

Perinatal Care Quarantine and Bridging Hotel – Full Clinical Guideline

Reference No.: UHDB/Operational/11:21/O17

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1. Background

1.1 Purpose

This document sets out the process for identification and referral of pregnant women and birthing people in Covid-19 quarantine and those assigned to the current refugee transition programme. It outlines measures for the provision of safe maternity care to this cohort residing in Quarantine hotels and Bridging accommodation within the Chesterfield and UHDB catchment areas.

1.2 Initial assessment

A Healthcare worker will be present at the Quarantine hotel/Bridging accommodation and therefore requires the following information in order to identify pregnant women/people and refer as required.

2. Definitions

2.1 Requires routine/non-urgent care

Requires routine/non-urgent care via direct referral to a local Maternity Triage Unit (PAU Derby for Derbyshire accommodation/MAU Burton for Staffordshire accommodation for symptoms such as pregnant/mild symptoms of pregnancy and requires booking; already booked for care but requires a follow up appointment or routine screening etc. Triage will facilitate a non-urgent appointment or arrange a midwife visit to the accommodation if required.

2.2 Requires urgent care

Requires urgent care – via direct referral to a local Maternity Triage Unit (PAU Derby for Derbyshire accommodation/MAU Burton for Staffordshire accommodation for symptoms such as altered fetal movements, headache, swelling, signs of infection, e.g. urinary tract infection or mastitis, fetal surveillance, mental health concerns, severe hyperemesis (excessive nausea and vomiting). The pregnant woman/person will require attendance at the local hospital for urgent care.

2.3 Requires emergency care

Requires emergency care – requires 999 call e.g. Signs of labour, Bleeding, Waters broken,

Seizures, Suspected sepsis, Chest pain, Respiratory difficulties, Psychotic episode, Constant Abdominal pain. Emergency care will be administered immediately as required by the Paramedic team and rapid emergency admission to the local maternity unit will take place.

3. Expectations

- 3.1 On entry to the Quarantine hotel / Bridging accommodation, all female/gender relevant guests [not everyone may declare they are pregnant] should be given the information document 'If you are Pregnant' (*Appendix A*) which includes the contact details for the local maternity unit for access to maternity care and support if required during their stay. Use interpreting services e.g. Language line if necessary, to communicate as required.
- 3.2 If the pregnant woman/person discloses that they are pregnant to the onsite healthcare worker, the healthcare worker will contact the local maternity unit as per agreed algorithm to enable maternity contact (See Appendix B &C for details).
- 3.3 Maternity related information about pregnancy, birth and further details of local maternity units can be found on the UHDB website and Maternity App.
- 3.4 The Healthcare worker will ensure the patient is registered with a GP practice and record the communication / record the clinical information in such a way that it will become part of the patient's GP record.
- 3.5 Once the maternity unit is made aware of a pregnant woman/person or newborn, either by self-referral or the onsite health care worker, a full antenatal, postnatal, or neonatal assessment (either urgent or non-urgent dependent on the circumstances) should be completed. If FGM is identified, please refer to *Appendix D*).
- 3.6 The maternity unit may allocate the Quarantine hotel or Bridging accommodation to a community midwifery team to provide liaison with the with the hotel/accommodation and onsite healthcare worker as required.
- 3.7 Guests travelling with children or vulnerable adults should be asked to consider notifying hotel reception of a suitable trusted adult who in the case of emergency could be contacted to enter the quarantine hotel/bridging accommodation as replacement carer for dependants. If guests cannot identify a trusted adult and an emergency arises, local and Department of Health Safeguarding procedures should be followed.
- 3.8 It is essential that local services are set up that allow access to maternity care and early pregnancy services. This should include consideration of whether appropriate maternity care can be provided within the quarantine hotel/bridging accommodation. If hospital attendance is required, all persons should be treated in accordance with the established local COVID-19 positive pathways.
- 3.9 Discharge from hospital should be back to the Quarantine hotel/Bridging accommodation. Admission and discharge information should be given to the individual, the GP (where one has been identified) and Health visitor, with details of their intended date to return to the accommodation. **The quarantine hotel/bridging accommodation should be notified in advance of any impending return.**

4. Contacts

RDH Pregnancy Assessment Unit	-	01332 785796
QHB Maternity Assessment Unit	-	01283 511511

Healthcare workers based at the Quarantine Hotel/Bridging accommodation should contact the most local Maternity unit. Phone lines to Triage can be used to elicit advice or to speak on behalf of a resident requiring maternity advice or care.

