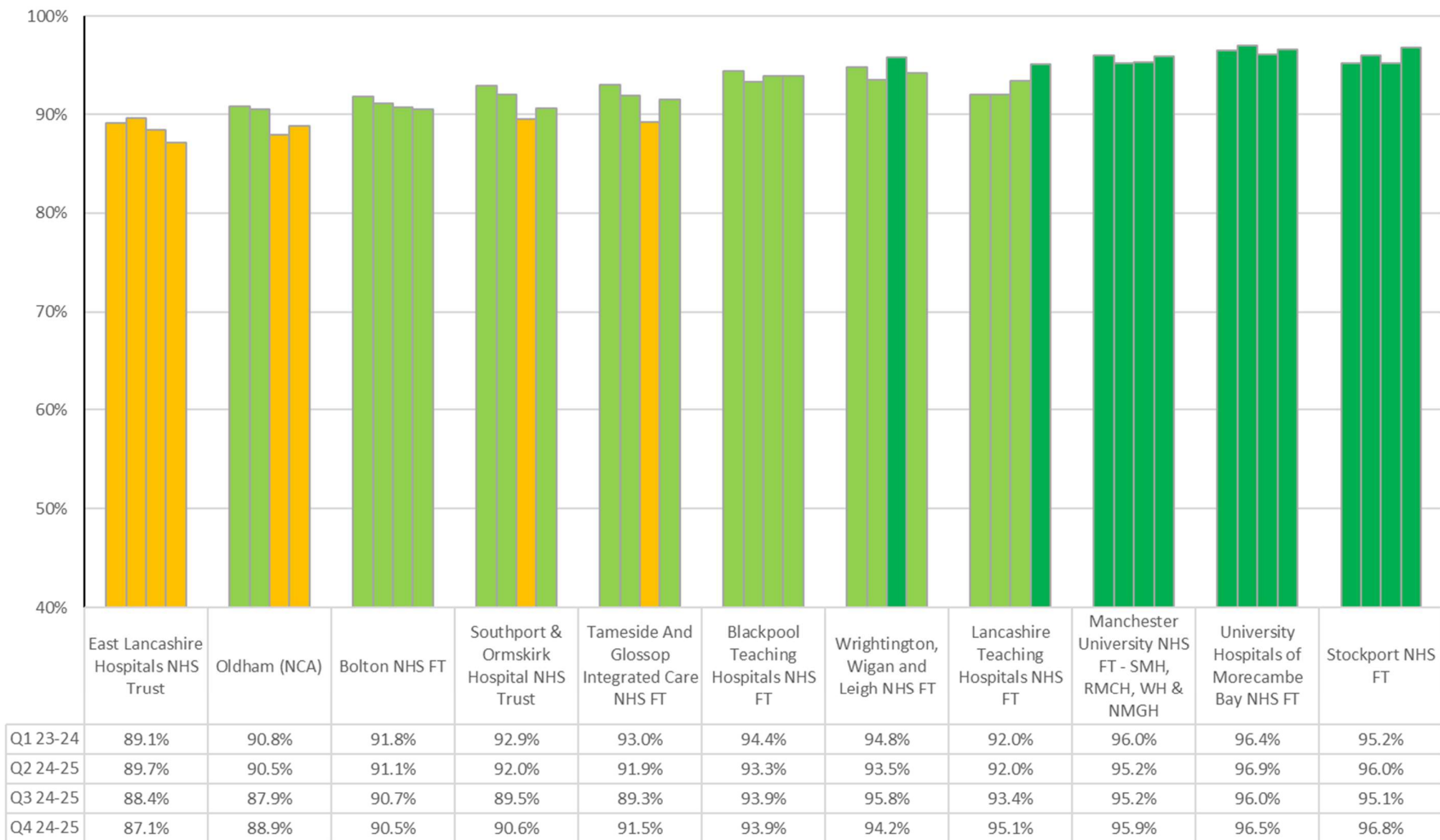
Figure 2: Standard 3 - The proportion of blood spot cards received by the laboratory with the baby's NHS number on a barcoded label

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, 97.8% of samples were received within 3 working days. Nine Trusts met the standard, with 5 of these reaching the achievable threshold. Performance was similar to the previous quarter (97.9% 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 4 was 3.2%, which is slightly lower compared to quarter 3 (3.5%). 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 two of the 11 Trusts met the acceptable 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 2.5% for babies at home (2.9% in quarter 3) and 8.5% for samples collected from in-patients (8.7% in quarter 3).

