

# A CHECKLIST COLLABORATIVE

*involving women and birth partners in 'harm free care'*

**Authors:**

**Steve Hogarth**, Health Improvement Science Fellow, Haelo, Salford Royal NHS Foundation Trust  
**Debby Gould**, Programme Manager, Compassion in Practice: Driving Improvement. Open and Honest Care (Maternity), NHS England  
**Dr Ailsa Brotherton**, Associate Director Programmes, Haelo, Salford Royal NHS Foundation Trust

**Timeline**

**2007**  
NICE Intrapartum Care: Care of healthy women and babies during childbirth.

**2008**  
Kings Fund (2008) Safe births: Everybody's Business. An independent enquiry into the safety of maternity services in England.

**2010**  
National Perinatal Epidemiology Unit (2010) Delivered with Care. A national survey of women's experience of maternity care.

**2012**  
February, The Francis Report, One Year on.

**2012**  
September, The creation of the Maternity Expert Panel to develop a Maternity Safety thermometer.

**2012**  
December, Shine Award.

**The challenge**

Having a baby in the UK is the safest it has ever been. However women and babies are still being exposed to substantial and sometimes multiple avoidable harms, during labour and birth. Human factors, working culture, communication and teamwork are key themes associated with avoidable harm in maternity care. The success of the WHO surgical checklist in reducing harm and improving team work and communication in operating theatres is a model which is transferable to labour and birth.

**Our response**

To create a safety checklist that will be used in collaboration with women and their birth partners. The project aims to improve communication between the midwives/other clinical staff and the birth partners, meaning that in effect the development of the checklist will be personal and potentially empowering for mothers and partners during labour and birth to ensure that basic care is delivered reliably and safely.

2013: March. Generating ideas for the birth partner checklist. Focus groups, the purpose of these were to generate ideas from healthcare professionals for the content of what potential themes could be incorporated into the checklist. We used the NICE Intra partum Birth Guidelines as a reference to help inform some of the suggestions (see Figure 1, right).

Midwife quote: 'After today's session I will go away and have a look at my parent craft input and probably tweak the parent craft presentation to look at it a lot more from a birthing partner's point of view and hopefully get them to be a little bit thought provoking and involve them more in the process of labour.' Another Midwife, said, "I did not want to expect but it has all been extremely positive and it is nice to hear that there could be some extremely improved changes to how we care."

2013: May and June. Interviews with new parents Parent (1) highlighted that 'having a checklist in labour would be very helpful, knowing what will happen and what to do if there is a problem would really help'. Parent (3), said 'I always like to know what is going on and if I have a checklist this would help me to have an understanding of when things need to be done.' Let me introduce some of the parents we interviewed (see Figure 2, right).

**Table 1.** Cross referenced data

NICE Intrapartum Guidelines	Expert suggestions	Women/Birth Partner suggestions
Assessment of progress	✓	✓
Maternal Temperature	✓	✓
Maternal Pulse	✓	✓
Progress	✓	✓
Colour of Waters	✓	
Frequency of Vaginal examinations	✓	
Contractions		✓
Being able to drink	✓	✓
Being able to pass urine	✓	✓
Mobilising in labour	✓	✓
Frequency of listening into baby's heart beat	✓	✓
Options for pain relief	✓	✓
Explanations	✓	✓
Time frames		✓
Bleeding	✓	✓
Feeling unwell	✓	✓
Calling a midwife	✓	✓

2013, August: Creation of the checklist and supporting information for testing (see Figure 3, right). 2013, September: Commenced testing.

Number of organisations invited to participate	Number of organisations who agreed to participate	Number of organisations who actually participated in testing
6	6	3 (3 labour wards and 2 midwifery led units)

**Evaluation of the project**

See graphs, right.

**Qualitative data**

The qualitative part of the evaluation took the form of a thematic analysis of the responses to the open ended questions. A full thematic analysis is included in the report.

