

## Maternity Clinical Network Headlines: January 2017

### Clinical Network Working Groups

#### 1 Maternal Morbidity and Mortality working group

The group is finalising a work programme to address the themes from the annual report of maternal deaths, which will align with the patient safety work stream of the Maternity Transformation Programme. The maternal death case review for 2016 is underway and a thematic report for 2016 will be developed. The group is targeting areas of severe morbidity alongside continuing work around maternal death; it will also undertake the audit of the continuity of care toolkit and oversee the bereavement project, which aims to provide a toolkit for best practice around bereavement care.

#### 2 Maternity Commissioning Advisory Group

The meeting has focussed on sharing best practice and information regarding: developing Local Maternity Systems (LMS) CCG IAF indicators, working with Local Authorities and mapping Maternity Services Liaison Committees.

#### 3 Models of Care working Group

In light of the Maternity Transformation Programme the Models of Care group has been dissolved, with each LMS considering the local application of the Maternal Choice and Personalisation work-stream. The network will continue to provide audit data on continuity of care and data on use of MLUs and homebirth.

#### 4 Postnatal working group

Following the recent postnatal survey, the group have identified areas for improvement regarding discharge to community, especially out of borough. The group has started working on two work streams:

- Standardised discharge summary template
- Standardised information given to women at discharge

Members for each work stream have been identified and the group is looking for commissioners and GPs to strengthen membership.

#### 5 Stillbirth working group

The working group is proposing to expand its remit into early neonatal death and brain injury for term births, to ensure alignment with the vision in Better Births. Consequently, it will be seeking expressions of interests to join the group from midwives specialising in safety roles, obstetricians, neonatologists and neonatal pathologists. Current projects are:

- The DESiGN Trial, a cluster randomised controlled trial to evaluate the effect of the Growth Assessment Protocol (GAP) programme is progressed. 11 Trusts have been randomised in London and training will be rolled out in

the next 3 months, with the DESiGN project leads to meet monthly.

- Gestational diabetes- a gestational diabetes survey will be circulated with the aim of understanding variations in screening across London.
- Fetal Monitoring toolkit will be reviewed in February 2017.
- All of the London Trusts have now submitted Care Bundle 5 audits.

## 6 User Experience working group

The group has begun to map existing Maternity Services Liaison Committees with the aim of sharing information and best practice to strengthen service user voices locally and prepare areas for forthcoming national guidance.

## Other Updates

### 7 Continuity of care audit

The Clinical Network is currently analysing results from the second Continuity of Care Audit, which was completed by trusts in November 2016.

### 8 Core pan-London maternity dashboard

The final version of the dashboard has now been agreed and circulated to the five areas of London with a FAQ sheet to accompany it. Submissions for Q3 data (October-December 2016) have been requested by end of January 2017 and each Local Maternity Systems will have an identified lead responsible for sending data to the London Maternity Clinical Network. Please submit data centrally to [england.maternityscn@nhs.net](mailto:england.maternityscn@nhs.net).

### 9 Perinatal mental health

The 3rd annual Perinatal Mental Health conference is being held on Wednesday 25<sup>th</sup> January.

## Maternity Transformation Programme

Following the publication of Better Births, the NHS has developed a Maternity Transformation Programme to implement the vision of ensuring safer, more personalised care for all mothers, babies, and families and to halve the number of stillbirths, neonatal and maternal deaths and brain injuries by 2030.

The national transformation programme is being delivered through nine Workstreams, which are outlined in Appendix One. A key role of the first work stream is supporting local transformation, through the establishment and effective operation of Local Maternity Systems.

**What is a LMS?**

Better Births recommended that providers and commissioners should come together across a footprint of half to one and a half million to plan and deliver local maternity services. In practice they should normally be co-terminus with STP footprints. The LMS should include the following wherever they are involved in the planning or provision of maternity services:

- All commissioners: CCGs; Specialised commissioning; Local authorities
- All providers who deliver local maternity care:
- NHS acute trusts, representing:
  - Obstetric services
  - Neonatal services, including operational delivery networks
  - Midwifery units
  - Home birth services
  - Mental health trusts
  - Ambulance trusts
- Community trusts providing maternity services
- Independent midwifery practices providing NHS services
- Charities providing NHS services
- GPs
- Health visitors
- Service users:
  - A forum for engaging with representative of local women (e.g., MSLC)
  - Local stakeholders and charities representing service users

**What are we expecting them to do?**

- Develop and implement a local vision for transforming maternity services based on the principles of Better Births:
  - Assessment of local needs/gap analysis
  - Agree what needs to change (e.g., community hubs)
  - Be clear about the role of individual organisations, units and teams within the LMS
  - Work together to implement it
  - Keep it under review

**Put in place shared clinical governance:**

- Shared processes and procedures, particularly around working together (e.g., referrals, diagnostics)
- Transfer protocols
- Shared training offer
- Shared staffing, where appropriate
- Cross-LMS review of data, including patient experience data
- Shared learning when things go wrong

(National team: Delivering the Maternity Transformation Programme: responsibilities at national, regional and local level, Dec 16)

In order to implement the vision in Better Births, the national transformation programme has set each Local Maternity System the following tasks:

Establish your Local Maternity System to design and deliver maternity services across boundaries:

- by March 2017 create an LMS coterminous with the STP Footprint and involving all commissioners and providers of maternity services, as well as service user fora (e.g. MSLCs)
- by October 2017 establish a shared vision and plan to implement Better Births by the end of 2020/21

Plans to implement the vision in Better Births will need to include delivery of the following by end 2020/21:

