

In London

132,564

live births (2012)

28%

of those babies were born by caesarean

£1,000+

neonatal costs per day to the NHS



London **Strategic Clinical Networks**

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Name	Job title	Organisation
Michaela Adeniji	Project Manager	London Strategic Clinical Networks
Sarah Dunsdon	Senior Project Manager	London Strategic Clinical Networks
Kath Evans	Head of Patient Experience – Maternity, Newborn, Children and Young People, Nursing Directorate	NHS England
Anna Geyer	Director	New Possibilities
Helen Knower	Head of Midwifery	Lewisham and Greenwich NHS Trust
Daryl Miller	Project Manager	London Strategic Clinical Networks
Louise Page	Consultant Obstetrician and Gynaecologist	West Middlesex University Hospital NHS Trust
Tracy Parr	SCN Lead, Children and Young People and Maternity	London Strategic Clinical Networks
Gill Phillips	Director – Creator of Whose Shoes?®	Nutshell Communications Ltd
Florence Wilcock	Divisional Director, Specialist Services Division, Consultant Obstetrician	Kingston Hospital NHS Foundation Trust

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Templates for download

Delegate attendance sheet	http://bit.ly/app-1-delegates
Invitational flyer	http://bit.ly/app-2-flyer
Agenda	http://bit.ly/app-3-agenda
Annotated agenda	http://bit.ly/app-3a-agenda
Seating plan	http://bit.ly/app-4-seating
Project plan	http://bit.ly/app-5-project
Action plan	http://bit.ly/app-6-action
Evaluation form	http://bit.ly/app-7-evaluation
Pledge follow up letter	http://bit.ly/app-8-pledge-letter
Leadership slides	http://bit.ly/app-9-leader-slides
Whose Shoes? slides	http://bit.ly/app-10-ws-slides



London Strategic Clinical Networks

Background

The London Maternity Strategic Clinical Network (SCN) aims to improve maternity user experience and involvement across London. Aligned to this, the network has been working in collaboration with Nutshell Communications and five hospitals in the London region to pilot Whose Shoes? user experience workshops through March 2015. These workshops provide participants the chance to explore local concerns, challenges and opportunities, thus working to achieve goals that together are shared and owned.

The pilot project was established in response to key issues identified through a 2013 CQC survey which found that London remains the area of England with the worst perceived maternity care. This was supported by the SCN's 2014 maternity services snapshot questionnaire and thematic analysis across nine London trusts, which identified major areas for improvement in London, including consistency of caring attitudes by staff towards women and effective and consistent communication and information.

Pilot sites for the workshops were drawn from each local maternity network area in London (North West, North Central, North East, South West and South East).

The pilot sites include:

- » Kingston Hospital NHS Foundation Trust
- » Lewisham and Greenwich NHS Trust
- » West Middlesex University Hospital NHS Trust
- » Barking, Havering and Redbridge University Hospitals NHS Trust
- » The Whittington Hospital NHS Trust

The pilot programme also includes a training session to build on the learning from the pilots and facilitate the local implementation of the programme.





Strategic Clinical Networks

Introduction

Whose Shoes? programme

The Whose Shoes? programme is an innovative approach to improving user experience in health and social care. The London pilots provided an opportunity to use this approach specifically developed for maternity services within the NHS. Through discussion of a very wide range of scenarios and topics between staff, service users and other interested parties, the facilitation tool helps participants to explore key local issues and identify opportunities for change.

Themes are captured by an artist on a pictorial "wall". Local maternity services can use this insight as a basis for action plans co-designed between staff and service users. The emphasis is to ensure that people using maternity services are treated with dignity, compassion and respect at all times.

Please note the Whose Shoes? workshop slides must only be used by hospitals which purchase a licence to the Whose Shoes?® toolkit and as part of an agreed package.

For more details on Whose Shoes? please see <u>nutshellcomms.co.uk</u> or <u>bit.</u> ly/ws-infopk.

Maternity experience user guide

This guide has been developed from the learning and management of the pilot maternity experience workshops in London, and outlines the key tasks and steps required in order to successfully deliver a workshop. It includes supporting project management and leadership materials including a leader's guide, detailed project plan and associated templates.

