

Report of the agreed action plan following the Health Scrutiny Review and development of the Maternity partnership board between LBTH, THCCG and Royal London Hospital, Bart's Health.	September 2016
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Title	Action plan following the Health Scrutiny Review and development of the Maternity partnership board between LBTH, THCCG and Royal London Hospital, Bart's Health.
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Purpose	The Health Scrutiny Panel (HSP) identified the performance of maternity services at the Royal London Hospital (RLH) as the subject for a review in its work programme for 2015-16. There are a number of recommendations of the report that have been themed under 4 headings to enable services to implement and support on-going improvements
Previously considered by	Women's Health Quality, Safety and Assurance committee

Related Trust objectives	
<p>Maintain a relentless focus on delivering high quality, safe and compassionate care for women and babies.</p> <p>Meet all national minimum performance standards and regulatory requirements, delivering consistent and standardised clinical practice.</p>	

Risk and Assurance	This overview report provides an update following receipt and subsequent analysis of the Health Scrutiny Panel of the London Borough of Tower Hamlets Report of Maternity Services at the Royal London Hospital
Related Assurance Framework entries	London Safety Standards 2013 Care Quality Commission (CQC) State of Care Report 2015 CQC Report Bart's Health 2015 Maternity Survey Bart's Health 2015 Health Watch England Briefing on Maternity Care 2015 The National Maternity Review 2016

Legal implications/ regulatory requirements	This report provides assurance against the Operating Framework and the regulatory requirements
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INTRODUCTION

The Health Scrutiny Panel (HSP) identified the performance of maternity services at the Royal London Hospital (RLH) as the subject for a review in its work programme for 2015-16. The review commenced in September 2015 and completed in April 2016. The Panel wanted to find out the extent to which patients' experiences have improved since the move from the old Royal London Hospital (RLH) to the new site which opened in 2012 and to examine the improvement plans that Barts Health Trust (BHT) and the Tower Hamlets Clinical Commissioning Group (THCCG) have developed. Through listening to patient feedback the review explored the extent to which women are involved in monitoring and planning services and how accessible and responsive services are for people from different social and equalities backgrounds. The Panel members were also keen to understand the reasons for the differences across the sites (RLH and Barkantine Birth Centre) and the extent to which various improvement plans were impacting on the quality of patient experience. The overall aim of the review was:

- To understand the reasons for differences in patient experiences from the Barkantine Birth Centre compared to the RLH;
- To assess the actual and planned impact of various initiatives and programmes that Barts Health Trust (BHT) has put in place to improve patient experience in maternity care;
- To evaluate evidence from a range of sources of data in order to understand whether there are inequalities in terms of the quality of patient experience that affect particular groups or communities.;
- To look at the role of local community services that are designed to support pregnant women through their pregnancies and birth and how these services can be developed further;
- To explore the extent to which local women are involved in planning and monitoring services.

It was recognised that a key challenge in terms of presenting an overall picture of the quality of patient experience is the availability of quality assured data from a range of sources. National surveys (Picker Institute) only offer a snapshot at a point in time and there is usually a significant time lag between event and data capture and response rates to such surveys tend to be low. This undermines confidence that the results are representative and without an overarching system for bringing this altogether in one place. The main objective of the review was therefore to produce informed and practical recommendations based on the evidence gained to help the RLH and partners improve maternity care for the future.

BACKGROUND

Annually 5,300 women give birth in Tower Hamlets, and the majority of them have their babies at the RLH. Clinical outcomes at the RLH are excellent, and the hospital deals with a high proportion of complex, high acuity births. However, a number of inspections and investigations that have taken place in the last two years; most significantly the report of the Care Quality Commission published in May 2015 have raised concerns about aspects of the service, for example long delays in waiting areas and inadequate staffing levels. It is recognized that issues such as staffing deficits can impact on patient care.

The birth rate in Tower Hamlets is increasing, with approximately 500 extra births per year expected by 2024. According to the latest population projections, the anticipated birth rate for 2019 has already been exceeded in 2015/16. This is a substantial number and it will be a challenge for services to ensure this extra need is met to a sufficient standard. 39% of children born or living in Tower Hamlets is in an income deprived family and Tower Hamlets remains the most deprived authority nationally in terms of income deprivation of children.

