

Preston Birth Centre

20th March 2024

10.00 am to 12.00 pm



Disclaimer: This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and patients who met members of the Enter and View team on that date.

Contact Details

Address

Preston Birth Centre
Sharoe Green Unit
Royal Preston Hospital
Sharoe Green Lane
Fulwood
Preston
PR2 9HT

Point of contact:

Lucy Gilmour Team Leader/Manager of Preston Birth Centre
Laura Thorpe Matron for Midwifery Led Services

Date and Time of our Visit:

Date - 20th March 2024
Time – 10.00am to 12.00pm

Healthwatch Lancashire Authorised Representatives:

Louise Dewhurst - Engagement Officer
Emmy Walmsley - Senior Engagement Officer
Lynn Yates - Healthwatch Volunteer

Introduction

Healthwatch Lancashire is the independent public voice for health and social care in Lancashire and exists to make services work for the people who use them. We believe that the best way to do this is by providing the people of Lancashire with opportunities to share their views and experiences.

Healthwatch Lancashire has statutory powers to listen, act, challenge and gather feedback to improve local services and promote excellence throughout the NHS and social care services.

To help achieve this Healthwatch have a statutory power to 'Enter and View' health and social care services that are publicly funded. The purpose of an Enter and View is to listen to people who access those services and observe service delivery.

Following the Enter and View visit a report is compiled identifying aspects of good practice within the service visited along with any recommendations for any possible areas of improvement.

As we are an independent organisation, we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the service provider providing an opportunity to respond to any recommendations and comments before being published on the Healthwatch Lancashire website at:

www.healthwatchlancashire.co.uk

The report is available to members of the public along with the Care Quality Commission (CQC), Healthwatch England and any other relevant organisations. Where appropriate Healthwatch Lancashire may arrange a revisit to monitor the progress of improvements and celebrate any further successes.

General Information

Badger Notes

Throughout this report there is mention of the Badger Notes app. This app allows people to view their maternity, child or neonatal records in real time.

[Badger Notes - Access your healthcare records](#)

Acknowledgements

Healthwatch Lancashire would like to thank patients, relatives, staff and management, for making us feel welcome and for taking the time to speak to us during the visit.

What did we do?

Healthwatch Lancashire Enter and View Representatives made an announced visit to Preston Birth Centre on **20th March 2024** and received feedback from:



Pre-visit research

Prior to the visit, Healthwatch Lancashire representatives contacted a member of the management team to ask about the facilities, services offers and how women and families are supported.

Healthwatch Lancashire representatives also visited the website for the site to review information available to women and families about the Preston Birth Centre.

One to one discussions with patients and their relatives

During the visit, Healthwatch Lancashire representatives spoke with patients and their relatives about their experience of the service, and the care and treatment delivered by the staff at the Preston Birth Centre

Discussions with members of staff

Healthwatch Lancashire Representatives spoke with members of staff about their experiences of delivering services to patients. Questions centred around support for patients, celebrating good practice and any improvements staff felt could be made at the Preston Birth Centre.

Observations

Along with viewing the available facilities, observations were made throughout the visit. This included patient and staff interactions, accessibility measures in place throughout the Preston Birth Centre and the condition and cleanliness of the facilities.

Summary

Healthwatch Lancashire representatives made an announced visit to the Preston Birth Centre on the 20th March 2024.

During the visit, Healthwatch representatives were provided a tour of the Birth Centre and the facilities. This included the reception area, staff room, kitchen, triage assessment room, midwives' office, a postnatal room, birthing room, emergency equipment area with resuscitation equipment for mothers and babies, dirty utility, clean utility, and toilets.



At the time of our visit the following staff were working in the department:

- **2** Midwives
- **1** Support Worker
- **2** Student Midwives
- One of the Midwives and one Student Midwife had been relocated to the delivery suite.

There was one patient occupying one of the postnatal rooms, this person had given birth to their baby the day before and was waiting to be discharged.

A number of people present at the birth centre, were attending an out of area clinic that is held there three times a week.

Healthwatch Lancashire representatives viewed the community midwife's office and witnessed a midwife on the phone to a patient and the liaison officer who was making appointments with patients.

The feedback heard from the patient staying at the Birth Centre praised the quality of care and attentiveness of staff.

Feedback from members of staff complimented the level of support offered by the team leader of the birth centre and the support for well-being and mental was good.

