

Avoidable Repeat Rate for November 2025 for Newborn Blood Spot Screening - Manchester Laboratory

The avoidable repeat rate for samples received during November is displayed by Trust in Figure 1. The raw data is provided in Tables 2 and 3. The avoidable repeat rate is calculated by dividing the total number of avoidable repeats by the number of babies tested (i.e. first samples).

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

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

A list of trust codes is provided in Table 1.

Table 1

| Code | Trust Name |
|--------|--|
| RXL | BLACKPOOL TEACHING HOSPITALS NHS FOUNDATION TRUST |
| RMC | BOLTON NHS FOUNDATION TRUST |
| RXR | EAST LANCASHIRE HOSPITALS NHS TRUST |
| RXN | LANCASHIRE TEACHING HOSPITALS NHS FOUNDATION TRUST |
| RW3 | MANCHESTER UNIVERSITY NHS FOUNDATION TRUST – ST. MARY’S & RMCH |
| RM2 | MANCHESTER UNIVERSITY NHS FOUNDATION TRUST – WYTHENSHAW |
| NM-R0A | MANCHESTER UNIVERSITY NHS FOUNDATION TRUST – NORTH MANCHESTER |
| OL-RW6 | NORTHERN CARE ALLIANCE |
| RVY | SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST |
| RWJ | STOCKPORT NHS FOUNDATION TRUST |
| RMP | TAMESIDE HOSPITAL NHS FOUNDATION TRUST |
| RTX | UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST |
| RRF | WRIGHTINGTON, WIGAN AND LEIGH NHS FOUNDATION TRUST |

