

Consultation on draft guideline – deadline for comments 5pm on 5 January 2021 email: neonatalinfection@nice.org.uk

|   | Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly.  |
|---|--|
|   | We would like to hear your views on the draft recommendations presented in the guideline, and any comments you may have on the rationale and impact sections in the guideline and the evidence presented in the evidence reviews documents. We would also welcome views on the Equality Impact Assessment.   |
|   | In addition to your comments below on our guideline documents, we would like to hear your views on these questions:  1. Which areas will have the biggest impact on practice and be challenging to implement? Please say for whom and why.  2. Would implementation of any of the draft recommendations have significant cost implications?  3. What would help users overcome any challenges? (For example, existing practical resources or national initiatives, or examples of good practice.)  4. Due to a lack of evidence, the committee was not always able to make recommendations for specific antibiotics (or for the duration of treatment). To what extent is that likely to result in variation in practice?  5. Please tell us if there are any particular issues relating to COVID-19 that we should take into account when finalising the guideline for publication. |
|   | See <u>Developing NICE guidance: how to get involved</u> for suggestions of general points to think about when commenting.   |
| Organisation name – Stakeholder or respondent (if you are responding as an individual rather than a registered stakeholder please leave blank): | Association for Improvements in the Maternity Services (AIMS)  |
| Disclosure Please disclose any past or current, direct or indirect links to, or   | None   |



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| funding from<br>tobacco inc                      | •  |   |   |  |  |  |  |
|--|--|---|---|--|--|--|--|
| Name of commentator person completing form: Type |  | Anne Glover   |   |  |  |  |  |
|  |  | [office use only]                                       |   |  |  |  |  |
| Commen<br>t number                               | [guideline,<br>evidence<br>review A, B, C<br>etc., methods<br>or other<br>(please specify<br>which)] | Page number Or 'general' for comments on whole document | Line number Or 'general' for comments on whole document | Comments  Insert each comment in a new row.  Do not paste other tables into this table, because your comments could get lost – type directly into this table.  |  |  |  |
| 1  | Guideline  | General   | General   | AIMS would like to suggest that when there is mention of 'increased risk' throughout the document, it would be beneficial for the reader to know how much the risk is increased and the absolute risk, what the chance is actually of the problem occurring e.g. increased from 1 in 1000 to 2 in 1000.  |  |  |  |
| 2  | Guideline  | General   | General   | AIMS is disappointed to find that there is consistently no mention of the side-effects of the antibiotics. Parents and carers need to know and understand any consequences of any drugs being offered to themselves or to their baby.  |  |  |  |
| 3  | Guideline  | General   | General   | AIMS is concerned to note that there is no mention of any individualised care plan for mother or baby.   |  |  |  |
| 4  | Guideline  | 6   | 1   | In the box under Recommendations, it should say "Parents and carers have the right to <b>make decisions about their baby's health and care</b> , as set out in the NHS Constitution and summaries in NICE's information on making decisions about your care. They must therefore be involved in planning their baby's health and care, and be given information and support to enable them to <b>make informed decisions about care options.</b> " |  |  |  |
| 5  | Guideline  | 6   | 11  | AIMS would like to see the medical professionals doing more than just 'talking' to the parents and carers:  - to acknowledge that this is an extremely worrying time for parents and carers  - clarification of what neonatal infection is  - implications of neonatal infection  - step by step guidance of treatment  - step by step guidance on the effects of the treatment  - agree an individualised care plan with the parents and carers   |  |  |  |

