

<b>MIDWIFE-LED SERVICES</b> <b>Clinical Operational Policy</b>	<b>Policy</b>  <b>Register No: 10017</b> <b>Status: Public</b>
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## 1.0 Purpose

- 1.1 The purpose of this document is to define the current provision of Midwife Led Services.
- 1.2 The document will explain the function of the Midwife Led services to ensure all staff using the facility understand the philosophy of the departments and work as a cohesive team to provide a seamless service.

## 2.0 Aims of the Service

- 2.1 Birth is, for the majority of women, a normal, physiological event. The main focus of the Midwife Led Birthing Units is to facilitate easy access to maternity care and to encourage and support women in achieving normality throughout their pregnancy episode. Also providing community based outreach clinic services and antenatal care to those women, living in the locality, who are considered to have a high risk pregnancy or who choose to give birth in the consultant unit.

## 3.0 Scope of Service:

- 3.1 The maternity services are divided into 3 distinct care areas:
  - Antenatal care
  - Intrapartum or labour care
  - Postnatal care
- 3.2 **The Stand Alone Birthing Units** offer a first point of contact for women. On confirmation of pregnancy any women, whether they are high or low risk pregnancies, can contact the units and arrange early booking with a Midwife. This ensures that the target for booking women between 8 and 10 weeks of pregnancy is met and that routine antenatal blood screening can be completed and Nuchal Scan can be arranged. Further antenatal appointments are then made for Low risk women, adhering to the NICE Clinical Guidelines for Antenatal Care. Both Units offer a 24 hour service and women can access via telephone or drop in to speak to a midwife for advice.
- 3.3 **Antenatal Services Midwife Clinics** are available Monday, Tuesday, Thursday and Friday mornings at Braintree. The clinics start at 08.30 hours until 12.00 hours and are by appointment only.
- 3.4 Midwife clinics are held at Maldon every weekday morning. Women seen at these clinics will see their own community midwife on a specific day, again by appointment only.
- 3.5 **Scanning Services** Nuchal scanning is available at Maldon on Tuesday mornings.
- 3.6 **Consultant Clinics** are held on either Tuesday or Wednesday mornings at Braintree and every Tuesday morning at Maldon from 09.00 hours until 11.30 hours. A referral is made at booking for a consultant appointment if the woman is identified as being high risk.
- 3.7 **Day Assessment Services** are available at the Units. This prevents women from having to travel to Broomfield. Clinics are available at each unit every afternoon, including weekends. They run from 12.30pm until 3.30pm at Maldon and 12.30pm until 4pm at Braintree, women can self refer to these clinics or an appointment can be made by the midwives.

- 3.8 **Parent Education Classes** are delivered from the Birthing Units on Saturdays. Hypnobirthing classes are offered on 2 evenings per week at each Birthing Unit.
- 3.9 **Intrapartum Care** is offered to both Primiparous and Multiparous women and is provided at each Unit with women having a direct self referral route. Water Birth is also available as an option at both units and is encouraged.
- 3.10 **Community Midwifery Services** are provided from both units maintaining continuity of carer throughout the pregnancy episode.

Visits are made to the home on the first day of discharge, the 5<sup>th</sup> day (to complete newborn screening) and on day 10 to discharge. Visits in between these times are based on clinical need. Support visits for breastfeeding etc are provided by Maternity Care Assistants, attached to the Community Teams and are in addition to the core visits. Enhanced postnatal care is also offered where appropriate

3.11 **Postnatal Care within Stand Alone Birthing Units**

There are 5 postnatal beds at Maldon and 3 postnatal rooms at Braintree each of the birthing units. There are also facilities for partners to stay for the first night following delivery - 3 double bedrooms are available at Braintree and 1 double bedroom at Maldon.

Women who are high risk or choose a delivery within the Consultant Led Unit are able to access postnatal care at the birthing units for feeding support or additional postnatal care.

