Follow-up & continuing care

Mental health

Behaviour, emotional and attention problems are assessed at two years of age and again at the time of transition to school.

Transition from hospital to home

Families receive a comprehensive discharge management plan to facilitate transition from the hospital to home.

Motor and neurological follow-up assessment

Standardised assessment of neurological status and motor development is conducted in the first two years and repeated at transition to school.

Communication, speech, and language

Standardised assessment of communication, speech, and language development is conducted by two years of age and repeated at transition to school.

Parent mental health

Targeted screening of parental mental health is undertaken six months after discharge and at two years, during regular follow-up visits for the child.

Cognitive development

Standardised cognitive assessment is conducted by two years of age and repeated at transition to school.

Peer and sibling relationships

Peer and sibling relationships are evaluated as part of a standard follow-up programme.

Coordination and integration of care after discharge home

Parents receive comprehensive and integrated care for their high-risk infant after discharge home.

Healthy lifestyle and cardiovascular risk factors

Key cardiometabolic risk factors (in particular blood pressure, abdominal obesity and physical inactivity) are monitored from childhood to adult life.

Reproductive counselling

Mothers of infants born very preterm or after pregnancy complications and their partners are counselled on the risk of recurrence in future pregnancies, and offered strategies to prevent recurrence, both before conception and during a subsequent pregnancy.

Assessment of visual function

Standardised visual assessment is conducted by age 3.5 to 4 years and repeated by age 5 to 6, at which age additional attention is payed to visual information processing dysfunctions.

Post-discharge responsive parenting programmes

All very preterm infants and their families are offered preventive responsive parenting support after discharge home.

Meeting special needs at school

Developmental progress and school readiness of infants born very preterm or with risk factors are assessed 6-12 months prior to initial entry into formal schooling, and education professionals receive training about the potential special educational needs of children born very preterm or with risk factors.

Respiratory outcome

Respiratory health is evaluated as part of a follow-up care programme.

Hearing screening

Standardised hearing screening is conducted using Automated Auditory Brainstem Response (AABR) technology before one month of age, and where necessary diagnostic investigations are completed before three months and early interventions are started within the first six months.