



Service Priorities and Programmes
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Efficacy of a Midwife Clinic: Antenatal Gestational Diabetes (AN-GDM) in Tuen Mun Hospital

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Introduction

The demand of antenatal service of women with the Gestational Diabetes Mellitus (GDM) is rapidly increased in Tuen Mun Hospital (TMH). In order to reduce the burden on obstetric service and enhance quality service, a Midwife Clinic – (AN – GDM) was established in April 2011. It is operated independently by Nurse Midwife. It provides antenatal (AN) service to the low risk GDM women, and educational talks and counseling to the newly diagnosed GDM women. The clinic was accredited by the Hong Kong Hospital Authority in April 2012 as Midwife Clinic (MC).

Objectives

1. To provide comprehensive antenatal assessment to monitor maternal and fetal wellbeing of low risk GDM women and make prompt referral to obstetrician, Prenatal Counseling and Diagnostic Clinic, dietitian or others if indicated. 2. To provide GDM education and counseling to those GDM women and teach them Self-Monitoring Blood Glucose (SMBG) technique individually.

Methodology

Low risk GDM pregnant women are triaged to attend MC (AN-GDM) by obstetricians. The operational logistics and workflow of MC (AN-GDM) are developed. Midwife consultation includes AN assessment, review of SMBG result, providing AN GDM education, and identification of maternal and fetal complications for prompt refer. It takes 20-30 minutes for each consultation. Satisfaction survey is collected to have regular evaluation for service process and outcome for continuous quality improvement.

Result

In 2012, total number of newly diagnosed GDM women was 985. 134 cases were admitted for GDM management and 851 GDM women attended AN GDM Health Education and Counseling. And total number of GDM women attended Ambulatory Care Center of TMH was 5534. 421 out of 985 new cases were referred to MC(AN-GDM) and 1717 out of 5534 attendances were followed up in MC (AN-GDM). Satisfaction survey showed high level of patient satisfaction with the MC(AN-GDM) score: 4.7 ; 5-point likert scale, n=99, 100 response rate). Conclusion: Midwife Clinic

(AN-GDM) helps to alleviate obstetrician's heavy workload and decrease AN ward admission rate for glycaemic control and AN health advice. It also plays an important role in provision of continuing midwifery care to GDM women from diagnosis of GDM till delivery. The clinic service was welcomed by clients with high level of client satisfactory response. The independence of midwifery role is fully exercised and great achievement with professional satisfaction and development is obtained.