

A combined specialist Health Visiting & Sickle Cell /Thalassaemia service to improve the quality of care , outcomes and journey for sickle cell & thalassaemia babies and children 0-5 years



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Aim

Aim changed over the course of the project and the team have recently focused on the following aim: To see all women over 20weeks of gestation but under 22 weeks and 6 days within 24 hours (2 working days) of receiving the results/referral.

Why is this important to service users and carers?

Why is this QI project important:

- The parents will be keen to know the results during pregnancy (PND) and post giving birth in a timely manner to enable informed choice – Carry on with pregnancy or termination.
- It is crucial that they receive early and regular treatment for the affected infant as there is no easy cure.
- Individuals with sickle cell disease have a condition which expresses itself with bouts of severe pain.
 Individuals with Beta Thalassaemia have severe anaemia will require regular/monthly blood transfusions.
- They are at risk of developing serious life-threatening complications.

- 1. Text message reminders for all first ANC appointments.
- 2. Changed wording of next message
- 3. Text message sent to all follow-up appointments as well









- 1. Emergency clinic slots for 20+ weeks referrals
- 2.Phone call and text message reminders for these slots.
- 3. Slots changed to 20+weeks and <22 weeks 6 days.

Learning

- Don't confuse change ideas with tasks
- Tried many ideas ad hoc to reduce wait times
- Part of the problem was outside of the teams control bloods/referrals come from an external service but have an impact on age of gestation at booking
- Decided to focus on something could influence felt that needed to work on DNAs as this impacts the woman's opportunity to make an informed choice and/or receive key information.
- Collected data manually until automated data was accurate and available.