Improving choice and personalisation of maternity services so that:

- all pregnant women have a personalised care plan
- all women are able to make choices about their maternity care, during pregnancy, birth and postnatally
- most women receive continuity of the person caring for them during pregnancy, birth and postnatally\*
- more women are able to give birth in midwifery settings (at home, and in midwifery units)\*

Improving the safety of maternity care so that by 2020/21 all services have:

- made significant progress towards the 'halve it' ambition of halving rates of stillbirth and neonatal death, maternal death and brain injuries during birth by 50% by 2030
- are investigating and learning from incidents, and are sharing this learning through their LMS and with others
- fully engaged in the development and implementation of the NHS Improvement Maternity and Neonatal Quality Improvement programme
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**National Team: Delivering the Maternity Transformation Programme: responsibilities at national, regional and local level, Dec 16**

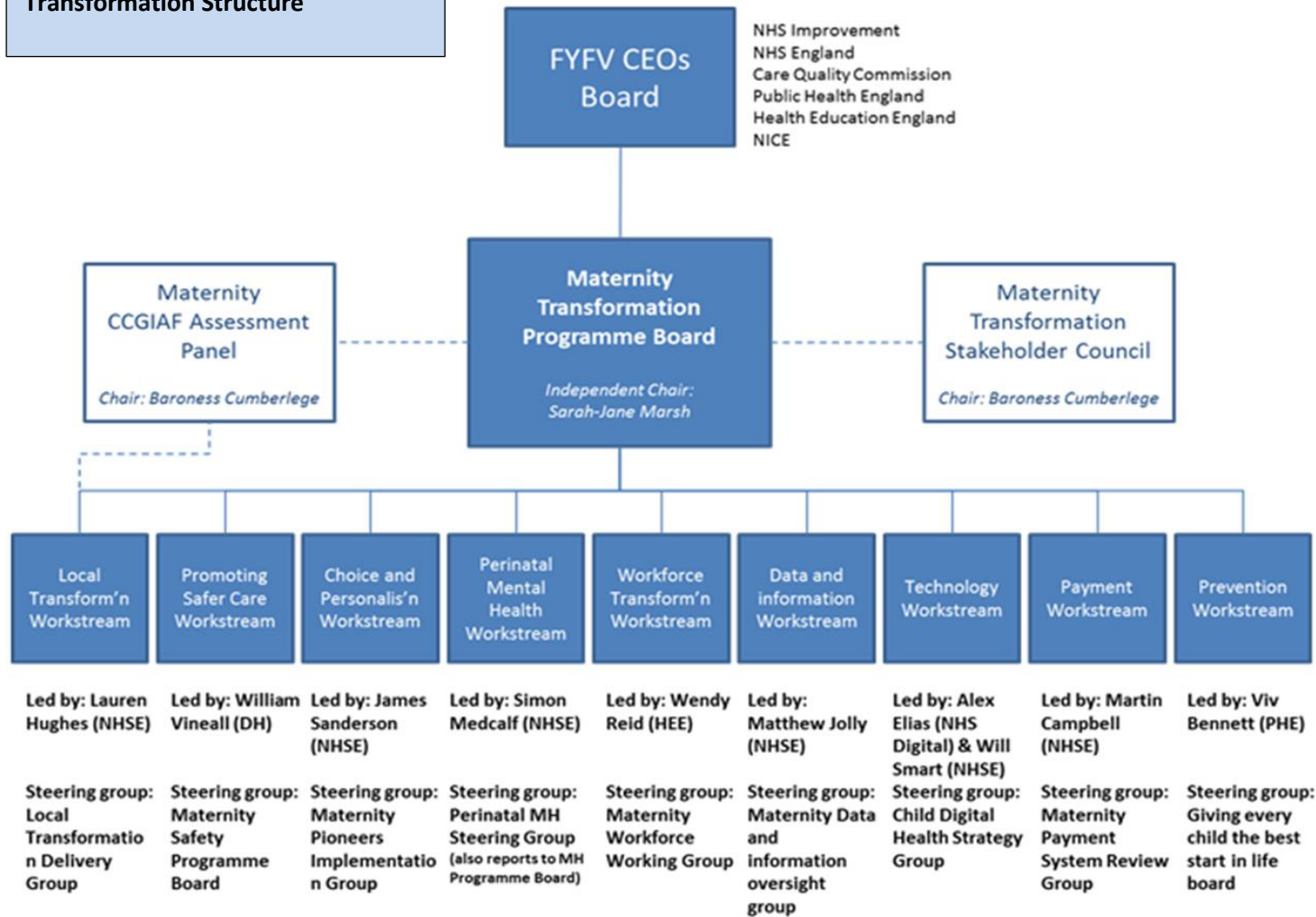
## London Maternity Transformation Programme Board

Within London, a Maternity Transformation Programme Board has been established, chaired by Jane Clegg, Director of Nursing. The initial meeting was in December; the group will meet bi monthly and the next meeting will be held on 1<sup>st</sup> February 2017. There will be representation from each Local Maternity System on the Board.

## Future development of the London Clinical Network

The London Maternity Clinical Network continues to have a key role in providing clinical advice and evidence across the system, including to the Transformation Board. The network will work in partnership with clinicians within the Local Maternity systems to improve care across London. Please see Appendix 2 for the draft local structures.

**Appendix 1- National Maternity Transformation Structure**



# London Maternity Clinical Network

## London Clinical Networks

### London Clinical Networks

Appendix 2- London Maternity Transformation Board (draft for Board 01.02.17)

