



**Aneurin Bevan University Health Board**

# **Jump Call Procedure for Maternity Services**

*N.B. Staff should be discouraged from printing this document. This is to avoid the risk of out of date printed versions of the document. The Intranet should be referred to for the current version of the document.*



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## **Introduction**

This document is a Welsh Risk Pool Maternity standard requirement to clearly describe the maternity staff chain of command and sets out the procedure to be followed when there are alternative clinical views for consideration.

## **Aims**

To provide support for clinical decision making

## **Objectives**

This procedure is designed to provide clarity in relation the chain of command

## **Scope**

This procedure applies within maternity services for both midwifery and medical staff.

## **Roles and Responsibilities**

The procedure will be communicated to staff via senior Midwifery Manager communicated and monitored via the local risk management forums.

## **Flow chart –see appendix 1**

Show how the document statement will be achieved. Reference all evidence appropriately.

## **Standards for Health Services Wales**

This protocol demonstrates compliance with Health and Care Standards 2 and 3 “Safe and effective care”.

## **Audit**

This protocol will be audited via the local risk management forums.

## **Appendix 1 Jump Call Procedure for Maternity Services**

### **Rationale:**

Midwives and medical staff should be able to communicate and consult freely at an appropriate level.

Welsh Risk Pool (Maternity) requires that there must be a clear chain of command and review if there is any change in clinical condition of mother or fetus either before or during labour. Nursing and Midwifery Council requires that nurses and midwives must act without delay if they believe that there is a risk to patient safety and that to achieve this, concerns must be escalated.

If a midwife or doctor has cause for clinical concern or concern for the woman/fetus /baby:-

1. Immediately inform the lead midwife and the Obstetric Registrar
2. There should be an agreed action plan for the ongoing management for the situation with agreed time for review
3. Consultant Obstetrician should be informed of any ongoing concern or risk

### **However If**

1. No plan of labour can be agreed with the appropriate personnel, the on-call Consultant Obstetrician for labour ward should be informed
2. If there is still cause for concern, the midwife or Consultant Obstetrician will make the decision to take the issue to the Clinical Director, where indicated, e.g. a professional matter.  
Midwifery concerns will be referred to the Head of Midwifery