Figure 1 - Avoidable repeats by Trust – November 2025

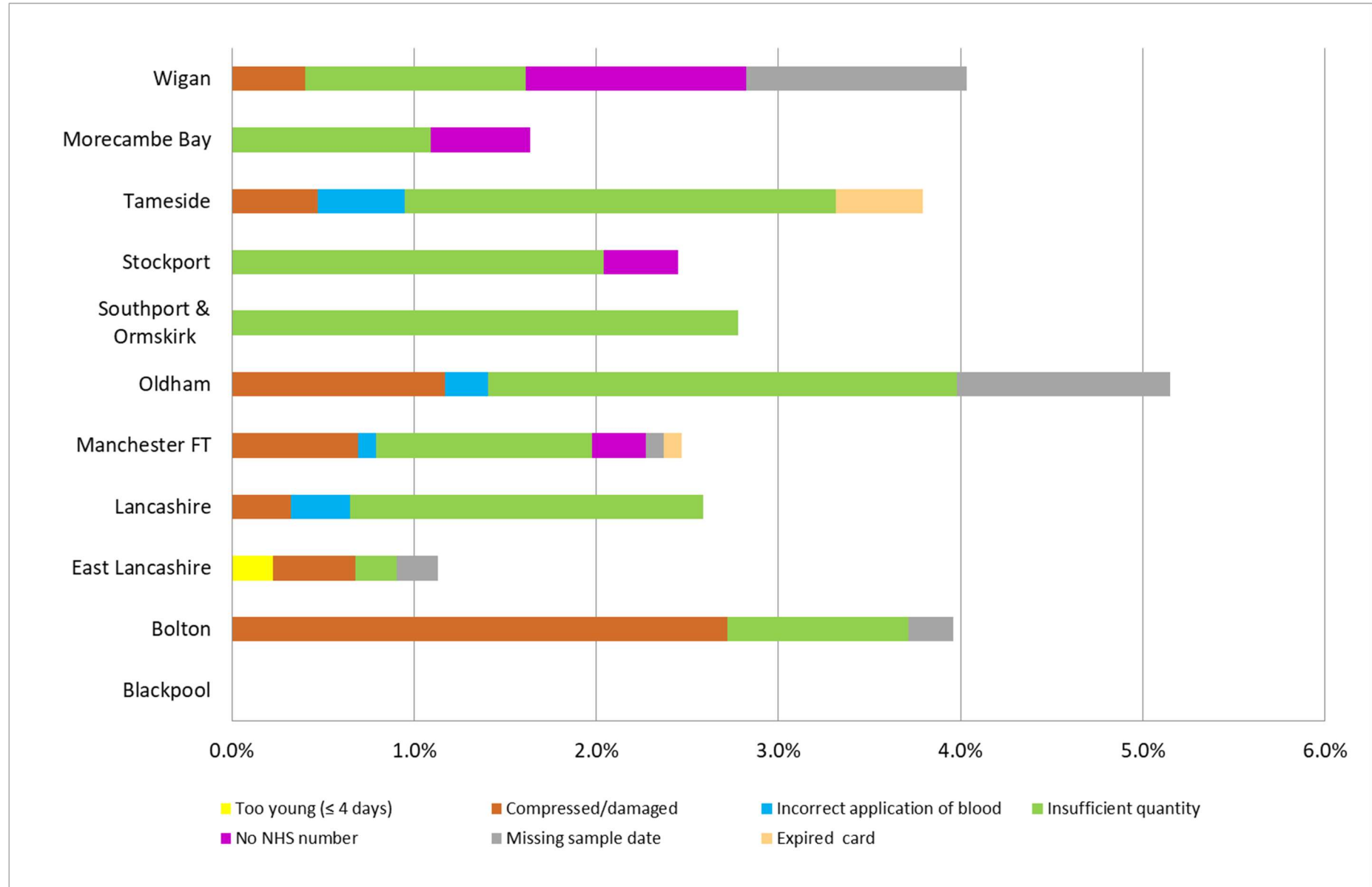


Table 2 – Avoidable repeats by Trust for November 2025

| Maternity Unit | Number of first samples received/ babies tested | Too soon after transfusion (<72 hours)* | Too young for reliable screening (≤ 4 days) | Blood spot damaged in transit | Bloodspot compressed/ damaged | Expired bloodspot card | Incorrect application of blood on card | Insufficient quantity | >14 days in transit | No NHS number | Contaminated (discrepant IRT) | Missing sample date | DOB missing | Number of Avoidable Repeat Requests | Avoidable Repeat Requests Rate |
|---|---|---|---|-------------------------------|-------------------------------|------------------------|--|-----------------------|---------------------|---------------|-------------------------------|---------------------|-------------|-------------------------------------|--------------------------------|
| Blackpool Teaching Hospitals NHS FT | 216 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Bolton NHS FT | 404 | 0 | 0 | 0 | 11 | 0 | 0 | 4 | 0 | 0 | 0 | 1 | 0 | 16 | 4.0% |
| East Lancashire Hospitals NHS Trust | 441 | 1 | 1 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 5 | 1.1% |
| Health Visitor | 66 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 2 | 3.0% |
| Lancashire Teaching Hospitals NHS FT | 309 | 1 | 0 | 0 | 1 | 0 | 1 | 6 | 0 | 0 | 0 | 0 | 0 | 8 | 2.6% |
| Manchester University NHS FT - SMH, RMCH, WH & NMGH | 1012 | 1 | 0 | 0 | 7 | 1 | 1 | 12 | 0 | 3 | 0 | 1 | 0 | 25 | 2.5% |
| Not stated | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Oldham (NCA) | 427 | 1 | 0 | 0 | 5 | 0 | 1 | 11 | 0 | 0 | 0 | 5 | 0 | 22 | 5.2% |
| Southport & Ormskirk Hospital NHS Trust | 36 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 2.8% |
| Stockport NHS FT | 245 | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 0 | 1 | 0 | 0 | 0 | 6 | 2.4% |
| Tameside And Glossop Integrated Care NHS FT | 211 | 0 | 0 | 0 | 1 | 1 | 1 | 5 | 0 | 0 | 0 | 0 | 0 | 8 | 3.8% |
| University Hospitals of Morecambe Bay NHS FT | 183 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 1 | 0 | 0 | 0 | 3 | 1.6% |
| Wrightington, Wigan and Leigh NHS FT | 248 | 0 | 0 | 0 | 1 | 0 | 0 | 3 | 0 | 3 | 0 | 3 | 0 | 10 | 4.0% |
| Grand Total | 3798 | 4 | 1 | 0 | 28 | 2 | 5 | 50 | 0 | 9 | 0 | 11 | 0 | 106 | 2.8% |

