

15 steps for maternity Royal Cornwall Hospital 2022

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Introduction



Every person accessing maternity and neonatal care in Cornwall deserves safe, kind and personalised care. To do this services must centre the needs of the whole community. Kernow MVP are the formal service user voice partner of Cornwall and Isles of Scilly LMNS. The organisation works in a strong and effective manner with key senior stakeholders across the system to translate and champion coproduction, critical friendship, and meaningful involvement.

We listen to and engage with those who have recently used the local maternity and neonatal services and feed this back to those that commission and provide them. We advocate for the inclusion of service user voice and lived experience at all levels of designing, planning and delivering services.

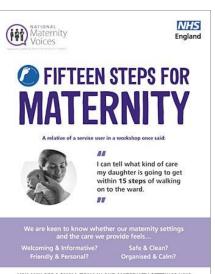
There have been multiple reports and guidance documents published over the last 6 years which highlight the importance of services being designed in partnership with service users and there being a clear pathway for listening to the voices of women, people and families. Understanding how service users feel, what they value and how they experience services is critical to ensuring services are appropriate, accessible and safe.

I want to say thank you to every service user who volunteered their time and shared their valuable insights with us throughout this process and also to the staff at RCHT who welcomed us and receive this feedback with such open minds. Nicki Burnett

Kernow Maternity Voices Partnership Chair



What is 15 steps?



YOU MAY SEE A SMALL TEAM IN OUR MATERNITY SETTINGS WHO Are reviewing the space and care we provide using the 15 steps for maternity toolkit.

I can tell what kind of care my daughter is going to get within 15 steps of walking on to the ward 15 steps is a toolkit developed and published by NHS England to be used by Maternity Voice Partnerships to support them to elevate the voices of the service users and allow them to explore collaborative working to review, explore and design services within maternity units. It was inspired by a mother whose daughter required frequent hospital visits.

The idea is for service users to be able to experience the spaces where care is provided and to be able to express how they make them feel. 15 steps provides guides to be used by small groups while they spend some time in each area of the hospital. It uses an observational approach where volunteers are encouraged to write about the things they notice and assess them using four separate themes, which are;

- Welcoming and informative
- Safe and clean
- Friendly and personal
- Organised and calm

These themes were identified by co-designing this toolkit with a group of diverse service users and representatives.



What we did?

On Friday 14th October 2022 we were welcomed by Royal Cornwall Hospital Trust to carry out a second 15 Steps for Maternity Challenge. Our group consisted of staff members from Kernow Maternity Voices Partnerships and Healthwatch Cornwall, midwives, volunteers and service users.

Three separate service user groups visited:

Wheal Fortune and Neonatal unit

Wheal Rose and Day assessment Unit

Truro birth centre and Delivery Suite

Observation guides from the 15 Steps toolkit were given to all group members to record notes as they visited each area. Each group then spent some time walking around their designated units before returning to The Knowledge Spa to share findings. We captured the experiences of the day using photos, written notes, voice notes and video.







Highlights

Throughout our visit we saw some wonderful examples of good practice and innovation. Service users noted many improvements and were keen to share learning across teams.

Delivery suite and Birth centre

Many improvements were noted in these areas. The consistency of environment was a real positive. Service users really liked the way information about labour positions and options available was displayed and accessible. The inclusivity of the imagery was especially welcomed. A focus on personalised care was noted and would be welcomed in other areas.

Theatre

Updating the environment and options available in theatre has made a real impact on the experience of people birthing in theatres at RCHT. We want to say thank you to all the staff who have worked so hard to move this forward following our last 15 steps report.

Neonatal

The neonatal unit was very welcoming and a family centred environment. The inclusivity of imagery and way information was shared around the ward was really positive. Specifically, photos of staff and creation of a warm nurturing environment in a highly clinical area was commended.



Findings

We have themed the feedback collected during the day into the main themes suggested by the 15 steps framework. Here we present comments, suggestions and real life stories of those who took part.

Welcoming and Informative

The Delivery Suite, Birth Centre and Neonatal wards were commented on as being particularly warm and welcoming. The Neonatal ward displayed colourful walls and bunting, little hooks for little coats ensuring siblings feel at home, and a welcoming staff. The 'who's who' board was very well received.

These wards had a variety of well presented displays on the walls with clear imagery and useful information regarding breastfeeding, safe sleep etc. Positive affirmations, invitations to use the space and suggested birth positions on the walls in the Birth Centre and delivery suite were warmly acknowledged. Service users loved the photos of the staff on the Neonatal Ward.

