

Best Start 6W pēpi Tool

End User Guide

Best Start background

Best Start Kōwae (modules) provides tools which enable consistent comprehensive best practice assessment of health and wellbeing needs of a hāpū māmā and her pēpi throughout the pregnancy utilising appropriate enquiry, investigations, management, and referral to support services.

The Best Start 6W pēpi has been constructed by considering what constitutes best practice in six (6) week pēpi checks on enrolment with a practice in New Zealand and consolidates this in one tool.

Wellbeing, equity, and child health are key government priorities.

The point of difference is the built-in decision support, enabling identification of issues and early intervention, the standardised approach to data collection.

Generation 2040 proposes a focus on pēpi Māori, from conception (or confirmation of pregnancy Māori),¹ maternal antenatal care to the 6-week pēpi assessment to First Four Years.

About this manual

This manual explains functionality for end users and describes how to use the workflow to capture data for assessment of pēpi.

Glossary

Abbreviation	
PMS	Practice Management System
6W	6 week
URL	Uniform resource locator, a protocol for specifying addresses on the internet

Document Control

Document	Version	Assigned to	Type	Date
6W pēpi End User Guide	V0.1	Bronnie Farnell	Author	2021.05.30
6W pēpi End User Guide	V0.2	Penny Elliot	Review	2021.08.01
6W pēpi End User Guide	V1.0	Bronnie Farnell	Update	2021.08.17
6W pēpi End User Guide	V1.0	Bronnie Farnell	Published	2021.09.15

¹ The pregnancy ethnicity question: 'is your baby/pēpi Māori?'

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Introduction and overview

The workflow expectation is that the Best Start form will follow common practice, with embedded tools to support decision making activities and provide information on best practice presented in support of an assessment response.

Access

Best Start Assessment tool is embedded into the PMS as an advanced form, the tool is available via secure URL for end users without access via PMS.

PMS	Tool access
Indici SEHR	Yes
Medtech 32	Yes
Medtech Evolution	Yes
My Practice	Yes
Intrahealth-ProfileMac	-
I'health Profile Windows	-
Best Practice VIP Gold	Yes

Functionality

The tool has the following functionality:





- Is a web form embedded into the Practice Management System (PMS)
- It can be parked and resumed at another time
- The tool requires a consent to view after the initial submission
- The user interface is a set of 'tabs' to enable easy workflow navigation
- The form writes back to the PMS system.
- The workflow provides access to evidence-based decision support including links to HealthPathways

Decision Support

The tool provides a means to build algorithm for decision support, used for complex assessments facilitating early intervention for best practice in primary care.

Icons

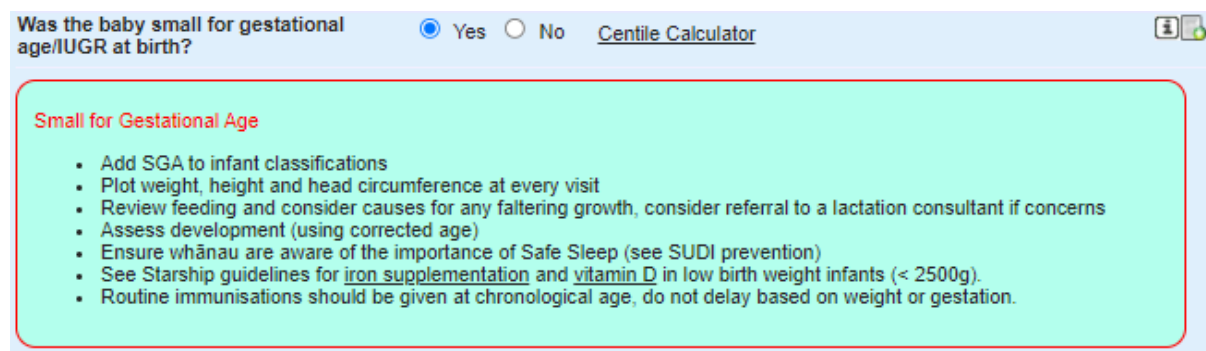
The icons serve as a "traffic sign" leading the user to a function, data file or recommendation.

