

USING TECHNOLOGY TO SUPPORT MATERNITY CARE

# A GUIDE TO USING NHS NEAR ME AND REMOTE MONITORING IN MATERNITY SERVICES

THIS DOCUMENT IS INTENDED FOR NHS SCOTLAND MATERNITY  
OUTPATIENT & MIDWIFERY SERVICES

**This document describes the specific considerations of using NHS Near Me for maternity services, adapted from the overarching guidance for implementing NHS Near Me which is available at: <https://tec.scot/>**

---

## ACTIONS FOR NHS BOARDS:

1. Ensure all maternity teams have received this document.
2. Consider any local arrangements that differ from what is described in this document.
3. Support all outpatient services & midwives to be able to introduce NHS Near Me as a choice for women where clinically relevant.

Version 2 October 2020

---

## INTRODUCTION

NHS Near Me is a secure video consulting service for medical appointments, which is provided through a digital platform called 'Attend Anywhere'. NHS Near Me appointments take place in any private location using a smartphone, tablet or computer. Health care professionals can see and talk to women, their partners or families and to each other via a video link.

NHS Near Me video consulting alone or in combination with self-monitoring can be used as an option for providing some maternity care within a person centred approach.

It should not replace core essential appointments where other hands-on clinical assessment and monitoring are required; however, it can be considered as a choice that can be offered for other appointments. Embedding use of this technology in clinical practice can increase access, reduce travel and support bringing care around the woman in her own context, while also reducing unnecessary attendance in clinics and day care.

More information for professionals is at [www.nearme.scot](http://www.nearme.scot) and on [TURAS](#).

Support with implementing NHS Near Me and Remote Health monitoring (Florence or InHealthcare) is available from your local Technology Enabled Care ([TEC](#)) project team. Please include them in your planning groups. To find out how to contact your local TEC lead, please email [NSS.TEC@nhs.scot](mailto:NSS.TEC@nhs.scot) for details.

## USE OF NHS NEAR ME IN MATERNITY SETTINGS

### Use of NHS Near Me

Rapid roll-out of NHS Near Me has enabled care provision in context of safeguarding people against Covid-19; however, in September 2020, the Technology Enabled Care ([TEC](#)) team evaluated the service. The resulting [Public Engagement Report](#) and [Equality Impact Assessment](#) demonstrate many person-centred and sustainable benefits for both service users and clinicians beyond context of the pandemic.

In a maternity context, benefits for women include:

- Choice to be supported during her appointment. For example, she and her partner and/or other family member(s) can join the call together from home or from private spaces in different locations.
- Women can attend appointments from their location of choice, such as from home or a community hub or CMU. This can reduce travel time and costs, minimise time away from work and ease pressures; for example, women with other children or caring responsibilities.
- NHS Near Me can help mitigate language barriers. It enables remote attendance of an interpreter (arranged by clinicians) or a friend or family member at the appointment (from the same location or a different location).
- NHS Near Me enables face to face consultations which can be preferred by women; thereby providing an accessible channel through which women and families can be reassured and develop trusting and therapeutic relationships with their care providers.
- Appointments can be wrapped around the needs of the woman and can include remotely clinicians from different services involved in her care; thereby reducing duplication of conversations and multiple appointments.

1

Benefits for clinicians include:

- NHS Near Me can support and enable relationship-based care provision, advocacy and involving women in their multidisciplinary care planning.
- Clinicians can offer informed choice around method of consultation. NHS Near Me can be offered as a standalone virtual consultation, or in combination with a physical / hands-on consultation.
- NHS Near Me consultations provide more information than telephone consultations, such as can be gathered from the woman's appearance, engagement, expression, presentation or home environment.
- It enables clinicians to work remotely and reduce travel between sites; thereby releasing clinical time to care.
- It reduces use of, and time to put on, PPE.
- It supports multi-disciplinary consultations (such as three-way calling), and enables cross-cover.
- It supports NHS commitments towards reducing carbon footprint of services by providing an environmentally friendly alternative to travel.

