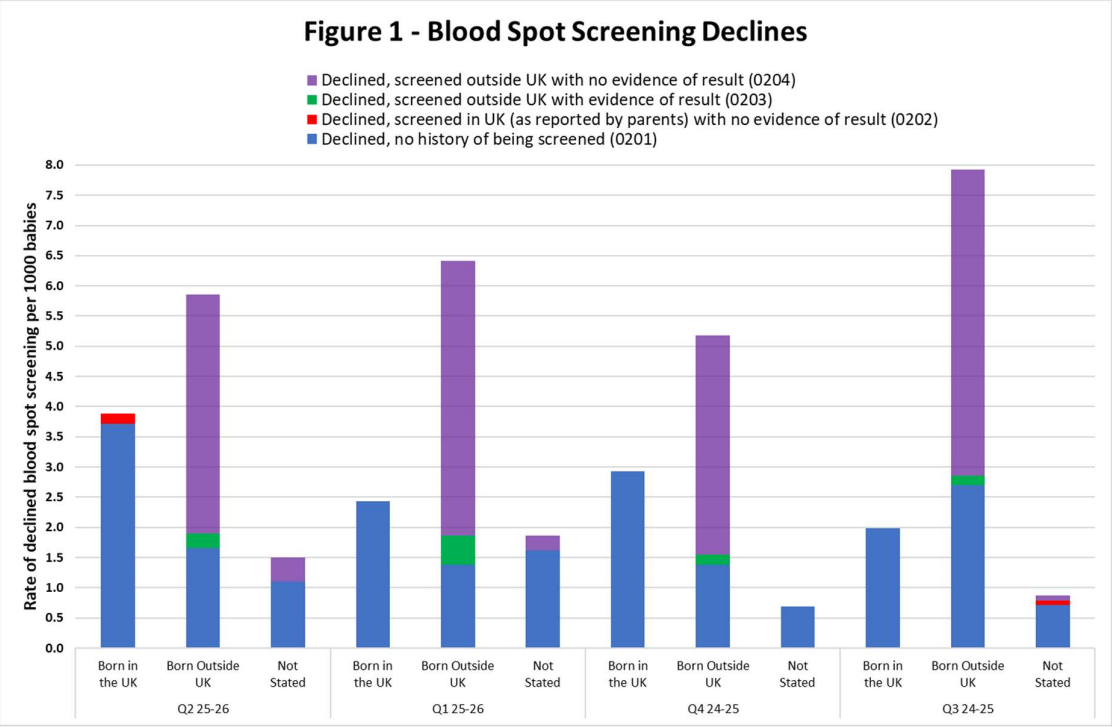
Manchester Newborn Screening Laboratory Quarterly Blood Spot Screening Report: Quarter 2 2025-26

Manchester Newborn Screening Laboratory, which serves babies born in Greater Manchester, Lancashire and South Cumbria, received 13442 blood spot samples between 1st July 2025 and 30th September 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 2 the laboratory received 143 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, 86% of samples received in quarter 2 of 2025/26 had a barcoded NHS number label, which is slightly higher than the previous quarter (85.5%). Of the 11 maternity units, 6 met the acceptable standard with 3 of these meeting the achievable threshold.

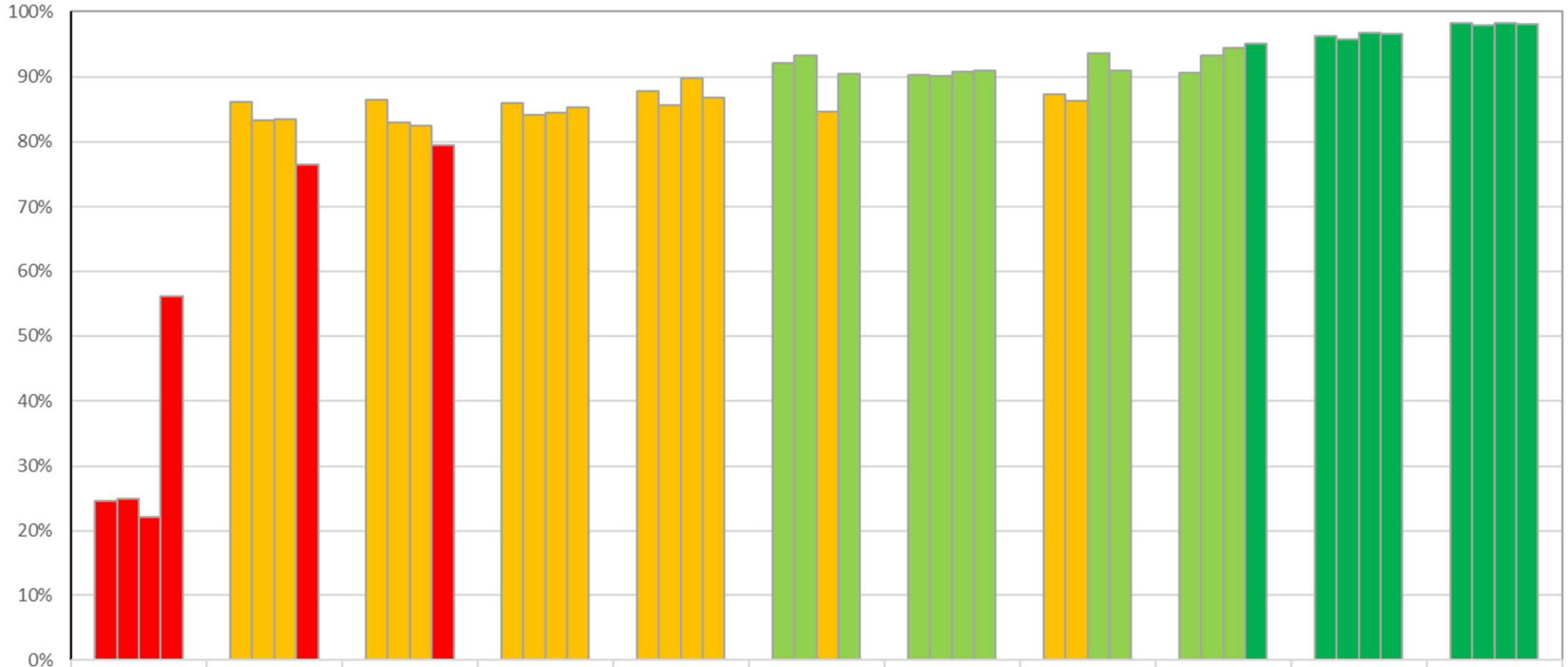
Standard 4 - The proportion of first blood spot samples taken on day 5