Icon	Description
	Decision support information detail relating to the question
	Launches Health Pathways or practice equivalent assessment, management information guide
	Launches community pharmacy guide on safe medication practice in pregnancy
	Patient handout on ante natal blood tests
ICON	refresh

Workflow

Navigation is via a set of tabs, within each tab are question sets, responses are captured using a checkbox, radio button (yes/no) or free text fields (max. characters 125). On the **next** command the next tab opens, the ability to move between tabs is at user discretion. Once questions have been answered the tab is ticked ✓, categories with outstanding questions to be answered are denoted by X, unanswered questions within the tab are displayed in red font.

Decision Support is triggered by answers to questions, the support can be recommendations which land in the Actions tab, the recommendations appear in an aqua filed alongside or below the question



Was the baby small for gestational age/IUGR at birth? Yes No [Centile Calculator](#)

Small for Gestational Age

- Add SGA to infant classifications
- Plot weight, height and head circumference at every visit
- Review feeding and consider causes for any faltering growth, consider referral to a lactation consultant if concerns
- Assess development (using corrected age)
- Ensure whānau are aware of the importance of Safe Sleep (see SUDI prevention)
- See Starship guidelines for [iron supplementation](#) and [vitamin D](#) in low birth weight infants (< 2500g).
- Routine immunisations should be given at chronological age, do not delay based on weight or gestation.


Recommendations are supported by links to Healthpathways. The information fields provide an additional layer of support as to why the questions has been asked.

To start an assessment

1. Click on Advanced Forms (shiftF3)
2. Select 6W pēpi, the form opens

- Click on YES to confirm consent was obtained to access a recent pregnancy assessment for the mother. A popup window “Mothers details retrieved” appears. Click ok.



 I certify that I have explained the purpose of this form is to provide care to this baby. Identifiable information is only able to be accessed by other healthcare providers with parent/guardian consent. Anonymised information in this form may be used by for quality improvement and evaluation of the Best Start Tools and maternity and child health services with appropriate ethics committee approval where appropriate.

Verbal Consent Given Yes No

Consent window

Launch from PMS

The form is accessed via Module, Advanced Forms, New Form (Shift F3). The form will auto populate with data from the PMS, demographics, medical conditions, and regular medications.

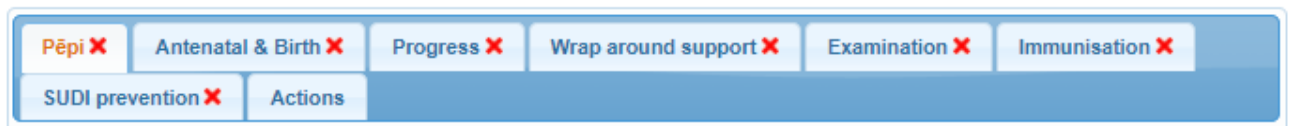
Any triggers set in the form will activate from the PMS.

The assessment can be parked.

To unpark

- Double click on the assessment from Consult Details window or access via Shift F3
- Check the consent box
- Uncheck the Parked box, bottom left corner of the windows.

Best Start 6Wpēpi



6Wpēpi tabs

The following summarises each category.

Pēpi

This window is reliant on user to enter data. The DHB is identified to link the localised support services, the General Practice enables us to provide reporting.

