Greater Manchester and Eastern Cheshire

Red Phone Standard Operating Procedure (SOP)

Final V1
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Document Control

Document title: GMEC LMS Red Phone Procedures Standards Operating Procedure (SOP)

Ownership

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Version control

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V0.2	Revisions made following discussion between ES & JH. Shared with SH & JH	12/7/22
	Comments received from Steph Heys Ryan Gilbody, ROCC Duty Manager, NWAS Tim Byrom, Special Operations Clinical Lead, NWAS Chris Grant, Executive Medical Director, NWAS	13/7/22
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Contents

1. Introduction

There are occasions when there is a need for a time-critical admission via pre-alert (often referred to as a standby) from a community setting into an obstetric unit. This may be for a woman who is pregnant, in labour or postpartum or a neonate requiring time critical assessment. The delay in accessing specialised maternity care is considered a safety risk for both the Ambulance service and Maternity services and for women and neonates who need immediate time-critical interventions.

The purpose of this Standard Operating Procedure (SOP) is to set out a clear and standardised process for pre-alerting maternity units regarding an obstetric / neonatal time critical admission, using the pre-alert Red Phone allocated in each obstetric unit across the North West. This SOP details the role and responsibilities of the receiving unit when a time critical call from NWAS is received.

2. Process

Prior to a pre-alert being passed via NWAS, the ambulance crew on scene will have undertaken a thorough clinical assessment of the woman/neonate concluding that a time-critical admission into the obstetric unit is required.

Information regarding the clinical presentation of woman/neonate will be passed by the crew on scene via radio to the Emergency Operation Centre (EOC). The receiving EOC dispatcher will then pass a pre-alert via the nearest receiving unit's Red Phone.

The following protocol in Appendix 1 details the internal process to be undertaken by the receiving obstetric unit.

To support collection of the information being relayed over the Red Phone, an example of an information collection form (SBAR) can be found in Appendix 2.

3. Equality Impact of this SOP

Is this SOP anticipated to have any significant equality-related impact on patients, carers or staff?

NO

4. Training and Implementation

Training required for staff?	All staff involved in the care of pregnant women
Who will provide this training?	Lead Obstetricians for labour wards Practice Development Midwives
When will training be provided?	Professional training days Weekly Labour ward case reviews

5. Monitoring and auditing

When will this SOP be audited?	The SOP is subject to continuous audit
Who will be responsible for auditing this SOP?	NWAS Obstetricians Midwives

1	**RED PHONE RINGS** **(This is an Obstetric / Neonatal Emergency Call)**

2	**ANSWER** **Red Phone Must Be Immediately Answered by a MIDWIFE or DOCTOR**

3	**LISTEN** **DOCUMENT**: Pre-alert information as stated and estimated time of arrival (ETA) *(Provided by non-clinical staff, it is not a clinical discussion)* **INFORM:** Shift co-ordinator immediately – **MUST ACCEPT THE EMERGENCY** **CONSIDER:** Obstetrics / Anaesthetics / **Neonatal team** / Major haemorrhage protocol

4	**PREPARE** **TEAM:** Identify team required in line with clinical presentation of patient. **Consider need for neonatal team** **ACCESS:** Delivery Suite must be clearly signposted and accessible for NWAS with doors open (e.g. Consider Lifts and Security - NWAS clinicians may be unfamiliar with unit) **ROOM:** Prepared and equipment checked and ready

5	**RECEIVE** **MEET:** Allocate member of staff to escort NWAS to receiving unit **HANDOVER:** SBAR Handover: Listen clearly to the NWAS Clinicians handover

6	**DEBRIEF / FEEDBACK** Joint Debriefs with NWAS can lead to better joint working and learning. Shared learning/Feeding back to NWAS via maternity.team@nwas.nhs.uk

Appendix 2 Example of information to be including in an SBAR

Date and time of call	
Name of midwife/doctor receiving call	
Patient name Hospital number Date of birth	
Pre-alert information from EOC despatcher – including clinical picture and reason for transfer/admission	
Current management/ assessment	
Estimated time of arrival	
Labour ward co-ordinator informed	Time informed _____ Name of co-ordinator _____