



NORTH KIRKLEES
Maternity Voices

Working in partnership to improve maternity & neonatal services

15 Steps for Maternity Pinderfields Hospital December 2023

Contents

1. What is 15 Steps for Maternity?
2. What did we do?
3. Highlights
4. Theme 1: Welcoming and Informative
5. Theme 2: Safe and Clean
6. Theme 3: Friendly and Personal
7. Theme 4: Organised and Calm
8. Next Steps
9. Thank you

“For many people, birth is a couple of times in a lifetime thing. The environment they give birth in, and spend the first bit of their new baby’s life should reflect that.”

A service user, December 2023

What did we do?

We were invited to Pinderfields Hospital to do a 15 Steps visit on Thursday 7th December 2023. The MVP Leads for Wakefield District (Stacey) and North Kirklees (Amy) were joined by 11 service users and a representative from the Neonatal Operational Delivery Network (ODN) to have a look around the maternity areas.



Wall display at Gate 18

To limit any risks to staff or service users, we split into small groups to visit one or two areas each. These were:

- Antenatal Clinic and Antenatal Day Unit
- Triage and Pinderfields Birth Centre
- Labour Ward
- Neonatal Unit and Transitional Care
- Gate 18 (induction, antenatal and postnatal bays)

Before the groups headed off, we had a welcome presentation from Anne-Marie Henshaw (Director of Midwifery). We discussed the 15 Steps toolkit. Each group then visited their assigned areas with a member of staff, had a good look around and took notes.

We met back in Trust HQ for lunch and to share our observations with each other. We captured feedback with photos, video and lots of post-it notes! At the end of the day Anne-Marie Henshaw rejoined us, along with Michala Little (Deputy Head of Midwifery) to hear our initial feedback.



We discussed our observations over lunch in Trust HQ



Entrance to the Birth Centre

Highlights

Although there hasn't been a hospital-wide 15 Steps visit previously, we have done smaller scale visits to specific areas. On this visit, we wanted to highlight areas which have seen improvement since those previous visits.

Triage

Recommendations from the last triage 15 Steps in October 2021 were about the lack of comfy seating and boring wall space. We were really pleased to see comfortable seating this time, and service users loved the maternal journal art which is now displayed on the corridor.



We saw improvements to the triage environment



Condensed information on display,



Books now available

Neonatal Unit

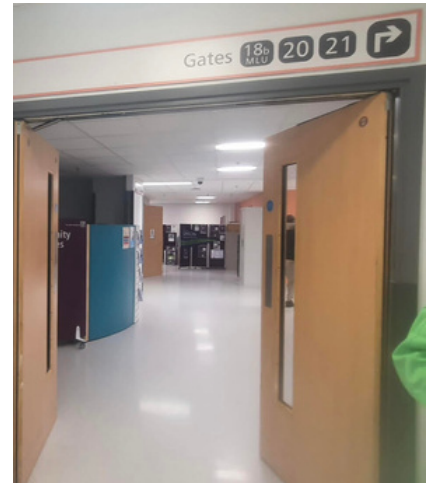
In October 2022, a visiting group made recommendations for books to be available on the neonatal unit for babies and for siblings, and also suggested that information in the expressing room needed to be condensed as it was overwhelming. It was great to see these changes in place.

Labour Ward and Gate 18

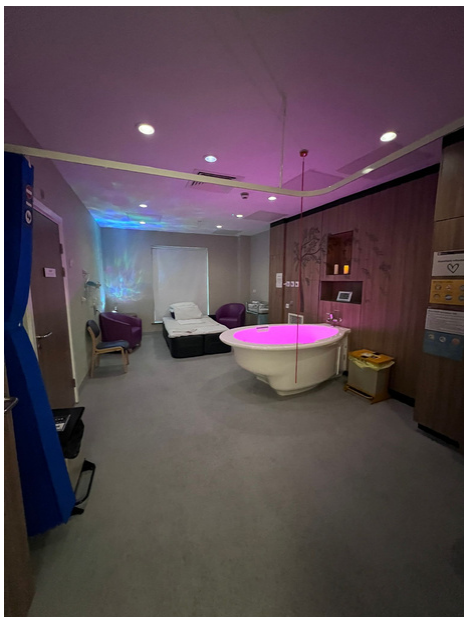
Between May and June 2022 we carried out 15 Steps visits to both Labour Ward and Gate 18, and on this visit we spotted some recommended changes, including the photo backdrop for when babies are being taken home and a feeling that the ward was not cluttered. The ceiling tiles are in place and look lovely on labour ward, and service users loved the signage on the doors reminding people to knock before entering.

Welcoming and Informative

The majority of staff were friendly and welcoming. However, it was felt that signage from the main atrium to the maternity areas, and then around these areas could be improved. Service users felt the language on signage was confusing and sometimes difficult to understand (Gate 18, MLU). They thought it should be consistent (e.g. not using labour suite and also labour ward), and that all areas should be clearly signposted from the main atrium, the lifts, and whilst moving around the unit, including the neonatal unit.



