healthwatch
Cheshire East

Experience of Maternity Services in Cheshire East

April 2018

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Overview

Context

Healthwatch Cheshire East undertakes continuous engagement activities with the public to listen to and feed back concerns and compliments regarding Health and Care services. Intelligence from our regular engagement activity at events, libraries, children centres and hospitals has seen comments emerge regarding the quality and apparent inconsistency across Cheshire East in the provision of maternity services.

In order to explore themes from our regular engagement activity, and to test out initiatives around delivery and choice in maternity services, we conducted a project using a survey to gain a local snapshot view of the two hospital trusts in Cheshire East providing maternity services. This was carried out from late November 2017 to early February 2018.

Cheshire East is well served having two maternity units within 25 miles of each other; namely East Cheshire NHS Trust (Macclesfield Hospital) and Mid Cheshire Hospital Foundation Trust (Leighton Hospital) near Crewe.

Leighton Hospital Maternity Department is the larger of the two maternity units in Cheshire East. Based in a semi rural area, the maternity department has a consultant and midwife-led unit providing care for expectant mothers from both Cheshire East and Cheshire West and Chester. The service was named as "Midwifery Service of the Year" 2015 by the Royal College of Midwives. Leighton offers aromatherapy, has three birthing pools and has been designed to ensure expectant mums have the best delivery experience possible.

Macclesfield Maternity Department is smaller and covers the north of the Cheshire East local authority area. The maternity department offers a team approach to midwifery care implemented in line with recommendations from the Better Births report.

Better Births - Improving outcomes of maternity services in England[1]

The ‘Better Births’ report is a vision for maternity services across England to become safer and more family friendly, where every woman has access to information to enable her to make decisions about her care and where she and her baby can access support that is centred around their individual needs and circumstances. The ‘Better Births’ report indicates that all hospitals and maternity units should be working towards implementing its recommendations for improved standards in maternity care.

Part of the National Maternity Review (NMR), ‘Better Births’ makes recommendations on improving maternity services which our regular engagement activity suggests are being implemented differently in certain areas of Cheshire East. For example, the NMR calls for the NHS to move to a caseload model of midwives working in small teams for continuity of care which has been implemented in Macclesfield Hospital. However, intelligence suggests that some new mums in Congleton who have experienced this team approach do not see this as a positive and thought it was a result of a capacity issue. Likewise, a mum we met on the ward in Macclesfield said she had not understood that this meant seeing different members of the team.

Nationally we are told that women can be offered real choice, but feedback from some new mums casts doubt over this. This is also against a backdrop of capacity issues for the NHS in particular hospital services.

[1] National Maternity review :Better Births https://www.england.nhs.uk/wp-content/uploads/2016/02/natioal-maternity-review-report.pdf

What we did

The aim of this project was to establish people's views and their experiences of maternity services in Cheshire East. The focus was to capture experiences from expectant and new mothers with the aim to inform and improve local maternity services based on their feedback.

In order to inform our research, we conducted a survey to find out more about what people thought about the maternity services they have experienced in Cheshire East. The design of the survey was based on input from members of the Healthwatch Cheshire East team and was produced to identify key areas for enquiry. We received 108 responses from our sample of new and expectant mothers.

Where did we conduct the survey?

To provide a consistent snapshot of Maternity services across Cheshire East, the survey was used in various locations across the local authority area from November 2017 to February 2018. The venues included attending church groups, mother and toddler groups, carers groups, libraries and GP surgeries to meet people.

There are two hospitals trusts within Cheshire East that cover the populations surrounding Crewe to the south and Macclesfield to the north. These were both visited as part of the project during February 2018.

- Leighton Hospital
- Macclesfield Hospital.

Who was involved in this survey?

Senior members of staff in both hospitals' maternity departments were interviewed as part of the project to gain a greater understanding of how services work and what can be expected. Their views were heard to establish what was available and how the service works. A sample of new mums and expectant mothers were spoken to in order to find out about experience from a patient's perspective.

This included a sample of women:

- Currently pregnant with their first child
- Pregnant and already have another child
- Not pregnant and have a child under 3.

Cheshire East covers a large geographical area stretching from Macclesfield in the North to Nantwich in the South. Responses came from a good cross section of the Cheshire East area. The most responses were from Crewe with 28 from the CW1 postcode, and 20 from Congleton.

A copy of the survey is included as an Appendix and total responses are included later in this report.

Summary of Findings

The main findings on maternity services around the care provided by Leighton and Macclesfield Hospital Maternity Units from the 108 sample responses to the survey are:

- Initial feedback from new mothers that we met on our engagement suggested that most of the mums we spoke to had a generally positive experience, however several commented that they did not feel they were listened to.
- Nearly one in three respondents told us that they would make improvements to the organisation of service. This covered areas such as better co-ordination and more ward support.
- Almost 33% of respondents raised no issues, suggesting they were happy with the maternity services they used.
- Continuity of care was also an area of concern, such as having the same midwife, health visitor or consultant but also when staff had different opinions and views; new mums felt staff should agree things before speaking to them.
- Two mums spoke of not having the birth they expected because a doctor had said they would not use a general anaesthetic and C-section and then they did. This is difficult to assess and there may have been complications with mum or baby resulting in a change in decision making or following procedure.
- Mothers told us the support for breastfeeding through 'Cherubs' had been good.
- An issue that caused concern in the Crewe area was around their babies having a tongue tie, and the wait for treatment resulting in some parents seeking private treatment.
- Breastfeeding is recognised as beneficial however several mums felt they were given no support if they decided to bottle feed.
- Some expectant mums felt additional scans would give them more confidence that everything was going well.
- Conversely a few mums felt that the scans or how the information from the scan was interpreted was poor and had impacted on decision making, for instance when the baby was thought to be small but at delivery was of average weight.
- Some of the mums we spoke to had experienced mental health problems. These varied from having depression before the pregnancy, having post-natal depression and one lady who had developed psychosis following delivery, each of these had varying views on the support they had received.
- The mums' views of health visitors seemed slightly mixed with some reported as good and some as bad.

Survey Results

There was a total of 108 respondents to the Maternity survey across all the areas covered by the two hospitals visited, providing a good sample of the population.

The following is a breakdown of the results received by question.

When was your child born?

The first question looked at when the child was born covering the period 2016-2018.