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

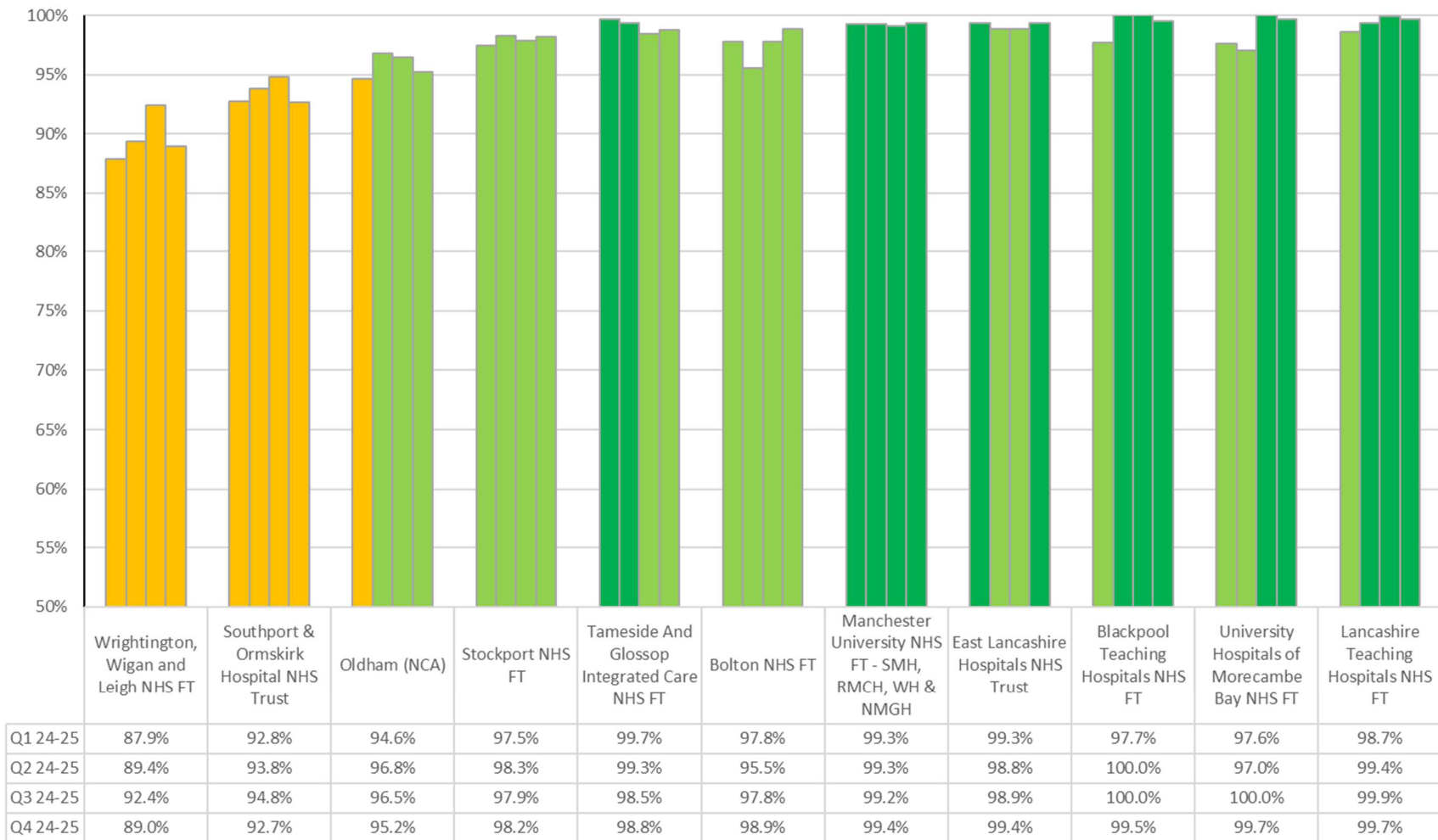


Figure 5: Standard 6 - The proportion of first blood spot samples that require repeating due to an avoidable failure in the sampling process by Trust