Where a Community midwifery team is allocated to a Quarantine hotel or Bridging accommodation for liaison, contact details for the midwifery team will be provided to the Hotel Healthcare worker.

5. References

Based on the GMEC SOP Notification pathway for pregnant women in Quarantine and Bridging Hotels (Within GMEC document: Acknowledgement: This SOP is based on the document produced by: Martine Pringle, Regional Maternity Quality Lead, East of England Regional Maternity Network NHS England/Improvement East of England Region Victoria House)

Appendix 1**If you are pregnant leaflet**

We understand that quarantine can be a stressful experience, and even more so if you are pregnant. No matter what stage of pregnancy you are, you can access advice, information and care if needed. This can be done either through the healthcare worker based at the hotel, or you can phone the Maternity Triage unit directly.

If you have not informed hotel/accommodation staff that you are pregnant, it does not matter, you can still contact us directly. Please inform the midwife that you are staying in a quarantine hotel or Bridging accommodation when you call in order to ensure you are asked the right questions.

Please call the unit closest to the hotel/accommodation on the numbers provided below. The units are open 24hours a day, 7 days a week. A midwife will be available to speak to you at any time.

The midwife will want to talk to you to make sure you are well and have all the support you need. Please do not wait until you are unwell.

You might have recently travelled on an aeroplane and are now restricted to your hotel room. This puts you at increased risk of developing a blood clot (DEEP VEIN THROMBOSIS or DVT). This is a serious life threatening emergency but is preventable:

- Make sure you drink plenty of fluids
- Do regular exercise whenever possible
- Report any pain, swelling, redness, hotness in your lower leg (your calf) immediately
- Report any shortness of breath or chest pain, however mild, immediately.

You may need special stockings to reduce your risk of blood clot, or even need to take medication to reduce your risk, as well as following the steps above.

Reasons for needing to seek expert advice from a midwife immediately:

- Signs of labour
- Any bleeding or unusual vaginal loss
- Waters break or tightenings / contractions present
- Seizures
- Suspected infection (sepsis)
- Chest pain
- Respiratory difficulties
- Psychotic episode
- Change in pattern of fetal movements
- Any abdominal pain
- Any headaches, visual disturbance (such as blurred vision or 'floaters' in eyes)
- Feeling unwell in general (eg: diarrhoea, vomiting, high temperature)
- If you are Covid-19 positive (even if you have no symptoms)

A telephone call to discuss your pregnancy with a midwife can help determine that you and your baby remain healthy throughout your stay. Staff can also put you in touch with your local maternity services for ongoing pregnancy care.

Advice has changed for pregnancy and COVID-19 vaccination, - it is safe to receive the vaccine in pregnancy. **Please book a COVID-19 vaccination as soon as you are able to, for ongoing protection for you and your baby.** Your midwife or healthcare worker or GP can advise how this can be accessed.

