

Appendix 2 Maternity Real Time Staffing levels of care template

Level Of Care - Core (Previously Low)	Guidance on Care Required
Descriptor: Women or babies who do not require increased care or who require minimal increase in midwifery care in any setting: Continual risk assessment with no new risk factors identified requiring action or escalation	
Woman Requires:	Routine physical, psychological, social, cultural, and spiritual midwifery care, support and assistance
	Standard Observations: Early Warning Score requiring no further action or escalation.
	Routine parenthood education
	Routine medication
Baby Requires:	Standard Observations: Early Warning Score requiring no further action or escalation.
	General support with infant feeding and care
Midwife Requires:	Time to enable and advocate for the view, preferences and decisions for women partners and families.
	Time to care and support women, their newborn, partner and families

	The ability to ensure that women partners and families have all the information needed to fully inform their decisions.
	Time to anticipate, prevent and respond to developing complications and additional care needs.
	Time to provide effective record keeping, and maintain consistent, complete, clear, accurate, secure, and timely records to ensure an account of all care given is available for review by the woman and by all professionals involved in care
	Time to work in partnership with the woman, use evidence-based, best practice approaches to plan and carry out ongoing integrated assessment, individualised care planning and evaluation for both the woman and the newborn infant, based on sound knowledge and understanding of normal processes and recognition of deviations from these
	Time to coordinate care with wider services

Level of Care - Enhanced <i>(Previously Medium)</i>	Guidance on Care Required
Descriptor: Women or babies who require moderate increase in care in any setting: additional care factors require real time further midwifery support, advocacy, intervention/liaison with other professional groups and agencies e.g. (not exhaustive) Obstetric, Neonatology Medical, GP/Primary Care, Primary Mental Health (mild anxiety etc.), Social Services, wider care service (housing, women's aid)	
Woman Requires:	Enhanced physical, psychological, social, cultural and spiritual midwifery care, support and assistance
	Additional Observations: Early Warning Score requiring increased monitoring and/ or escalation. E.g. hourly observations
	Further action and support required following identification of additional care needs and/or concern i.e. following tests/scan results/ observations/parenthood skills
	Barriers to communication requiring additional time i.e. individuals whose first language is not English or requiring additional support with verbal/ written information
	Perinatal mental health support required

	Women restricted mobility (i.e. up to 6 hours following regional analgesia administration or those with additional accessibility needs that requires additional support)
	Enhanced, prolonged, intensive discussions with women, child or adult support and protection with women and their families and other health and social care professionals
	Additional medications e.g. Frequent IV medications
Baby Requires:	Additional Observations: Early Warning Score requiring increased monitoring and/ or escalation
	Additional care due to complications
	Increased one to one assistance with feeding and baby care
	Neonate suitable for transitional care (as per local guidance)
	Neonate having phototherapy or increased care on ward i.e. NEWs observations, neonatal abstinence
Midwife Requires:	Additional care due to complications
	Increased one to one assistance with feeding and baby care
	Neonate suitable for transitional care (as per local guidance)
	Neonate having phototherapy or increased care on ward i.e. NEWs observations, neonatal abstinence
	Time to care and support women, newborn, partner and families with additional care requirements
	Time to provide effective record keeping, and maintain consistent, complete, clear, accurate, secure, and timely records to ensure an account of all care given is available for review by the woman and by all professionals involved in care
	Time to inform and update interdisciplinary and multiagency professionals involved in care planning and provision.

Level of Care - Complex <i>(Previously High)</i>	Guidance on Care Required
Descriptor: <i>Women or babies who require intensive (complex) or one to one episodes of care in any setting (excluding established labour)</i>	

Woman Requires:	Complex physical, psychological, social, cultural and spiritual midwifery care, support and assistance
	Increased Observation: Early Warning Score requiring frequent increased monitoring and/ or urgent escalation e.g. 15-to-30-minute observations
	Emotional/ psychological support and physical care for bereaved parents
	One to one observations of women with deteriorating mental health or acute psychotic episode
	Multiple complex physical or social multiagency involvement and care
	Complex, prolonged, intensive discussions with women, child or adult support and protection with women and their families and other health and social care professionals
Baby Requires:	Early Warning Score requiring frequent/increased monitoring or urgent escalation
	Baby needing transitional care (as per local protocol). Further complex care required or may be a stepdown from neonatal unit
Midwife Requires:	Time to be able to advocate for the woman when her decision is outside of clinical guidance, in order to minimise risk and maintain relationships
	Use evidence-based, best practice approaches to promptly escalate and manage emergency situations
	Time to care and support women, their newborn, partner, and families with intensive, complex care requirements
	Time to complete additional tasks including bloods, medications, adverse event reporting or monitoring requirements
	Time to provide effective record keeping, and maintain consistent, complete, clear, accurate, secure, and timely records to ensure an account of all care given is available for review by the woman and by all professionals involved in care
	Time to liaise with additional professionals involved in care planning and provision

Level of Care - Core Intrapartum (Previously Labour)	Guidance on Care Required
Descriptor: <i>Women in spontaneous established labour or induction of labour requiring one to one care and up to 2 hours following birth of the baby in all birth settings</i>	

