

Ein cyf/Our ref: CEO.427
Gofynnwch am/Please ask for:
Rhif Ffôn /Telephone:
Dyddiad/Date: October 2020

Swyddfeydd Corfforaethol, Adeilad Ystwyth
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

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Mrs Janet Finch-Saunders MS
Chair
Petitions Committee
Senedd Cymru/Welsh Parliament

By email: petitions@senedd.wales

Dear Mrs Finch-Saunders

P-05-965: Push the government into introducing a separate ward other than maternity ward, for families going through a miscarriage

Thank you for your letter of 14 October 2020, inviting Hywel Dda University Health Board to provide detail of our services in response to this petition.

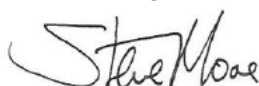
The Health Board fully acknowledge the need for a separate space for parents experiencing a miscarriage; the loss of a child in any circumstance is painful and requires a sensitive approach from healthcare teams.

Within our hospitals, an en-suite cubicle is provided on the Gynaecology ward for women experiencing pregnancy loss up to 20-week gestation. Our staff have received tailored training specifically aimed at supporting women and their families. They have access to literature to help families with understanding what they are experiencing, as well as memory boxes within which they can keep photographs and feet and hand prints.

For ladies who lose a child over the 20-week gestation point, women are cared for on the antenatal ward. The staff have access to the same resources for helping families through the loss and memory boxes to enable them to keep items relating to their child. Cold cots are available for families to spend as much time as they need with their baby, and all families are given access to bereavement counselling should they feel it necessary. Patients are signposted to the local and national miscarriage association for additional information and support.

The Health Board recognise the importance of providing families with a safe space to grieve their loss and will always try and accommodate a family within a private en-suite cubicle or side room.

Yours sincerely



Steve Moore
Chief Executive

Vivienne Harpwood, Cadeirydd / Chair

Ffôn / Phone: [REDACTED]

E-bost / Email: [REDACTED]

Carol Shillabeer, Y Prif Weithredwr /
Chief Executive

Ffôn / Phone: [REDACTED]



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

CS/JR/AE

5 November 2020

Ms Finch-Saunders AS/MS
Chair
Petitions Committee
Welsh Parliament
Cardiff Bay
CF99 1SN

Dear Ms Finch-Saunders

P-05-965 Correspondence from the Chair of the Petitions Committee

Thank you for your letter dated 14th October 2020 regarding Petition P-05-965: Push the government into introducing a separate ward other than maternity ward for families going through a miscarriage. This issue is clearly of significant importance and I hope this response is helpful in your considerations.

The need for a clinical pathway for women experiencing miscarriage was identified as a key clinical priority by the health board in 2019. As you may be aware Powys Teaching Health Board works with a large number of other NHS health boards and Trusts in both Wales and England in providing whole system pathways of care. Our aim has been to work together with neighbouring obstetric services to improve timely access and experiences for women and their families facing the tragic situation of miscarriage.

In relation to the provision of facilities in hospitals for supporting families experiencing miscarriage, currently the health board accesses Early Pregnancy Assessment Services in neighbouring District General Hospitals and NHS Trusts in England and Wales. The facilities for these

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Rydym yn croesawu gohebiaeth yn Gymraeg
Byddwn yn ymateb yn Gymraeg heb oedi
Bwrdd Iechyd Addysgu Powys yw enw gweithredwr
Bwrdd Iechyd Lleol Addysgu Powys



We welcome correspondence in Welsh
We will respond in Welsh without delay
Powys Teaching Health Board is the operational name of
Powys Teaching Local Health Board

commissioned services are separate from Maternity wards and often part of the Women's Health / Gynaecological facilities.

As part of our strategy 'A Healthy, Caring Powys', we have committed to providing more care closer to home. In relation to early pregnancy services we are currently exploring whether a greater proportion of the care pathway could be provided in Powys, supported by secondary care colleagues where necessary. The design and use of facilities would very much be based on the views of women who would use these facilities.

