

Retrospective study of Maternity care post High Dependency Care

Authors: Faiza Mahmood (Medical student, University of Keele), Dr. Gomathi Gopal (O&G consultant, University Hospitals North Midlands)

Objective

To assess the care for patients stepped down from High Dependency Unit (HDU) in Delivery suite.

Design

Retrospective cohort of women who received HDU care in 6000+ delivery unit in NHS England is analysed. Recent MBRRACE-UK reports not allowing women to fall through the gaps, with pre-birth and post-birth care being vital[1]. Ockenden review recommends twice daily ward rounds, with daily consultant review[2].

In our study we investigated the care of women stepped down from HDU care to wards (Antenatal AN and Postnatal PN) specifically investigating if these patients were reviewed by a senior obstetrician (consultant, registrar 1 and 2) prior to discharge.

Method

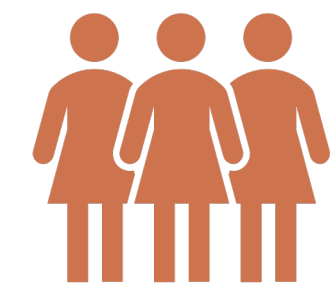
208 participants admitted to HDU were selected from 1.1.22 to 31.12.22.

After analysis, 4 were found to be transferred to other department and 19 were discharged straight from HDU, requiring no further care at the hospital. 4 other patients were initially planned for HDU but ended up not requiring HDU care.

Total number of patients requiring stepdown care: 181

Results

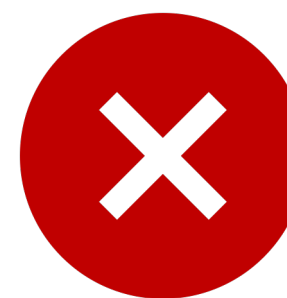
AN group



56 women



Only **55.36%** women were reviewed within 24 hours of stepping down.

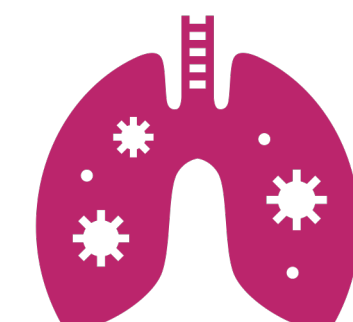


31 women had **no review** by a senior during their stay.

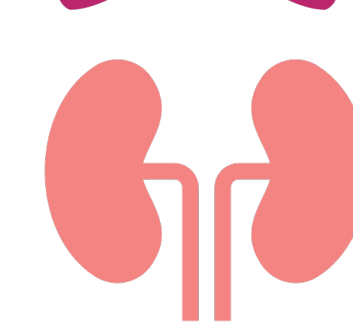
Common conditions requiring care:



pre-eclampsia



respiratory infections



renal infections



Mean stay in ward after stepping down from HDU care: **2.2days** (range 1 to 4 days)

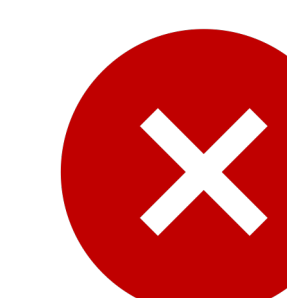
PN group



125 women



Only **20%** women were reviewed within 24 hours of stepping down.

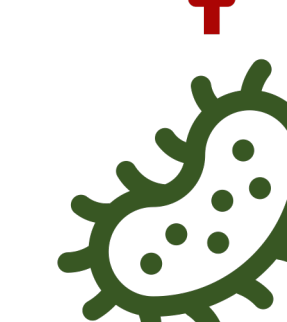


25 women had **no review** by a senior during their stay.

Common conditions requiring care:



postpartum haemorrhage



sepsis



pre-eclampsia.



Mean stay in ward after stepping down from HDU care: **5.2days** (range 3 to 12 days).

Conclusion

Postnatal HDU stepped down women stayed in hospital longer and only 20% of women had a senior review in a ward round. This period could be an area where we need to improve upon as optimising postnatal care in this group may shorten their hospital stay and improve their care which can have a direct effect on their mental wellbeing and improve their recovery for rest of the postnatal period.