Maternity Strategy Update



Provide an equitable service in access and outcome terms, tackling the multiple dimensions that affect local healthcare inequalities driving unwarranted variation in maternity

Equity in access and outcomes

Our services will deliver equitable care that promotes the health and wellbeing of service users by working to understand their needs.

Improve our approach to delivering maternity services, including our working methods and both physical and digital environment, with a focus on women centred care; discovery and innovation.

Embrace opportunities to innovate and improve

Within our department we will provide a positive learning environment and opportunities to develop. We will learn from others and learn from excellence.

Foster a culture of development and support for our workforce, taking steps to increase visibility of senior staff and enable people to attend training in support of their development.

Culture of development and support

We will give staff the tools and opportunities to drive service improvement forward.

Incorporate learning from neighbouring centres of excellence and incorporate real-time feedback from service users to provide insights to improve services and identify opportunities for our teams to continue delivering excellent care and support.

Learning

Within our department we will provide a positive learning environment and opportunities to develop. We will learn from others and learn from excellence.

Improve the quality and quantity of engagement with our workforce and service users, and implement suggested changes from feedback.

Effective listening and communication

We will develop communications for both our staff and our service users. We will ensure communications is clear and concise not relying on stereotypes or outdated concepts. Ensuring materials are available in alternative formats and languages.

Position ourselves at the regional employer of choice.

Staffing and Retention

We will improve the experience of our staff and make sure they stay with us for longer. We will advance our understanding of staff experiences and look at how we can make it better.

Equity in Access and Outcomes

Provide an equitable service in access and outcome terms, tackling the multiple dimensions that affect local healthcare inequalities driving unwarranted variation in maternity

Ethnicity recorded at booking for >95% pregnancies

Ethnicity included in all outcome reports on TIPS, this helps us understand the population that we serve

Our driver metric - which is something we work on improving is delayed bookings and why it is happening and how we can fix

We looked at how people accessed our services and how we could improve

Engagement with wider stake holders including BOB LMNS equity work stream

We have close working relationships with MNVP, and work with our wider engagement and community engagement partners

We have some continuity teams in place and working to monitor, share outcomes and increase in the future

We have devised a dashboard to have good oversight of key outcome measures

Perinatal mortality focus on impact of ethnicity and deprivation

We have developed an Equity action plan

We have set up a 'Equity in Access and Outcomes Forum' supporting the work we are doing

ATAIN is a national 'ask' which we continue to focus on(avoiding term admissions) and inequalities is a metric which we monitor.

We have a Health in pregnancy team- which supports with to stop smoking

We have a new provider in place to support our translation service

BFI support is available to all

Personalised care and support plans are in place to support woman



Our services will deliver equitable care that promotes the health and wellbeing of service users by working to understand their needs

Future Work:

Updating and benchmarking against current EDI action plan and using this to pull together the different work streams on equity

Access to services e.g. how to make booking appointments open to everyone (can be included in above)

Infographics / communication strategies for EDI work (can be included in above)

Pathway for neurodiversity including but not limiting to autism

Review our AN education

Neurodiversity work to include pathway/ guideline and support

Cultural understanding of our population / identification of vulnerabilities

Learning from works well (seeking sanctuary/ C of C models)

Communication strategies: Translation and interpretation, supporting our services users

Translation cards for access to triage

Working to baseline, Look at equity for all not just ethnicity but all protected characteristics

Listen to the community voices learn about cultural differences (Services users and staff)

Infographic sheet with emoji's instead of words for easy translation

Access to services and poverty consideration of travel, digital access etc

Understand and improve the experiences of our service users from Black and Asian ethnicities

Review and strengthen pathways for maternal mental health

Embrace Opportunities to Innovate and Improve



Improve our approach to delivering maternity services, including our working methods and both physical & digital environment, with a focus on women centred care; discovery and innovation.

We have developed a 24/7 MAU with face to face triage to ensure women and birthing people are seen according to acuity, we use a digital BSOTS

We have a separate MAU and DAU which has supported improved flow

PSIRF implementation which supports improving outcomes for mothers and babies

We have implemented Saving babies lives to support a reduction in neonatal mortality and morbidity

Participation in the Maternity incentive scheme ensuring patient safety remains at the forefront of care

We continue to work to improve the experience for women who require HDU/ Recovery input

Within our department we will provide a positive learning environment and opportunities to develop. We will learn from others and learn from excellence

Future Work:

We will ensure we have embedded our Translation and interpreter services, particularly for outpatients

We will ensure we focus on staff involvement and support including 'minor' events where the aim is to learn from themes and 'major' incidents which impact on staff who are not directly involved

We plan to increase research portfolio / university status

Antenatal education-consideration of antenatal workarounds restarting

We are working to review our model of care; including high monitoring, discharge processes

Avoiding unnecessary delays in the patient journey from admission, through labour birth and the postpartum period by focusing on 'flow 'through maternity

We are reviewing our induction and caesarean section capacity ensuring that it meets demand, and allows us to safely respect patient choice

We will work to ensure we are not wasteful and looking at improving our waste management

We are working hard to bring our overspend down

Aspirational Work:

Bereavement care for losses under 16 weeks (In collaboration with gynae)

We have an ambition to improve preconception counselling

Culture of Development and Support



Foster a culture of development and support for our workforce, taking steps to increase visibility of senior staff and enable our people to attend training in support of their development.

Freedom to Speak up ambassador in maternity

Board level Safety Champions undertake walkabouts across maternity

Development pathways in place including career conversations

Safety communication boards

We have falling vacancies and turnover rates

We hold listening events when concerns are raised

Leadership Quadrumvirate across maternity and neonates supporting a collaborative approach to perinatal services including reviewing culture survey results and acting on findings

PMA team in place and visible across maternity

Trauma informed care training

We have Trust wider RISE talent management

We have systems in place to review obstetric job planning

We ensure we are learning from excellence

We will give staff the tools and opportunities to drive service improvement forward

Future Work:

We are reviewing the labour ward coordinator competency framework supporting our band 7's in their roles.

