

SITM: Supportive Obstetrics (SO)

SECTION 1: CAPABILITIES IN PRACTICE (CiP)

SO CiP 1: The doctor demonstrates the skill and knowledge needed to manage the pregnancy of people who have additional social needs.

Key skills	Descriptors
Manages the pregnancy of a person with a history of substance misuse to provide the best outcomes for them and the fetus	<ul style="list-style-type: none"> • Works within the multidisciplinary team (MDT) to risk assess and optimise care and understanding the role of dependency services, psychiatric services, specialist medical and social services. • Plans for pregnancy, birth and the postnatal period to provide the best care for the person who is pregnant and their baby. • Understands the consequences for the fetus of substance misuse and works with the person giving birth to minimise risk and plan for the neonatal period. • Supports the person who is pregnant undergoing opiate conversion in pregnancy. • Recognises the need to consider child protection and understands when to seek advice. • Understands the value of abstinence from alcohol or drug use, and the circumstances where this is appropriate, or supports maintenance therapy where it is not.
Manages the care of a pregnant teenager, who is under 18, to provide the best outcomes for them and the fetus	<ul style="list-style-type: none"> • Optimises the health and wellbeing of both the pregnant teenager and fetus. • Communicates effectively and responds to the hopes and concerns of the pregnant teenager. • Is aware of agencies supporting the pregnant teenager. • Encourages and supports the teenager to continue their education. • Understands and can apply the legal principles of capacity and consent in minors.
Manages the care of a pregnant person who has recently arrived in the UK, providing the best care for them and their fetus	<ul style="list-style-type: none"> • Understands that race, religion, language proficiency, migration status and other factors can be obstetric risk factors. • Appreciates the difficulties encountered by a pregnant person who does not speak English and uses interpretation services so that they can understand and have a say in the care they receive.

	<ul style="list-style-type: none"> • Is aware of the variety of medical conditions that may be more common in women who have recently arrived in the UK. • Demonstrates sensitivity to the potential psychological and emotional traumas previously experienced by many asylum seekers. • Is aware of the different agencies involved in processing claims for asylum status (police, Home Office and social services).
<p>Optimises pregnancy outcomes for the woman who books late</p>	<ul style="list-style-type: none"> • Understands the diverse reasons why a person who is pregnant might book late. • Understands the difficulties posed by an uncertain due date, and collaborates with the person who is pregnant to plan the timing of their delivery. • Is aware of the need to fast-track essential antenatal investigations. • Risk assess the person who is pregnant and books late for other vulnerabilities.
Evidence to inform decision	
<ul style="list-style-type: none"> • Reflective practice • NOTSS • TO2 • Cbd • Mini-CEX 	<ul style="list-style-type: none"> • RCOG Learning • Local and deanery teaching • Attendance at specialist substance use antenatal clinics • Attendance at specialist teenage antenatal clinics • Attendance at MDT and planning meetings • Log of cases and outcomes
Knowledge criteria	
<ul style="list-style-type: none"> • The incidence, pharmacology, maternal, fetal and neonatal complications and legal consequences when someone misuses: alcohol, cannabis, opiates, cocaine and crack cocaine, heroin, benzodiazepines, amphetamines, LSD, phencyclidine, solvent misuse and cigarettes • The interaction between substances of misuse, prescribed drugs and labour analgesia/ anaesthesia • The organisation of dependency services and links with psychiatric and social services • The theories of addiction and self-harming behaviours and prevalence of psychiatric co-morbidity and how to detect it • The legal and social care implications of using class A and B drugs • Local and national strategies for reducing drug and alcohol misuse • How a MDT can assist conversion to an opiate replacement programme • Neonatal management and outcome (including management of withdrawal in newborn and long-term effects) 	

- The incidence, risk factors, transmission risks, neonatal consequences, long-term prognosis and management strategies to reduce vertical transmission of, and harm from, bacterial and viral infections: Herpes Simplex (HSV), HIV, Hepatitis B and C (HBV, HCV), Group B Streptococcus (GBS) and varicella zoster
- When and how to refer for further assessment or treatment (especially for HIV, HBV and HCV)

SO CiP 2: The doctor demonstrates the skills and attributes to support families of all structures.

