Women's Health Directorate
Maternity Unit

MATERNITY SERVICES LIAISON COMMITTEE

Minutes of the meeting held on Monday 15 September 2003

Present:	Kerry Harris	Chair
	Arash Bahmaie	Consultant
	Gill Smith	TAMBA
	Kim McHarg	Infant Feeding Advisor
	Mary Bell	Consultant Midwife
	Mel Watson	NCT
	Michaela Morris	Head of Midwifery/General Manager Women Children
	Penny Irwin	PALS Manager
	Trisha Whisker	NCT
	Gail Soliman	Notetaker

Kerry welcomed Penny Irwin, the Trust PALS Manager – she will attend occasional meetings through the year.

1 Minutes of last meeting

- Mel should be added to those present at the last meeting.

Matters arising

- The e-mail address list has not been finalised – some entries are still not available.

2 Staffing

The unit has been through a very difficult period over the summer with August being particularly hard. The vacancy rate is approximately 29% - though we have recruited, other staff have left. The unit has worked well with staff working extra hours but the restricted access policy has been activated frequently over the summer. It was hoped that the situation would improve when the schools went back but this has not been apparent. Self rostering has been withdrawn - staff put their requests in however they may not all be possible.
The recruitment campaign will continue with specific posts such as the 'I' grade antenatal/ postnatal manager, parent education, clinical governance midwife and 'F' grade community midwives. Michaela Morris will be joining a Trust recruitment trip to Dublin at the end of September. Exit interviews are carried out but many of the recent losses had been unavoidable

3 Home from Home

The rooms will be brought into full use from 30 September although they will be used occasionally during the week before. Some larger items were still awaited. Two Entonox points will be installed after opening. Staffing will not be a separate rota but a 'G' grade has now been appointed. The production of guidelines is ongoing.

4 Maternity information on the Internet

Mary produced ideas for the first page layout for comments. It was suggested that breast feeding be included and reference to PALS be added with the removal of formal 'complaints. "Do you have any concerns or issues" should be moved to the end of the list and a comment field should be added, positive or negative.

5 **Handouts and information sheets**

Questionnaire – adjust margin at the top, even box size, move 'PTO' to the right side, add 'not offered' to q9, take out 'other services', move 'feeding workshop' to left hand column, amend 'feeding help and advise' to 2 lines, change 'sibling' to 'your child'. The form will be brought into use from 1 October 2003.

Birth plan – move 'skin to skin' before 'first feed', add 'water' to pain relief. Mary will make changes to the wording before the next meeting.

6 **Essence of Care**

Mel reported on the Maternity 'Essence of Care' meetings that she had attended. This was a Government initiative which put the patient/woman in the centre. There were 8 factors considered in maintain a good standard of care – those being considered first were 'privacy and dignity', 'xx' and 'record keeping'. The group were beginning to look at these factors and where they fit in with the care give.

7 **PALS and link with MSLC**

Penny briefly explained the purpose of PALS - to help prevent issues escalating and becoming formal complaints. She was perceived by patients as being independent, being there to support them. Communication was a recurrent theme and usually issues could be sorted at ground level. Only a small percent of contacts end up as formal complaints. PALS should be used as a resource. It was agreed that Gail would make a note of any issues that were dealt with by PALS for future meetings. Penny also made it clear that very quick responses were required, and it was expected that her calls or messages were acknowledged as soon as possible with further information passed on as it became available within 24 hours.

8 **MSLC Newsboard**

A board would be available in the main reception area, the main area would be 'good news' with MSLC information to one side.

9 **Any other business**

HOM meeting – the reporting lines of the MSLC in other Trusts were an annual report sent to the Trust Board. The MSLC also fed back through the Clinical Governance committee. There should also be links with Strategic Health. This will be further discussed at the next network meeting.

10 **Dates of future meetings**

It was agreed that the time of future meetings would be 1.00-2.30pm with the venue remaining the Parent Education room in Abbey wing.

Next meeting	17 November 2003
2004 meetings	12 January 1 March 17 May 12 July 13 September 1 November