In contrast Wheal Rose and Wheal Fortune had a more clinical and impersonal feel. Bare or minimal displays on beige walls contributed to a less welcoming atmosphere within the Bays.

Some information posters were placed on corridor walls. Service users commented that some of these information posters would be more useful in the Bays where you would have more time to read them. The corridors were not always easily accessible, often with bins or other equipment in the same area. Service users made suggestions like putting welcome packs by each bed, with information about kitchens, how to make use of infant feeding facilities and what to do with your baby if you needed to shower. These information packs were visible in Wheal Rose but the group were unable to find any information available on Wheal Fortune.

It was generally agreed that staff were welcoming throughout, although signage and directions to some units were unclear.

For example, our service users weren't clear where to go coming out of the lift to find Delivery Suite. There was no signage visible from the lift exit. The reception was also difficult to spot, as it is almost concealed behind you as you arrive. Signage within car parks and on the route towards the maternity unit was not always clear.

Wheal Fortune (postnatal ward) appeared to be closed off to the general public with lots of warning signs on the doors.



The service users stopped and were looking for a different way to access the ward having carefully read the signage. Once they had been directed by a member of staff, the corridor was welcoming with nice imagery outside. The service users liked these so much they were keen to have seen them within the reception, to assist in finding the ward. Our service users found gaining access to the ward delayed. The buzzer system worked, the line was left open so they could hear the staff on the desk, but it took repeated (approximately 8 rings) ringing of the bell for a member of staff to respond.

I have no idea what The Nest meant. I still don't, even reading that. (Service User, October 22)

Recommendation 1

Clear welcoming signage at eye level. Separated from warning signs. Additional language translation.

Recommendation 2

Consider appropriateness of where information posters are placed on the wards to allow for maximum exposure and time to read.

Recommendation 3

Positive language on all signage and communication and actively giving permission for service users to engage with the environment.

Recommendation 4

Removing corporate language for example: multi-disciplinary working and acute.



Safe and clean

Overall it was agreed that the Maternity Units felt safe and clean, although it was acknowledged that some areas of the building were old and in need of updating.

Promotion of hand washing and sanitiser stations were clear on all entrances.

However, it was noted that a couple of areas required some attention on Wheal Fortune. Dirt around doors and broken/condemned chairs left in corridors were highlighted as an issue by the service users. Open used sharps boxes and waste left exposed and not secured





Who's Who' boards in some of the units were frequently commented on as being a very positive sight. This would be great to see in every unit, particularly when masks are being worn.

Access to private rooms for families such as the Daisy Suite and Luna Room (Neonatal) was recognised as being a valuable resource and both areas felt safe and nurturing.

Conversely the waiting room on EPU (Early Pregnancy Unit) lacked privacy and was described as the "Corridor of Doom!" Service users were very unclear what it was, was it a walk through for people, was it a waiting area. There wasn't any visible support or information up on the wall. There wasn't a separate waiting room, with a door. It was not felt to be a safe space for someone who may be going through a traumatic event.

Recommendation 5

Rubbish, bins and broken equipment to be placed in zones away from main entrances or throughfares.

Recommendation 6

Learning and innovation to be shared between wards, so popular initiatives can be promoted and consistency created for the service user experience.



Friendly and personal

Staff were all very friendly and welcoming with most introducing themselves by name and role as we entered the ward.

Staff on neonatal supervised the service users due to the more complex needs of those on the wards.

There's pictures on the walls, there's bunting. Its clearly a hospital but it feels a lot more nurturing (Service User, October 2022)

Consideration for siblings with a well-designed play room was lovely to see, and the use of technology via the VConnect pads were a wonderful resource ensuring parents can receive updates and stay connected to their baby at all times. It would have been nice to have seen this promoted on Wheal Fortune as part of the Transitional Care offer. Service users noted that you might be in hospital for 2-3 weeks, partners at work, no signal. The new addition of Going Home tote bags is a fantastic personal touch that provides useful information as well as making parents feel cared for. It would be nice for these thoughtful gestures to be promoted amongst teams to link wards, building a sense of community and developing learning.

Personalisation of care on the Birth Suite was agreed as being hugely positive with laminated cards for service users to input relevant and important details about their language/birth preferences. It would be great if there was a way of transferring this information easily so that when parents travel between wards the information goes with them.

Menu cards of basic info were available on delivery suite including information on positions, monitoring, what to expect postnatally. QR code, feedback and FFT were promoted.

