

THE Productive Times

Issue 2: The Productive Ward and Maternity – Kingston Hospital NHS Trust

SPECIAL MATERNITY EDITION

IT WORKED FOR US SAYS HEAD OF MIDWIFERY PAGE 3

Interruptions drop by 50% per shift

“On the ward they call me the Oracle: they say if I don’t know it, it’s not worth knowing,” says ward receptionist Elena Vitolo at Kingston Hospital NHS Trust. Now she has a rival, a welcome one, the ward’s Patient Status at a Glance board.

The board is acronym-free and uses strong colours and easily recognisable indicators to provide all the information staff need, helping to reduce interruptions from 9 per hour to 4, equating to a 50% reduction per shift.

But this is only part of the story. The Worcester team is the Postnatal ward in the maternity unit at Kingston Hospital NHS Trust. It has two bedded areas with en suite facilities, 15 single

rooms with en suite and three bedded recovery areas. Women staying on this team appreciate the privacy, quiet and independence. The ‘Patient at a Glance’ board has also helped to reduce the number of interruptions they get while they are in hospital.

This board makes sure that staff go to the right mother each time, avoiding the inevitable glance around the door, only to discover you’ve disturbed the wrong mother.

As well as their own

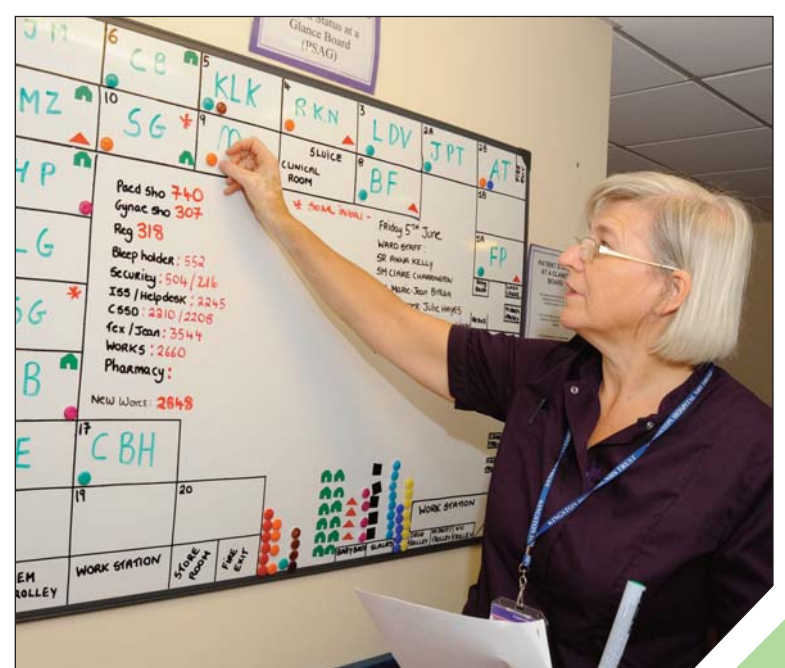
visitors, mothers and their babies will see a series of people during their stay, such as hearing screeners, photographers, ward staff, clinicians and anaesthetists. Most of these need to be directed to the right room, often by Elena. Now she can simply show them the board.

This means Elena can spend more time planning and preparing discharge packs for the women which means they go home without any avoidable delays.

The board undergoes constant refinement and the information can change as often as required. Working through the Patient Status at a Glance module helps staff identify what information needs to be included on each board.

Visitors to the ward can also get all the information they need. Photographer Julie Capon photographs mothers and babies: “It tells me everything I need to know.”

The unit has a quick turnover with as many as three women using one bed in 24 hours. Lynn Smith, head of midwifery explains: “most of the rooms are single and you can’t see into the room, so you have to open the door and look - which is not great from a dignity point of view. The board



helps reduce the need for us to do this.”

