Gloucestershire Safety and Quality Improvement Academy

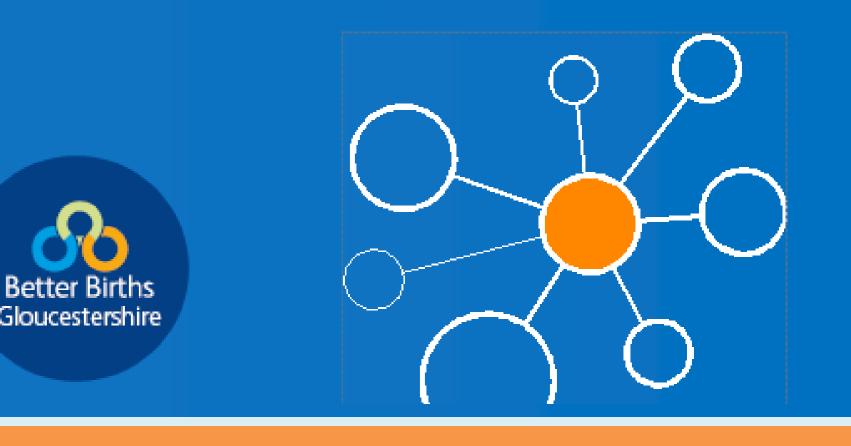
Introducing NHS Hypnobirthing Courses across Gloucestershire **Kate Clifford and Annie Lester**

1. The Safety Concern

NHS resources are more strapped than ever and nationally women are often receiving poor antenatal education and in particular very little support for their emotional well-being. Levels of anxiety and low mood are at an all time high among the childbearing population and in fact mental ill health is the most common major complication that women in the UK experience in pregnancy. As a result women are turning to alternative therapies to help them prepare both physically and emotionally for birth. When asked their views 60% of Gloucestershire women asked for hypnobirthing or breathing and relaxation classes on the NHS to support them in their preparation for birth. Hypnobirthing has been becoming increasingly popular over the last few years, with research showing that women who are anxious about or frightened of giving birth have longer labours and are more likely to need intervention (27/06/2012, British Journal of obstetrics and gynaecology).

3. The QI Team - Hypnobirthing Midwives





Gloucestershire Hospitals **NHS**

NHS Foundation Trust

2. The Aim

To introduce Hypnobirthing Courses across Gloucestershire in the 3 hubs Gloucester, Cheltenham and Stroud by March 2019 in order to reduce anxiety of and increase preparedness for birth.

4. Driver Diagram

Aim	Primary Drivers	Secondary Drivers	Change Ideas	5. Quality Improvement Measurement Plan		
To reduce anxiety of and increase preparedness for birth by running hypnobirthing courses on the NHS in Gloucestershire: Set up 3 hypnobirthing courses across Gloucestershire by March 2019	Knowledge and Education	Women to attend hypnobirthing classes Midwives to deliver hypnobirthing courses	Set up 3 Hypnobirthing classes – one in each hub Train midwives in hypnobirthing	Measure name	 How would you describe your level of anxiety towards labour a How prepared are you feeling in terms of your knowledge of la Are you looking forward to the birth? 	
		CDU/theatre/BU staff & Obs confident in supporting hypnobirthing women	Run workshops on how to support women who are hypnobirthing	Туре	Outcome To ascertain if women have found the course:	
	Culture Change	Women to attend classes	Women to attend between 26-30 weeks Women to practice at home Classes to be evaluated	Why is this measure needed?	 useful in lowering their anxiety/apprehension levels has aided preparation and increased knowledge for labour and has increased positive attitude towards labour and birth 	
		Staff to lead classes	Midwives to attend hypnobirthing training Antenatal Groups developed to include relaxation & breathing exercises	Operational definition*	All women who will be completing the hypnobirthing course show anxiety/preparedness/positive attitude on a scale of 1-10 prior to course and after the course has been completed.	
		CDU/theatre/BU staff including Obs confident in supporting women who are hypnobirthing	Staff to attend workshops	Exclusions Data	Women who did not undertake the hypnobirthing course Questionnaires to be given out prior to the initial session and aga	
		Birth environment to support hypnobirthing	Quiet venue, comfortable Easy to access and good parking Balls, mats, bean bags,	collection & sampling method	session. The questionnaires will be given and collected in by the	
			Low lighting, music Essential oils Affirmation cards	Data source Baseline	Women First hypnobirthing courses to be run in GHNHSFT so no baseline	
	Documenta tion and advertising (comms team)	Advertising classes to women and their birth partners	Information given at bking MVP website Link in with ANC & women with complex pregnancies	data available?		
		Advertise training to midwives	Emails & posters & social medai	Goal Time to	To run three courses in March End March 2019	
		Advertise workshops for CDU/theatre/BU staff	Advertise on CDU/Birth Unit/ANC	review?		
		including Obs	Involve stake holders.			

