

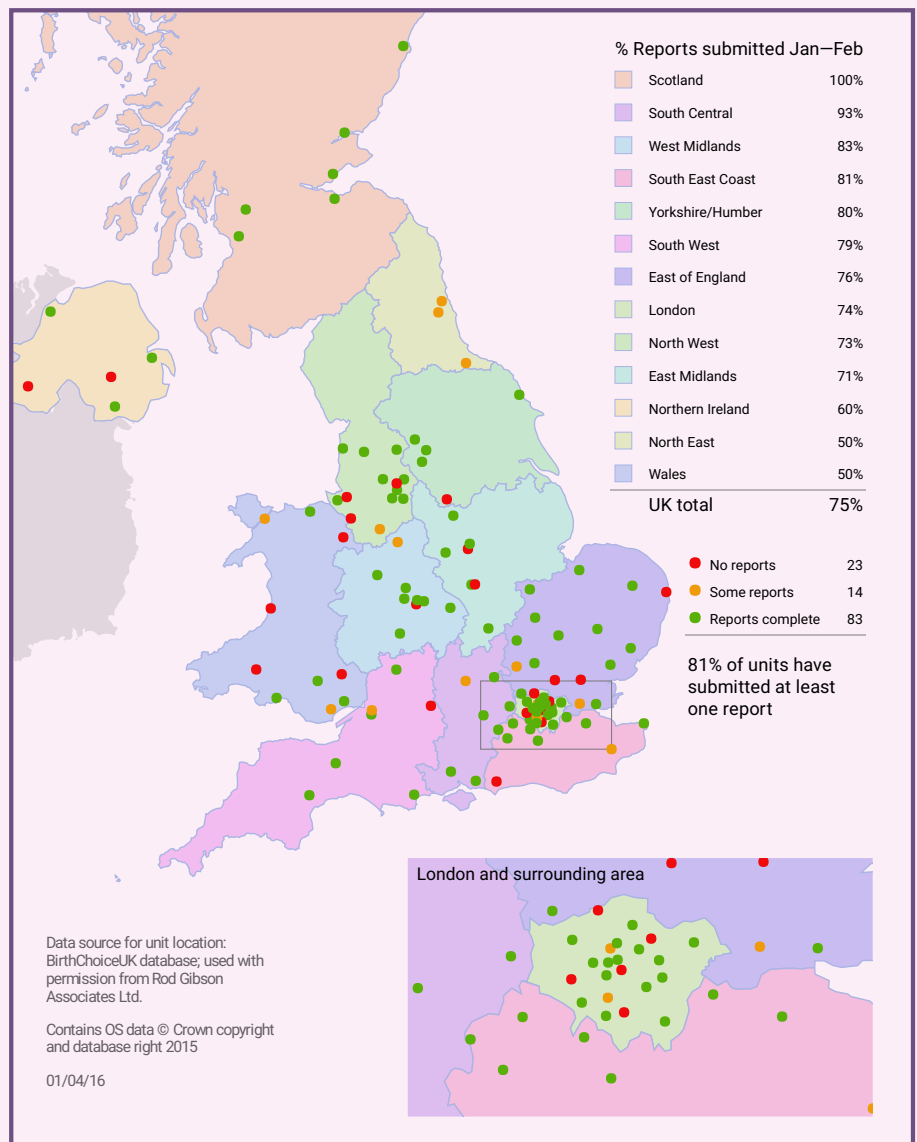
UKMidSS: a new national system for carrying out research in midwifery units

Welcome to the very first UKMidSS newsletter!

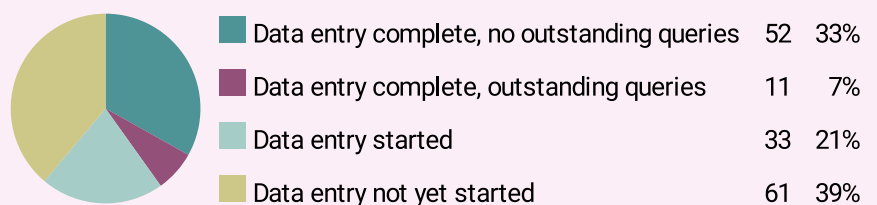
We started collecting data for our first study on 1st February and so far over 80% of you have reported for either January or February, or for both months. That's such a great start – we're all really looking forward to working with you over the coming months and years!