Mother's NHI	CMS0467
Baby's NHI	ZZZ0164
Baby in care of	<input checked="" type="radio"/> Birth parent(s) <input type="radio"/> Whāngai or adopted parents <input type="radio"/> Oranga Tamariki caregiver <input type="radio"/> Other
Baby's last name	Owens
Baby's first name	Kura
Date of Birth	04/05/2021 7 weeks and 0 days old
Sex	<input type="radio"/> Male <input checked="" type="radio"/> Female <input type="radio"/> Differences of sex Differentiation
What ethnic groups does your baby belong to? (consider ethnicity of mother and father)	<input type="checkbox"/> NZ European <input checked="" type="checkbox"/> Māori <input type="checkbox"/> Samoan <input type="checkbox"/> Cook Island Māori <input type="checkbox"/> Tongan <input type="checkbox"/> Niuean <input type="checkbox"/> Chinese <input type="checkbox"/> Indian <input type="checkbox"/> Other such as Dutch, Japanese, Tokelauan <input type="checkbox"/> Not known
DHB in which baby resides	Counties Manukau
General Practice where baby is enrolled	Papakura Marae Health Centre

Antenatal and Birth

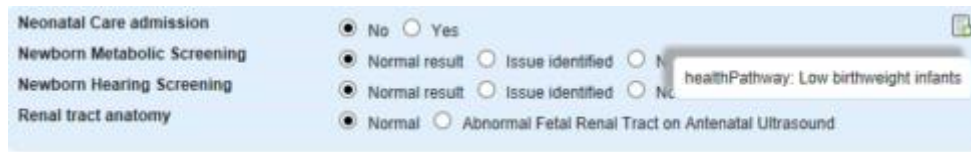
The top field captures information populated from the mothers Best Start Pregnancy Assessment record.

Did the mother have any pregnancy-related health conditions in this pregnancy?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Pre-eclampsia/Eclampsia	<input checked="" type="radio"/> Yes <input type="radio"/> No (Tama 2017, Hine 2018, Baby Of Wai 2021)
Gestational Diabetes	<input type="radio"/> Yes <input type="radio"/> No
HELLP	<input type="radio"/> Yes <input type="radio"/> No
Thrombosis	<input type="radio"/> Yes <input type="radio"/> No

Birth details are entered using checkboxes and free text, decision support and calculations are automated.

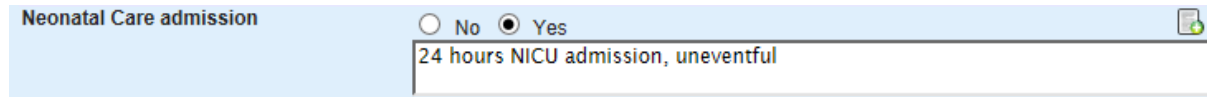
Gestation at birth	36 Weeks and 1 Days 7 weeks and 5 days old CGA: 27 days old
Preterm birth <ul style="list-style-type: none"> Add to infant classifications Document both chronologic and corrected age Use corrected age when plotting growth and reviewing development Continue supplementation for iron and vitamin D Ensure whānau are aware of the importance of Safe Sleep (see SUDI prevention) for their baby 	
Multiple birth?	<input checked="" type="radio"/> Single <input type="radio"/> Twin <input type="radio"/> Triplet <input type="radio"/> Other
Presentation	<input checked="" type="radio"/> Cephalic <input type="radio"/> Breech <input type="radio"/> Transverse
Birth method	<input checked="" type="radio"/> Spontaneous <input type="radio"/> Vacuum Extraction (Ventouse) <input type="radio"/> Forceps <input type="radio"/> Caesarean - Emergency <input type="radio"/> Caesarean - Elective
Apgar 1 minute	4
Apgar 5 minutes	7
Apgar 10 minutes	10
Birth weight	2150 grams, or 4 lb 12 oz
Was the baby small for gestational age/IUGR at birth?	<input checked="" type="radio"/> Yes <input type="radio"/> No Centile Calculator
Small for Gestational Age <ul style="list-style-type: none"> Add SGA to infant classifications Plot weight, height and head circumference at every visit Review feeding and consider causes for any faltering growth, consider referral to a lactation consultant if concerns Assess development (using corrected age) Ensure whānau are aware of the importance of Safe Sleep (see SUDI prevention) See Starship guidelines for iron supplementation and vitamin D in low birth weight infants (< 2500g). Routine immunisations should be given at chronological age, do not delay based on weight or gestation. 	