Work has however already progressed with regards to improving services within the existing midwife led assessment and sonography services. This has focused on developing services closer to home including self-referral, strengthening the mechanism for ongoing support and follow up for women and improving family centred care and psychological support available locally as part of the neighbouring district general pathway of care. We work closely with neighbouring district general hospitals in both Wales and England to provide specialist obstetric and gynaecological services for our residents. We are aware of work at Welsh Government level relating to specialist, recurrent pregnancy loss services.

We very much recognise the physical and emotional impact of baby loss. Ongoing, high quality support made available to families who have been bereaved through miscarriage is key and we are currently working with partner hospitals to strengthen the support available to Powys women and their families. A focus on what more can be done, including at a national level is welcomed.

I hope this helps outline the position in Powys and should you have any further queries please do not hesitate to come back to me.

Yours sincerely

A handwritten signature in cursive script that reads "Carol Shillabeer".

Carol Shillabeer
Chief Executive



5th November 2020

Private & Confidential

Janet Finch-Saunders AS/MS
Chair Petitioners Committee
Welsh Parliament
Cardiff Bay
Cardiff
CF99 1SN

Dear Ms Finch-Saunders

Re: Petition P-05-965 Push the government into introducing a separate ward other than maternity ward, for families going through a miscarriage

Thank you for your letter of 14th October 2020 in regard to the above.

You have raised a number of issues, for clarity, I will address each in turn.

Information about the provision of facilities within Cardiff and Vale University Health Board for supporting families experiencing miscarriage and specifically whether support is available separately to maternity wards.

I can confirm that we provide care to women who experience miscarriage within two locations depending on their gestation.

<17 weeks

For women who experience a loss up to 16 weeks and 6 days gestation, care is provided within a separate, female only gynaecology ward. Privacy and dignity is maintained within a single room facility. Prior to COVID, partners were welcome to stay with the women. During COVID, the team have maximised the use of virtual visiting and enabled partners to attend to say goodbye in accordance with visiting guidance for end of life care. Compassionate care is tailored to the needs of individual families as we recognise the cultural diversity of our population.

A quiet room is available for women and their partners in the event of breaking bad news.

Every attempt is made by staff to take hand and foot prints and memory boxes are given to families. Medical photography is available for women who would like photographs. In the event that a post-mortem is requested, women are further supported by the Health Board's Bereavement Nurse.

Dedicated early pregnancy assessment services are managed by skilled nurse practitioners who are also trained to provide early ultrasound scans and non-medical prescribing. In the unfortunate event that a miscarriage has been diagnosed, women are given choice of further management, such as conservative, medical (with the ability to go home) or surgical.

In the event of recurrent miscarriage, referral to the Genetic Service is available for further investigation.

≥ 17 weeks

For women who experience a later loss at 17 weeks and above, care is tailored to their individual needs. Pathways are in place for women to receive their care within the delivery suite with one to one care provided by a midwife. Care is provided within a dedicated area which has been developed in conjunction with the stillbirth and neonatal death society. Should women require postnatal care afterwards, they can opt to remain within this room or receive their care within a dedicated bereavement suite. Both rooms have en-suite and facilities and provision for refreshments. Partners are able to remain throughout the woman's stay.

Whether your services could be improved considering the experience of the petitioner

Covid 19 has unfortunately delayed some plans to refurbish the single rooms within the gynaecology ward, may I assure you that these plans will be progressed as soon as reasonably possible to decorate and furnish these areas to be 'less clinical' for women and their families.

Whilst, there is no dedicated funded counselling service in place for women who have miscarried, women are advised to seek initial advice and support from their GP with a view to referral for counselling services if needed.

Details of ongoing support services available to families who have been bereaved, both through miscarriage and through other causes

There are several support networks available. The Obstetrics and Gynaecology Directorate work closely with the Stillbirth and Neonatal Death Society in order to receive feedback from women about our services and improve the environment of care for bereaved families. Information for women is also provided for The Miscarriage Association and local organisations such as The Junction and The Beresford Centre.

For women who experience a loss <17 weeks gestation, the Obstetrics and Gynaecology Directorate work closely with the Health Board's Bereavement Nurse to ensure ongoing support and guidance for families. The Maternity Service also have a dedicated bereavement midwife to support women and their families who have experienced a loss ≥17 weeks gestation.

