

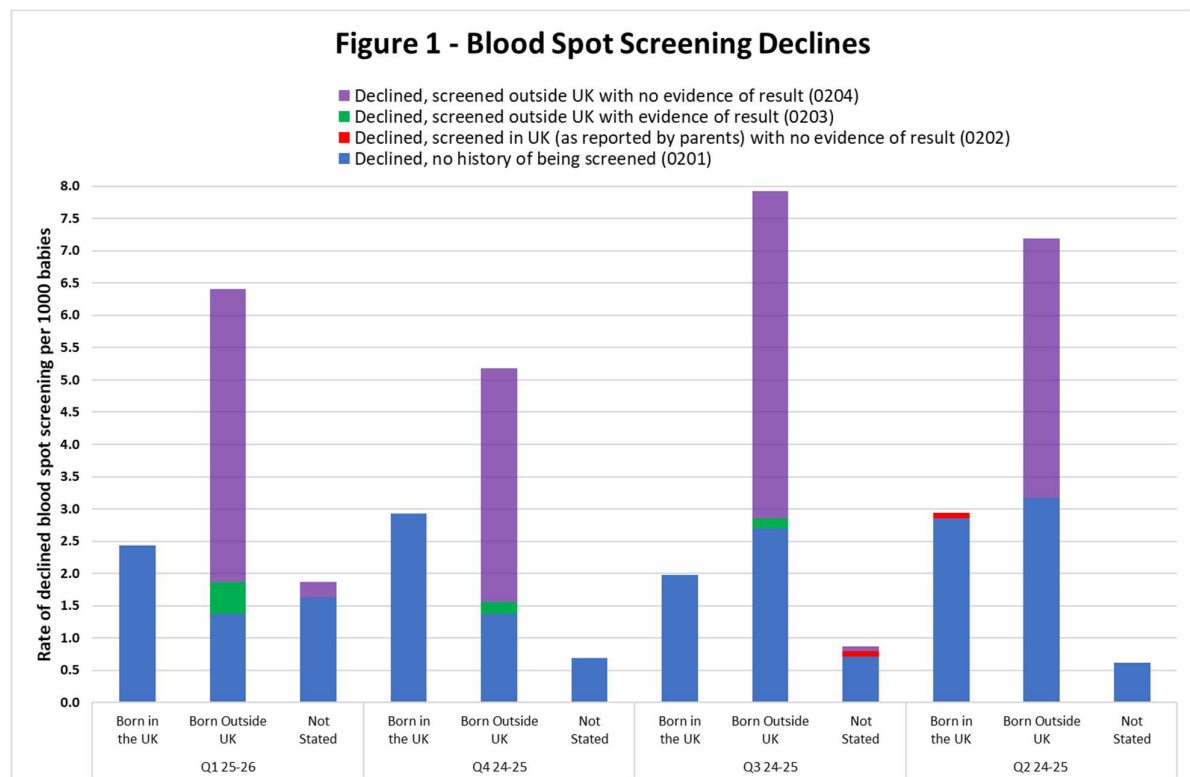
Manchester Newborn Screening Laboratory Quarterly Blood Spot Screening Report: Quarter 1 2025-26

Manchester Newborn Screening Laboratory, which serves babies born in Greater Manchester, Lancashire and South Cumbria, received 13204 blood spot samples between 1st April 2025 and 30th June 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 1 the laboratory received 132 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, 85.5% of samples received in quarter 1 of 2025/26 had a barcoded NHS number label, which is higher than the previous quarter (84.4%). 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, 92% of samples received in quarter 1 of 2025/26 were collected on day 5, which is slightly higher than the previous quarter (91.7%). 9 out of the 11 maternity units met standard 4, and 2 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