Post birth screening



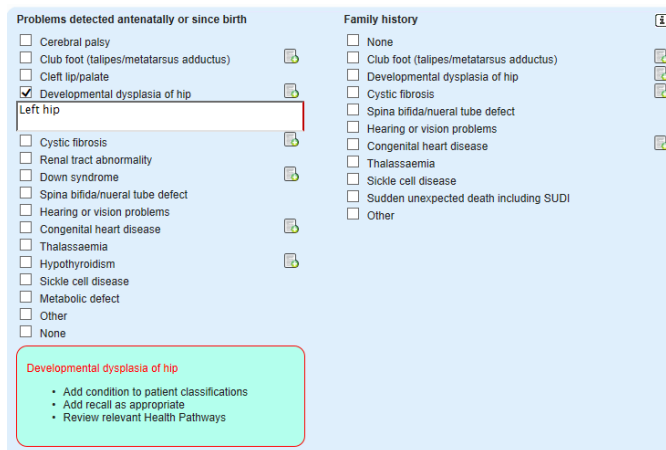
Links to Healthpathways are accessed through the document icon.

Branching logic enables an extension to the answer according to the response.



History and post-natal problems detected are captured using checkboxes.

The aqua prompt window will appear in the Actions Tab for follow up post assessment.



Problems detected antenatally or since birth

- Cerebral palsy
- Club foot (talipes/metatarsus adductus)
- Cleft lip/palate
- Developmental dysplasia of hip
- Left hip
- Cystic fibrosis
- Renal tract abnormality
- Down syndrome
- Spina bifida/neural tube defect
- Hearing or vision problems
- Congenital heart disease
- Thalassaemia
- Hypothyroidism
- Sickle cell disease
- Metabolic defect
- Other
- None

Family history

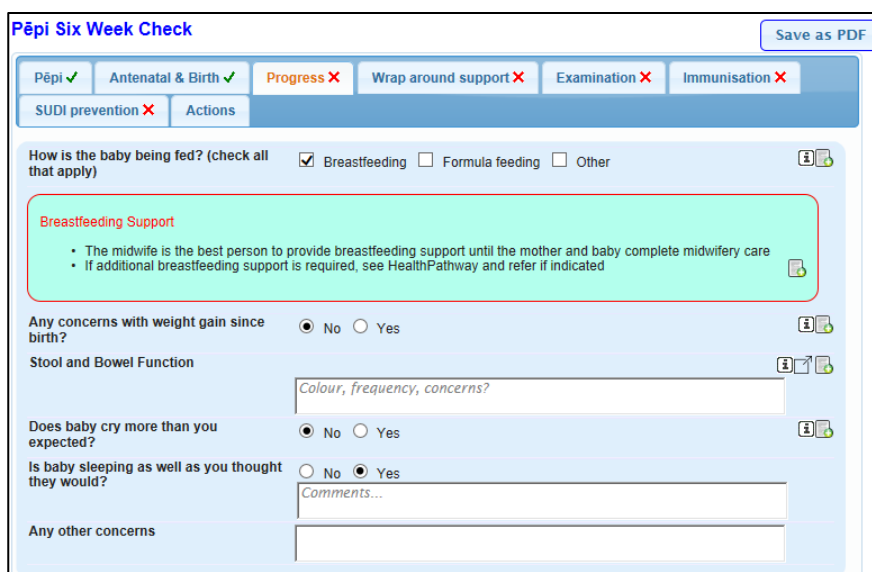
- None
- Club foot (talipes/metatarsus adductus)
- Developmental dysplasia of hip
- Cystic fibrosis
- Spina bifida/neural tube defect
- Hearing or vision problems
- Congenital heart disease
- Thalassaemia
- Sickle cell disease
- Sudden unexpected death including SUDI
- Other

Developmental dysplasia of hip

- Add condition to patient classifications
- Add recall as appropriate
- Review relevant Health Pathways

Progress

Provides an opportunity to collect data which will prompt answers enabling the assessors to observe and monitor interactions and how the family is functioning.