Organised and calm

On entering the Birth Centre we are met with soothing, soft lighting, a beautifully written affirmation on the wall and a general feeling of relaxation and calm. The birth spaces within the unit feel organised and spacious with a variety of options available for labour and birth. The landscape images on the wall and the twinkly ceiling lights demonstrate that a huge amount of thought has gone into providing a safe, calm and nurturing space for people to birth their babies. The service user particularly liked the light up ceiling tiles and would like to see them utilised in other areas including the wards.

Day rooms in both Wheal Fortune and Wheal Rose require some thought. Feedback from the groups agreed that signage and invitations to use the day rooms need to be clearer. Day rooms look tired and uninviting with access to outside space obstructed by trollies and other equipment. Service users also believed these were staff rooms as they were being used by staff for breaks and therefore not certain they were welcome to use the space. There appeared to be no information about community services that could be accessed on leaving the hospital. Service users suggested information on feeding support, sleep and parent groups would be valuable.

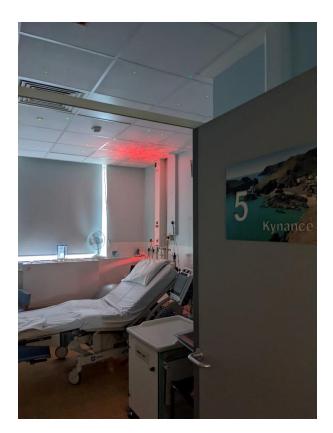


When I stayed here, they kept saying in five years time we'll have a new hospital. Well I'm here now, like, and I'm not thriving here at all. Like, I feel like I want to escape here.

(Service User, October 2022)

The corridors on Wheal Fortune were noticeably cluttered with trollies and bins and it was agreed a better storage solution would be beneficial here. It was also unclear how to navigate the ward with no signage directing users to the day room or other facilities such as bathrooms. It was also noted by service users, that manoeuvering through corridors with babies in cots would also be difficult.

An empty bay on Wheal Fortune was available for us to view. Service users noted there could be simple changes made to make the space more comfortable. Soft comfortable chairs, bright curtains and images of nature would be welcomed. Service users also commented, if the Bays were themed by colour, the ward would be easier to navigate in general. Language on signs could also have a more personal, inviting tone. For example, positive language inviting parents to use the cots to move babies around the ward rather than telling them not to walk around with their baby in their arms.

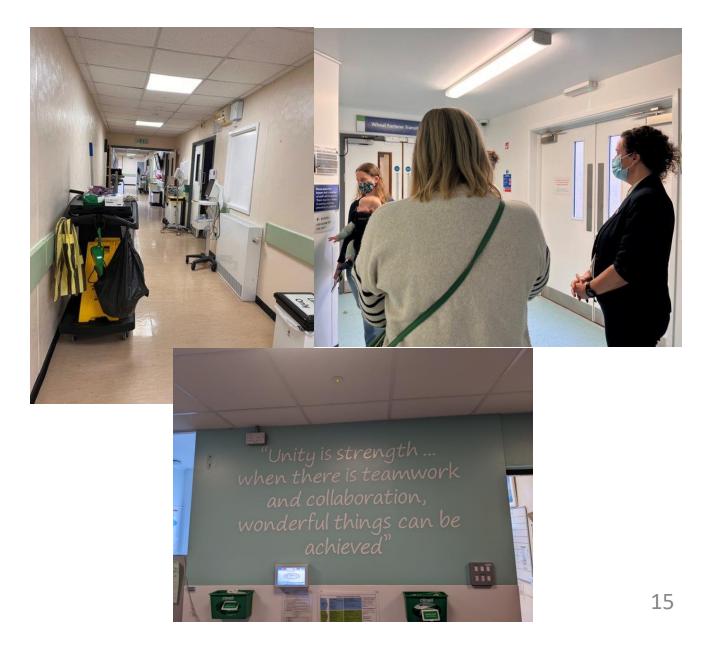


Recommendation 7

Personalised care learning to be shared widely from the birthing suite and neonatal (use of prompt sheets, hotel style leaflet cards).

Recommendation 8

Look at the environment on the postnatal wards and continue the feeling of the birth unit throughout the birth experience. Variable soft lighting, ceiling tiles, comfortable chairs, link with daylight and the natural world. Environments to encourage oxytocin production.