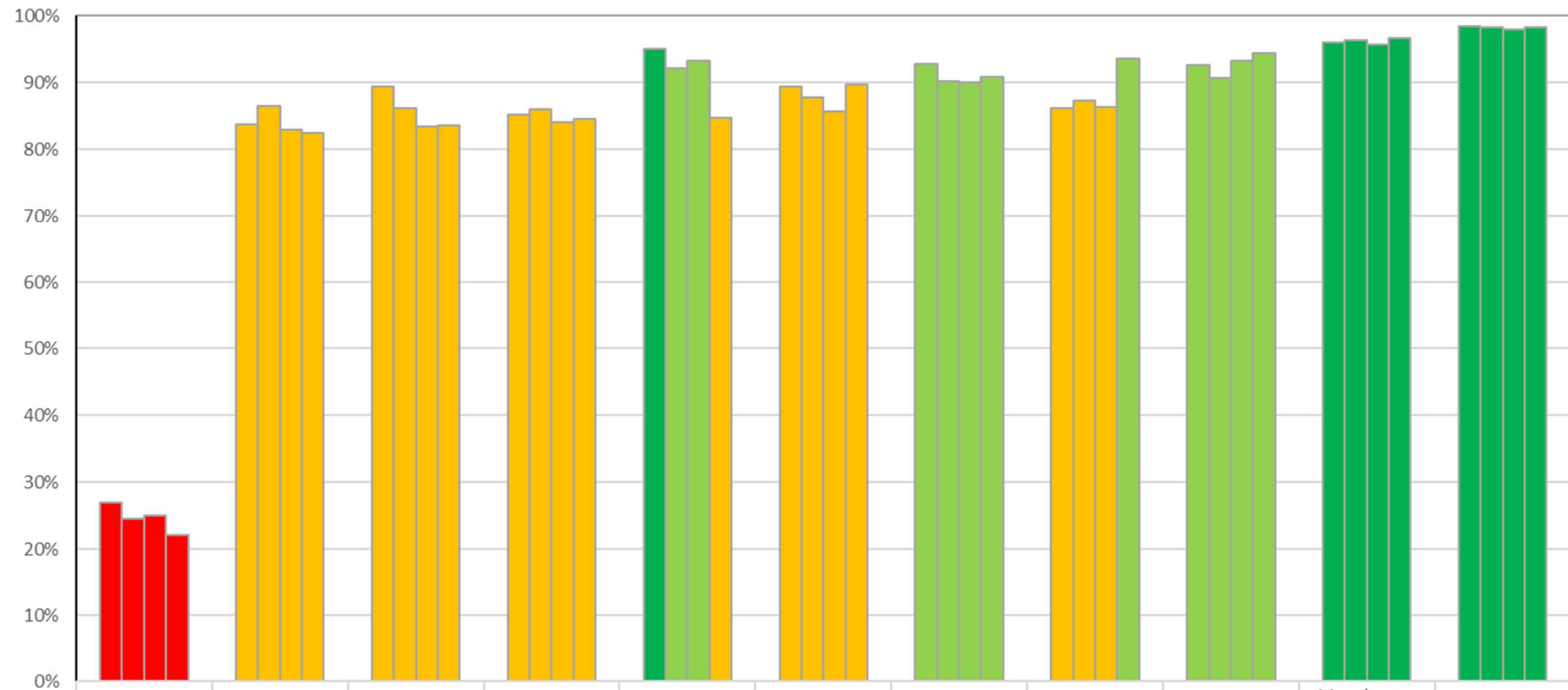