Key skills	Descriptors
Provides care to a pregnant non-binary person or trans person	<ul style="list-style-type: none"> • Is aware of how the usual systems in place to support pregnancy can exclude trans people and non-binary people. • Ensures that the pregnant non-binary person or trans person has equality of care. • Explores the use of testosterone prior to pregnancy and understands the need to stop hormone replacement in pregnancy. • Supports the non-binary person or trans person through any changes that may result from stopping hormone replacement. • Can liaise with other services to prevent suboptimal care. • Understands the differences between social, hormonal and physical transition. • Explores the use of preferred pronouns and pregnancy language (e.g. “dad” or “carrying parent”, rather than “mother”).
Provides care to those entering into parenthood by surrogacy	<ul style="list-style-type: none"> • Understands the legal issues with surrogacy. • Includes both the birth parent/s and adoptive parent/s in planning for delivery. • Includes both the birth parent/s and adoptive parent/s in planning for the postnatal period. • Is aware that the laws on surrogacy differ in the four nations and can modify birth plans to meet the needs of cross-border surrogacy units.
Evidence to inform decision	
<ul style="list-style-type: none"> • Reflective practice • NOTSS • TO2 • CbD • Mini-CEX 	<ul style="list-style-type: none"> • Local and deanery teaching • Attendance at specialist gender clinics

Knowledge criteria
<ul style="list-style-type: none"> • The pharmacological and hormonal therapies used in gender transition • The adjustments required for safety in pregnancy • The surgical therapies that can be offered for gender transition and the implications for pregnancy • The law regarding equality • The law regarding surrogacy and adoption and the differences in the nations of the UK and Northern Ireland

SO CiP 3: The doctor understands how to apply the law when they are involved in making decisions in their work with vulnerable people.	
Key skills	Descriptors
Supports the pregnant person who does not have capacity	<ul style="list-style-type: none"> • Can assess capacity. • Is aware of the legal responsibilities of the doctor who cares for someone with impaired capacity. • Demonstrates the ability to act in the person's 'best interest'. • Liaises with safeguarding teams to plan care. • Supports the needs of carers without compromising the pregnant person's best interests.
Evidence to inform decision	
<ul style="list-style-type: none"> • Reflective practice • NOTSS • TO2 • CbD • Mini-CEX 	<ul style="list-style-type: none"> • e-learning on capacity and the law • Spends time with specialist services that safeguard patients with impaired capacity • Spends time with Independent Mental Capacity Advocates (IMCA) • Log of cases and outcomes
Knowledge criteria	
<ul style="list-style-type: none"> • The Mental Capacity Act • Deprivation of liberty and its implications on care • Role of Mental Health Advocates • Fraser /Gillick competency and how to apply them to maternity care • The organisation of safeguarding services, in the hospital setting and wider community 	

SECTION 2: PROCEDURES

There are no procedures in this SITM.

SECTION 3: GMC GENERIC PROFESSIONAL CAPABILITIES (GPCs)

<i>Mapping to GPCs</i>
Domain 1: Professional values and behaviours
Domain 2: Professional skills <ul style="list-style-type: none"> • Practical skills • Communication and interpersonal skills • Dealing with complexity and uncertainty • Clinical skills (history taking, diagnosis and management; consent; humane interventions; prescribing medicines safely; using medical devices safely; infection control and communicable diseases)
Domain 3: Professional knowledge <ul style="list-style-type: none"> • Professional requirements • National legislative requirements • The health service and healthcare systems in the four countries
Domain 4: Capabilities in health promotion and illness prevention
Domain 5: Capabilities in leadership and teamworking
Domain 6: Capabilities in patient safety and quality improvement <ul style="list-style-type: none"> • Patient safety • Quality improvement
Domain 7: Capabilities in safeguarding vulnerable groups

SECTION 4: MAPPING OF ASSESSMENTS TO SO CiPs

SO CIP	OSATS	Mini-CEX	CbD	NOTSS	TO1/ TO2	Reflective practice
1: The doctor demonstrates the skill and knowledge needed to manage the pregnancy of people who have additional social needs.		X	X	X	X	X
2: The doctor demonstrates the skills and attributes to support families of all structures		X	X	X	X	X
3: The doctor understands how to apply the law when they are involved in making decisions in		X	X	X	X	X

SO CIP	OSATS	Mini-CEX	CbD	NOTSS	TO1/ TO2	Reflective practice
their work with vulnerable people.						