	<p>Some Boards are finding benefits from offering open NHS Near Me clinics which give women 'drop in' options. Please contact <a href="mailto:nss.nearme@nhs.scot">nss.nearme@nhs.scot</a> for more information.</p>
2	<p>A process should be implemented to ensure appointment options are discussed with each woman booking with maternity services and that she is offered informed choice around appointment options for her pregnancy.</p> <p>Each woman should be offered a digital or print copy of the <a href="#">Maternity Care and NHS Near Me leaflet</a> to help inform her decisions and provide guidance on how to attend her NHS Near Me appointment.</p> <p>Clinical teams should consider how to interface NHS Near Me (and other) technology with multi-disciplinary antenatal care and local processes, so as to wrap care around the woman in her own context.</p> <p>For example, a midwife may provide physical elements of a woman's care in her home, community hub or CMU and her obstetrician, cardiologist or other clinician(s) could join the appointment via NHS Near Me.</p> <p>Routine obstetric checks (such as blood pressure, urine dip or fundal height measurements) conducted at midwifery appointments need not be repeated in obstetric clinics.</p> <p>Therefore, consideration should be given to transitioning Obstetric clinics which do not require other fetal monitoring (such as fetal scans) to offer NHS Near Me consultations as a first choice; thereby reserving physical attendance at Obstetric appointments for women who need this type of care or prefer to attend in person.</p> <p>Eligible women should be offered print or digital access to the <a href="#">Home Blood Pressure and Urine Monitoring leaflet</a>, equipment and support to undertake routine blood pressure and urine dip checks at home and report the results to clinicians per local processes; perhaps using a combination of NHS Near Me with other technologies, such as Florence, BadgerNet or TrakCare.</p> <p><a href="#">Home Blood Pressure and Urinalysis Monitoring Clinical Guidance and Implementation / Systems Guidance</a> have been adapted from <a href="#">RCOG Guidance on self-monitoring of blood pressure in pregnancy</a>.</p> <p>It is important to check when offering choice of an NHS Near Me appointment that the woman has access to a private space from which to have her appointments and feels comfortable that only individuals with her permission will attend. Encourage the woman to express any concerns she may have and adapt approaches to resolve concerns or meet her needs as appropriate.</p> <p>Extensive guidance on maternal medicine and management of conditions during the Covid-19 pandemic has been produced by the <a href="#">Royal College of Obstetricians and Gynaecologists</a>. These include chronic hypertension, pre-eclampsia, gestational hypertension, diabetes and other endocrine disorders, cardiac disease, chronic respiratory disease, haematological and neurological conditions and renal disorders.</p>

## Risk Management

1	<p>Appointment options should be discussed with each woman booking with maternity services and she should be offered informed choice around appointment options throughout her pregnancy and beyond.</p> <p>NHS Near Me will usually be appropriate for antenatal or postnatal consultations which do not require hands-on clinical screening, treatment or care; and can be used at consultations which do require hands-on care as a tool through which to include the expertise of other clinicians in a person-centred way.</p> <p>Each woman's views and preferences about consultation types should be respected and where possible care should be tailored accordingly. However, management of clinical risk is the responsibility of each clinician.</p> <p>Low confidence in a woman's capacity or ability to understand risks and make informed choices may underpin alternative clinical recommendations or decisions.</p> <p>Where a clinician is confident of a woman's capacity to make informed choices but they do not align with clinical guidance about consultation type, care should be adjusted to safeguard both the woman and her baby to the extent possible.</p> <p>For example, if a woman chooses to attend NHS Near Me consultations but not to attend physical appointments against the guidance of her clinician, clinical care should be delivered to the extent possible within limitations of the video channel.</p> <p>All discussions, risks and decisions should be well documented.</p>
---	--

## During the consultation

1	<p>Clinicians can conduct an NHS Near Me antenatal or postnatal consultation from any location which enables patient confidentiality and in which the following are established:</p> <ul style="list-style-type: none"><li>• An adequate internet connection (this will be tested at the start of the call).</li><li>• A computer/laptop/tablet/smartphone with webcam, speakers/headphone and microphone.</li><li>• Remote access to maternity and/or child health records. Some clinicians have found it helpful to use two screens for this purpose.</li><li>• Be logged into NHS Near Me at <a href="https://nhs.attendanywhere.com">https://nhs.attendanywhere.com</a></li><li>• Check equipment works before starting the clinic (using "test my equipment" button in the waiting area).</li><li>• Connect the video call from the NHS Near Me waiting room and consult as normal.</li><li>• Record the consultation in the hospital's clinical system as normal.</li></ul> <p>Links to <a href="#">Technical Specifications</a> for implementation and guidance for using NHS Near me in a <a href="#">Primary Care</a> setting are included at the end of this document.</p>
---	--