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, 92.5% of samples received in quarter 2 of 2025/26 were collected on day 5, which is slightly higher than the previous quarter (92%). 10 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

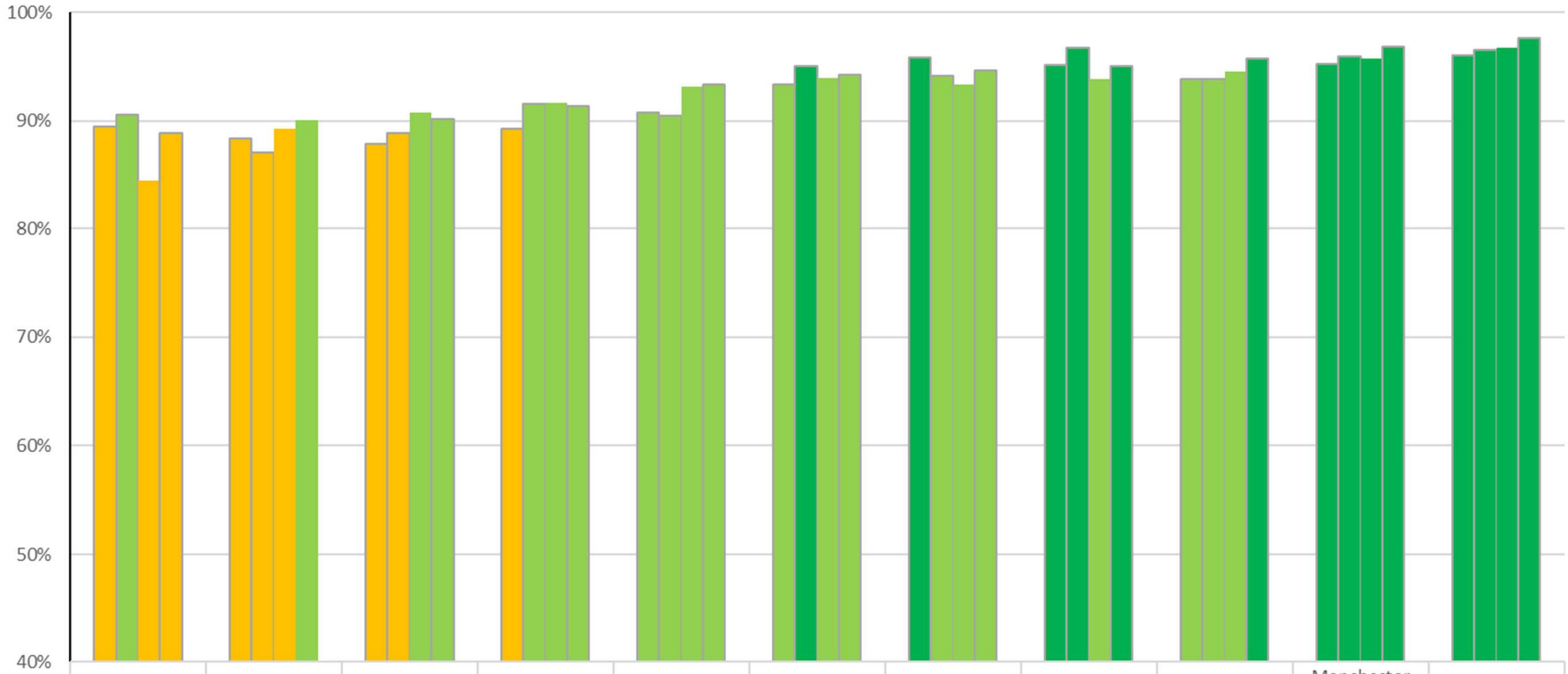
Most recent quarter on right-hand side



	Wrightington, Wigan and Leigh NHS FT	East Lancashire Hospitals NHS Trust	Southport & Ormskirk Hospital NHS Trust	Oldham (Pennine Acute Hospitals NHS Trust)	Bolton NHS FT	University Hospitals of Morecambe Bay NHS FT	Lancashire Teaching Hospitals NHS FT	Tameside And Glossop Integrated Care NHS FT	Stockport NHS FT	Manchester University NHS FT - SMH, RMCH, WH & NMGH	Blackpool Teaching Hospitals NHS FT
Q3 24-25	24.6%	86.1%	86.4%	85.9%	87.8%	92.1%	90.2%	87.2%	90.6%	96.3%	98.2%
Q4 24-25	24.9%	83.3%	82.9%	84.1%	85.6%	93.2%	90.1%	86.3%	93.3%	95.7%	97.9%
Q1 25-26	22.1%	83.5%	82.4%	84.5%	89.7%	84.6%	90.8%	93.6%	94.5%	96.7%	98.3%
Q2 25-26	56.2%	76.6%	79.4%	85.4%	86.8%	90.5%	90.9%	90.9%	95.0%	96.6%	98.1%

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

Most recent quarter on right-hand side