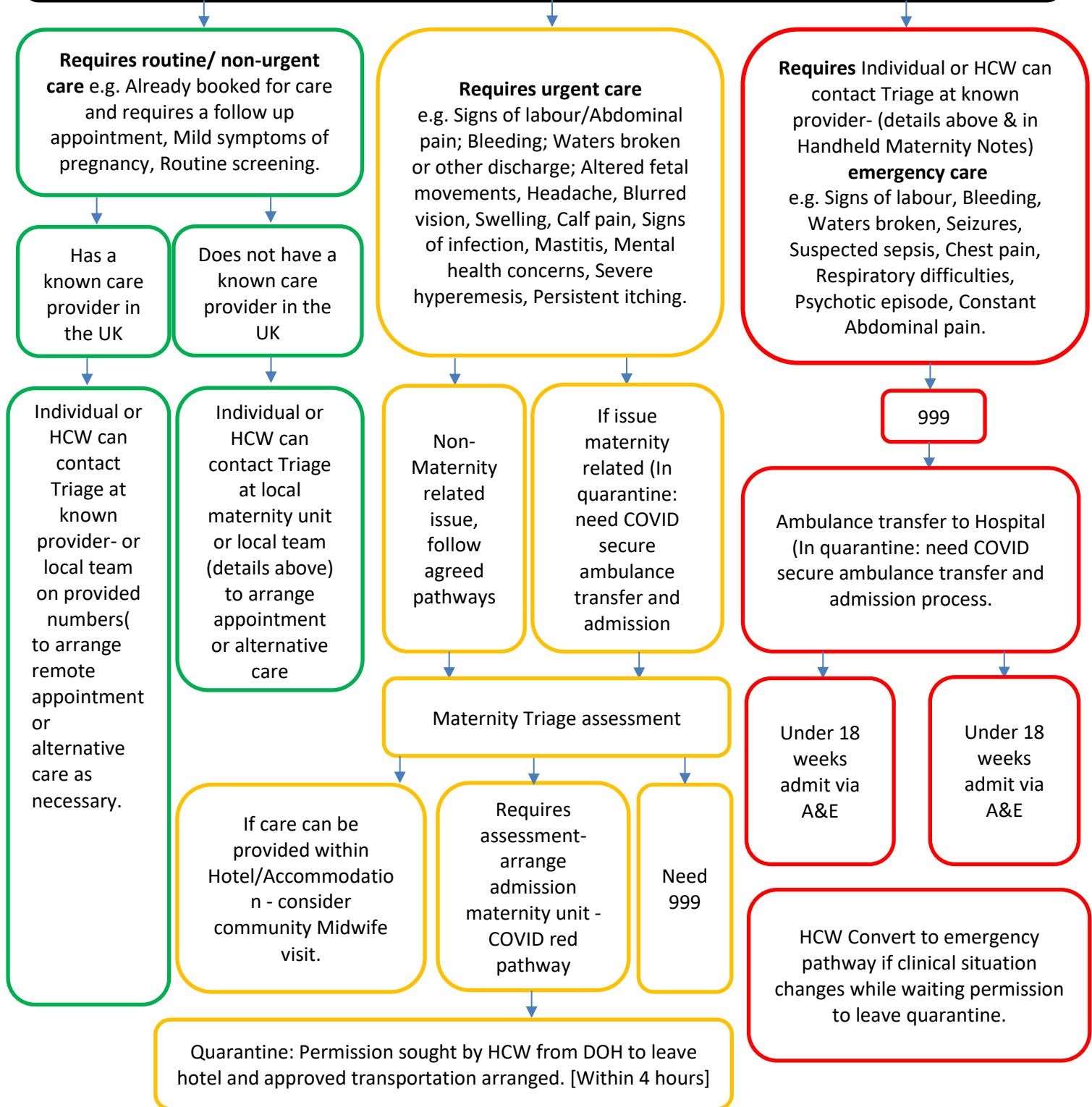
Where possible, any required investigations treatment or care will be organised for when your quarantine period ends.