#MatExp and social media

#MatExp is a campaign to improve maternity user experience and has been used to communicate the workshops to a wider audience via Twitter.

It has been selected as one of the main NHS Change Day campaigns for 2015, an important way of spreading the energy for positive change.





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Project plan

Aims

- » Improve maternity service users' experience and involvement, especially in regard to customer service.
- » Address the key issues identified through the CQC's Maternity services survey 2013 and other channels concerning patient experience in maternity services, in line with agreed priorities for improvement.
- » Take an action learning approach to agree local priorities within a clear action plan (see Appendix 6, action plan) for taking forward.
- » Focus on culture change and ensure that people using maternity services are treated with dignity, compassion and respect at all times.
- » Use the Whose Shoes?® toolkit to: engage and enthuse a diverse audience, including complainants and harder to reach groups; trigger conversations around real issues: and identify what needs to change. why it matters and how this can best happen.

Actions

Prior to workshop

- » The hospital must purchase a licence to the Whose Shoes?® toolkit as part of an agreed package (see Whose Shoes?® information pack).
- » Nominate a project lead and table facilitators (See Leader's guide, pg 10, and Facilitator's guide, pg 15).

- » Book a Nutshell-approved facilitator (if one is to be used as part of a purchased support package) prior to finalising a date for the workshop.
- » If producing a graphic recording, reserve the graphic facilitator well in advance of the workshop (See Graphic facilitation guide, pg 17).
- » Produce a targeted delegate list (see Appendix 1, delegate list). Participants should be given at least six weeks' notice of the workshop.
- » Communicate and promote the workshop to staff and maternity users, including:
 - » Put up posters outlining the objectives and details of the workshop in antenatal clinics.
 - » Contact previous users of the service.
 - » Approach the Complaints team to locate users who have experienced difficulties with the service in the recent past.
 - » Share on social media. Use #MatExp on Twitter to capture the discussion and raise awareness to a wider audience.
- » Contact maternity and obstetric leads to encourage staff attendance; agree required changes to the staff rota as needed.
- » Send invitation emails with flyer (see Appendix 2, flyer). Register attendance.
- » Produce and print workshop materials: agenda (see Appendix 3, agenda and 3a, annotated agenda, name badges (names only, not roles).





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Project plan

Actions

Running the workshop

- » Request permission from delegates if photos are to be taken for any future communications (trust newsletters, future workshop promotions, etc).
- » Allocate one facilitator per table. Facilitators should be briefed of responsibilities prior to the workshop.
- » Welcome delegates upon arrival. Ensure contact details are correct upon receiving them at registration. Issue name badges.
- » Arrange attendees upon arrival to tables. Delegates should be divided to ensure that each table contains a good balance of staff at all levels plus one user (at minimum). Each workshop should ideally have five groups of eight people for table discussions and to play the board (See *Appendix 4*, seating plan).
- » Load and project the workshop slides (see Appendix 9, leader slides).
- » The lead provides a brief overview on the purpose of the workshop (See – Leader's guide, pg 10, for slide deck).
- » Local users who have consented to share their experiences may be included at the beginning of the session, prior to starting the board game.
- » Each group plays the board game. Themes are captured on post it notes as they emerge and graphically recorded.

- » At the conclusion of the board game, attendees draft up to three pledges on a postcard, with their name and email address on the front of the postcard.
- » Each delegate discusses their pledges, and each table agrees to share one or two with the wider
- » Following feedback by all tables, the wider group agrees at least two actions / priorities to be taken forward as part of an ongoing project (Appendix 6, action plan).
- » Facilitators collect all of the pledges at the end of the workshop.
- » A discussion summarising the session, pictures and themes should conclude the workshop.
- » Distribute evaluation forms and request delegates to complete them.

Evaluation

- » Evaluation forms to be completed by all delegates (Appendix 7, evaluation form).
- » The workshop lead reviews evaluation forms and feeds results into the ongoing action plan.
- » The action plan (Appendix 6, action plan) is based on the actions collated from the group.





