

DEVON MVP

15 STEPS REPORT

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INTRODUCTION

What is 15 Steps?

Based on the ethos of teamwork within MVPs, the 15 Steps toolkit is a method which looks at maternity services from the perspective of those who use them.

It explores their first impressions of care, their surroundings and the overall experience across their maternity journey.



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WHAT WE DID

On Wednesday 27th October 2021, Co-Chair - George Reed and three service users entered the Maternity Unit at Torbay and South Devon Healthcare Trust. A tour was provided by Matron, Rebecca Garside.

We visited the following areas of the trust:

- Delivery Suite
- Antenatal Clinic
- John Macpherson Ward

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DELIVERY SUITE

Our experiences on delivery were friendly and welcoming. The ward was secure to enter and exit. Although busy, the midwife in charge introduced us to all of the staff that we could see around the reception area. All were keen to help us and share what they have on offer in the delivery suite. It was great to hear about all of the extra little touches that the team can provide women, birthing people and their partners however the accessibility and awareness of these is limited and some sort of more prominent display on what is available for women, birthing people and their partners would be advantageous. The service users suggested a list on the fridge in each room or some sort of sticker on maternity notes.

The rooms were nice and big with plenty of space and en-suite showers with seats in all rooms. All rooms were equipped with a fridge. Each delivery suite with the exception of 2 had a large mural on the wall which gave the rooms a bit of colour and would be great to complete in the remaining rooms. This aspect of aesthetics would be great applied throughout the unit.

While on delivery suite, a midwife was speaking to the group about post-birth reflections. All service users were in agreement that this was a fantastic service and something that should be promoted more to women, birthing people and their families.

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ANTENATAL CLINIC



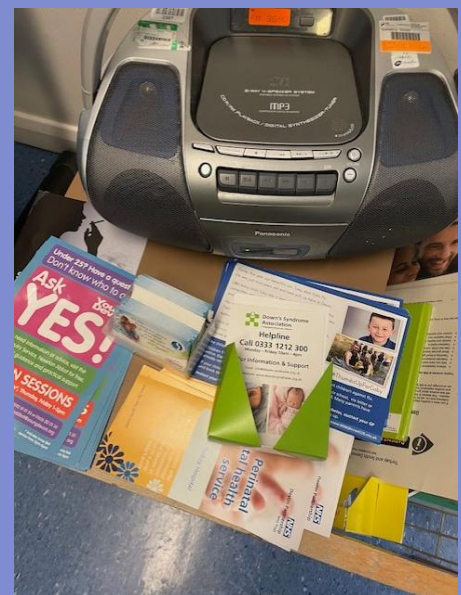
When entering the Antenatal Clinic, the area was clean and tidy, bright and spacious with a quiet and calm atmosphere. The team felt acknowledged and welcomed. The way in which visual information was displayed was quite disjointed with posters seemingly dotted everywhere with no organisation.

The service users felt the walls were overtaken with COVID information dominating the information for parents to see whilst waiting. All the service users agreed that the use of notice boards in this area would help to tidy up the walls and focus attention to specific pieces of information. Suggestions for themed noticeboards included screening, feeding, MVP/Quality, and COVID. There were some better examples of visual displays in the noticeboards in the assessment area which showed specific topics, however it was noted that the breastfeeding board was entitled 'Breast feeding during covid' and questions were raised as to whether this could be covered on a general 'Breastfeeding' board.



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The staff photo board was a concept that all service users really liked so women, birthing people and their partners knew who would be looking after them. However, the board in the antenatal clinic was empty. If this is something that cannot be addressed, then it is suggested that the board is removed and replaced with a noticeboard for information or a leaflet holder. The leaflets in both waiting areas were untidily displayed on tables which made the information overwhelming and somewhat inaccessible. There were a small box of down syndrome leaflets on the pictured table and one screening poster - it was noted that more positive information regarding screening and down syndrome on display in noticeboards and the TV screen in the waiting area would be useful for service users, particularly resources from Positive About Down Syndrome would be welcomed.



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The TV Screen at the front of the waiting area was positively commented on by all service users. It would be great if this could be diversified and perhaps some research around what service users want to see would be useful for making the best use of this resource. The position of the TV on the back wall was questionable as none of the seating within the waiting area faces the screen, suggestions were made to move the TV or rearrange seating to make use of this screen. All the service users liked the radios in waiting rooms which helped to make the room feel relaxed and welcoming. All service users commented on how horrible it is to sit in a silent waiting room, so the background noise was welcomed.



It was nice to see achievements of the staff/unit displayed, however the most recent certificate would look more professional that the same certificate displayed from multiple years.