Dates covered by survey	Number of children born	Percentage (%)
Jan-July 2018	32	29.63
Aug-Dec 2017	23	21.30
Jan-July 2017	30	27.78
Aug-Dec 2016	8	7.41
Jan-July 2016	7	6.48
Pre-2016	8	7.41

Most responses cover the period January 2017 to July 2018, as this figure includes new mothers and mothers to be whom we met at the maternity units. The next largest group is January to July 2017, which means our responses are recent. Some of the older responses may represent different findings as some changes may have taken place in service delivery either in staffing or policy.

Where did you give birth?

This question identifies where the respondents from our sample gave birth.

Location	Respondents	Percentage (%)
Hospital	102	94.44
Home Birth	6	5.56
Other	0	0

- Our survey shows that most births in Cheshire East take place at hospital.
- From the six respondents who gave birth at home; three mums were first time mums, two of these wanted a home birth so they could have a water birth delivery using hypnobirthing and the other one didn't like hospitals. They were all supported very well throughout and were positive about the support they received through a commissioned service called One to One Midwives.
- Two of those who had home births did so as they wanted the hypnobirthing option and were having their second and third child. Another had a poor experience in hospital on her previous pregnancy and was much happier having her second baby at home.

From those who said they had a hospital birth; most of the births were in Leighton and Macclesfield Hospital. This is to be expected as all the people surveyed lived in Cheshire East. The particular hospital where our respondents gave birth was:

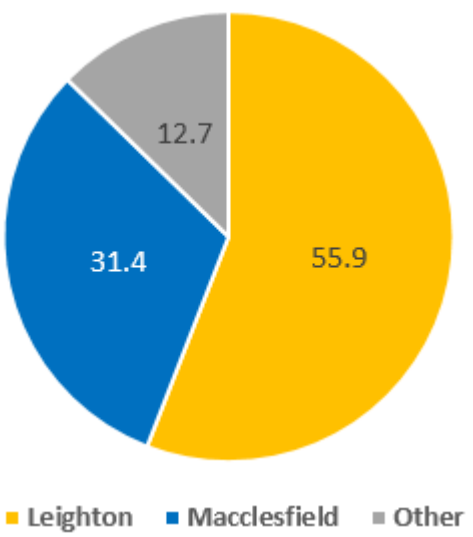
Hospital	How many births	Percentage %
Leighton	57	55.88
Macclesfield	32	31.37
Other	13	12.74

The locations where those who responded 'Other' gave birth are:

- St Marys Hospital, Manchester – 5 respondents
- Wythenshawe Hospital – 2 respondents
- North Staffordshire Hospital – 2 respondents
- Stepping Hill Hospital – 1 respondent
- Liverpool Women's Hospital – 1 respondent
- Kingston-upon-Thames – 1 respondent
- Lisbon, Portugal – 1 respondent.

Five mums had babies in St Marys Hospital in Manchester. This was due to either health reasons for themselves or those of the baby.

Where respondents gave birth by hospital (%)



Were you given a choice of where to give birth?

The 'Better Births' report recommends expectant mothers are given a choice on where to have their baby. We asked expectant and new mums whether they were given a choice, in order to find out what options were available to them.

The 107 who responded to this question in Cheshire East gave us the following information:

Choice	Respondents	Percentage %
Yes	74	69.16
No	33	30.84

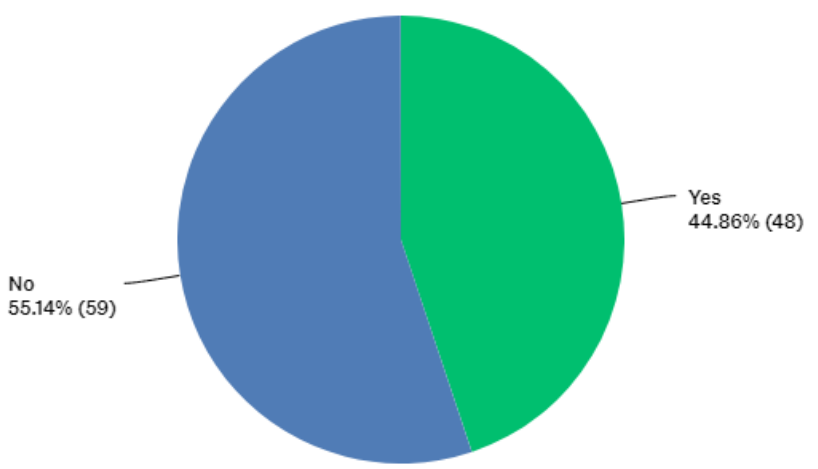
- 74 out of 107 who responded said they had been given a choice.
- 1 skipped/declined to answer.
- Out of the 74 who had been given a choice, the choice may have been limited, due to medical reasons for either the expectant mother or an unborn baby.
- Interpretation of choice may have been between a home birth and hospital or different hospitals.
- Of the 33 who were not given a choice, this may also been because of medical reasons for either the mother or the baby.
- When expectant mums first find out they are pregnant, the initial process is to contact their GP surgery where they can be provided with information on the choices available and how to contact them. Where expectant mums were given a choice, most stated their GP had provided them with this information.
- The expectation is that choice is available to all expectant mums. This assumption is borne out by 74 mums that we surveyed being given a choice.

Some of the mums who were not given a choice said:

- "I would like to give birth at home but was not given a choice" – the antenatal clinic where we met this respondent was for high risk pregnancies so this may indicate why no choice was given.
- "Just hospital".
- "No, my surgery in Middlewich just gave me a number for Leighton".
- "No, had a high heart rate so no home birth".

Was this the first time you have given birth?

We asked new and expectant mums if this was the first time they had given birth to establish if we had a good cross section of views about maternity services.



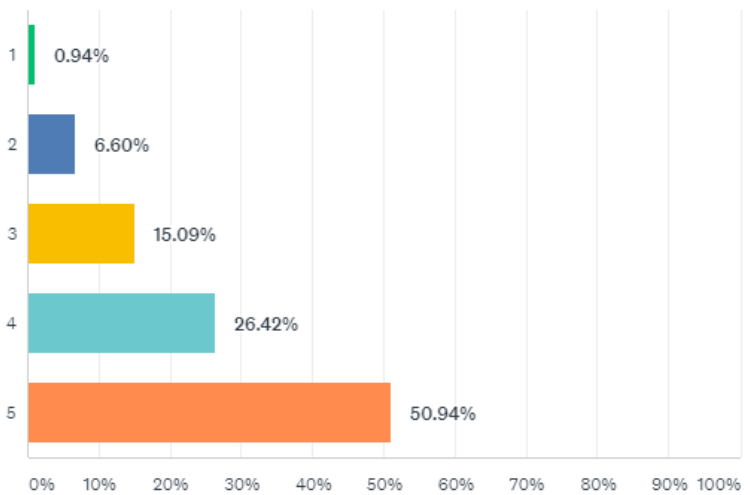
- Of the 108 people we spoke to the majority were second time mums.
- During our visits we found more mums to be were expecting their third or fourth baby in Crewe than in Macclesfield where mums were having a first or second child.