Cardiff Rainbow Baby clinic was set up in 2018 to provide care for women and their families who have lost a baby during pregnancy or shortly after birth. A team of midwives, obstetricians, support workers and sonographers provide specialist antenatal care and support after a loss (at any gestation) through their next pregnancy and beyond to provide seamless continuity of care and carer.

We hope that you will find this information helpful and you will be assured that the Cardiff and Vale University Health Board are very much aware of the importance of ensuring that women who have experienced a loss receive all the necessary support in the most appropriate environment.

Yours sincerely



Len Richards
Chief Executive



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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

Cadeirydd/Chair: **Emma Woollett**
Prif Weithredwr/Chief Executive: **Tracy Myhill**

gofalu am ein gilydd, cydweithio, gwella bob amser
caring for each other, working together, always improving

Rydym yn croesawu gohebiaeth yn y Gymraeg ac yn y Saesneg. We welcome
correspondence in Welsh or English.

Dyddiad / Date: 10th November 2020

Janet Finch-Saunders MS
Chair of the Petitions Committee

Sent by email: petitions@senedd.wales

Dear Janet

Re: Petition P-05-965 Push the government into introducing a separate ward other than maternity ward for families going through a miscarriage

Thank you for your letter dated 14 October regarding the above petition in relation to the facilities and services available for women experiencing miscarriages. In responding below I have reflected the pre-COVID position, some aspects of which have had to change during the current pandemic, mainly in relation to the presence of partners/ families and visiting on wards. We expect to return to the pre-COVID position when circumstances allow.

1. Our services for women experiencing miscarriages are predominantly based at Singleton Hospital. Women referred for suspected miscarriages are received in our Early Pregnancy Unit which is managed within Gynaecology services, not Maternity Services. Should a woman require admission, she is admitted to a Gynaecology bed, which is in a different part of the hospital from the Maternity Unit. We strive to admit women into individual cubicles to maintain the highest level of privacy and dignity, although this is not always possible. Normally (pre-COVID) partners or key family members are able to be with their loved one at such a distressing time.
2. Women who use our services having suffered a miscarriage are provided with information on a local support group called Keyhope, which has a 24hour helpline with access to trained counsellors, and a centre that women can attend for support. An information leaflet from the Miscarriage Association is also provided. Both of these charitable organisations can help the wider family affected by the miscarriage.
3. We also offer a Memory Box where appropriate and where desired. When a woman has suffered a late miscarriage (over 17 weeks gestation) we are able to call on the services of one of our Specialist Bereavement Midwives. We provide a Consultant-led specialist clinic for women who have had multiple miscarriages.



Pencadlys BIP Bae Abertawe, Un Porthfa Talbot, Port Talbot, SA12 7BR / Swansea Bay UHB Headquarters, One Talbot Gateway, Port Talbot, SA12 7BR

Bwrdd Iechyd Prifysgol Bae Abertawe yw enw gweithredu Bwrdd Iechyd Lleol Prifysgol Bae Abertawe
Swansea Bay University Health Board is the operational name of Swansea Bay University Local Health Board

4. Whilst we believe that we provide high quality sympathetic services, we are not complacent and undertake audits of our compliance with our Miscarriage Pathway. Our Bereavement Midwives provide training sessions for the Gynaecology Nurses on the ward in order to ensure high standards of communication are maintained. We also take concerns received seriously and ensure any lessons learnt are acted upon and embedded into practice.

Please do not hesitate to contact me if you require any further information.

Yours sincerely



Professor Tracy Myhill
Chief Executive



P-05-965 Push the government into introducing a separate ward other than maternity ward, for families going through a miscarriage, Correspondence – Cwm Taf Morgannwg UHB to Committee, 12.11.20

Response to Petitions Committee at Welsh Parliament

Early Pregnancy Unit – to 15+9/40 gestation

Information about the provision of facilities in your hospitals for supporting families experiencing miscarriage, and specifically whether support is available separately to maternity wards

PCH, RGH and POW

Women are seen in the EPU department, which is separate to the maternity ward.