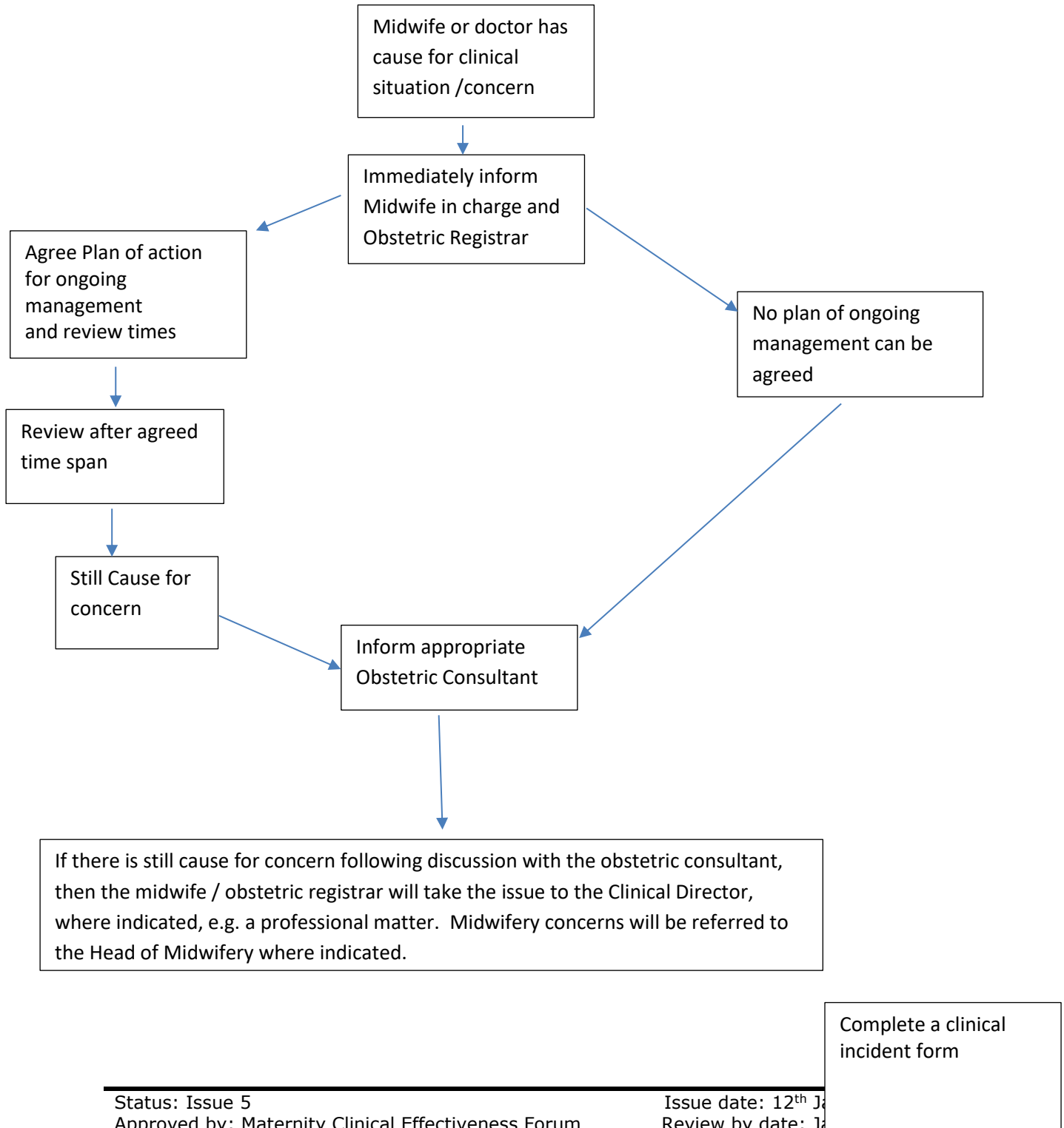
If a midwife has grave concerns or disagrees strongly with the management plan at any time they should seek advice from the labour ward coordinator or escalate to the appropriate Consultant, Head of Midwifery/Manager on call.

## **Jump Call Procedure for Midwifery Led Care:**

If a midwife has cause and requires support or advice they should:-

1. Inform their lead Midwife in charge that day or the on call midwifery manager of the cause for her concerns and her intended action plan
2. If there is a disagreement with the intended action plan the midwives can contact:  
The on call on midwifery manager
3. If there are still concerns, the Midwives will discuss with the Head of Midwifery or their deputy

