



CARE WHILE PREGNANT

| WHAT WOMEN SAID ABOUT THEIR EXPERIENCE OF MATERNITY CARE | LISTENING, RESPONDING & IMPROVING | TIMESCALE |
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| <p>HEALTH INFORMATION: Access to health information about mental health during pregnancy needs to be improved.</p> | <p>Our Lady of Lourdes Hospital Drogheda (OLOLH) in partnership with the National Perinatal Mental Health Team is implementing a Mental Health Promotion Programme for women during pregnancy. This will:</p> | <p>Work commenced in 2018 and will be advanced throughout 2020-21</p> |
| | <p>1. Improve health information about mental health changes that occur during pregnancy for all women.</p> | |
| | <p>2. Provide access to perinatal mental health care services for women with additional needs. OLOLH forms part of the 'Hub and Spoke' service within the RCSI Group and Louth Meath Mental Health services.</p> | |
| | <p>3. Ensure that women have the opportunity to discuss any worries or concerns that they may have when engaging with services within OLOLH.</p> | |
| | <p>4. Promote antenatal education programmes including 'Real Birth Initiative'. In addition, implement the new Antenatal Education Standards which promote positive mental health.</p> | <p>Quarter 3 and 4</p> |
| | <p>5. Build the capacity of staff and managers in OLOLH to promote positive mental health during pregnancy and to signpost women to appropriate services when needed.</p> | <p>Ongoing</p> |
| | <p>6. In collaboration with our Health Education Institute, a level 9 'Certificate in Perinatal Mental Health' multi-disciplinary education programme, with 10 CEU credits, is available since 2019.</p> | <p>Ongoing</p> |
| | <p>7. A Perinatal Mental Health module for midwives, practice nurses and PHN's is available on HSEland.</p> | <p>Ongoing</p> |
| | <p>8. All women are assessed postnatally before discharge using the Edinburgh Postnatal Depression Score. A care pathway in collaboration with the Louth Meath Mental Health Service/RCSI/GP/PHN was introduced in 2017. This collaborative approach was shortlisted for a National Health Care Award in 2018.</p> | <p>Ongoing</p> |
| | <p>9. Music and relaxation therapy have recently been introduced to the antenatal ward for all in-patients.</p> | <p>Ongoing</p> |
| | <p>10. Initiatives from the 'Nurture Programme' including 'Talk to your Bump' have recently been rolled out within the unit.</p> | <p>Ongoing</p> |
| <p>11. The Perinatal Mental Health Support Midwife provides feedback on her service to the Clinical Governance Meetings twice yearly and discusses any Quality Improvement Initiatives.</p> | <p>Ongoing</p> | |
| | <p>WHAT THIS MEANS FOR WOMEN</p> | |
| | <ul style="list-style-type: none"> • All women when making their first booking appointment in maternity services will be asked about their mental health well-being. During this stage, if a woman is identified as requiring additional mental health support she is referred to the mental health support midwife. • All women will be provided with more accessible health information about the mental health changes that occur during pregnancy. New health information leaflets about mental health during a pregnancy have been developed and will be provided to women when they first engage with maternity services. • Women who require support for milder mental health problems or who have more complex health needs in pregnancy will be referred to a mental health support midwife who has been appointed as part of a specialist perinatal mental health team. • Women will be able to access specific perinatal mental health services through the mental health support midwife or the woman's GP if required. • A proactive campaign of support informing women that they can discuss any worries or concerns that they may have during their pregnancy when engaging with OLOLH will be promoted. • Community support groups are actively promoted to enable women and their partners to access social support networks in the community. • Women have access to staff that are fully informed of Perinatal Mental Health Services and can offer advice and support to all women accessing the services. | |



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| <p>HEALTH INFORMATION: Women wanted more health information about smoking and alcohol during pregnancy.</p> | <p>OLOLH is implementing quality improvement initiatives to increase the level of information that women receive about nutrition during pregnancy.</p> | |
| | <p>1. OLOLH are participating in a multi-centre research study on '10 Top Tips for a Healthy Weight' which includes a healthy diet.</p> | <p>Complete in 2021</p> |
| | <p>2. Highlight the 'Healthy Eating During Pregnancy' chapter of the 'My Child' booklet at all antenatal visits.</p> | <p>Quarter 4</p> |
| | <p>3. Implement the findings of the audit on Iron Supplementation which includes the documentation of discussions on diet prior to commencing of iron therapy.</p> | <p>Quarter 4</p> |
| | <p>4. Work in collaboration with the health promotion department to source further posters on healthy eating in pregnancy from Healthy Ireland.</p> | <p>Quarter 3</p> |
| | <p>5. Expand the 'Making Every Contact Count' include brief interventions on 'Unhealthy Eating'. To explore getting the 'Tips for Healthy Pregnancy', which includes healthy eating, as part of the current information video that plays in the waiting areas of the Maternity Out-Patients and Fetal Assessment Departments.</p> | <p>2021</p> |
| | <p>6. Increase the amount of 'Nutrition in Pregnancy' leaflets available in the clinical area</p> | <p>Quarter 4</p> |
| | <p>7. In the final draft stage of 'Tips for Managing Nausea and Vomiting in Pregnancy' information leaflet.</p> | <p>Quarter 3</p> |
| | <p>8. Locally developed 'Obesity in Pregnancy' information leaflet available.</p> | <p>Quarter 4</p> |
| | <p>9. The direct link with Dieticians for Women with diabetes in pregnancy. Extend this link to all women requiring dietetic input.</p> | <p>2021</p> |
| | <p>10. Inform women on admission that they have access to healthy snacks which are available in the designated areas of each ward.</p> | <p>Immediately</p> |
| | <p>WHAT THIS MEANS FOR WOMEN</p> | |
| | <ul style="list-style-type: none"> • Women will be provided with research-based information on healthy eating in pregnancy. • Women will be provided with written information about nutrition in pregnancy. • Women will be provided with standardised and consistent information. • Women will have access to a dietician when required. | |