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Project plan

Room setup

An example project plan is available for download. bit.ly/app-5-project.

- » The workshop is approximately three hours in duration. However, it is recommended that the workshop room is booked for up to 1.5 hours beforehand to allow for initial set up and /briefing plus a 30-minute follow up/review after the workshop conclusion. Thus, it is recommended that the venue is reserved for 4.5 hours in total.
- » The room should be large enough to suit the needs of the day. Ideal space will:
 - » Accommodate 40-45 people with enough space between tables to allow the collection of post-its and minimise overlapping conversations or distractions across tables. (Forty delegates are ideal when using five board games.)
 - » Have room for buggies, as parents are welcome to attend with babies. Nappy changing facilities may be required.
- » Table and chair setting Effort is required to set up the tables and the games. If possible, organise assistance with setup. Tables should be set up cabaret style in five groups of eight delegates plus a top table and additional space for any display materials.
- » The venue should have a good wall space for the graphic recording (unobstructed for participants). If the wall space is unsuitable, graphic facilitation boards can be hired.)

- » Refreshments Imaginative ways may be used to provide refreshments for delegates. Find a way of providing these imaginatively, to create a good atmosphere (the pilot sites did a bake-off, for example!).
- » Assist with hospital parking. If possible, reserve some free parking for users or at least reimburse fees.

Equipment

- » Microphone and power point presentations
- » Speakers
- » Whiteboard markers
- » Flip chart and pens
- » Pledge cards
- » Laptop
- » The board game five copies for 40 participants (provided in the Whose Shoes toolkit) However. this can be tailored as appropriate (ie boards to people attending).
- » Post-its 3" x 5" are good, enough for all tables, ideally in different colours

Facilitators

- » One facilitator per table.
- » Facilitators should be briefed in advance of the workshop about the tool and their role (see Facilitator's guide, pg 15).



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Leader's guide

The aim is to use the workshop as an 'ignition' tool to build connections and relationships across the broad maternity community, enabling true collaboration, co-design and ongoing conversations to improve maternity user experience.

Role of the leader

Leading the workshop requires energy, enthusiasm and drive, and is ideally suited to someone who is highly visible, motivated and interested in the user experience. Whatever their background (midwife, obstetrician, user or other attendee). the lead needs a passion for change and improvement, and views the workshop as an opportunity to affect maternity service users.

Following appointment of the lead, a small team (at minimum 3-4 people) should be assembled to take ownership of the many tasks that will make the workshop a success.

Leads that are active on social media, particularly Twitter, can use these channels to help publicise the event.

Prior to workshop

Who to invite?

Both maternity service users and healthcare professionals are essential to the success of the workshop.

Invite service users

Leaders can invite service users by reaching out to their Maternity Service Liaison Committees (MSLC). Identify those who have made complaints, had debriefs or have had Supervisor of Midwife (SoM) appointments, too.

The workshop should be clearly advertised in clinics and wards using posters, on the trust's website and through social media.

Whilst positive feedback from users may be rewarding, hearing from those users who were less happy with their experience may generate richer conversations and stretch thinking further, enabling a better outcome from the workshop.

It is important not to forget partners and family members of women, as well as to consider specific groups, such as young mums and those from black and minority ethnic (BME) communities By targeting local attendees, conversations will be more relevant and real for the unit.

Identifying users who will share their experience and story can set a strong scene for the workshop. Those who are prepared to participate should be received by the leader with empathy and support.

Invite staff

Consider inviting staff from varying roles within the trust, such as a housekeeper, receptionist, anaesthetists, sonographers, ambulance staff as well as midwives and obstetricians. Don't forget to include trainees and students. Take advantage of the trust's volunteer, patient and user experience teams where they exist, and use this, too, as an opportunity



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Leader's guide

to build links with relevant providers, such as the NCT (www.nct.org.uk). Provide enough notice of the workshop to invited staff to allow changes to staff rotas or any other measures which will allow staff to attend.