A key factor which influences maternal outcomes is the ability of women to speak and read English. Those who cannot communicate effectively in English have problems with understanding and being understood by health professionals due to the language barrier. Low health literacy also has a negative impact on patient experience in terms of the ability to comprehend information relating to pregnancy. In Tower Hamlets, 35% of the local population overall do not speak English as their first language. Nationally the level is less than 10%.

This review has shown that it is difficult to pull together an entirely accurate and representative picture of patient experience at the Royal London Hospital. The hospital achieves excellent clinical outcomes which is a significant achievement given the large proportion of highly complex births. However, in order for patient experience to reach an equivalent standard for all women the evidence from the review recommends a number of actions to be supported through joint working with Bart's Health Trust and partners with a renewed appetite of working together to improve maternity services for the future.

Glossary

Always Events	NHS England improvement project – events that should always happen
Band 4 TC support	Band 4 staff supporting the ‘Transitional Care’ unit
Birth Reflections Clinics	Senior midwife led clinic for women to discuss their birth experiences
BFI	‘Baby Friendly Initiative’
Bump Start	Local service for pregnant women that provides health information
Doula service	Volunteer service to support women in labour
Education providers	University providers of midwifery education
EMBRACE	National enquiry into maternal and infant death
IWGC	‘I Want Great Care’ – system for women to feedback on their experiences
GE antenatal questionnaire	‘Great Expectations’ in maternity care – staff development project that supports focused activity to get feedback from local women
K2 intrapartum bundle	Electronic monitoring system and clinical decision making bundle
LIA event	‘Listening Into Action’ events
Mama Academy	National health improvement initiative for health in pregnancy information
Maternity APP	Maternity electronic application for mobile phones etc.
Maternity Mates	Team of local women who support women during pregnancy and labour
Midwives understanding Mothers Event	‘MuM Events’ – held in the maternity unit where midwives and mother’s discuss maternity services
MSW	‘Maternity Support Worker’
MuMs collaborative	Midwives and mother’s working together to improve maternity services
MY BODY BACK clinic	New clinic led by senior midwives for women who have experienced sexual violence
Net Mums	On line service for mother’s
NHSE	National Health Service England
NHS Choices	On line NHS website to view maternity offers in the UK
Parent education feedback	A midwifery parent education and birth preparation service
REACH	Bart’s Health 5 year study to improve early access to antenatal care
REACH pregnancy circles	Group antenatal care for women across Bart’s Health
SBAR	A safety handover of care tool for use in clinical practice
LBTH	London Borough of Tower Hamlets
You said – we did	Feedback from women ‘you said’ and actions taken ‘we did’

To help structure the response to the HSP review, Bart’s Health have grouped the recommendations into four clusters.



Culture
Workforce
Feedback
Partnerships

THEME 1 – CULTURE

Cultural understanding will be further developed with staff groups through observation and teaching to enable better understanding of the needs of women and families in the delivery of personalised care.

Action	Date	Responsibility
Recommendation 1 That Bart's Health Trust explores how it can further implement good practice on offering compassionate care, particularly for women who have had traumatic births and those who do not speak English as their first language.		
<p>Bart's Health launched 'Birth Reflections Clinics' at the Royal London Hospital in May 2016 (now rolled-out across all sites). These clinics are jointly run with consultant midwives, specialist midwives and psychologists from the perinatal mental health service and create a space for women with specific, complex needs to discuss their birth. Appointments are long enough to allow women to take time to go through issues and explanation with professionals. Onward referral to counselling and other services can be made directly from here. Advocates are also available for these sessions and can be pre-booked through the midwifery teams.</p> <p>A 'Birth Reflections Clinic' leaflet has been completed for distribution throughout the maternity service and will be shared with GP practices. A poster is being developed for display in the maternity unit and birth center that will help to raise the profile of the service.</p> <p>Women who attend these clinics are being continuously audited to gain an insight into their experiences which will inform the maternity unit about areas of practice they may wish to change. The audit also involves ensuring that women can feedback their experiences of the clinic itself to allow for future development. The first evaluation report for the service is due to be published in December 2016.</p>	April 2016 On-going	Bart's Health/Education providers and LBTH