CARE AFTER BIRTH

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| <p>DEBRIEFING: Women said that they would like the opportunity to discuss labour and birth afterwards.</p> | <p>OLOLH have implemented quality improvement initiatives to improve women’s experience of care after birth including:</p> <p>1. All women are given an opportunity to discuss their birth experience with their healthcare professional. This forms part of their postnatal discharge plan.</p> | <p>Work Commenced in 2019 and is ongoing</p> |
| | <p>2. As part of both our Midwifery-Led Unit and our new Early Transfer Home service, women are followed up in the community for 7 days postnatal and have a further opportunity to discuss their care.</p> | <p>Ongoing</p> |
| | <p>3. A retrospective healthcare record audit was carried out to establish the current level of debriefing offered. Following the results of the audit, a new debriefing tool was developed. This is completed by the healthcare provider responsible for the woman’s care. This is then filled in the woman’s healthcare record.</p> | <p>Re-audit due in Quarter 4</p> |
| | <p>4. A Birth Reflections Clinic is being established.</p> | <p>Quarter 4</p> |
| | <p>5. Where concerns are identified a follow-up appointment is offered as an outpatient.</p> | <p>Ongoing</p> |
| | <p>6. Promoting the role of all staff and their availability to address worries and concerns.</p> | |
| | <p>7. The policy on Open Disclosure has been implemented in the unit and training in the same is mandatory for all staff.</p> | <p>Quarter 4</p> |
| | <p>8. All staff work in collaboration with the Quality and Safety Department to ensure all complaints/concerns are dealt with promptly and any recommendations are implemented as appropriate.</p> | <p>Ongoing</p> |
| | <p>9. Compliments and complaints are discussed at Clinical Governance meetings.</p> | |
| | <p>10. Reunion classes provide an opportunity for women to discuss their pregnancy and birth.</p> | <p>Ongoing</p> |
| | <p>11. Maternity Quality Care Metrics provide an opportunity for women to discuss their pregnancy and birth and postnatal care through the monthly Patient Experience Survey.</p> | |
| | <p>12. YSYS leaflets are available in all clinical areas outlining the process for feedback.</p> | |
| | | <p>WHAT THIS MEANS FOR WOMEN</p> <ul style="list-style-type: none"> • A proactive campaign of Support, informing women that they can discuss any worries or concerns that they may have after the birth of their baby will be promoted, encouraging women to voice concerns and to ask questions that they may have about their labour and birth of their baby. • There will be documented evidence that the debriefing has been carried out. • Women will understand that their feedback makes a difference and that OLOLH is Listening, Responding and Improving Maternity Care services for Women, their babies and their families. |



SPECIALISED CARE

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| <p>EMOTIONAL SUPPORT: Women identified the need to have someone to talk to and to provide emotional support during this difficult time of their newborn baby being in the Neonatal care unit.</p> | <p>OLOLH is currently implementing quality improvement initiatives to address the emotional support needs of parents whilst their babies are in the neonatal unit. The following initiatives are planned or in place:</p> | |
| | <p>1. Health information is provided for all women and their partners about what they can expect and how to cope when their newborn baby is admitted to the Neonatal or Specialised Care Unit including a Parent Information Booklet. A Discharge Planning Information Pack is currently being developed.</p> | Ongoing |
| | <p>2. OLOLH has a care pathway developed for women whose babies are expected to be admitted to the NICU. This includes antenatal visits to the unit, meeting with the consultant paediatrician/neonatologist and the ANP.</p> | Quarter 4 |
| | <p>3. CMS in Perinatal Mental Health and Bereavement is available to support and counsel families. Pastoral Care services are available on request.</p> | Ongoing |
| | <p>4. NICU has a dedicated medical social worker to assist parents in the NICU during their stay as needed.</p> | |
| | <p>5. NICU also have the support of a Dietician, Physiotherapist and Speech and Language Therapists.</p> | |
| | <p>6. Reduced care parking rates are available for parents of babies in the NICU.</p> | |
| | <p>7. A new baby diary will be completed during the baby's time in the NICU.</p> | Quarter 3 |
| | <p>8. Social and community support networks are provided for families as appropriate including the Irish Neonatal Health Alliance, Irish Premature Babies Association and La Leche League.</p> | Quarter 3 |
| | <p>9. A proactive campaign of support, informing women that they can discuss any worries or concerns that they may have whilst their baby is in the neonatal unit will be promoted</p> | Ongoing |
| | <p>10. Parent's room available within the NICU to facilitate parents to stay overnight.</p> | |
| | <p>11. A parent's day room is available for use for feeding, expressing or relaxing.</p> | Quarter 4 |
| | <p>12. A meal voucher for OLOLH Dining Area is available for parents whose babies are in the NICU.</p> | Compete in 2021 |
| | <p>13. Feedback provided through parent satisfaction questionnaire.</p> | |
| | <p>14. Selected for participation in the RCPI Leadership and Quality in Healthcare course for a project on Buccal Colostrum.</p> | |
| <p>WHAT THIS MEANS FOR WOMEN</p> <ul style="list-style-type: none"> • Women will know where they can access emotional support during the difficult time when their new infant baby is in the NICU. • Women will have access to information about their babies care. • Babies will receive up to date, evidenced-based care support networks and community supports will be shared with all women and families as appropriate. | | |