

# Current awareness for Midwifery

## Recent guidelines, reports and articles

### October 2021

#### Guidelines

*The following guideline(s) maybe of interest:*

##### [Using Tocilizumab or Sarilumab for hospitalised patients with COVID-19 who are pregnant.](#)

Specialist Pharmacy Service (SPS); 2021.

<https://www.sps.nhs.uk/articles/using-tocilizumab-or-sarilumab-for-hospitalised-patients-with-covid-19-who-are-pregnant/>

[This page signposts to current guidance on this off-label use of the two medicines from the UK Royal College of Obstetricians and Gynaecologists and UKTIS. Healthcare professionals are encouraged to contact UKTIS should they be considered for use.]

*Freely available online*

#### Reports

*The following report(s) may be of interest:*

##### [Digital Clinical Safety Strategy.](#)

NHSX; 2021.

<https://www.nhs.uk/key-tools-and-info/digital-clinical-safety-strategy/>

[The Digital Clinical Safety Strategy will attempt to upskill digital leaders and provide a safer service when using digital technology, including through better use of data and training. Developed jointly NHSX, NHS Digital and NHS England and Improvement, the strategy expands on the 2019 NHS Patient Safety Strategy.]

*Freely available online*

##### [Instruments for assisted vaginal birth.](#)

Verma GL. *Cochrane Database of Systematic Reviews* 2021;9:CD005455.

[BACKGROUND: Assisted vaginal births are carried out to expedite birth for the benefit of mothers and babies but are sometimes associated with significant morbidity for both. Various instruments are available, broadly divided into forceps and vacuum cups, and choice may be influenced by clinical circumstances, operator preference, experience and availability. ]

##### [Making maternity services safer: nurturing a positive culture.](#)

Royal College of Midwives (RCM); 2021.

<https://www.rcm.org.uk/media-releases/2021/september/working-culture-a-crucial-factor-in-delivering-safer-maternity-care-says-rcm-on-world-patient-safety-day/>

[According to this report, poor working cultures must be tackled if UK maternity services are to be made safer. It describes how a positive working environment is needed, where multi-disciplinary teams work and train together and are better equipped to deliver good quality, safe care for women and families.]

*Freely available online*

**[MBRRACE-UK perinatal mortality surveillance report: UK perinatal deaths for births from January to December 2019.](#)**

National Perinatal Epidemiology Unit (NPEU); 2021.

<https://www.npeu.ox.ac.uk/mbrance-uk/reports>

[The results indicate that while perinatal deaths in the UK are declining – with the rate of stillbirths across the UK reducing by more than 20 per cent from 2013 to 2019 – there are key areas that need to be prioritised. The research shows an urgent need to improve care for mothers and babies from Black and Asian and minority ethnic backgrounds, and care for those living in more deprived areas.]

*Freely available online*

**[Safety of maternity services in England: government response.](#)**

Department of Health and Social Care (DHSC); 2021.

<https://www.gov.uk/government/publications/safety-of-maternity-services-in-england-government-response/>

[The government's response to the Health and Social Care Committee report: 'The safety of maternity services in England'.]

*Freely available online*

**[Safety, equity and engagement in maternity services.](#)**

Care Quality Commission (CQC); 2021.

<https://www.cqc.org.uk/publications/themes-care/safety-equity-engagement-maternity-services>

[This report highlights continued concern about the variation in the quality and safety of England's maternity services and calls for improvements to be prioritised to ensure safer care for all mothers and babies. It draws on the findings from a sample of nine focused maternity safety inspections carried out between March and June 2021, along with insight gathered from interviews and direct engagement with organisations representing women and their families.]

*Freely available online*

**Articles**

*The following articles maybe of interest:*

**[Aspirin Use to Prevent Preeclampsia and Related Morbidity and Mortality: Updated Evidence Report and Systematic Review for the US Preventive Services Task Force.](#)**

Henderson JT. *JAMA* 2021;326(12):1192-1206.

[Daily low-dose aspirin during pregnancy was associated with lower risks of serious perinatal outcomes for individuals at increased risk for preeclampsia, without evident harms.]

*Freely available online*

**[COVID-19 and maternity care in South East London: shared working and learning initiative.](#)**

Steward E. *BMJ Open Quality* 2021;10(3):DOI: 10.1136/bmj-oq-2021-001340.

[Conclusion: The already established South East London Local Maternity System network enabled the team to move at pace to establish the learning and sharing COVID-19 huddles and respond to the needs of clinicians managing pregnant women during the SARS-CoV-2 COVID-19 pandemic in a volatile, uncertain, complex and ambiguous environment. The project used a collaborative network approach to support and provide a safe space for the maternity multidisciplinary team across the sector and beyond.]

**[Fidelity and the impact of patient safety huddles on teamwork and safety culture: an evaluation of the Huddle Up for Safer Healthcare \(HUSH\) project.](#)**

Lamming L. *BMC Health Services Research* 2021;21(1):1038.

[The Huddle Up for Safer Healthcare (HUSH) project attempted to scale up the implementation of patient safety huddles (PSHs) in five hospitals - 92 wards - across three UK NHS Trusts. This paper aims to assess their fidelity, time to embed, and impact on teamwork and safety culture.]

**[PROMPT Wales project: national scaling of an evidence-based intervention to improve safety and training in maternity.](#)**

Renwick S. *BMJ Open Quality* 2021;10(4):DOI: 10.1136/bmj-oq-2020-001280.

[The NHS long-term plan (2019) acknowledges that often a gold standard approach to a problem already exists

somewhere within the NHS, however, it has not been replicated widely across the system. Conclusions: Authentically scaling up complex interventions is a significant challenge. To replicate the improved outcomes demonstrated by PROMPT, intervention reach and fidelity must first be demonstrated.]

**[SEIPS 101 and seven simple SEIPS tools.](#)**

Holden RJ. *BMJ Quality & Safety* 2021;30(11):901-910.

[Conclusion: Systems Engineering Initiative for Patient Safety (SEIPS )101 and the seven simple SEIPS tools intend to make SEIPS more usable and useful, especially for practitioners and others who may be less acquainted with SEIPS or its uses. The tools are based on our and our colleagues' experiences but require validation and evaluations of ease of use and usefulness...]

**[Tranexamic acid for prevention of bleeding in cesarean delivery: An overview of systematic reviews.](#)**

Hurskainen T. *Acta Anaesthesiologica Scandinavica* 2021;;doi: 10.1111/aas.13981.

[Systematic reviews investigating prophylactic tranexamic acid in cesarean delivery are heterogeneous in terms of methodological and reporting quality. Tranexamic acid may reduce blood transfusion and bleeding outcomes, but rigorous well-designed research is needed due to the limitations of the included studies. Data on safety and adverse effects are insufficient to draw conclusions.]

*Please contact the library for a copy*

**[Use of metformin to prolong gestation in preterm pre-eclampsia: randomised, double blind, placebo controlled trial.](#)**

Cluver CA. *BMJ* 2021;374:n2103.

[This trial suggests that extended release metformin can prolong gestation in women with preterm pre-eclampsia, although further trials are needed. It provides proof of concept that treatment of preterm pre-eclampsia is possible.]

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