3.12 **Inclusion**

- Normal pregnancy
- Pregnancy at between 37 completed weeks and 42 weeks
- Singleton pregnancy
- Para 4 or less
- One normal delivery following c/section
- SRM / ARM with clear Liquor
- BMI between 18 – 35
- Women who have agreement by their named Obstetrician to deliver in a stand alone unit

3.13 **Exclusion**

- Labour before 37 completed weeks of pregnancy
- Pregnancy complicated by underlying medical condition
- Obstetric complication
- Multiple pregnancy
- Grand Multip (Para 5 or above)
- VBAC
- Particulate Meconium stained Liquor
- BMI below 18 or above 36
- Any woman requiring or requesting continuous fetal monitoring in labour
- Any woman requesting Epidural anaesthesia
- Medical management of term pre-labour rupture of membranes after 24 hours (Refer to the guideline entitled Guideline for the Management of Term Pre-labour Rupture of Membranes: Register No: 08049)

## **4.0 Work Flows**

4.1 Please refer to appendix A

## **5.0 Key Relationships**

5.1 Midwife Led Services work closely but not exclusively with the following departments. The Units regularly interact with the following departments:

- Antenatal Clinic
- DAU
- Community Midwives
- Ultrasound
- Labour Ward
- Specialist Midwife – Vulnerable Women
- Specialist Midwife – Safeguarding
- Specialist Midwife Infant Feeding
- Specialist Midwife Bereavement
- Specialist Midwife Diabetes
- Neonatal Unit
- Tertiary Units
- Laboratory Services
- Health Visiting Service
- Portering
- Supplies
- Training and Education
- Transport Services
- Newborn hearing screening
- Breastfeeding support services

5.2 **Midwife Led Services also have Relationships with the Following Departments**

- Switchboard
- Tertiary Units
- Other Local Health Trusts
- Estates
- Domestic Services (Provided by Household Services - Co Located)
- Domestic Services (Provided by CCG - Stand Alone Units)
- Catering Services (Provided by Medirest)
- Catering Services (Provided by CCG - Stand Alone Units)
- CCG
- Social Services
- Pharmacist
- Voluntary Services

## 6.0 Operational Requirements

6.1 The Lead Midwife for Community Midwifery Services maintains overall management responsibility for the Stand Alone Birthing Units and the Community Midwifery Service in Chelmsford.

6.2 The Team Leaders role is to ensure that all clinical areas and services offered in the Units are adequately staffed and also to ensure an appropriate skill mix for each shift / clinical area.

6.3 Team Leaders have overall responsibility to ensure the smooth running of the service and management of the ward operationally.

6.4 The ward clerks will have experience or specific training to communicate effectively with patients, relatives and carers. All staff have completed their child protection training at either Level 2 or Level 3 and are aware of how to report any concerns. There is a designated link Midwife in each unit for Child Protection / Vulnerable women.

### 6.5 Training and Education

All staff will meet the mandatory training requirements set out by the Trust. In addition all staff will attend 2 days Mandatory Training specific to the Maternity Services. Midwives will fulfil their requirements for PREP.

Staff will be trained to use all specialist equipment and sign a competency statement following training.

### 6.6 WJC – Braintree

Title	Band	FUNDED WTE
Team Leader	7	1.0
Midwives (Core)	6	12.64
Preceptor Midwives	5	0
MCA's	2 - 3	6.65
Ward Clerk	4	0.57

### 6.7 St Peters – Maldon

Title	Band	FUNDED WTE
Team Leader	7	1.0
Midwives (Core)	6	12.17
Preceptor Midwives	5	0
MCA's	2 - 3	5.96
Ward Clerk	4	0.61

6.8 To ensure the units have staff with the necessary skills to work within a birthing unit setting, we have core staff in each area. This encourages effective team working and develops an advanced level of expertise in normality within these specialised areas. There are opportunities for training and development to take place. The patient experience is improved as they receive continuity of care with the aim of meeting the same midwives at each visit. There are 2 rotational / preceptor posts in each area to ensure developmental opportunities are available to staff working within the Consultant Unit.