Our regional leaders are Scotland, with a 100% response rate, followed by South Central and the West Midlands. We've had 157 cases reported for the Severe Obesity Study and you're also doing a great job entering the data on these cases. So far, we have complete data on 63 cases and their associated controls and there are a further 33 cases where some data have been entered.

Great work everyone!



Cases for Severe Obesity Study



Get to know the UKMidSS team!

If you've emailed or called the UKMidSS team the chances are that you've spoken to Rachel or Jon. In fact there's a small team of people working behind the scenes on UKMidSS. Here they are and this is what they do...

Rachel (centre) designed and leads UKMidSS. She's almost always available by email or phone to answer any queries you might have.

Melanie (back left) & **Jon** (front right) work in the UKMidSS office, keeping tabs on data collection, answering queries and generally being helpful!

Richard (back right) is our computer programmer. He designed and built all the electronic reporting systems we use for UKMidSS and helps sort things out when something doesn't work!

Dave (front left) is also a computer programmer who deals with all things OpenClinica related, including problems with passwords.

In our next newsletter we'll introduce you to the UKMidSS Steering Group, who oversee and advise on everything we do.



Monthly reporting tips

The email that we send you at the beginning of every month asks you to report on the previous month - on 1st February we asked you for January's numbers and on 1st March we asked you about February. Every month we ask you to tell us about 'cases' for the study or studies we are running - this year that is the Severe Obesity Study. We also ask for the following 'denominator data':

- The total number of women admitted for labour care in the unit in the previous month
- The total number of women who gave birth in the unit in the previous month

Remember! You don't need a password to send us these data – just click on the link in your monthly email.

We've had a few queries about what we mean by "admitted for labour care" in the case definition and in your total monthly figures.

DO include:

- *Women admitted to the midwifery unit in labour (early or established) who receive some labour care and who go on to give birth in the same admission (irrespective of where they end up giving birth)*

Do NOT include:

- *Women admitted in early labour who then go home again without giving birth*
- *Women admitted for postnatal care only*

If you are having difficulty reliably extracting this information from your system or have any other queries about monthly reporting please get in touch. We're here to help!

Read more of our FAQs here <https://www.npeu.ox.ac.uk/ukmidss/reporters/faqs>

UKMidSS and NMC revalidation



Being a UKMidSS reporter means that you are participating in national audit and research which counts as participatory Continuing Professional Development (CPD) for the purposes of NMC Revalidation. If you would like a certificate confirming your contribution to UKMidSS as a reporter please email us at ukmidss@npeu.ox.ac.uk

UKMidSS Stars!

Our reporters are already all making stellar contributions, but every month we will single out one person who's done something exceptional and send them a little something. Our UKMidSS Stars for February and March are Lindsey Doyle from the Midwife Led Birth Suite at Royal Bolton Hospital and Emma Dooks from the Airedale Birth Centre. Lindsey reported and entered complete data on six cases and their controls within two days of UKMidSS going live. Emma has made special efforts this month to check that she can get the data we need from her systems.

Thank you Lindsey and Emma!

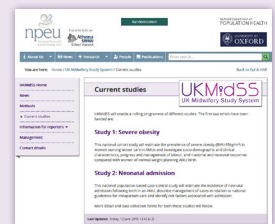


Read more about UKMidSS

You can read about UKMidSS in the December 2015 issue of RCM Midwives magazine and in British Journal of Midwifery:

Rowe R, Kurinczuk JJ, Hollowell J, Jokinen M, Knight M, on behalf of UKMidSS. The UK Midwifery Study System: Investigating uncommon events and conditions in midwifery-led settings. British Journal of Midwifery. 2015;23(11):823-4.