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| 6  | Guideline         | 7  | 4     | Can you please turn around the sentence to read 'Discuss with the parents' at the beginning. And it should say "the recommendation (or the offer) of antibiotics" rather than "If giving antibiotics" - which assumes they will be given.  |
|----|-------------------|----|-------|--|
| 7  | Guideline         | 7  | 10    | AIMS is asking for any potential side effects to be explained to the parents and carers, and an individualised care plan to be included here.  |
| 8  | Guideline         | 7  | 16    | AIMS would like to see mention of what has already been discussed with the mother, and what has already been offered.  |
| 9  | Guideline         | 8  | 24    | Please include what long-term support or care pathway will be provided, if relevant, at this stage.  |
| 10 | Guideline         | 10 | 11    | AIMS is concerned to see that antibiotics will be offered to all women in preterm labour. AIMS would like to see more reasoning here and evidence base, eg what if mum and baby are both healthy, there are no other risk factors, due dates are not 100% accurate.                                    |
| 11 | Guideline         | 12 | 4     | We would like to see more clarification on how antibiotics are administered. The implication is that antibiotics are given continually but there is not mention of how, how often, etc.  |
| 12 | Guideline         | 12 | 8     | AIMS is concerned that immediate delivery is offered without further testing for current evidence of an infection. The implication is unnecessary interventions/caesarean births with all the additional stress to parents and carers, longer healing period for mothers, and additional costs to NHS. |
| 13 | Guideline         | 13 | 5     | Could Box 1 be placed here where it is relevant.   |
| 14 | Guideline         | 13 | 13    | Could Box 2 be placed here where it is relevant.   |
| 15 | Guideline         | 13 | 11    | AIMS is disappointed that there is no mention of discussion with the parents and carers as a priority.   |
| 16 | Guideline         | 15 | Box 2 | Could you give a brief explanation of what Apnoea is, as not all parents and carers will recognise this term.  |
| 17 | Guideline         | 17 | 11    | Could you expand and clarify what information and advice is given to parents and carers.   |
| 18 | Guideline         | 19 | 13    | AIMS would like to suggest that you explain to the parents and carers what a blood culture is and what happens, procedure, implications, results.  |
| 19 | Guideline         | 19 | 16    | We find this comment 'if it is safe to do so' unhelpful and unmeaningful when it comes to doing a lumbar puncture. Who and how is this decided. Please also explain the procedure to the parents and carers, and the risk involved to the baby.  |
| 20 | Guideline         | 26 | 6     | AIMS would like to see clarification of 'who' is reviewing the baby.   |
| 21 | Rational & Impact | 37 | 20    | AIMS would like to see how the recommendation might affect practice. There is confusion over the term 'immediate delivery'. Impact could be further interventions. If caesarean, then AIMS would like to see reference to the differences in after birth care required.                                |
| 22 | Rational & Impact | 39 | 20-21 | AIMS would like more explanation given of what is the impact of more antibiotics being given to babies when maternal infection is not strongly suspected.  |
| 23 | Context           | 49 | 1-8   | This summary on the importance and significance of Neonatal Infection could be viewed at the beginning of the report to explain what the guidelines are all about. AIMS suggests including some figures or a percentage to illustrate the significance and the concern.                                |

Insert extra rows as needed



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### **Checklist for submitting comments**

- Use this comment form and submit it as a Word document (not a PDF).
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include page and line number (not section number) of the text each comment is about.
- Combine all comments from your organisation into 1 response. We cannot accept more than 1 response from each organisation.
- Do not paste other tables into this table type directly into the table.
- Ensure each comment stands alone; do not cross-refer within one comment to another comment.
- Clearly mark any confidential information or other material that you do not wish to be made public. Also, ensure you state in your email to NICE that your submission includes confidential comments.
- **Do not name or identify any person or include medical information about yourself or another person** from which you or the person could be identified as all such data will be deleted or redacted.
- Spell out any abbreviations you use
- For copyright reasons, **do not include attachments** such as research articles, letters or leaflets. We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments, but it must be received by the deadline.
- We do not accept comments submitted after the deadline stated for close of consultation.

You can see any guidance that we have produced on topics related to this guideline by checking NICE Pathways.

**Note:** We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees.

#### **Data protection**

The information you submit on this form will be retained and used by NICE and its advisers for the purpose of developing its guidance and may be passed to other approved third parties. Please do not name or identify any individual patient or refer to their medical condition in your comments as all such data will be deleted or redacted. The information may appear on the NICE website in due course in which case all



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