

BIRTH REFLECTIONS: The impact

Tracy Denmade Patient experience Lead Midwife



AIM: To improve Maternity services based on feedback from women/partners

Background: Hearing the voice of the woman/family is paramount to improving services.

The Maternity Voices Partnership already existed to capture the woman's voice and lead on improvements. Feedback from Birth reflections stretches though all areas of maternity to lead on change and improvements.

Feedback from families via Birth Reflections enables each department to have real time data and feedback on issues that are important to women. Additionally, what can be improved, this is triangulated with feedback from the Friends and Family Test and the CQC Maternity Survey to develop action plans based on what women are telling us.

Maternity Patient Experience Group (MPEG) was set up with the primary aim of hearing the voice of the woman and to develop action plans to address concerns. Also to disseminate good practice and learning from excellence.

Positive feedback to disseminated through MPEG to celebrate individual staff or teams.

Tracy Denmade, Patient Experience Midwife, Walsall Healthcare NHS Trust

Tracy's journey into patient experience has been developed from years working frontline in Midwifery. As Community Midwife she identified a gap in service provision – to hear women's birth stories. This is an important opportunity for their birth partners to share their experiences.

Tracy undertook Birth Trauma Resolution Practitioner training to ensure she was fully qualified to support families and undertake safe and effective reflections.

With support from her senior team she set up Walsall Healthcare's Birth Reflections service.

She developed the criteria for inclusion and exclusion of referrals, developed the pathways, the referral processes, audit and a means of feeding back to the teams on themes and trends from the Birth Reflections of women.

Tracy ensures the voice of the woman/family is heard at

every forum, has developed the Maternity Patient Experience
Group (MPEG) including the MNVP, to develop action
plans based on feedback from our families.

Method:

Established links with all areas in maternity to have a platform for feeding back the woman's voice.

To facilitate making improvements based on what we were hearing the following steps were taken:-

- Monthly meetings set up to discuss key themes and trends identified through birth reflections.
- Action plans developed to make improvements
- Individual positive feedback given to staff members and included onto the "shout out" boards in each clinical area.
- Findings presented at clinical Audit and Maternity Governance Group.
- Weekly attendance at Incident review meetings to represent the woman's voice.
- Representation at Maternity Voices Partnership (MNVP)to ensure the voices of women are heard.

Improvements to date:

- Consultant de-briefs for all women following an Obstetric emergency prior to discharge. To provide clarity and an opportunity for the woman/family to ask questions about their care.
- Consultant Anaesthetist to review all women who have had a General Anaesthetic following birth. This is essential for women to have a full understanding of the labour/birth events.
- Induction of labour QI Project in response to feedback from women to improve their experience.
- Introduction of "Comfort rounds" on the postnatal wards. Based on women's feedback on clean bedding, refreshments and analgesia.

Maternity Specialist Midwife.

Summary
Introducing Birth reflections has lead to service
improvements and ensures the woman's voice is listened
to and acted upon.