Tasmanian Safer Baby Bundle Implementation Project

Ana Navidad
Research Project Midwife

Office of Chief Nurse and Midwife Clinical Quality, Regulation and Accreditation Department of Health





SBB Implementation Project Context

International

- Stillbirth rates decreasing across developed countries: Iceland, New Zealand, United Kingdom
- Australian rates largely unchanged

National Stillbirth Implementation Plan

- Perinatal Society of Australia and New Zealand (PSANZ)
 Stillbirth and Neonatal Death Alliance
- National Health and Medical Research Council (NHMRC)
 Centre of Research Excellence (CRE) in Stillbirth

Jurisdictional

- Tasmanian Department of Health- Safer Baby Bundle Implementation Project (Co Sponsors)
 - Chief Nurse Midwife Associate Professor Francine Douce
 - Chief Medical Officer Professor Tony Lawler

Tasmanian Health Service (THS)

- Medical and Midwifery Directors of Women's and Children's Services (WACS) across 3 regional hospitals
- THS multi disciplinary clinical champions/leads

Key Stakeholders

- Bereaved Families- Consumer representatives
- Council of Obstetric Perinatal Mortality and Morbidity (COPMM)
- Smoking Cessation Services (and more)

What is the Safer Baby Bundle?

The Safer Baby Bundle is a national initiative with five evidence-based elements to address key areas where improved practice can reduce the number of stillborn babies.



Smoking Cessation



Fetal Growth Restriction (FGR)



Decreased Fetal Movement (DFM)



Side Sleeping



Timing of Birth



GOAL

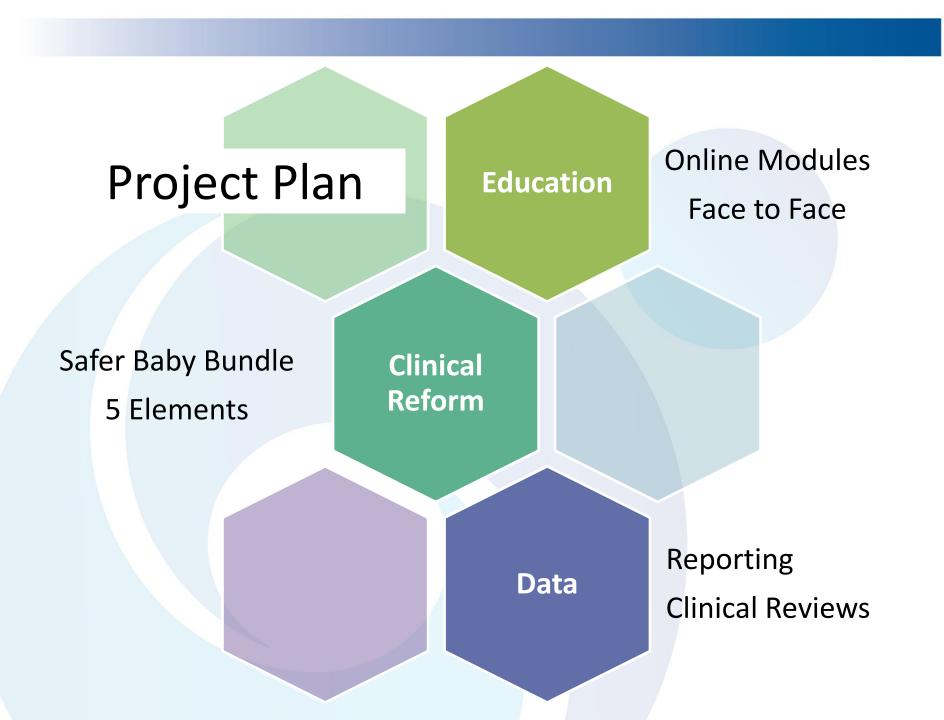


Reduce stillbirth from 28 weeks' gestation by 20% by 2023.









Project Measures

SBB and IMPROVE Education

Safer Baby Bundle

Five Elements
Implemented

Smoking Cessation

Autopsy Rates

Investigations

Data

Audits

Reports

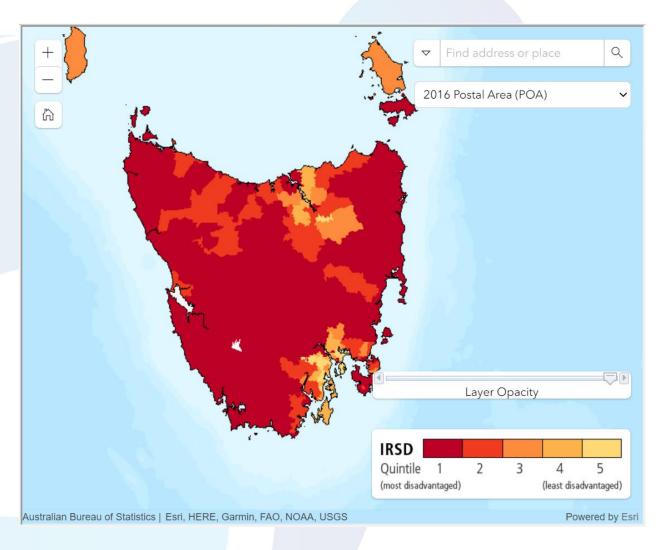
Tasmanian Context

Distribution of Index of Relative Socio-economic Disadvantage (IRSD)

SEIFA scores (Source Australian Bureau of Statistics)

Socioeconomic disadvantage more common

Women living in the most disadvantaged areas of Australia (quintiles I and 2) were 25% more likely to have a perinatal death than women living in the least disadvantaged areas (quintiles 4 and 5)



