



*Together*, we are creating a great place  
to be cared for and a great place to work



University Hospitals of  
Morecambe Bay  
NHS Foundation Trust


# Maternity Strategy 2023



"Creating a great place to be cared for and a great place to work"



supporting  
life's journey  
*together*



“Creating a great place to  
be cared for and a great  
place to work”

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## Our Vision

To deliver high quality maternity care that is not only **safe and effective** providing the **best possible outcomes**, but that is **responsive**.

Listening to \*women's wishes, providing care that truly supports women's individual needs, ensuring informed **choice** and **personalisation** of care. Ensuring that women and their families are at the heart and centre of everything we do, providing excellent maternity **experience** at every contact.

\*relates to all birthing people

# Maternity Service Strategic Priorities

TRUST PRIORITIES	SERVICE STRATEGIC PRIORITIES
 <p>Deliver outstanding care and experience</p>	<p><b>We will:</b></p> <ul style="list-style-type: none"><li>• Deliver maternity care that is safe, effective and responsive, that truly supports *women's individuals needs, ensuring good outcomes, informed choice and personalisation of care</li><li>• Ensure that co-production and co-design with women, their families and the local communities will be at the heart of everything we do</li><li>• Embed a culture of continuous quality improvement, reducing variation, the impact of health inequalities, and improving the maternity care experience for women and their families</li></ul>
 <p>Create the culture and conditions for our colleagues to be the very best they can be</p>	<p><b>We will:</b></p> <ul style="list-style-type: none"><li>• Develop an open and transparent safety and learning culture</li><li>• Ensure we recognise and value our staff, ensuring active promotion of their health and well being</li><li>• Support our colleagues professional development pathways and career aspirations, to build a robust, highly skilled workforce</li><li>• Develop a 5 Year Strategic Workforce plan to ensure we have a highly skilled, multi-professional maternity team, ensuring the right care is provided in the right location, by the right professional, at the right time</li></ul>



## TRUST PRIORITIES



**Make the best use  
of our physical and  
financial resources**



**Working in  
partnership**

## SERVICE STRATEGIC PRIORITIES

### We will:

- Support delivery of effective & efficient models & pathways of care to reduce duplication; improve coordination and to ensure financial sustainability for the future
- Utilise our Estates to maximise efficiency and improve care delivery and service users experience
- Invest in innovation and technology to maximise efficiency

### We will:

- Work with our partners to deliver great local accessible care with a focus on care, being delivered, in the right place
- Work closely with our Children and Young People Services
- Work in partnership with our communications team to develop a robust communication plan for maternity services



# Maternity Clinical Strategy

## Our successful model of care means:

- ✓ Safer care
- ✓ Effective care
- ✓ Responsive: personalised and individualised care
- ✓ Focused on the best outcomes and experience
- ✓ Informed choice and informed consent
- ✓ Women\* are the decision makers, supported by access to high-quality information, evidence and digital resources
- ✓ Women being seen in the right place, at the right time by the right professional
- ✓ Universal maternity offer for all women
- ✓ Enhanced maternity offer for those women who need additional support to ensure the best outcomes

## To support this we will:

- ✓ Focus on safe, effective and personalised care, centred on the woman, her baby and her family
- ✓ Ensuring that care delivery is planned around women's wishes and choices
- ✓ Actively listen to hear, using women's voices and feedback to improve services
- ✓ Embed a safety and a quality improvement culture as 'business as usual'
- ✓ Offer enhanced maternity care to women with additional needs and at risk of poorer outcomes, through relationship based models of care
- ✓ Ensure that our workforce receive the best training and support to deliver the best care at every contact





## Enabling strategies/plans:

- ✓ Better Births: safe and personalised care
- ✓ Maternity workforce planning
- ✓ Maternity Transformation Programme including all national safety ambitions, equality and equity strategies and MVP work plans
- ✓ Quality Improvement programmes: MatNeoSip/ SBLCBV2/ PReCePT
- ✓ Local Maternity and Neonatal Systems/ ICS
- ✓ Maternity Digital Improvement programme (LSC)
- ✓ Local population health/health needs/ inequalities data
- ✓ Joint Health & Well Being Assessments and Strategies
- ✓ Maternity Safety Support Programme
- ✓ NHS Resolution
- ✓ Ockenden and Kirkup Reports
- ✓ Maternal Medicine Network
- ✓ Neonatal Critical Care Review
- ✓ PSIRF