How would you rate the maternity service you received and why? 1-5 scale with 1 being poor and 5 being excellent

We wanted to know how new and expectant mums felt about the service they had received and what had made them choose their score.

Choice	Respondents	Percentage %
1 (Poor)	1	0.94
2	7	6.60
3	16	15.09
4	28	26.42
5 (Excellent)	54	50.94

- Most respondents rated their experience as 5 out of 5.
- Some respondents gave a high rating but were mixed in their additional comments where comments suggested care was great but communication was poor.
- Only one respondent rated the service as poor.



A sample of the comments we received from respondents are included below, with the location of the birth in brackets.

From the surveys where the score was 5 – comments were very positive:

- “Amazing” (Macclesfield Hospital)
- “Really good” (Leighton Hospital)
- “Midwife great” (Leighton Hospital)
- “Midwives really good” (Macclesfield Hospital)

From the surveys where the score was 4 there were particular comments about care:

- “Much better than last time having one midwife, previously several different ones.” (Leighton Hospital)
- “Considerate of my needs as a widow.” (Leighton Hospital)
- “Overall the service was excellent. Prior to the birth I attended as an emergency with reduced movement and they were great and reassured me, they offered to let me stay in hospital overnight if I was worried as I attended at midnight. They did a really good follow up and the next day I had a scan which confirmed baby was fine and the reason for reduced movement. The actual birth midwife was great and the actual birthing room was really nice, I was in the midwife led unit and was able to have a waterbirth. I was also able to go home the same day which was great. I only scored it 4 because of the service in the initial phone call.” (Leighton Hospital)

From the surveys where the score was 3 specific comments were around care received:

- “No continuity never same midwife. Gave a choice at Leighton but wanted a specialist hospital.” (St Marys Hospital, Manchester)
- “Planned C section I was very well looked after. They were very good at putting me at ease, my midwife stayed with me throughout.” (Leighton Hospital)
- “Stressful, said baby’s heart rate was high but didn’t explain what could be done.” (Macclesfield Hospital)
- “Decision making was poor, Doctor said they would not do a general anaesthetic and C section, but then changed his mind, Midwife said no then yes. Care after was amazing.” (Macclesfield Hospital)

From the surveys where the score was 2 mums were disappointed with the service:

- “Booking-in process not easy, had to travel to hospital from Northwich rather than go to GP. Have to ask about service, not all information given.” (Leighton Hospital)
- “Several issues, always have to wait about an hour even though you have an appointment.” (Leighton Hospital)
- “Poor care at Leighton had a hypo four weeks before delivery they refused to do a scan, which was really scary, didn’t know how the baby was. Nobody asked or checked why delivery was due to be in Manchester as I’m type 1 diabetes, born using a pump to control insulin.” (Leighton Hospital)
- “Midwife didn’t listen when I said baby was coming, they sent me home, one hour later I returned and the baby was born.” (Leighton Hospital)
- “Had 20-week scan and community midwife offered no support or advice when it showed a low placenta but I was not offered another scan. Changed to 121 who were able to get another scan done.” (Home Birth)
- “Midwife on ward was poor, poor care through lack of attention, had a C section so couldn’t move but no help given to get in and out of bed.” (Leighton Hospital)

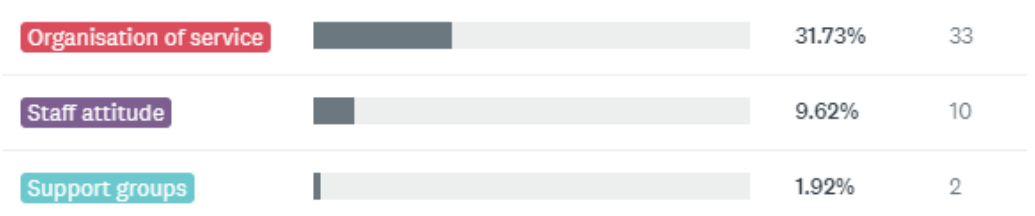
From the survey there was only one respondent who gave a score of 1 which is poor:

- “Didn't get diagnosed with gestational diabetes until 34 weeks, had scan which measured tummy, diet controlled. Had to have a C section and repeat the story to many different people.” (Leighton Hospital)

What would you like to change about maternity service provision?

Respondents were asked their views on what they would like to change about the maternity service they had received; we were interested to know if there were any themes or common issues.

The table below shows the broad themes that respondents from our sample told us they would like to change about maternity service provision:



The two highest areas for responses were Organisation of Service and No Issues, however some of the responses to organisation of service could also have fitted under staff attitude.

Nearly one in three respondents told us that they would make improvements to the organisation of the service. This covered areas such as short staffing, inaccessible community midwife and mixed responses like “the day midwife was a bit off but night midwife has been fantastic”.

A common theme that came out of the responses was consistency – for some new mums this meant consistency of care; for example, the same midwife or health visitor. A mum we spoke to in Crewe told us she had five different midwives. For others it was consistency of information; for example, where one midwife said one thing and another said something different, or had different opinions, some of this was around feeding the baby or pain relief.

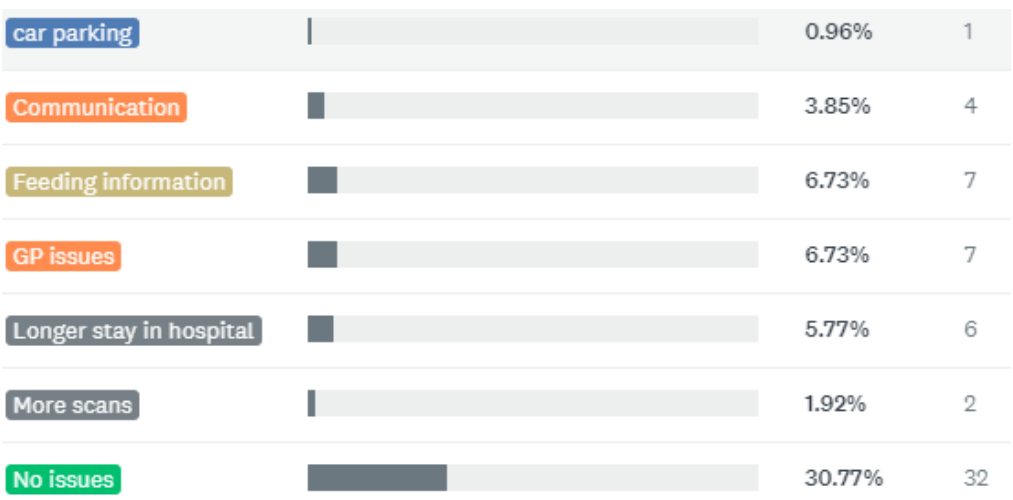
Listening to mum was another area that could be considered under both staff attitude and organisation of service and is open to interpretation. Some mums may have felt they were not being listened to but it may have been a policy or procedure that the staff member had to follow.

