

Patient Story

Complaint

Anonymous, Crawley

9 October 2013

To Michelle Cudjoe

"I am writing this letter to express my opinion of my recent experience of the midwifery service. I am a registered nurse and am currently working as a nursing sister in a private hospital.

Firstly I would like to say a big thank you to the Early Pregnancy Unit and the antenatal day unit.

During my pregnancy I visited both places at various times due to complications. During my visits I was given a great amount of support and reassurance. I was seen punctually and the midwives always showed professionalism and empathy.

I was admitted to Rusper ward on the 23rd July 2013 and my experience of Rusper ward was positive. It was clear that the midwives were under a lot of pressure but were still caring and attentive at all times. I would like to say a special mention to Hazel, midwifery supervisor who went out of her way to make sure my scan was booked. She was supportive and comforting and really stood out. She made me smile and kept my spirits up during my stay, which was very much needed.

I would also like to say a big thank you to Sam. I cannot remember Sam's surname, but she looked after me on a couple of nights shifts. I was induced on the 25th July and Sam was the midwife looking after me on that particular night shift. I was concerned that the CTG kept losing contact and showed a reducing heart rate. I pressed the nurse bell and Sam responded speedily. Sam was calm and collective as she pressed the emergency call bell and wheeled me to the delivery suite. I undoubtedly was anxious, scared and very worried. Sam's professional knowledge and speedy reaction ensured my baby was delivered safely. This also goes for the midwife who took over my care in the delivery suite and all the team in the theatre, who were outstanding, giving much needed reassurance and showing fantastic professionalism. Sam also came to visit me the next morning, which really showed the care and compassion that she has

Although most of my experience was a positive one, unfortunately I have to point out some negatives.

I was admitted to Burstow ward following my C- section. I became concerned that my baby was making grunting noises. I pressed the call bell and a support worker came and went to speak to a midwife. She then came back and stated that the paediatrician was on her way to check my baby because of my past medical history. I waited some time and nothing happened. I then called again and the same support worker asked to take my baby and then wheeled him to the

midwives. Firstly this upset me as I did not actually see the midwife and only received a relayed conversation.

The paediatrician eventually came and took my baby to special care. I was distraught and inconsolable. Other babies in the bay were crying and this was very hard for me to deal with. I called the midwife and asked if I could be moved. She stated that there are other women in bays without their babies. I was crying and was not provided with any emotional support. However by my request, the midwife did call my partner to tell him what had been happened. I also asked for analgesia and an antihistamine as I was itching. It took several hours for the anti-histamine to arrive and by the time it came, my face was red and sore where I had been itching. Not at any point was I asked if I was ok. I was crying on and off for hours and I was completely ignored.

It took the midwife on the day shift hours to come around to see me. She seemed more interested in getting all the discharges out and I felt very alone. Again no one came up and asked me how I was feeling or how my pain was. I was left in my bed with the curtains closed. I felt dizzy, weak and was in a lot of pain. The catering lady came and asked me to go and have breakfast in the day room. I was so dismayed by this, as I would of if I could have physically got up independently. I eventually called the midwife as I was at my wits end and I was found to be hypotensive. I was beside myself at this point. I was unsure about what was happening with my son, I felt ill and it seemed like I was invisible until I pressed the call bell.

Not a single member of staff offered me assistance with a wash. I had a moderate PV loss and had been sitting in this all morning. It was very warm and the bed sheets were wet from sweat and had not been changed. I was getting so worked up and when my partner arrived I broke down. I was trying to come to terms with everything that was happening and the treatment I received significantly added to my worry and anxiety. What stands out the most, as I am sure you are aware, is the lack of basic post-surgical nursing/midwifery care.

I am really appalled by the immediate post-operative care I received. If these basic standards had been met then I am certain that my experience would have been a more pleasant one. I am sure that you are aware of the 6 C's published by Jane Cummings the Chief Nursing Officer. None of these were met in the initial post-operative phase.

I had many positive experiences whilst using the midwifery services and on the whole the care received was excellent. However, I feel my whole experience was let down by my post-operative care, which was more than dissatisfactory.

I would be very grateful for a response to the issues raised and I am happy to assist you further in any way I can. Furthermore could you please make sure that praise is given to the department and staff that I have mentioned, as it is well deserved. Many thanks."