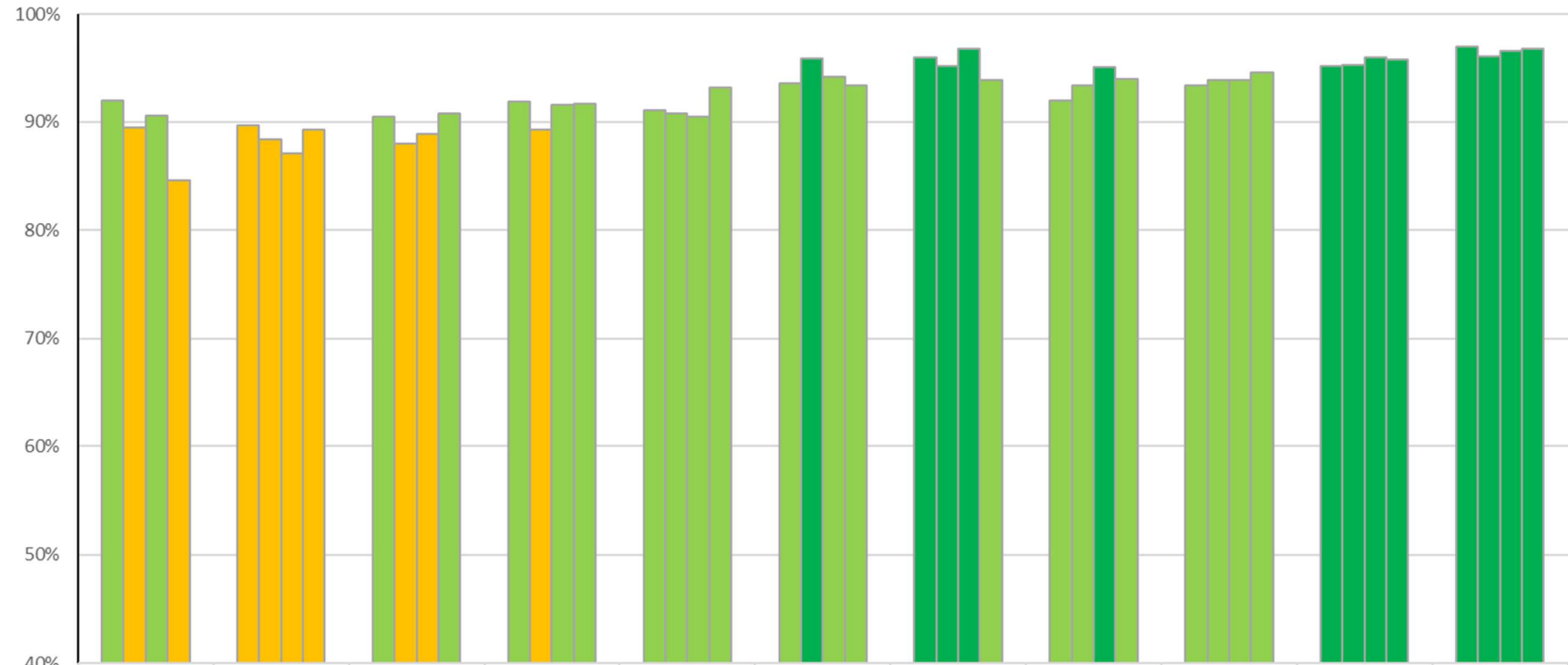