To raise awareness of this work. consider inviting members of the trust's executive team, such as the chief executive, medical and nursing directors, executives from human resources and finance). Invite a nonexecutive director for maternity or, if the trust doesn't have one, suggest such a role!

A member of the trust's communications team can help publicise the workshop, both before and after the event, and may know of additional promotional channels used by the trust, such as social media or key meetings.

The environment

Creating a relaxed, inclusive environment with refreshments will help to generate energy and creativity. Consider holding a bake off as some pilot sites did. which offer a low budget way to provide snacks and get people to show off their baking skills and make it fun!

The room should appear fun and colourful in order to stimulate participants' senses. Even simple things such as placing colourful boiled sweets on the tables for people to

help themselves is always well received.

Make sure delegates can find the event with posters and maps that clearly signpost to the venue. Consider provision of car parking to allow easier access for new mums. Changing facilities for babies is also useful to new mums.

Create a friendly welcome to set the scene, for example, playing music in the background as people join the session. The workshop is about working together, and having a small team briefed on this element works well and helps to set the tone of the session and help influence the culture of collaboration for improvement.

Set up

Preparing a seating plan helps to appropriately mix people of various views, backgrounds and professions at each table -- vital for an inspiring conversation.

Review the board game cards in advance, and consider which cards present key issues for the unit. The richer the discussions by participants during the game, the fewer cards they may get through. It is thus helpful to 'stack the deck', placing key issues on the top of the piles with a selection of other cards, to ensure a wide range of topics is discussed.





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Leader's guide

Set the scene | Prepare a story

Prepare a brief presentation to set the scene (see Appendix 9, leader slides). The lead should explain why participants have been invited and share the aims and objectives of the workshop, along with what it means to the lead personally and for the unit as a whole.

Key issues

Equality

We are all users and professionals in some context, and thus everyone has skills and insight that are valuable. Approaching the game as equals, respectful of each other's views is essential. (A personal story to illustrate this works well.)

Think outside the box

(or Wrong is wrong even if everyone's doing it, right is right even if no one is doing it)

If we started from scratch to design a maternity service we would not end up where we are now. Therefore, nothing should be considered too radical or should be discarded: these ideas help to encourage creativity. Nothing is off limits so participants should not become anxious if things appear to 'go off track' or offer issues previously not considered, as this is the whole point.

At the workshop

It is helpful to have name badges (stickers/labels can be used for this) for people to learn each others' first names, as this improves interactions. Name badges ought not to have organisational roles on them to further encourage equality.

Facilitators should be briefed (see Facilitator's guide, pg 15) to ensure they are clear about their role.

You may wish to consider having additional facilitators to circulate round the different tables, dipping in to the conversations, asking questions and prompting participant insight. Ideas can be shared across tables or assumptions may be questioned for further understanding.

Allow time to set up tables and chairs in advance.

Provide post it notes, paper and pens so attendees can record their ideas and conversations.

Use sweets on the tables to add colour and interest.

Allow people to choose specific cards for discussion. add new scenarios, create their own stories or poems, as this enhances the session. Leaders may wish to jot down a few key ideas to use in feedback.

Leaders should stay positive, display energy and, above all, smile!





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Leader's guide

Keep people informed and share ideas on Twitter, using #MatExp to capture the discussion.

Arrange to take photos to record the event (with everyone's permission, of course).

Feedback session and pledges Leaders should share an overview of table discussions using post it notes, drawings and anything else that's appropriate.

Participants should be invited to write pledges and, if willing to stand up and share their pledge with the group. It may be useful to ask someone to do this in advance to encourage others to do the same.

Ask people to find a 'pledge buddy' on their table to stay in touch with after the event and provide support for putting their pledges into action in the coming weeks and months.

Define the contact for each unit, and explain how pledges will be sent out and followed up.

Choose 2- 3 pledges from the session as 'unit pledges' to put into action together.

Formulate an action plan; engage stakeholders and set timelines (see Appendix 6, action plan).

Ensure that delegates complete evaluation forms (see Appendix 7, evaluation form) prior to closing the

workshop. Evaluation forms provide useful feedback and can be used to support ongoing activities.