*Not included in calculation of avoidable repeats

Table 3 – Avoidable repeats by current hospital (in-patients) for November 2025

| Current Hospital | Number of first samples received/ babies tested | Too soon after transfusion (<72 hours)* | Too young for reliable screening (≤ 4 days) | Blood spot damaged in transit | Bloodspot compressed/ damaged | Expired bloodspot card | Incorrect application of blood on card | Insufficient quantity | >14 days in transit | No NHS number | Contaminated (discrepant IRT) | Missing sample date | DOB missing | Number of Avoidable Repeat Requests | Avoidable Repeat Requests Rate |
|-------------------------------------|---|---|---|-------------------------------|-------------------------------|------------------------|--|-----------------------|---------------------|---------------|-------------------------------|---------------------|-------------|-------------------------------------|--------------------------------|
| Burnley General Hospital | 57 | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 2 | 3.5% |
| Royal Bolton Hospital | 38 | 0 | 0 | 0 | 2 | 0 | 0 | 4 | 0 | 0 | 0 | 0 | 0 | 6 | 15.8% |
| Blackpool Victoria Hospital | 14 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Furness General Hospital | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| North Manchester General Hospital | 25 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 2 | 8.0% |
| Not in hospital | 3347 | 0 | 0 | 0 | 21 | 2 | 1 | 32 | 0 | 4 | 0 | 10 | 0 | 70 | 2.1% |
| Ormskirk & District General | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Royal Albert Edward Infirmary | 22 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Royal Blackburn Hospital | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Royal Lancaster Infirmary | 10 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 10.0% |
| Royal Manchester Childrens Hospital | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 100.0% |
| Royal Oldham Hospital | 53 | 1 | 0 | 0 | 2 | 0 | 1 | 4 | 0 | 0 | 0 | 1 | 0 | 8 | 15.1% |
| Royal Preston Hospital | 42 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 2.4% |
| Stepping Hill Hospital | 22 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 1 | 0 | 0 | 0 | 3 | 13.6% |
| St Mary's Hospital, Manchester | 106 | 1 | 0 | 0 | 3 | 0 | 0 | 4 | 0 | 2 | 0 | 0 | 0 | 9 | 8.5% |
| Tameside General Hospital | 18 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 2 | 11.1% |
| Wythenshawe Hospital | 34 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 2.9% |
| Grand Total | 3798 | 4 | 1 | 0 | 28 | 2 | 5 | 50 | 0 | 9 | 0 | 11 | 0 | 106 | 2.8% |

*Not included in calculation of avoidable repeats

Tips to help avoid rejection of samples:

- Collect sample on day 5 (date of birth is day 0)
- Check the expiry date on the card
- Wash the baby's heel with water to reduce the risk of a contaminated IRT result
- Ensure that blood spots are the size of the guide circles on the card
- Allow the blood to drop onto the card rather than touching the filter paper to the baby's heel
- Some brands of lancet device are more effective than others
- Extra blood spots, in addition to the 4 indicated by the guide circles, can be collected elsewhere on the card
- Repeat the test at the same visit if the spots are too small or have not soaked through to the back of the card
- Make sure there is a valid NHS number on the card

Conclusion

The avoidable repeat rate for November was 2.8%, which was lower than for October (2.9%). The most common reason for rejection of samples was insufficient blood followed by a compressed/damaged sample. One maternity unit met the achievable standard and two met the acceptable standard.