# Maternity Service Strategic Priorities



# Deliver Outstanding Care and Experience

WE WILL	HOW WILL WE DELIVER?	HOW WE WILL KNOW WHAT WE ARE DOING IS WORKING? HOW ARE WE TO MEASURE?
<p><b>Deliver maternity care that is safe, effective and responsive, that truly supports women's individuals needs, ensuring good outcomes, informed choice and personalisation of care</b></p>	<ul style="list-style-type: none"> <li>✓ Implement a revised model for Triage and Day Assessment</li> <li>✓ Maternity/ EPAU Helpline &amp; Single Point of Access, LMNS wide project. Centralise helpline, link with NNAS</li> <li>✓ Develop the Fetal Surveillance to offer an enhanced service</li> <li>✓ Develop Transitional Care / Neonatal Outreach</li> <li>✓ Implement an enhanced care team</li> <li>✓ Develop Bereavement support provision to be 7 days a week with appropriate facilities</li> <li>✓ PMA service provision -Hours for sessional PMAs, vision and strategy, refocus on retention and pastoral support</li> <li>✓ Deliver BFI and tongue tie standards</li> <li>✓ Trauma Informed Care implemented and a trauma support pathway in place</li> <li>✓ Debrief pathway - Refreshed pathways for debrief, listening, complaints etc. Trauma Informed Care to be implemented</li> </ul>	<ul style="list-style-type: none"> <li>• 100% of women* identified as needing trauma informed care are offered an appropriate plan of care to support their mental health needs</li> <li>• Full compliance with the CNST 10/10 Safety Steps as agreed annually</li> <li>• Full compliance with Saving Babies Lives Care Bundle</li> <li>• Full implementation of the Avoiding Term Admission into Neonatal Unit (ATAIN) programme</li> <li>• 100% 1:1 care in active labour, ensure a real time review process is robust to support escalation &amp; mitigation if compromised</li> <li>• 100% Labour Ward Co-ordinator supernumerary status</li> <li>• 100% of safety huddles will be attended by the co-ordinating midwife, consultant, registrar, anaesthetist and other relevant professional groups. If this is not possible because of clinical demands the reason for not attending this will be documented</li> <li>• 100% of risk assessments for place of birth completed</li> <li>• Aim for a 50% reduction in stillbirths, neonatal deaths and brain injury by 2025 (as national safety ambition)</li> <li>• Reduction in the number of avoidable pre-term births</li> <li>• Reduction in the number of babies transferred out for cooling</li> </ul>



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<p><b>Deliver maternity care that is safe, effective and responsive, that truly supports women's individuals needs, ensuring good outcomes, informed choice and personalisation of care</b></p>	<ul style="list-style-type: none"> <li>✓ Implementation of intrapartum &amp; ward based acuity tools to monitor safe staffing and acuity and to minimise staffing red flags</li> <li>✓ Implementation of the NW Maternity escalation guidance</li> <li>✓ Develop specialist gynaecology clinics to support delivery of excellent after &amp; ongoing care for women who experience 3rd or 4th degree tears</li> </ul>	<ul style="list-style-type: none"> <li>• Reduction in the number of babies with Apgars of &lt;7 at 5 minutes</li> <li>• Maintain less than 5% unexpected term admission to NNU rate</li> <li>• 100% compliance with WHO Surgical checklist</li> <li>• 100% compliance with LocSSIPs</li> <li>• Reduction in 3rd or 4th degree tears</li> <li>• 100% of women are asked about Domestic Violence during pregnancy</li> <li>• Reduce the rates of women smoking at the time of delivery in line with targets set against the Saving Babies Lives Care Bundle element one.</li> <li>• Ensure 100% of Quality Standards are in date with systems and processes in place and identify gaps and review on a 3-yearly basis unless earlier review is required</li> <li>• Good CQC rating by Q1 2024</li> <li>• UNICEF Baby Friendly Infant feeding initiative level 2 by Q3 2024</li> <li>• At least 70% of babies are breastfed within an hour of delivery, where the woman chooses to breast feed</li> <li>• Achieve BFI accreditation for neonatal services by 2024</li> <li>• 100% of all women with suspected or actual sepsis receive a sepsis risk assessment and antibiotics within the golden hour</li> <li>• Ensure that all women attending for unplanned care are seen and triaged within 15 minutes of arrival</li> </ul>