	Southport & Ormskirk Hospital NHS Trust	East Lancashire Hospitals NHS Trust	Oldham (NCA)	Tameside And Glossop Integrated Care NHS FT	Bolton NHS FT	Lancashire Teaching Hospitals NHS FT	Wrightington, Wigan and Leigh NHS FT	Stockport NHS FT	Blackpool Teaching Hospitals NHS FT	Manchester University NHS FT - SMH, RMCH, WH & NMGH	University Hospitals of Morecambe Bay NHS FT
Q3 24-25	89.5%	88.4%	87.9%	89.3%	90.7%	93.4%	95.8%	95.1%	93.9%	95.2%	96.0%
Q4 24-25	90.6%	87.1%	88.9%	91.5%	90.5%	95.1%	94.2%	96.8%	93.9%	95.9%	96.5%
Q1 25-26	84.6%	89.3%	90.8%	91.7%	93.1%	94.0%	93.4%	93.9%	94.6%	95.7%	96.7%
Q2 25-26	88.9%	90.0%	90.2%	91.3%	93.4%	94.2%	94.6%	95.1%	95.7%	96.8%	97.7%

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

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

Achievable: ≥ 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, 97.2% of samples were received within 3 working days. Eight Trusts met the standard, with 3 of these reaching the achievable threshold. Performance was less than the previous quarter (98.1% 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

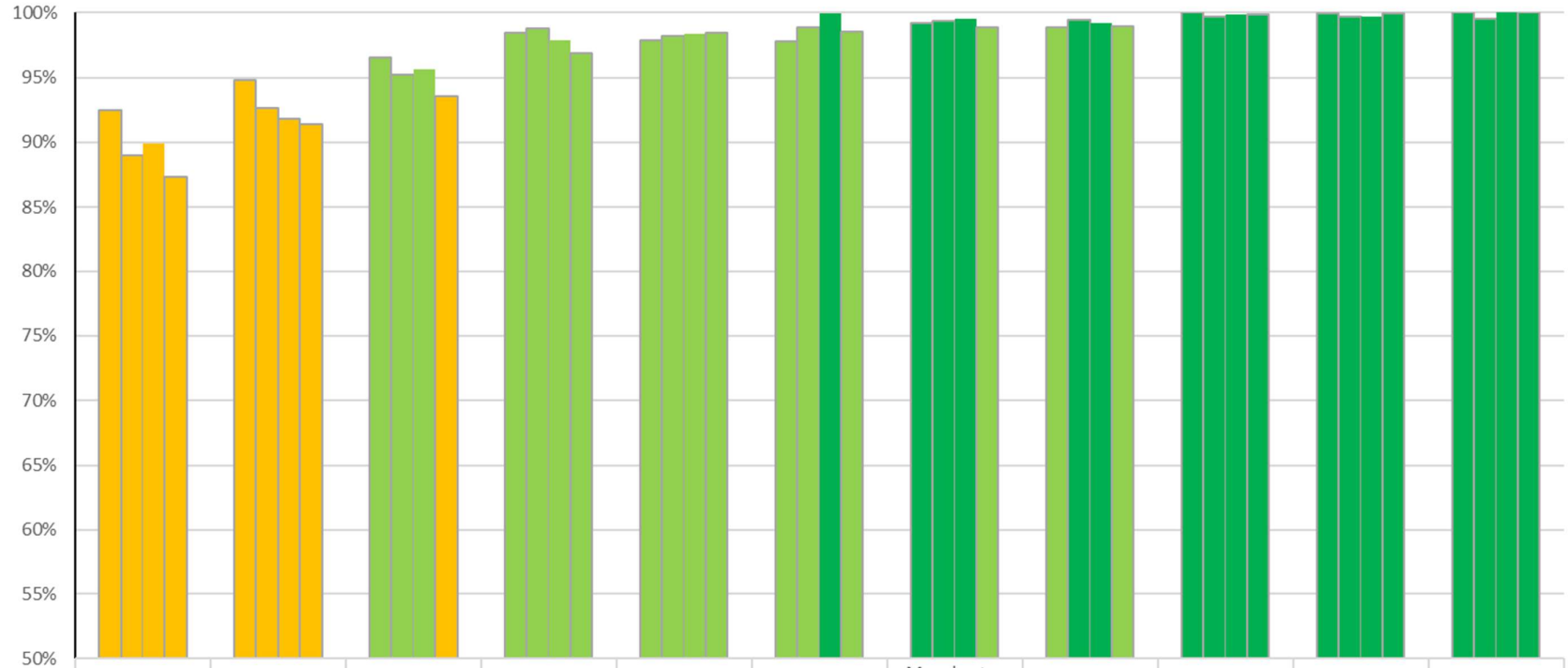
Acceptable: Avoidable repeat rate is ≤ 2.0%