Post workshop | Maintaining momentum

Leaders should capitalise on the energy from the workshop and maintain momentum! The buzz in the unit following the workshop should be further encouraged by talking about what was revealed and spreading the word. It is essential to keep attendees involved; ask how they are getting on with their pledges in the first few days and weeks to ensure action. If the workshop leader is not typically on site (eg a service user), then responsibility for follow up and ongoing energy in the unit must be built into the plan.

Next steps

It is up to the leader to produce an action plan based on the outputs from the workshop and ideally set up a project team. (This team could be comprised of the facilitators.) Initially revisit the benefits of the workshop with the project team. (see *Appendix* 6, action plan)

Benefits of running a workshop

- » Provided an opportunity to really listen to the views of experts – that is, the women who use the service.
- » Enabled true user involvement in planning and shaping services.
- » Created energy and enthusiasm about improving women's experiences.





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Leader's guide

- » Brought the wider team together to build relationships (commissioners, health visitors, GPs, user groups, etc.).
- » Encouraged participants to think differently about service user involvement (eg, service user engagement is vital, and not a tick box exercise).
- » Demonstrated a real commitment to improving women's experience.

Encourage those who attended to keep the experience alive by sharing insight into the day's discussions and what they learnt with their colleagues.

Produce a newsletter soon after the event, make it visually exciting so that people reading it will want to know more and get in contact. Send the newsletter far and wide, to the trust's executive team, commissioners, patient user groups, etc.

Display the graphic illustration from the day in a key area to encourage discussion and lively debate with both women and healthcare professionals. Use it to check that all key

themes are being followed up with appropriate actions.

Write a piece for the communications team to add to the trust's newsletter. Display photos, drawings and feedback on the walls to generate conversation.

Develop an email distribution list of those who attended and send reminders about the day and other related information

Remind participants of the pledges they made by sending an email/letter approximately six weeks after the workshop. Nominate someone to be responsible for the coordination. collation and monitoring of feedback from the pledges following the workshop (appendix - pledge letter). Use the distribution list to share regular updates regarding changes that have happened as a result of the workshop.

Have fun, be creative, let's think and do differently!



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Facilitator's guide

Role of the facilitator

It is the responsibility of the leader to appoint facilitators and brief them in advance of the workshop.

There should be at least one facilitator per table at the workshop . Additional facilitators may be used to 'float' between tables, posing questions and challenge responses for deeper insight.

The main role of the facilitator is to capture the key themes that emerge from the participant discussions (playing the board game and throughout the workshop).

Full instructions on how to play the board game are included when the Whose Shoes?® licence and games are purchased.

The facilitator should guide, but not direct discussions, ensuring continuity and participation by all delegates, drawing people in, and ensuring that no one individual dominates the conversation.

Facilitators are responsible for following up on the pledges and helping to formulate an action plan after the workshop.

Key steps for facilitators

Facilitators should oversee the game and listen carefully to the discussions emerging based on the scenarios / poems.

- » Use first names (avoid using job titles).
- » Participants may like to work in pairs and take it in turn to roll the dice and navigate around the board.
- » Participants in turn read out the scenario / poem , provide their thoughts and open the discussion to others on the table.
- » Discussions should highlight themes, what is working well locally or suggestions for improvement. These should be captured by the facilitator on a post it note. Post it notes should be collected throughout the game by another facilitator or coordinator and incorporated into the graphic record (see Graphic facilitation, pg 17).

Feedback from the graphic facilitator

Once the game has concluded, the graphic recording is shared with the entire group, either by the graphic facilitator or those recording the themes visually.





Facilitator's guide

Pledges and action plan

After playing the game, the facilitator should ask participants to write down to 2-3 personal pledges on a postcard along with their email address (trust staff) or home address (external visitors / users).

Delegates should work together as a team and reach consensus on at least two actions they believe should form part of an action plan to take forward post workshop (see Appendix 6, action plan).

Facilitators should collect the pledge cards from their table.

Evaluation form

The facilitator should ensure everyone completes an evaluation form at the end of the workshop.



