EARLY LABOUR ASSESSMENT IN THE WOMAN’S HOME

This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.

1. AIM
   • Woman presents to hospital in established labour

2. PATIENT
   • Woman at 37 - 42 weeks gestation, with no identified risk who is in early labour, and is receiving care from a known midwife in a continuity of care model

3. STAFF
   • Registered midwife working in Midwifery Group Practice (MGP)
   • Student Midwife who is working with a MGP midwife

4. EQUIPMENT
   • Mobile Phone

5. CLINICAL PRACTICE
   • Inform woman and partner / support person during pregnancy that in some situations a home assessment visit may be offered during early labour if the woman chooses this option
   • This service would usually be only offered in daylight hours
   • Ensure woman and partner are aware planned homebirth is not currently an option with RHW
   • Ensure Work health and safety risk assessment form is completed prior to term or complete on the phone prior to home visit
   • Offer woman the option of a home assessment if appropriate
   • Notify another midwife or After Hours Nurse Manager (AHNM) of your intention to visit - including woman’s name and location of the visit
   • Assess woman in her home as per midwifery admission and document on midwifery admission assessment sheet including plan of action (take into account parity, speed of progress and estimated travel time to hospital)
   • Call an ambulance and remain with woman if birth is imminent or it is deemed unsafe for woman to be transported to hospital in private car. Notify AHNM and Delivery Suite
   • Agree and document a plan of care with woman before leaving her home and ensure other MGP midwives are aware of situation
   • Notify relevant midwife or AHNM of your departure from the woman’s home
   • Place midwifery admission assessment sheet in integrated notes upon return to hospital

6. DOCUMENTATION
   • Integrated Clinical Notes
   • Medication Chart
   • Observation Chart
   • ObstetriX
   • Partogram
   • Clinical Pathways
   • Antenatal Yellow Card
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7. EDUCATIONAL NOTES
   • It is preferable if at least one antenatal home visit has been attended prior to a home early
     labour assessment visit, to assist midwives with appropriate advice to woman in labour and for
     WHS reasons
   • Women who feel confident to stay at home until in established labour are less likely to require
     interventions such as artificial rupture of membranes (ARM), syntocinon, epidural or operative
     births

8. RELATED POLICIES / PROCEDURES / CLINICAL PRACTICE LOP
   • Telephone advice – Antenatal
   • Midwifery admission
   • Vaginal examination
   • Blood pressure measurement on a pregnant woman
   • Babies Born Before Arrival

9. REFERENCES
   1 NICE. Antenatal care: routine care for the healthy pregnant woman. National collaborating
      centre for Women’s and Children’s Health. Clinical guideline 2008
      randomised controlled trial. Journal of Obstetrics and Gynaecology Canada. (25) 9
      wards. (Systematic review) Cochrane database of Systematic Reviews. 4

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