- 6.9 **Braintree** – To ensure a safe service, covering a 24 hour period Monday to Friday there needs to be a staffing establishment of nine wte midwives and five wte MCA,s. This equates to:
- Early Shift Ward – One midwife and one MCA
  - Clinic – Two midwives and one MCA
  - Community – Two midwives and one MCA
  - Late Shift Ward – One midwife plus one MCA
  - Night Shift Ward – One midwife plus one MCA
  - On call Midwife – One midwife provides out of hours emergency cover from 1630 hours to 0830 hours
- 6.10 To cover a 24 hour period over weekends and bank holidays five wte midwives and four wte MCA's.
- Early Shift Ward – One midwife and one MCA
  - Community – Two midwives and one MCA
  - Late Shift Ward – One Midwife and one MCA
  - Night Shift Ward – One midwife and one MCA
  - There is one on call midwife available from 1630hrs until 0830hrs.
- 6.11 **Maldon** – To ensure a safe service, covering a 24 hour period Monday to Friday there needs to be a staffing establishment of eight wte midwives and four wte MCA's
- Early Shift Ward – One midwife and one MCA
  - Clinic – One midwife and one MCA (Monday, Wednesday, Thursday this will be a community midwife running her own clinic)
  - Community – Four midwives and two MCA's (high volume of community based clinics)
  - Late Shift Ward – One midwife and one MCA
  - Night Shift Ward – One midwife and one MCA
  - There are one or two on call midwives available from 1630hrs to 0800hrs
- 6.12 To cover a 24 hour period over weekends and bank holidays five wte Midwives and four wte MCA's.
- Early Shift Ward – One midwife and one MCA
  - Community – Two midwives and one MCA
  - Late Shift Ward – One midwife and one MCA
  - Night Shift Ward – One midwife and one MCA
  - There are one or two on call midwives available from 1630hrs to 0800hrs
- 6.13 **Equipment** - All labour rooms are equipped to the same standard, providing a home from home environment. Each contain a delivery bed, bedside locker, adequate cupboard space for the storage of essential delivery room equipment. Each room has a sonicaid, blood pressure monitor, electronic aural thermometer. In the Waterbirth rooms there are also pool thermometers.
- 6.14 Both units have a mobile baby Resuscitaire situated within the clean utility area adjacent to the delivery rooms

- 6.15 Both units have facilities for partners to stay. These rooms contain a double bed and bedroom furniture to promote a homely feel.
- 6.16 The postnatal areas contain standard hospital beds and bedside lockers together with “over the bed” tables.
- 6.17 The Day Assessment room at both units is equipped with a standard hospital bed, bedside table and locker.
- 6.18 **Emergency Transport** In order to ensure that women have speedy access to the main consultant unit should a problem develop during the intrapartum period, there is 24 hour access to Emergency Paramedic Ambulance services. Midwives dial 999 and state ‘This is an obstetric emergency’ in order to access this service.

## **7.0 Key Requirements for Facilities Management**

- 7.1 **Catering** - Catering facilities are available at both Units. For women with special dietary needs, meals are obtained in liaison with the catering department.
- 7.2 At Braintree, catering is provided by Ashlyns, a local organic produce supplier. Main meals are collected from the Community hospital. A supply of sandwiches, cereals and Toast is kept on the ward. There is a small freezer within the unit, which is restocked by CCG staff on a daily basis.
- 7.3 Meals at Maldon are provided by the CCG. They are cooked on site and delivered to the ward in a heated trolley. These are served by the CCG domestic staff.
- 7.4 Beverages are freely available in the patients’ dining room on a self serve basis
- 7.5 Light refreshments are available for women to access within the patients’ dining room at both Units. Requests for meals outside designated meals time are available on request at the Maldon unit with a choice of frozen meals for heating in the Microwave or toast.
- 7.6 **Domestic Services** are provided by the CCG. The wards cleaning schedule is configured to provide adequate cleaning to meet the 95% standard of the 49 steps audit. Braintree / Maldon - Domestic Services are available:
- Monday to Friday - 0730 hours to 1500 hours, 1700 hours to 2030 hours
  - Weekends / Bank Holidays – 0800 hours to 1500 hours, 1600 hours to 1900 hours
  - There is also an additional 3 hours each Saturday for floor buffing
- 7.7 **Porters** - The portering staff have a wide range of responsibilities to enable the smooth running of Units. The portering service is provided by the CCG and MEHT. They collect and deliver items needed such as linen and pharmacy. They are responsible for the collection and removal of all waste and provide and replace oxygen and Entonox cylinders. Collection vans call regularly throughout the weekdays in order to transport specimens, notes, mail to Broomfield sites. Out of hours and at the weekend urgent transportation of notes or specimens is by private taxi.
- 7.8 **Maintenance** - All maintenance issues are reported to the estates department of MEHT. Depending on the job a workman is sent to the Units immediately to assess the risk, and action the problem.

