



Enter & View Visit Report

Details of Visit

Service Name and Address	Wrekin Unit (Midwife Led Unit) The Princess Royal Hospital, Apley Castle, Telford TF1 6TF
Service Provider	Shrewsbury and Telford Hospital NHS Trust
Date and Time	Wednesday 5 October 2016 10.00 - 12.00
Visit Team (Enter & View Authorised Representatives from Healthwatch Shropshire)	Two Healthwatch Shropshire Authorised Representatives One Healthwatch Telford and Wrekin Authorised Representative

Purpose of the Visit

To assess the levels of confidence in maternity services and care following the Maternity Services review and reconfiguration.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experience of all service users and staff, only an account of what was observed and contributed at the time.

Context of Visit

In 2013 a review of maternity services was commissioned by Shropshire and Telford & Wrekin Clinical Commissioning Groups to understand the quality and safety of maternity services provided by The Shrewsbury and Telford Hospital NHS Trust. Following this review, in 2014 maternity services in Shropshire and Telford & Wrekin were reconfigured: The Trust opened a new Women and Children's Centre at the Princess Royal Hospital in Telford, which houses all the inpatient Consultant Led Obstetric Services available through the Trust. The Trust also runs five Midwife Led Units (MLUs) in Shrewsbury, Oswestry, Bridgnorth, Ludlow and Wrekin (Telford).

In October 2014, the Care Quality Commission undertook an inspection of the hospital trust that included the maternity services. Healthwatch Shropshire visited all the Midwife Led Units in Shropshire (Shrewsbury, Oswestry, Bridgnorth and Ludlow) during 2015 and published a report. This report can be accessed using the following link:

http://www.healthwatchshropshire.co.uk/sites/default/files/healthwatch_shropshire_midwife_led_unit_report_2015_1.pdf

In order to complete our work on MLUs it was decided that Healthwatch Shropshire would visit the county's fifth MLU in the Princess Royal Hospital in Telford. Healthwatch Telford and Wrekin were invited to join us on the visit. The visit was semi-announced with the Ward Manager, Lead Midwife and Director of Nursing being given written notification that a visit would take place within a certain timeframe but not the date and time of the visit.

What we were looking at

When speaking to patients we discussed how satisfied they were with the service provided by the MLU and their experiences of the following:

- Having a named midwife
- The information received before, during and after the birth
- The process of deciding the location of the birth
- The support offered and provided by the staff throughout pregnancy and during the post-natal period

- Their privacy and dignity during all their contacts with the service
- Their opinions on the atmosphere and environment of the unit

We also spoke to staff in order to explore their confidence and experiences with regards to the following:

- Staffing numbers
- On call arrangements
- Emergency situations
- The availability of support for the unit from other Midwife Led Units (MLUs) and the Consultant Led Unit (CLU)
- Communication across services
- Meeting the needs of patients, including those from all faiths and patients for whom English is not their first language
- Local patient engagement.

What we did

A midwife showed us around the unit.

We spoke to

- two patients in the post-natal bays who had given birth in the CLU before being transferred to Wrekin MLU
- three patients in the ante-natal clinic
- two patients in the Day Assessment Unit

The ante-natal clinic and Day Assessment Unit are located next to the MLU and are part of the Consultant Led services in the hospital. These departments have their own Ward Manager.

We also talked with the two midwives on duty in the MLU.

What we found out

The Wrekin MLU is situated within the grounds of the Princess Royal Hospital, Telford. It provides care to approximately 400 women per year from all over Shropshire and Powys. Women can choose to give birth in the MLU, and in addition

to straightforward pregnancies, they also accept patients with minor complications to their pregnancies because the CLU is in the same hospital. Women using the MLU may have received support from midwives from all over county and across the border.

Initial impressions and tour

The environment was bright, clean, and warm and there were pictures on the walls and doors to rooms. It had a spacious feel without 'clinical clutter'. There was a tea and coffee room for patients and partners to use at leisure. One new mother and her partner said that the unit was 'homely and comfortable', and that 'drinks and sandwiches are always available'.

We were shown the largest labour room, which seemed cosy. It had a bed with bright duvet set, a large comfortable chair, a deep pool with a sign saying 'clean for use', ensuite facilities, a locker and a CD player. The midwife explained that very few patients brought CDs. They usually played music from their phones.

In the corridor we were shown a baby resuscitation trolley and a transportable incubator for emergency home births, which the midwife said was rarely used. Other rooms included a sluice; a changing room for staff, where drugs were also kept; and an equipment room. An open office desk space with computer for staff use was situated against the corridor wall.