In PCH women currently have their USS in an area where they could come into contact with pregnant women, but this is to change from 26.10.2020 when all early pregnancy USS will be performed in main USS department.

Whether your services could be improved considering the experience of the petitioner

PCH

Our service is currently being reviewed with a view to a purpose built gynaecology hub at PCH.

Due to Covid-19 we have recently been moved to the paediatric outpatient department which has given us extra capacity.

We are totally separate from the maternity unit

We now have a room available for women who receive bad news to have privacy away from the main waiting area.

Currently EPU ultrasound appointments are performed in an area with pregnant women. We have recently changed scan times to limit the contact of early and late pregnancy women and from 26.10.2020 all EPU scans will be performed in the main USS department away from the antenatal clinic.

For in-patient care there is a designated female ward for gynaecology and female surgery.

Women experiencing miscarriage are accommodated in a single room whenever possible to ensure privacy.

Women suffering from hyperemesis may be cared for on the maternity unit if there is high activity on the general female ward, but no woman with a potential pregnancy loss in 1st trimester would be cared for on the maternity unit. With the service development there will be provision of rapid hydration clinics for women experiencing hyperemesis which will reduce the need for admission.

We are currently practising within Covid-19 guidelines so partners are only able to attend for the USS but not to any consultation. For those women who wish their partner to be included we have used telephone or Facetime for them to be included.

RGH

There is a designated EPU/GDAU at RGH with USS facilities in the department. There is also a room for women who receive bad news to have privacy.

We are currently practising within Covid-19 guidelines so partners are only able to attend for the USS but not to any consultation. For those women who wish their partner to be included we have used telephone or Facetime for them to be included.

POW

Scanning in POW is undertaken in a small scanning room adjacent to the reception area, clinical room and quiet room for discussion when required.

The EPU is located in the same corridor as the maternity ward and pre Covid, shared a waiting room, which is not optimal.

Partners attending scans causes anxiety for clinicians as social distancing is difficult to maintain in a small room with 4 people present.

Out of hours, woman are supported to come out of the ED at the earliest opportunity and are seen in an assessment area away from the maternity unit.

Any in-patient stays are undertaken on a ward away from the maternity unit.

A business case is in progress to re-locate a Gynaecology Assessment Unit, incorporating EPU into the main hospital. This will improve the scanning room size, make the location more appropriate to the sensitivity of the service.

Details of ongoing support services available to families who have been bereaved, both through miscarriage and through other causes

PCH, POW & RGH

We have no formal counselling provided within the health board.

All women are given written information about miscarriage in the form of Miscarriage Association leaflets. This is provided with a covering letter offering our condolences and provides parents with our contact details.

Although we offer no formal counselling we provide support individually to women who contact us and are able to signpost women to other counselling providers

Maternity – from 16/40 gestation

Information about the provision of facilities in your hospitals for supporting families experiencing miscarriage, and specifically whether support is available separately to maternity wards

CTMUHB trust have a designated bereavement lead midwife responsible for acting as the point of contact for bereaved families within maternity services, as well as provision of support, training and education for staff. Women are offered a package of support following discharge by the Bereavement lead midwife which includes visits from the community midwife, access to local health board support groups, 1:1 counselling (offered at 8-12 weeks post delivery), link contact with the bereavement lead who will coordinate all follow up with the obstetric team once results become available. Families are provided with the bereavement lead midwife mobile telephone number to discuss contact and support to suit the woman and her family's needs following delivery.

Women are generally cared for in our designated bereavement suite on each site. Both rooms are off central labour ward and have en-suite facilities. In Prince Charles the "Primrose Room" is between labour ward and the birth centre. In Princess of Wales the "Bluebell Room" is situated on the maternity corridor to labour ward but not on labour ward. There may be minimal occasions when due to lack availability of the room (more than one patient suffering a loss being in at any one time) a patient may need to be cared for in a side room on labour ward. Moreover there may also be occasions where due to the clinical need of the patient, labour ward care is required, in a side room. These occasions are however minimal, and we would not expect patients to be care for on the main maternity ward. All families are offered a memory box for their baby/babies and the opportunity to make memories which include; access to "Remember my baby" photography service and/or access to hospital cameras for photos, inkless hand and footprints and/or clay casting. All families are offered the opportunity to spend as much time as they wish with their baby/babies and use of a cold cot is provided to preserve baby/babies. All families are also offered the opportunity to take baby home if they wish and a "cuddle cot" can be provided for this to facilitate preservation of baby in the home environment whilst the family spend time together.