Over a quarter (30.77%) of mums surveyed responded with ‘No Issues’, which would suggest they were happy with the service they received.

One comment was made about support for mums with babies with downs syndrome, the mum told us it had felt very negative with more than one member of staff giving her the option to abort.

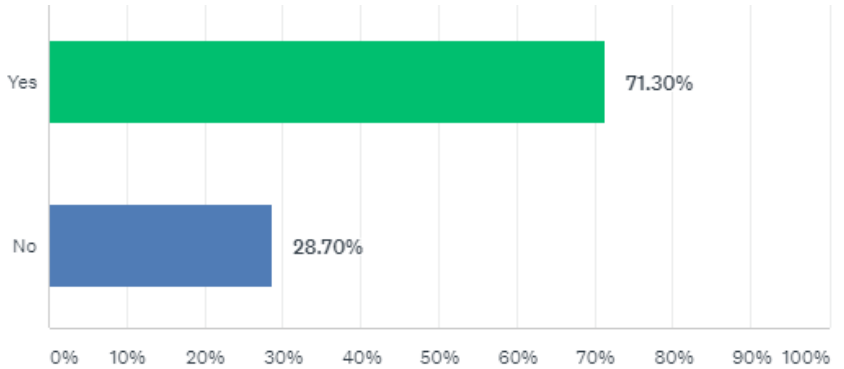
Only one person commented on parking and this was to suggest where there was good practice in another hospital out of area. One of the hospitals in Cheshire does offer a weekly rate, rather than a daily rate.

Car parking is often mentioned by people Healthwatch meet on engagement at hospitals, both the cost and availability of spaces. This may not have been an issue for maternity visitors as the prospect of a new baby may seem more important than where to park.



Did you access any ante/or post natal support?

We asked respondents whether they accessed any ante/or post natal support and to give us examples, this was to identify what support was available and how well it was used.



The table shows that most of the respondents did access either ante or post-natal support.

- Most expectant mums did access either ante/post-natal support.
- Most first-time mums accessed ante-natal support including parenting classes.
- Second time mums did not access ante-natal support but did post-natally, usually if they were having problems with feeding or were concerned about the weight of the baby. When we asked second time mums why they did not access the ante-natal support they said they had more confidence second time around.
- Of the 28.7% that said no, most were second time mums and said they would ask the health visitor if they needed any information.
- A mum we met who was being supported by 'Home Start' was very positive about the support she had had and said she had found this service invaluable.
- Another mum who said she had suffered with anxiety was very pleased with the support from 'Maternity Plus'.
- Some of the mums we met had used One-to-one midwives to provide continuity and support both antenatally and postnatally.
- Of the mums we spoke to who had previously had mental health issues, or experienced difficulties around their mental health either after or during pregnancy the majority were pleased with the additional support they received.

Conclusion

Experience of maternity services in Cheshire East

Healthwatch Cheshire East's sample study into people's experiences of maternity services in Cheshire East found that on the whole most of the people we spoke to had a good experience. In total, almost a third of respondents raised no issues with the service they received and we heard lots of positive feedback from people, suggesting they were happy with the maternity services they used. There were though some areas where people thought things could be improved.

Consistency and communication

Nearly one in three respondents told us that they would make improvements to the organisation of services, covering areas such as better co-ordination and more ward support. For example, one mum said "she was repeatedly asked the same question by different members of staff"; she felt this wasted time and needed better co ordination. However, senior staff at the hospital explained to us that they use repeat questioning as a tool to check the mother is ok. So, in this instance, better communication with patients could minimise misunderstanding.

A common theme that came out of the responses was that of consistency in service. For some new mums this meant consistency of care; for example, the same midwife or health visitor. A mum we spoke to in Crewe told us she had five different midwives during one pregnancy. This may have been due to staff shortages, but the key issue raised by one respondent was that no one had explained why, and this made them anxious.

At Macclesfield a team approach is taken and people see different members of the team, but some mums we met on the delivery ward were under the impression they would see the same midwife throughout. The mums' views of health visitors seemed vary slightly depending on whether they had a positive or negative experience, and some only used them for specific help.

There was a mixed response to the hospital stay, some new and first-time mums felt they should stay in longer and in one case had paid for an additional night to gain confidence, whilst two second time mums wanted to go home as soon as possible.

For others consistency of information was an issue. For example, it was felt that some midwives contradicted each other talking about feeding the baby or pain relief. Several people commented that they did not feel they were listened to by maternity staff. It is recognised that some changes may happen in labour requiring different treatment to that planned, but again it is how this is explained to the expectant mum. It appears that the points raised in the Better Births document around greater dialogue are not being effectively translated into the maternity service provided in Cheshire East.

Feeding

Only seven mums mentioned feeding as something they would change about maternity care but it was also an issue raised at groups where we met new mums. Nationally, breastfeeding is recognised as beneficial and there is an emphasis on the promotion of it, with hospitals having to meet targets on take up. Mums told us that sometimes they felt pushed into it and others who were unable to breastfeed felt there was no support for bottle feeding and no advice. One mum told us she had found it hard to try and breastfeed as she had had a caesarean and it was painful to bend down and pick up the baby. If mums are to be given real choice as the Better Births document recommends this should include support with the choice of feeding. For those that did choose breastfeeding, feedback on the Cherubs service was very positive.

Tongue Tie was something that caused concern to new mums we spoke to and a large proportion of babies seemed to be identified to have this. Both hospitals agree that this becomes an issue if there is a problem with feeding. However, where health visitors picked this up as an issue mums had to travel to have their babies treated out of area at Stepping Hill, Chester or Altrincham, either on the NHS or privately. During the survey we found that Macclesfield now has a tongue tie practitioner who is able to identify and treat babies.