'I think it's a really useful way for partners to feel they are doing something and avoid the helpless feeling.'— Midwife  
 'It is not appropriate to give this during labour at a time of high anxiety.'— Midwife

'Helped to monitor progress of birth and felt more involved having the whole care explained and then able to track it.'—Birth partner  
 'Got a bit muddled on tracking time when it crossed the hour but the care of both midwives was superb.'—Birth Partner

**Figure 1.**



**Figure 3.** Birth Partner Checklist and Birth Partner Checklist Guide

Partnering during labour and birth - a checklist to guide you

Evidence suggests that a small number of simple tasks checked every hour can help reduce the risk of complications during the early stages of labour. We are looking whether a partnership between the birth partner and midwife during early stages of labour in a hospital setting could. We would like you to complete the boxes every hour with either a '✓' (yes) or 'X' (no). Call your midwife at any time to ask questions or if you need help with this checklist and receive it with her when she comes to see you. On the back of this checklist are instructions to help you answer the questions.

Name of partner: \_\_\_\_\_ Name of woman: \_\_\_\_\_ Name of Midwife: \_\_\_\_\_  
 Date: \_\_\_\_\_ Time of Admission: \_\_\_\_\_ Checklist start time: \_\_\_\_\_

Hourly Checks	1	2	3	4	5	6	7	8	9	10	11	12	Start time
1. Enter start time and time of hourly review													
<b>Midwife checks</b>													
1. Pulse of partner													
2. Colour of waters													
3. Vaginal bleeding													
4. Frequency of contractions (enter frequency)													
5. Baby's heart rate (enter number of minutes)													
6. Position and mobility reviewed and discussed													
7. Temperature													
8. Blood pressure													
9. Document the time of vaginal examinations													
10. Document the time of vaginal examinations													
<b>Birth partner checks</b>													
11. How often did you partner a govt?													
12. Did my partner feel hot or too warm?													
13. Did my partner feel cold or too cold?													
14. Were there anything else that concerned me?													
15. Document here													

This is for you both to use, to keep and to use any day after the birth. It is important that your midwife understands what matters to you and that you have the checklist you are able to use to help you. We hope that this helps you both to understand your own care and have a happy experience.

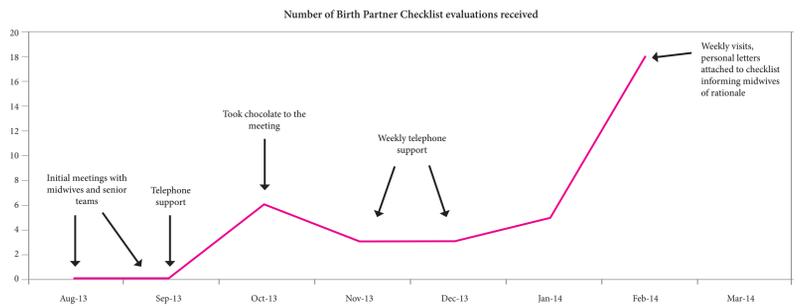
**Figure 2.**



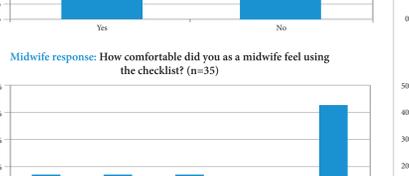
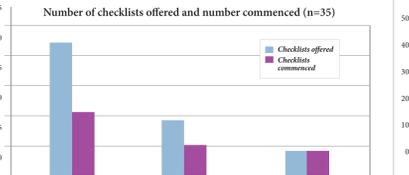
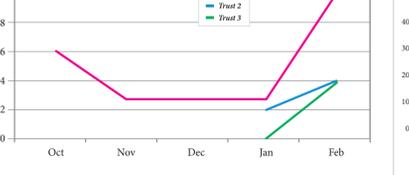
Partnering during labour and birth - a checklist to guide you

