

## Characteristics of good

We have developed the content below using national guidance and evidence from our recent inspection programme. This resource aims to set out the general characteristics of good maternity practice.

## The characteristics of good triage processes

Women and their babies are protected from avoidable harm.

There are clearly defined in-person and telephone triage processes. Midwives are trained in telephone triage. Women are assessed by a trained midwife in line with the trusts own policy. They are prioritised based on risk, not in the order in which they came in.

## Telephone triage

- There is standardised documentation to minimise the risk of potential error.
- There is a dedicated telephone triage line, which is in a protected place and as an emergency line 24 hours a day. There are continuity plans in place in the event of staff absence.
- Telephone triage call answering and abandonment rates are monitored.
- Documentation on the call and advice given is recorded, with the ability to monitor repeat callers to identify deteriorations in condition.

• Telephone triage calls are audited cyclically to ensure compliance with the trust policy, and improvements implemented when needed.

## In-person triage

- A prompt and brief assessment within 15 minutes, including a physiological assessment using a standardised obstetric early warning score.
- Triage assessment and prioritisation is carried out by clinical staff who are trained in triage.
- The seated waiting area is in the direct line of sight of clinical staff.
- There should be standardised assessment, investigations and ongoing management processes.
- Contemporaneous documentation using standard templates.
- Centralised monitoring of activity within triage to monitor the flow through the department.
- The activity within maternity triage is included with the maternity safety huddle, and triage activity is included in the consultant led ward rounds twice a day.

Information about women's triage care and treatment, and their outcomes, is routinely collected and monitored. This information is used to improve care. Outcomes for women who use services are positive, consistent and meet expectations. Feedback is actively sought from women and staff to improve the service.

Accurate and up-to-date information about triage services is audited and escalated so that there is board oversight of activity and the effectiveness of maternity triage. Audit data is used to improve care and treatment within the triage service, including call answering and abandonment rates in telephone triage.

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