Choice

Some of the mums we spoke to about choice regarding where to give birth were not clear what this meant, most thought it was simply a choice between hospital or home birth. Some wanted home births to experience a water birth and were unaware that both Cheshire East hospitals provide this. For the respondents we spoke to who had chosen this option it was mainly because they did not want to be in hospital and/or had other children at home.

GP Practices played a pivotal role in the choice over where to give birth for the women whom we spoke. Most had called their local GP Practice and been given a number for the community midwife. However, on further investigation they do not speak to the GP, but more often the receptionist, who may or may not know all the options on offer. At a GP Practice in the south of Cheshire East, a member of the Practice staff said she would only offer the local community midwife to new mothers as they were the best. This removes the choice for expectant mums and is something commissioners should consider.

There are limitations with choice, some of the more vulnerable expectant mums' choice might be limited by transport issues and cost. Going forward this could be resolved if more local options become available, rather than just hospital settings.

Scans

Some expectant mums felt additional scans would give them more assurance that everything was going well. One mum told us she had not felt the baby move and was concerned so rang the hospital but they would not see her. She was using One to one Midwives who supported her in getting the scan, which thankfully showed the baby was fine.

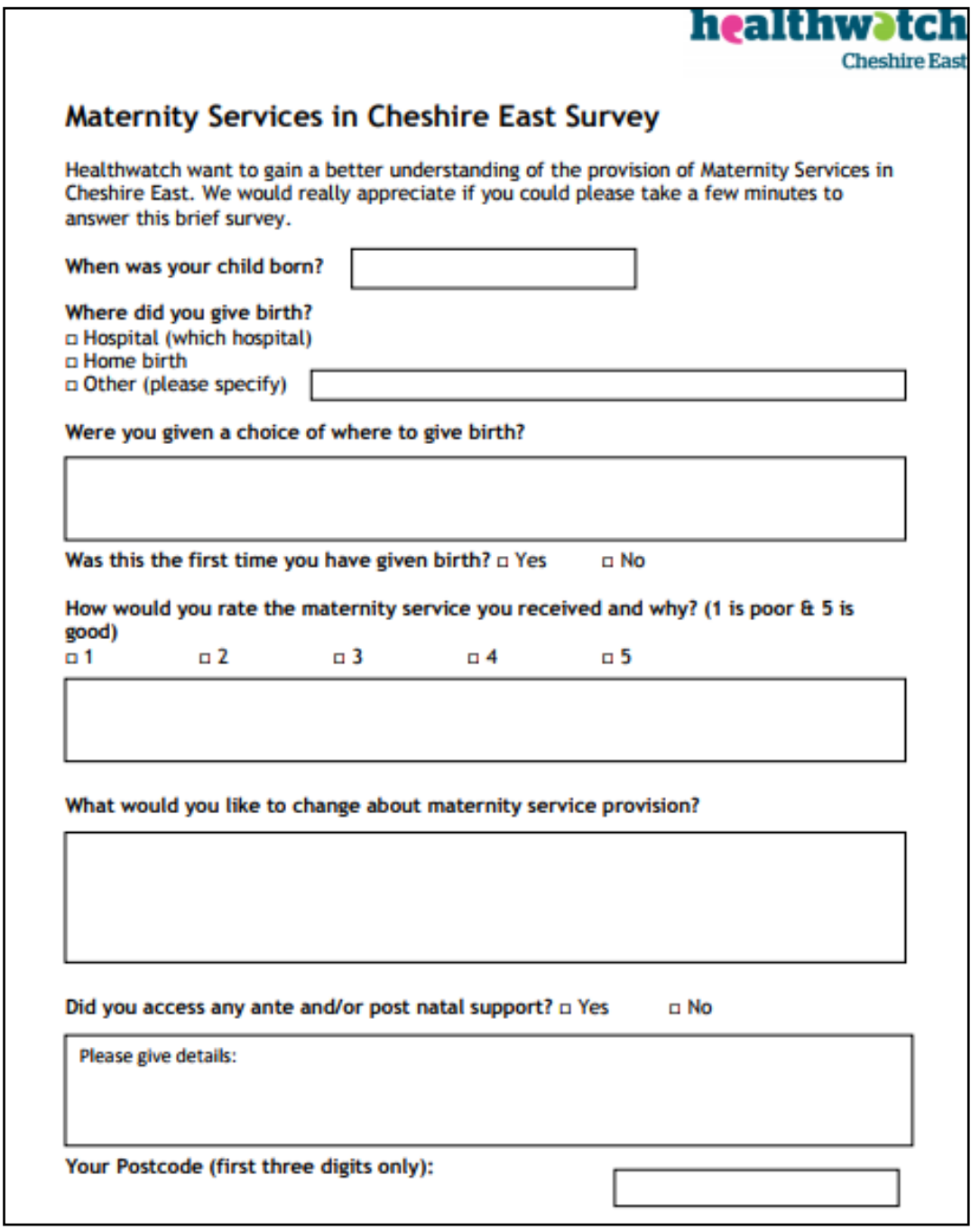
Conversely a few mums felt that the scans or how the information from the scan was interpreted was poor and had impacted on decision making. For instance, on one occasion the baby was thought to be small but at delivery was of average weight. This misinformation creates anxiety in expectant mums; particularly where there is concern the baby is small. We met mums who had delivered their baby early as the baby was measuring as large but when born was of average size. Likewise, one mum was monitored as the baby was deemed to be small, but at birth the baby was also of average weight.

Overall

Both hospitals provide a good service and have introduced different elements of the Better Births recommendations. As both hospitals implement more of those recommended improvements, it would be useful to do an update of this survey to find out which have been implemented and what impact these changes have had on the views of expectant and new mums. A recommendation for the future would be that the two hospitals work together to share good practice and learn from each other.

Appendices

Survey Questions



healthwatch
Cheshire East

Maternity Services in Cheshire East Survey

Healthwatch want to gain a better understanding of the provision of Maternity Services in Cheshire East. We would really appreciate if you could please take a few minutes to answer this brief survey.

When was your child born?

Where did you give birth?
□ Hospital (which hospital)
□ Home birth
□ Other (please specify)

Were you given a choice of where to give birth?

Was this the first time you have given birth? □ Yes □ No

How would you rate the maternity service you received and why? (1 is poor & 5 is good)
□ 1 □ 2 □ 3 □ 4 □ 5

What would you like to change about maternity service provision?

