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## Synopsis

# How to Implement Digital Clinical Consultations in UK Maternity Care: the ARM@DA Realist Review

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## Plain language summary

### How to Implement Digital Clinical Consultations in UK Maternity Care: the ARM@DA Realist Review

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## Plain language summary

### What was the question?

In recent years there has been a digital transformation in National Health Service maternity care, accelerated by the COVID-19 pandemic. To explore these changes in the delivery of care we asked: How can digital consultations (telephone and video calls) best be provided in maternity care? For whom are they appropriate? And what is needed to provide good quality care?

### What did we do?

The research project involved three main phases. Phase 1 included discussions with groups of women and healthcare professionals as well as a brief review of existing academic research to identify key ideas (theories) on using digital consultations in maternity care. Phase 2 involved testing these theories by looking in-depth at more evidence. In phase 3, the quality and relevance of the evidence was assessed and more information gathered where necessary. The theories were then finalised and validated with stakeholders. This phase also included the development of recommendations for policy and practice.

### What did we find?

The review highlighted 15 important considerations for providing digital consultations in maternity care. These were grouped into five main areas: (1) developing systems, facilities and resources; (2) training and communication; (3) access and inclusion; (4) personalisation and flexibility; and (5) quality of care.

There is no-one-size-fits-all approach for delivering digital maternity care. It is important to give women and staff support to use digital processes and choice about the type of consultation that can best meet their needs.

### What does this mean?

From the findings, four principles emerged for developing and using digital maternity consultations:

- Create an appropriate environment, structure and support for staff.
- For women, consultations need to be responsive and personalised to different needs and preferences.
- Services must recognise diverse circumstances and the importance of access and inclusion for all.
- Support a safe and high-quality service through building relationships.

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