During COVID 19 access to the "Remember my baby" photography service has been limited as this is a voluntary service by a national charity. Access for family visitors in the cases of loss may also be limited due to COVID 19 but has been supported in those exceptional circumstances wherever possible with a thorough risk assessment carried out.

Whether your services could be improved considering the experience of the petitioner

The health board currently offer a service that fits within the gold standard for bereavement care on maternity, identified in local and national standards. The service does not support, at any time, routine to care for families on an open maternity ward.

Details of ongoing support services available to families who have been bereaved, both through miscarriage and through other causes

On maternity in the UK women from 20 weeks and upwards are predominantly cared for. However in CTMUHB we have lowered the gestation to accepting women from 16 weeks

gestation. To these families all of the aforementioned are offered and ongoing support is offered by;

- Ongoing support from bereavement lead.
- Support from bereavement lead into next pregnancy.
- Follow up care from our obstetric team.
- Counselling sessions 1:1 by our midwife counsellor for baby loss.
- The health board have two support groups locally supported by our bereavement lead midwife- Bro Morgannwg baby loss support group in Bridgend community and The snowdrop support group in Prince Charles.
- Sign posting to national groups- SANDS, Miscarriage association & CRADLE.



Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
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Ms Janet Finch-Saunders
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2746

Eich cyf / Your ref:

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Gofynnwch am / Ask for: [REDACTED]

E-bost / Email: [REDACTED]

Dyddiad / Date: 20th November 2020

Dear Ms Finch-Saunders

Re: Petition P-05-965 Push the government into introducing a separate ward other than maternity ward, for families going through a miscarriage.

Please see below as requested response to your enquiry in respect of Petition P-05-965, which The Petitions Committee at the Welsh Parliament considered at a meeting on 29 September 2020.

The petitioner highlighted the following issues:

1. The importance of separate wards and screening facilities for families experiencing miscarriage, due to the traumatic experience of being with expectant parents or on the maternity ward;
2. Insufficient support provided to parents in terms of the impact on their mental health; and
3. More support should be provided to the wider family of those experiencing miscarriage.

Please see below response to the specific questions posed by the Petitions Committee

1. Information about the provision of facilities in your hospitals for supporting families experiencing miscarriage, and specifically whether support is available separately to maternity wards.

Within BCU patients, experiencing miscarriage and pregnancy loss are cared for in the following clinical areas:

Women who are of the gestation up to 17 weeks and 6 days are cared for on the Gynaecology Wards.

Women who are of the gestation 18 weeks and over are cared for in a designated area on the maternity units.



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Betsi Cadwaladr
University Health Board

Gynaecology Services

Within Gynaecology, care is provided where appropriate on an outpatient basis through the Emergency Gynaecology Units (EGU`s) where there is provision for early pregnancy assessment and treatment. There is an EGU at each District General Hospital in North Wales and the service is available on a Monday- Friday basis. Women`s Services in BCU are in the process of completing a business case to request funding to extend EGU opening hours to provide a weekend service, which will increase accessibility for women in North Wales

BCU offer all options for the management of pregnancy loss in accordance with local and national guidelines, which includes expectant, medical and surgical management options.

Patients requiring inpatient treatment are admitted to Gynaecology Wards and cared for by experienced Gynaecology nursing staff.

It must be noted that under normal circumstances (pre-Covid), the Gynaecology wards are located completely separately from maternity wards and patients experiencing early pregnancy complications/ pregnancy loss are not cared for in close proximity to antenatal and post-natal patients.