Figure 3: Standard 4 - The proportion of first blood spot samples taken on day 5

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, 98.1% of samples were received within 3 working days. Nine Trusts met the standard, with 6 of these reaching the achievable threshold. Performance was similar to the previous quarter (97.8% 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 1 was 3.0%, which is slightly lower compared to quarter 4 (3.2%). 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 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 2.6% for babies at home (2.5% in quarter 4) and 6.8% for samples collected from in-patients (8.5% in quarter 4).

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

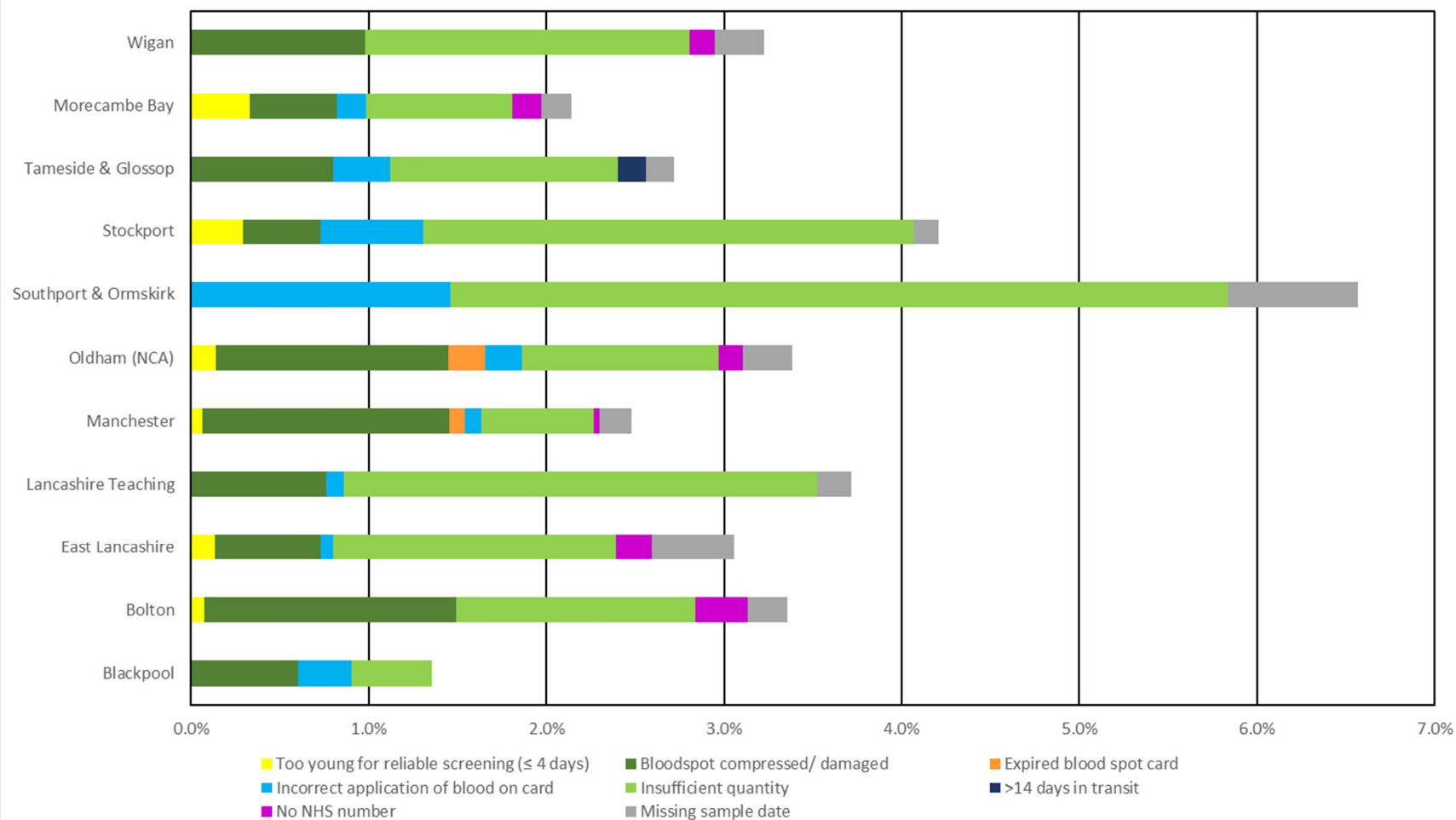
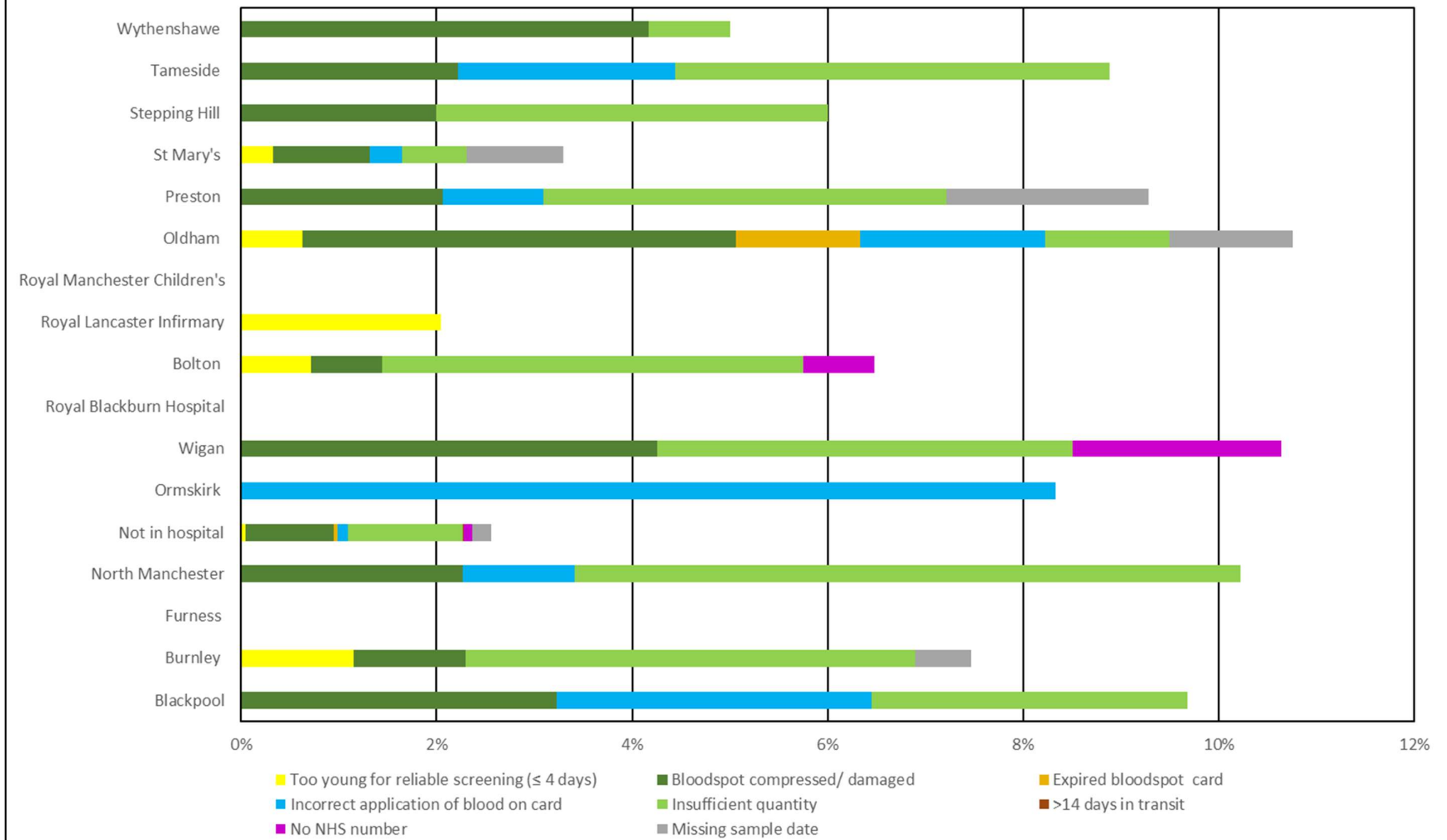


