The Shrewsbury and Telford Hospital NHS Trust

A FRAMEWORK FOR THE DEVELOPMENT OF PROTOCOLS AND GUIDELINES IN MATERNITY

Implementation Date: June 2004

Reviewed: December 2006

Review Date: December 2008

Personal responsible for review: Practice Development Midwife

Executive Lead: Divisional Manager

Document Location: Maternity Guidelines for Practice Folder

1.0 INTRODUCTION

- 1.1 The Maternity Service is committed to providing women with evidence based care that is current and supported by recognized professional and national advice. It is a dynamic speciality and recommendations for good practice are published frequently. Where appropriate, recommendations should be integrated into practice with any relevant training as soon as practicable.
- The Women's Division has an internal mechanism for developing, ratifying and archiving of protocols and guidelines (guidance) which links with the corporate structure and ensures the usage of the Trust policy for the writing and formatting of guidance. This document should be read in conjunction with the Trust Framework "A Framework for the Development of Policy, Procedures, Protocols, and Guidelines for Health Care Professionals" and the Women's Services Risk Management Strategy.

2.0 OBJECTIVES

- 2.1 By adhering to the advice in this document it will ensure that Labour Ward Protocols, Maternity Guidelines for Practice and any additional clinical guidance for maternity care is:
- Compliant with Trust Policy for writing guidelines
- Guidance is developed in a systematic way, including literature search and review
- Considerate of training needs that will enable effective implementation
- Accepted and ratified by appropriate personnel and bodies
- Disseminated to aid compliance with the Division, including via the intranet knowledge library
- Reviewed on a regular basis and on formal intervals of two years (always within 3 years)
- Current with out of date guidance removed from clinical areas
- Archived for future reference
- Audited to assess adherence and relevance

3.0 DEFINITIONS

Policy

An organizational statement of intent. In general terms what the organization/department intends to do about something.

Procedure

The mandatory steps taken to fulfill a policy. In other words, rules and step by step instructions on how to perform a particular task.

Protocol

The rules within which you operate. In other words, the clinical guidance to be followed. Generally governed by professional advisory body.

Guidelines

Are instructional and informative documents on specific subjects where subjective reasoning and a variety of options may need to be considered.

Labour Ward Protocols

Clinical guidance documents providing rules for Obstetricians, Midwives, Junior Doctors and Maternity Support Workers, providing intrapartum clinical care.

Maternity Guidelines for Practice

Instrumental and informative county-wide guidance for health professionals, providing maternity care.

4.0 SPECIFIC DETAIL

Guidance Development and Amendments (See Appendix 2)

- 4.1 New guidance (protocol/guideline) or amendment to existing guidance will be required to implement recommendations from a variety of sources including:
- Professional bodies e.g. Royal College of Obstetricians and Gynaecologists (green topped), Royal College of Midwives, Royal College of Anaesthetists.
- National Initiatives e.g. Confidential Enquiries, National Institute for Clinical Excellence, CNST, Healthcare Commission
- Local Initiatives e.g. Incident reporting, clinical audit, complaints, litigations, Coroners
- Individual requests e.g. Clinician wishing to implement a new technique
- 4.2 The Maternity Guideline Group and the Labour Ward Forum and Maternity Governance Group will be the main local groups providing advice on the need for guideline development/amendments.
- 4.3 Whenever possible the format of guidance should adhere to the process described in the 'Framework for the Development of Policies, Procedures, Protocols and Guidelines for Healthcare Professionals' document (SaTH).
- 4.4 In addition to the above, the impact of each individual maternity guidance should be considered, paying particular attention to:
- Evidence of valid literature search and review, using assistance from the Health Library as appropriate
- The areas of the Maternity Service and the personnel the guidance will effect
- Contributions by relevant stakeholders
- Training and resources needed to aid implementation and adherence in all areas adopting the guidance.

5.0 GROUP RESPONSIBILITIES

Labour Ward Forum and Maternity Governance Group (LWF and MGG)

Will have the responsibility to:

- Request guidance development/amendment as this need is identified
- Monitor the work of the Maternity Guideline Group
- Ratify guidance for major changes/development of clinical guidance

9.0 AUDIT

- 9.1 Audit of the implementation of this framework will be via the Maternity Guidelines Group.
- 9.2 Audit of individual guidance will be via a planned approach and high impact guidance will be prioritised.

10.0 IMPLEMENTATION

- 10.1 Implementation of this framework will be co-ordinated by the Maternity Guidelines Group and monitored via the LWF and MGG.
- 10.2 Implementation of individual guidance will be planned following consideration of the following:
- Any training needs
- Information for patients
- Need for inclusion in staff induction
- 10.3 Implementation date will clearly be indicated for each individual guidance. In addition, review date will be highlighted.

Maternity Guideline Group

The Maternity Guidelines Group is a sub-group of the Labour Ward Forum and Maternity Governance Group who will ensure a systematic approach to the development and archiving of robust evidence-based multi-disciplinary clinical guidance.

The group will have agreed Terms of Reference (see Appendix 1), minute the meetings and provide feedback to the LWF and MGG.

The Maternity Guideline Group will have responsibility for bi-annual review and distribution of Labour Ward Protocols and Maternity Guidelines for Practice.

The group will monitor a cycle of audit of relevant clinical guidance, ensuring where appropriate a guideline is audited within the minimum 3 year period required by CNST.