<p>The 'Midwives Understanding Mothers' (MuM) collaborative was launched in May 2016. The programme is exploring ways that the maternity service can engage with mothers and families to better understand the needs of local service user and enable future planning of services to involve the voice of women.</p> <p>A number of events have taken place and have had the interest of NHS England (NHSE) which is now supporting a joint design of priorities. The development of three 'ALWAYS EVENTS' has been the outcome. 'ALWAYS EVENTS' relate to activity that should always happen in a service. The joint design of these has meant that the maternity service will be focusing on three areas of improvement: 1) women's experience of the service, 2) staff experience of working in maternity services and 3) information for women through the development of a maternity app for mobile devices.</p>	<p>June 2016 On-going</p>	<p>Bart's Health</p>
<p>The Maternity Service has started 'REACH' pregnancy circles. These enable groups of women who have similar expected due dates to meet together with their local midwife to support a number of activities of antenatal care. This project is being jointly run with University of East London (UEL) as a part of a 5-year research study of the delivery of antenatal care to enhance accessibility for all women.</p>	<p>July 2016 On-going</p>	<p>Bart's Health</p>
<p>The service has implemented 'MY BODY BACK' clinic. This is a midwifery initiative that is supported by a charity that provides counselling advice and support. The service is focused on giving a higher level of support for women who have suffered from sexual violence or rape. Women can access this clinic pre-conceptual and in pregnancy, or even after some time following the birth of a baby. The clinic is the first of its kind in the UK and has expanded its sessions since it commenced in August 2016.</p>	<p>August 16 On-going</p>	<p>Bart's Health</p>
<p>'Bump Start' is a project that provides antenatal care and advice for women. The service supports parent education and mother and family wellbeing. Details of the service are provided in the antenatal clinic for women to access</p>	<p>In place</p>	<p>Bart's Health/Education providers and LBTH</p>
<p>'Always Events' are being developed to support staff and engagement monthly events, aiming to build compassion and resilience and reduce stress within the workplace. As part of this the 'Caring for Staff' programme will be launched to better equip staff to deal with stressful</p>	<p>September 2016 On-going</p>	<p>Bart's Health</p>

<p>situations and periods of high activity on the unit, and improve staff wellbeing and understanding. The training programme will be run through a series of sessions and will be expanded in 2017 to include situational awareness. The first session took place at the Royal London Hospital in September 2016 and focused on mindfulness, supporting staff to be more resilient, to cope better under pressure from a busy environment and to communicate more effectively.</p>		
<p>The Director of Midwifery and the Hospital Director have secured external support to enable a deeper understanding of cultural experiences and behavior of staff within maternity services. This will enable observation and discussion of cultural awareness and understanding amongst staff, and will lead into training sessions in December 2016.</p>	<p>Dec 2016</p>	<p>Bart's Health</p>
<p>Recommendation 5</p> <p>That Bart's Health Trust ensures that it incorporates the findings and recommendations from the National Maternity Review in terms of how it tailors support to women who do not read and speak English.</p>		
<p>The Maternity Service has a number of processes in place to support women who do not speak English:</p> <ul style="list-style-type: none"> • Advocates provide support for antenatal care for the one-stop booking service, and explanation of scan results. Advocates are also present for parent education sessions in the community and in the maternity unit. • The 'Maternity Mates' service is a voluntary service that supports women who are unsupported during their labour and provides a service for women who do not speak English. <p><u>Concern</u> – For extra advocates additional resources will require funding. A review of advocacy services is proposed to ensure it is providing quality support.</p>	<p>On-going</p>	<p>Bart's Health / CCG</p>
<p>Recommendation 10</p>		

