Chesterfield Royal Hospital NHS
NHS Foundation Trust

Royal College of Midwives Annual Conference 2010

"From Delivery Suite to Birth Centre".

Fran Gregory, Bo Hamilton-Cody
Matron's Maternity Services.

DRIVERS FOR CHANGE

- National publications
- Trust environment strategy
- Local Units
- User Surveys
- Changes
  - management team
  - Supervisors of Midwives

CONCEPTION – 12 months

- ✓ Basic requirements + wish list
- ✓ Co-located MLU
- ✓ Promote normality
- ✓ Positive birth experience
- ✓ Supporting women/safe environment
- Project Board
- Staff & user input/comments

1st Trimester

- Escalation Staffing policy/SOM on call
- Triage 24/7
- LSA & neighbouring units
- Press releases/regular updates for women/staff
- Limited timescale – financial penalty
- Whole team involvement (Estates, Communications, Portering)

RISK ASSESSMENTS

(active maternity service within building site!)

- Transfer time to operating department
- Reduced body temperature of neonates requiring NNU care
- Births elsewhere in maternity service
- ‘Whole unit’ co-ordination
- Potential closure of delivery suite
- Intermittent lack of basic utilities
- Noise/disruption

2nd Trimester

- Phase 1 (April 2009 –September 2009)

- Rooms
- MLC - alternative birth options – review of every birth not on delivery suite
- Weekly review with senior staff/HOM
- Progress 'tours'
- Governance standing item monthly
- Trust board bi-monthly

3rd trimester

- Phase 2 (September 2009 –December 2009)
  - Planned move/planned timeframe/unplanned activity - RA
  - Unfamiliar environment – familiarisation time, wider team
  - Back to basics – training/support

Delivery Suite to Birth Centre

Reception

STOP NOW
and CLEAN
YOUR HANDS

BIRTH (CENTRE)

- Safe Arrival
  - Perceived anxieties unfounded – no redirected patients, safe births on ANC, ward area, closed only 90 mins/9 months
  - Increased staff confidence
  - Cohesive Team working
  - Enthusiasm/positivity
  - Change management works!!

Fit for purpose equipment, meaningful midwife-led care.

Garden area for use by staff and labouring women.

Planning and preparation prevents poor performance

- Realistic strategies in response to RA/concerns - flexible
- Strong leadership
- Effective communication
- Positive profile – Directorate/Trust/National
- Whole ‘team’ input
- Belief & trust that it would work!