Achievable: Avoidable repeat rate is ≤ 1.0%

The avoidable repeat rate for quarter 2 was 2.6%, which is lower compared to quarter 1 (3.0%). 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. Three Trusts met the acceptable standard with one of these reaching the achievable threshold. 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 2.1% for babies at home (2.6% in quarter 1) and 6.6% for samples collected from in-patients (6.8% in quarter 1).

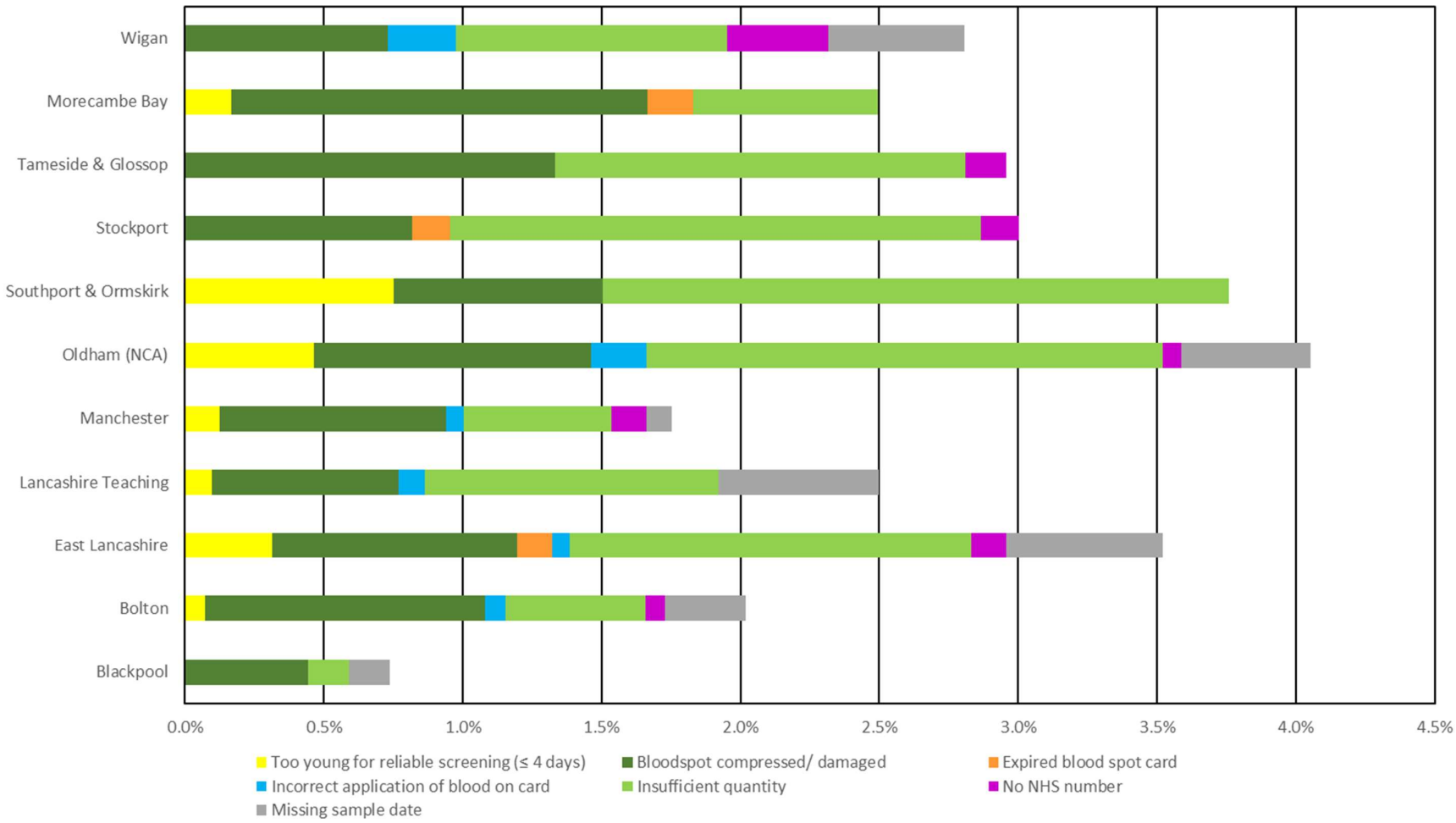
Figure 4: Standard 5 - The proportion of blood spot samples received less than or equal to 3 working days of sample collection

