



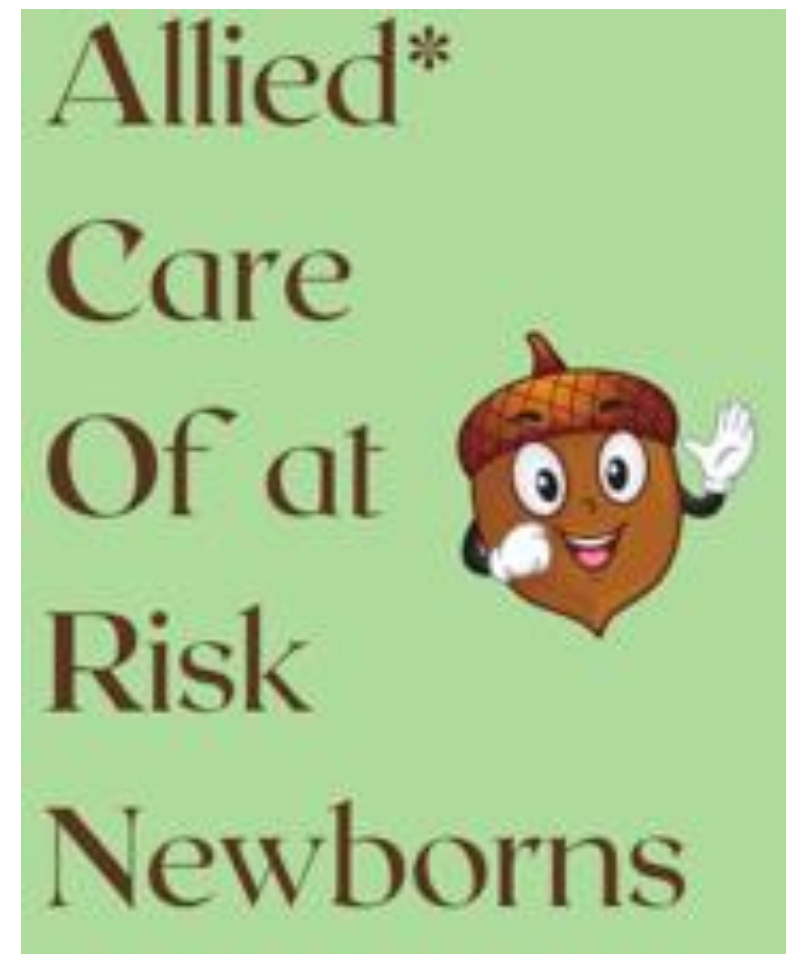
Review of Year One of ACoRN Clinic: Post Discharge Developmental Surveillance of Very Low Birth Weight Low Gestational Age Infants

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INTRODUCTION

In 2022 a structured inpatient developmental initiative (ACoRN: Allied Care of at Risk Newborns) was established in NICU to support at-risk infants. Multidisciplinary developmental follow up post discharge is recommended for these infants as they are at a higher risk of developmental delays as measured at age 2 years. The ACoRN outpatient clinic was established for ongoing developmental surveillance by Physiotherapy (PT), Speech and Language Therapy (SLT), Dietetics, Psychology, Medical Social Work (MSW), in conjunction with Medical and Nursing teams.



RESULTS

- 44 high risk inpatients were reviewed in 2022, 35 were eligible for follow up.
- The 3 month CGA follow up assessments commenced June 2022, 14 infants were eligible, 11 were completed by Dec.
- The 6 month CGA follow ups started Oct 2022, 6 were eligible 2 were completed.
- There were 3 non-attenders.
- SLT and PT consistently attended all appointments. Dietitian consults were required for 5 appointments. MSW were available for consultation. Time requirements for SLT and PT at each appointment is in Table 1.
- Issues included clinic space and administration.

AIMS

1. To establish an Outpatient Developmental Surveillance Clinic for at-risk infants.
2. To capture clinic activity and therapist time required.
3. To establish a schedule of standardised testing.

METHODS

All infants born in the hospital catchment area and enrolled on the 2022 ACoRN inpatient developmental programme were eligible for follow up. The clinic offered screening at 3/6/9 /12/18/24 months corrected age. Appointment dates were calculated based on corrected gestational age (CGA). 3 and 6 months appointments only are included in this review.

Table 1: SLT and PT Clinic Time	SLT (hours)	Physiotherapy (hours)	Total Therapist time
Direct clinical time per appointment	1-1.5	1-1.5	
Indirect therapist time per appointment	1-1.5	1-1.5	
Total time per appointment	2.5	2.5	5 hours
Anticipated time per child in 18 months (5 appointments)	12.5	12.5	25 hours
Estimated total time per 40-50 children with average 2 appointments in one year (based on 2022 inpatient figures)	200-250	200-250	400-450 hours

CONCLUSION

The ACoRN OPD clinic is comprehensive and supportive allowing early management of developmental delays and facilitating timely onward referral. This in in keeping with international recommendations for at-risk infants. Staffing and clinic space are a significant issue as numbers increase and service development evolves.