<p>That Bart's Health Trust strengthens its discharge planning with patients and ensures that adequate time is taken for patients to understand the information provided and that it reflects their needs and choices. This is particularly the case for women who do not speak English as a first language.</p>		
<p>The Maternity Service is currently reviewing the offer of more detailed birth discussion for women prior to their discharge from hospital. This service would be offered to all women as a part of encouraging women to feedback on their experiences, ask questions, support information for questions women may have and ensure that women are prepared for discharge home with their new baby. Guidelines will be created to standardise discussion for midwives to follow. This will be shared with the Maternity Services Liaison Committee (MSLC).</p>	<p>October 2016</p>	<p>Bart's Health</p>
<p>A 'New Discharge Home' pack has been developed for all women. A discharge home interview is being planned as detailed above. Further development of a video and booklet is in progress. These will give simple messages to women about their care at home, the wellbeing of the mother and baby, feeding and immunisation advice.</p>	<p>August 2016 Completed pack Booklet in progress</p>	<p>Bart's Health</p>
<p>Bart's Health formed a collaboration with the 'Mama Academy' in 2016. This is a national charity that provides mother and baby wellbeing information. The Royal London now purchase and provide the 'Mama Academy' antenatal notes folder for all women. The folder gives important advice for women about issues such as monitoring their baby's movements and is a useful place to keep their maternity notes, scan pictures and other information they need to save. The academy has a website that women can access for all types of maternity advice and is provided in varying languages.</p>	<p>In place</p>	<p>Bart's Health/Education providers and LBTH</p>
<p>There are a number of local, post-natal services provided for women. The Tower Hamlets breast feeding group was locally recruited and continues to receive excellent feedback from local women. This team work with hospital services, community services, social action for health and local women volunteer service. The service is unique in London and is reported as 'best practice', with women from other boroughs contacting our team for support.</p>	<p>In place</p>	<p>Bart's Health/Education providers and LBTH</p>
<p>Proposed - 'Always Event' – communication – develop booklet and video that explains the discharge process.</p>	<p>Dec 2016 booklet / March 2017</p>	<p>Bart's Health</p>

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THEME 2 – WORKFORCE

A detailed workforce strategy will be provided to meet the increasing demand of the maternity service. The strategy will include options for skill mix and new posts to be considered and will look at innovative ways of joint working with education providers in the support of recruitment practices.

Action	Date	Responsibility
Recommendation 2		
That Bart's Health Trust reviews its midwife recruitment strategy to ensure that it strengthens its approach to increasing the diversity of staff to reflect the characteristics of the local population.		
<p>Midwifery students are recruited by City University and London Southbank University, and Bart's Health has limited involvement at present in the recruitment process, although they fully support the students in their clinical practice and educational needs when on placement. There is good diversity amongst the student body however it is important that the Royal London gives a good experience to those on placements so that they are keen to take midwifery roles in the Trust once they qualify. Diversity has greatly changed across all staff groups over the last 2 years at the Royal London Hospital.</p> <p>A recruitment plan for maternity has been developed at the Royal London, including:</p> <ul style="list-style-type: none"> • The Royal London Hospital are currently reviewing the portfolio of staff and exploring retention of staff and reasons that staff may leave. This will support our future recruitment plans. • The Head of Midwifery is in liaison with City University to discuss this recommendation from the review and to support local recruitment practices. An open day and 	On-going	Bart's Health/Education providers and LBTH

<p>recruitment event is planned for November 2016.</p> <ul style="list-style-type: none"> • ‘Maternity Mates’ and the ‘Doula Project’ – expansion of this project is required and funding outside of tariff to be discussed with commissioning. Educational requirements are being reviewed with the university links and options to create new roles. <p>The Maternity Partnership Board will be kept updated of progress.</p>		
<p>There are a number of services in maternity where local recruitment is in place and successful:</p> <ul style="list-style-type: none"> • ‘Maternity Mates’ trains women who have recently utilised maternity services to offer voluntary, peer support for vulnerable women in antenatal and labour. Women can directly refer themselves to this or can be offered it by professionals. • The ‘Doula Service’ provides enhanced support to those in labour from local volunteer women. Volunteers act as support partners, working in partnership with the woman and the health professionals to guide and support the woman with coping strategies during in labour, and where necessary acting as an advocate and interpreter. Volunteers and women are matched ethnically as far as possible. This is being reviewed as an option to implement. • The Band 4 Nursery Nurse and Transitional Care project is supported by local recruitment. These staff work within the baby care area on the post-natal ward supporting babies who need enhanced care and will stay in hospital longer. Training is supported in post for these roles. It is planned that there will be further expansion of this service over 2016/17. 	<p>In place 2016</p> <p>December 2016</p>	<p>Bart’s Health/Education providers and LBTH</p>
<p>Bart’s Health are in the process of discussing opportunities to become a ‘Training Centre for Consultant Midwives. This would be a new initiative in London and would enable strong leadership of key projects as a part of the Masters in Maternity Degree. The Maternity Service is also looking at new options to develop a Maternity Practitioner role at a Band 4 that would develop key skills in support of mother and babies, and be trained in a number of aspects of care to support public health and wellbeing needs.</p>	<p>In progress</p>	<p>Bart’s Health/Education providers and LBTH</p>

Recommendation 4

That Bart's Health Trust develops ways to ensure that there is sufficient time dedicated for staff to provide information to patients, particularly for women who do not speak English as a first language.