London Strategic Clinical Networks

Graphic facilitation

Visually capture the essence of conversations and create a lasting record

Following the first three pilot workshops it was clear that the resulting discussions are incredibly rich and really inspire people to do things differently.

Graphic records are a visual method of capturing what is discussed. By documenting this during an event. delegates can immediately see conversations and themes as they emerge during the event, and a record is kept for sharing and future reference.

Key messages summarised for the whole group to hear can help to unite thinking and clarify where action needs to be taken. It can help people to feel that the conversations that have taken place are valuable and productive. Harnessing all those messages on one sheet of paper is very powerful.

The visual record can be displayed publically following the event and can be reproduced so that is can be displayed in more than one place.

This allows people who were there, taking part in the conversations, to be reminded and refreshed by their words. More importantly, it allows those who weren't there to join in the conversation.

The record can offer a very transparent piece of evidence to demonstrate a hospital's commitment to:

- » Engage with mothers-to-be and new mums
- » Listen to people's experiences
- » Improve the maternity experience
- » Celebrate success
- » Identify areas for improvement

The colour and energy within the graphic makes it visually appealing. immediately drawing people into the illustrated messages. Whether viewed as a way to pass time whilst waiting or a momentary glance as they walk past, the visuals stick in people's minds.

Isolated images can be captured and used to share the key messages from the workshops through social media forums such as Twitter, too. This can be done immediately after the event helping to maintain the energy; the images are engaging

> and can convey more than 140 characters.

The added value that the graphic record can offer to the maternity experience workshops is great.







London Strategic Clinical Networks

Graphic facilitation



Alternative ideas to visually capture key messages

Using post-it notes

Collate post-it notes that are generated on a large sheet of paper by writing on key themes and grouping the post-its accordingly. At the end of the session, feedback to the group the messages that have emerged.

Leave the poster up until everyone has left the room. This will give people an opportunity to read other people's notes so that they can see where there is similarity or difference. After the event, type up the post-its and share with a wider audience.

In doing this you will have shown the group where most discussion is being directed, and the number of post-its will illustrate how important a message is to the group. The energy generated from attendees will not be captured and the typed record of comments may not be as engaging as a visual record that is produced.

Mind mapping

Take a mind mapping approach using a large piece of paper on the wall to feed post-its to a scribe who captures key messages, connects similar themes and organises the information by converting the post-it notes into a mind map or cluster diagram.

Ask the scribe to feedback the key messages to the group at the end of the session.

This will give a more visually engaging record at the end of the session that can be photographed and circulated after the event. The advantage of not typing up the record following the event is that the handwritten record will likely capture the energy in the room.

Enlisting young people

Engage with a local youth forum to see if they would like to join and record the session. Using a small team of young people working at a large sheet of paper, a facilitator gathers the post-it notes, themes them and gives each person a theme to illustrate. At the end of the session each young person summarises the piece given to them.

Another way of doing this may be to have a piece of flip chart, good felt-tip pens and high quality paper for each theme. In this way, the young people can be spread out around the room to develop an individual poster based on the generated post-it notes.

The posters could then be left on the walls for people to look at before leaving. The records could then be photographed and circulated post event.

Skill is required to take messages from notes, understand their essence and translate that into something that reflects the point without judgement or misinterpretation.

Information provided by New Possibilities training, facilitation and consultancy. For more details on graphic facilitation services offered by New Possibilities, please see newpossibilities.co.uk or bit.ly/np-infopk.





London Strategic Clinical Networks



About the Strategic Clinical Networks

The London Strategic Clinical Networks bring stakeholders -- providers, commissioners and patients -- together to create alignment around programmes of transformational work that will improve care.

The networks play a key role in the new commissioning system by providing clinical advice and leadership to support local decision making. Working across the boundaries of commissioning and provision, they provide a vehicle for improvement where a single organisation, team or solution could not.

Established in 2013, the networks serve in key areas of major healthcare challenge where a whole system, integrated approach is required: Cardiovascular (including cardiac, stroke, renal and diabetes); Maternity and Children's Services; and Mental Health, Dementia and Neuroscience.