2	<p>The women should have received a printed or digital copy of the NHS Near Me leaflet in advance of her appointment and agreed to this type of consultation.</p> <p>During consultations, clinicians should:</p> <ul style="list-style-type: none"> <li>• Open their NHS Near Me waiting area at: <a href="https://nhs.attendanywhere.com">https://nhs.attendanywhere.com</a></li> <li>• Identify the woman by name/date of birth in the waiting area.</li> <li>• Connect the video call by pressing “join call”.</li> <li>• Check the woman’s identity and that she can hear and see you clearly.</li> <li>• Clarify whether she has, or wishes to have, a birth partner/support person with her during the consultation.</li> <li>• Check whether she is in a confidential location and ask her to confirm that only people with her permission are in the room with her.</li> <li>• Explain that you may make notes or check maternity records during the call, but you will be listening even if you are not looking directly at her on screen.</li> <li>• Reassure that the video consultation is not being recorded.</li> <li>• Invite questions and confirm the woman is happy to proceed.</li> </ul> <p>NHS Near Me has an ‘add-caller’ facility Clinicians can use to add attendees during the call. This may be useful if they wish to invite the opinion of a colleague or if the woman has the email address or phone number of a person she would like the Clinician to invite on her behalf. This does not need to be planned and can be done on the day, during the call.</p> <p>Be aware during the consultation of changes that indicate the woman is not comfortable with NHS Near Me and would prefer a face to face appointment.</p> <p>Initiate discussion about benefits and disadvantages associated with different types of consultation and support the woman to make an informed choice about the type of consultation that feels right for her next appointment.</p>
3	<p><b>Home-monitoring</b></p> <p>Although the majority of observations are usually undertaken by a clinician, home urine testing and blood pressure monitoring have been shown to be acceptable and reassuring for women and no less accurate than when completed by a clinician.</p> <p>During the NHS Near Me consultation, clinicians should follow local process for accessing readings women have taken at home and recorded; perhaps using other technologies, such as Florence, BadgerNet or TrakCare. Allowing for clinical judgement, most home monitoring results can inform discussion and decisions as if they had been obtained by a clinician.</p> <p>Women suitable for Home Blood Pressure and Urine Monitoring should receive a print or digital copy of the <a href="#">Home Blood Pressure and Urine Monitoring leaflet</a> from the clinician issuing her blood pressure monitor and Uristix.</p>

## Documentation and follow-up

1	<p>NHS Near Me consultations should be documented in the woman's maternity record, following usual clinical documentation processes. If clinicians are working from home, health boards and clinicians should be satisfied that processes around records are safe and secure.</p>
2	<p><b>Remote Prescribing</b> Different health boards and individual clinics will have variations in the way they either communicate a prescription for a patient to their colleagues in maternity care, or provide a prescription directly to the woman. Health boards must ensure there is a safe and robust method for remote prescribing. The woman should be clear on the medication plan, and how to access their prescription.</p> <p><b>Multidisciplinary teams</b> At the end of an NHS Near Me consultation the chairing clinician must clarify and check the woman and all in attendance share an understanding of any decisions, next steps or management plans agreed during the consultation. This may involve other members of the maternity multidisciplinary team, or plans in community care.</p> <p>The chairing clinician must ensure a clear line of communication with other health professionals involved in the woman's care or treatment plans and that there is agreement between central and peripheral care providers on her individual pathway for arranging further examinations and investigations.</p> <p><b>Follow up</b> There must be a clear pathway for arranging follow-up if needed. The chairing clinician should check the extent to which the woman is comfortable to continue her care using NHS Near Me.</p>

## Specialty Guidance Produced and Reviewed by

1	<p><i>Technology Supported Maternity Care Clinical Oversight Group</i> (supported by the Scottish Maternity Network) May 2020, revised October 2020</p>
---	---