There is also more information on our website – www.npeu.ox.ac.uk/ukmidss





OpenClinica – troubleshooting

Those of you who have reported one or more cases for the Severe Obesity Study will have started to get to grips with OpenClinica, entering data on your cases and controls.

To access OpenClinica you need a username and password. If you haven't received yours please email ukmidss@npeu.ox.ac.uk

We will contact you to check data items that are missing or not an expected value. So far data entry has been of a very high standard, with hardly any queries, but we've noticed a few ways you can help keep the number of queries down.

What's the problem?	Things we know	What you can do
Every time you save data that are missing or outside the expected range the small flag next to the item turns red, like this  . This is called a "discrepancy note".	Every time a red flag is created we will contact you to check the data.	While you're still editing the form, before you mark it complete, check for red flags. If you find one, click on it and click "Propose resolution". You can then enter some information to explain the data which may mean we don't have to contact you again.
Questions 1.7 & 1.8 – minimum and maximum weight – missing data	Often the woman's weight is measured only once so we end up with lots of missing data for these questions.	Enter the same weight and date for both questions
Section 5a – baby outcomes for a second baby – lots of red flags  !	This section should be completed ONLY if the woman had a multiple pregnancy. If you click Save in this section without entering data, all the items will be treated as missing!	DO NOT click Save on this page if you have not entered data here. Use the blue arrow at the top or the drop down menu to move to Section 6 and the end of the form.
Uncompleted forms?	There are lots of forms where it looks as if you may have finished entering data, but the form has not been marked complete, so we can't use the data.	When you get to the end of the form and have finished entering data make sure you tick the Mark CRF Complete box before clicking Save.

New! There is now a Guide to Dealing with Data Queries on our website:

<https://www.npeu.ox.ac.uk/ukmidss/reporters>



UKMidSS folders

You should by now have received your UKMidSS folder (one for each unit). If your unit doesn't have one or you'd like a second folder please contact Rachel or Jon on 01865 289714 or ukmidss@npeu.ox.ac.uk

Protocols

You will have seen the UKMidSS protocol in your folder - quite a lengthy document presenting the aims, objectives and methods for UKMidSS as a system, and also outlining the first two UKMidSS studies. Each study will also have its own brief protocol, setting out objectives, research questions and the case definition. Here's the protocol for the Severe Obesity Study.

The UKMidSS Severe Obesity Study: study protocol

Background: Maternal obesity is recognised as a risk factor for complications and adverse outcomes of pregnancy, labour and birth. As a consequence, UK national clinical guidelines advise that severely obese women should plan birth in an obstetric unit (OU) to reduce these risks. Recent research on women planning birth in OUs indicates that 'otherwise healthy' obese multiparous women may have lower intrapartum-related risks than was previously thought. Anecdotal evidence suggests that increasing numbers of severely obese women are planning birth in midwifery units. We do not know how many severely obese women currently start labour care in an alongside midwifery unit (AMU) in the UK. There is no evidence on their management of labour, complications or maternal and neonatal outcomes on which to base clinical guidelines and AMU admission criteria or to inform clinical practice and women's decision-making.

Objective: To use the UK Midwifery Study System (UKMidSS) to determine the prevalence of severe obesity ($BMI > 35 \text{ kg/m}^2$) in women admitted for labour care in AMUs and to describe management and outcomes for these women and their babies compared with other women admitted for labour care.

Research questions:

- What is the prevalence of severe obesity ($BMI > 35 \text{ kg/m}^2$) in women starting labour care in AMUs?
- What are the characteristics of severely obese women starting labour care in AMUs?
- How is the labour care of severely obese women managed in AMUs?
- What are the outcomes for severely obese women starting labour care in AMUs, and their babies, compared with other women starting labour care in AMUs?

Study period: 1st January 2016 – 31st December 2016

Case definition: Any woman with a BMI greater than 35 kg/m^2 at booking and admitted for labour care in an AMU.

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