

Day Assessment Unit (DAU) Standard Operating Procedure

V1.0

November 2022

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Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Trust has a duty under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

Data Protection Act 2018 and General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

1. Introduction

- 1.1 This document will detail the Day Assessment Unit environment and staffing to provide a day service that services a range of clinical assessments and procedures for patients under multiple specialities.
- 1.2 The Triage (Telephone and Face to Face Assessment) guideline has replaced the DAU Guideline for referral criteria and face to face clinical triage assessment.
- 1.3 This guideline makes recommendations for women and people who are pregnant. For simplicity of language the guideline uses the term women throughout, but this should be taken to also include people who do not identify as women but who are pregnant, in labour and in the postnatal period. When discussing with a person who does not identify as a woman please ask them their preferred pronouns and then ensure this is clearly documented in their notes to inform all health care professionals.

2. Purpose of this Standard Operating Procedure

The aim of this SOP is to describe the clinical area and staffing requirements for the Day Assessment Unit at the Royal Cornwall Hospital and provide a safe and effective assessment service.

3. The Guidance

3.1. Referrals to DAU

- 3.1.1 Referrals for same day triage/face to face assessment must be made in line with the Triage guideline and other Maternity and Obstetric Guidelines
- 3.1.2 Referrals can be made by the community midwives, GP's, maternity triage, hospital doctors, Emergency Department and antenatal clinic with direct contact to the Ward Clerk or Midwife working on DAU. Women are not able to self-refer unless open access has been granted.
- 3.1.3 The DAU midwives can offer advice and triage over the telephone when a health professional is unsure of an appropriate plan of care/route of referral.

3.2. Opening Hours and Location

- 3.1.1 DAU is located on Wheal Rose on the first floor of the Princess Alexandra Wing at the Royal Cornwall Hospital.
- 3.1.2 DAU is staffed between the hours of 08.00 and 20.00 (all triage referrals outside of these times will be seen on Delivery Suite or another appropriate area)
- 3.1.3 Planned admissions should be between 09.00 and 17.00

3.3. Staffing

3.3.1. DAU is staffed by one midwife and one Maternity Support Worker in the morning and two midwives and one maternity support worker in the afternoon.

3.3.2. Providing Obstetric Support are:

- SHO for the Obstetric team
- Registrar for the Gynaecology Team (09:00-17:00)
- Registrar for the Obstetric Team (17.00-20:00)
- Consultant service week 0900-1700
- Consultant obstetrician on call 1700-20.00

3.3.3. The obstetric team will work as part of a multidisciplinary team in partnership with the midwife, woman, and her family.

3.3.4. DAU does not have a dedicated doctor. Women should be informed that where medical input is necessary there may be a significant delay dependent on their clinical condition and the level of activity within the maternity unit at the time.

4. Dissemination and Implementation

This document will be disseminated to all relevant Midwifery and Obstetric Staff and will be stored on the intranet.

5. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Audit of inappropriate referrals to DAU
Lead	DAU Ward Manager
Tool	Review of referrals made to DAU
Frequency	The SOP will be audited within the first year and then every 3 years
Reporting arrangements	The audit findings will be reported at Maternity Form
Acting on recommendations and Lead(s)	Maternity Senior Leadership Team with the Ward Manager

Information Category	Detail of process and methodology for monitoring compliance
Change in practice and lessons to be shared	As appropriate

6. Updating and Review

This document will be reviewed every 3 years or earlier if indicated.

7. Equality and Diversity

7.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the ['Equality, Inclusion & Human Rights Policy'](#) or the [Equality and Diversity website](#).

7.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	Day Assessment Unit (DAU) Standard Operating Procedure V1.0
This document replaces (exact title of previous version):	Day Assessment Unit Maternity Referral Clinical Guideline V2.3
Date Issued/Approved:	June 2022
Date Valid From:	November 2022
Date Valid To:	November 2025
Directorate / Department responsible (author/owner):	DAU Ward Manager
Contact details:	01872 252149
Brief summary of contents:	This document outlines the operational function of the Maternity Day Assessment Unit
Suggested Keywords:	Day Assessment Unit
Target Audience:	RCHT: Yes CFT: No KCCG: No
Executive Director responsible for Policy:	Chief Medical Officer
Approval route for consultation and ratification:	Maternity Guidelines Group
General Manager confirming approval processes:	Caroline Chappell
Name of Governance Lead confirming approval by specialty and care group management meetings:	Caroline Amukusana
Links to key external standards:	None required
Related Documents:	None required
Training Need Identified?	No

Information Category	Detailed Information
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet
Document Library Folder/Sub Folder:	Clinical/ Midwifery and Obstetrics

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
June 2022	V1.0	Initial issue	Laura Rowe Wheal Rose/Day Assessment Unit Ward Manager

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy for the Development and Management of Knowledge, Procedural and Web Documents (The Policy on Policies). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity & Inclusion Team richt.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy / policy / proposal / service function to be assessed:	Day Assessment Unit (DAU) Standard Operating Procedure V1.0
Directorate and service area:	Midwifery
Is this a new or existing Policy?	New
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Leann Morris, Practice Development Midwife
Contact details:	01872 255019

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	All pregnant people and staff working within maternity and obstetrics
2. Policy Objectives	Describe operational function of DAU
3. Policy Intended Outcomes	Inform all maternity and obstetric staff as well as pregnant people the function of the DAU
4. How will you measure each outcome?	See audit compliance
5. Who is intended to benefit from the policy?	Maternity and obstetric workforce, and all pregnant women and people
6a. Who did you consult with? (Please select Yes or No for each category)	<ul style="list-style-type: none"> Workforce: Yes Patients/ visitors: No Local groups/ system partners: No External organisations: No Other: No

Information Category	Detailed Information
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Maternity Guidelines Group
6c. What was the outcome of the consultation?	Guidance approved
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff or patient surveys: No

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale
Age	No	Inclusive of all maternity and obstetric staff and pregnant people
Sex (male or female)	No	Inclusive of all maternity and obstetric staff and pregnant people
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	Inclusive of all maternity and obstetric staff and pregnant people
Race	No	Inclusive of all maternity and obstetric staff and pregnant people
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	Inclusive of all maternity and obstetric staff and pregnant people
Religion or belief	No	Inclusive of all maternity and obstetric staff and pregnant people
Marriage and civil partnership	No	Inclusive of all maternity and obstetric staff and pregnant people
Pregnancy and maternity	No	Inclusive of all maternity and obstetric staff and pregnant people

Protected Characteristic	(Yes or No)	Rationale
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	Inclusive of all maternity and obstetric staff and pregnant people

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment: Leann Morris

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:
[Section 2. Full Equality Analysis](#)