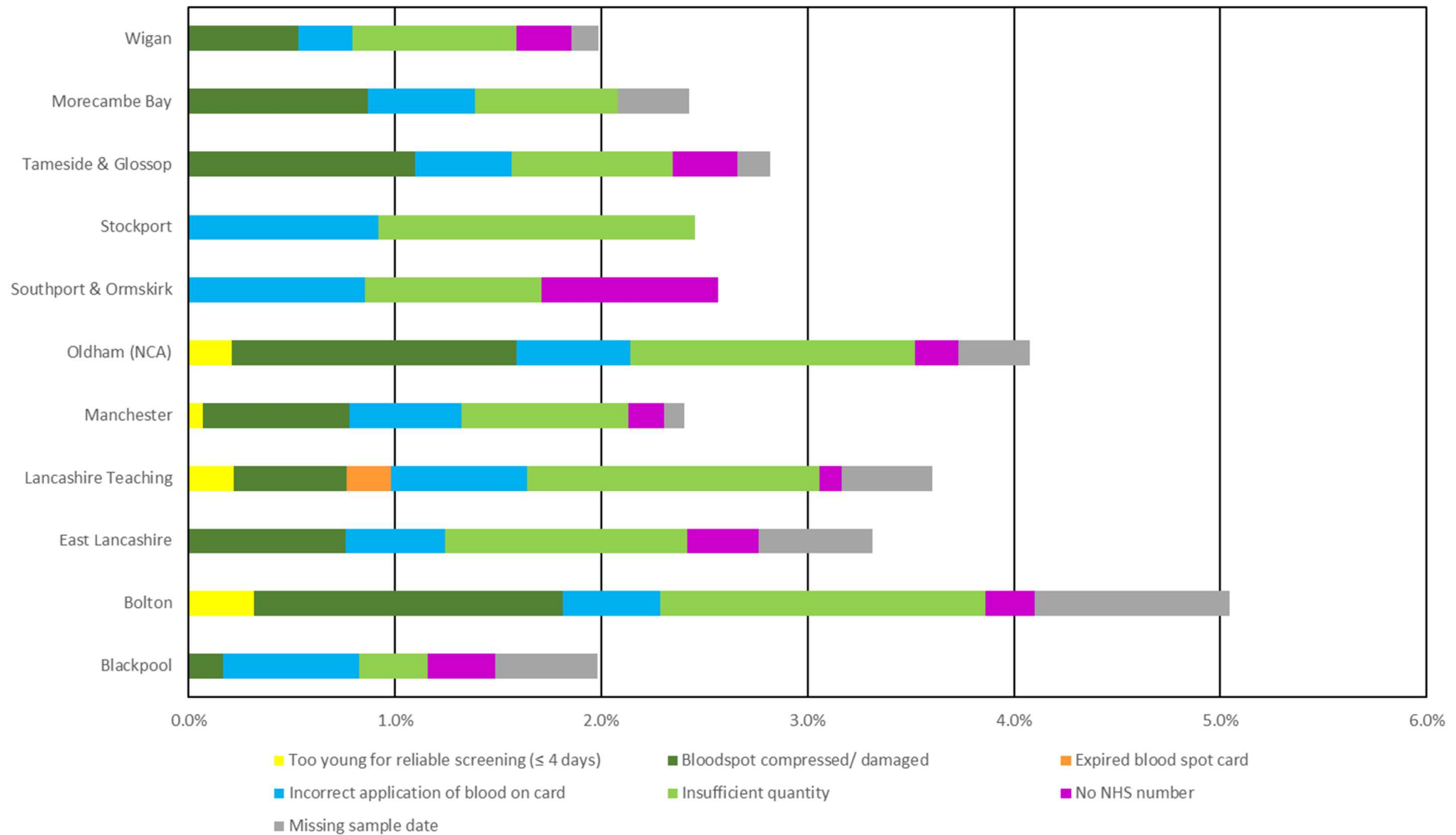