- 7.9 **Materials Management** - There are dirty and clean utility rooms within the Units to ensure materials are disposed and stored correctly. The Units have industrial shredders to ensure all confidential papers are disposed correctly.
- 7.10 **Environmental Requirements** - The Units are provided with adequate heating and lighting systems for the comfort of the patients.
- 7.11 **Way Finding**
- The Units are well signed both from the main approach road to the hospitals and within the hospital grounds
  - Signs from other departments to the Units are clearly marked
  - All signs in the Units are family friendly and clear with pictorial images where necessary
- 7.12 **Security Requirements** - The main entrance all of the Units are controlled by security doors. All patients or visitors attending the Units will have to ring the intercom, where the ward clerk or staff member will allow entrance.
- 7.13 All staff who attends the Midwife-led Units will have access via their badge; if they do not have access they will have to ring the bell for access. All staff must wear their badge as identification.
- 7.14 If staff do not recognise or identify a visitor or staff member, they will ask the individual why they are on the premises or, if staff, they will be asked to provide identification. If information is not provided then the person will be escorted out of the Unit with assistance from security officers / porters.
- 7.15 **Security for Staff** - There is no lone working within the Units. At night, if the midwife in the unit needs to transfer a woman to Broomfield then she calls in the on call midwife to stay in the unit with the MCA until her return. There are also security and porters on site and they can be summoned by telephone. There is no portering service at Braintree
- 7.16 **Security for Patients**
- Entrance and exit to the units is by controlled security doors.
  - All babies have a name band attached around both ankles before they leave the delivery room, the labels bear the name and hospital number of their mother – if labels are missing then all babies within the unit are checked against their mothers name band.
  - Babies admitted to the Units from Broomfield must have their baby labels checked on admission.
  - Portering services are available 24 hours per day and can be summoned to attend the unit if needed.
  - All visitors to the unit are asked to identify who they are visiting prior to being given admission.
- 7.17 **Security for Notes**
- 7.18 All notes for women booked from the Midwife-led Units catchment areas are stored at the birthing units.
- 7.19 At Braintree they are stored within the administration office which is secured by a keypad within the clinic area

- 7.20 At Maldon notes are stored within a locked room within the clinic area.
- 7.21 If notes are required to be transported to Broomfield they are sealed within an envelope and are sent on designated hospital transport.  
If notes are required urgently out of hours then they are transported within a sealed envelope via private taxi hire.  
Following the 36 week appointment, the notes of all women booked for delivery at Broomfield are sent to Maternity Administration via the hospital transport service.
- 7.22 **Manual Handling** - The service will be delivered in accordance with and compliance to the Trust's Manual Handling Policies.
- 7.23 **Fire Safety** - The service will be compliant with the Trust's Fire Safety Policy, Fire Evacuation Policy and other local fire plans and procedures.
- 7.24 **IT Requirements** - There are two computers within the office area in Maldon. There is one computer in the ward area at Braintree and a computer in each of the delivery rooms. There is a computer situated within each of the clinic consulting rooms. The Ward Clerk has access to a computer at the clinic reception. This enables staff to access inter and intranet services, access emails and also access the Lorenzo IT system to obtain results and input data.
- The Staff have rest room facilities with lockers to ensure safety of personal belongings whilst at work
  - There are kitchen facilities at both units
  - There are drinks making facilities – tea and coffee provided by the staff
  - There are designated staff toilets
  - There is a room available in Maldon and Braintree for staff to sleep in when they are on call and if they live more than 30 minutes away.
  - Patients have a designated sitting room / dining room in Maldon with a large communal table and chairs, sofas and a TV. The postnatal rooms in Braintree have flat screen televisions and two of the rooms have dining tables and chairs

## 8.0 Infection Prevention

- 8.1 The infection prevention department play a vital role in the education of staff concerning issues of infectious diseases and current issues, training and audit. The department offers advice and gives support to the staff in the management of care of women and young people found to be or suspected suffering from a contagious illness. It also offers advice regarding the screening of staff. All our audits are complied with.
- 8.2 All staff have access to expert advice from the Infection Prevention department
- 8.3 All trust Infection prevention policies and procedures will be adhered to by all staff using the department.

## 9.0 Equality and Diversity

- 9.1 Mid Essex Hospital Services NHS Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals.

## **10.0 Contingency**

10.1 The Trust have a robust major incident plan that is been currently updated. This plan has been cascaded to all staff members, who are aware and prepared if any one incident should take place.

10.2 A few examples of our contingencies are:

- Telephone system not working - Revert to walkie-talkie, Ward mobile phone with all telephone numbers stored
- Computer systems not working - Revert to paper, all requests such as bloods results to be taken over the phone
- Severe flooding electrics go down - revert to all battery powered equipment and
- Manual sphygmomanometer

## **11.0 Auditing this Policy**

11.1 This is the first policy to be created for the stand alone birthing units. We will initially audit the policy in 6 months to ensure services are still operating in the same way. If any changes are required, this will be authorised by the Community Midwifery Manager in consultation with the Head of Midwifery and the Divisional Manager.

