



Checklist for Midwives and NICU staff caring for women open to Change, NHS Foundation Trust Grow, Live (CGL) and their babies at risk of Neonatal Abstinence Syndrome (NAS)

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ACTION: - (Please complete for all women open to Change, Grow, Live (CGL)	e l	Date / Time
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Midwifery responsibilities on admission to Delivery Suite/Blakeney		
Ensure CGL are informed of admission in order to confirm opiate substitute treatment (OST) dose and		
arrange for CGL to update community pharmacy. CGL 01603 514096.		
Monday- Friday (8am-4pm) NNUH Substance Misuse Nurses can be contacted on x 6489 for advice or		
support. NNUH Substance Misuse Liaison Team liaises daily with CGL & is also able to confirm OST doses.		
Checklist for: Midwives and NICU Staff Caring for women open to CGL and their Babies at Risk of NAS Author/s: Lisa Kelly and Marita Isaac		1

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Any medication brought in should be stored in the CD cupboard and an in-patient prescription commenced by the obstetric SHO.	
Inform Nurse in Charge on NICU x2866.	
Inform Safeguarding Team x2833.	
Inform Family Care Team on NICU – x 5489.	
Inform Skylark Team X5931 SkylarkTeam@nnuh.nhs.uk	
Ensure patient health records are created for the baby by Blakeney receptionist.	
Advise parents that it is preferable for mother and baby to stay for a minimum of 72 hours so that the baby can be monitored for possible late onset symptoms of NAS.	
Ensure obstetric staff offer maternal Hepatitis C testing for appropriate women if not undertaken antenatally.	
Midwifery / Nurses responsibilities for those caring for baby on Delivery Suite, Blakeney or NICU	
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The baby's withdrawal score should be assessed and scored according to the Joint Trust Guideline for The Management of Neonatal Abstinence Syndrome JCG0008 – ID: 1158.	<u> </u>	
For infants of Hepatitis B positive mothers: the neonatal team will identify the neonatal alert from the maternal and neonatal medical records. This will have the individualised proforma attached with the plan of care for the baby		

Midwifery / Nurses responsibilities for those caring for baby on Delivery Suite, Blakeney or NICU	Signature, Print name and role	Date / Time
At Risk Babies		
Other babies born at risk will be offered Hepatitis B immunisation – these should include babies born		
to:		
1. Primary caregiver(s) with a history of current or previous substance abuse e.g. heroin, crack cocaine		
Primary caregiver(s) on Methadone Programme/Opiate Substitute Treatment		
3. Human immunodeficiency virus (HIV) positive mothers		
4. Hepatitis C Virus (HCV) positive mothers		
5. Mothers from high HBV prevalence area with unknown HBV status (a country >8%).		
http://www.medic8.com/travel/viral-hepatitis-b.htm		
6. Father known hepatitis B carrier.		
Inform Paediatric SHO to seek consent and administer Hepatitis B vaccine ASAP after birth and within		
24 hours. (See Guideline for the Immunisation of Infants at Risk of Hepatitis B infection CA2017 ID: 1183)		





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Ensure Paediatric SHO completes Neonatal Hepatitis B Immunisation Form and a copy is sent to GP, original is filed in patient care records and a copy is given to parents/s		
Ensure that a Cranial Ultrasound is requested for any neonate exposed to cocaine/crack cocaine in utero.		
Responsibilities on discharge from Blakeney		
Contact CGL Practitioner to update re: discharge plan and confirm arrangements around ongoing OST prescribing. CGL 01603 514096.		
Caution: If mother is discharged home from Blakeney out-of-hours, ensure that the community pharmacy has been contacted to reinstate prescription. TTO's may be prescribed to cover the time until community prescription is reinstated.		
If there are any safeguarding concerns, photocopy maternal record and neonatal record and retain the copies in respective patient health records.		
If mother has been discharged from Blakeney and is staying on NICU Family Unit, please liaise with the NNUH Substance Misuse Liaison Team and hospital pharmacy re: mother being able to collect OST from hospital pharmacy.		
Remove wristband. CD's- Please be aware that some women collect their OST weekly or fortnightly. If they bring a supply into hospital and this is stored in the CD cupboard, please ensure there is a care plan in place before discharge for either returning the CD to the patient or pharmacy.		
All staff should be aware of the following information		
 Safeguarding Children information can be found on E3. Any correspondence from CGL will also be filed in E3 attachments. 		
 Any safeguarding children concerns should be recorded and discussed with Safeguarding Children Team & Children's Services. 		
 The mother is advised that breastfeeding is generally encouraged unless she is confirmed as HIV positive. 		
 If the baby is admitted to NICU for treatment, parents should be advised that weaning off treatment may take 8 weeks. 		