- A healthy pulse rate is usually between 100 beats per minute and is observed at least every hour.
- When the waters have broken, the midwife will look to see if they are clear or discoloured. Clear waters are a good sign that baby is well. The midwife will check this frequently during labour. If you or your partner notice a difference in the colour, please let your midwife know.
- Bleeding can be worrying, please tell your midwife if your partner experiences any loss of blood during labour.
- Contractions are a normal part of labour that gradually build up in strength and frequency. If your partner has more than 4 contractions in any 10 minute period, please inform your midwife.
- During labour it is recommended that the midwife listens to the baby's heart rate every 15 minutes. Sometimes baby's heart rate will be below 100 beats per minute for a short period of time, just prior to, and during pushing the baby out. The midwife will listen to at least every 5 minutes. The baby's heart rate is usually always between 120-160 beats per minute. Please let your midwife know what the heart rate is.
- When you get up and move to help during labour and birth, sometimes women may choose to have an epidural, which can restrict mobility. If this is the case, please let your midwife know so they can help you to change positions while on the bed at least every two hours. If your midwife suggests using leg support or straps for the birth of the baby, please talk her up.
- Your midwife will monitor the woman's general wellbeing by making some simple observations: temperature, pulse rate and blood pressure. A healthy temperature is always between 37.5 and 38.5 and this is usually done every 4 hours unless there are some concerns. Blood pressure is usually taken every 4 hours unless there is a need for it to be taken more frequently. If this happens ask your midwife to give you some information.
- During labour a midwife may offer to examine your partner regularly, this helps inform how labour is progressing, examinations are usually 4 hours apart. If the midwife suggests more than please ask her to tell you the reason why. It is recommended that there are no more than 7 during labour.
- Midwife: Keeping track of what is going on during labour is really important, so we ask you to encourage your partner to drink when she has sips. Usually, her sipping urine frequently is also important, so we ask if you can remind her to have sips when she has sips.
- If your partner feels unwell at any time during labour, or after baby is born, please call your midwife immediately.
- If you have any concerns, please let us know when you arrive in hospital and share them with your midwife. During labour, if you feel that you are being left for periods of time, let your midwife know how this makes you both feel. Your care and what matters to you is important.

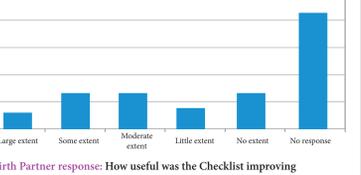
This is for you both to use, to keep and to use any day after the birth. It is important that your midwife understands what matters to you and that you have the checklist you are able to use to help you. We hope that this helps you both to understand your own care and have a happy experience.



**Testing of Checklist by Trust (n=35)**



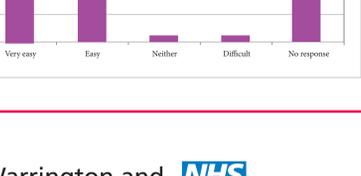
**Midwife response: To what extent did the Checklist enhance communication with the woman and/or birth partner? (n=35)**



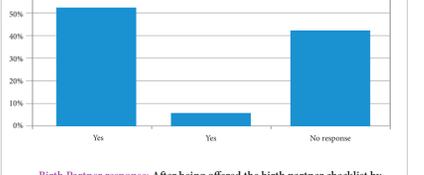
**Birth Partner response: How useful was the Checklist improving your communication with the midwife? (n=35)**



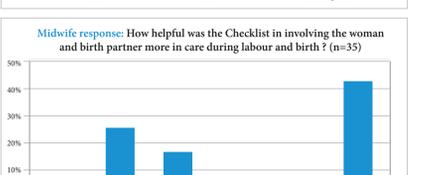
**Midwife response: To what extent do you feel that the Checklist can contribute to the quality of experience during labour and birth? (n=35)**



**Midwife response: When offered, did the woman and her birth partner choose to use the Birth Partner Checklist? (n=35)**



**Birth Partner response: After being offered the birth partner checklist by the midwife, did you choose to use it? (n=35)**



**Midwife response: How helpful was the Checklist in involving the woman and birth partner more in care during labour and birth? (n=35)**