Outcome

- 1) Matron met with patient at home to talk in detail about complaint. The lack of basic nursing care can have a negative impact on a mother during a very emotional time.
- 2) Not able to accommodate mother in a side room as one wasn't available.
- 3) Apology offered for the poor communication post-delivery.
- 4) Apology offered for delay in providing antihistamine medication.
- 5) Patient didn't want to go to the dining room for breakfast.

Lessons learned

- 1) Matron will share the concerns with staff at ward meetings to highlight how the lack of basic nursing care can have a negative impact on a mother during a very emotional time. As a result of this complaint, the daily Matrons rounds will include discussion about patient experience.
- 2) We are reviewing the admission criteria for Transitional Care Baby Unit which is nearer to SCBU.
- 5) Postnatal leaflets have been revised regarding being able to ask for meals at the bedside if preferable to going to the dining room.

Actions – to be completed by 31 March 2014

1. Matrons rounds will include discussion about patient experience.
2. Review of the admission criteria for Transitional Care Baby Unit.

Response

I write in response to your letter of 9th October 2013 about the care provided by our midwifery service in July this year.

Firstly I apologise unreservedly for the inadequacies in your care which you have highlighted and would like to thank you for taking the time to share them with us.

Matron Janice Blythman, Maternity Matron, has investigated your complaint on my behalf and my response is based on her completed report. Matron has advised that on 29 November she met with you at your home to talk in detail about the issues you have raised. I understand that following your meeting you were happy with the discussion and remedial actions which Matron Blythman will be taking within our maternity department. To provide a formal record, I summarise the feedback she has provided.

Matron has discussed your concerns in detail with the Ward Manager regarding the care you received on Burstow Ward. She will share it with her staff at ward meetings to highlight how the lack of basic nursing care can have a negative impact on a mother during a very emotional time. I understand from Matron that your main concern was the care you received post C-section and you appropriately mentioned the six Cs published by Jane Cummings, Chief Nursing Officer. We expect all staff to adhere to these standards and to treat mothers and their families with dignity and respect at all times. These values are in line with our own Trust values and are reinforced during regular training sessions to all staff. As a result of your comments, the daily Matrons rounds will include discussion about patient experience.

With regard to the incident where your baby was intermittently grunting and taken by the Paediatrician to SCBU at 05.30hrs, I acknowledge the worry and concern you experienced following what appeared to be a lack of communication between the midwife and Maternity Support Worker (MSW). I apologise that you were only seen by an MSW and had messages relayed to you from the midwife who was in another area on the ward. Good communication with parents is essential during this time and your experience did not reflect our recognition of this. I understand that Matron has apologised for our failings and has asked if we could use your complaint during the midwives' mandatory training session to highlight the importance of giving mothers emotional support when they have been separated from their babies.

I understand from your meeting with Matron that you would have liked a side room but that there was not one available at the time. Burstow Ward staff try to accommodate all mothers with babies on SCBU in one bay to ease their distress but unfortunately it is not always possible. We are reviewing the admission criteria for our Transitional Care Baby Unit, which is situated nearer to SCBU. This can be utilised in situations such as yours to help mothers feel less isolated when their babies are on SCBU.

With reference to the point you raised about the length of time you waited to receive an antihistamine, I note from your documentation that you had asked for Piriton at 06.50hrs and that it was not prescribed or administered until 10.55hrs. I apologise for

this delay, which as discussed with you, has been addressed with the staff in question.

The problem you experienced when you were unable to get up and have your breakfast in the dining room when asked by the housekeeper has been addressed with them. We have asked housekeeping staff to offer mothers unable to get to the dining room, or who express the choice, to be served meals at their bedside. On discussion with the Ward Manager, we have now revised our postnatal leaflets which will address this and other issues you have raised. Although it will not correct the inadequacies in your care, it will help other mothers experience better care in the future.

Thank you for your positive comments about the staff on Rusper Ward, Delivery Suite and the theatre staff, which have been fed back to them, especially Hazel Waugh, Ward Manager and Sam Rush, Midwife.

Once again, I sincerely apologise for the distress you experienced during your admission. I hope my response has been helpful and provided sufficient detail to resolve the concerns you raised. However, if you feel there is anything more the Trust can do to resolve your complaint we would welcome the opportunity to discuss this with you. Please contact the Customer Care Team on 01737 768511, ext 6825, or email makingthingsright@sash.nhs.uk to talk about how we may achieve a more satisfactory resolution.