

A centralised approach to the care of pregnant women with COVID-19

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Introduction

The coronavirus pandemic brought clinical and logistical challenges for healthcare professionals caring for pregnant women with COVID-19 infection. COVID-19 in pregnancy is shown to be related to adverse maternal and neonatal outcomes and is associated with hospital admission, intensive care admission and maternal mortality. Optimal care of pregnant women with this infection therefore requires input from a variety of clinical teams and specialities. Pregnant women should be offered treatment in line with national guidance and escalated appropriately to a suitable place of care to receive this.

Objectives

As part of the response to the coronavirus pandemic resulting in rising numbers of pregnant inpatients with COVID-19, in January 2021 the Trust implemented a daily central meeting to discuss all pregnant inpatients with COVID-19 and coordinate care of these women, with representation from anaesthetists, senior obstetricians, midwives and obstetric physicians. The aims were to identify deteriorating patients, coordinate their care and provide a platform for multi-disciplinary team discussion and shared decision-making. This preceded the national recommendation for multi-disciplinary approach to the care of pregnant women with COVID-19.

Design

Daily virtual meetings were attended by members of the multi-disciplinary team. Deteriorating patients were identified, care needs were escalated including discussions on place of care and plans were made for de-escalation, debrief and follow up where appropriate.

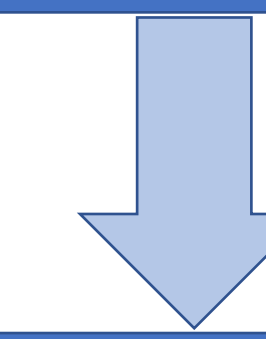
Methods

Each patient was discussed in turn to ensure she would be reviewed daily by an appropriate member of the MDT, including her need for fetal monitoring. An electronic patient list with the details and location, accessible to all relevant members of the maternity service was updated daily, allowing team members to easily access information from any trust computer or VPN.

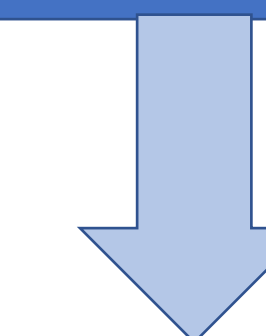
Results

This centralised approach to the coordination of care in pregnant women with COVID-19 was extremely well received by members of the MDT with positive feedback from the maternity service. Daily meetings streamlined the care for these women and ensured all MDT members were aware of all pregnant patients admitted in the trust. All positive cases in pregnant women were successfully identified, discussed, reviewed and where required, followed up.

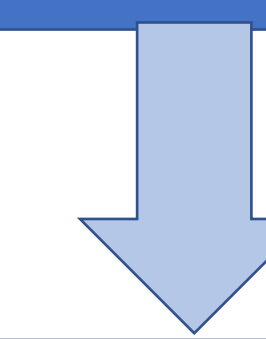
Daily virtual COVID maternity meeting



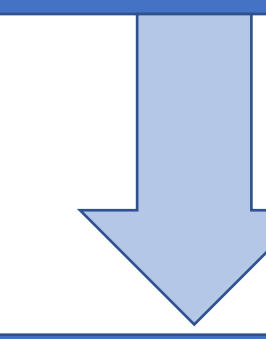
All COVID positive inpatients identified and discussed



High Risk inpatients identified and clinical reviews allocated



COVID maternity team and electronic patient list updated



Follow up arrangements made including COVID care at home on discharge

Conclusion

A centralised MDT approach to the care of pregnant women with COVID-19 allows the coordination of care for inpatients and daily review in line with the recommendations from MBRRACE-UK. The virtual format ensured social distancing policies were adhered to and that team members working from home were able to participate in the care of these women. The success in the Trust, of the COVID maternity team was result of this unique approach of daily MDT meetings for allocation of clinic review and feedback to the central team to ensure all relevant care requirements were met. The concept and approach of a central team meeting daily on a virtual platform with MDT involvement to coordinate care could have widespread uses in future pandemic or other variants.

References

1. Knight et al. Characteristics and outcomes of pregnant women admitted to hospital with confirmed SARS-CoV-2 infection in UK: national population based cohort study. BMJ 2020
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