Service Overview

Location and public access



Preston Birth Centre is located on the first floor of the Sharoe Green Unit within Royal Preston Hospital. The Sharoe Green Unit is an alongside unit with an access corridor to the main Royal Preston Hospital.

There is access to public transport, with bus stops located at the front of the hospital. The car park has a number of disabled spaces and there is step free access to the front entrance of the Sharoe Green Unit.

The car park for patients is a distance from the unit, approximately 100 metres away and was full at the time of the visit. There is a drop off facility available directly outside the main entrance of the unit, the maximum stay for this area is 20 mins. There is a car park directly in front of the Sharoe Green Unit, however this is for staff only.

There are automatic doors to the entrance of the unit and signage to the various departments housed within the unit, such as the Antenatal Clinic, the Delivery Suite, and Birth Centre. There is a main reception desk in the entrance area and two lifts to the Preston Birth Centre.

There is a telecom system to the main entrance of the Preston Birth Centre, which is operated by a staff member. Located on the right-hand side of entrance is a hand sanitising station.



Services available



Lancashire Teaching Hospitals Foundation NHS Trust is only one of the three NHS Trusts that has been selected as a **'Beacon Site'** for their midwife-led birth centres by the Midwifery Unit Network (MUNet) a leading UK initiative committed to women having a positive birth experience and an optimal start in life for babies.

The top floor of the Sharoe Green Unit is where the delivery suite and a theatre are situated. The delivery suite is consultant-led unlike the Preston Birth centre which is midwifery-led.

People have the option of using the Midwifery-led Preston Birth Centre as their preferred place of birth, following risk assessments and discussions around individualised care planning with midwives. Staff explained that this option was discussed in antenatal appointments with midwives to help them make informed choices.

An out-of-area clinic runs antenatal appointments, three times a week within the Preston Birth Centre, the team leader present explained during the visit that they use one of the birthing rooms for this.

Aromatherapy oils can be applied during the labour process by a trained midwife. It was explained to Healthwatch Lancashire representatives that the team have submitted a bid for funding to run an Aromatherapy Clinic and to provide training for all the midwives in the use of aromatherapy oils. (See provider response).

Enter and View observations

General Access and Appearance

There are two lifts from the main reception in the Sharoe Green Unit to access the first floor where the Preston Birth Centre is situated.

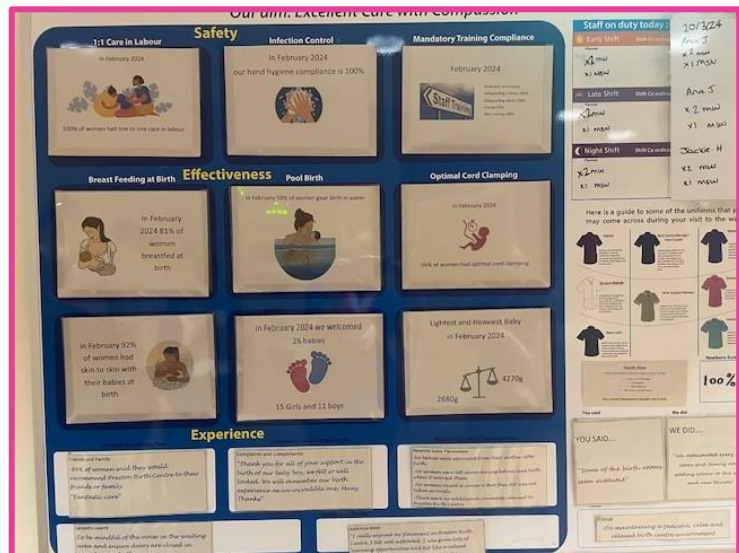
On exiting the lifts, the Preston Birth Centre is on the right-hand side. There is a large poster with contact details, complaint information and visitor information just outside the double doors that open into the Birth Centre. Once through the double doors there is a large purple sign with the words 'Preston Birth Centre.'

There is a telecom system to the main entrance of the Preston Birth Centre, this is operated by the staff on the Birth Centre. There is also a hand sanitiser station on the right-hand wall, outside the entrance of the Birth Centre. There is clear signage throughout the building.

