

WELSH HEALTH CIRCULAR



Llywodraeth Cymru
Welsh Government

Issue Date: 10 November 2015

STATUS: ACTION

CATEGORY: HEALTH PROFESSIONAL LETTER

Title: Arrangements and processes associated with post-mortem examination of a baby following a stillbirth

Date of Expiry / Review: Review of standards January 2017

For Action by:

Chief Executives Health Boards
Heads of Midwifery Health Boards
Heads of Pathology Services Health Boards

For Information:

Royal College of Midwives
Royal College of Obstetricians
and Gynaecologist
Chief Executive Public Health Wales
Royal College of Pathologists Wales

Action required by: 1 January 2016

See paragraph 5.

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Enclosure(s): Annex 1

1. I am writing to inform you of the publication of 'Standards for the Arrangements and Processes Associated with Post-mortem Examination of a Baby Following a Stillbirth'.
2. The standards have been developed by the National Stillbirth Working Group – a sub group of Maternity Network Wales with significant input from SANDS (the Stillbirth and Neonatal Death Society).
3. All health boards will be required to ensure that all parents in Wales who experience the stillbirth or late termination of an infant after 24 weeks gestation are offered a full post mortem examination (or appropriate limited examination), performed by an appropriately qualified Perinatal Pathologist.
4. Health boards will be required to carry out an annual audit of performance against these standards, coordinated via the Perinatal Pathology sub group (a sub group of the National Stillbirth Working Group) and reported to the National Stillbirth Working Group.
5. Health Boards will be expected to put plans in place to comply with the standards by 1 January 2016.
6. The standards will be reviewed in a year's time to ensure that they are up to date with current evidence.
7. The standards will be published on the Maternity Network web page <http://bit.ly/maternitynetworkwales>

Annex 1

Standards for the arrangements and processes associated with post-mortem examination of a baby following a stillbirth.

- 1) All parents in Wales suffering the stillbirth or late termination of an infant after 24 weeks gestation must be offered a full post mortem examination (or appropriate limited examination), performed by an appropriately qualified Perinatal Pathologist.
- 2) If full or limited post mortem examination is declined, all parents must be offered expert placental examination by an appropriately qualified Perinatal Pathologist.
- 3) The person obtaining consent for the post mortem must have undergone the all Wales consent for post mortem training and be registered on the National Database held at the paediatric pathology department at University Hospital of Wales (UHW).
- 4) Parents will be given the all Wales information leaflet “Deciding about a post mortem: Information for parents” as a minimum*. It is recommended that this should be complemented by the same leaflet produced by SANDS.
- 5) The all Wales consent documentation will be completed to a high standard and copies filed as followed:
 - One copy to the parents
 - One copy filed in the medical notes
 - One copy sent to the pathology department with the baby
- 6) All parents will be given a local contact number for the named person/s responsible for the coordination of the arrangements to transport the baby to UHW.
- 7) All Health Boards will have robust arrangements in place to transport babies to UHW in a timely manner and keep parents informed at all stages of the process.
- 8) Each Health Board should ensure that a designated named person/s is/are in place to monitor the progress of the report and communication with the family.
- 9) The post mortem report will be shared with families at the earliest opportunity within 12 weeks of the post mortem being completed.
- 10) The post mortem report will be discussed and shared with the parents by the Consultant Obstetrician responsible for the woman’s care.
- 11) This should take place in an appropriate environment away from clinical areas.
- 12) A minimum time of one hour should be allocated for this appointment.

13) A copy of the post mortem report should be made available to the parents should they wish.

14) The parents should be given details of who to contact should they wish to arrange a follow up appointment with the consultant in the event of them having further questions.

Auditable Standards:

- Number of women in total having stillbirth
- Number of these women offered a post mortem
- Number of these women accepted a post mortem

These standards will be audited by Health Boards and the audits will be coordinated via the Perinatal Pathology Sub Group (a sub group of the National Stillbirth Working Group) and reported to the National Stillbirth Working Group.

** This leaflet will soon be available and will replace the current leaflet; "A Guide to the Hospital Post-Mortem Examination of a Baby or Child". In the meantime, please use this leaflet.*