The next challenge now is to sustain the changes. Lead midwife Sue Ng said: “Putting things in place is not that difficult, but sustaining it is. We have rotational staff which can be a problem, but

we have started working on the other postnatal ward where the core staff don’t move around. I think any ward introducing The Productive Ward needs to have a clear vision of where they want to go and how they are going to get there.”

Home from home

Photographs on cupboards in rooms are providing a quick reference for women to find things ie, linen that they need. This has also helped staff to stock essential items, which has led to a reduction in interruptions. The transfers on the floor and pictures on the walls help staff to know where equipment should be stored and put away in the appropriate place after use.

Each room has a welcome folder to induct women to the ward, which is full of useful information such as where to park and where dads can go to get a meal. This helps mums, as well as visitors find their way around.

Housekeeper Julie Hayes said: "We keep sheets and blankets in the cupboards which is much easier if we

need to change them quickly. Special transfers have been added to the floor, showing everyone where bins and equipment should be stored.

Alongside the other work that has gone on to create a Well Organised Ward, it is also helping to release time for staff to spend with

mothers.

Team Leader Anna Kelly said: "When staff come on to the wards, they can see where everything is, they don't have to interrupt anyone to ask and they can give more time to the mums. That's what the staff like about The Productive Ward."



60 seconds with...
the 'oracle'



Ward receptionist Elena Vitolo is the unit's touchstone for information and the Patient Status at a Glance board has changed the way she works.

Elena Vitolo has worked as the ward receptionist on Worcester postnatal ward for the last 5 years and was previously a midwifery assistant for 12 years.

"This is the best change they have brought in," she says. "It was always the way it should have been run. As a care assistant I knew that something like this was needed.

"A wealth of information has been gathered and displayed for patients and staff to make it easier to find out what they need to know.

"Staff were concerned about the absence figures being included on the Knowing How We are Doing board. There were some people that were negative, but how can improving standards of care and helping us to enjoy our jobs be negative?"

What mothers say at Kingston Hospital NHS Trust

The real test of success comes in the mother's experience. Suzanne Bounds, and one-day-old baby Elizabeth, were enjoying the calm of the unit.

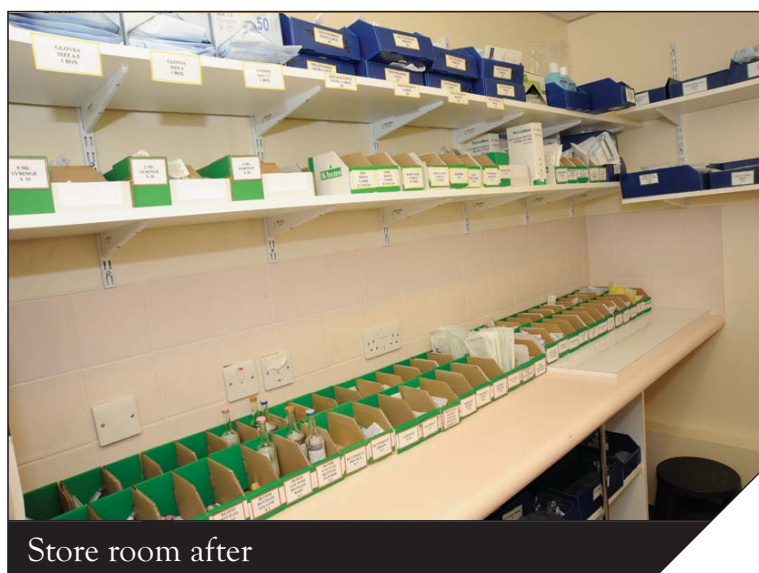
She said: "The experience here has been so much better than with my other child, I couldn't have wanted better. We are really well looked after and the room is fantastic. It's good to know where to get things when you have a crying baby and are in a hurry. I feel really independent, but at the touch of the remote control I can get someone. My partner has felt he could go and ask anything and everyone has been really helpful. There is a sense of calmness, even though it is such a busy unit."