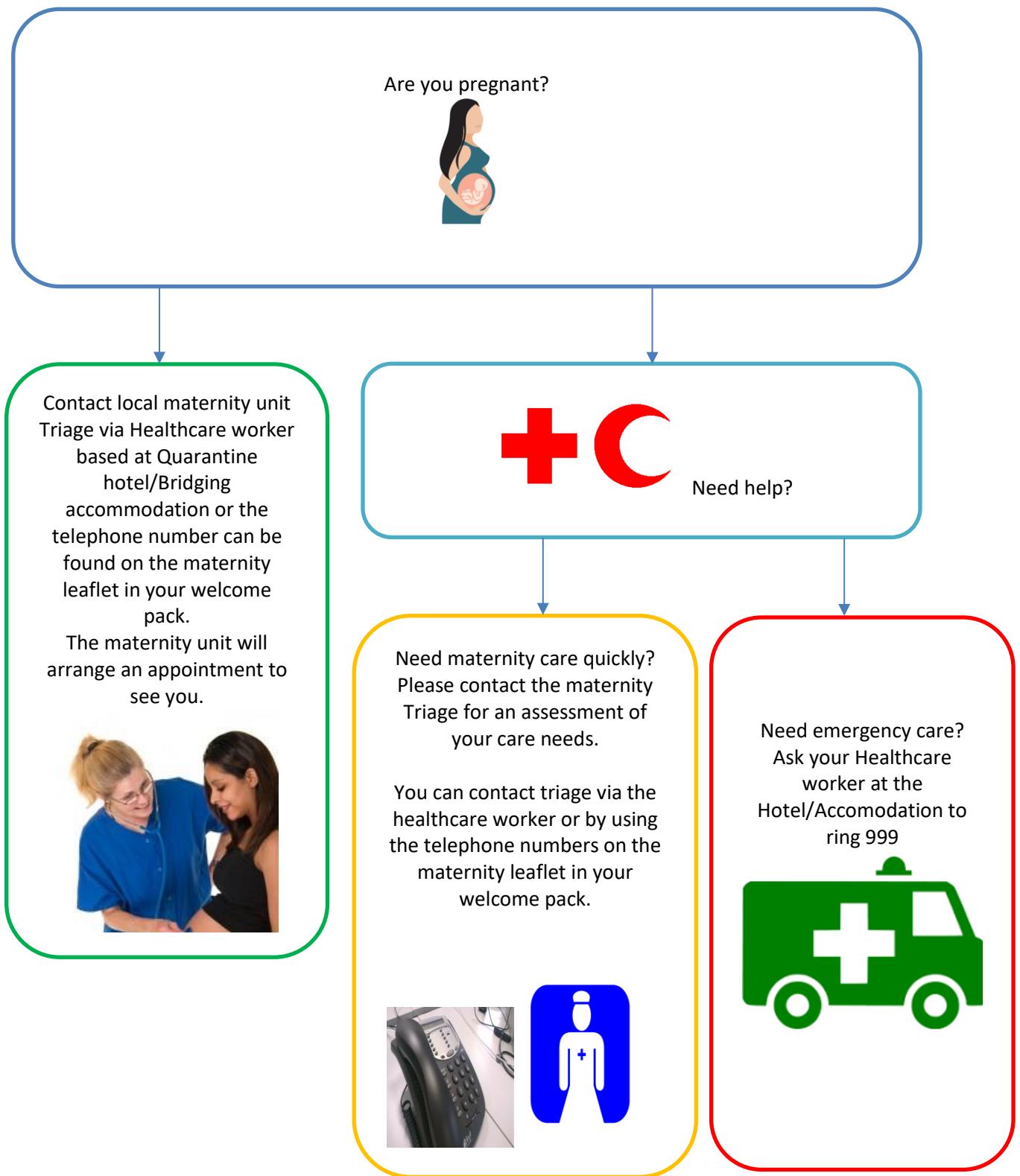
RDH Pregnancy Assessment Unit - 01332 785796
QHB Maternity Assessment Unit - 01283 511511

Appendix 2**Recommended basic maternity care pathway for pregnant women/people isolating in quarantine hotels/bridging accommodation. Guide for onsite health worker**

In cases of urgent, or emergency treatment, this will be facilitated through liaison with the healthcare worker based at the Quarantine hotel and the local Maternity service.

Woman/person identifies a need for maternity care/ support with pregnancy health and wellbeing. They must be facilitated to access maternity specific support through the locally agreed pathways.



Appendix 3**Recommended basic maternity care pathway for persons isolating in quarantine hotels/bridging accommodation. Guide for families**

Appendix 4**Female Genital Mutilation (FGM)**

Please be aware of the mandatory requirements in this area. Health professionals are required to report when FGM has occurred if:

- they are informed by a girl under 18 that an act of FGM has been carried out on her; or
- they observe physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth

If this occurs, you are required to report the matter to the police on the 101 number. For adults it is not mandatory to report FGM to the police however if the patient is a vulnerable adult, an adult safeguarding referral should be made. Obviously, each case will be individual, and an assessment will need to be made in each individual case including considering a patient's mental capacity.

Mandatory reporting of female genital mutilation: procedural information

<https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>

Multi-agency statutory guidance on female genital mutilation

<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

Female Genital Mutilation Risk and Safeguarding Guidance for professionals

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/525390/FGM_safeguarding_report

FGM: mandatory reporting in healthcare

<https://www.gov.uk/government/publications/fgm-mandatory-reporting-in-healthcare>

FGM E-learning <https://www.e-lfh.org.uk/programmes/female-genital-mutilation/>

Female Genital Mutilation - Information Sharing

The FGM-IS is a national IT system that supports the early intervention and ongoing safeguarding of girls, under the age of 18, who have a family history of Female Genital Mutilation (FGM) <https://digital.nhs.uk/services/female-genital-mutilation-information-sharing>

Further resources are available from the Royal College of General Practitioners, Royal College of Midwives, Royal College of Nursing, Royal College of Obstetricians and Gynaecologists

Female Genital Mutilation (rcgp.org.uk)

<https://www.rcm.org.uk/promoting/professional-practice/violence-women-girls/>

<https://www.rcn.org.uk/clinical-topics/female-genital-mutilation/professional-resources>

<https://www.rcog.org.uk/en/guidelines-research-services/guidelines/qtg53/>

Documentation Control

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