Figure 6: Standard 6 - Avoidable repeats for in-patients vs community



Q1 25-26 Table 1 - Summary of Performance				
Trust	Standard 3	Standard 4	Standard 5	Standard 6
Blackpool Teaching Hospitals NHS FT	98.3%	94.6%	100%	1.4%
Bolton NHS FT	89.7%	93.1%	99.9%	3.4%
East Lancashire Hospitals NHS Trust	83.5%	89.3%	99.2%	3.1%
Lancashire Teaching Hospitals NHS FT	90.8%	94.0%	99.7%	3.7%
Manchester University NHS FT (SMH, RMCH, WH & NMGH)	96.7%	95.7%	99.5%	2.5%
Oldham (NCA)	84.5%	90.8%	95.6%	3.4%
Southport & Ormskirk Hospital NHS Trust	82.4%	84.6%	91.8%	6.6%
Stockport NHS FT	94.5%	93.9%	98.3%	4.2%
Tameside And Glossop Integrated Care NHS FT	93.6%	91.7%	97.9%	2.7%
University Hospitals of Morecambe Bay NHS FT	84.6%	96.7%	99.8%	2.1%
Wrightington, Wigan and Leigh NHS FT	22.1%	93.4%	89.9%	3.2%

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 1 there were 2 repeats for raised IRT (CF inconclusive). All samples 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 1 2025-26 - Standard 7a			
Maternity Unit	Age at collection of CF repeat	Total	% collected day 21-24
	22 d		
Bolton NHS FT	1	1	100%
Lancashire Teaching Hospitals NHS FT	1	1	100%
Total	2	2	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 1 there were 29 repeats for borderline TSH (CHT). Of these, 69% were collected 7-10 days after the original sample. Table 3 displays the information by Trust.

Quarter 1 2025-26 - Standard 7b											
Trust	Number of days between original sample and collection of repeat sample									Total	% collected 7-10 days after original sample
	2	7	8	9	10	11	12	13	22		
Blackpool Teaching Hospitals NHS FT	0	1	0	0	0	0	0	0	0	1	100%
Bolton NHS FT	0	0	1	0	1	0	1	0	0	3	67%
East Lancashire Hospitals NHS Trust	0	0	1	2	0	0	0	0	0	3	100%
Lancashire Teaching Hospitals NHS FT	0	0	0	0	0	0	1	0	0	1	0%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	1	2	1	6	0	1	0	0	0	11	82%
Oldham (NCA)	0	0	1	1	1	1	0	1	1	6	50%
Stockport NHS FT	0	0	1	0	0	0	0	0	0	1	100%
Tameside And Glossop Integrated Care NHS FT	0	1	0	0	0	0	0	0	0	1	100%
Wrightington, Wigan and Leigh NHS FT	0	0	0	0	0	1	1	0	0	2	0%
Grand Total	1	4	5	9	2	3	3	1	1	29	69%

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 1, 146 CHT pre-term repeats were received. Performance by trust is displayed in table 4. 86% were collected on day 28 or at discharge, 10% were collected after day 28.

Quarter 1 25-26 - 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		12		12	100%
Bolton NHS FT	1	12	3	16	75%
East Lancashire Hospitals NHS Trust	2	18		20	90%
Lancashire Teaching Hospitals NHS FT		14		14	100%
Manchester University NHS FT - SMH, RMCH, WH	1	28	9	38	74%
Oldham (NCA)		18	2	20	90%
Stockport NHS FT		6		6	100%
Tameside And Glossop Integrated Care NHS FT		6		6	100%
University Hospitals of Morecambe Bay NHS FT		4	1	5	80%
Wrightington, Wigan and Leigh NHS FT	1	8		9	89%
Grand Total	5	126	15	146	86%

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 6 for IMD in quarter 1. 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%	6	6	100%	3 PKU, 2 MCAD, 1 IVA
CHT (suspected on first sample)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	3	3	100%	
CHT (suspected on repeat following borderline TSH)	Attend first clinical appointment by 21 days of age	Acceptable: 100%	5	6	83%	1 baby seen on day 26, day 5 transported to lab over Easter weekend and repeat sample took 4 days to be collected.
CF (2 CFTR mutations detected)	Attend first clinical appointment by 28 days of age	Acceptable: $\geq 95.0\%$ Achievable: 100%	4	4	100%	
HCU	Attend first clinical appointment by 28 days of age	Acceptable: $\geq 95.0\%$ Achievable: 100%	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		
SCD	Attend first clinical appointment by 90 days of age	Attend first clinical appointment by 90 days of age	6	6	100%	1 baby excluded as not yet 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
2633858	24/06/25	1 - low	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	A newborn blood spot sample was unsuitable for analysis, despite 3 letters requesting a repeat sample. a repeat was	External	Stockport Health Visitors	Greater Manchester	Yes