Pēpi Six Week Check Save as PDF

Pēpi ✓ Antenatal & Birth ✓ **Progress ✗** Wrap around support ✗ Examination ✗ Immunisation ✗

SUDI prevention ✗ **Actions**

How is the baby being fed? (check all that apply) Breastfeeding Formula feeding Other

Breastfeeding Support

- The midwife is the best person to provide breastfeeding support until the mother and baby complete midwifery care
- If additional breastfeeding support is required, see HealthPathway and refer if indicated

Any concerns with weight gain since birth? No Yes

Stool and Bowel Function

Does baby cry more than you expected? No Yes

Is baby sleeping as well as you thought they would? No Yes

Any other concerns



Rap around support

Focussing on the environment, capturing data on cigarettes, drug and alcohol, healthy homes and intermittent family violence.

Pēpi Six Week Check Save as PDF

Pēpi ✓ Antenatal & Birth ✗ Progress ✗ Wrap around support ✗ Examination ✗ Immunisation ✗

SUDI prevention ✗ Actions

WellChild Tamariki Ora provider chosen? No Yes Declined

Name of WellChild Tamariki Ora provider

Mother's, Babies, and Parenting Community Support

Is it ok to talk about how things are for you and your family/household because this is important for your baby too? It helps to understand what's going well and what might be causing concern, stress or worry. We can talk about how to get more support if you need it.

Does the baby live in a stable, safe home with enough room for everyone? Yes No

Is the baby's home warm and dry? Yes No

Who are the people who live with the baby who will help to take care of the baby? (tick all that apply)

- Mother (of baby)
- Father (of baby)
- Grandparent/s
- Baby's brother/s or sister/s
- Auntie/uncle/cousin/s
- Friend/s
- Other caregiver
- Partner of Father
- Partner of Mother

Is there anyone in the baby's house who smokes tobacco? Yes No

Is the mother of the baby using e-cigarettes/vape? Yes No

How often does the mother of the baby have a drink containing alcohol?

- Never
- Monthly or less
- 2-4 times a month
- 2-3 times a week
- 4 or more times a week

healthPathway: Alcohol Intervention

Wrap around support

Examination

Pēpi Six Week Check Save as PDF

Pēpi ✓ Antenatal & Birth ✗ Progress ✗ Wrap around support ✓ Examination ✗ Immunisation ✗

SUDI prevention ✗ Actions

Set Everything to Normal

Skin

Rash No Yes

Jaundice present No Yes

Growth

Length cm

Current Weight grams

Head Circumference cm

Concerns about growth No Yes

Facial morphology

Nose Normal Abnormal

Mouth Normal Abnormal

Fontanelle Normal Concerns

Head Shape Normal Concerns

Torticollis (wry neck) No Yes

Is baby fixing and following with their eyes? Yes No

Is the light reflection symmetrical when baby shifts gaze? Yes No

Is nystagmus present? No Yes

Red Reflex

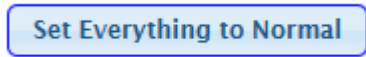
<p>Right</p> <p><input checked="" type="radio"/> Present</p> <p><input type="radio"/> Abnormal</p> <p><input type="radio"/> Not able to assess</p>	<p>Left</p> <p><input checked="" type="radio"/> Present</p> <p><input type="radio"/> Abnormal</p> <p><input type="radio"/> Not able to assess</p>
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Canal and Tympanic Membrane Normal Abnormal

Preauricular pit or pre-auricular tag No Yes

Other ear Issue

Standard examination question with the ability to prepopulate with one click "set to normal"





Vaccinations

Routine Imms Schedule listed setting the reminder for the vaccine delivery, the information comes from the status in the PMS.

