Guideline for Clinical Risk Assessment (Labour)		Barnsley Hospital NHS  NHS Foundation Trust	
Author:	Guideline group		
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### Introduction

#### Rationale

The CMACE report found that failure to indentify and manage medical conditions and potential emergencies contributed indirectly to a proportion of maternal deaths. Women should undergo a risk assessment to ensure that the woman is managed appropriately in labour.

## <u>Scope</u>

This guidance applies to all staff working within the Maternity Services at BHNFT.

#### <u>Principles</u>

To ensure all woman receive care which is evidence based, consistent and follows best practice guidance.

## **Guideline Outline**

## **Risk Assessment in labour**

#### Timing of Clinical Risk Assessments

When labour commences a risk assessment will be carried out as a minimum at the first contact with the woman. This could be either at home or on the Labour Ward.

#### Conditions / Factors that will considered:

- 1. Medical
  - Cardiovascular Disorders
  - Respiratory Disorders
  - Haematological Disorders
  - Infective disorders
  - Immunological Disorders
  - Endocrine Disorders
  - Renal Disorders
  - Neurological Disorders
  - Gastrointestinal Disorders
  - Psychiatric Disorders
  - Maternal BMI <20 or >35
  - Previous gynaecological history

- 2. Previous surgical history
- 3. Previous anaesthetic history
- 4. Factors from previous pregnancies
- 5. Factors from current pregnancy
- 6. Lifestyle history
- 7. Identification of women who decline blood and blood products

Following consideration of any risk factors identified the healthcare professional will determine whether the woman is high or low risk. This will enable a decision to be made on the appropriate place for delivery.

Following risk assessment an individualised management plan for labour will be developed including management of any risks identified. The woman will be monitored throughout labour and if further risks are identified the management plan will be updated accordingly.

#### Process for referral if risk factors are indentified

When risk factors are identified at the initial risk assessment on first contact or during any stage of labour the woman will be referred for a medical review by the Obstetric team on call. If the woman is having a home confinement the woman will be advised on the need for transfer into hospital to maintain patient safety...

#### Documentation Requirements:

- The risk assessment section on the front of the labour and delivery record will be completed.
- The individualised management plan in the labour and delivery records will be completed
- When risks are identified during labour any changes to the management plan will be documented in the labour and delivery record.
- Referrals for medical review will be recorded in the labour and delivery record:

# **Equality Impact Assessment statement**

Women's and Children's Services are committed to ensure that both current and potential service users and their families will not be discriminated against on the grounds of religion, gender, race, sexuality, age, disability, ethnic origin, social circumstance or background. The principles of tolerance, understanding and respect for others is central to what we believe and central to all care provided.

# Roles and Responsibilities

This guideline applies to all health care Workers employed within the maternity unit and Community at BHNFT

# **Audit / Monitoring**

Risk assessment in labour will be audited in line with the annual audit programme, as agreed by the CSU. The guideline will be audited, as a minimum, on a three-year basis. The results will be reviewed and presented to the multidisciplinary audit meeting. Any deficiencies will be actioned via the audit action plan to try and improve safety and learn from previous mistakes. The audit action plan will be reviewed at the monthly risk management meetings on a quarterly basis and monitored by the risk midwife to ensure that improvements in care are made.

Any adverse incidents relating to labour will be monitored via the incident reporting system. Any problems will be actioned via the case review and Root cause analysis action plans. The action plans are monitored by the risk midwife to ensure that improvements in care are made. The trends and any root cause analysis are discussed at the monthly risk meetings to ensure that appropriate action has been taken to maintain safety.

# **Training**

Any training will be given as documented in the Maternity Training Needs Analysis. This is updated on an annual basis.

#### Dissemination

An electronic copy will be available on the Maternity intranet or via the Practice Facilitator Midwife

#### Review

This guideline will be reviewed within three years of authorization. It may be reviewed within this period if there are any reports, new evidence, guidelines or external standards suggesting that a guideline review is required

# References

Centre for Maternal and Child Enquiries. (2010)

National Institute for Health and Clinical Excellence. (2007) Intrapartum Care 98

# **Glossary of Terms**

BHNFT- Barnsley Hospital NHS Foundation Trust
BMI – Body Mass Index
CEMACH – Confidential Enquiry into Maternity and Child Health
HIV – Human Immunodeficiency Virus
LSCS – Lower Segment Caesarean Section
NHS – National Health Service
PALS – Patient Administration Liaison Service

**Appendix One - Obstetric Guideline Checklist** 

Guideline for Clinical Risk Assessment (Labour)	Lead Professional	Review Date 05/2015

Formatting	Included/attached
Headings	included
Quality Impact Statement	included
References	included

Consultation Process	Date Disseminated/Presented	Relevant information
Initial circulation to Guideline Group and relevant parties (draft 1)	03/09/09	
Amended draft sent to development lead		
Final Draft presented to Guideline Group for ratification	29/05/12	Ratified 29/05/12
Amended/final Draft presented to Women's Governance group for Ratification	11/06/12	Ratified 11/06/12

Archiving	Date of distribution	Date of Archiving
Distribution and Retrieval	01/08/11	01/08/11

Training Package devised	Date	
Training Package Delivered	Date	

Audit/ Monitoring	Method	Date Commenced	Date Completed
Audit Process			
Monitoring process			