Signage should be clear and consistent



Birth centre pool room

The birth centre pool room was highlighted as having a welcoming first impression, and service users also liked the maternal journal artwork and decal in the labour ward reception area.

We felt that there was a disparity between different areas: for example, the labour ward rooms were very medicalised (despite the lovely ceiling imagery panels) compared to the birth centre, and the walls in the high dependency rooms on the neonatal unit felt 'depressing' compared to the warm and welcoming entrance and reception area.

There were examples of great information being shared, e.g. reduced movements, co-sleeping and the neonatal support group. However there was very little information in languages other than English, and service users felt that displays could be more inclusive and accessible to all. There were also comments around the use of space for information, for example wallspace being taken up by a cleaning summary rather than a display to inform / promote a calm and relaxing atmosphere.

Welcoming and Informative

We saw some lovely imagery including Maternal Journal artwork and photos of dads holding their babies in the neonatal unit. Those who visited the neonatal unit felt like the information board for 'visitors' should be changed to reflect that parents are not visitors. We also suggested to consider the impact of the quotes displayed in the neonatal unit and their appropriateness, e.g. "We made a wish and you came true".



Information available in the neonatal unit

Recommendation 1: Consider the signage from the main atrium to all areas: ensure language is service user friendly, and explore the possibility of a line leading to maternity unit to make it easier for those arriving in labour.

Recommendation 2: Ensure all areas are equally welcoming, for example setting up rooms on the labour ward with mood lighting and a less overwhelmingly medicalised feel.

Recommendation 3: Continue to work towards information being accessible and inclusive, whilst reviewing the availability of wall space in different spaces.

Recommendation 4: Update the quotes on the neonatal unit and parent bedrooms to reduce the risk of them feeling insensitive to those with a preterm / poorly baby.

Recommendation 5: Consider the potential for utilising electronic screens in various areas to share information. This could include infant feeding, birth positions or safe sleep, be adapted to different areas and controlled centrally, but could also be switched off by service users, or changed to calm and relaxing imagery or affirmations.

Safe and Clean

It was agreed that all maternity areas felt safe and clean; service users reported being asked security questions to access some areas which made the unit feel secure. There was information to show what times rooms had been cleaned, and the group felt this was positive to show high standards of sanitisation in a post Covid world.



We saw clean areas throughout



We thought this guide to staff uniforms could be replicated just for maternity staff

The knock reminders were prominent on birthing room doors and service users really liked this and felt they added to the psychological safety of women and birthing people in labour.

It was felt that there were further opportunities to ensure women, birthing people and families understood who was who: the staff 'tree' in the neonatal unit is a nice idea but out of date, and the poster showing uniform colours was for the whole hospital rather than specific to maternity and neonatal staff.

Service users observed women and birthing people being discussed by staff in areas where other members of the public could hear. It was felt that this was inappropriate and did not feel safe.

Safe and Clean



Poster about skin-to-skin

Some areas had great information about things like safe skin to skin, feeding and sleeping, whereas other areas didn't have any; it was noted that the postnatal room on the birth centre didn't have this information, and there was just one poster with imagery of skin to skin on the neonatal unit. Where the information did exist it was only in English and did not consider those with other accessibility needs. It was felt that this consideration must also be given to the information in toilets regarding FGM and domestic violence, as well as PALS (Patient Advice & Liaison Services) posters.

Recommendation 6: Explore ways to inform women, birthing people, families and visitors about the roles of different staff members by their uniform, perhaps extending this to 'who is on shift' with photos, names, staff roles.

Recommendation 7: Ensure there are spaces for staff to discuss care of women and birthing people away from other service users.

Recommendation 8: Review information to ensure there is consistent and inclusive access to information regarding safe sleeping, infant feeding and skin to skin.

Recommendation 9: Work towards having safeguarding information available in a range of languages.



Staff 'tree' display in the neonatal unit

Friendly and Personal



The facilities in the neonatal unit for families were praised, for example the library of books including braille and dual languages, as well as the toaster and toastie maker in the parents kitchen and the spacious parent flats with double bed, sofa and wardrobe. The laundry facilities were appreciated, and the fact that there were windows in the parents bedroom was important to service users.



There were suggested improvements to make the neonatal unit friendlier and more personal, including having adult hangers in the wardrobe, more comfortable chairs in the parents flats and ensuring that there are recliner chairs next to each cot side.

Facilities in the parent flats

It was recognised that there was little to promote birth choices and personalisation of care across all areas, and that this was a real missed opportunity especially when members of staff spoke passionately about what was available in their areas, for example moving beds to promote active birth, and the availability of different places of birth within Mid Yorkshire.

The plans for the bereavement rooms were positively received. Service users liked that they were going to be more 'homely' and that these plans had been coproduced with families with lived experience. These spaces need to be carefully considered, especially due to their location next to the labour ward.



