



# Newborn Early Warning Trigger & Track 2 (NEWTT2)



## How to use the NEWTT2 trigger and track tool to determine the level and timelines of escalation

**Calculate and document** the total NEWTT2 score for a set of observations by adding together the individual scores (0-2) for every individual observation entered in a single column of the chart.

**Check the total** against the NEWTT2 escalation tool and follow instructions in the escalation table for that set of observations.

**For a score of zero continue routine care**

### Thresholds and Triggers

- The grade of team member indicated as the primary contact for each level of clinical concern is a guide and may need to be adapted depending on the local skill mix within that care setting or organisation.

	Score 1	Score 2-3	Score 4-5	Score ≥6	Any critical observation
	Inform shift leader - Consider SpO <sub>2</sub> +/- blood glucose if not done already				
Primary escalation and response (use SBAR framework)	Repeat observations in <1 hour.	Refer to paediatric/ neonatal Tier 1 doctor/ANNP.	Refer to paediatric/ neonatal Tier 1 doctor/ANNP.	Refer to paediatric/ neonatal Tier 1 doctor/ANNP. The Tier 2 doctor/ ANNP should be informed.	Refer to paediatric/ neonatal Tier 1 doctor/ANNP AND Tier 2 doctor/ANNP
Review timings	Escalate as for score 2-3 if the repeat score remains 1.	Request a review within 1 hour.	Request a review within 15 minutes.	Request immediate review.	Immediate review and consider neonatal emergency call (2222).

### Take steps to avoid any obvious concerns

Secondary contact	<b>If no review within expected time frame, escalate to Tier 2 doctor/ANNP and inform shift leader.</b>	<b>If no review within expected time frame, escalate to consultant and inform shift leader.</b>
	<b>If still no response within required time frame, escalate to consultant.</b>	

- When the primary team member(s) contacted is unable to attend or fails to attend within the expected time for the level of clinical concern, escalation to the secondary contact is required
- The secondary contact would be expected to attend within the initial review timing, calculated from the documented time of primary escalation.

### SBAR Handover

<b>S</b>	<b>Situation</b>
<b>B</b>	<b>Background</b>
<b>A</b>	<b>Action</b>
<b>R</b>	<b>Recommendation</b>

**Document all actions and discussions in patient record**