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One service user pointed out the notice for Maternity Information Videos which was stuck to a table. All the service users agreed this is a fantastic resource, but it is not prominently displayed to raise awareness with parents. It was suggested that placing a sticker or stapling a copy of the poster to a woman or birthing persons notes would be useful and a better display within the maternity unit would be beneficial to women and birthing people. When referring to down syndrome, it was observed that the maternity information videos refer to 'risk' and more appropriate terminology would be 'chance'.

The space throughout the antenatal clinic and assessment area was clean and felt safe and secure. The reception was clear, and staff were readily available to support. Use of the staff photo noticeboard would make it clearer to women, birthing people and their partners who was available to help them today and how to identify a senior level member of staff. Aesthetically the walls and ceilings need some TLC with chipped paintwork and discoloured ceiling tiles.

Staff were moving around quite a lot in this area and weren't always smiling or giving eye contact. Such a simple thing could make a big difference to someone who is feeling anxious about their appointment and eagerly watching activity.

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JOHN MACPHERSON WARD

Initial impressions of the John Macpherson ward was overwhelming and cramped. The computer on wheels at the entrance to the ward took up a fair amount of the entrance space and it was suggested that if this had been moved it may have made the space feel less cramped and overwhelming. Further to this, there are a lot of thank you cards hanging around the screens surrounding reception – as much as this is nice, it adds to the overwhelming feeling felt when entering the ward. Some better display of these thank you cards (e.g. framed and hung on the wall or neatly displayed as a collage on a noticeboard) would allow for the cards to be seen and displayed, brighten up the corridors and reduce the cluttered feel at the entrance to the ward.

The security of the John Macpherson ward was good, so much so it was difficult to get in and out. One service user suggested 'Installing opportunities for people to give feedback there and then would be great. A display or small postbox with cards for people to complete to give feedback provides an opportunity to capture people's opinions whilst they are still fresh.' An MVP postbox could be a great addition somewhere in the maternity unit.

The ward was busy and again, not all staff gave eye contact or smiled when eye contact was made. This may seem a small thing to pick up on, but it makes a massive difference to how welcome you feel in a clinical setting.

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The staff photo board was well filled on this ward and the full effect of how useful this board could be was felt by the service users. Uniform posters were helpful for parents to know who they are talking to and for maximum effect of these posters it may be useful to have them displayed in each bay.

John Macpherson Ward felt very clinical and bare, some colour in the bays would help them to feel much warmer and more welcoming at times when women, birthing people and their partners can feel isolated and overwhelmed. The bays were very clinical with nothing to look at but white walls or nothing to read whilst in bed/bay. One bay had nothing but a poster regarding contraception which although important it is not the only thing a new mum in that bay would want to see. Information about the maternity information videos and what to expect during the post-natal period might be useful for parents. Most parents will have their phone and there is a lot of informative videos that they could watch.



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More space is needed on the ward. The bays are cramped and do not provide enough space to feel welcome, safe and secure. It was also observed that there was a lot of equipment stored in corridors which is overwhelming and can be scary. There was also food left out in the corridor. However, half the ward was empty and not in use. Further to more bays, a communal space for parents to go and have a cup of tea or just maybe have a chat with other new parents could be useful to combat the feelings of isolation that some parents could feel. This is something that has been fed back to Devon MVP in routes as well as 15 steps. Something like this could enrich the experience of patients and enable them to meet others in the ward, establish friendships and have time away from their bay.

Whilst on John Macpherson ward, one of the service users shared her poor recent experience of discharge after cesaerian and the group discussed that tailored discharge packs would be useful to those who have had different experiences of birth i.e. one for cesearian section, one for vaginal tears, one for breastfeeding etc.

There was a nice leaflet display on John Macpherson Ward, however there were discussions about how full the display was and how accessible it was. There were also no leaflets or information on Down Syndrome which parents need to be positively informed. A local support group, Living Down South, provide new parent bags for those who recieve a post-birth diagnosis of Down Syndrome which could be a useful resource for discharge.



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STAFF FACILITIES

All of the service users wanted to draw attention to the uninspiring facilities for staff. The staff toilet and changing area looks old and dull with damaged ceilings and paintwork. If we are expecting high quality care from midwives, they need an environment that is fit for purpose and enhances their wellbeing. Suggestions such as; coloured walls and inspirational displays in offices, perhaps some of the Thank You cards could be displayed in frames in these areas. The toilet and changing areas need complete refurbishment so that it is not run down and looking hazardous.



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A huge thank you to the service users who attended the trust and gave feedback for the 15 Steps report and to all the staff at Torbay and South Devon Healthcare Trust, especially Rebecca Garside who coordinated the exercise so quickly and gave us our tour on the day.

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