



Women's Health

IMPLEMENTATION OF SERVICE REVIEW RECOMMENDATIONS

This eleventh update provides information about progress as we continue to implement our improvement programme. The service review reports, updated, work programme, working group minutes and this newsletter can be found if you click here: [Maternity Services Review](#)

Feature

Work stream 6 - Consumer Engagement

The last few months have seen members of the working group, supported by Barb Ruby Quality & Clinic Risk Co-ordinator undertake focus groups with consumers from across our district. This feedback has been collated with the national maternity survey and the monthly maternity survey results. The feedback was collated across the women's journey, using a matrix which looked at the following categories;

- Family/Whanau involvement
- Communication
- Information
- Environment/facilities
- Involvement in decisions
- Transfer of care/coordination of care
- Physical, emotional and cultural support
- LMCs
- Visiting arrangements
- Breastfeeding

Much of the feedback received was positive, with women's experiences being strongly influenced by how they were communicated with;

“My partner was involved in all decisions”

“Delivery suite outstanding. Professional, slick and decisive. Communicated beautifully between each other”.

“Being explained and understanding the process of handover from LMC to secondary care (hospital interventions)”.

“Felt very involved in my care”

Overall involvement of partners, whanau and family was central to the positive feedback. The feedback received highlights what is being done well. This is great, keep up the good work.

The feedback also provided “Opportunities for improvement”. The following provides a summary of the feedback.

Women expressed frustration at being kept waiting, and not being kept informed of why they were waiting.

In many cases the feedback occurred following an emergency delivery or a traumatic birth. Women were given differing information, and many expressed the desire to have partners stay overnight. There were comments relating to the discharge process. Here are some examples for you

“No awareness of need to fit discharge around babies feeds and travelling. Wasn't personalised to our needs”

“Young Maori mothers want to trust their midwives as their advocate during birth and want them to be well supported in the hospital and during handover if required”.

“Discharge took all day”.

“No sleep at all because everyone was in one room. Only stayed one night in PN. Discharged to Dannevirke”.

A detailed plan will be developed that prioritises the “Opportunities for Improvement”, for action. This will be undertaken in partnership with MCH staff, LMCs, consumer and Maori representatives. Watch out for updates in future newsletters.

Commendation

It has continued to be extremely busy over the last couple of weeks. Maternity Service leadership wish to acknowledge the leadership shown by the ACMs on shift, staff who have done additional shifts, delayed or no meal breaks and how well all staff dealt with the difficult shifts. Thank you all for your efforts. There are times where levels of acuity and the numbers of women make it a real stretch to manage – we are working to strengthen links with the Hospital Coordination Unit and Duty Nurse Managers, especially after hours to ensure that support is available when it is needed.

Ongoing improvements;

As we have grouped the improvement work into seven work streams, this newsletter gives you an update on each one. If you would like an opportunity to participate in any of the work stream activity it's not too late. Send your expression of interest to Robyn.Williamson@midcentraldhb.govt.nz or Catherine.marshall@midcentraldhb.govt.nz for consideration.

Workstreams

Staffing

Arrangements for interviews and presentations for the short listed candidates for Clinical Director are being finalised. There will be information soon around opportunities to attend the relevant presentations from candidates.

Feedback from the ACM survey monkey will be collated at the end of August. An update will be provided in September.

The selection process for the Charge Midwife at Horowhenua vacancy will occur in early September. Interviews commence later in August. Interviews are planned for the 0.6 FTE Midwife vacancy at Horowhenua, and the core midwife positions occurred this week at Palmerston North.

Facility Improvements

Planning for the use of the space previously used by the Women's Surgical Unit has begun. Your input into the planning is welcomed. A questionnaire will be developed to facilitate your input. Watch out for this in future newsletters. As this work progresses there will be opportunities to provide feedback and be involved in the process. If you have ideas regarding this contact Robyn Williamson.

Quality and Outcomes

RCA Analysis

In June an assessment was undertaken of progress in addressing the recommendations and findings of the six RCAs under the headings "achieved", "partially achieved", or "not achieved". Of a total of 30 recommendations in the six RCAs, 14 were achieved, relating to as an example; updating the composition of staff on a shift, additional Associate Charge Midwives on all shifts, six were partially achieved, relating to as an example; advocacy for women, and the "three way conversation", with 10 not achieved, relating to as an example; training for staff in dealing with adverse events, at that time of writing the report. The analysis confirmed that good progress has been made on some recommendations but not on others. A corrective action plan was developed to address the recommendations that were "partially" or "not" achieved, which was endorsed by the steering group. All actions have been incorporated into the seven work streams and progress against the recommendations will be highlighted in the Status Report.

Projects

Quality & Service Improvement

Two large notice boards are being placed in the Delivery Suite area for staff and consumers. These boards will present quality improvement information of interest to both groups and will provide a space to present the posters developed from the quality training sessions.

Quality improvement education

It's not too late! If you would like to participate in one of the quality education sessions being run by Barbara Ruby; Quality & Clinical Risk Co-ordinator, get in contact with her on: barbara.ruby@midcentraldhb.govt.nz

There are still a few spaces available on the; 25 August (9-11am), 21 & 29 Sept (3-4.30pm).

And don't forget that everyone who attends will be encouraged to develop a "poster", displaying their initiative and the key points. All of the posters will be displayed for a staff vote. The best poster will receive a prize.

Stakeholder Engagement

Meetings continue with services that have an interface with Maternity.

Anaesthetics/Operating Theatre

An interface meeting was recently held; this provided an opportunity for feedback on how well an emergency situation was managed by the O & G Specialist involved, through good communication and collaboration. SMOs were well represented at this meeting from both services.

We will continue to bring you key messages from these meeting in future newsletters.

Consumer Engagement

A Consumer Liaison job description has been developed. This will be presented to the steering group for endorsement. This position is seen as been critical to the establishment of ongoing consumer engagement.

Guidelines

Amanda Rouse, MQSP Co-coordinator, continues to lead the review of women's health guidelines and policies. Opportunities to provide feedback on documents will be provided. Get in touch with her directly if you have ideas or want to be involved.

MCIS

As the work gets underway to improve MCIS across the key areas of improvement, we are preparing a paper for the MDHB Executive leadership Team to ensure the resources necessary for the improvement work are made available.

Central to this work is improvements in standardisation of information, so that everyone knows where to enter information consistently and how to find information in the system, especially when it is required for providing urgent clinical care.

Training for staff is central to achieving this, and a structured training programme will be developed that provides support to staff to participate, replaces them where necessary while training and ensures that ongoing support is available to reinforce learning and the use of the system once the training has been undertaken.

Educational opportunity

"Championing Perinatal Wellbeing in Our Communities"

2016 PADA Seminar Series

Peri-natal Anxiety & depression Aotearoa

Thursday 15 September

To more details or to register email;

events@pada.nz or online

or contact

Karen.whiterod@midcentraldhb.govt.nz

Email Mailing List

Please help us to keep this list update. If your email address changes please email Katherine.elbayouk@midcentraldhb.govt.nz

Thank You

Thanks again for all your efforts and commitment to this important work. We couldn't do this without you. If you have any feedback on any matter, drop me a message on mike.grant@midcentraldhb.govt.nz, or pop into my office (Ground Floor, Old Admin Building) anytime.



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