

BUILDING BLOCKS FOR SUSTAINABLE RURAL MATERNITY CARE THE NORTH ISLAND PROJECT

About the Project

We have learned from over **80** community members about **experiences of birth** on the North Island. We listened to birthing women, families and elders, as well as nurses, physicians and health administrators.

We have made **3 trips** to North Vancouver Island to talk with communities.

November 2016
May 2017
June 2017



We learnt from...

Fort Rupert
Gwa'sala-'Nakwaxda'xw Nation
Port Hardy Primary Health Centre
Port McNeill and District Hospital
Port McNeill Medical Clinic
Quatsino
Sacred Wolf Friendship Centre

We learnt by listening!

People came together in groups and we talked with people one-on-one to learn about their experiences and hear suggestions.

In **Phase 1**, we engaged with community members to learn about their experiences of birth.

Now in **Phase 2**, we will create a roadmap of how to support maternity services in the North Island.

Funding for the **2 year project** is through the **Joint Standing Committee on Rural Issues**.

The project is being led by Jude Kornelsen in the Department of Family Practice at the **University of British Columbia** and is coordinated by Kira Barwich. Jude and Kira both work in the **Centre for Rural Health Research**. We are working closely with Hannah Scrivens and the Kwakwaka'wakw Maternal Child and Family Health Project, Vancouver Island Health and community members.



NEXT STEPS

Out of approximately **110** pregnancies in the area, **7** deliveries occurred in the Port McNeill hospital and **12** deliveries in the Port Hardy hospital.

(2015-2016 Perinatal Services BC data)



North Vancouver Island



~10 deliveries locally



~10 deliveries out of community

The North Island Project began with the goal of creating a patient Decision Aid to help women decide where they should give birth (Port McNeill hospital or out of the community). However, after spending time in the community speaking with women and other community members, it became clear that the maternity service needs support. We worked with care providers and others on the North Island to develop the **Building Blocks for Sustainable Rural Maternity Care**.



Another part of the project will involve looking at the outcomes of women who live in the North Island, no matter where they give birth. This will help us understand the actual number of deliveries taking place, where they took place and the conditions and situation around the birth experience.



We heard from women about the challenges they face in having to leave the community to give birth. **Challenges include:**

- It is often difficult to arrange transportation and becomes challenging to travel if there are other children in the family.

- For many families, it is too expensive for partners or other family members to travel down the island with them, and the whole travel experience can make women feel very anxious.

- Leaving the community also means that women and families have to find a place to stay to wait until they go into labour, and again for a few days after they have had their baby. This can be difficult as women do not know how long they will need to be out of their community.

WHAT WE HEARD

Experiences of leaving the North Island



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I would definitely prefer to like give birth up here and be able to be home and comfortable, (be)cause travelling does take a lot out of you... I had to be in [city] for so long. (Mom)

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Reasons for leaving the community to give birth

- Moms being unaware that they can deliver in North Island
- Being high risk
- Wanting Midwifery care
- Low confidence in the local service



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I think there's so many different perceptions about the doctors and nurses and their abilities and capabilities in delivering up here, so I think that would need to change somehow, that we have the services. If we change the services, that's great, but we also have to change the perception of... that people have about safety up here, and whether that would be an option for them. (Mom and nurse)

But definitely... you were just told... You just don't have babies up here. That's just the way it is... you go down island to give birth. (Mom)

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Provider experiences

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I think a lot of traditions and cultures are lost because they are not even an option and historical birthing practices are not even relevant because it's not really possible. Or having to go through emergency services and the stress of a hospital that can't deal with it. (Community health worker)

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WHERE WE ARE HEADING

Now we are working on a framework for what sustainable rural maternity care in the North Island could look like. We are creating a plan by looking at the five community- and provider-developed “building blocks for sustainable rural maternity care”. We will continue coming back to the North Island at every stage of the project so we can continue to work with the communities.

Increased Provider Confidence

In small communities with only a few local deliveries a year, it is difficult for care providers to feel confident attending births because they don't get enough experience. To understand how to increase provider confidence, we will be doing a survey with nurses to ask them about their experiences with labour and delivery, and what they need to feel more confident. We will also be talking with physicians about what they need to feel more confident.

Who can stay to deliver?

Right now, many mothers are told they have high risk pregnancies and because of this, can't give birth in Port McNeill. Health care providers must be cautious when making decisions about who can birth on the North Island as there is no possibility to do caesarean sections locally if a birthing woman runs into trouble. The safety of the mom and baby must always come first. We will work with specialist physicians from the Society of Obstetricians and Gynecologists of Canada and local care providers to look at what other communities without local caesarean section are doing to determine safe and acceptable risk criteria.

Inter-professional Care Teams

When talking with mothers in the North Island, we are hearing that many leave their community for midwifery care. In this building block, we will consider what it would look like for midwives to practice alongside Physicians and Nurse Practitioners in the North Island.

Timely and Reliable Patient Transport

We will be looking at the best way to transport moms. We will talk with paramedics and care providers in the North Island and in Campbell River to understand what challenges they face. We will also be talking with moms who have been transported in labour to better understand how to improve the experience of emergency transport. Together, all of these perspectives will lead to recommendations for emergency transport for pregnant women.

Virtual Technologies to Link with Referral Centre

We are working with the MOM (Mobile Maternity care) project, using tablet technology to link care providers in the North Island with specialists in Campbell River. Mobile Maternity also allows the patient to “meet” with her out-of-town Obstetrician using a computer monitor, video camera and microphone. This lets the patient and specialist doctor feel as if they were both in the same room. By talking to moms and care providers, we will look at how we can use this technology to make giving birth in the North Island a more comfortable option.

What would make you comfortable to give birth in the community?

If you have any **further questions or feedback** we would love to hear from you!

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