

Making sure there are enough midwives to safely care for women and babies

Information for the public

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About this information

NICE guidelines provide advice on the care and support that should be offered to people who use health and care services.

This information explains the advice from NICE about how women and babies should receive the care they need from midwives, at all times of the day and night, every day of the week ([NICE guideline NG4](#)). The information covers all midwives providing NHS care to women and babies including those in clinics and maternity units and those visiting women's homes. It covers midwives working with:

- women planning to get pregnant
- women during pregnancy and labour
- women and their babies after birth.

It doesn't cover doctors, maternity support workers and other staff who work with midwives to look after women and babies.

Deciding how many midwives are needed

NICE says that anywhere providing NHS maternity services should have a system to make sure there are enough midwives at all times to safely care for and support women and their babies.

The system should:

- allow for all the care women need from midwives before pregnancy, during pregnancy and when they are in labour, and for the care women and their babies need after birth
- take account of the woman's needs and any extra support required, for example if she has diabetes
- allow for every woman in established labour to have one-to-one support (Established labour is when there are regular and painful contractions, and the cervix has opened to at least 4 cm.)
- be able to manage daily changes in the need for midwives and provide cover for when midwives are on leave, training or ill.

People planning maternity services need to make sure that they:

- have plans to deal with unexpected changes in demand for midwives, for example, by using other staff to help or on-call or temporary midwives, or rescheduling non-urgent work
- review how many midwives are needed and whether demand has changed – they should carry out the review at least every 6 months
- change the number of midwives employed if the review shows that this is needed.

Checking there are enough midwives available each day

The hospital board and senior managers should make sure that there are midwives who have been trained to check that there are enough midwives available every day and what to do if there aren't enough.

At the start of every day or shift, the midwife in charge of the unit or the shift should check that there are enough midwives to give women and babies the midwifery care they need. When they are doing their checks they should take into account the particular needs of the women and babies being cared for on that day or during the shift. They should also allow for the time midwives need for other activities, such as time to talk to other healthcare professionals, travel and have breaks.

During the day or shift, the midwife in charge should look out for 'red flag events'. These are signs that there may not be enough midwives to give women and babies the care they need.

Red flag events: signs that there may not be enough midwives available

Activities that need to be done on time are delayed or cancelled.

After giving birth, a woman has to wait for 60 minutes or more before she is washed or given stitches, if she needs them.

A woman does not get the medicines she needs when she's been admitted to a hospital or a midwifery-led maternity unit.

A woman has to wait 30 minutes or more to get pain relief when she's been admitted to a hospital maternity unit or a midwifery-led maternity unit.

A woman who is in labour or who has a problem needing midwife care has to wait 30 minutes or more for assessment after the midwife has been alerted.

A woman is not given a full examination when she reports she is in labour.

There is a delay of 2 hours or more between coming in for an induction and the induction being started.

Delays in spotting and acting on signs that the woman may have a serious health problem.

The midwife in charge should do another check that there is the right number of midwives available if:

- there is an unexpected need for more midwives – for example because there are more women than expected in labour or more women or babies needing extra care or support
- there is unexpected staff absence, such when midwives are off work because they are ill
- a red flag event happens.

The midwife in charge should keep a record of any differences between the number of midwives needed and those actually available for each day or shift. They should also record any red flag events and the action taken as a result.

Each maternity service should have a plan for what the midwife in charge should do if the checks show that there are not enough midwives available. If this happens, they need to be able to act quickly, for example by asking other trained staff to help or bringing in more

midwives.

See [what you can do](#) for information about what women, and their families or carers, can do if they think there is a problem.

Checking enough midwives are employed

Senior midwives should monitor whether there are enough midwives to provide care for women and babies. They should look at the records of when the number of midwives available didn't match the number needed and when red flag events occurred (see the [box on red flag events: signs there may not be enough midwives](#)).

Feedback from women and their families or carers may be collected using the [National Maternity Services Survey](#). The survey includes questions about how well a woman was cared for during labour and birth, how well she was supported after her baby was born (including support with breastfeeding and any problems like postnatal depression), and how well the midwives communicated with her.

Organisations should also keep records of the following:

- whether a woman attended a booking appointment within 13 weeks of becoming pregnant
- when women are admitted to hospital while they are pregnant or after they have given birth
- the number of women with birth trauma, such as a tear that happens during delivery
- whether the woman gave birth in the place of her choice
- how many women breastfeed their babies
- how often staff had to miss breaks, work overtime or were off sick
- how happy staff are in their work.

Hospital managers should regularly look at this information to see if there are any problems, and they should use it when they are doing their long-term planning.

What you can do

If a woman, or her family or carer, thinks a red flag event has happened, or has other concerns, they should tell the midwife in charge of the shift or service at the time. See the [box on red flag events: signs there may not be enough midwives](#).

You might be asked to give feedback about your experience of the maternity services you use. Your opinion and comments, good or bad, will help the hospital work out how well they are doing and make changes if needed.

If you have concerns about the care you received from a midwife, you can talk to the Patient Advice and Liaison Service (PALS). Most hospitals have a PALS office. There is information about PALS and how to make a complaint on the [NHS website](#).

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