

Protocol for the care of women in labour who have not accessed antenatal care

Approved by: Antenatal Forum
Approval Date: November 2020
Review Date: November 2023

1.0 Purpose of protocol

The purpose of this protocol is to provide guidance for midwives, laboratory staff, obstetricians and paediatricians on the management of women in labour who have not accessed antenatal care, and their babies post delivery. This includes the hospital and community settings.

2.0 Background

Women who have not accessed antenatal care are more likely to have health associated risks (Confidential Enquiry into Maternal and Child Health 2007).

3.0 Management of Care

In the hospital or community setting the medical and previous obstetric history must be completed by the midwife. In the hospital setting obtain previous obstetric notes if possible.

As a minimum the midwife must:

- Take as detailed a history as possible and carry out a general examination (including abdominal palpation to estimate gestation and confirm presentation)
- In the hospital setting, request USS for estimation of gestation and placental localisation if possible
- Carry out all investigations with the woman's consent. If the woman does not speak English, an interpreter must be used (See Interpretation Guidelines).

If in established labour:

- Notify NICU of gestation or any potential problems
- Request paediatrician for delivery.

3.1 Safeguarding Children

Women who have not accessed antenatal care may be a cause for concern. **It is vital to check WPAS for any previous safeguarding alerts and if there is a Cause for Concern file on the Z drive under safeguarding. Also check the National Alert file on the Z drive also under safeguarding.**

In all cases complete a SIP 1 and 2 and share with Health Visitor and GP, also inform the Named Midwife for Safeguarding and Manager on call.

If there are any child protection concerns then Social Services must be contacted. This referral must be made by the health professional who has identified the concern. An urgent referral via telephone must be made, and this should then be followed up by a written referral within 48 hours. The paediatricians should be informed of the social circumstances and child protection concerns at the time of neonatal examination.

Prior to discharge in all instances please inform:

- Paediatrician
- Named Midwife for Safeguarding Children
- Community midwife
- Health visitor
- GP
- Any other relevant professional.

3.2 Routine blood tests

Discuss and offer as soon as is practical:

- Full Blood Count (NICE, 2008)
- Blood Group and Antibodies (Antenatal Screening Wales, (ASW) 2019)
- Communicable disease screening (ASW, 2019)
 - Syphilis
 - Hepatitis B
 - HIV.

HIV and Hepatitis B

The midwife or paediatrician should discuss with the consultant microbiologist and undertake a joint risk assessment to establish the urgency of testing and management whilst awaiting results.

Women who have not been offered screening for HIV, Hepatitis B or syphilis in the antenatal period or intrapartum period must be offered these tests in the immediate postnatal period (within 4 hours of delivery) by the midwife caring for her.

If women decline the offer of screening tests, the paediatricians must be informed to ensure the appropriate care plan is put in place for the infant.

Contact details for Consultant Microbiologist **Transport of samples to the Public Health Laboratory**

Samples must be marked 'urgent' and transported to the National Public Health laboratory in Singleton as soon as possible.

During working hours (9am – 5pm), contact Virology to inform of urgent test requests:

- Singleton NPHS Laboratory: Extension: 35059

3.3 Management of blood test results

Haemoglobin

Diagnosis of anaemia requires treatment as directed by a doctor.

	9am – 5pm On duty Consultant Microbiologist/Virology	Out of hours – telephone on call Consultant Microbiologist
Singleton & Neath- Port Talbot	Extension 35055	Switchboard - 100 01792 205666

Women who have given birth in hospital

Women must not be discharged until the Hepatitis B and preliminary HIV results are available.

Women who have given birth at home

The community midwife must take the screening blood tests at home soon after the birth and transport these urgently to the hospital to arrange for sample to be sent to NPHS laboratory, to ensure urgent testing.

Blood Group and antibodies

Ensure blood group results are available in a timely manner to ensure the offer and administration of Anti – D can be completed within 72 hours of the baby's birth.

HIV, Hepatitis B or Syphilis

For urgent review by obstetric team to create plan

Paediatric review if birth has occurred

Information for women leaflets are available online via the Antenatal Screening Wales website.

Information for Women

Pre test information for women

Antenatal Screening Wales

Information Pack for Women: Syphilis, Hepatitis B, HIV
Blood group and Antibodies

Post test information for women

Antenatal Screening Wales (Available online)

Positive Syphilis
Positive Hepatitis B
Positive HIV

British Blood Transfusion Service

Blood group and Irregular Antibodies

Information for women who do not speak English

The use of an interpreter should be employed where appropriate, if this is not possible “Language line” must be used. This is essential to obtain informed consent (ASW, 2019).

Language Line contact number: **0845 310 9900**

References

Antenatal Screening Wales (2019) *Policy and Standards* Cardiff: Welsh Assembly Government.

Confidential Enquiry into Maternal and Child Health (2007) *Saving Mothers Lives*, London: RCOG Press.

National Institute of Clinical Excellence, (2008) *Antenatal Care routine care for the healthy pregnant woman*, London: Royal College of Obstetricians and Gynaecologist Press.

Maternity Services

Checklist for Clinical Guidelines being Submitted for Approval

Title of Guideline:	Protocol for the care of women in labour who have not accessed antenatal care
Name(s) of Author:	Katie Donovan
Chair of Group or Committee approving submission:	Antenatal Forum
Brief outline giving reasons for document being submitted for ratification	Updated guideline
Details of persons included in consultation process:	Antenatal forum members
Name of Pharmacist (mandatory if drugs involved):	
Issue / Version No:	2
Please list any policies/guidelines this document will supercede:	Protocol for the care of women in labour who have not accessed antenatal care
Date approved by Group:	November 2021
Next Review / Guideline Expiry:	November 2024
Please indicate key words you wish to be linked to document	Antenatal, antenatal care, unbooked
File Name: Used to locate where file is stores on hard drive	