

# CODESIGN 2

#### PERSONALISING THE THEATRE PROCESS

#### Starvation times

Its easy to forget how long women haven't had anything to eat and drink when we're in a busy elective operating list.

Let's try to build in some processes that help us outside of obstetrics

- Anaesthetists and obstetricians could help by seeing women on the morning of surgery and liaising with Gwillim
- Bring order AND drinking into briefing in am
- Check current info given to mums for accuracy re timings

#### Transfers to theatre

Lifts can be busy and travelling up and down before and after delivery can be intimidating. We thought of addressing privacy in theatre through info on and in the lift. What do you think?

### **Dignity**

Everywhere else in the hospital patients wear paper undies and a dressing gown to transfer so why not maternity? Gwillim are currently investigating. Pre op info could include prompt



Being made to feel special isn't a big ask. This might be the only first and last time this mum has surgery let alone a baby so wouldn't you like to feel like you were treated with dignity and warmth - we already know its a safe place to be but it still feels scary and anonymous

We met with mums and staff to work through what personalising a theatre birth might involve

Women walk through delivery suite into theatre, there's no fixed holding area, sometimes wait in waiting room with labouring women - scary, intrusive to other women

Value team briefing /handover to identify holding area

Arrive in theatre - big crowd, first place they know who is going to be there

Create info on website about who's who, mirror gallery in DS on Gwillim so parents can see who we are

Drips can get in the way of breastfeeding baby

Maybe off the shoulder on DRIP side for spinal then 2nd arm out for S2S so ends with strapless dress look and nothing to untangle if gown gets dirty too. Win, win!



## Making a warmer environment

All of our patients are human and so are you

A warm welcome is so appreciated so even if things are getting busy your smile goes a long way!

Here are some of the things families said about their time in theatre:

"... fear of an operative birth was dispelled by a theatre team which worked seamlessly and were kind and caring. The butterflies were amazing!"

Faye Catherine

'I feel luck to have had my baby at St George's and thank everyone for all of their kindness in what was a scary time for a first time mum'

Holly Cruickshank-Woodruff

Feel free to send us your compliments to share with the wider team

MHO checklist can feel pretty intimidating

Soften approach by including parents in introductions (pretty good already) and birth choices - music, lights, viewing, announcing sex etc

Baby delivered to sterile MW and taken to resuscitaire - sometimes up to 8 mins until mum gets to hold, how to support earlier contact and more uninterrupted S2S

suggested idea of piloting delivering to MW on LEFT of surgeon to see whether it helps time to contact between mums and baby, plus review need for sterility

poss basinette for wiping down (need warm blankets)
move resuscitaire so even if baby there for any reason
parents can see - Nasreen (NNU) to pilot



We have an amazing team at St Georges and with you and what you do every day we can support so many more families to feel confident and involved during their time in our theatres

Contact us via the project email, twitter or just holler when you see Emma, Julia or Andrew