5. Measurement plan

n	Primary Secondary Drivers Drivers		Change Ideas			5. Quality Improvement Measurement Plans			
nxiety of	Knowledge and Education	Women to attend hypnobirthing classes Midwives to deliver hypnobirthing courses	Set up 3 Hypnobirthing classes – one in each hub Train midwives in hypnobirthing Run workshops on how to support women who are		Measure name	 How would you describe your level of anxiety towards labour and Birth? How prepared are you feeling in terms of your knowledge of labour and birth? Are you looking forward to the birth? 			
		CDU/theatre/BU staff & Obs confident in supporting			Туре	Outcome			
	Culture Change	hypnobirthing women Women to attend classes	hypnobirthing Women to attend between 26-30 weeks Women to practice at home Classes to be evaluated	Why is this measure needed? Operational definition*		To ascertain if women have found the course: 1. useful in lowering their anxiety/apprehension levels 2. has aided preparation and increased knowledge for labour and Birth 3. has increased positive attitude towards labour and birth			
		Staff to lead classes	Midwives to attend hypnobirthing training Antenatal Groups developed to include relaxation & breathing exercises			All women who will be completing the hypnobirthing course should rate their levels of anxiety/preparedness/positive attitude on a scale of 1-10 prior to completing the course and after the course has been completed.			
		CDU/theatre/BU staff including Obs confident in supporting women who are hypnobirthing	Staff to attend workshops		Exclusions Data	Women who did not undertake the hypnobirthing course Questionnaires to be given out prior to the initial session and again after the last			
		Birth environment to support	Quiet venue, comfortable Easy to access and good parking Balls, mats, bean bags,		collection & sampling method	session. The questionnaires will be given and collected in by the course facilitator.			
		hypnobirthing	Low lighting, music Essential oils Affirmation			Women			
	Documenta tion and advertising (comms	Advertising classes to women and their birth partners	 cards Information given at bking MVP website Link in with ANC & women with complex pregnancies Emails & posters & social medai Advertise on CDU/Birth Unit/ANC Involve stake holders. 		Baseline data available? Goal	First hypnobirthing courses to be run in GHNHSFT so no baseline data			
	team)	Advertise training to midwives Advertise workshops for CDU/theatre/BU staff including Obs			Time to review?	End March 2019			

6. PDSA Cycles

Cycle 3A: Run workshops for staff on how to support women who are hypnobirthing

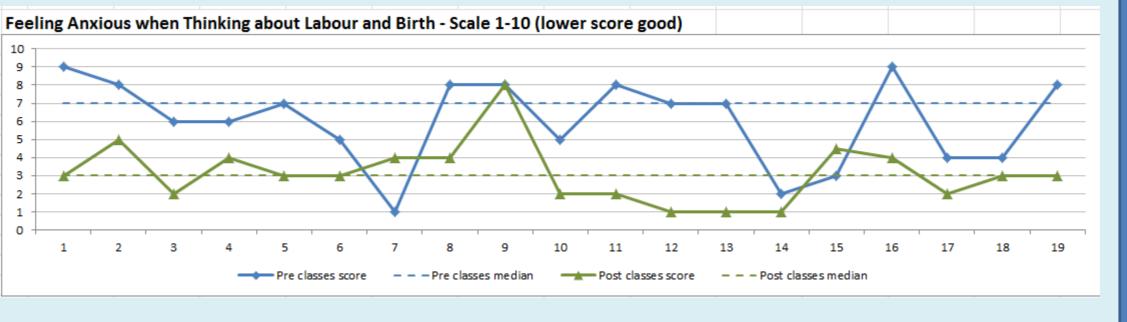
Cycle 2A: Write business plan for hypnobirthing service & train 23 midwives to teach courses