Review from 15 Steps Recommendations 2020

2020 Recommendations	RAG	2022 Comments
Co-create some posters for the delivery suite to promote active birth.	Green	Actioned
Set up rooms on the delivery suite to be welcoming - mood lighting, birth ball, comfy chair etc.	Green	Actioned
Update information in all areas to ensure accuracy and improve diversity of imagery	Amber	Partially actioned: Create a process for ensuring information is up to date, continue to work on diversity of language and imagery
Improve signage to kitchen and other patient facilities to ensure everyone is aware.	Red	Action required
Work towards making patient facilities more homely and less clinical, move bins away from toys and look at using pictures similar to Wheal Rose dayroom in other areas.	Red	Action required
Develop a clear signage system for when rooms are occupied and ensure doors and curtains are always closed before any examination or intervention is performed.	Amber	Speak to midwife before entering signs on birth centre well received, need to share across areas. Action required (EPU no closed doors)
Update safety information ensuring safeguarding information is clearly displayed in all toilets.	Amber	In place in some areas but not all. Requires on going monitoring

2020 Recommendations	RAG	2022 Comments
Clear information on how to access more support i.e. MVP or PMA and who to contact if you have concerns about your care. This is needed in all areas.	Red	Action Required
Display the choices for place of birth in Cornwall – Maybe 'Ask your midwife about your birth choices' in the Healthy Cornwall waiting area?	Red	Healthy Cornwall have moved, Hub wasn't reviewed as part of 15 steps. We didn't see any info on Wheal Rose (Day Rooms/ DAU) Recommendation MVP visit Hub.
Work on the caesarean pathway and recovery room to improve consistency and support personalisation i.e. skin to skin, lighting, music, gentle caesareans.	Green	New SOP written and in place. Murals and environment in Theatre and Recovery Room completed. Theatre experience feedback significantly improved
Ensure birth choices are offered and discussed such as aromatherapy, wireless telemetry, TENS. Can this be put on a poster?	Amber	Complete on Delivery Suite. Not in place on Birth Centre but in progress. Wheal Rose Day Room- missed opportunity.
Clear feeding and support plans made for postnatal, to reduce the need for repeating information and receiving conflicting advice from different professionals, as well as ensuring the parents understand the information given	Amber	information posters present. Recommendation to make information available in the bays, not only in corridors. Information communicated in a variety of ways. Connect with Kernow Parenting Journey. Look at updating discharge informaiton

2020 Recommendations	RAG	2022 Comments
Designated storage space for equipment and domestic waste to keep corridors and communal spaces clear. Checked as part of daily ward rounds.	Red	Action required
Work towards creating a relaxing communal area on Wheal Fortune with access to refreshments that can be used by families especially during visiting when bed spaces are very cramped.	Amber	Progress noted around access to refreshments. Recommendation to now make this more inviting, promote actively to all service users.
Remind all staff to introduce themselves and write their names on the board as well as ensure they ask pronouns and how to pronounce names correctly.	Amber	Further action now- to develop education, being inclusive in all the work. Recommendation to develop photographic 'Who's Who' Boards. Use of language cards (Birth Unit)/ Personalised Care Plan 'About You' information to be known by staff. Education amongst staff around the importance of acting as an ally (Language matters posters etc)
Information packs for each area, for example meal service times, map of where facilities are, information on how to call for support and where to access refreshments in between meals etc.	Red	Action required. Recommendation: learning to be shared across departments.
A recurrent theme of feedback is communication, especially on the postnatal ward, which was experienced on the day. Look at organising some training on language and impact of poor communication.	Amber	Ongoing and constant theme, experienced again during the visit, requiring input from all staff at all levels and a review of culture. Note- Positive experience and feedback about Neonatal and Intrapartum areas

Next steps

This report will be presented along with a highlight video to Cornwall and Isles of Scilly LMNS board in December 2022. It will also be presented to RCHT maternity governance and Patient experience group in January.

It will be published publicly and available to download from our website. We would like commitment from RCHT to codevelop an action plan with named action owners to respond to the recommendations from this report and the outstanding actions from our 2020 report, we would like an update on this action plan to be presented to the LMNS board every 6 months to highlight progress or escalate any concerns or need for support.

We would also like to support RCHT to share some good practice and innovation examples with the wider maternity and neonatal teams as well as across the trust and region, including the incredible work to improve the theatre experiences and work in neonatal to create a friendly and welcoming family centred space. Our next steps also include seeking permission to conduct more 15 steps events in 2023 focussing on The Hub and community venues as well as arranging a 15 steps visit at night within the acute unit.

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Thank you

Thank you to everyone that supported this project and worked hard to make it possible:

NHS Cornwall and Isles of Scilly

CIOS Local Maternity and Neonatal System

Royal Cornwall Hospital maternity leadership team

Kernow maternity voices partnership volunteers

Healthwatch Cornwall

All the families, service users and representatives from around Cornwall.

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