Internal Environment and Waiting Areas

The Birth Centre was clean and tidy throughout with no clutter or equipment in communal areas. There was a seating area opposite the reception desk the waiting area, which was decorated with a floral mural. The lighting around the Reception desk was muted whilst the rest of the centre was well lit.

On the wall before the reception desk was a notice board containing recent statistics about how many babies have been born at the centre, what gender they were, comments from families and information on members of staff on duty that day. This display also illustrated the different colours of the various uniforms of staff working on the centre.



Healthwatch Lancashire representatives did not observe any MNVP Posters advertising the service and there were no leaflets in other languages or alternate formats seen throughout the visit. (Recommendation 1 & 2)

Information leaflets about the birth centre were displayed on the table in the waiting area. This included a leaflet on 'Birthplace Choices – 4 places of birth options at Lancashire Teaching Hospitals' and a magazine on maternity information also produced by Lancashire Teaching Hospitals.

There was a sofa area in the main reception area, above this was a positive affirmation sign containing the words **“Let choice whisper in your ear and love murmur in your heart. Be ready. Here comes life – Maya Angelou”**

On the reception desk was a box for patients to post their completed Preston Birth Centre Friends and Family forms. Next to this was a guestbook that patients and relatives had left comments in, and information leaflets entitled 'Your Postnatal Journey' produced by Lancashire Teaching Hospitals on the reception desk.

There was a hearing loop available on the reception desk. When staff members were asked about accommodating BSL Service Users, the team leader explained that hopefully services would have been put in place by staff during the antenatal period for the provision of a BSL interpreter and if the patient was visually impaired. They did mention that staff members have access to ipads that could be used to link to an interpreter but nothing specifically in place. (Please see provider response).

Next to the office was a Triage Assessment room with a bed and medical equipment in, the room was clean and free of clutter. This room had the addition of fairy lights which added to a relaxing atmosphere.

A disabled toilet was situated outside of the Triage Assessment Room, this was observed to be clear, however there were no baby changing facilities available. Displayed next to the toilet was a poster display on "Safe Sleeping" as it had recently been Safe Sleeping week.

Preston birthing centre has four Birthing rooms which contained a birthing pool, birthing ball, birthing stool, and a chest of drawers which contained emergency equipment. There was a pull-out double bed enclosed within a cupboard area and there was a toilet and shower within the room. All the birth rooms and postnatal rooms were named after a Lake District Area, Eskdale, Derwent, Coniston and Rydal. All rooms contained a standardised set of equipment to use whilst a mother was giving birth. It was explained that all delivery rooms in the Lancashire Teaching Hospitals Trust follow this model to support with staff working between different sites.



There were two postnatal rooms with king size beds to provide accommodation for partners to stay, containing an ensuite shower and toilet. Healthwatch Lancashire representatives saw that this room was clean and tidy.

A welcome pack of information literature was available in the birthing rooms for patients to use. These packs contained information about, staff roles in the centre and the facilities that they provided. A projector was available which gives patients a choice of different pictures and calming music available. Lighting was muted with a pink light in the centre of the room to give a calming atmosphere.

Additional Facilities

To the right of the main entrance, was a kitchen which was a shared space available for staff and patients. A staff room was located to the left of the main entrance, the team leader explained they had just recently been successful in winning a bid to refurbish/improve the staffroom.

The delivery suite can be accessed via lifts from the birth centre. Within in the unit there was a dedicated emergency area where there is an emergency transfer trolley and scoop stretcher. A baby resus trolley and adult resus trolley were also housed here alongside other medical emergency monitoring equipment.

Patient Interactions



Healthwatch Representatives observed several interactions between staff members, patients, and visitors to the unit. Staff members were observed to be friendly and polite during these interactions. At the time of the visit there were two patients on the unit. We were unable to speak to one of the patients as they had only recently given birth.

Staff were observed treating patients with dignity, Healthwatch Lancashire Representatives witnessed a midwife knocking on the door before entering one of the birth rooms and a conversation between staff and an outpatient, who they politely directed to the reception/waiting area of the unit.

Staff members were seen to be friendly and approachable throughout the visit; all staff were wearing uniforms and name badges. There was a calm atmosphere throughout the centre.

Patient Involvement

The Preston Birth Centre has a Facebook page, which contains information about birth centre and ways to look after newborn babies and gives patients a way of communicating with staff at the centre using comments. The team leader explained that one of the Band 5 Midwives is responsible for maintaining this page. The birth centre also has active Instagram site too. (Please see provider response)

A feedback box was situated on the reception desk where patients could leave completed Friends and Family Test forms.

