

Re: Your request made under the Freedom of Information Act 2000

Freedom of Information Request to NHS Trusts with Maternity Units

Terms of Reference:

- **Trust** – refers to **ALL** individual sites (hospitals) within a Trust. Where multiple sites exist, information should be provided for each site.
 - **Maternity Unit** – refers to all hospital areas where maternity-specific services are provided. Examples include Day Assessment Units and Labour wards.
 - **Obstetric Sepsis** – all pregnancy-related sepsis that occurs during or after pregnancy, abortion, miscarriage, or delivery, and up to 6 weeks postpartum.
 - **EHR** – any electronic health or patient system (including EPRs) that is routinely used to capture bedside and other clinical data for patients such as vital signs, as well as laboratory and radiographic results.
 - **DSA** – any sepsis alert that is linked to patients’ electronic health record and serves as a component of an obstetric early warning system / protocol.
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1. Does your Trust use an electronic health record system [EHR] (e.g., Cerner, System C, Dedalus)?
[YES / NO] **NO**
 - If **YES**, do sites within your Trust use different EHRs? [YES / NO] or **NA** (single site Trusts).
2. Please name the EHR systems used at each Trust site.
3. Does your Trust’s site(s) also use EHRs for obstetric patients? [YES / NO]
 - If **YES**, please name ALL EHR systems used for obstetric patients at each site, and when they were introduced?
4. Does your Trust’s site(s) use an algorithm (e.g., MEWS, NEWS2, qSOFA) for the early detection of obstetric sepsis? [YES / NO] **YES**
 - If **YES**, please provide details of the obstetric sepsis algorithm used in your Trust’s site(s). Please attach details if possible.
5. Does your Trust’s site(s) use a digital sepsis alert for obstetric sepsis? [YES / NO]
 - If **YES**, please specify ALL sites where the obstetric digital sepsis alert is active.
 - **Yes at Doncaster and Bassetlaw**
6. For sites with active obstetric digital sepsis alerts: please indicate the obstetric sepsis algorithm used in the digital sepsis alert.

Our Ref: 106/2023
JANUARY 2023

7. How does the obstetric digital sepsis alert notify practitioners (e.g., a pager, a flashing warning on patients' EHR)?

Please find attached our MOEWS guideline and Screen shots from our digital electronic patient record- meows charts- they alert if the observations are abnormal/scoring on the chart. (test environment used on our electronic patient record- for demonstration purposes).

MOEWS - Colour - User - MOEWS Observations 1

Time Of Occurrence

04/04/2023 15

(HH) 12 : 30 (MM)

Maternal Observations and MOEWS

Respiratory Rate breaths per min

Blood Oxygen Sat %

Temperature °C

Heart Rate bpm

Systolic Pressure mmHg

Diastolic Pressure mmHg

MAP

Urine Output (No Catheter)

PU within 8 hours

Not PU in 8-10 hours

Not PU in 10 hours

Urine Output

< 30ml / hour

> 30ml / hour

Neurological Response

Alert

Responds to Voice

Confused / Agitated

Unresponsive / Responds to Pain

Complete Later

Next

Cancel

MOEWS - Colour - User - MOEWS status

Yellow Score 0

Red Score 0

Student Midwives / Maternity Support Workers

No Colour Scores

Continue with frequency of observations as prescribed.

Yellow Scores

Re-check vital signs to confirm measurement and inform Registered Midwife immediately

Red Scores

Ask a Registered Midwife to assess the patient immediately

Registered Midwives

No Colour Scores

Continue with frequency of observations as prescribed and ensure this is part of handover of care

Yellow Scores

Re-check vital signs & perform A-E Assessment

One Yellow - minimum hourly observations for 4 hrs

Two Yellow - contact on call Registrar for advice and increase frequency of observations to a minimum of hourly for at least 2 hours. Inform the lead midwife (for LW this is the coordinator)

Red Scores

Re-check vital signs and perform A-E assessment, if any red contact on call Registrar for advice and increase the frequency of observations to a minimum of hourly for at least 2 hours. Inform the lead midwife (for LW this is the coordinator)

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Complete Later

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Cancel

MOEWS - Colour - User - New MOEWS Status

Yellow Score: 0

Red Score: 0

Student Midwives/Maternity Support Workers

Continue with frequency of observations as prescribed.

Registered Midwives

Continue with frequency of observations as prescribed and ensure this is part of handover of care.

Previous

Complete Later

Finish

Cancel

MOEWS - Colour - User - MOEWS Observations 1

Time Of Occurrence

04/04/2023
(HH) 12 : 30 (MM)

Maternal Observations and MOEWS

Respiratory Rate breaths per min
Blood Oxygen Sat %
Temperature °C
Heart Rate bpm
Systolic Pressure mmHg
Diastolic Pressure mmHg
MAP 66 mmHg

Urine Output (No Catheter)

PU within 8 hours
 Not PU in 8-10 hours
 Not PU in 10 hours

Urine Output

< 30ml / hour
 > 30ml / hour

Neurological Response

Alert
 Responds to Voice
 Confused / Agitated
 Unresponsive / Responds to Pain

Complete Later

Next

Cancel

MOEWS - Colour - User - MOEWS status

Yellow Score 2

Red Score 3

Student Midwives / Maternity Support Workers

No Colour Scores

Continue with frequency of observations as prescribed.

Yellow Scores

Re-check vital signs to confirm measurement and inform Registered Midwife immediately

Red Scores

Ask a Registered Midwife to assess the patient immediately

Registered Midwives

No Colour Scores

Continue with frequency of observations as prescribed and ensure this is part of handover of care

Yellow Scores

Re-check vital signs & perform A-E Assessment

One Yellow - minimum hourly observations for 4 hrs

Two Yellow - contact on call Registrar for advice and increase frequency of observations to a minimum of hourly for at least 2 hours. Inform the lead midwife (for LW this is the coordinator)

Red Scores

Re-check vital signs and perform A-E assessment, if any red contact on call Registrar for advice and increase the frequency of observations to a minimum of hourly for at least 2 hours. Inform the lead midwife (for LW this is the coordinator)

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Complete Later

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Cancel

MOEWS - Colour - User - New MOEWS Status

Yellow Score: 2

Red Score: 3

Student Midwives/Maternity Support Workers

> Ask a Registered Midwife to assess the patient immediately.

Registered Midwives

- > Contact Obstetric Doctor (ST3 or higher) to review within 30 minutes.
- > If per-arrest – call 2222 and ask for Obstetric Emergency Team.
- > Repeat MOEWS every 15 minutes.
- > If no response from Obstetric Doctor or no review within 30 minutes, escalate to Consultant on-call.
- > When reviewed, follow the documented management plan.
- > Repeat MOEWS every 30 minutes, or as per documented management plan (if deviation required).
- > If there is any deterioration, escalate to doctor for immediate review and consider referral to Advanced Maternity Care Unit and on-call Obstetric Anaesthetist. Obstetric Consultant should be notified of any deterioration.
- > Once MOEWS is stable (following a deviation plan or 0 yellow and 0 red scores) measure MOEWS hourly for next four hours.
- > If MOEWS increases in this time, escalate as per the new scoring.
- > Once MOEWS remain stable for 4 hours, return to measuring MOEWS as per routine care.

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Complete Later

Finish