Pēpi Six Week Check Save as PDF

Pēpi ✓ Antenatal & Birth ✗ Progress ✗ Wrap around support ✓ Examination ✗ Immunisation ✗

SUDI prevention ✗ Actions

Special Immunisations

Mother Hepatitis B surface antigen positive in pregnancy Yes No Unsure

Does this baby need a BCG vaccine Yes No

Routine Immunisation Schedule

Immunisation Status Overdue immunisations: Rotavirus mono Dose 1 DTaP-IPV-Hep B/Hib6w Pneum, conj 10, 6w

Immunisation Status

- Immunisations are overdue - give immunisations today or set

Neonatal BCG vaccine should be offered to infants who are at risk of Tuberculosis (TB) infection. Infants and children aged under 5 years are eligible for a free BCG vaccination if:

- they will be living in a house or family/whānau with a person with either current TB or a history of TB
- they have one or both parents or household members or carers who, within the last 5 years, lived for a period of 6 months or longer in countries with a TB rate ≥ 40 per 100,000 (see BCG Vaccination HealthPathway)
- during their first 5 years will be living for 3 months or longer in a country with a TB rate ≥ 40 per 100,000

Once given

Routine Immunisation Schedule

Immunisation Status All immunisations up to date

Immunisation Status

- Immunisations are overdue - give immunisations today or set appropriate recalls

SUDI Prevention

Based on information captured throughout the form the tool will provide a calculated SUDI risk.

Pēpi Six Week Check Save as PDF

Pēpi ✓ Antenatal & Birth ✗ Progress ✗ Wrap around support ✓ Examination ✗ Immunisation ✗

SUDI prevention ✗ Actions

There are factors which make babies more or less at risk of SUDI (also known as SIDS or cot-death). Is it ok if we check what your baby needs to prevent SUDI?

Mother's Age

How many babies has the mother given birth to before this baby? (born alive)

Tama (2017)
Hine (2018)
Mohi (2019)
Baby Of Wai (2021)
Baby Of Wai (2021)

It is common for families to use a variety of sleeping places for their baby including baby beds and sleeping with parents or caregivers. What are the sleeping arrangements for your family now that your baby has arrived?

Who sleeps in the same room as the baby at night? (tick all that apply)

- With parent/s or other adults
- With other children
- Baby in own room, alone

What types of beds does the baby sleep on or will sleep on at home? During the day? At night? (tick all that apply)

- Own baby bed (bassinet, cot, wahakura, Pepi-pod)
- On a bed or mattress
- On a couch or chair

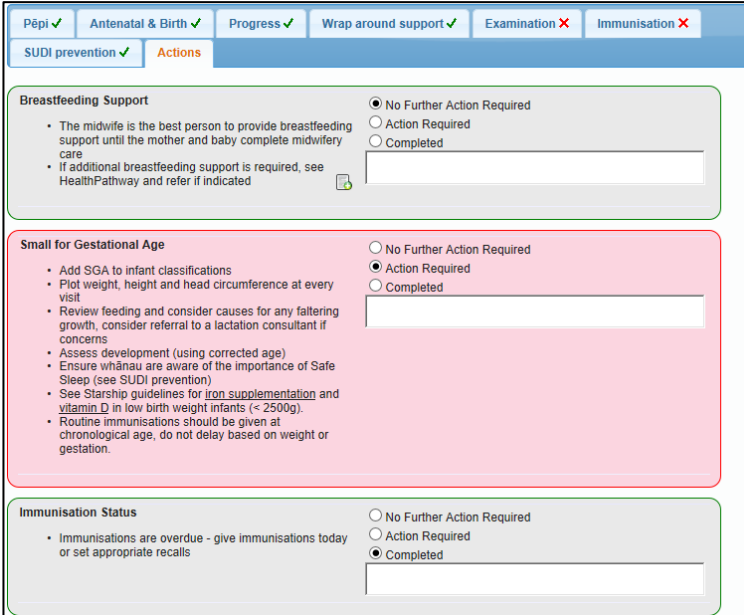
What are the usual sleep positions for this baby? How are you placing baby to sleep? (tick all that apply)

- Prone (tummy)
- Side
- Back

Actions

Summarising actions based on the data captured.