Most recent quarter on right-hand side



	Wrightington, Wigan and Leigh NHS FT	Southport & Ormskirk Hospital NHS Trust	Oldham (NCA)	Tameside And Glossop Integrated Care NHS FT	Stockport NHS FT	Bolton NHS FT	Manchester University NHS FT - SMH, RMCH, WH & NMGH	East Lancashire Hospitals NHS Trust	University Hospitals of Morecambe Bay NHS FT	Lancashire Teaching Hospitals NHS FT	Blackpool Teaching Hospitals NHS FT
Q3 24-25	92.4%	94.8%	96.5%	98.5%	97.9%	97.8%	99.2%	98.9%	100.0%	99.9%	100.0%
Q4 24-25	89.0%	92.7%	95.2%	98.8%	98.2%	98.9%	99.4%	99.4%	99.7%	99.7%	99.5%
Q1 25-26	89.9%	91.8%	95.6%	97.9%	98.3%	99.9%	99.5%	99.2%	99.8%	99.7%	100.0%
Q2 25-26	87.4%	91.4%	93.6%	96.9%	98.4%	98.5%	98.9%	98.9%	99.8%	99.9%	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



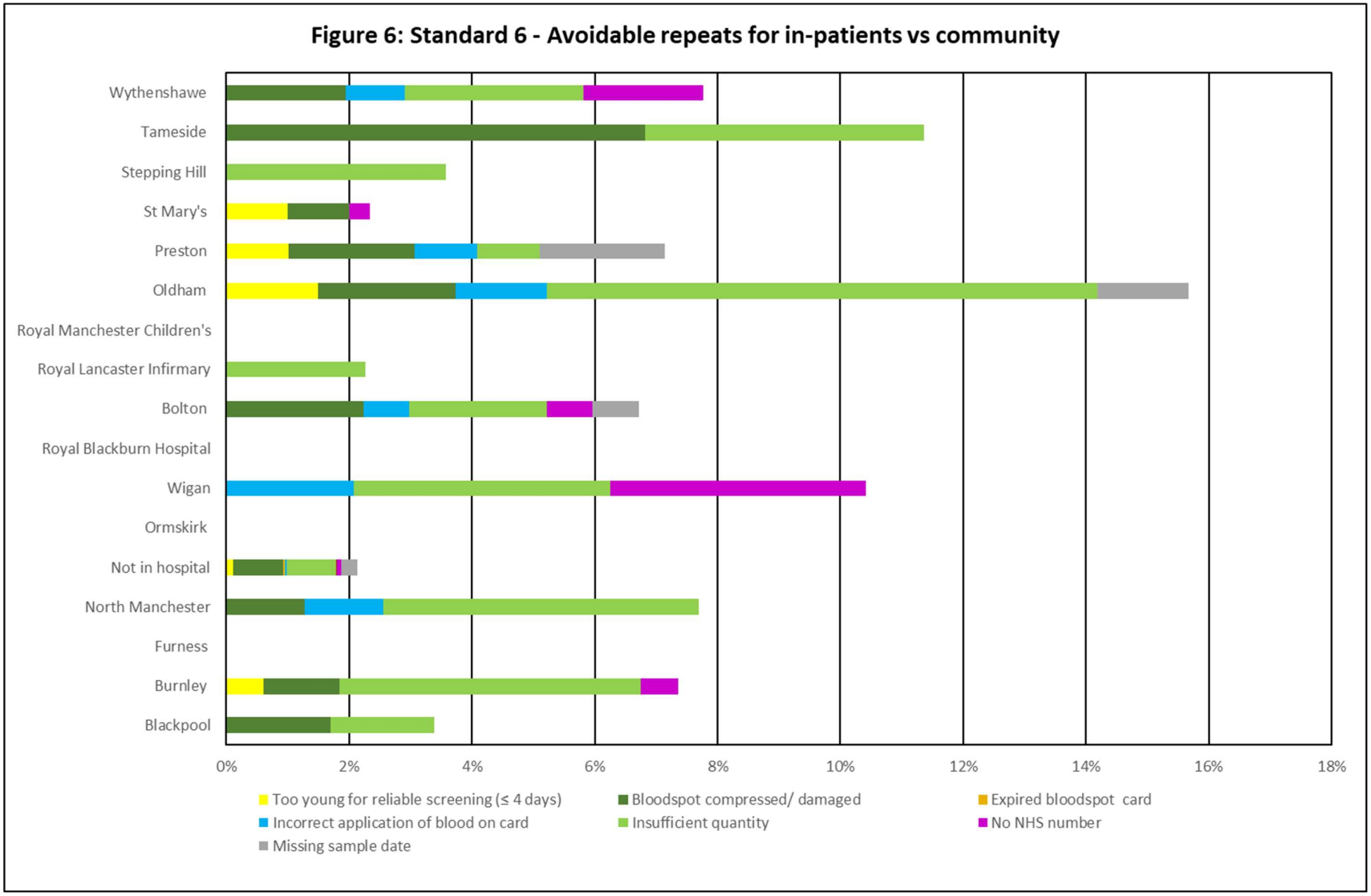


Figure 6: Standard 6 - Avoidable repeats for in-patients vs community
Wythenshawe
Tameside
Stepping Hill
St Mary's
Preston
Oldham
Royal Manchester Children's
Royal Lancaster Infirmary
Bolton
Royal Blackburn Hospital
Wigan
Ormskirk
Not in hospital
North Manchester
Furness
Burnley
Blackpool
0%
2%
4%
6%
8%
10%
12%
14%
16%
18%
Too young for reliable screening (≤ 4 days)
Bloodspot compressed/ damaged
Expired bloodspot card
Incorrect application of blood on card
Insufficient quantity
No NHS number
Missing sample date

Q2 25-26 Table 1 - Summary of Performance				
Trust	Standard 3	Standard 4	Standard 5	Standard 6
Blackpool Teaching Hospitals NHS FT	98.1%	95.7%	100.0%	0.7%
Bolton NHS FT	86.8%	93.4%	98.5%	2.0%
East Lancashire Hospitals NHS Trust	76.6%	90.0%	98.9%	3.5%
Lancashire Teaching Hospitals NHS FT	90.9%	94.2%	99.9%	2.5%
Manchester University NHS FT (SMH, RMCH, WH & NMGH)	96.6%	96.8%	98.9%	1.8%
Oldham (NCA)	85.4%	90.2%	93.6%	4.1%
Southport & Ormskirk Hospital NHS Trust	79.4%	88.9%	91.4%	3.8%
Stockport NHS FT	95.0%	95.1%	98.4%	3.0%
Tameside And Glossop Integrated Care NHS FT	90.9%	91.3%	96.9%	3.0%
University Hospitals of Morecambe Bay NHS FT	90.5%	97.7%	99.8%	2.5%
Wrightington, Wigan and Leigh NHS FT	56.2%	94.6%	87.4%	2.8%