There was also a Feedback/Guestbook where patients could also leave their comments.

Patient feedback

The Healthwatch Representative spoke with **one** patient, who had given birth the day before and had spent the night in the birth centre in one of the post-natal rooms.

The patient complimented the care that they received throughout their stay, complimenting the attitude of the staff and the quality of care they were given, **“Great, staff have been fantastic.”**

They explained that they had received all information in a way that was easy to understand. They commented that the staff explained all information clearly and they felt, **“able to get clarity if needed”** The patient commented that they felt informed about any decisions with their care throughout their time in labour and remaining stay on the birth centre.

The patient discussed how they had created a birth plan and described the importance of this to them. This was due to a prior poor-quality experience. They had chosen to use the midwifery-led birth centre as they hoped that the experience would be better due to the support on offer. They felt that their physical and mental wellbeing had been well supported by the birth centre staff.

Whilst they were happy with the care they had received, they did make the following comments around the Badger Notes App saying, **“Badger app is rubbish... bring back blue booklets”** They felt like the older method allowed staff to exercise greater flexibility than on the app. **“The Midwife could use her judgement, just a tick box on the badger app.”** It was mentioned that they felt the App didn't always work and that every time they used the app, they had to reload all their personal details such as name address etc which they found quite annoying, and the updates with information and appointments were not always correct. They also expressed how they felt it was very impersonal.

Staff feedback

Healthwatch spoke with **four** members of staff during the visit.

Do you feel supported to carry out person centred care?



All four members of staff spoken with felt that they were supported to carry out person centred care. They gave examples of how the training and support from management was helpful.

“Yes, training is very good.... the team leader is very approachable”.

One member of staff did say they felt supported to deliver person centred care and that they were happy with the support that they received from their team leader. They were happy with the support they received from their team leader, but they felt less supported when their team leader was not available.

“Team Leaders supportive with well-being and mental health.”

One member of staff explained that they had procedures to help maintain contact with patients and keep them informed about developments with their pregnancy.

“I feel the way we ring the patients to ensure they don't need to come into hospital if not needed.”

They mentioned that the ability to help patients directly and avoid unnecessary journeys was an aspect of their service that made things more personal.

Do you feel that there are enough staff available to meet the needs of your patients?

One member of staff said yes to this question. The three other members of staff spoken to mentioned concerns around staffing.

“On the birth centre it is ok. When other units struggle, staff are pulled to delivery suite, this often happens.”

The staff felt that there was some disparity in staffing with people being moved. They explained that it is not a nice feeling going to work expecting to be on the birth centre only to be relocated to another department at the beginning of their shift and it was not always clear the length of time they were going to be relocated for. (Recommendation 4)

What is currently working well?

All four members of staff complimented the approachability of the team leader. They mentioned that they felt able to raise concerns with team leaders and that they would be dealt with.

Two members of staff praised the way that the team help each other out particularly during times of emergencies, everyone helps each other out.

“Teamwork very good, if there is an emergency everyone keen to help each other”

They also commented that the morale in the birth centre was better than in other areas of the hospital as they felt they were listened to and supported to work as a team to deliver good quality care.

“The morale is better on this unit then elsewhere “

Are there any changes that could be made to improve the experience for families at your service?

One member of staff mentioned that they felt that staffing was an issue that they had experienced and was being worked on and the birth centre is now fully staffed.

Two members of staff mentioned that they felt the planning of staffing could be improved as there were issues how staff were utilised at the Birth Centre.

“When I’m here I do like it, but sometimes I don’t know where I’ll end up. A lot of Band 5’s think they are going to be on the birth centre but when they come in, they get moved. Moved to ward or delivery suite last minute”.

One member of staff explained that, was something that caused issues with the care that they delivered as the unit needed to be closed when there were no staff available. They gave examples of how staff from the Birth Centre would be taken away to deal with issues. Another member of staff shared this view as they felt that closing the centre and redeploying staff was meaning that mothers were not able to have their choices fulfilled. They wanted to explore a solution where the centre would close less as it meant mothers would have more choice where to give birth.

“Closing the birth centre less as women want it here and they can’t.”