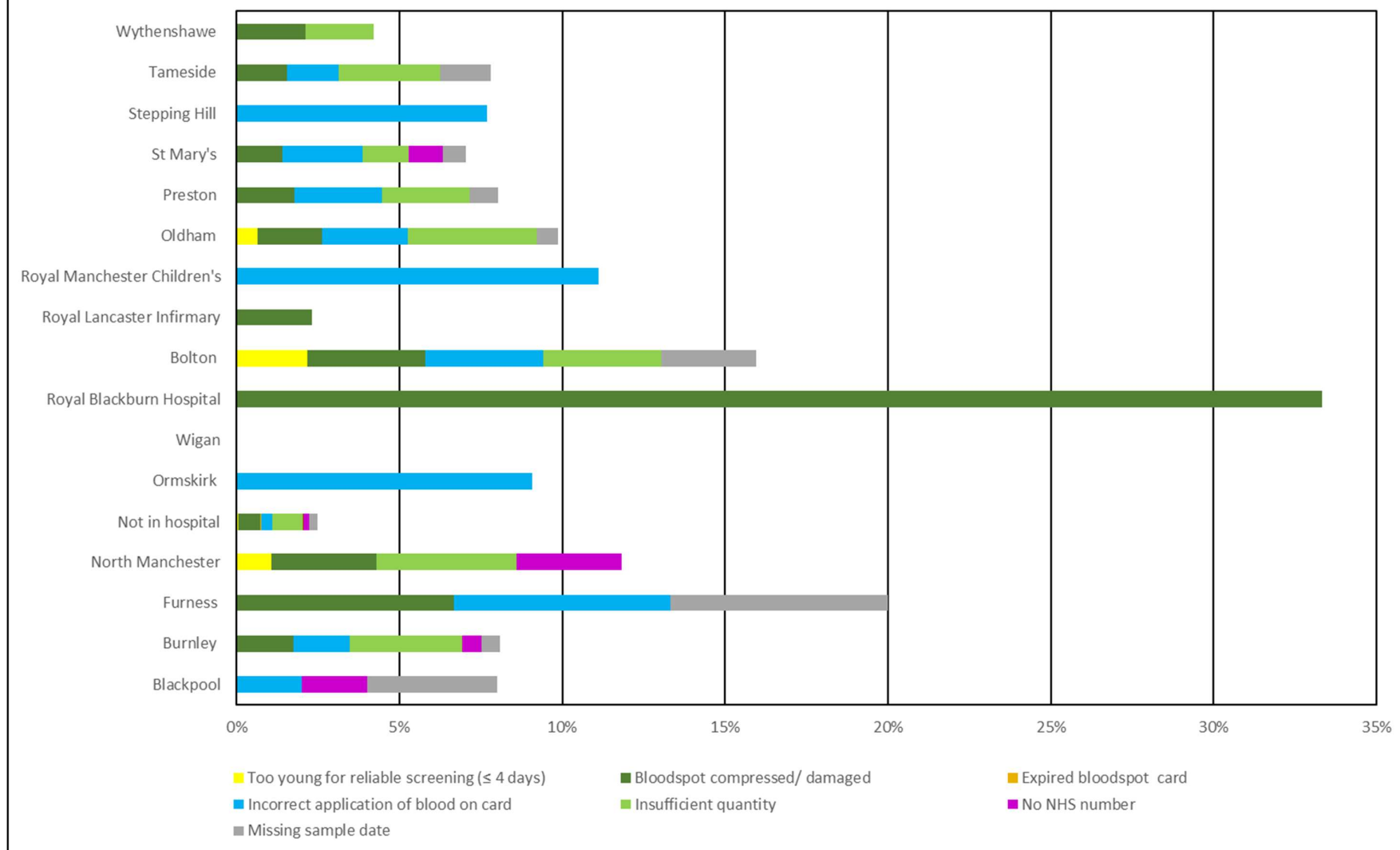


