

Trusts given five years to achieve safe midwife staffing

By Annabelle Collins 31 March 2023

NHS England has published its three-year maternity delivery plan

It aims to make maternity and neonatal care safer

Trusts must employ enough midwives to safely staff services within five years

NHS trusts have been given until 2027-28 to employ enough midwives to meet safe staffing requirements, NHS England's new maternity delivery plan has said.

The three-year delivery plan for maternity and neonatal services was published yesterday and sets out to “make maternity and neonatal care safer, more personalised and more equitable for women, babies and families”.

It says: “Trusts will meet establishment [requirements] set by midwifery staffing tools and achieve fill rates by 2027-28, with new tools to guide safe staffing for other professions from 2023-24.”

The plan follows a series of high-profile maternity scandals in the NHS at Shrewsbury and Telford, East Kent, Morecambe Bay and an ongoing independent review by Donna Ockenden into Nottingham University Hospitals Trust. The Care Quality Commission has highlighted a string of other concerns across the NHS.

In the wake of Ms Ockenden’s December 2020 Shrewsbury and Telford investigation, trusts were told to improve staffing but most found they could not recruit enough and/or didn’t have enough funding. Short staffing has led to a flagship model aimed at addressing mortality rate inequalities to be widely put on hold (see below).

The new NHSE plan says that in order to achieve recommended “fill rates”, trusts must develop a workforce plan and seek to fill vacancies including “newly qualified staff and clinicians who want to return to practice”. In 2023-24 trusts must implement “evidence-based retention action plans” to “positively impact job satisfaction and retention”.

It calls on integrated care boards to “commission and fund safe staffing across their system... agree staffing levels with trusts... and work with trusts and higher education institutions to maximise student placement capacity, ensuring the breadth and quality of clinical placements”.

NHS England says it will help to get enough staff by “boosting midwifery workforce supply across undergraduate training, apprenticeships, postgraduate conversion, return to midwifery programmes, and international recruitment”. On neonatal staffing, it will help by “providing direct support, including through operational delivery networks”.

Continuity of carer

Within the personalised care “theme”, NHSE’s plan says trusts must “consider the rollout of midwifery continuity of carer in line with the principles around safe staffing that NHS England set out in September 2022”.

Aimed at improving care, particularly for minority groups with poorer outcomes, the CoC model was promoted in 2016’s *Better Births* review, and the NHS long-term plan, but was controversial because of the additional strain on stretched staff. After tensions within NHSE and the profession it appeared to be scrapped for the foreseeable future in September last year. It appears it will be brought back under the new plan, if and when there are enough staff.

NHS England also said it will “convene a taskforce” to report by the autumn on Bill Kirkup’s recommendation of an early warning system to detect safety issues in maternity and neonatal services, using “relevant data in local services”.

Other key commitments in the review include:

- Funding to increase and “better align” neonatal cot capacity throughout 2023-24 and 2024-25;
- Implementing an NHS-wide approach this year to handling safety incidents and support families; and
- By 2024, to update the “saving babies’ lives care bundle” guidance, which sets best practice checks and interventions to reduce stillbirth and early neonatal death.

In a letter to trusts, integrated care systems and senior regional managers, NHSE chief nursing officer Ruth May, chief operating officer David Sloman and national medical director Steve Powis said some families had experienced “unacceptable care”, and “with incredible bravery have challenged us to improve”.

“This plan aims to deliver change rather than set out new policy. It seeks to help each part of the NHS to plan and prioritise their actions by bringing together learning and action from a range of national reports and plans into one document,” the letter says.

It adds that “trust and [ICSs] will play a critical role working with their maternity and neonatal leaders to improve services, ensuring they have what they need to make care safer, more personalised and more equitable”.

Source

<https://www.england.nhs.uk/wp-content/uploads/2023/03/B1915-three-year-delivery-plan-for-maternity-and-neonatal-services-march-2023.pdf>

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