



Campaign update: Continuity of Carer, Northern Ireland - trying to do it properly!

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What is it?

This pilot Continuity of Carer¹ scheme, called the Lotus Midwifery Team, is being implemented at the Causeway Maternity Unit in Coleraine. The scheme was launched only in August 2020, but already it is receiving excellent feedback from women, especially from those experiencing previous birth trauma. There are currently 7 dedicated midwives working with the Lotus Team and their primary focus is to give mothers a positive maternity experience, irrespective of their choice of where or how to birth their baby. The vision of the team is to provide individualised care during pregnancy, birth and the postnatal period with the focus being on building a trusting, interpersonal relationship.

How does it work?

The aim is for each woman to see the same midwife at each appointment throughout her pregnancy, her labour and birth, and to be visited by her at home postnatally, until care is handed over to the health

visitor when baby is 2 weeks old. Any woman planning to birth in the Causeway Maternity Unit can self-refer to the Lotus Midwifery Team. She then meets her named midwife and buddy midwife at the booking-in appointment who are responsible for her entire birthing journey, along with an extra midwife who joins her team at 36 weeks. This enables the mother to have access to one of her three midwives 24/7. During labour, the midwife will also accompany the woman to another hospital if required. The team has so far supported 12 women during their pregnancy, birth and postnatal period and all of them have reported a positive birth experience, which they state is due to the trusting relationship they have built with their Lotus Team Midwife.

What difference does it make to mothers?

The clinical outcomes of the Continuity of Carer model have shown that mothers are less likely to experience preterm births, still birth, episiotomies, intervention, and are more likely to know the midwife at birth, feel satisfied with their experience, have a normal birth and are more likely to breastfeed. The Lotus Team has been collecting data from women on a monthly basis, but as the team is still in its infancy, it cannot demonstrate statistically significant outcomes as yet. However feedback so far has been very encouraging and positive, with women who have had previous birth trauma expressing how their recent births with the Lotus Team have healed them, and some even saying they would have paid privately to have the experience. It is also worth noting that with the current COVID restrictions, women have said they feel safer because they meet the same midwife at each appointment, which reduces and helps to alleviate their anxiety.

First-time mum, Bevin, self-referred to the Lotus Team:

“From the day I opted into the care of the Lotus Team at 8 months pregnant, one primary midwife was with me for all appointments and the birth of my baby. Even though I was quite far along my pregnancy, this enabled me to quickly develop a strong, trusting relationship with one healthcare provider. I was also able to meet with my midwife, doula and partner all together on several occasions to discuss our birth preferences, concerns, etc. My midwife and doula were both fantastic throughout my pregnancy, birth and postnatal experience; I felt they worked really well together, communicating throughout to help ensure I got the best support possible.

Throughout my care, I felt I was the primary decision maker as I was able to fully discuss my choices and preferences with people who were very respectful of these, offering me helpful advice and information as appropriate. During labour my midwife ensured my partner and I were fully informed about potential procedures and their risks/benefits. This helped me feel in control at an extremely vulnerable time. Overall, I would highly recommend the continuity of care model. I think it leads to safer care, and more woman-centred care that helps empower parents. I think it is a fantastic service that should be the norm for all maternity care.”

What does it mean for midwives?

Midwives were initially asked to express their interest in working on this pilot scheme two years ago as a result of the implementation of Better Births². Paula Morrison is a Lotus Team Midwife:

“From a personal perspective I was lucky enough to be cared for by continuity midwives when I had my own children. It was the care and support I received from them that inspired me to retrain as a midwife. I am so passionate about providing this model of care for women as I know first-hand the positive impact this can have on a new mother and her family. From a professional perspective the level of job satisfaction providing a positive maternity experience is incredible. Hopefully in the future this model of care will be available to all women requiring maternity care.”

Caroline Diamond is Head of Midwifery and Gynaecology in the Northern Health and Social Care Trust:

“Having worked in a Continuity of Carer team in the 1990s as a young midwife, I can personally attest to the real benefits this way of working offers both the woman and the midwife, and it is the reason I am so passionate about this model of care. The evidence is clear around the clinical outcomes for women, but it is the sense of empowerment, control of her body and her birth, and confidence in the information and decisions she makes when supported by a known and trusted midwife which underwrites a positive experience of pregnancy and birth.

This model of care gives midwives the opportunity to develop that *‘professional friendship’* and a trusting reciprocal relationship with women throughout the childbirth continuum which the traditional model does not provide. Whilst all midwives are advocates for women, that advocacy role is acutely focused when the midwife has nurtured a bond with the women and is personally invested in her experience. The autonomy and flexibility, the ability to achieve a good work life balance, and the personal job satisfaction is an additional bonus that Continuity of Carer midwives experience. As Head of Midwifery, I am extremely proud of our Lotus team who have worked so hard and tirelessly to commence

this model of care, despite being in the midst of an unprecedented global pandemic”.

Looking to the Future – how to sustain this programme:

The implementation of the Lotus Midwifery Team at Causeway Maternity Unit is proving to be a great success, and there are already plans to expand the service in the new year. Resources are key, and more midwives are needed to not only cover the vast geographical area in this Trust, but to accommodate increasing demand for individualised care. There is a cultural shift from how midwives provide maternity services traditionally to this working model which changes to a more flexible, being on-call, self-managing model. It is important to acknowledge that this change can be challenging for some midwives and they need to try it out and see if it works with their own family and life pattern.

The Continuity of Carer maternity model is now embedded in student midwives’ teaching³ so it will soon be the norm when they qualify as registered midwives. It is the foundation of maternity care, improving quality and safety and promoting positive birthing experiences. AIMS looks forward to the time when this model of care will be available to all.

¹ www.rcm.org.uk/promoting/professional-practice/continuity-of-carer/

² NHS England (2016) National Maternity Review: Better Births – Improving outcomes of maternity services in England – A Five Year Forward View for maternity care. www.england.nhs.uk/wp-content/uploads/2016/02/national-maternity-review-report.pdf

³ www.rcm.org.uk/news-views/rcm-opinion/2020/getting-it-right-from-the-start-implementing-midwifery-continuity-of-carer/?fbclid=IwAR0AhGmzQ0P35aV6NY-S5LjqirQdx3wCzW34HCb6SK0pIXI04-9jp_tfzRE