Figure 6: Standard 6 - Avoidable repeats for in-patients vs community



Q4 24-25 Table 1 - Summary of Performance				
Trust	Standard 3	Standard 4	Standard 5	Standard 6
Blackpool Teaching Hospitals NHS FT	97.9%	93.9%	99.5%	2.0%
Bolton NHS FT	85.6%	90.5%	98.9%	5.0%
East Lancashire Hospitals NHS Trust	83.3%	87.1%	99.4%	3.3%
Lancashire Teaching Hospitals NHS FT	90.1%	95.1%	99.7%	3.6%
Manchester University NHS FT (SMH, RMCH, WH & NMGH)	95.7%	95.9%	99.4%	2.4%
Oldham (NCA)	84.1%	88.9%	95.2%	4.1%
Southport & Ormskirk Hospital NHS Trust	82.9%	90.6%	92.7%	2.6%
Stockport NHS FT	93.3%	96.8%	98.2%	2.5%
Tameside And Glossop Integrated Care NHS FT	86.3%	91.5%	98.8%	2.8%
University Hospitals of Morecambe Bay NHS FT	93.2%	96.5%	99.7%	2.4%
Wrightington, Wigan and Leigh NHS FT	24.9%	94.2%	89.0%	2.0%

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 4 there were 3 repeats for raised IRT (CF inconclusive). Of these, 67% 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 4 204-25 - Standard 7a				
Maternity Unit	Age at collection of CF repeat		Total	% collected day 21-24
	21 d	28 d		
Lancashire Teaching Hospitals NHS FT	1	0	1	100%
Manchester University NHS FT - Wythenshawe	0	1	1	0%
Oldham (NCA)	1	0	1	100%
Total	2	1	3	67%

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 4 there were 32 repeats for borderline TSH (CHT). Of these, 75% were collected 7-10 days after the original sample. Table 3 displays the information by Trust.

Quarter 4 2024-25 - Standard 7b									
Trust	Number of days between original sample and collection of repeat sample							Total	% collected 7-10 days after original
	5	6	7	8	9	18	21		
Blackpool Teaching Hospitals NHS FT	0	0	1	1	0	0	0	2	100%
Bolton NHS FT	1	1	0	1	2	0	0	5	60%
East Lancashire Hospitals NHS Trust	0	0	1	0	2	1	0	4	75%
Lancashire Teaching Hospitals NHS FT	0	0	0	2	1	0	0	3	100%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	0	0	2	3	5	0	0	10	100%
Oldham (NCA)	0	3	0	1	0	0	1	5	20%
Tameside And Glossop Integrated Care NHS FT	0	1	1	0	0	0	0	2	50%
University Hospitals of Morecambe Bay NHS FT	0	0	0	1	0	0	0	1	100%
Grand Total	1	5	5	9	10	1	1	32	75%

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 4, 116 CHT pre-term repeats were received. Performance by trust is displayed in table 4. 78% were collected on day 28 or at discharge, 17% were collected after day 28.

Quarter 4 204-25 - 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	1	4		5	80%
Bolton NHS FT		14	4	18	78%
East Lancashire Hospitals NHS Trust	2	6	4	12	50%
Lancashire Teaching Hospitals NHS FT		12	1	13	92%
Manchester University NHS FT - SMH, RMCH, WH	2	26	7	35	74%
Oldham (NCA)		17	2	19	89%
Southport & Ormskirk Hospital NHS Trust		1		1	100%
Tameside And Glossop Integrated Care NHS FT		6		6	100%
University Hospitals of Morecambe Bay NHS FT		4	2	6	67%
Wrightington, Wigan and Leigh NHS FT		1		1	100%
Grand Total	5	91	20	116	78%

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 12 screen positive samples for CHT and 4 for IMD in quarter 4. 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	4	75%	3 x PKU, 1 x IVA. 1x PKU baby seen at day 15 as sample took 8 days to arrive in the laboratory
CHT (suspected on first sample)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	5	6	83%	1 baby seen at day 16. collected on day 6.
CHT (suspected on repeat following borderline TSH)	Attend first clinical appointment by 21 days of age	Acceptable: 100%	6	6	100%	
CF (2 CFTR mutations detected)	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	3	3	100%	
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	1	1	100%	
SCD	Attend first clinical appointment by 90 days of age	Attend first clinical appointment by 90 days of age	4	5	80%	1 baby not yet seen as baby was born at 25+5 week gestation. Clinic visit is planned for corrected 44 weeks gestation..

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
2579262	26/10/24	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated on movement in baby	External	Lancashire Care Health Visitors	Lancashire	Yes
2579275	15/11/24	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated on movement in baby	External	Lancashire Care Health Visitors	Lancashire	Yes
2582775	23/12/24	2 - minor	1 - no harm	Late referral for treatment of a screen positive baby due to a failing anywhere in the pathway	Delayed referral of FSA baby due to wrong location being selected in the NBO System	MFT	NBS Lab	Greater Manchester	Yes
2598981	06/03/25	2 - minor	2 - slight	Blood spot labelling error: another baby's bar-coded demographic sticker, detected prior to reporting	Demographic sticker from wrong Twin used in error.	External	Tameside Maternity Unit	Greater Manchester	Yes
2600117	10/03/25	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated on movement in baby	External	Pennine Health Visitors	Lancashire	Yes
2600517	22/01/25	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated on movement in baby	External	East Lancashire health visitors	Lancashire	Yes
2603275	15/03/25	1 - low	1 - no harm	Blood spot labelling error: another baby's bar-coded demographic sticker, detected prior to reporting	Sample labelled with wrong demographic sticker.	External	East Lancs Maternity Unit	Lancashire	Yes
2604910	19/03/25	2 - minor	2 - slight	Blood spot labelling error: handwritten NHS number belonging to another baby (other demographic details correct)	A newborn screening sample was received with the incorrect NHS number hand written on the card. The NHS number was missing from the name sticker on the sample. The handwritten NHS number belongs to a different baby.	External	Tameside Maternity Unit	Greater Manchester	Yes