However, during the COVID pandemic wards have been re-configured to accommodate clinical pathways, to observe infection prevention and control standards. Consequently, some patients in early pregnancy are cared for in single rooms, which are located on a combined gynaecology and maternity ward. Every effort is made to ensure that early pregnancy patients have minimal exposure to antenatal and post-natal patients.

Review of the recurrent pregnancy loss service within North Wales is a priority and included within the Gynaecology Service Priorities for 2020/2021 with the intention of developing a dedicated recurrent pregnancy loss clinic to support patients in North Wales who experience three or more miscarriages.

Maternity Services

Women are cared for by midwives in dedicated self-contained Bereavement suites based in each of the maternity units. The suites are designed and configured for Bereavement care and include en-suite facilities. Designated rooms are available on each Labour Ward to provide care for women in labour who require one to one monitoring and for women who request epidural analgesia.

2. Whether your services could be improved considering the experience of the petitioner (as highlighted in point 2 above)

Whilst the Women`s Directorate employ two Bereavement midwives who offer support to women who experience pregnancy loss, there is no provision of a dedicated psychology



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University Health Board

service. BCU have a perinatal mental health team where women can be referred to either by their allocated midwife or the Bereavement midwives. Women are signposted to third party organisations such as Miscarriage Association, Stillbirth and Neonatal Death Society (SANDS) and Tommy's for counselling and the provision of further advice & support.

3. Details of ongoing support services available to families who have been bereaved, both through miscarriage and through other causes.

Bereavement midwives offer some support to bereaved families, however the service is evolving with the aim of providing support to all women and families depending on their individual requirements. A business case is in the process of being developed to appoint an additional Bereavement midwife; this will ensure that support is made available to all women and families across North Wales.

The Bereavement midwives have close links with Hope House Hospice Services and can directly refer women and their families for advice, support and provision of care.

I hope this information is to your satisfaction however please do not hesitate to contact me again should any further information or clarification be required.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'T. Owen'.

Teresa Owen
Dirprwy Brif Weithredwr Dros Dro
Acting Deputy Chief Executive

Our Ref: JP/RH/lab

Direct Line: [REDACTED]

23rd November 2019

Janet Finch-Saunders MS
Chair of the Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Dear Ms Finch-Saunders

Petition P-05-965 Push the government into introducing a separate ward other than maternity ward, for families going through a miscarriage

Thank you for your recent request for the Health Board to comment on the above petition received regarding miscarriage.

Aneurin Bevan University Health Board provides care for women who experience miscarriage in our Early Pregnancy Assessment Unit (EPAU) and Gynaecology Ward. Both the Gynaecology Ward and EPAU are separate from Maternity and staffed by nurses specifically trained in Gynaecology concerns and are sensitive to the needs of women and the partners who experience pregnancy loss up to 20 weeks gestation.

On the 15th November 2020 the Gynaecology Ward and EPAU were relocated to the Grange University Hospital and all women who require hospital admission for management of the miscarriage will receive care in a single room; this provides them with privacy and enables their partners or family to remain with them and provide support throughout the management. Early Pregnancy Ultrasound scans and investigations are provided within the EPAU.

Information and support is provided by Gynaecology Nurses during the management of the miscarriage and women have open access to return to the ward if they choose home management. Support is also provided in

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relation to the potential choices for burial, cremation and post-mortem. A contact number is also provided should they require further support following discharge. The service also provides information and contact numbers for counselling in the voluntary sector at the Beresford Pregnancy Counselling Centre, Newport who also provide training for nurses in counselling skills.

A memory box is also offered to the family which includes various items that validates the life of the baby and recognises that parents and the wider family often need time to grieve. The Hospital Chaplains are also available to provide faith based support.

The Health Board is reviewing the service to determine if it can provide enhanced nursing care during medical management of miscarriage alongside additional psychological support, however, this will require additional funding and ring fenced staffing to guarantee this level of care.

I hope the above response is helpful to you. If you require any additional information, please do not hesitate to contact me.

Yours sincerely

A handwritten signature in black ink that reads "Judith Paget". The signature is written in a cursive style.

Judith Paget
Chief Executive/Prif Weithredwr