SCORE survey actions/psychological safety actions

Evaluation and promotion of TRIM

We want to ensure that our Leadership team have access to support and development in their roles

We will ensure that staff feel valued, positive messaging in the right place and right time.

Celebrating success and encouraging the teams to share feedback with peers when things have done well

We will work with the trust psychologist to ensure psychological support is available to those who require it

We will be taking the You said We did/celebrations to workvivo and onto the wards!

We will be using maternity workvivo as our communication channel- The purpose of the maternity workvivo space being: A maternity only space and is for sharing information, learning and celebrating our great team!

We will encourage reflective journals to share between teams and looking at 'day in the life' on workvivo so people can understand roles and demands of others

We intend to assess staff burnout and what we need to do to reduce this

We recognise that it may be difficult to access and guidelines on the website and we are looking how to improve

Aspirational Work:

Supportive annual review at departmental level separate from their trust appraisal – to encompass similar processes to the ARCP annual review that deanery trainees have

Learning



Incorporate learning from neighbouring centres of excellence and incorporate real-time feedback from service users to provide insights to improve services and identify opportunities for our teams to continue delivering excellent care and support.

All staffing groups that work in maternity are consistently 90% complaint with mandatory maternity specific training

We have a robust training needs analysis(TNA) guideline in place which is reviewed regularly

MDT educational group (MET) including MNVP

Maternity and Neonatal Safety and Compliance committee which is where work is monitored

We have Patient safety boards in all clinical areas which shares key messages

We have increased our training allowance

We work very closely with the MNVP and get regular feedback which we use to improve services

Learning from excellence

We work to the Core competency framework for our learning

Network approach to training ie fetal monitoring, medicines management

Within our department we will provide a positive learning environment and opportunities to develop. We will learn from others and learn from excellence

Future Work:

We will be Implementing the Learning Environment Charter which will impact on all staff

We aim to improve input into UWL curriculum

We are going to work on how we do wider learning/ gain feedback from learning- including meaningful evaluation of study days/ Wider learning from Compliance (Ockenden etc.)

We are going to further roll out the Trust wide methodology 'Improving together'

We want to learn from our service users 'Asking what we can do to improve their experience'

Student MW's attend MNVP Feedback sessions – for learning

Aspirational Work:

Demonstrate our ACP roles are benefitting / or adding value to the service- Could we have more midwives to train to be ANPs and these ANP will be on nights and weekends predominantly supporting the out of hours clinicians

Effective Listening and Communications



Improve the quality and quantity of engagement with our workforce and service uses, and implement suggested changes from feedback

We have Friends and family survey available in digital and paper formatwhich has helped us with uptake on the survey

We work with the patient experience team when responding to PALS and complaints ensuring a robust process

Our MNVP works hard to get service users voices heard and have good links with diverse groups

We have a perinatal befriender role who supports our work to get all voices heard

As part of the MNVP we have community engagement partners, who go out and speak to our partners and women who access these services

We ensure women have personalised care and they are actively involved in their care and support plans

We have a robust escalation plan, which clearly demonstrates how staff can access support as and when required 24/7

We will develop our communication for both our staff and the families we serve. We will ensure our communication is clear and concise –and does not rely on stereotypes or outdated concepts. We will make sure materials are available in alternative formats and languages

Future Work:

We want to develop our communication offer for service users to include revamp for leaflets, website and also for staff including access to guidelines and work related information

We want to ensure all staff voices are heard and involved in work plans and changes within the department

We will continue to strengthen neonatal partnership working

We will ensure listening is facilitated and supported and acted upon for all groups not just who we think 'needs it'- this is for women and staff

We will utilise workvivo for information sharing including Live Q and A sessions

Aspirational Work:

Shadowing opportunities for staff to support understanding of process

Staffing and Retention



Position ourselves as the regional employer of choice.

We have a downward trajectory for vacancy and turnover rates

We have lead midwives in place to support recruitment/ and retention (including IEM recruitment), this also includes staff development pathways

We provide monthly assurance and reporting to Trust recruitment and retention team and within Maternity Services/Clinical governance.

We have been able to uplift our Band 2's to Band 3's

New Band 4 role has been developed

Pathways in place to support 'Student to NQM'

For our IEM's we have held some listening events and also looking at IEM development

Positive CQC inspection and now rated 'Good'

We have been able to offer apprenticeships within maternity

We have undertaken work to support MSW retention

Quarterly education governance meetings held with resident doctors to hear and act on their feedback

Feedback has been excellent making us the most popular training site according to the 2024 survey thus supporting our rota management and reduction in costs

Champion the training of Locally Employed Doctors (LED) which has led to many gaining their consultant certificate (CCT) and remaining within the organisation

Diversity within the consultant body including gender, ethnicity and training routes

We will improve the experience of our staff and make sure they stay with us for longer. We will advance our understanding of staff experiences and look at how we can make it better

Future Work:

We are working forwards increasing diversity within senior midwifery leadership team

We want to ensure recognition of innovations and support staff to innovate, teamworking

We want to focus on teamworking across professions starting at the top, understanding and appreciating each other's roles to improve the culture

We will reduce overspend by driving down temporary staffing costs

We want to ensure supportive annual review at departmental level and embed the Rise programme

Improve access to the shared drive and cleanse

Provide leadership for the LED programme across the organisation

Continue to hear the voices of resident doctors and respond to their feedback

Aspirational Work:

Mystery shopper staff to see alternative perspectives

15 steps for staff- community coming into unit etc. impact of working environment on staff