Appendix

Quarter 1 2025-26: 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	690	690	678	2	100%	98.3%	0.3%
Bolton NHS FT	1543	1539	1384	36	99.7%	89.7%	2.3%
East Lancashire Hospitals NHS Trust	1691	1688	1412	21	99.8%	83.5%	1.2%
Health Visitor	217	217	4	0	100%	1.8%	0.0%
Lancashire Teaching Hospitals NHS FT	1105	1105	1003	37	100%	90.8%	3.3%
Manchester University NHS FT - SMH & RMCH & WH & NMGH	3505	3504	3388	19	100%	96.7%	0.5%
Not Stated	5	5	3	0	100%	60.0%	0.0%
Oldham (NCA)	1543	1541	1304	8	99.9%	84.5%	0.5%
Southport & Ormskirk Hospital NHS Trust	148	148	122	6	100%	82.4%	4.1%
Stockport NHS FT	722	722	682	15	100%	94.5%	2.1%
Tameside And Glossop Integrated Care NHS FT	655	655	613	11	100%	93.6%	1.7%
University Hospitals of Morecambe Bay NHS FT	630	629	533	3	99.8%	84.6%	0.5%
Wrightington, Wigan and Leigh NHS FT	750	749	166	458	99.9%	22.1%	61.1%
Grand Total	13204	13192	11292	616	99.9%	85.5%	4.7%

Quarter 1 2025-26: 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	629	30	2	0	4	0.0%	94.6%	4.5%	0.3%	0.0%	0.6%
Bolton NHS FT	1	1246	57	12	7	15	0.1%	93.1%	4.3%	0.9%	0.5%	1.1%
East Lancashire Hospitals NHS Trust	2	1338	123	10	3	22	0.1%	89.3%	8.2%	0.7%	0.2%	1.5%
Health Visitor	0	2	0	0	0	172	0.0%	1.1%	0.0%	0.0%	0.0%	98.9%
Lancashire Teaching Hospitals NHS FT	1	984	45	9	4	4	0.1%	94.0%	4.3%	0.9%	0.4%	0.4%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	2	3166	96	15	10	18	0.1%	95.7%	2.9%	0.5%	0.3%	0.5%
Not Stated	0	2	0	0	0	1	0.0%	66.7%	0.0%	0.0%	0.0%	33.3%
Oldham (NCA)	3	1311	90	13	4	23	0.2%	90.8%	6.2%	0.9%	0.3%	1.6%
Southport & Ormskirk Hospital NHS Trust	0	115	14	2	0	5	0.0%	84.6%	10.3%	1.5%	0.0%	3.7%
Stockport NHS FT	2	646	29	3	0	8	0.3%	93.9%	4.2%	0.4%	0.0%	1.2%
Tameside And Glossop Integrated Care NHS FT	0	574	34	3	2	13	0.0%	91.7%	5.4%	0.5%	0.3%	2.1%
University Hospitals of Morecambe Bay NHS FT	2	588	15	1	0	2	0.3%	96.7%	2.5%	0.2%	0.0%	0.3%
Wrightington, Wigan and Leigh NHS FT	0	666	32	5	2	8	0.0%	93.4%	4.5%	0.7%	0.3%	1.1%
Grand Total	13	11267	565	75	32	295	0.1%	92.0%	4.6%	0.6%	0.3%	2.4%