6.0 INDIVIDUAL RESPONSIBILITIES

Practice Development Midwife to be responsible for ensuring a planned approach to the implementation of the guidance is achieved.

Project Midwife (Audit/IT/CNST) to be responsible for co-ordinating a cycle of maternity clinical audit, liaising with the Lead Obstetrician for audit.

Project Midwife (Practice Facilitation/Antenatal Triage & Support Midwife) to be responsible for joint co-ordination of a planned review and distribution cycle of maternity guidelines for practice.

Senior Midwife for Inpatient Services and Lead Obstetrician are to be responsible for a planned cycle of review and distribution of Labour Ward Protocols.

Senior Midwives/Obstetricians/Supervisors of Midwives and Guideline Development Heads/Authors to be responsible for adhering to this guidance whenever possible when developing new or existing guidance.

7.0 RATIFICATION (See Appendix 2)

- 7.1 Confirmation of ratification of new, amended or reviewed guidance will be by signing of the guidance by the Lead Obstetrician for Labour Ward and the Head of Midwifery/Directorate Manager.
- 7.2 The Division's representation on the Trust's Policy and Procedure Group should ensure:
- Guidelines are written in line with Trust Policy
- The Trust is corporately informed of guidelines that are developed within the Division
- Guidance is forwarded for inclusion on the intranet site to ensure wide circulation to areas who may require reference to documentation e.g Suspected ectopic pregnancy attending A&E.

8.0 TRAINING

- 8.1 Attendance at Trust Guideline Development Workshops is encouraged for staff implementing this framework. However no formal training is required.
- 8.2 Training requirements for implementation of individual guidance should be considered on an individual basis.

APPENDIX 1

Terms of Reference and Membership

Maternity Guideline Group

Terms of reference

Key Aim:

This group will ensure that clinical guidelines within Maternity reflects evidence-based multi-disciplinary practice and positively influence patients' outcome. The group will oversee the implementation of the Women's framework for the development of protocols and guidelines in Maternity, to ensure a systematic and formalised approach.

Objectives:

- To meet at least quarterly and provide representation from all areas utilising maternity guidelines.
- To co-ordinate a planned approach to bi-annual reviews of Labour Ward Protocols, Maternity Guidelines for practice.
- To co-ordinate a tri-annual audit cycle for relevant guideline.
- To ensure a formalised approach to literature search and review is adopted.
- Oversee the ratification of maternity guidelines.
- Ensure distribution of maternity guidelines is achieved to all relevant areas.
- Monitor the adoption of a systematic approach to guideline reviews.
- Ensure a formal approach to archiving of guidelines is adopted within the Division.
- Audit findings from clinical audit with influence guideline development.
- All meetings will be minuted.

The objectives link to Domain 1 of Standards for Better Health (safety).

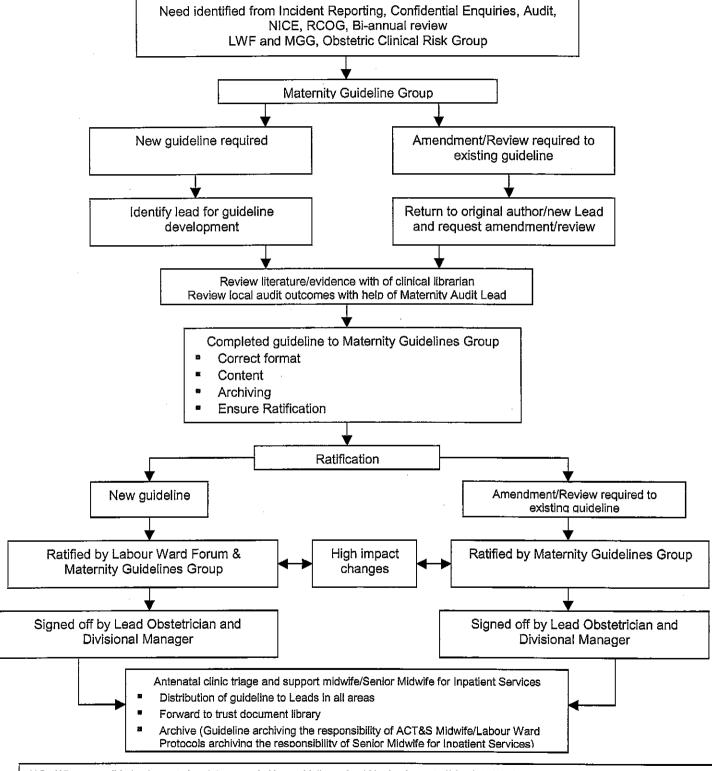
Membership

Practice Development Midwife/Directorate Manager	
Clinical Project Midwife/Contact Supervisor of Midwives	
Senior Midwife Shropshire Community Services	
Senior Midwife Telford Community Services	
Senior Midwife for Consultant Labour Ward	
Clinic Booking Co-Ordinator	
Clinical Librarian	
Clinical Risk Co-Ordinator	
Project Midwife (Audit, IT, CNST)	
Obstetric Audit Lead (Obstetrician)	

Members to attend 50% of meetings and nominate a deputy.

APPENDIX 2

System for Developing New Guidelines or Amendment/Review of Existing Clinical Guidance



N.B. Where possible implementation date agreed. New guidelines should be implemented/circulated during the bi-annual review. This enables inclusion in index and folders. Where this is not possible, a copy must be emailed to the Co-ordinator of the protocol/guideline folder.

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