Poster in a labour ward room depicting birthing positions

Friendly and Personal



Visiting team exploring the maternity areas

It was felt that there could be more consideration to those with language barriers and who may be feeling anxious: the example given was the call on the postnatal ward “it’s lunchtime if you want to get anything”, with the concern that those who did not speak good English may not understand, and for those who may worry about leaving their baby alone to get food.

Whilst all midwives and staff spoke with care and compassion towards service users, discussion was had regarding the buzzers next to beds on the postnatal ward. We talked about how a woman/birthing person may feel reluctant to press the buzzers. The group loved the Maternal Journal artwork, but they felt it wasn’t clear where it had come from, or how somebody could get involved with Maternal Journal themselves.



Maternal Journal artwork on display in the maternity corridors

Recommendation 10: Continue to work with neonatal service users and the ODN to improve facilities on the neonatal unit.

Recommendation 11: Identify key areas to display information and develop displays about choice of place of birth (antenatal clinic?) birth choices (triage corridor?) and personalisation of care (birthing rooms?).

Recommendation 12: Consider co-production regarding buzzers on the postnatal ward and how to ensure all service users feel able to press them when needed.

Organised and Calm



Images of nature promoted a calm environment

Service users reported a feeling of calm from all staff members that they interacted with, even in the busier areas. However this feeling of calm was not always replicated by the environment, which was felt to be medicalised and sterile in most areas. Service users suggested extending the theme of nature behind the labour ward desk to other areas of the hospital including corridors, the postnatal ward, triage and labour rooms. It was felt that the connection to images of nature brought a feeling of calm, even the smaller stickers in one of the postnatal rooms on the birth centre. It was suggested that the ceiling panels on labour ward would be a welcome addition to the postnatal ward corridor / rooms.

The labour ward in particular felt uncluttered, whilst some areas did have equipment in it where it was felt it wasn't ideal. The service users who visited the neonatal unit were disappointed to see a sheet over an incubator in the corridor which looked like it could be a dead body.

There were more comments around signage, for example the ensuite in a labour ward room looked like it could be a cupboard as there was no sign to say it was a toilet, the signs for the way out and fire exit were difficult to see from the end of the labour ward corridor, and there were no signs to the parent flats from the neonatal unit and back again.

Duty board information was up to date and service users liked the buzzer system in place on triage. FFT information was not always well placed (for example on the other side of a door to the way it opened) and there weren't always pens/forms/a box to put them in.



Thank you messages for staff

Organised and Calm

In the neonatal unit there was a sign on the milk kitchen saying that staff have to grant access to milk: the ODN representative explained that this is incorrect for milk stored in the fridge.



Guidance about accessing stored milk needs to be changed

Recommendation 13: Explore the possibility of using images of nature in various ways across the whole unit, not just in certain places, to bring a feeling of calm throughout somebody's journey of maternity services.

Recommendation 14: Try to keep equipment out of the way and avoid putting sheets over incubators: if medical equipment is in corridors etc it should look as un-intimidating as possible.

Recommendation 15: Service users suggested that it would be useful to have a map showing the different areas of the maternity unit and the way to the shop / exit for example. Consider whether this could be appropriate to support navigation once in labour / on the ward.

Recommendation 16: Review the information on the milk kitchen fridge in the neonatal unit.



Leads with our neonatal representatives

What happens next?

This report will be shared with senior leaders within maternity services, and the Maternity Voices Partnerships in Wakefield and North Kirklees will work with the Trust to ensure that service user voice is sought where appropriate in response to the recommendations within this report. It will also be available on the Healthwatch websites for Wakefield and Kirklees, which host the Wakefield District and North Kirklees MVPs respectively.



This 15 Steps event was a brilliant day for service users and the Maternity Voices Partnerships, and we hope it was valuable for maternity staff and Mid Yorkshire Hospital Teaching Trust too. We felt welcomed and listened to, and we were excited to be invited to visit again later in 2024 to see how some of the feedback has impacted on changes made in different areas of the hospital.

We will consider, along with the Trust, whether we replicate a similar hospital-wide 15 Steps event around a year after this one was completed, or whether we return to smaller scale visits to individual areas. We will also consider whether there are other ways to improve the feedback gathered within 15 Steps visits, e.g visiting areas that were not visited on this occasion such as theatres and the early pregnancy unit, increasing the diversity of service users on the visit, or visiting at a different time of day.

A huge thank you from us to everyone involved in the success of this visit, especially staff at Pinderfields Hospital and the service users who volunteered their time to join the 15 Steps event.

Stacey Harrower & Amy Libell
MVP Leads for Wakefield District and North Kirklees



Thank you to our visiting team!



NORTH KIRKLEES
Maternity Voices

Working in partnership to improve maternity & neonatal services

“For many people, birth is a couple of times in a lifetime thing. The environment they give birth in, and spend the first bit of their new baby’s life should reflect that.”

A service user, December 2023