Woman Requires:	Continual midwifery support: physical and psychological support, assessment and planning in labour and for 2 hours following birth
	Be given the time and support to articulate their birth preferences and work in partnership with their care givers to strengthen their own capabilities to care for themselves and their newborn infant
	Requires continuous monitoring or intermittent auscultation at least every 15 minutes
	Requires routine observations i.e. routine monitoring for regional analgesia, routine labour observations
	No/minimal intervention from medical staff
Midwife Requires:	Time to be accountable and autonomous as the lead professional for midwifery care and support of women and newborn infants throughout the intrapartum and immediate postnatal period (2 hrs)
	Time to complete additional tasks including bloods, medications, adverse event reporting or monitoring requirements
	Time and support to use evidence-based, best practice approaches to respond promptly to signs of compromise and deterioration in the woman, fetus, and newborn infant, and to make clinical decisions based on need and best practice evidence; and act on those decisions
	Time to provide effective record keeping, and maintain consistent, complete, clear, accurate, secure, and timely records to ensure an account of all care given is available and captures the woman's voice, for review by the woman and by all professionals involved in care
	Time to optimise normal physiological processes and work to promote positive outcome and prevent complications

Level of Care - Enhanced Intrapartum <i>(NEW - Previously Labour)</i>	Guidance on Care Required
Descriptor: <i>Women in spontaneous established labour, induction of labour or elective/emergency caesarean section requiring one to one care and up to 2 hours following birth of the baby with complex needs i.e. 2:1 care or increased support when signs of compromise/deterioration of the woman, fetus, newborn baby</i>	

Woman Requires:	Additional continual midwifery support: physical and psychological support, assessment and planning in labour and for 2 hours following birth
	Midwifery ongoing care in theatre (e.g. Elective/Emergency C Section, MROP)
	IV Magnesium Sulphate
	Intensive Observation: Early Warning Score requiring increased frequency of monitoring and escalation
	Sliding scale for treatment of diabetic ketoacidosis or starvation ketoacidosis in labour
	Ongoing Sepsis 6 management
	Additional intervention from medical staff
Midwife Requires:	Time to be accountable and autonomous as the lead professional for midwifery care and support of women and newborn infants throughout the intrapartum and immediate postnatal period (2 hrs)
	Time to complete additional tasks including bloods, medications, adverse event reporting or monitoring requirements
	Time and support to use evidence-based, best practice approaches to respond promptly to signs of compromise and deterioration in the woman, fetus, and newborn infant, and to make clinical decisions based on need and best practice evidence; and act on those decisions
	Time to provide effective record keeping, and maintain consistent, complete, clear, accurate, secure, and timely records to ensure an account of all care given is available for review by the woman and by all professionals involved in care
	Support from multi-disciplinary team in care provision
	Midwife led care outside guidance in a midwife led setting
	Time to debrief/reflect

Level of Care - HDU	Guidance on Care Required
Descriptor: <i>Women who require additional monitoring and intervention, stabilisation period, additional respiratory support and may require additional input from medical specialities. May be an improving scenario following advanced respiratory or organ support (i.e. step-down care from ICU) or deteriorating scenario</i>	

Woman Requires:	Following haemorrhage requiring increased Early Warning Score requiring frequent increased monitoring and potential further intervention
	Pre-eclampsia on oral medication with fluid restriction requiring increased Early Warning Score requiring frequent increased monitoring and potential further intervention
	Sliding scale for stabilisation of diabetes or treatment of diabetic ketoacidosis (out with labour)
	Additional monitoring e.g. ongoing ECG due to medical conditional i.e. congenital heart disease
	Requiring oxygen therapy to maintain saturation
	Intensive Observation: Early Warning Score requiring increased frequency of monitoring and escalation
	Arterial line for monitoring or sampling
	IV antihypertensives
	CVP line
	Neurological support i.e. magnesium infusion to control pre-eclampsia
	Management of acute HELLP/acute fatty liver
	Awaiting transfer (+/- birth) to HDU/ITU (non-maternity setting)
	Multi-agency physical, psychological, social, cultural and spiritual midwifery care, support and assistance
	High level of care and support to encourage and maintain engagement with services i.e. those not accessing care with chaotic lifestyles
Baby Requires:	Acute neonatal stabilisation and pre-transport care
Midwife Requires:	Time and support to use evidence-based, best practice approaches to the management of emergency situations and support the family
	Seek support and assistance following any traumatic events e.g. hot debrief with the team
	Support from multidisciplinary team in care provision
	Time to complete additional tasks including frequent bloods, medications, adverse event reporting or monitoring requirements

Level of Care - ICU (NEW)	Guidance on care required
Descriptor: <i>Women who require advanced monitoring and intervention, stabilisation, advanced respiratory support, and additional support of one or more organ systems</i>	
Woman Requires:	Simultaneous use of two IV antiarrhythmic/antihypertensive/vasoactive drugs
	Invasive mechanical ventilation
	Combined renal and respiratory support
	Combined cardiovascular and respiratory support
	Cardiac failure requiring pharmacological support or cardiac output monitoring
	Haematological failure e.g. severe coagulopathy
Baby Requires:	Thermoregulation requiring incubator care
	Requiring therapeutic hypothermia
	Neurological symptoms e.g. seizures
	Chest compressions required during resuscitation
	Additional respiratory support
	Ongoing IV infusions
	Congenital condition requiring neonatal admission e.g. cardiac anomalies, open spina bifida etc
	Invasive lines e.g. umbilical or arterial lines
Midwife Requires:	Stabilisation prior to transfer to Children's hospital
	Time and support to ensure effective record keeping, and maintain consistent, complete, clear, accurate, secure, and timely records to ensure an account of all care given is available for review by the woman and by all professionals involved in care
	Support and opportunity to de-brief following any traumatic events

Please note:

- ICU care is out with the midwife's sphere of practice.
- There will still be a midwifery requirement for care of both mother and baby.