We saw a post-natal single room which was ensuite. It was comfortably furnished with bed, chair and locker. There was a TV over the bed. The bathroom was spacious and included a baby bath. We were told that this room was used when the patient needed privacy or extra support. Any new mum can ask to use the room for a fee of £50 per night but it can also be used as a comfortable room for new mums, e.g. with twins or women needing extra peace and quiet. The room was empty at the time of our visit.

We saw a clinical assessment room which had a couch and clinical equipment.

There was an open dining room and serving hatch next to a small lounge with large TV.

We saw three 4-bed bays, which were spacious and quiet. There were two patient bathrooms, as well as a shower room.

A staff office and community midwives room were also situated on the post-natal ward.

Outside the entrance to MLU there was a Day Assessment Unit, and an Ante-natal Clinic was also taking place.

Some visitors arrived during our tour of the unit, looking for a particular patient. The midwife explained that only the partner and any siblings of the baby had unrestricted visiting hours. Other relatives and friends could visit at specific times. The visitors accepted the information calmly and complied with the request to leave.

On the day of our visit, there were four women in the post-natal ward and one in a labour room within the MLU. There were also two patients in the Day Assessment Unit and several patients in the Ante-natal Clinic.

Feedback from patients

- **Overall experience**

One post-natal patient was reasonably satisfied with the delivery in the CLU and she felt staff were caring and respectful. The other new mum was very satisfied with her experience.

Both patients we spoke to in the Day Assessment Unit were very satisfied with their experience to date, one saying it was 'really, really good'.

- **Having a named midwife**

One patient told us that she had a named midwife who she had hardly seen. She had six different mid-wives during the delivery in the CLU but this wasn't a problem in terms of her care. She thought this was because she had a medical condition.

The other new mum didn't have a named mid-wife, but the same midwife, who she hadn't met before, stayed with her throughout labour.

- **The information received before, during and after the birth**

Both post-natal patients had received information packs. One said that she found the words hard to understand, and said the information goes in better if she is told about it rather than being left to read a pack of information.

One patient in the Day Assessment Unit said the information pack she had received was 'very informative and suited her needs'.

- **The process of deciding the location of the birth**

Both new mums had delivered their babies in the CLU as they were regarded as 'high risk', and had been transferred to the MLU within six hours.

The other patients we spoke to had either been advised to give birth in the CLU or were awaiting further advice from a consultant or a midwife.

- **The support offered and provided by the staff throughout pregnancy and during the post-natal period**

One new mum said that her named midwife didn't listen to her and wasn't helpful. However when she was accompanied by her aunt, another midwife was very helpful and 'respected her as an adult, rather than treating her as a child'. She said the 'staff are nice' in the MLU. She had been given advice on winding and feeding when she had problems, and had chosen to stay a bit longer in the MLU rather than go home.

The other new mum had attended local parenting classes and had lots of support from the Family Nurse Partnership¹, which she found really useful. She felt she had had excellent support from staff throughout, and that the MLU staff had supported her well to look after her baby, and that they answered all her questions without judging her.

Both new mothers had been given information about breast feeding and bottle feeding in the MLU. One had been helped to breast feed and the other had been supported and given advice on bottle feeding. One new mother said she was 'adequately prepared' to go home, and was confident because of the support

¹ This service is provided by the Local Authority, not the NHS

received in the MLU, and the support she was expecting to receive when she gets home.

The patients we spoke to in the Day Assessment Unit were very satisfied with the support they were receiving. One patient said that 'they explain everything clearly'. The same patient said she had a wonderful health visitor² who had already come to her home and said she was going to visit her two or three times a week after the birth. The only suggestion for improvement was to have more consultants so that waiting times of up to 3 hours were avoided. All other appointments involved very little waiting.

The three patients we spoke to in the Antenatal Clinic liked the information pack they had been given. All felt very well-supported by busy staff, though all commented on the long waiting times to see a consultant. One patient said all the staff she had seen were very helpful, apart from a community midwife who she saw in her local GP practice who arrived late, took her blood pressure and urine sample, but didn't talk to her. The next appointment with another midwife was much more helpful.

- **Privacy and Dignity**

All patients and partners we spoke to felt that their privacy and dignity was respected at all times by all staff in all locations.

- **Atmosphere and Environment**

The two patients we spoke to in the MLU said that the area was calm, quiet and homely.

² This service is provided by the Local Authority, not the NHS

Discussions with MLU staff

- **Staffing numbers/ on call arrangements**

Two Midwives and 1.5 Health Care Assistants are on duty during the day. At night there are two Midwives and one Health Care Assistant on duty. Two Midwives are on call between 5pm and 8am for home births and to support the labour ward.