Appendix

Quarter 4 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	632	630	619	2	99.7%	97.9%	0.3%
Bolton NHS FT	1491	1486	1276	51	99.7%	85.6%	3.4%
East Lancashire Hospitals NHS Trust	1585	1580	1321	2	99.7%	83.3%	0.1%
Health Visitor	188	183	5	0	97.3%	2.7%	0.0%
Lancashire Teaching Hospitals NHS FT	969	968	873	22	99.9%	90.1%	2.3%
Manchester University NHS FT - SMH & RMCH & WH & NMGH	3152	3147	3017	27	99.8%	95.7%	0.9%
Not Stated	9	9	7	0	100.0%	77.8%	0.0%
Oldham (NCA)	1582	1579	1330	5	99.8%	84.1%	0.3%
Southport & Ormskirk Hospital NHS Trust	123	122	102	1	99.2%	82.9%	0.8%
Stockport NHS FT	683	683	637	8	100.0%	93.3%	1.2%
Tameside And Glossop Integrated Care NHS FT	677	675	584	11	99.7%	86.3%	1.6%
University Hospitals of Morecambe Bay NHS FT	601	601	560	5	100.0%	93.2%	0.8%
Wrightington, Wigan and Leigh NHS FT	774	772	193	444	99.7%	24.9%	57.4%
Grand Total	12466	12435	10524	578	99.8%	84.4%	4.6%

Quarter 4 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	566	24	4	0	9	0.0%	93.9%	4.0%	0.7%	0.0%	1.5%
Bolton NHS FT	4	1142	74	12	6	24	0.3%	90.5%	5.9%	1.0%	0.5%	1.9%
East Lancashire Hospitals NHS Trust	0	1256	132	20	6	28	0.0%	87.1%	9.2%	1.4%	0.4%	1.9%
Health Visitor	0	2	0	0	0	134	0.0%	1.5%	0.0%	0.0%	0.0%	98.5%
Lancashire Teaching Hospitals NHS FT	2	869	32	2	3	6	0.2%	95.1%	3.5%	0.2%	0.3%	0.7%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	2	2837	83	7	14	15	0.1%	95.9%	2.8%	0.2%	0.5%	0.5%
Not Stated	0	4	1	0	0	0	0.0%	80.0%	20.0%	0.0%	0.0%	0.0%
Oldham (NCA)	4	1285	108	10	8	31	0.3%	88.9%	7.5%	0.7%	0.6%	2.1%
Southport & Ormskirk Hospital NHS Trust	0	106	9	0	0	2	0.0%	90.6%	7.7%	0.0%	0.0%	1.7%
Stockport NHS FT	0	631	15	2	1	3	0.0%	96.8%	2.3%	0.3%	0.2%	0.5%
Tameside And Glossop Integrated Care NHS FT	0	584	34	9	3	8	0.0%	91.5%	5.3%	1.4%	0.5%	1.3%
University Hospitals of Morecambe Bay NHS FT	2	556	12	3	0	3	0.3%	96.5%	2.1%	0.5%	0.0%	0.5%
Wrightington, Wigan and Leigh NHS FT	0	709	29	6	0	9	0.0%	94.2%	3.9%	0.8%	0.0%	1.2%
Grand Total	14	10547	553	75	41	272	0.1%	91.7%	4.8%	0.7%	0.4%	2.4%

