



Topic Expert Group: Birth and transfer

Organisation of perinatal care

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Target group

Infants, parents, and families

User group

Healthcare professionals, perinatal units, hospitals, and health services

Statement of standard

Perinatal care is organised in specialist and non-specialist centres to ensure access to optimal, preferably evidence-based, care with respect to medical knowledge, organisation structure, and staff.

Rationale

In order to deliver the appropriate level of maternal and perinatal care tailored to the severity of risk, the regional organisation of care needs to be based on designated centres of care, categorised as specialist or non-specialist centres, specifying activity that is appropriate in each. (1–10) Establishing clear, uniform criteria for designation of maternal and perinatal centres that are integrated with emergency response systems will help ensure that the appropriate numbers of trained personnel, physical space, equipment and technology are available to achieve optimal outcomes. It will also facilitate subsequent data collection regarding risk-appropriate care and has been shown to be efficient and effective in producing the best outcome for mothers and infants. (1–35)

Benefits

- Improved medical care for all pregnant women and their partners, but especially for women at risk for pregnancy complications (1,10,15,23–25,27,28,34–36)
- Improved (physical and psychological) maternal outcome (1,10,15,22,24,25,27–29,34,36)
- Improved neonatal care and outcome (1,8,10,11,13,14,16,18,19,21,23,26,30–33,36)
- Improved education/training for healthcare professionals (1,27,28,36,37)
- Increased specialist expertise (1,24,25,27,28,36,37)

Components of the standard

| Component | Grading of evidence | Indicator of meeting the standard |
|---|---------------------|-----------------------------------|
| For parents and family | | |
| 1. Expectant parents are informed by healthcare professionals about the | B (High quality) | Patient information sheet |



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|-------------------------------------|--|--------------------------------------|--|
| | organisation of perinatal care and the importance of appropriate level of care. | | |
| 2. | Expectant parents receive appropriate expert care. (1,5,7–10,12,13,15–17,19,22,28–37) | A (High quality) B (High quality) | Parent feedback, patient information sheet |
| 3. | Care is relocated as close as possible to home as soon as clinically indicated. (5) | A (Low quality) B (High quality) | Audit report |
| For healthcare professionals | | | |
| 4. | A unit guideline on the management of high risk pregnancies is adhered to by all healthcare professionals. | B (High quality) | Guideline |
| 5. | Training on the management of high risk pregnancies is attended by all responsible healthcare professionals. | B (High quality) | Training documentation |
| 6. | Healthcare professionals practice as part of a regional perinatal care network with access to agreed protocols and guidelines. | B (Moderate quality) | Audit report, training documentation |
| For perinatal unit | | | |
| 7. | A unit guideline on the management of high risk pregnancies is available and regularly updated. | B (High quality) | Guideline |
| 8. | Expertise in the management of high risk pregnancies is developed in specialist centres. | B (Moderate quality) | Audit report |
| 9. | Capacity planning is facilitated. | B (Moderate quality) | Audit report |
| 10. | Care is enhanced by network based education in non-specialist centres. | B (Moderate quality) | Audit report |
| For hospital | | | |
| 11. | Training on the management of high risk pregnancies is ensured. | B (High quality) | Training documentation |
| 12. | Appropriate resources are available for the level of perinatal care. (38) | C (Moderate quality) | Audit report, training documentation |
| 13. | A continuous perinatal care quality improvement programme is established. (38) | C (Moderate quality) | Audit report |



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|---|----------------------|--------------|
| 14. Accommodation is available for the partner when required. (see TEG NICU design) | B (Moderate quality) | Audit report |
| For health service | | |
| 15. Regional perinatal networks are organised. | B (High quality) | Audit report |
| 16. A national guideline on the management of high risk pregnancies is available and regularly updated. | B (High quality) | Guideline |
| 17. Regional / national oversight is established to ensure safety requirements for pregnancy and birth. (9,36) | A (Low quality) | Audit report |
| 18. A perinatal information system to support quality assessment, certification, and audit of network units is established and maintained. (38) | C (Moderate quality) | Audit report |

Where to go – further development of care

| Further development | Grading of evidence |
|---|----------------------------|
| For parents and family | |
| <ul style="list-style-type: none"> Parents are involved in the monitoring of quality of organisation of perinatal care and neonatal transport. | B (Low quality) |
| For healthcare professionals | |
| N/A | |
| For perinatal unit | |
| <ul style="list-style-type: none"> Ensure the availability of trained and experienced maternal-fetal specialists throughout the 24 hours. | B (High quality) |
| <ul style="list-style-type: none"> Dedicate accommodation within the hospital for expectant parents. | B (Low quality) |
| <ul style="list-style-type: none"> Benchmark services against national/international data (such as Europeristat). (38) | A (High quality) |
| For hospital | |
| N/A | |
| For health service | |
| <ul style="list-style-type: none"> Benchmark perinatal outcomes using European obstetric surveillance system (such as Europeristat). (38) | A (High quality) |
| <ul style="list-style-type: none"> Regional / National oversight is established to ensure safety requirements for pregnancy and birth. (9,36) | A (Low quality) |



Getting started

Initial steps

For parents and family

- Parents are verbally informed by healthcare professionals about perinatal care.

For healthcare professionals

- Attend training on perinatal care.
- Enhance specialty training through on-the-job training and professional education programmes.

For perinatal unit

- Develop and implement a unit guideline for standard and emergency care as well as transfer.
- Distribute information material for parents on perinatal care.
- Develop clinical perinatal networks.

For hospital

- Support healthcare professionals to participate in training on perinatal care.
- Collect information on perinatal care standards and equip perinatal units with appropriate healthcare professionals and material for patient care and training.
- Provide resources for establishing and maintaining a perinatal unit.
- Provide opportunities for on-the-job training, and experiential learning environments (clinical placements) for students undertaking professional education programmes.
- Develop clinical perinatal networks.

For health service

- Develop and implement a national guideline for standard and emergency care as well as transfer.
- Develop information material for parents on perinatal care.
- Submit and review perinatal data and output of surveillance systems.
- Monitor perinatal outcomes using European obstetric surveillance system (such as Europeristat).

Source

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