

IMPLEMENTATION OF THE LONDON MEASURE OF UNPLANNED PREGNANCY INTO ANTENATAL CARE

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This study **evaluates** the **acceptability** and **feasibility** of implementation of the **London Measure of Unplanned Pregnancy (LMUP)** into antenatal care in the UK.

INTRODUCTION

Unplanned pregnancies are associated with **increased risks** of **poor uptake of antenatal care** and **adverse outcomes** (1-4). Around **45% of pregnancies in the UK are unplanned** (5), but they are **not routinely detected** during antenatal care.

The **LMUP** is a **validated measure** of the extent to which a **pregnancy was planned** that has been completed by thousands of women worldwide. Its use would **enable midwives** to **understand the circumstances of a woman's pregnancy**, to **personalise care** and therefore **reduce adverse outcomes**.

We **piloted the implementation** of the **LMUP into antenatal care** at **University College London Hospital (UCLH)** and **Homerton University Hospital (HUH)**, in 2020-2022 with data flowing into the Maternity Services Dataset.

METHODOLOGY

We conducted **focus groups with midwives**, and **one-to-one interviews with women**, to explore their **thoughts of asking, or being asked**, the **LMUP**.

- Across UCLH and HUH, **24 midwives took part in six focus groups** and **21 women were interviewed**.
- We selected women to ensure we included a range of pregnancy intention, ages, ethnicities and obstetric experiences.

We undertook a **Framework Analysis** to **explore women's and midwives' thoughts about the LMUP**.

RESULTS

MIDWIVES

Midwives said that they found the **LMUP questions** helped them;

- **Get to know the woman** and her situation **better**
- **Identify women** who might **benefit** from **additional support**.

The **main concern** was

- Making women feel **judged**, particularly if the pregnancy was unplanned.

At a system level, **lack of time** and **current lack of associated care pathways** were the **main reasons** why midwives **might not complete the LMUP**.

CONCLUSION

This study provides **evidence** of the **feasibility and acceptability**, to **women and midwives**, of the **routine inclusion of the LMUP in antenatal care**. The **LMUP** could be used to **identify women in need of referral** to a variety of **services** including **safeguarding** or **postnatal contraception**, as well as referral to the **public health** or **mental health midwife**.

The LMUP should be **rolled out nationally** and should be **included in the next version of the Digital Maternity Record Standard**.

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ETHICS

Ethical approval was granted by the South West, Cornwall and Plymouth Research Ethics Committee, IRAS number 270375.

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WOMEN

None of the women interviewed **felt judged**, including those with the most unplanned pregnancies.

Women saw the purpose and value of the questions, with most citing **provision of support** as the main reason for asking about pregnancy planning.

Overall, **women found the questions** to be **unoffensive** and to **fit well within the booking appointment**.

“ I think they're very valuable questions... I think whether it's your first or your third, I think it's irrelevant, I think they're just very solid questions ”