Exerts of Figure 3.1: Perinatal deaths by select demographics of the mother

AIHW report: Stillbirths and neonatal deaths in Australia 2017 and 2018 combined

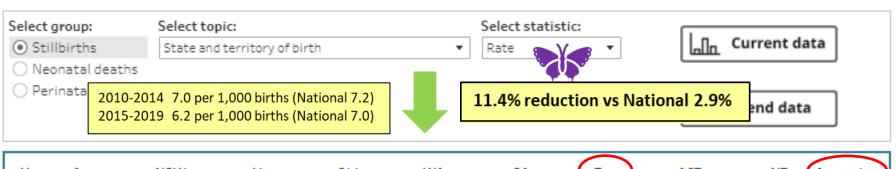
Socioeconomic disadvantage more common

Women living in the most disadvantaged areas of Australia (quintiles 1 and 2) were 25% more likely to have a perinatal death than women living in the least disadvantaged areas (quintiles 4 and 5) Figure 3.1

	Perina	tal deaths	Stillbirths			
		Deaths per				
	Number	1,000 births	Deaths per 1,000 births			
Total	5,808	9.5	7.0			
State or territory of birth						
New South Wales	1,656	8.7	6.2			
Victoria	1,754	11.1	8.5			
Queensland	1,100	9.1	6.4			
Western Australia	576	8.5	6.8			
South Australia	353	9.1	6.8			
Tasmania	100	9.0	6.0			
Australian Capital Territory	147	11.9	9.1			
Northern Territory	122	16.0	10.5			
Remoteness of mother's usual residence						
Major cities	4,017	9.2	6.8			
Inner regional	943	9.7	7.0			
Outer regional	535	11.0	7.8			
Remote	90	10.1	7.6			
Very remote	100	18.1	12.1			
Not stated/unable to be assigned	123					
Disadvantage quintile of mother's area of	usual residence					
Quintile 1 (Most disadvantaged)	1,446	12.0	8.6			
Quintile 2	1,168	10.1	7.5			
Quintile 3	1,147	8.8	6.3			
Quintile 4	1,067	8.7	6.6			
Quintile 5 (Least disadvantaged)	848	7.8	6.1			
Not stated/unable to be assigned	132					

AIHW report: Stillbirths and neonatal deaths in Australia 2019

Perinatal mortality rate per 1,000 births by state and territory of birth, 2010 to 2019

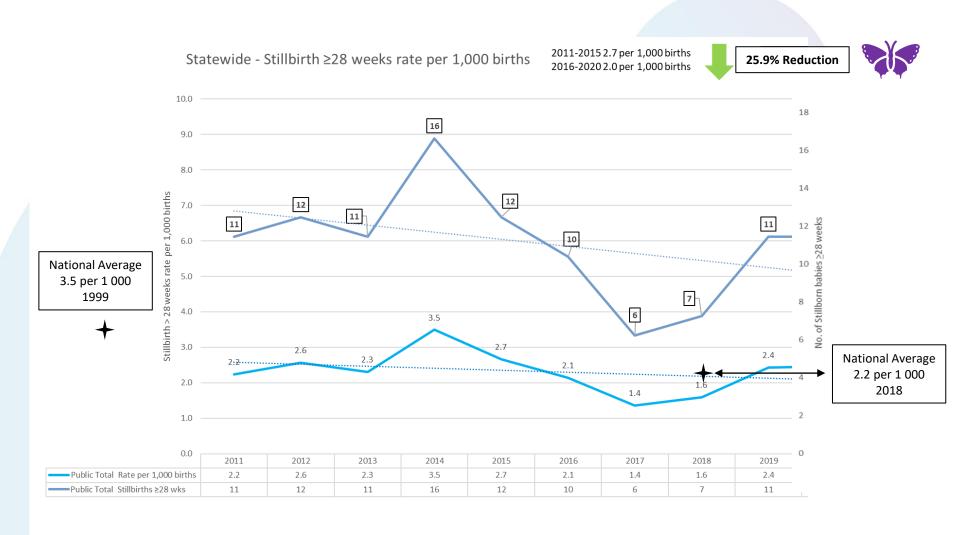


Year	=	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Australia
2010		5.8	10.1	6.7	7.0	5.9	6.8	11.3	8.8	7.3
2011		5.9	9.9	6.4	8.4	7.4	5.4	7.7	7.1	7.4
2012		6.0	8.9	7.2	7.0	6.7	7.6	8.5	6.7	7.2
2013		5.8	9.5	6.5	6.1	6.8	7.0	6.5	11.6	7.1
2014		5.5	8.8	6.8	7.1	7.0	8.3	9.5	8.1	7.0
2015		6.2	8.3	6.6	6.4	7.6	6.0	7.3	9.7	7.0
2016		5.5	8.3	6.4	6.5	6.8	7.3	7.6	8.5	6.7
2017		6.1	8.5	6.8	6.9	6.6	5.6	10.3	9.4	7.1
2018		6.2	8.6	6.0	6.7	6.9	6.5	7.8	11.9	7.0
2019		5.9	9.0	7.7	6.6	5.8	5.6	6.7	11.1	7.2

THS Quality Improvement (QI) context 2010-Current



Statewide (public): Stillbirth rates ≥28 weeks



SBB balance measures



Do No Harm

SBB a IMPR(Educa Modu Element 5
Timing of Birth

Single risk vs multiple risks Relative risk vs actual risk

Smoking Cessation Reports