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 2 there were 3 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 2 2025-26 - Standard 7a			
Maternity Unit	Age at collection of CF repeat	Total	% collected day 21-24
	21 d		
East Lancashire Hospitals NHS Trust	1	1	100%
North Manchester (MFT)	2	2	100%
Total	**3**	**3**	100%

Table 2

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 2 there were 22 repeats for borderline TSH (CHT). Of these, 82% were collected 7-10 days after the original sample. Table 3 displays the information by Trust.

Quarter 2 2025-26 - Standard 7b									
Trust	Number of days between original sample and collection of repeat sample							Total	% collected 7-10 days after original sample
	6	7	8	9	10	11	13		
Bolton NHS FT	0	1	0	0	1	0	0	2	100%
East Lancashire Hospitals NHS Trust	0	2	2	0	0	0	0	4	100%
Lancashire Teaching Hospitals NHS FT	0	0	0	0	1	0	0	1	100%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	1	1	2	4	0	0	0	8	88%
Oldham (NCA)	0	3	0	0	0	0	1	4	75%
Southport & Ormskirk Hospital NHS Trust	0	0	0	0	0	1	0	1	0%
Stockport NHS FT	0	0	0	0	1	0	0	1	100%
Wrightington, Wigan and Leigh NHS FT	1	0	0	0	0	0	0	1	0%
Grand Total	**2**	**7**	**4**	**4**	**3**	**1**	**1**	**22**	**82%**

Table 3

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 2, 125 CHT pre-term repeats were received. Performance by trust is displayed in table 4. 85% were collected on day 28 or at discharge, 15% were collected after day 28.

Quarter 2 25-26 - Standard 7c					
Trust	Number of Pre-term CHT second samples			Total	% Prem repeats collected on day 28 or at discharge
	EARLY	ON-TIME	LATE		
Blackpool Teaching Hospitals NHS FT		4		4	100%
Bolton NHS FT		11	7	18	61%
East Lancashire Hospitals NHS Trust		9	1	10	90%
Lancashire Teaching Hospitals NHS FT		7		7	100%
Manchester University NHS FT - SMH, RMCH, WH & NMGH		40	7	47	85%
Oldham (NCA)		18		18	100%
Stockport NHS FT		3	2	5	60%
Tameside And Glossop Integrated Care NHS FT		3		3	100%
University Hospitals of Morecambe Bay NHS FT		5	1	6	83%
Wrightington, Wigan and Leigh NHS FT		6	1	7	86%
Grand Total		**106**	**19**	**125**	85%