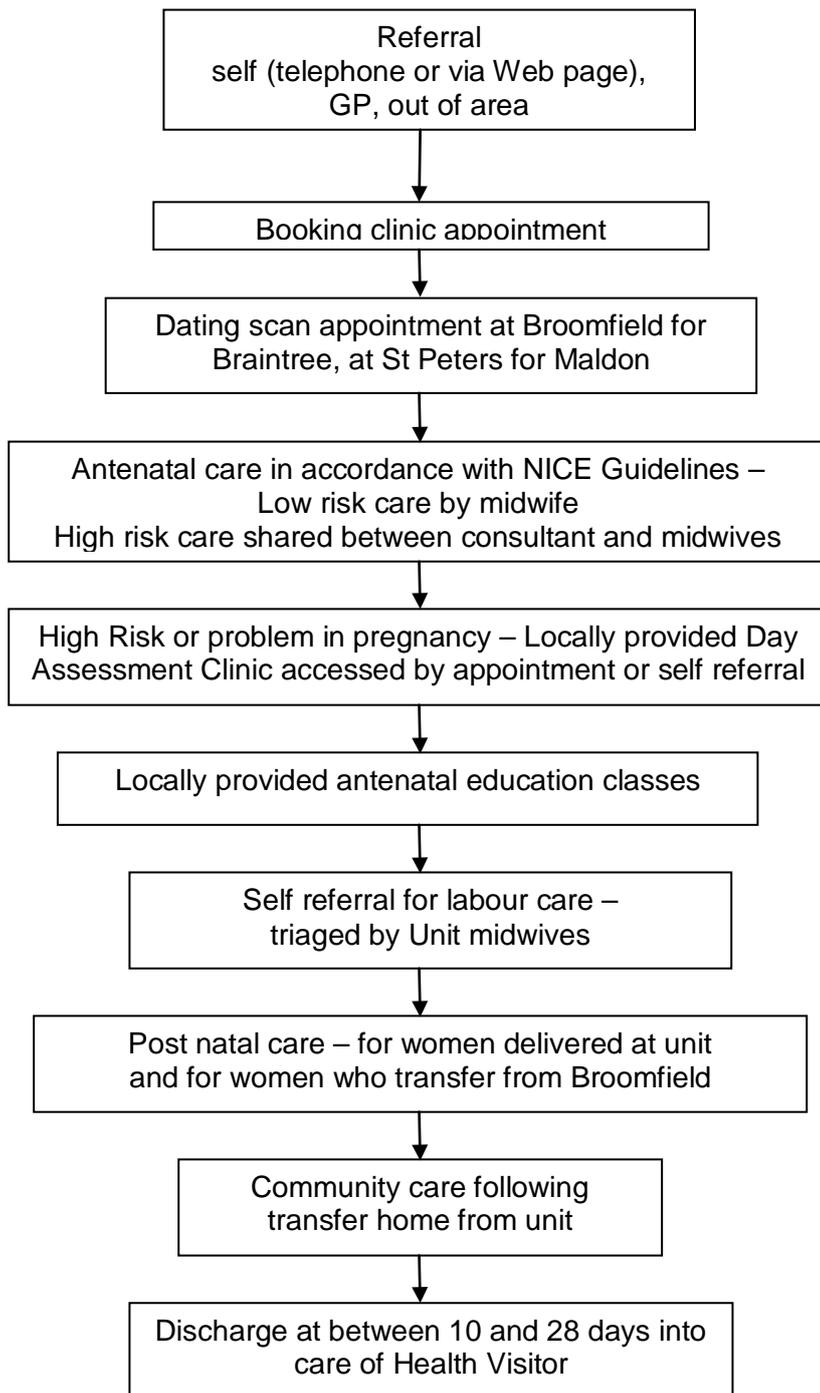
## **12.0 Responsibilities**

12.1 From the organisational chart below it is very apparent that all staff have clear reporting channels, and all Team Leaders in post are aware and trained on their responsibilities both clinically and managerial

**Work Flows**

Women will access Midwife Led Services via:

- Self referral
- Community Midwifery Service
- GP
- Consultant to Midwife transfer of lead provider of care
- From another Trust
- Via Maternity Web Site



**Organisational Chart illustrating Women's, Children's & Sexual Health  
Organisational Structure for Midwife-led Units**