The 'Maternity Patient Information Group' is now established and it has produced 24 new patient information leaflets in numerous languages. These support other information that is provided for women at different stages of the pregnancy (e.g. the 'Mama Academy' provides a folder with numerous public health messages and access national information about pregnancy).

The new Bart's health website that is under development will provide signposting for women, as well as downloadable local maternity information about mother and baby care. The, 'I Want Great Care' feedback survey is also available in 20 languages on the mobile app.

In place and on-going

Bart's Health

The service is reviewing current advocacy arrangements for women. At present, due to resources, this is only available for the booking and birth-plan, and cannot be provided for every visit. GP surgeries are responsible for providing patients with advocacy who are under their care.

In order to improve women's access the service will be considering birth plan group discussions held in the birth centers / labour wards. This innovation may be difficult to provide due to resource pressures in the clinical area, but the benefits would be significant, by providing better preparation for the latent phase and reducing unnecessary admission.

In progress

Bart's Health

A new 'Maternity APP' for mobile devices is being considered by the service in conjunction with Bounty, which currently provides gift bags for women before and after birth. The app is a new development and will be built with local information as a part of it.

In progress and being led by one maternity site as part of the always event project.

Bart's Health

As part of the 'Women in Health and Social Care' programme the council will explore possible opportunities to work with residents to provide them with an introductory course on midwifery

In progress

LBTH

Recommendation 6

<p>That subject to the findings of an evaluation of Maternity Mates service; Tower Hamlets Clinical Commissioning Group and Bart's Health Trust work with Women's Health and Family Services to further develop and strengthen the Maternity Mates service to expand its role working with midwives and local women in hospital settings and the wider community. This should include working with a diverse range of local women both as service users and Maternity Mates with a particular focus on minority groups such as the Somali community.</p>		
<p>The CCG has a contract with Women's Health and Family Services (WHFS) for the 'Maternity Mates' service for local and vulnerable women which expires on 31st March 2017. Initial performance data collected by WHFS is indicating that women are reporting positive outcomes of their 'Maternity Mate' experience. We are currently working with WHFS on an evaluation of its impact and effectiveness and will consider the Health Scrutiny Panel's recommendations as part of this. This will support the review of service provision in preparation for commissioning the most appropriate service as part of a formal procurement process to competitively tender for a new contract from April 2017.</p>	<p>April 2017</p>	<p>CCG</p>
<p>Recommendation 7</p> <p>That BHT regularly reviews the process for conducting handovers between shifts to ensure that this process is as seamless as possible for staff and patients.</p>		
<p>The Maternity Service is in the process of ensuring a standardized process is in place for handover of care or treatment in all care settings. This will ensure that women have a seamless pathway of care and clinicians have all of the information they require in a clear format.</p> <p>The service has also received funding for a new electronic system for use in the labour wards. As a part of this the maternity service will implement an electronic handover sticker into the record and have an hourly assessment sticker for monitoring progress of the labour and handing over between staff groups.</p>	<p>Dec 2016</p>	<p>Bart's Health</p>

Recommendation 11

That Bart's Health Trust reviews its resource allocation systems to enable staff to have more time to spend with patients.

The Band 4 maternity support staff will be appointed to work in post-natal areas to increase support for women. This is envisaged to be provided over a 24 hour period and improvements will be monitored as a part of the post-natal team's analysis.

Bart's Health will also be reviewing the number of maternity support staff required in light of the expected growth in birth numbers. This review will be based on the findings of 'Birth Rate +' which is a nationally recognised tool for assessing workforce requirements in maternity settings when set against the projected growth in births.

Nov 2017

March 2017

Bart's Health

Recommendation 14

That Tower Hamlets Clinical Commissioning Group and Bart's Health Trust review the demand modelling process to ensure they can better understand future demand and enable Bart's Health Trust to ensure sufficient resources can be allocated more swiftly to meet peaks in demand.