Power of persuasion



It took six months, but the shelves finally arrived at Kingston Hospital's maternity ward.

Lead midwife Sue Ng says that 'It is important to get support from the other departments, such as the works department. It took lots of persuasion to get the shelves up in order to achieve our '2 bins system'. The '2 bins systems' enables us to control our stock level of stores for the ward and reduces wastage. This is an efficient and effective method for cost savings".



Food for thought

Whether new mums want to get their figures back, rest or are just unable to get up, housekeeper Julie Hayes is on hand to offer new mums the encouragement they need to get their meal.

Using the Meals module of The Productive Ward, the maternity ward at Kingston Hospital NHS Trust introduced new ways to

ensure women keep up their strength.

The Meals module helps staff identify mothers who need help feeding, using a red tray system to distinguish those patients who need assistance during meal times.

At Kingston the module has been adapted to suit their ward and their mothers' needs. At lunchtimes, Julie will assess each woman to ensure they are

given every chance and encouragement to eat.

She said: "Mums will be thinking of dieting but they need to eat, especially if they are breast feeding. I will knock on the door and see if they are able to get up and get their lunch. I will assess who needs help and get them whatever they want, it's all part of making sure no-one is missed out."

Too busy to buzz

It is being investigated whether volunteers can be recruited to help free up staff time on the maternity ward.

The unit's security doors require visitors to buzz at the door, before being allowed in. This practice helps ensure the safety of the women and babies on the ward, but is the source of numerous interruptions for staff as they care for their mothers. It can also mean visitors are left waiting outside the doors for some time if staff are not able to break off from their task to answer.

Now staff at Kingston Hospital NHS Trust's maternity unit is looking at how it can manage the system better.

Midwife Louise Ley said: "The buzzing door during visiting hours can take up quite a lot of time. We knew this, but the benefit of The Productive Ward programme is that it gives you the evidence that is key to changing practices."



Red means stop at Kingston Hospital NHS Trust!

Staff are donning green tabards with red writing during drugs rounds to reduce interruptions – and the risk of drug errors.

The scheme forms part of The Productive Ward's Medicines module, which aims to protect staff time for drug rounds.

Although drug rounds can be minimal on maternity units, Kingston Hospital's postnatal ward has found it is contributing to their successful prevention of interruptions, which they have reduced from 9 interruptions an hour to 4 interruptions an hour.

Team Leader Anna Kelly said: "The midwives love the green tabard – and interruptions have gone down. Even visitors to the ward who don't necessarily know what it means will not interrupt them."

In addition the ward is currently installing drug lockers within each of its rooms, to increase independence for women. The lockers can be used to store medication brought in from home as well as any required during the stay, such as painkillers. These drugs can then also be taken home, reducing the need to prepare prescriptions before discharge.

"When a mother comes onto the ward who has had a caesarean section, we know she will require pain relief when she goes home. This is prescribed and put in the bedside locker to use whilst she is in hospital, the remainder of the tablets will be taken home with her when she leaves", says midwife Louise Ley.



Patient observations: are we doing it right?

Staff on Kingston's Productive maternity ward have been inspired by the Patient observation module to look at the quality of their observations.

Because maternity units provide care for mainly healthy women and their babies, the module was adapted to accommodate this type of care. Postnatal mothers and babies observations are only taken once a day unless they need it more frequently. Babies may need a period of two hourly

observations following birth. The observations and notes are audited for quality and accuracy. This is one example of how the team have tailored The Productive Ward programme to suit their needs.

Midwife Louise Ley said: "There are all sorts of things we have to decide when setting up an audit and audit tool, for example, what are we going to learn, what will it tell us, how does it fit with other audits in the maternity unit? The audit is about looking at what we are doing and improving it."

Dear
head of midwifery



Lynn Smith answers a few frequently asked questions about The Productive Ward.

