



Newborn Bloodspot Screening Program Policy

1. Purpose

The *Newborn Bloodspot Screening Program Policy* outlines roles, responsibilities and reporting requirements for Health Service Providers providing maternity, neonatal, clinical specialist and pathology services for the WA Newborn Bloodspot Screening Program.

The aim of the WA Newborn Bloodspot Screening Program is to improve the health of babies by identifying those at risk of developing a serious condition early, generally before symptoms present.

This Policy should be read in conjunction with the supporting information [Newborn Bloodspot Screening National Policy Framework \(2018\)](#) which provides best practice guidance on Program implementation.

This Policy is a mandatory requirement under the *Public Health Policy Framework* pursuant to section 26(2)(c) of the *Health Services Act 2016*.

2. Applicability

This Policy is applicable to Health Service Providers that provide maternity, neonatal, clinical specialist and pathology services.

To the extent that the requirements contained within this Policy are applicable to the services purchased from contracted health entities, Health Service Providers are responsible for ensuring these requirements are accurately reflected in the relevant contract and managed accordingly.

3. Policy requirements

Health Service Providers providing maternity, neonatal, clinical specialist and pathology services must have local policies and procedures in place that align with the requirements of this Policy.

3.1 PathWest Laboratory Medicine WA

PathWest Laboratory Medicine WA must provide the following services for the WA Newborn Bloodspot Screening Program:

- administrative and management services
- pathology services
- quality assurance.

These services must be provided as outlined in the *Newborn Bloodspot Screening Program Procedure*.

PathWest Laboratory Medicine WA must have procedures in place that outline:

- the responsibilities of the main contact position for the WA Newborn Bloodspot Screening Program
- how they provide administrative support to Health Service Providers
- how they manage newborn bloodspot screening results including:
 - the notification to Health Service Providers about babies requiring repeat testing
 - the referral of babies to clinical specialist services
 - the recording and reporting of data for compliance monitoring
- the pathology procedures for processing newborn bloodspot screening cards
- consideration of new conditions and, if approved, the development of an implementation plan for its timely inclusion into the WA Newborn Bloodspot Screening Program.

3.2 Health Service Providers providing maternity and/or neonatal services

Health Service Providers that provide maternity and/or neonatal services must have procedures in place outlining the roles and responsibilities of staff within their organisation as outlined in the *Newborn Bloodspot Screening Program Procedure*. Health Service Providers must:

- nominate at minimum one contact position at each site who will be the point of contact with PathWest Laboratory Medicine WA
- ensure optimal collection of bloodspot samples for all eligible newborns at 48-72 hours post birth
- ensure sample collection staff are appropriately trained and have access to relevant educational resources.

3.3 Health Services Providers providing clinical specialist services

Health Service Providers that provide clinical specialist services must have procedures in place detailing the roles and responsibilities within their organisation as outlined in the *Newborn Bloodspot Screening Program Procedure*. Health Service Providers must:

- provide clinical guidance for the care of any baby referred to their service through the WA Newborn Bloodspot Screening Program
- review diagnostic outcomes, in conjunction with PathWest Laboratory Medicine WA, for all babies with abnormal screening results referred to their specialty
- report any baby or child that presents after the screening period with a newborn bloodspot screened condition to the Newborn Bloodspot Screening Program.

4. Compliance monitoring

Health Service Providers are responsible for ensuring compliance with this Policy.

The System Manager, through the Office of Population Health Genomics, Department of Health will review policies, procedures and reported data to ascertain compliance with this Policy.

PathWest Laboratory Medicine WA compliance requirements

PathWest Laboratory Medicine WA must use the [Performance Indicators Form - Newborn Bloodspot Screening Program](#) to submit annual reports to the Department of Health via the Office of Population Health Genomics genomics@health.wa.gov.au.

5. Related documents

The following documents are mandatory pursuant to this Policy:

- [Performance Indicators Form - Newborn Bloodspot Screening Program](#)
- [Newborn Bloodspot Screening Procedure](#)

6. Supporting information

The following information is not mandatory but informs and/or supports the implementation of this Policy:

- [WA Newborn Bloodspot eLearning Package](#) (King Edward Memorial Hospital)
- [WA Newborn Bloodspot Screening brochure](#) (Healthy WA)
- [Your baby's newborn bloodspot screening test](#) (Healthy WA)
- [WA Newborn Bloodspot Screening Program](#) (WA Department of Health)
- [Newborn Bloodspot Screening National Policy Framework \(2018\)](#)
- [National Health Genomics Framework and Implementation Plan 2018-2021](#)
- [Policy Recommendations for Screening for Specific Disorders 2019](#) (Human Genetics Society of Australasia)
- [National Strategic Action Plan for Rare Diseases 2020](#)

7. Definitions

The following definition(s) are relevant to this Policy.

Term	Definition
Abnormal result	A result of the screening test that indicates the newborn is at increased risk of having a tested condition.
Bloodspot sample	The blood that is taken from the heel prick of a newborn.
Bloodspot card	The card on which the bloodspot samples are collected and identifying information about the baby being screened is entered.
Consent	The decision by an individual to undergo a medical intervention. Consent to participate in newborn bloodspot screening is provided by a parent/guardian on behalf of the baby.
Diagnosis	The confirmation of the presence of a condition, which includes evaluating observed signs and symptoms.
False negative	A test result that incorrectly indicates a person does not have a condition when they do have that condition.
Neonatal	Relating to newborn babies.
Newborn	A baby from the time of birth up to 28 days of age.
Newborn bloodspot screening	This includes all processes associated with taking a bloodspot sample from newborn babies and testing it to identify babies at increased risk of a number of rare but serious conditions. It is also known as the Guthrie test and the 'heel-prick test'.

Sample collection staff	A suitably trained professional who takes the newborn bloodspot sample including midwives, nurses, child health nurses, Aboriginal Health Practitioners and phlebotomists.
Unsuitable sample	A bloodspot sample that cannot be used by the laboratory for testing because the quality of the bloodspot or the result has been compromised. This can occur from events such as incorrect timing of bloodspot sample collection, incorrect method of collection and/or mishandling of the bloodspot card post-collection.

8. Policy contact

Enquiries relating to this Policy may be directed to:

Title: Manager, Screening Policy

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9. Document control

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10. Approval

Approval by	Nicole O'Keefe, Assistant Director General, Strategy and Governance Division, Department of Health
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