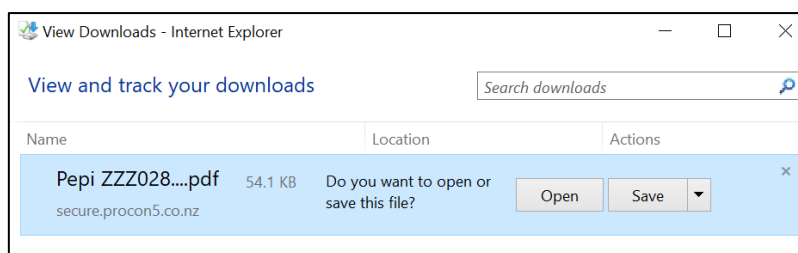
- Actions outstanding are highlighted with an aqua background
- Actions for review are highlighted with a pink background
- Actions complete are highlighted with a grey background



The screenshot shows a web-based assessment form for 'Pēpi'. At the top, there are tabs for 'Pēpi', 'Antenatal & Birth', 'Progress', 'Wrap around support', 'Examination', and 'Immunisation'. Below these are sub-tabs for 'SUDI prevention' and 'Actions'. The 'Actions' section contains three main categories:

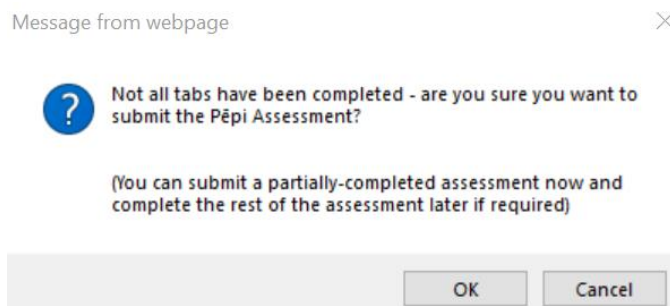
- Breastfeeding Support** (highlighted with a grey background):
 - The midwife is the best person to provide breastfeeding support until the mother and baby complete midwifery care
 - If additional breastfeeding support is required, see HealthPathway and refer if indicated
 - Options: No Further Action Required, Action Required, Completed
- Small for Gestational Age** (highlighted with a pink background):
 - Add SGA to infant classifications
 - Plot weight, height and head circumference at every visit
 - Review feeding and consider causes for any faltering growth, consider referral to a lactation consultant if concerns
 - Assess development (using corrected age)
 - Ensure whānau are aware of the importance of Safe Sleep (see SUDI prevention)
 - See Starship guidelines for iron supplementation and vitamin D in low birth weight infants (< 2500g).
 - Routine immunisations should be given at chronological age, do not delay based on weight or gestation.
 - Options: No Further Action Required, Action Required, Completed
- Immunisation Status** (highlighted with a grey background):
 - Immunisations are overdue - give immunisations today or set appropriate recalls
 - Options: No Further Action Required, Action Required, Completed

The form can be sent as a pdf within the assessment, the user can then determine where to save the report.



Save

1. To save the form click Ok





Save as a PDF

Summarises assessment into Report format and presents as pdf. Annotates name of assessor and date of assessment. PDF can be saved to desktop/file and emailed to referral agency.

HealthPathways

We rely on your local HealthPathways editor to provide us with the links, we work to have these localisations ready for Go Live, rarely they are not available.