Did you access any ante and/or post natal support? □ Yes □ No

Please give details:

Your Postcode (first three digits only):

Leighton Hospital Maternity Department Enter and View Report

Healthwatch Cheshire Enter and View Report	
Enter and View Visit to	**Maternity Department** **Leighton Hospital, Leighton, Crewe**
Date and Time	**5 February 2018** **10am-12noon**
Authorised Representatives	**Jackie Lewis and Ros Haynes**
Staff Present	**Natasha King, Matron**

Background

Healthwatch Cheshire CIC is the consumer champion for health and care services. It works as an umbrella organisation for Healthwatch Cheshire East and Healthwatch Cheshire West. We gather the views of local people and look at information about how well local services are performing. We then use that information to assist residents and communities to be listened to by the organisations that provide, fund and monitor services.

What is Enter & View?
Enter and View is part of the local Healthwatch Cheshire CIC programme. The Health and Social Care Act (2012) grants local Healthwatch representatives powers of entry, allowing them to observe service delivery and talk to service users, their families and carers on premises such as hospitals, care homes, dental surgeries and GP practices.

Purpose of the visit

As part of its workplan Healthwatch Cheshire CIC continues to work in monitoring healthcare provision across the area.

This work has the full support of health and local authority commissioners.

Throughout the year, we visit a number of establishments with the intention of observing settings from a family perspective and gathering feedback from service users, relatives and staff. This report is based on these observations and conversations.

Observations from the Visit

Based at Leighton a semi-rural area, the maternity department has a consultant led and midwife led unit providing care for expectant mothers across Cheshire East and West.

The service was named as "Midwifery Service of the Year" 2015 by the Royal College of Midwives in March 2015.

- Authorised representatives were impressed by the helpful and welcoming nature of staff who they met during their visit.
- The maternity unit was reasonably quiet during our visit but due to the nature of the service this can vary.
- At the time of our visit, the department was well staffed.
- One of the wards was undergoing some minor building work to change flooring and to convert curtained bays into more substantial partitioning to improve privacy.
- The midwifery service works closely with the community midwives.
- Antenatal clinics are provided for women who may need additional care or observation during pregnancy

One of the Labour Ward Rooms

Environment

External building condition

- The building is situated away from the main entrance with a separate car park.
- The building is of an old design with a flat roof
- Double doors lead to a long corridor to the main maternity wards

Internal Decoration, Cleanliness and Furnishings

- Internally the corridors were clean and well decorated
- There is clear signposting to the relevant wards
- A colour coding system is in place for people to follow – to direct them to appropriate departments
- Rooms with birthing pools in the midwife led unit had low lighting, aromatherapy and themed decoration to create a relaxing atmosphere

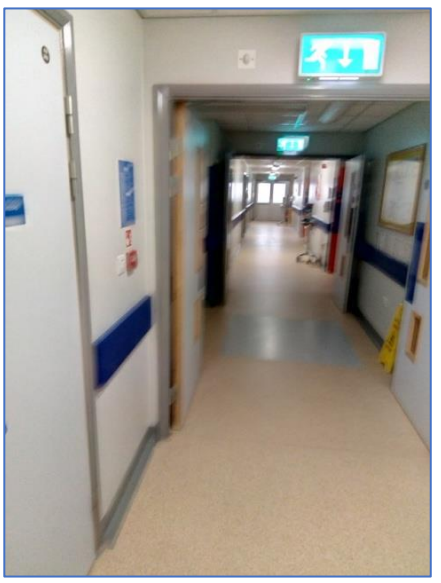
Outside the hospital

- Signs at the entrance to the hospital show the way in with a barrier entry to car parks
- Patients attending the maternity unit were seen smoking, despite a sign saying this was a smoke free site
- Litter bins were provided
- Landscaping around the hospital is plain
- Car parking can be difficult depending on the time of the visit

Access to the Maternity unit

- We were met by the Matron at Ward 20 who gave authorised representatives a tour of the two units
- The main labour ward was on the ground floor
- Hand sanitiser was available both outside the door and inside on entry

A helpful poster displays the number of staff on duty and a uniform colour code depicting the role of the staff



Access to one of the labour wards

Reception

As part of our tour we visited the antenatal clinic and spoke to some of the expectant mums. This clinic is for high risk expectant mums. The reception area was staffed and busy. A receptionist checks people in who wish to see the midwife or consultant, there were two cards up showing waiting times

Consultant waiting times were one hour, while the midwife waiting time was 30 minutes, patients we spoke to said they did not like the waiting times. Some of the mums we spoke to said there was often a wait at the clinic.

Waiting Rooms

- The waiting rooms for clinic, were plainly furnished
- There were plenty of seats available

- There was a corner of the room sectioned off where there were toys and books for children to use.
- Toilets on both sides of the reception desks had a baby changing area and when checked by authorised representatives were clean

Information boards/leaflets

- Posters were displayed throughout the room with health-related information
- There were health leaflets on small tables for patients to read
- A small table in the corner had greeting cards and knitted items for sale
- TV screens reminding expectant mums of the benefits of breastfeeding

Patient Contact

The patients we spoke to on the wards and in the antenatal clinic said;

- ***"Brilliant came into hospital on Friday for gallstones and had the baby was delivered."***
- ***"The Parenting journey provided by Cheshire East council was really good."***
- ***"Husband said his experience has been great, kept informed."***
- ***"A long way to come to the clinic, then you have to wait so long."***
- ***"Would have liked to have given birth at home but wasn't given a chance."***

On our visit in the midwife led unit we saw two large boards filled with thank you cards from grateful patients.

Staffing

Communication with the matron

We were given a warm welcome by the matron Natasha King who showed us around the wards and answered our questions. She explained that during our visit some minor building work was being done to improve the appearance, the work was to include new flooring and some privacy screens in one of the wards, these works would enhance the experience for new mums.

During the summer of 2017 the CQC carried out its annual maternity patient survey; 144 patients responded at Mid Cheshire Hospitals NHS Foundation Trust (Leighton)

The results were;

Labour and birth 9.0/10

Staff during labour and birth 8.6/10 – these are about the same compared to other trusts.

However, Care in hospital after the birth 8.2/10 is better compared to other trusts.

The matron told us the department is fully staffed and there is a low turnover.

Volunteers are very visible on the ward and support staff in a variety of tasks. Several college and university students volunteer to get an opportunity to see what it is like working on a busy maternity ward. The volunteer roles include making tea, helping to make beds etc.