Quarter 1 2025-26: 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	689	689	0	689	100%	100%	0.0%
Bolton NHS FT	1420	1420	1	1421	99.9%	99.9%	0.1%
East Lancashire Hospitals NHS Trust	1554	1563	4	1567	99.2%	99.7%	0.3%
Health Visitor	158	173	12	185	85.4%	93.5%	6.5%
Lancashire Teaching Hospitals NHS FT	1092	1095	0	1095	99.7%	100%	0.0%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3431	3444	3	3447	99.5%	99.9%	0.1%
Not Stated	2	2	2	4	50.0%	50.0%	50.0%
Oldham (NCA)	1455	1510	12	1522	95.6%	99.2%	0.8%
Southport & Ormskirk Hospital NHS Trust	135	144	3	147	91.8%	98.0%	2.0%
Stockport NHS FT	708	718	2	720	98.3%	99.7%	0.3%
Tameside And Glossop Integrated Care NHS FT	638	651	1	652	97.9%	99.8%	0.2%
University Hospitals of Morecambe Bay NHS FT	627	628	0	628	99.8%	100%	0.0%
Wrightington, Wigan and Leigh NHS FT	671	729	17	746	89.9%	97.7%	2.3%
Grand Total	12580	12766	57	12823	98.1%	99.6%	0.4%

Quarter 1 2025-26: 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	1	2	0	0	2	0	2	0	2	0	2	0	11
0302: too soon after transfusion (<72 hours)	1	1	6	0	1	7	0	4	0	0	1	0	0	21
0303: insufficient sample	3	18	24	3	28	21	0	16	6	19	8	5	13	164
0304: unsuitable sample (blood quality): incorrect blood application	2	0	1	2	1	3	0	3	2	4	2	1	0	21
0305: unsuitable sample (blood quality): compressed/damaged	4	19	9	3	8	46	0	19	0	3	5	3	7	126
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	0	4	3	0	0	1	0	2	0	0	0	1	1	12
0309: unsuitable sample: date of sample missing/not accurately recorded	0	3	7	1	2	6	0	4	1	1	1	1	2	29
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	0	0	3	0	3	0	0	0	0	0	6
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	0	0	0	0	0	0	1	0	0	1
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	9	45	46	9	39	82	0	49	9	29	17	13	23	370
Number of first samples received/ babies tested	663	1340	1505	106	1049	3306	3	1448	137	689	625	608	713	12192
Avoidable Repeat Requests Rate	1.4%	3.4%	3.1%	8.5%	3.7%	2.5%	0.0%	3.4%	6.6%	4.2%	2.7%	2.1%	3.2%	3.0%
Transfusion Repeats are not included in the Avoidable Repeat calculation														

Quarter 1 2025-26: 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	2	0	0	5	0	0	0	1	1	0	1	0	1	0	0	0	11
0302: too soon after transfusion (<72 hours)	1	6	0	0	0	0	0	0	1	0	0	4	1	7	0	1	0	21
0303: insufficient sample	2	8	0	6	127	0	2	0	6	0	0	2	4	2	2	2	1	164
0304: unsuitable sample (blood quality): incorrect blood application	2	0	0	1	11	1	0	0	0	0	0	3	1	1	0	1	0	21
0305: unsuitable sample (blood quality): compressed/damaged	2	2	0	2	98	0	2	0	1	0	0	7	2	3	1	1	5	126
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	0	0	0	0	10	0	1	0	1	0	0	0	0	0	0	0	0	12
0309: unsuitable sample: date of sample missing/not accurately recorded	0	1	0	0	21	0	0	0	0	0	0	2	2	3	0	0	0	29
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	4	0	0	0	0	0	0	2	0	0	0	0	0	6
0312: unsuitable sample: >14 days in transit, too old for analysis	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	0	0	0	0
Number of Avoidable Repeat Requests	6	13	0	9	277	1	5	0	9	1	0	17	9	10	3	4	6	370
Number of first samples received/ babies tested	62	174	21	88	10817	12	47	1	139	49	9	158	97	303	50	45	120	12192
Avoidable Repeat Requests Rate	9.7%	7.5%	0.0%	10.2%	2.6%	8.3%	10.6%	0.0%	6.5%	2.0%	0.0%	10.8%	9.3%	3.3%	6.0%	8.9%	5.0%	3.0%
Transfusion Repeats are not included in the Avoidable Repeat calculation																		