- **Emergency situations**

All staff are trained for emergencies. Typically four new mothers and their babies transfer each day from the consultant led unit to the MLU. Recently there has been an increase in the number of patients who, having given birth in the CLU, transfer to the Wrekin MLU before being transferred to the MLU nearest their home in the day time, when transport is available.

- **Support for Staff and Communication**

Staff from all the local MLUs have joint training. Midwives spend time in other MLUs and the CLU. All MLU staff also have to update their skills annually. Staff said that support and training were good.

- **Meeting the needs of patients (Faith and Language)**

The interpreter service is booked for appointments when needed. Staff said they respected the faith of patients. We were told about a recent patient who wished to attend a service of a particular faith. Staff found out about the nearest service and looked after the baby whilst the patient attended the service.

- **Local patient engagement**

There is a local Maternity Engagement Group which is advertised in the MLU patient sitting room. Staff also told us that they provide a weekly tour of the MLU every Saturday at 2.30pm. These are well attended and a midwife is always available to give advice and support. Parent craft classes are also available from

28 weeks gestation, but sometimes they are a bit 'hit and miss' as there are not enough staff to run them.

Summary of Findings

- All the patients we spoke to thought that the MLU had a calm, quiet and homely atmosphere.
- Most patients appreciated the comprehensive information pack, though one patient found it easier to be told, rather than read, information.
- At the time of our visit, all patients had delivered babies in the CLU and were then transferred to the MLU. The ante-natal patients we talked to were either expecting to deliver in the CLU or were awaiting advice from clinicians.
- We were told by patients that most of the ante-natal and post-natal support provided by staff was good or very good.
- Patients also told us that waiting times for most appointments were minimal. However several patients told us that waiting times for consultant appointment could be several hours.
- All patients agreed that their privacy and dignity were respected by all staff.
- MLU staff said they had appropriate training, alongside staff from the CLU and other MLUs. Rotation of staff ensures that all staff are kept up-to-date with, for example, procedures in an emergency.
- Staff described how they used an interpreting service when necessary, and how they were able to meet the needs of patients of different faiths.
- We were told that weekly tours of the MLU were popular with patients.
- The frequency of Parentcraft classes is limited by a shortage of trained staff to deliver the classes.

Recommendations

We recommend the following:

- Action is taken to reduce the waiting times for patients to see a consultant.
- More trained staff are provided to run Parentcraft classes.

Service Provider Response

Healthwatch Shropshire has received the following response to this report and the recommendations from the Lead Midwife for Midwifery Led Units and Community Services at The Shrewsbury and Telford Hospital NHS Trust:

Thank you for visiting the Wrekin Midwifery Led Unit and your subsequent Enter and View report dated 24th October 2016.

I am delighted to read that you found the Wrekin MLU to be clean, uncluttered and had a homely feel to it. Women's experiences and comments on their care were mainly encouraging, but it also identified areas where communication could have been improved.

It would appear that in some instances concerns expressed pertain to the whole service, rather than being specific to Wrekin MLU. For example, comments regarding the day assessment unit (DAU), the antenatal clinic and consultant unit labour and birth falls outside of the Wrekin MLU remit.

However, it certainly affords us the opportunity to communicate with other managers across the service to address some of the concerns you highlight, for which we are grateful and will act upon. I will be speaking to the Matron for the Antenatal ward and DAU to explore ways of reducing clinic waiting times.

The remaining recommendation regarding more midwives trained in Parentcraft teaching; we are currently in a transitional period, whereby Parentcraft education is moving to the 'Solihull Approach' and will be led by the Health Visiting service. Unfortunately, the planned implementation date of early November has been delayed due to circumstances beyond our control, due I believe to acute shortages of Health Visiting staff.

This has left us temporarily bereft of staff able to run classes, but thankfully, I'm informed will be rectified in January when we move to the new approach.

My thanks once again for your visit and for the opportunity to gain feedback from service users.

Acknowledgements

Healthwatch Shropshire would like to thank the service provider, service users, visitors and staff for their contribution to this Enter & View.

Who are Healthwatch Shropshire?

Healthwatch Shropshire is the voice for people in Shropshire about the health and social care services delivered in their area. We are an independent body providing a way for people to share their experiences to help people get the best out of their health and social care services. As one of a network of Local Healthwatch across England we are supported by the national body Healthwatch England, and our data is fed to the Care Quality Commission (CQC).

What is Enter & View?

Healthwatch Shropshire gather information on peoples experiences of health and social care services and there are times when it is appropriate for Healthwatch Shropshire to see and hear for ourselves how services are being delivered: these visits are called 'Enter & View', they are not inspections.

Teams of specially trained volunteers carry out visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Healthwatch authorised representatives to observe service delivery and talk to services users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Get in Touch!

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