One of the volunteers we met on the ward was on her gap year so was volunteering weekly she said, ***"Everyone is really lovely and I enjoy coming here."***

Visiting Times

Visiting times are fairly open, to allow friends and relatives access at convenient times.
The website states the times are 10.00am-10.00pm.

Service and Organisation

The Mid Cheshire Hospitals NHS Foundation Trust (Leighton) website has a section for the maternity department and states, ***"Our aim is to be sensitive to your physical and emotional needs and to be flexible in our care so that your individual wishes are met."***

The matron told us the staff are keen to ensure the highest standard of care is on offer.

In the consultant led unit, used for high risk deliveries, staff rotas were clearly visible. Staffing is not usually an issue, there is a good escalation policy in place which means that if there is a shortage there is a process for ringing around the staff that are off duty and asking them to cover, for this they received a bonus at an agreed rate. This also means they do not have to rely on bank staff who may not know the hospital.

The midwifery led unit is low risk. It has three rooms all with birthing pools, ensuites and the option of aromatherapy, this section has low lighting and gives a calm feeling when you enter.

A pretty wall mural removes the clinical aspect of one of the labour rooms

Information on being a new parent decorates this room where they can relax away from the ward

A room for couples to wait while in the early stages of labour

A team of community midwives provide antenatal and postnatal care for women in the local area in children's centres and GP practices.

For expectant mums who need additional support eg for anxiety or other mental health issues there is maternity plus, this is a service provided by the community midwives who work closely with the new mum both before and after delivery.

On a visit to a Nantwich health centre a member of Healthwatch met a new mum who had been supported by maternity plus, she told us, ***"They were really supportive and helped me a lot."***

In the case of mums that are high risk, either due to a previous pregnancy, a problem with the baby or mum has medical issues, an antenatal clinic is provided at the hospital.

Some expectant mums may have used the 121-maternity service, they receive ante natal and post-natal care through this service but do not come into the hospital to deliver the baby.

There is a process in place for patients and their partners where English is not their first language. Translators can be called upon if necessary.

Expectant mums are offered a personal maternity care bundle; this includes parent education classes, explaining what to expect in delivery and becoming a parent.
Gentle birthing; options of water birth, information on pain relief.
Advice on breastfeeding, this is provided by Cherubs; a breastfeeding support group, who can help new mums continue breastfeeding at home.

Parking

- There is car parking at the front of the maternity building, at the time of our visit it was very busy, there were however spaces at the rear of the building. Payment is by cash.

Suggestions for improvement

- The new improvements to the ward we visited will be a welcome addition giving more privacy for new mums.

Feedback from Provider of Service

At time of publication no feedback received.

Macclesfield Hospital Maternity Department Enter and View Report

Healthwatch Cheshire East Enter and View Report	
Enter and View Visit to	**Maternity Department Macclesfield Hospital Victoria Road Macclesfield**
Date and Time	**7 February 2018 10am-12noon**
Authorised Representatives	**Jackie Lewis and Ros Haynes**
Staff Present	**Diane Tinker - Matron Catherine Allbright Patient Experience Officer escorted representatives to the Unit (not present during visit)**

Background

Healthwatch Cheshire CIC is the consumer champion for health and care services. It works as an umbrella organisation for Healthwatch Cheshire East and Healthwatch Cheshire West. We gather the views of local people and look at information about how well local services are performing. We then use that information to assist residents and communities to be listened to by the organisations that provide, fund and monitor services.

What is Enter & View?
Enter and View is part of the local Healthwatch Cheshire CIC programme. The Health and Social Care Act (2012) grants local Healthwatch representatives powers of entry, allowing them to observe service delivery and talk to service users, their families and carers on premises such as hospitals, care homes, dental surgeries and GP practices.

Purpose of the visit

As part of its workplan Healthwatch Cheshire CIC continues to work in monitoring care provision across the area.

This work has the full support of health and local authority commissioners.

Throughout the year, we visit a number of establishments with the intention of observing settings from a family perspective and gathering feedback from service users, relatives and staff. This report is based on these observations and conversations.

Observations from the Visit

- Authorised Representatives were impressed by the helpful and welcoming nature of staff, who took the time to speak to us.
- There was an atmosphere of calmness, control and professionalism.
- When we visited the maternity **department,** it was reasonably quiet but due to the nature of the service this can vary considerably.
- At the time of our visit, the department appeared to be well staffed.
- The department was very clean and well decorated.
- A small friendly unit that prides itself on personal care for its patients

Environment

The maternity department is on the first floor of the hospital, approached by stairs or the lift. As you enter there is a sink and hand sanitiser with a notice about visiting hours. Relatives are encouraged to keep to the visiting hours, however there are exceptions for partners, where visiting is fairly open.

Immediately on the left and right are staff offices and a new staff room, the Matron told us this allows staff to be away from the ward and has freed up a room for parents to use in the neo natal ward. By having all staff and management based in the department it allows them to be visible and accessible.

It is apparent that this department is well looked after, the Matron informed us that the handyman spends two days a month maintaining it. The decoration is very good, giving a pleasant ambience for patients and relatives.

There are clear notice boards for patients and relatives, one has the names and title of staff so this helps patients and relatives know who is who. Along the corridor the department divides into two with entrances into the labour ward and the neo natal ward.

The whole area was very calm and quiet at the time of our visit. A large poster states that there were 154 births in December, which we were informed is average. Two years ago numbers went down locally as part of a national trend, but have started to rise again.

All the wards were bright with plenty of storage. The main wards had curtains to separate the beds but there are additional private rooms and a side room which can be used if there is a stillbirth so that the mum can have privacy.

The neo natal ward is very open and light, it has room for 8 cots. The decor includes bright murals and small screen that provide privacy for parents when visiting their babies. A recent addition is a room for parents where they can relax, watch TV and make light refreshments. Reclining chairs in the ward would be a useful improvement to make it more comfortable for parents in particular for mothers when feeding. This is a level 2 Neonatal unit, babies who deliver under 31 weeks gestation or requiring ongoing Neonatal Intensive Care are transferred to tertiary centres. Mums-to-be who are

likely to deliver before 31 weeks are transferred to other maternity units within the region when possible.

There are two rooms with large baths/birthing pools available. Telemetry fetal monitoring is available to be used in the water and this provides new mums with options for their labour and birth. The rooms are all clean and bright. Toilets and showers were clean, with evidence of regular checks.

At the entrance to the ward a small sink and hand sanitiser is available to use before entering the wards.