Quarter 4 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	625	625	3	628	99.5%	99.5%	0.5%
Bolton NHS FT	1349	1361	3	1364	98.9%	99.8%	0.2%
East Lancashire Hospitals NHS Trust	1502	1508	3	1511	99.4%	99.8%	0.2%
Health Visitor	124	132	15	147	84.4%	89.8%	10.2%
Lancashire Teaching Hospitals NHS FT	962	964	1	965	99.7%	99.9%	0.1%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3069	3084	5	3089	99.4%	99.8%	0.2%
Not Stated	5	5	4	9	55.6%	55.6%	44.4%
Oldham (NCA)	1488	1549	14	1563	95.2%	99.1%	0.9%
Southport & Ormskirk Hospital NHS Trust	114	120	3	123	92.7%	97.6%	2.4%
Stockport NHS FT	670	678	4	682	98.2%	99.4%	0.6%
Tameside And Glossop Integrated Care NHS FT	663	669	2	671	98.8%	99.7%	0.3%
University Hospitals of Morecambe Bay NHS FT	597	599	0	599	99.7%	100.0%	0.0%
Wrightington, Wigan and Leigh NHS FT	686	746	25	771	89.0%	96.8%	3.2%
Grand Total	11854	12040	82	12122	97.8%	99.3%	0.7%

Quarter 4 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	4	0	0	2	2	0	3	0	0	0	0	0	11
0302: too soon after transfusion (<72 hours)	0	4	2	0	2	6	0	1	0	0	1	0	1	17
0303: insufficient sample	2	20	17	6	13	24	0	20	1	10	5	4	6	128
0304: unsuitable sample (blood quality): incorrect blood application	4	6	7	2	6	16	0	8	1	6	3	3	2	64
0305: unsuitable sample (blood quality): compressed/damaged	1	19	11	1	5	21	1	20	0	0	7	5	4	95
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	2	3	5	1	1	5	0	3	1	0	2	0	2	25
0309: unsuitable sample: date of sample missing/not accurately recorded	3	12	8	1	4	3	0	5	0	0	1	2	1	40
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	0	0	1	2	0	0	0	0	0	0	0	0	3
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	2	0	0	0	0	0	0	0	0	0	2
0313: unsuitable sample: damaged in transit	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Number of Avoidable Repeat Requests	12	64	48	14	33	71	1	59	3	16	18	14	15	368
Number of first samples received/ babies tested	605	1269	1449	104	916	2954	5	1448	117	652	639	577	755	11490
Avoidable Repeat Requests Rate	2.0%	5.0%	3.3%	13.5%	3.6%	2.4%	20.0%	4.1%	2.6%	2.5%	2.8%	2.4%	2.0%	3.2%
Transfusion Repeats are not included in the Avoidable Repeat calculation														

Quarter 4 2024-25: Standard 6 by Current Hospital																		
Status code and description of avoidable repeat	Blackpool Victoria Hospital	Burnley General 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	0	0	1	6	0	0	0	3	0	0	1	0	0	0	0	0	11
0302: too soon after transfusion (<72 hours)	0	2	0	0	0	0	1	0	4	0	1	1	2	4	0	1	1	17
0303: insufficient sample	0	6	0	4	96	0	0	0	5	0	0	6	3	4	0	2	2	128
0304: unsuitable sample (blood quality): incorrect blood application	1	3	1	0	33	1	0	0	5	0	1	4	3	7	4	1	0	64
0305: unsuitable sample (blood quality): compressed/damaged	0	3	1	3	69	0	0	1	5	1	0	3	2	4	0	1	2	95
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
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
0308: unsuitable sample: NHS number missing/not accurately recorded	1	1	0	3	17	0	0	0	0	0	0	0	0	3	0	0	0	25
0309: unsuitable sample: date of sample missing/not accurately recorded	2	1	1	0	27	0	0	0	4	0	0	1	1	2	0	1	0	40
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
0311: unsuitable sample: expired card used	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	3
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
0313: unsuitable sample: damaged in transit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Number of Avoidable Repeat Requests	4	14	3	11	253	1	0	1	22	1	1	15	9	20	4	5	4	368
Number of first samples received/ babies tested	50	173	15	93	10138	11	58	3	138	43	9	152	112	284	52	64	95	11490
Avoidable Repeat Requests Rate	8.0%	8.1%	20.0%	11.8%	2.5%	9.1%	0.0%	33.3%	15.9%	2.3%	11.1%	9.9%	8.0%	7.0%	7.7%	7.8%	4.2%	3.2%
Transfusion Repeats are not included in the Avoidable Repeat calculation																		