

Case study: Making North Staffordshire University Hospital's maternity unit more father-inclusive

"When the dads have a smile on their face the mums are more relaxed and this means less work for the midwives."

That's the observation of midwifery manager Karen Meadowcroft, who has instigated a raft of measures to make the Maternity Centre at University Hospital of North Staffordshire more father-friendly.

Helping fathers find a more proactive role

The midwives realised that fathers needed to be given a more proactive role in the birth of their babies when they found that too many mothers were being admitted prematurely in the early stages of labour. Many of the dads, particularly those with a first baby, were panicking and bringing their partners in too early. This was creating a problem for the midwives who had to look after them, and also for the mothers who became discouraged when they found they were not in established labour.

So the midwives decided fathers needed to know more about how labour starts and how they could better support their partners. This led to the launch of their 'Preparation for Birth' classes which focus on relaxation, diet and nutrition, massage techniques and breathing during the early stages of labour. The course teaches coping strategies to both parents to help them feel more in control.

More couples now have the confidence to manage the early stages of labour at home and to come to the Birth Centre only once labour is established. This gives the midwives more time to provide one-to-one care for mothers in the active phase of labour.

An evaluation has shown a 40 per cent reduction in false admissions in the group of women who attended the classes; only 21 per cent of women attending the classes had Pethidine compared to 80 per cent who did not attend the classes, and fathers gave positive feedback. The classes, which are always fully booked, are held on Sunday afternoons and evenings to fit round fathers' working lives and avoid the football fixtures. Parking is also easier at these times.

A clean sweep – making space for dads

In April last year the maternity department moved into a new purpose built Birth Centre, which gave them the opportunity to introduce more dad-friendly changes to their service.

The first thing they did was to sweep away the old visiting times limited to 9-10am, 2-3pm and 7-9pm. These restrictive times caused problems for fathers working flexible shifts, for those coping with tired and fractious toddlers, or those who had to rush off in the afternoons to pick up other children from school. The immediate family is now

allowed on the ward for 12 hours from 9am to 9pm. Other family and friends visit from 6-9pm.

The ensuite single rooms of the new unit allow dads to visit their partners without disturbing other families. The extended visiting times give fathers an opportunity to bond with their new baby, and to give practical help and support with breastfeeding or passing drinks and pillows to the new mother. This makes the whole family's transition home a lot smoother.

A day room with a drinks area is now provided on the wards for the fathers for refreshment and a chance to take a break during the many hours they might be hanging around waiting for the birth. It has comfy chairs where they can relax, and a TV. Fathers can also now use a separate toilet on the ward which has saved midwives having to continually let them in and out through the security door to access facilities outside.

Working through the stumbling blocks

Although the changes have been simple a number of details had to be worked through before they could be introduced. There were some concerns among staff that having the fathers on the ward for 12 hours a day would put additional stress on the busy unit. In practice it was found that having dads around eased the workload of the midwives because the mums were buzzing them less as they had their partners to help them.

Infection control was another concern – particularly when in other areas of the hospital visiting occasionally has to be restricted to as little as one hour a day to help combat outbreaks of norovirus. But it was agreed that fathers were unlikely to be a huge infection risk to their partners and new babies because they were already living together and were exposed to the same bugs. As a precaution signs were put up to advise birth partners not to use the ensuite toilet if they had any type of infection.

Some thought had to be put in to the proposals for providing drinks in the day room. After a risk assessment by Health and Safety it was decided to put up signs warning users to be careful with the hot water and trays were provided to avoid spills. It was not usual policy for the trust to pay for tea, coffee and sugar for people who were not officially patients. Neither was it acceptable for clinical staff to charge fathers for using products or to have to handle money. However managers were persuaded by the arguments for tailoring services in the Maternity Centre to better meet the needs of fathers and agreed that the trust would fund the items needed for the drinks area.

A year on, the concept of providing a more inclusive environment for fathers is now well established within the maternity unit. No major problems have been reported and there have been few complaints. A patient survey has shown that the women are now a lot happier and there is a very high satisfaction rate with the visiting times. Community midwives say that the fathers are more confident about supporting mothers when they

go home because they already know how to bath, feed and settle their baby and provide support with breastfeeding.

Ms Meadowcroft says the changes have made a significant impact:

“When you speak to the fathers they say those little things make a massive difference to them. They say the fact that somebody even thought about providing us with a drink, making sure we have somewhere to go to the loo and bother to cater for our flexible working life – that’s massive to us.”