A selection of framed posters provides information on maternity services

Staffing

The matron is very proud of the staff and the hard work they do, the Vision Statement for the Hospital Trust is; *To ensure our patients receive the best care in the right plac*e and she is pleased that her department is recognised with their recent achievement in the CQC annual survey. 90 patients responded to the survey and Macclesfield scores better compared to other trusts in each of the areas;

Labour and birth 9.5/10

Staff during labour and birth 9.2/10

Care in hospital after the birth 8.2/10

We were told by the matron that they are awaiting the official feedback and rating from their recent CQC inspection, but initial verbal feedback had been that improvements have been made since the previous inspection.

The department is fully staffed. Recent national reports have identified an increased number of women being identified with having mental health issues during pregnancy as a result a new post has been created. This new post will work alongside the vulnerable women midwife who works with new mums who may be vulnerable either through age, domestic abuse or social problems; there is also a Named midwife for safeguarding. If there are staff shortages they use bank staff to support the establishment.

The Advanced neonatal practitioner is fully trained to provide a frenulotomy (tongue tie) service. This new service has been created and will provide a responsive local service for women with criteria for the procedure and remove the need for treatment at other hospitals. The main criteria is that there are feeding difficulties, treatment is for babies under 10 weeks old and the motto appears to be if baby is feeding well, leave well alone. The matron told us the service has been well received.

During our visit we spoke to the cleaner who said she had worked there for many years and said she enjoyed “being part of the team” This appears to be a testament to the good atmosphere on the ward.

The trust is very lucky to have a lot of volunteers and the maternity unit provides opportunities for a mixed age range of volunteers who support breastfeeding and admin tasks. They do not take work experience but have strong links with the University of Chester.

Visiting Times

Visiting times are limited for relatives and are displayed in several places, however for partners and siblings there is more flexibility. There was evidence of open visiting when a new dad asked if he could bring the baby's sibling in and the staff member on reception said anytime.

Service and Organisation

A new telephone service has sped up the process for booking in. We were told posters have been sent to local GP surgeries advertising the telephone number to use when expectant mums make their first appointment/booking in. This results in a quicker referral and appointment booking. It also makes the midwives the first point of contact and provides for early interventions to improve the health of prospective new mums and babies. It is recommended in the National Institute for Clinical Excellence (NICE) Ante-natal Care Guidelines that women have access to maternity services at 8 – 10 weeks of pregnancy to give them time to plan their pregnancy effectively and consider early screening options. This new system will support this.

Macclesfield offers a team midwifery approach as recommended in NHS England Better Births. This means a small team looks after expectant mums, you may also see the same midwife in the community as well as at delivery. One of the new mums we spoke to said she had thought at first this meant she would see the same midwife throughout and didn't realise it actually would be one of the team.

Twice in 2017 neonatal capacity became an issue, when this happens there is a protocol for staff to follow, and this includes ringing other hospitals to check bed availability.

One to One midwives operate in Vale Royal and South Cheshire but are not contracted to work at Macclesfield. Occasionally however, expectant mums use their service, in this instance Macclesfield staff deliver the baby and then the aftercare lies with the one to one midwifery service.

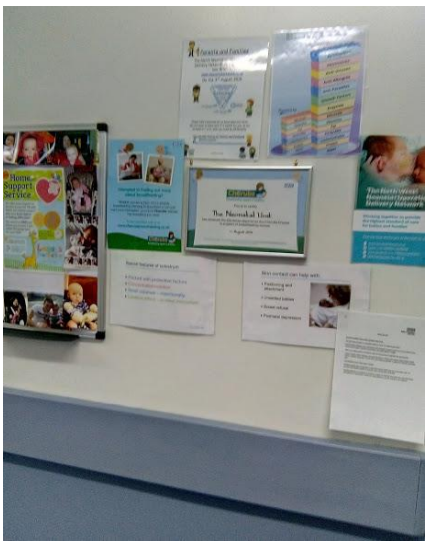
Macclesfield provide parent craft/education in the antenatal clinic. There are 6-7 sessions a week run by the parentcraft midwife and provide information for new parents on what to expect during pregnancy, the birth, options on delivery and preparing for baby.

Partners cannot usually stay overnight for privacy of others mums when in open wards however private rooms are available.

The department has a five year vision and action plan in line with the government's Better Births Report which aims to improve the outcomes for maternity services. The Saving babies care bundle has also been implemented which aims to reduce stillbirths by 50% by 2025, as part of this GAP (Growth Assessment Protocol) has been introduced, which produces an individualised growth charts, this provides more accurate information regarding fetal growth. This has resulted in an increase in the rate of induction of labours, however 89% of women who were induced progressed to a vaginal delivery.

The department promotes the Fit for Birth Clinic which supports expectant mum's health. This clinic is run by midwives for women who have been identified as having additional risks due to an increased BMI. It is aimed to provide advice and support on healthy eating, exercise and support throughout pregnancy. The clinic supports the fit for birth programme which is run at the local leisure centre to promote free access to the Gym, Swimming, Aquanatal Pilates and yoga.

An example room in the ward



Information for parents in the neonatal ward

Additional facilities

Macclesfield has a diverse range of expectant mums and as such can offer additional services via Enhanced NHS Midwifery care with different packages on offer. These include appointments in your home, hypnobirthing training for new mums and an Out of hours service can be provided plus a 4d scanning service.

The maternity unit has Baby friendly accreditation, this means the hospital supports breastfeeding and works closely with Cherubs to support new mums who have chosen to breastfeed. Cherubs can give telephone and group support when the mums leave hospital.

There is a large double room available for the use of mother and baby in the neo-natal ward if this is required for medical purposes. Additionally, expectant mums have the option to pay for a private room, currently £75 - £200 per night subject to availability.

Currently one of the wards is not in use as it has been allocated to ward 4 as part of a beds strategy. This does not affect the running of the wards as there appear to be plenty of beds.

Parking

There is car parking at the main and side entrance. Pay machines are available at both entrances and payment can be made by cash or card. There is also the option of paying on departure.

Feedback

- “More attentive staff this time around, different staffing from two and half years ago”
- “Been amazing, great support, feel like midwives are my friends”
- “Partner involved, he cut the cord”
- “Midwives great”

Suggestions for improvement

- Reclining chairs would be a good addition in the neo natal ward to help with comfort particularly during pregnancy.

Feedback from Provider of Service
Following a donation from Mulberry House and from charitable funds recliner chairs have already been ordered for each labour room, the bereavement room and 4 for the neonatal unit. These are expected to arrive week commencing 5th March 2018.