

Maternity Telephone Consultations



N SAFETY NOTICE: 031/24

Issue date:	20 November 2024
Content reviewed by:	Maternal and Perinatal Serious Incident Review Sub-Committee Health and Social Policy Branch, NSW Health Maternal and Perinatal Patient Safety, Clinical Excellence Commission
Distributed to:	Chief Executives Directors of Clinical Governance Director, Regulation and Compliance Unit
KEY MESSAGE:	Maternity telephone consultations are a necessary component of maternity care. Reliable and consistent processes are required to minimise the risk of associated adverse outcomes.
ACTION REQUIRED BY:	Chief Executives and Directors of Clinical Governance
REQUIRED ACTION:	<ol style="list-style-type: none"> 1. Distribute the Safety Notice to all relevant clinical staff. 2. Include this Safety Notice in relevant handovers and safety huddles. 3. Each Maternity service to undertake a risk assessment of local processes on maternity telephone consultations. 4. Ensure that local procedures are reviewed and address the recommendations.
DEADLINE:	November 2025
We recommend you also inform:	Directors, Managers and Staff of: <ul style="list-style-type: none"> • Maternity Services • Other clinicians who may provide care to pregnant women
Website:	https://www.health.nsw.gov.au/sabs/Pages/default.aspx http://internal.health.nsw.gov.au/quality/sabs/index.html
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Situation

The NSW Maternal Perinatal Serious Incident Review (MP SIR) Sub-Committee have identified multiple incidents involving maternity telephone consultations which have contributed to poor clinical outcomes. These incidents highlight:

- missed opportunities for the early identification of fetal deterioration
- poor processes for accessing accurate and timely advice from maternity clinicians when no maternity staff are available onsite
- inconsistent processes for following up women who do not present for care when recommended
- poor communication and handover of clinical information and not utilising healthcare interpreters when indicated
- inadequate documentation including inconsistent use of electronic record systems.

The historical practice of requiring pregnant women to telephone the maternity service for advice or with concerns prior to presenting has been identified as a barrier for accessing care.

Background

Historically, pregnant women have been advised to telephone the maternity unit prior to presenting for assessment or intrapartum care. This has been primarily to undertake a preliminary clinical assessment of maternal and fetal wellbeing, inform decision making for when women are invited to present for further assessment or care, and to ensure availability of resources such as access to relevant clinical information upon the woman's arrival.

Assessment

Whilst they can be a useful and often a necessary component of maternity care, telephone consultations present specific safety concerns that should be managed to minimise any adverse outcomes from occurring. Identified safety concerns include:

- limited ability to accurately assess maternal and fetal wellbeing
- delays in obtaining or accessing expert clinical advice
- underappreciation of women's concerns
- barriers and delays to women accessing maternity care
- inadequate follow up of women who do not present for care as planned
- miscommunication or misunderstanding of information shared, and clinical advice provided particularly when healthcare interpreters are not utilised
- inconsistent and incomplete documentation practices
- inadequate communication and handover processes following telephone consultations
- use of hybrid medical records impacting on information visibility and awareness

Facilities that implement open-door policies enable pregnant women to present for care without the need for prior telephone contact. This promotes woman-led decision making. Feedback demonstrates that this practice has not increased the number of presentations and empowers the woman to present when they have pregnancy concerns. The number of telephone enquiries are also reduced, allowing clinicians to focus on clinical care.

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Recommendations

All maternity services should:

- As part of antenatal care and education, provide all pregnant women with information on when and how to present to their local maternity service for assessment
- Encourage women with pregnancy related concerns to attend for assessment
- Ensure there are established processes for when women call with pregnancy related questions or concerns. Process should include:
 - o access timely and accurate clinical advice directly from maternity clinicians (even when there are no maternity clinicians available onsite)
 - o alert maternity staff to follow up women who do not present for assessment as planned
 - o access a healthcare interpreter to support communication via telephone when indicated
 - o support appropriate and timely communication and handover of care between clinicians following a telephone consultation
 - o access eMaternity or CERNER Maternity (regardless of setting) to facilitate contemporaneous documentation directly into the electronic system
- Ensure documentation of telephone consultations is conducted in accordance with NSW Health Policy, Health Care Records – Documentation and Management ([PD2012_069](#)).
- Only use paper based telephone consultation records as part of electronic system downtime procedures where possible
- Consider implementing a process where pregnant women are welcome to present to maternity services at any time without calling when they have pregnancy related concerns