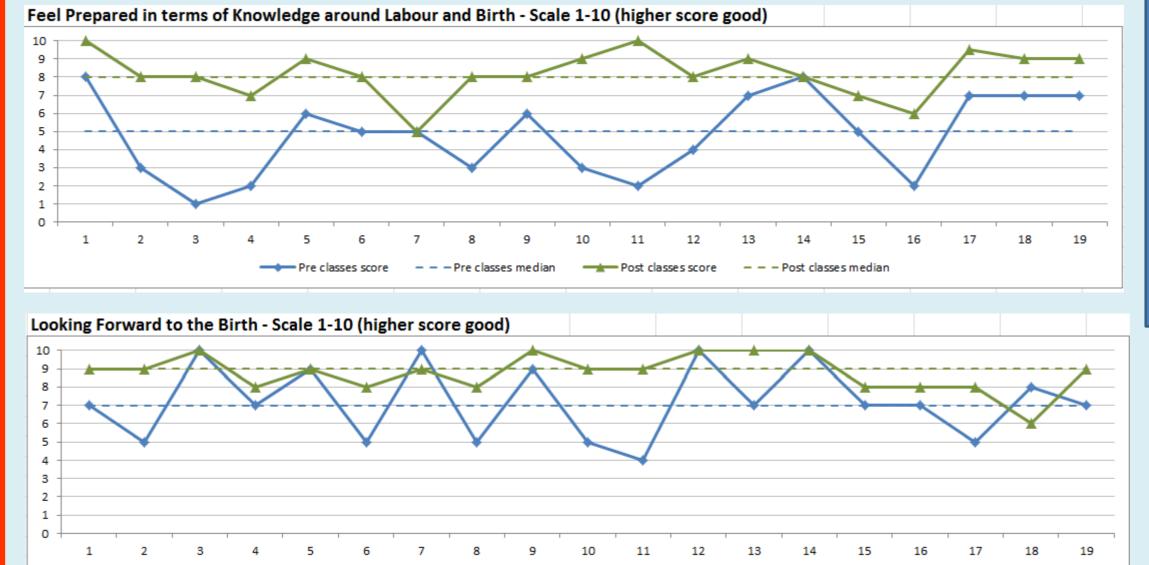
Cycle 2B: Pilot 3 hypnobirthing courses – March Stroud, April Cheltenham, May Gloucester & evaluate

7. Measurements & Key Results

3 courses have run and been evaluated at the time of this graduation (3rd course is in the process of being taught).

levels of anxiety and preparedness for birth were taken pre-course and immediately post course.





Cycle 1B: Run workshops for midwives teaching facilitation skills

Cycle 1A: Survey views of women, midwives & health visitors

Next steps

iii.

iv.

V.

vi.

- **Promote service**
- Increase number of courses from one per month in Gloucestershire to one per hub (Gloucester, Cheltenham and Stroud) every month
- *Continue to evaluate service*
- Employ admin support
- Run workshops for all staff on how to support a woman who is hypnobirthing Set up hypnobirthing courses in the rural areas to improve accessibility and availability
- vii. Set up subsidised hypnobirthing courses for vulnerable groups of women including

Women will also be followed up after they have given birth to see if they used the hypnobirthing, found it helpful and whether they were supported by staff to use it.

Preliminary results show that in general

Measures:

- Levels of anxiety when thinking about labour and birth reduced (from 7 to 3)
- Levels of preparedness (in terms of knowledge) increased (from 5 to 8)

"I really enjoyed the course and it has made me feel at ease and very calm about the birth' ------ Pre classes score – – – Pre classes median — Post classes score

Acknowledgements: thank you to everyone who has helped to set up the hypnobirthing service without whom it would never have happened including:

Vivien Mortimore, Head of Midwifery; Kay Davis, Matron for Community;

Dawn Morrall, Clinical Lead for Better Births and the Better Births team; Kate Harrison, Deputy Director of Midwifery; Rowan Roberts. Assistant General Manager – Obstetrics & Gynaecology; 21 hypnobirthing midwives; Maggie Arlidge and Rebecca Evans-Jones Consultant Obstetricians; Mandy Phelps Divisional Finance Business Partner; Martyn Thomas Head of Financial Accounts and his team; Nicky Keenan Administration Manager; Bernie Fishpool, E-Rostering Trainer; Julie Howe, Maternity Care Assistant; Kate Jeal, Senior Communications Specialist and Alex Purcell, Quality Improvement Manager & the GSQIA team

women who have had a previous stillbirth or neonatal death.



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