

Successful implementation of NEWTT2 across Barts Health NHS Trust sites

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Background

Barts Health NHS Trust, encompassing **The Royal London Hospital, Whipps Cross University Hospital and Newham Hospital**, has demonstrated a highly collaborative and structured approach to implementing **NEWTT2 (Newborn Early Warning Trigger and Track Tool)** across its maternity and neonatal services.

Recognising the importance of a safe and consistent approach to newborn assessment and escalation, the Trust undertook a comprehensive implementation programme designed to ensure staff confidence, operational readiness and sustainable adoption across all three sites.

Leadership and Workforce Investment

A significant contributor to the programme's success was the decision to invest in dedicated implementation support. Barts Health appointed a **specialist neonatal nurse** to work within maternity services for a year, leading training delivery and supporting implementation across all three hospital sites.

This dedicated resource enabled:

- Consistent messaging across organisations
- Ongoing staff support and coaching
- Rapid identification and resolution of implementation challenges
- Greater engagement from frontline teams
- Improved confidence and adoption of the new process.

The role provided a vital **bridge between maternity and neonatal services**, helping to **build relationships and support multidisciplinary working** throughout the implementation period.

Newborn Early Warning Track
and Trigger Tool- NEWTT 2
Barts Health

Page	Revision made to the guideline NEWTT1 to NEWTT2
1,3	Changed 'trigger and track' to 'track and trigger'
1	Standards: British Association of Perinatal Medicine (BAPM) (2023) Deterioration of the Newborn (NEWTT 2) – A Framework for Practice
1	Keywords: changed NEWTT 2
3	1.6 Additional terminology: NEWTT 2
5	2.4 Changed to new flowchart in relation to NEWTT 2
6	3.1 Updated table 1 to new threshold and trigger table
11	5 Reference updated to current framework for practice
12, 13	Image of NEWTT2

Implementation -Timeline



Approach

A key strength of the implementation was its robust planning and preparation. Barts Health initially introduced NEWTT2 using paper-based documentation, allowing teams to become familiar with the tool and associated processes before transitioning to a digital system. A move to a fully digital platform is planned for early 2027, providing a **phased and carefully managed approach to change**.

To support staff, the Trust developed a comprehensive training package for midwives and neonatal nurses that included:

- The principles and application of the PIER framework
- Key changes introduced within NEWTT2
- Clear escalation pathways and decision-making processes
- Guidance on responding to and managing parental concerns
- Practical examples to support consistent application in clinical practice
- Side-by-side comparisons highlighting the differences between NEWTT1 and NEWTT2.

This ensured that staff understood not only how to use the tool but also the rationale behind the changes and the expected impact on patient safety. As well as 'shop floor' training, teaching was added to the monthly Service Update for midwives.

Communication and Governance

The Trust demonstrated excellent governance and transparency throughout the programme. Clinical guidelines were updated to align with NEWTT2 and all changes were clearly communicated to staff.

Implementation plans included:

- Clearly defined timelines and milestones
- Transparent communication regarding implementation dates
- Detailed guidance on policy and practice changes
- Regular engagement with clinical teams
- Opportunities for staff questions, feedback and discussion.

This **proactive approach** helped create **shared understanding** and **readiness for change** across all three sites.

Outcomes

The structured implementation approach ensured **strong engagement and adoption of NEWTT2 across the organisation**. Key factors contributing to success included:

- Comprehensive workforce training
- Clear communication and governance processes
- Strong multidisciplinary collaboration
- Dedicated implementation leadership
- Early preparation for digital transition.

The programme has established a consistent approach to newborn monitoring and escalation across the Trust, supporting safer care and greater staff confidence.

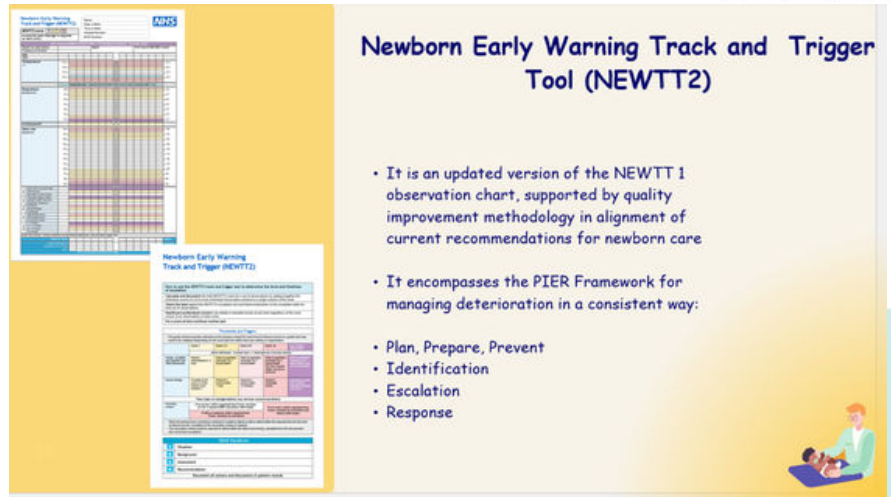
Next Steps

Barts Health is now preparing for the next phase of the programme, with plans to transition from paper-based documentation to a **fully digital NEWTT2 system in early 2027**.

Building on the strong foundations already established, this digital implementation will further support consistency, accessibility of information and long-term sustainability across The Royal London Hospital, Whipps Cross University Hospital and Newham Hospital.

Through strong leadership, investment in frontline support and a carefully planned implementation strategy, Barts Health has created an exemplar model for successful NEWTT2 adoption across a large multi-site organisation.

Newborn Early Warning Track and Trigger Tool (NEWTT2)



- It is an updated version of the NEWTT 1 observation chart, supported by quality improvement methodology in alignment of current recommendations for newborn care
- It encompasses the PIER Framework for managing deterioration in a consistent way:
 - Plan, Prepare, Prevent
 - Identification
 - Escalation
 - Response

Differences

NEWTT 1	NEWTT 2
• Observations are colour coded into White, Amber and Red	• Observations have numerical values assigned to them, as well as being colour coded into White, Amber, Red, Purple and Blue
• Urgent Referral box is Red	• Urgent referral box is Purple
• Feeding and neurological behaviour assessment are in combined section	• Feeding and neurological behaviour assessment is scored separately for clarity
• Parental concern is not included	• Parental concern is included to support findings of Ockenden report
• Bilirubin is within the chart	• Bilirubin is not within the chart, BUT continue to follow jaundice guidelines
• No clear identification of actions taken	• Clearly outlines whether any concern identified and/or escalated

Escalation Record

NEWTT2 Joint Escalation and Review Record

Date: ____/____/____ Time: ____:____

Name: _____

Escalation Level: _____

Reason for Escalation: _____

Escalation completed: _____

Return to Paediatric/Neonatal Team: _____

Relieved/Assessed by: _____

NEWTT2 Review: _____

Examination: _____

Heart rate: _____ Resp rate: _____ Temperature: _____

Escalation Record

Observations: _____

Review requested? _____

Frequency of observations: _____

Plan/Intervention: _____

Signature: _____

NEWTT2 Re-review: _____

Heart rate: _____ Resp rate: _____ Temperature: _____

Signature: _____