

Description

by Melanie Wildman – midwifery leader



I posted a comment on the wonderful Facebook page – Self-Care for Midwives, about how we try to care for staff where I work….

I was then invited to share the initiative here, to give others an idea of how to care for colleagues at work – so here goes!

The postnatal ward in our maternity unit has 29 beds and is an acute setting that provides care for women needing high risk care, transitional care babies and of course their families. The admission and discharge turnover is fast paced with an average of 10 discharges and admissions per day.

I have been in post as a band 7 ward manager since November 2017. Initially the ward felt unorganised, there was no clear leadership at ward level. Incidents had themed patterns and complaints surrounding experience were high. Over the period of 2 years the ward had had three managers. Staff felt undervalued and morale was low. Staff often missed breaks and were late home to their families. The postnatal ward was a place that staff dreaded working. The shift coordinator was a new role which hadn't been successfully embedded and escalation was a concern.

The month after I started our matron had an idea whilst lying on a sunbed and sipping a cocktail, that idea was 10@10. The ethos of 10@10 is to provide ten protected minutes at 10am and 10pm where all staff on the ward join altogether as a team. Sometimes called a 'huddle' the overall purpose is to update the shift coordinator, and each other, on the safety of women, babies and the ward environment. The shift coordinator is provided with a helicopter view, and the staff have

increased situational awareness. It was my task to implement it. The ward clerk volunteered to make tea and toast and I rang an old fashioned, hand bell. The venue was a meeting room at the top of the ward which was ideal for confidentiality, yet visual for women and close enough to hear any call bell and attend immediately. Initially staff were reluctant to attend believing they were too busy or that they “were not allowed” to sit and have a snack and a drink. Over a two-week period, I had to walk round and encourage staff to stop working and attend.

> *My colleagues began to smile and communicate with each other. We started to celebrate, support and acknowledge each other’s achievements.*



I sat with the staff every day for two weeks and led the 10@10. The team quickly understood the advantages of updating each other on what was happening they shared safeguarding issues, potential discharges and any mothers and babies that were unwell. Staff were given a voice to express concerns regarding workloads, faulty equipment and the completion of safety checks. Very quickly members of the wider team joined us obstetricians, neonatologists, specialist midwives, hearing screeners, feeding support workers and any one involved our service was welcome.

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Staff began to take ow we developed as a team together. Partner nd freshly made bread! They commente loved ones had received.





We now utilise 10@10 as a platform for learning, we discuss incidents, scenario's and improvements. Other areas within the maternity unit and wider hospital have seen the benefits of what we do, and hold their own 10@10. We now have a team to be proud of, one that I am certainly proud to manage and best of all, the women and families who use our service share our success with us too.

Who would have thought that ten minutes at ten o'clock would have such a positive impact !!!

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1. News & Views
2. Nurture at Work
3. Postnatal Care

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1. nurture
2. postnatal care
3. support
4. team work

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