Can The Productive Ward transfer to a maternity setting?

Yes. Here at Kingston it was established right at the start that maternity should take part in The Productive Ward. It seems so obvious that changes should take place, but because staff are used to the way they do things and don't have time to explore new ways of working, it doesn't change. So to have something drop into our lap and make a difference is fantastic.

What about the delivery suite?

Somewhere that's as busy as the labour suite would benefit from this. It's about looking at the modules and each element and converting them – in some areas some elements will be more important than others.

When we take it to another area, we will be able to take all the learning from this unit.

What's changed on your post-Productive Ward maternity unit?

It was always quite a quiet and calm atmosphere. The calmness is still there and the staff are more engaged with the mums on the ward and what's going to happen to them, so they can be more efficient.

The Knowing How We are Doing board helps focus the mind of staff that the trust has strict targets to meet and they have a responsibility to help meet these targets.

As far as the women are concerned I would hope they would be saying that things are more efficient, that their stay here is more pleasant.

What do I need to make it work?

Like in many maternity units, staff are rotated, so you need to have everybody on board. This does have its benefits, for example we are trying to get the Patient Status at a Glance Board into our other postnatal area, but we won't be starting from scratch because staff are already familiar with it.

It's a different way of thinking and you have to deal with the anxieties that arise from that, but it actually helps everyone. It's also about leadership rather than management. All maternity units are busy places and anything that can help to make the midwifery team's workload easier is most welcome.

The latest score

Staff at Kingston Hospital NHS Trust's maternity ward are saving 18 shifts a year – just by changing the way linen is stored.

This simple change was part of a raft of improvements made when implementing the Well Organised Ward module of The Productive Ward.

Staff carried out an activity

follow exercise to watch a member of staff throughout their working day to see how the ward environment impacted on their day. Although the team were aware that they did a lot of walking to get the linen from the linen store at the end of the ward, the activity follow quantified how much time was taken. Now a linen trolley is kept at each end of the ward,

reducing the time and motion spent getting linen by half – and freeing up an incredible 18 shifts a year to be spent on direct care time.

Team Leader Anna Kelly said: “The more efficient we can make it, the more time staff can spend with women – which is what they are here for.”

One of the biggest measures for the unit is monitoring and finding ways to boost staff morale. Alongside the patient experience survey, the ward introduced a comments book, where patients can record their thoughts about the care they received. This helps identify where improvements can be made, but has also had a positive impact on staff morale through the overwhelmingly positive comments received.

Team leader Anna Kelly and lead midwife Sue Ng, who attended The Productive Ward study days also introduced a mechanism for staff



comments.

“We have comments from staff or they make suggestions and I answer them every week or so, if I can't answer I will explain why. It lets off steam and there's no comeback as it is anonymous. Everybody can read it and they know they will get an answer, so it has become popular.”



Shorter stays for caesarean mums

Four out of five women who give birth by elective Caesarean section are going home within 48-72 hours, according to figures.

However, midwives at Kingston Hospital's postnatal ward admit they are in no hurry to discharge women if they want to stay on. Before introduction of The Productive Ward, the

midwife was inclined not to discharge women if they wanted to stay. But now, women are encouraged to go home between 2 – 36 hours depending on their condition and baby's well being, if appropriate.

It is better for the women to go home if all is well and to be with their family rather than staying in hospital unnecessarily. This will help us with our bed capacity and also for women who need to stay in hospital.

Various other measurements include: Breastfeeding – looking at how many people are breast-feeding when they come in and what they are doing when they go home.

Bed occupancy – staff found it was quite difficult in the beginning to establish what they wanted from this measure; they settled on combining it with staffing levels to provide a good indication of how busy staff were.

Creating a traffic light system to prevent inappropriate transfers, which gives staff the



confidence to challenge transfers.

The measurement system is also used to highlight success:

Security breaches – there have been none since 2005

Infection rates – there have been no cases of MRSA for five years.



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