Table 4

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 7 screen positive samples for CHT and 7 for IMD in quarter 2. 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%	7	7	100%	4 PKU. 3 MCADD. Two MCADD babies were prem (24 weeks GA) - metabolic consultant contacted NICU directly at referral.
CHT (suspected on first sample)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	2	2	100%	1 baby was in NICU at time of referral
CHT (suspected on repeat following borderline TSH)	Attend first clinical appointment by 21 days of age	Acceptable: 100%	4	4	100%	1 baby had a clinical diagnosis of CHT prior to the referral being made (this baby is excluded from this data). In addition, 1 baby excluded as referred as positive following a premature repeat.
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		
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	7	8	88%	One baby seen at 100 days. One 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
2642095	18/07/25	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated (Movement In baby)	External	Bolton Health Visitors	Greater Manchester	Yes
2647388	28/07/25	2 - minor	2 - slight	Blood spot labelling error: another baby's bar-coded demographic sticker and reported against wrong baby.	A newborn blood spot was received in the laboratory with an incorrect barcoded demographic sticker, which belonged to a different baby.	External	Bolton Maternity Unit	Greater Manchester	Yes
2654635	27/08/25	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated (Movement In baby)	External	Wigan SLHVs	Lancashire	Yes
2654809	28/08/25	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated (Movement In baby)	External	East lancs HV team	Lancashire	Yes
2657968	08/09/25	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	Screen terminated (Movement In baby)	External	Blackpool community	Lancashire	Yes
2660884	12/09/25	2 - minor	2 - slight	Blood spot labelling error: another baby's bar-coded demographic sticker, detected prior to reporting	A newborn blood spot sample collected from Baby A on 12/09/25 was received in the Newborn Screening Lab, labelled with a barcoded NHS number demographic label belonging to Baby B.	External	Bolton community	Greater Manchester	Yes
2662272	13/09/25	2 - minor	2 - slight	Blood spot labelling error: another baby's bar-coded demographic sticker, detected prior to reporting	Newborn bloodspot sample received in the laboratory labelled with a demographic sticker which belonged to a different baby. The handwritten details on the card did not match the sticker.	External	Stockport Maternity Unit	Greater Manchester	Yes
2663938	18/09/25	2 - minor	2 - slight	Blood spot labelling error: barcoded demographic labels from two different babies affixed to sample	One NHS number was handwritten on the card, then a demographic sticker belonging to a different baby was placed over the top. This raises doubt as to which baby the blood spot sample belonged to so a repeat sample has been requested.	MFT	Wythenshawe Community Midwives	Greater Manchester	Yes

Appendix

Quarter 2 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	692	692	679	1	100%	98.1%	0.1%
Bolton NHS FT	1533	1531	1331	24	99.9%	86.8%	1.6%
East Lancashire Hospitals NHS Trust	1785	1783	1367	2	99.9%	76.6%	0.1%
Health Visitor	235	231	4	0	98%	1.7%	0.0%
Lancashire Teaching Hospitals NHS FT	1085	1085	986	16	100%	90.9%	1.5%
Manchester University NHS FT - SMH & RMCH & WH & NMGH	3400	3395	3283	23	100%	96.6%	0.7%
Not Stated	4	4	2	0	100%	50.0%	0.0%
Oldham (NCA)	1607	1606	1372	8	99.9%	85.4%	0.5%
Southport & Ormskirk Hospital NHS Trust	141	141	112	1	100%	79.4%	0.7%
Stockport NHS FT	765	764	727	12	100%	95.0%	1.6%
Tameside And Glossop Integrated Care NHS FT	713	712	648	15	100%	90.9%	2.1%
University Hospitals of Morecambe Bay NHS FT	622	622	563	3	100.0%	90.5%	0.5%
Wrightington, Wigan and Leigh NHS FT	860	857	483	241	99.7%	56.2%	28.0%
Grand Total	**13442**	**13423**	**11557**	**346**	**99.9%**	**86.0%**	**2.6%**

Quarter 2 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	649	21	3	1	4	0.0%	95.7%	3.1%	0.4%	0.1%	0.6%
Bolton NHS FT	2	1296	65	7	5	13	0.1%	93.4%	4.7%	0.5%	0.4%	0.9%
East Lancashire Hospitals NHS Trust	5	1429	122	11	7	13	0.3%	90.0%	7.7%	0.7%	0.4%	0.8%
Health Visitor	0	3	0	0	0	182	0.0%	1.6%	0.0%	0.0%	0.0%	98.4%
Lancashire Teaching Hospitals NHS FT	3	978	44	4	0	9	0.3%	94.2%	4.2%	0.4%	0.0%	0.9%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3	3097	67	7	11	13	0.1%	96.8%	2.1%	0.2%	0.3%	0.4%
Not Stated	0	3	0	0	0	0	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%
Oldham (NCA)	6	1358	111	11	5	15	0.4%	90.2%	7.4%	0.7%	0.3%	1.0%
Southport & Ormskirk Hospital NHS Trust	1	120	9	1	0	4	0.7%	88.9%	6.7%	0.7%	0.0%	3.0%
Stockport NHS FT	0	697	26	2	2	6	0.0%	95.1%	3.5%	0.3%	0.3%	0.8%
Tameside And Glossop Integrated Care NHS FT	0	622	39	5	3	12	0.0%	91.3%	5.7%	0.7%	0.4%	1.8%
University Hospitals of Morecambe Bay NHS FT	1	588	12	0	1	0	0.2%	97.7%	2.0%	0.0%	0.2%	0.0%
Wrightington, Wigan and Leigh NHS FT	1	773	31	5	0	7	0.1%	94.6%	3.8%	0.6%	0.0%	0.9%
Grand Total	**22**	**11613**	**547**	**56**	**35**	**278**	**0.2%**	**92.5%**	**4.4%**	**0.4%**	**0.3%**	**2.2%**

