



GSTT & KCH MIDWIFERY PRE-BIRTH ASSESSMENT FLOWCHART

Self-referral / GP Referral for maternity care



Midwifery booking appointment 8 -10 weeks
If self referral, notify GP of booking and enquire re any safeguarding /
mental health issues

Medical, obstetric and social / safeguarding assessment including previous / current risk factors & service input

Young women: refer to family nurse practitioner (FNP) if a) under 19 years, first baby and less than 28 weeks gestation or if b) aged 20 - 24 years, first baby, less than 28 weeks gestation, in care or care leaver, significant safeguarding concerns, current serious mental health concerns, substance misuse or learning difficulty um1

Mental health concerns: refer for support to GP, mental health midwife, IAPT (Talking Therapies) or perinatal mental health (PNMH)

Domestic abuse: routine enquiry at booking, 28, 36 weeks and in postnatal period prior to discharge. Refer to domestic abuse service MOSIAC at GSTT or IDVA service at KCH.

Housing:
routine
enquiry at
booking,
and at
GSTT also
at 28 & 36
weeks and
in postnatal
period prior
to
discharge.
Complete
Duty to
Refer letter
if required

Substance misuse: refer to substance misuse services and / or smoking cessation services. Request urine for toxicology (drugs) or blood test for liver function tests (alcohol) at booking and repeat if required

Physical / learning disability: Liaise with GP. Refer to adult and / or children social care, occupational therapist, physiotherapist No entitlement to benefits / housing support: confirm status with Overseas Visitor Unit (OVU). Complete referral to No Recourse to **Public Funds** (NRPFs) Team

Significant health and social care needs, including any of above, or where criteria for FNP not met: refer from 30 weeks to early intervention health visiting service (EIHV) Transfer of care:
to case loading / specialist midwives if appropriate

- Informed consent must be obtained prior to any of above referrals being completed
- Referrals to adult and children social care may also need to be completed alongside any of the above referrals
- Arrange shared care with a consultant obstetrician as appropriate

Anticipated safeguarding support needs / risk of significant harm for unborn / baby, or immediate safeguarding concerns for siblings

Complete referral (MARF) to Children Social Care when risk is identified. Informed consent should be obtained where possible



Contact MASH if receipt of referral is not confirmed within 1 working day, or outcome not obtained



If concerned about outcome of MARF discuss with MASH, social worker and / or maternity safeguarding team



Liaise with allocated social worker and other agencies throughout pregnancy



Escalate to maternity safeguarding team if pre-birth assessment and plan for unborn is not available by 28 weeks



Upload documentation, referrals, conference minutes, birth and child protection plans, and contact details of all practitioners involved onto the maternity electronic system