

Healthcare Staffing Programme

Maternity services staffing level tool: levels of care

Level 1: 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

- enhanced physical, psychological, social, cultural and spiritual midwifery care, support and assistance
- additional observations: Early Warning Score (EWS) requiring increased monitoring and/or escalation, ie, hourly observations
- further action and support required following identification of additional care needs and/or concern ie, following tests, scan results, observations, parenthood skills
- barriers to communication requiring additional time ie, individuals whose first language is not English or requiring additional support with verbal or written information
- perinatal mental health support required
- women restricted mobility, ie, 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 ie, frequent Intravenous (IV) medications

Baby Requires

- additional Observations: EWS 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 ie, EWS observations, Neonatal Abstinence (NAS)

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 ie, EWS observations, NAS
- 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 2: Enhanced (*Previously Medium*)

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 or liaison with other professional groups and agencies
- ie, (not exhaustive) Obstetric, Neonatology Medical, GP or 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: EWS requiring increased monitoring and/or escalation. ie, hourly observations
- further action and support required following identification of additional care needs and/or concern ie, following tests, scan results, observations, parenthood skills
- barriers to communication requiring additional time ie, individuals whose first language is not English or requiring additional support with verbal or written information
- perinatal mental health support required
- women restricted mobility, ie, 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 ie, frequent IV medications

Baby Requires

- additional Observations: EWS 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 ie, EWS observations, NAS

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 ie, EWS observations, NAS

- 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 3: Complex (Previously High)

Guidance on Care Required

Descriptor

- Women or babies who require intensive (complex) or one to one episode of care in any setting (excluding established labour)

Woman Requires

- complex physical, psychological, social, cultural and spiritual midwifery care, support and assistance
- increased observation: EWS requiring frequent increased monitoring and/or urgent escalation ie, 15 to 30 minute observations
- emotional or psychological support and physical care for bereaved parents
- one-to-one observation 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

- EWS requiring frequent or 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, 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

Level 4: Core Intrapartum (Previously Labour)

Guidance on Care Required

Descriptor

- 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

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 ie, routine monitoring for regional analgesia, routine labour observations
- no or 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, foetus, 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 5: Enhanced Intrapartum (NEW - Previously Labour)

Guidance on Care Required

Descriptor

- women in spontaneous established labour, induction of labour or elective or emergency caesarean section requiring one to one care and up to 2 hours following birth of the baby with complex needs ie, 2:1 care or increased support when signs of compromise or deterioration of the woman, foetus, newborn baby

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, ie, elective or emergency c-section, Manual Removal of Placenta (MROP)
- IV Magnesium Sulphate
- intensive observation: EWS 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, foetus, 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 or reflect

Level 6: High Dependency (HDU)

Guidance on Care Required

Descriptor

- 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, ie, step-down care from Intensive Care Unit (ICU) or deteriorating scenario

Woman Requires

- following haemorrhage requiring increased EWS requiring frequent increased monitoring and potential further intervention
- pre-eclampsia on oral medication with fluid restriction requiring increased EWS requiring frequent increased monitoring and potential further intervention
- sliding scale for stabilisation of diabetes or treatment of diabetic ketoacidosis (outwith labour)
- additional monitoring ie, ongoing Electrocardiogram (ECG) due to medical conditional ie, congenital heart disease
- requiring oxygen therapy to maintain saturation
- intensive observation: EWS requiring increased frequency of monitoring and escalation
- arterial line for monitoring or sampling
- IV antihypertensives
- CVP line
- neurological support ie, magnesium infusion to control pre-eclampsia
- management of acute Haemolysis, Elevated Liver enzymes and Low Platelets (HELLP) or acute fatty liver
- awaiting transfer (+/- birth) to High Dependency Unit (HDU) or Intensive Therapy Unit (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 ie, 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 ie, 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 7: Intensive Care (ICU) (NEW)

Guidance on care required

Descriptor

- women who require advanced monitoring and intervention, stabilisation, advanced respiratory support, and additional support of one or more organ systems

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 ie, severe coagulopathy

Baby Requires

- thermoregulation requiring incubator care
- requiring therapeutic hypothermia
- neurological symptoms ie, seizures
- chest compressions required during resuscitation
- additional respiratory support
- ongoing IV infusions
- congenital condition requiring neonatal admission ie, cardiac anomalies, open spina bifida etc
- invasive lines ie, umbilical or arterial lines
- stabilisation prior to transfer to Children's hospital

Midwife Requires

- 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 midwifery requirements for care of both mother and baby.