Bart's Health senior management teams in maternity are working with the North East London Commissioning Support Unit to better understand capacity and demand and inform developments required based on acuity and activity.

March 2017 and on-going

Bart's Health / CCG and CSU

Concern has been raised about the lack of focus on high risk care. Part of the Transforming Services Together (TST) strategy has involved the forecasting of births for women who use Bart's Health services over the long term. This work is important to ensure that we are clear about numbers of women who will require care over the next few years. There is also work underway to understand the management of services on a day to day basis. Tower Hamlets CCG and Bart's Health are both part of the North East London Maternity Network (NELMN) that has identified three priority work stream areas. One of these is focussed on 'demand and capacity' across the whole of the North East London sector. The objectives for this group will be to review methods of birth forecasting in both the short and long term, to work on how we can assess the capacity of maternity services more accurately, and to understand the health needs of women attending for care and how this may influence where they give birth. It is

March 2017 and on-going

Bart's Health / CCG and CSU

anticipated that this will result in closer collaborative working between services to ensure that midwife to birth ratios are appropriate and will support the more effective management of service provision in the future so that women have the best possible experience.		
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THEME 3 – FEEDBACK

Bart’s Health are committed to ensuring that they actively seek feedback on all aspects of the maternity services to inform future developments and requirements and ensure that women’s and families voices are heard and influence developments and changes that are made.

Action	Date	Responsibility
Recommendation 3		
That Bart’s Health Trust carries out - 6-12 months in depth study focused on patient experience following the opening of the new co-located unit in August 2016 to provide deeper insight and assurance around improvement plans that are being implemented.		
The ‘I Want Great Care (IWGC)’ tool is to be fully implemented as the Bart’s Health vehicle for collection and collation of feedback from women and their families on the experience of care. This tool will be used to analyse on a weekly basis all aspects of care. The ‘You Said; We Did’ approach will be used to allow for patient feedback and to help the service demonstrate where improvements are being continually made.	Aug 2016	Bart’s Health
Bart’s Health will report twice per year on an analyses of IWGC / Net Mums / NHS choices / and any other customer feedback questionnaires/surveys implemented in the service.	Dec 2016 and on-going	Bart’s Health
A ‘Listening into Action’ event will be held with users of the service to agree any key areas of concern and areas where improvements and developments can be supported and measured	Sept 2016 and on-going	Bart’s Health
Bart’s Health will agree a 6 monthly report on women’s experience within the new midwifery led birthing environments. Report in May 2017 – possible plan for on-going feedback via structured questionnaires.	May 2017	Bart’s Health

Recommendation 12

That Bart's Health Trust builds on its work to engage staff groups and patient organisations in plans for designing wards and waiting areas.

The new co-located Birth Centre design and naming project plan is to be completed and launched – birthing rooms have been named following a survey of patients.

**Sept 2016 plan complete
Launch Jan 2017**

Bart's Health

The plans for the new waiting area on the 6th floor are to be developed in liaison with the Maternity Service Liaison Committee (MSLC) – once the co-located Birth Centre opens.

TBC 2017

Bart's Health

The 'In Early Pregnancy' service runs a one stop booking centre at the Royal London Hospital. Women will receive a scan at the same visit. The plan is to expand this service with an option to provide it at the Barkantine Birth Centre.

Nov 2016

Bart's Health

Scanner to be implemented in the service in 2017

Recommendation 13

That Bart's Health Trust develops a 'listening in action' programme so that midwives and ward staff can share practice with managers and learning is cascaded 'up' the management chain.

A 'Listening into Action' event was held in June 2016 to co-design improvements required with stakeholders.

June 2016

Bart's Health

A follow up event will be held in 2017 to launch suggested improvements and agree next steps. This is a part of the 'Midwives Understanding Mothers' Collaborative being led by the maternity service.

January 2017

A further LIA event is also planned with a focus on 'Home Birth'.

Recommendation 15

That Bart's Health Trust improves the way that data on patient experience is collated and finds a way of bringing together data from various sources that can be analysed at a sufficient level of granularity, for example ethnicity, age group and site specific.