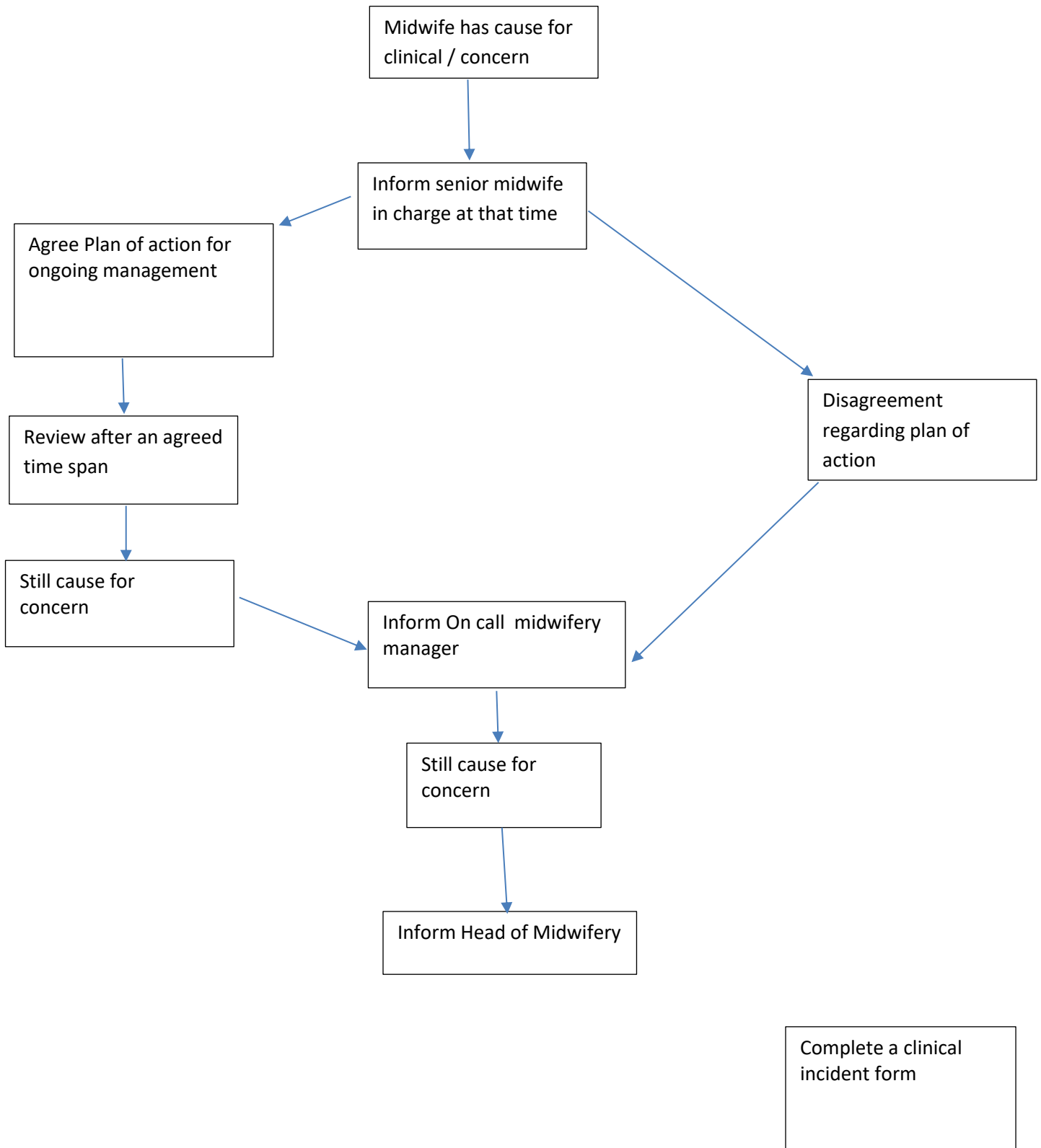
**Jump call Procedure during intrapartum period \*In the event that the non resident on call consultant needs to be contacted by the Band 7 midwife they should in the first instance defer to the resident staff/associate specialist ( Nevill Hall Hospital)**







## Jump Call Procedure for Midwifery Led Care:



## Communication with Non-resident Consultant on call

To ensure any communication in such emergency situations is as clear as possible when speaking to the non –resident consultant on call

Category 1 State “I need you to attend...”

Category 2 State “I need your advice....”

Category 3 State “I need you to be aware of...”

The non-resident consultant on call in response will state

Category 1 State “Will you confirm, you need me to attend...2

Category 2 State “Will you confirm, you need my advice...”

Category 3 State 2 “Will you confirm, you want me to be aware of....”

The caller will confirm the level of response they require

## **References:**

Welsh Risk Pool: Maternity area for assessment 4

Raising Concerns: Guidance for Nurses and Midwives NMC 2015

Raising Concerns: guidance for RCN members RCN 2016

Raising and acting on concerns about patient safety (2012) GMC  
2012

Royal College of Obstetricians and Gynaecologists Setting standards to  
improve women's health. Good practice no. 8 March 2009. Responsibility of  
consultant on call

The Code for Nurses and Midwives NMC 2015