Quarter 2 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	1424	17	1441	98.5%	98.8%	1.2%
East Lancashire Hospitals NHS Trust	1641	1652	7	1659	98.9%	99.6%	0.4%
Health Visitor	175	187	12	199	87.9%	94.0%	6.0%
Lancashire Teaching Hospitals NHS FT	1077	1078	0	1078	99.9%	100%	0.0%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3299	3309	28	3337	98.9%	99.2%	0.8%
Not Stated	3	3	1	4	75.0%	75.0%	25.0%
Oldham (NCA)	1484	1569	17	1586	93.6%	98.9%	1.1%
Southport & Ormskirk Hospital NHS Trust	128	136	4	140	91.4%	97.1%	2.9%
Stockport NHS FT	749	759	2	761	98.4%	99.7%	0.3%
Tameside And Glossop Integrated Care NHS FT	689	700	11	711	96.9%	98.5%	1.5%
University Hospitals of Morecambe Bay NHS FT	621	622	0	622	99.8%	100%	0.0%
Wrightington, Wigan and Leigh NHS FT	747	827	28	855	87.4%	96.7%	3.3%
Grand Total	12722	12955	127	13082	**97.2%**	**99.0%**	**1.0%**

Quarter 2 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	5	0	1	4	0	7	1	0	0	1	0	**20**
0302: too soon after transfusion (<72 hours)	0	4	5	0	0	15	0	0	0	0	0	0	1	25
0303: insufficent sample	1	7	23	2	11	17	0	28	3	14	10	4	8	**128**
0304: unsuitable sample (blood quality): incorrect blood application	0	1	1	0	1	2	0	3	0	0	0	0	2	**10**
0305: unsuitable sample (blood quality): compressed/damaged	3	14	14	1	7	26	0	15	1	6	9	9	6	**111**
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	1	2	3	0	4	0	1	0	1	1	0	3	**16**
0309: unsuitable sample: date of sample missing/not accurately recorded	1	4	9	0	6	3	0	7	0	0	0	0	4	**34**
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	2	0	0	0	0	0	0	1	0	1	0	**4**
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
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	5	28	56	6	26	56	0	61	5	22	20	15	23	**323**
Number of first samples received/ babies tested	679	1388	1590	130	1041	3193	3	1505	133	733	676	601	820	**12492**
Avoidable Repeat Requests Rate	**0.7%**	**2.0%**	**3.5%**	**4.6%**	**2.5%**	**1.8%**	**0.0%**	**4.1%**	**3.8%**	**3.0%**	**3.0%**	**2.5%**	**2.8%**	**2.6%**
Transfusion Repeats are not included in the Avoidable Repeat calculation														

Quarter 2 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	1	0	0	13	0	0	0	0	0	0	2	1	3	0	0	0	**20**
0302: too soon after transfusion (<72 hours)	0	5	0	0	1	0	1	0	4	0	3	0	0	11	0	0	0	25
0303: insufficent sample	1	8	0	4	89	0	2	0	3	1	0	12	1	0	2	2	3	**128**
0304: unsuitable sample (blood quality): incorrect blood application	0	0	0	1	3	0	1	0	1	0	0	2	1	0	0	0	1	**10**
0305: unsuitable sample (blood quality): compressed/damaged	1	2	0	1	91	0	0	0	3	0	0	3	2	3	0	3	2	**111**
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	1	0	0	9	0	2	0	1	0	0	0	0	1	0	0	2	**16**
0309: unsuitable sample: date of sample missing/not accurately recorded	0	0	0	0	29	0	0	0	1	0	0	2	2	0	0	0	0	**34**
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	0	0	0	0	0	0	**4**
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
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	2	12	0	6	238	0	5	0	9	1	0	21	7	7	2	5	8	**323**
Number of first samples received/ babies tested	59	163	14	78	11199	10	48	1	134	44	7	134	98	300	56	44	103	**12492**
Avoidable Repeat Requests Rate	3.4%	7.4%	0.0%	7.7%	2.1%	0.0%	10.4%	0.0%	6.7%	2.3%	0.0%	15.7%	7.1%	2.3%	3.6%	11.4%	7.8%	**2.6%**
Transfusion Repeats are not included in the Avoidable Repeat calculation																		