What is your experience of working here?

Three members of staff expressed a positive experience of working on the Preston Birth Centre. When asked about their satisfaction with their role all four staff members spoken with expressed, they felt satisfied in their role.

One member of staff explained how they liked how innovative the staff are at the centre. They explained that they are hoping to train all the midwives in aromatherapy. This would be an extra service they could offer to the patients attending the unit which they felt was a positive step and would improve the experience for patients.

Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from patients and staff.

1. Display posters/information on the Maternity Neonatal and Voices Partnership (MNVP) in the postnatal rooms and throughout the unit.
2. Ensure that information and leaflets provided are accessible to people who may speak another language or need information in an easy-read format.
3. Provide information on PALS/Complaint procedures in each birth and postnatal room.
4. Consult with staff members about how they feel about moving between the Birth Centre and the Delivery Suite and evaluate their feedback.

Provider response

Recommendation	Action from provider	Timeframe	Comments
<p>Display posters/information on the Maternity Neonatal and Voices Partnership (MNVP) in the postnatal rooms and throughout the unit. Display Inclusive posters within the Birth Centre</p>	<p>Posters to be displayed in unit</p>	<p>31/05/2024</p>	
<p>Ensure that information and leaflets provided are accessible to people who may speak another language or need information in an easyread format.</p>	<p>No further action required</p>	<p>-</p>	<p>Leaflets are available to all women via their electronic patient app in Arabic, Polish, Portuguese, Sorani Kurdish, Tamil, Urdu, and Welsh. These are also printable should a midwife need to provide a paper copy. Stocks of paper leaflets have been removed so that the most up to date information can be provided as guidance changes with printable version should this be required.</p>

<p>Provide information on PALS/Complaint procedures in each birth and postnatal room.</p>	<p>No further action required</p>	<p>-</p>	<p>This is available in each room in the patient orientation information which is shared on admission or after birth. At the entrance of each area the welcome boards detail how to raise a concern and who is the lead midwife and matron.</p>
<p>Consult with staff members about how they feel about moving between the Birth Centre and the Delivery Suite and evaluate their feedback.</p>	<p>Recent listening events have taken place with independent facilitators to ensure that staff voices are heard and acted upon.</p> <p>Staff are provided with regular opportunities to provide feedback via meetings with their managers as part of the team, on a one-to-one basis, and during annual appraisal.</p> <p>There is a continuous monitoring of staffing models to ensure that safe staffing levels are maintained throughout the maternity services and</p>		<p>Staff are supported to orientate through the maternity service to become confident and competent to provide maternity care to all women in their chosen place of birth at the point of need. They may be needed by a woman on the delivery suite, birth centre or home environments.</p> <p>There are a limited number of core roles within maternity in</p>

	<p>recommendations for continuity of carer are implemented to enable the associated improved health outcomes for women and babies.</p> <p>In current national midwifery staffing crisis midwifery vacancies are monitored and advertised to minimise staffing gaps. Bank and agency are utilised to fill roster gaps where possible.</p>		<p>each area to provide expertise and advice and support staff within those areas. These are advertised so that each midwife has an equal opportunity to apply for these roles.</p>
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Any other comments

“Thank you for visiting the Preston birth centre, it was a valued experience for the staff and managers. Your independent review and feedback of our service is appreciated and will be used to make further improvements based on recommendations made.”

In addition to some points highlighted within the report Lancashire Teaching Hospitals Trust have provided some clarifying points to the following sections.

Page 6-

A bid has been submitted to provide additional aromatherapy training to more midwives so that an aromatherapy treatment can be offered to women whose pregnancy has past the baby’s due date to encourage labour to start.

Page 7 –

It is inaccurate to state there is nothing specifically in place for women who require a BSL interpreter. The member of staff interviewed may not have encountered any person who would require BSL. The Trust provides access to online and face to face BSL interpreters. These services can be booked via the intranet. This is being shared at the team meeting to increase midwifery staff awareness.

Page 9 – Patient involvement

The Facebook page is used as an additional media to convey information about services to women and families. It is not for communicating with staff. Women who wish to speak to a midwife should do so by telephone on one of the contact telephone numbers, such as triage which is available 24 hours for pregnancy concerns or the birth centre if they think their labour may have started. The Facebook page is managed by a number of midwives within the team and not one band 5 staff member.



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