

Healthwatch Sandwell

Maternity Services
Real World Coproduction Workshop
Project Report
September 2018



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Summary and Background

Between 3rd July 2017 and 26th March 2018, Healthwatch Sandwell facilitated three Real World Coproduction Workshops with Maternity Services at City Hospital, part of Sandwell and West Birmingham Hospitals NHS Trust. The Real World Coproduction workshops afforded opportunity for women and their support partner to share their experiences of care and generated practical ideas to improve the service, based on the knowledge and these experience of service users and staff.

Positive elements of care were identified and shared, together with over thirty suggestions aimed towards improving the services.

The three workshops each covered a different aspect of the maternity experience:

- 1: Access to Maternity Services up to 24th week
- 2: Between First Appointment to Birth (exclusive)
- 3: The Birth Experience

In total, there were over forty participants in the workshop that covered:

- Service Users and Family
- Frontline Staff
- Management

In addition, Healthwatch Sandwell provided several staff to facilitate each session.

Ideas From Workshops

Workshop 1: Access to Maternity Services up to 24th week

1 Self-referral Information Campaign

Awareness needs to be raised that parents can self-refer for a first appointment to maternity services without the need for a GP appointment. Suggestions included:

- Awareness raising among GP staff (receptionists, practice managers) that they can direct parents straight to maternity services without having a GP appointment
- Highlighting that tests used by GPs or maternity services are the same as the tests that they will already have used and will give the same results
- Information being placed with pregnancy testing kits at point of purchase

This could help with increasing the number of first appointments within the first twelve weeks.

2 First Appointment Reminder Call from Interpreters

The reminder call should not only act as a reminder, but could also be used to enable the interpreters, with appropriate briefing and support, to ensure that the parent is aware of the importance of the first appointment for theirs and their child's health and well-being.

This could help with increasing the number of first appointments within the first twelve weeks.

3 Awareness Raising with Community Midwives re Choice

Community midwives should ensure that parents know they have a choice of service and where to be seen, and what those services are.

All of the above suggestions were generated from a whole group discussion based on comments and notes made during the session. There were further ideas generated in this workshop, with the group choosing to prioritise those above.

Workshop 2: Between First Appointment to Birth (exclusive)

Quick Wins

The following 'Quick Wins' / priority ideas were identified as possible ways to improve maternity services:

Direct Information and Communications

- Invitation letters to explain what the appointments are for.
 - 9 month overview at start, on one page, written not just told
 - Standard tests based on patient category e.g. diabetic
- Signposting to website. Including what is free, and what to pay for. (Complementary Services e.g. reflexology)
- Update phone numbers of midwives for parents

Signage

- Better signage
 - Out of Hours
 - Route from car park to maternity
 - Footsteps on the ground showing the way, with pictures of baby / pregnant lady
- Clear signage at clinics and delivery suites.
- Signage for Serenity needs improving. Patients should be introduced to Serenity on the virtual tour. Finding outside door.

Blood Clinic

- Closures of Blood Clinic
 - Patients not informed
 - Aim not to close Blood Clinics
 - Find cover or communicate

Already Do This: Check is Happening

The following ideas were identified, which staff believed should already happen. This suggests areas for quality reviews.

- Consistent advice from midwives e.g. iron tablets, bump measuring
- Explanation/ Brief of what was going to happen
- Midwives to listen to patients' wishes

Other

Several other ideas were generated. The following are a few examples. A full list is provided in Appendix One:

- Directory / List of complementary and alternative therapies
- Reflexology Home Service with provision assessed by clinical need.
- When patient had first baby at different hospital, can notes be passed to City for Continuity

- Clear referral route for physiotherapy so that patient is not left without a service i.e. GP and midwifery (patient had to refer herself)
- GP's having access to obstetrics
- Continuity of care. Seeing different midwives. Find a way to ensure women have continuity of care by the same midwife.

Workshop 3: The Birth Experience

Improvements

The following were identified as possible ways to improve maternity services:

- In triage, checking women every half hour. This could be done by any member of staff
- Following up missed/cancelled appointments
- Tour around Serenity for high risk mums
- Not assuming second time mums know everything

Already Do This: Check is Happening

The following was identified, which staff believed should already happen. This suggests areas for quality reviews.

- In triage, displaying the waiting time

Good Practice

The following was identified as happening and should continue:

- Support and help with breast feeding technique when tired – continue doing

Participant Feedback

Participants were asked to complete evaluation forms after the sessions.

All feedback rated the sessions Good or Excellent*

EXAMPLES OF COMMENTS:

What did you find most useful?:

Listening to the patient's story

It identified gaps

It showed that even we are not clear on the process

Discussions about issues

Meeting staff

Our views listened to and action taken

Knowing that my opinion is valued and time was invested wisely

Staff all open to our experience – no 'excuses' given which was brilliant

Parental views

Good to see patient experience is being taken into account

Open minded, mutual understanding

Hearing different points of view

How will you use the information gained?:

Important information gained for future design of services

I now know how to access maternity services better

To improve services

Other comments:

Great that parents from the community can be involved in the process

More sessions!

Keep up workshops as believe very productive

*(Other options were Satisfactory or Poor)

About Real World Coproduction

Real World Coproduction is an engagement approach developed by Healthwatch Sandwell, and involves a structured workshop to identify potential service improvements using the experience of all those involved in services. It builds around specific issues of the service users participating, to generate actual ideas on how the service could be improved for that user, and therefore for there users.

Coproduction involves people who use and provide services in their design, in order to improve them. Like all Coproduction, everybody is seen as equals. However, this approach recognises that different people are going to have different experiences and skills. The process allows everybody to use their knowledge at some point during the session. The session starts with the patient perspective, moving service provision to management.