<p>Patient experience will be collected via - IWGC, 'You Said; We Did', 'Birth Reflections', co – located birth centre open event and grandparents sessions in 2017. Parent education midwives will also actively collect feedback.</p> <p>There will be a maternity specific event in early 2017 to celebrate success / review lessons learnt and share what services have done based on patient feedback to help disperse data in patient experience.</p>	<p>Jan/Feb 2017</p>	<p>Bart's Health</p>
<p>Recommendation 16 That Barts Health Trust strengthens how it is using patient feedback (good and bad) and to demonstrate to patient representative groups how this feeds into improvement plans.</p>		
<p>Patient representative groups and stakeholders will be invited to all development sessions in regard to patient experience and change projects. The LIA and MuMs collaborative events will be used to do this.</p>	<p>August 2016 ongoing</p>	<p>Bart's Health</p>

THEME 4 – PARTNERSHIPS

The 'Maternity Partnership Board' will be implemented to provide oversight of the recommendations of the report and to enable the development of strong working relationships with shared accountability in the provision of maternity care.

Action	Date	Responsibility
<p>Recommendation 8 That Bart's Health Trust reviews the information provided as part of antenatal and postnatal care and works with patient groups (Maternity Services Liaison Committee, Healthwatch Tower Hamlets, National Childbirth Trust) and local residents to ensure information is accessible, appropriate and meets local needs.</p>		
<p>Barts Health will review and develop all information packs given out at all stages of the maternity pathway - booking, antenatal, labour and postnatal - and will include information on breast feeding, choice of birth, birth planning, caring for your baby at home.</p>	<p>Aug 2016</p>	<p>Bart's Health</p>

<p>The MAMA academy, a national health improvement initiative for health in pregnancy information, will be implemented at Bart's.</p>		
<p>Bart's Health will review how women whose first language is not English access information. Production of key messages in alternative languages will be considered once funding can be assured. The key messages that are essential for all women in pregnancy relate to:</p> <ul style="list-style-type: none"> • Importance of early booking • Antenatal and newborn screening and immunisations • Name Midwife or Doctor • Choice of place of birth (home, birth centre, consultant unit) • Understanding risk factors – green, amber and red risks – when to contact a health professional • Early labour and self-care • Birth planning • Care of baby and feeding 	<p>January to March 2017</p>	<p>Bart's Health</p>
<p>Recommendation 9 That the Tower Hamlets Clinical Commissioning Group continues to fund, support and strengthen the Maternity Services Liaison Committee as a key mechanism for involving local women in shaping the future of maternity services in the borough.</p>		
<p>Tower Hamlets CCG has procured a Maternity Service Liaison Committee (MSLC) service with funding for three years:</p> <ul style="list-style-type: none"> • The contract was awarded to Social Action for Health who commenced the new service on 1st May 2016. • The CCG are committed to supporting and strengthening the MSLC as a key mechanism for involving local women in shaping the future of maternity services in the borough. • The CCG have and will continue to ensure there is key representation at MSLC meetings to cascade information and to facilitate feedback from local communities on maternity provision within Tower Hamlets. 	<p>Ongoing</p>	<p>CCG</p>

<ul style="list-style-type: none"> The CCG will also continue to meet with Social Action for Health to support the development of the service and review patient feedback on a quarterly basis. 		
<p>Bart's Health will continue to support the work of the MSLC. Further development of patient representation on key maternity forums will be explored. This is important to improve understanding of services.</p> <p>The strategic element of the MSLC will be further developed with the CCG to ensure that it is more representative of all patient groups and enhances opportunities to get live feedback on women's experience.</p>	<p>April 2017</p>	<p>CCG/Bart's Health</p>
<p>Recommendation 17 That Bart's Health Trust works with patient representative groups and forums to develop easily accessible, timely and intuitive ways to give feedback. Linked to this that Public Health review how the post birth visit (6-8 weeks check) could provide an opportunity to better capture patient experience feedback and to develop a process to link this information back to BHT.</p>		
<p>The 6-8 week check is completed in primary care and is the responsibility of the GP. A further review is required to look at ways to capture feedback within these community settings.</p> <p>Public Health have discussed this with the GP Care Group (provider of the Health Visiting Service) who are exploring how they could utilise Friends and Family questions via smart phones to get feedback from families. This would be at the new birth visit undertaken by Health Visitors.</p>	<p>Dec 2016</p>	<p>CCG – Primary care</p>