



**South Carolina Department of Health and Environmental Control**

*Promoting and Protecting the Health of the Public and the Environment*

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**On Time / Every Time**

**A Partnership of Safety and Reliability**

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**for Newborn Screening**



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## Background

Milwaukee Journal Sentinel series on NBS:  
spotlight on processes that could lead to  
delayed identification of affected infants

Public records request sent to all state NBS  
programs June 2013

Articles published November 2013

SC data released in mid-January



## Background

Data from 2013 revealed that 33.75% of specimens took 5 days or longer for receipt at the laboratory (range: 2.21% to 70.59%)

Distance from hospital to laboratory not an issue:

Hospital with best %-126 miles from lab

Hospital with worst %-117 miles from lab

Hospital closest to lab (6 miles) 24.41% of specimens took 5 days or longer



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## Background

South Carolina Hospital Association (SCHA) and South Carolina Department of Health and Environmental Control (DHEC) entered into a formal partnership to investigate reasons why and implement solutions that could have immediate impact



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# On Time/ Every Time

## A Rapid Cycle Improvement Collaborative

Kickoff – February 10, 2014

2 Webinars – March 5 and May 1

Office Hours – March 25

Monthly data reports through Feb 2015

Quarterly data reports through 2015



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## South Carolina Statewide Goal

All SC Birthing Hospitals will submit 100% of their newborn screening tests to the SC DHEC Bureau of Laboratories within 24 hours of collection (within 120 days from February 10, 2014 Kickoff).



## Challenge to Hospitals

Create improvement team

Identify Newborn Screening Point of Contact and  
email to: [NewbornScreening@dhec.sc.gov](mailto:NewbornScreening@dhec.sc.gov)

Review and examine all steps to identify specific  
gaps in the screening process

Monitor progress through monthly data reports

Seek assistance as necessary



## **NBS Program Changes**

DHEC NBS staff accomplished the following major program changes within 30 days of the data release:

- Modified urgent abnormal test reporting protocol for Saturdays/holidays

- Revised Official Departmental Instructions that serve as legal underpinning for hospital/medical provider responsibilities for NBS

- Implemented new supplemental data system to allow documentation of “postmark” for each initial specimen





## **NBS Program Changes**

Further NBS program refinements included:

24/7 availability for courier drop off

Improved informational signage at lab

NBS dedicated email monitored 6 days/week

Phased implementation of Saturday/holiday services

- 2 new lab FTE's approved/hired

- 1 new follow-up FTE approved (interviews completed)



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# Saturday/Holiday Lab and Follow-up Services

Limited lab and follow-up services began March 1

Full day activities began May 3 with modifications to normal lab and follow-up services based upon recommendations from specialty medical providers

Follow-up able to utilize Epi on-call to assist if required

Occurred before new lab or follow-up staff on board



## Hospital Improvement to Date

Average % Specimens that are postmarked within 24 hours of collection (*Saturday collection excluded*)

February 2014:	55.68%
March 2014:	72.36%
April 2014:	77.39%
May 2014:	79.98%
June 2014:	80.26%
July 2014:	83.67%



## Hospital Improvement to Date

As of July 2014, 10.02 % specimens took 5 days or longer for receipt at the laboratory

Hospital with best initial %- 0% now 5 days or longer

Hospital with worst initial %- 6.33% now 5 days or longer

Hospital closest to lab- 0.78% now 5 days or longer



## Future Plans

Continue monthly data reports

Implement new data system

Seek different avenues to recruit mission critical positions (Lab Director-Chemistry/NBS Division)

Utilize new NBS Follow-up Coordinator to work directly with hospital staff



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## Acknowledgements

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SCHA and member hospitals