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<p><b>We will ensure that co-production and co-design with women, their families and the local communities will be at the heart of everything we do</b></p>	<ul style="list-style-type: none"> <li>✓ Ensure that women and their families are involved in the delivery plan</li> <li>✓ Maximise the use of our maternity voices group</li> <li>✓ Full compliance with the use of PMRT and family engagement principles; ensuring that the parents of babies who were born and died in the Trust are informed that a review of their baby's death will take place, and that the parents' perspectives and any concerns they have about their care and that of their baby will be sought (target as defined by CNST)</li> <li>✓ Implementation of the Family Liaison Officer role</li> <li>✓ Implement PSIRF model, ensuring women and families are at the centre of everything we do, particularly when things go wrong</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure 100% Duty of Candour within 10 working days and families provided with investigation findings/reports</li> <li>• Ensure that 100% of any reportable serious incidents are STEIS reported within 2 working days</li> <li>• Ensure 100% of complaints are responded to within the time frame</li> </ul>





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<p><b>We will embed a culture of continuous quality improvement, reducing variation, the impact of health inequalities, and improving the maternity care experience for women and their families.</b></p>	<ul style="list-style-type: none"> <li>✓ Continue to have robust assurance systems in place to monitor and assure that our care is safe, effective and responsive</li> <li>✓ Use population health data to enable us to focus on improving physical and mental health for women, their babies and families, reducing inequalities and improving health and wellbeing</li> <li>✓ Proactively seek out women's voices and experiences to inform improvements and focus co-production activities</li> <li>✓ Clear pathway for women needing debrief and listening service</li> <li>✓ New WACS clinical governance and accountability framework embedded</li> </ul>	<ul style="list-style-type: none"> <li>• 100% of women who feel they require support after birth will have access to a formal debrief</li> <li>• 100% of women identified as having mental health problems during the perinatal period are offered an appropriate plan of care to support their mental health needs</li> <li>• 100% of women are screened for past and current mental health problems at booking</li> <li>• 100% of women are asked about their mental wellbeing at each routine point of contact during the antenatal period</li> <li>• 90% of relevant maternity care staff will receive training in relation to perinatal mental health</li> <li>• To build upon the good CQC Maternity survey results, by seeing measurable improvement in FFT and experience surveys</li> </ul>





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<p><b>We will develop an open and transparent safety and learning culture</b></p>	<ul style="list-style-type: none"> <li>✓ Measure and quantify our cultural improvement activities for positive impact on outcomes and experience for both *women, their families and staff</li> <li>✓ Embed a safety learning culture</li> <li>✓ Enhance our safety culture training and development to allow sustainability of improvements</li> <li>✓ Ensure staff feel able to raise concerns and that they are swiftly responded to.</li> <li>✓ Continue to foster and develop psychological safety within teams and foster 'just culture'</li> <li>✓ Implement a just culture charter (NHS just culture guide) to ensure all staff understand their role in keeping patients safe and empowering them to raise concerns which are acted upon.</li> </ul>	<ul style="list-style-type: none"> <li>• Improvement in cultural survey results</li> <li>• Staff satisfaction scores</li> </ul>
<p><b>We will ensure we recognise and value our staff, ensuring active promotion of their health and well being</b></p>	<ul style="list-style-type: none"> <li>✓ Enhance the Professional Midwifery Advocate (PMA) support offer for staff</li> </ul>	<ul style="list-style-type: none"> <li>• Staff feedback</li> </ul>



WE WILL	HOW WILL WE DELIVER?	HOW WE WILL KNOW WHAT WE ARE DOING IS WORKING? HOW ARE WE TO MEASURE?
<p><b>We will support our colleagues' professional development pathways and career aspirations, to build robust, highly skilled workforce</b></p>	<ul style="list-style-type: none"> <li>✓ Have a robust Training Needs Analysis (TNA) and gold standard training, supporting our staff to be the best they can be</li> <li>✓ Ensure all of our midwifery and obstetric leaders will attend leadership training</li> <li>✓ Talent management and career development - Career pathways and talent management to enhance retention</li> <li>✓ In partnership with the LMNS develop a training academy</li> <li>✓ Innovative with new roles</li> <li>✓ Implement a year long programme of special interest training and education to support the teams</li> </ul>	<ul style="list-style-type: none"> <li>• Improved retention</li> <li>• Staff satisfaction scores</li> <li>• Robust training programme</li> <li>• Maternity Career Maps</li> </ul>
<p><b>We will develop a 5 Year Strategic workforce plan to ensure we have a highly skilled multi-professional maternity team, ensuring the right care is provided in the right location, by the right professional, at the right time</b></p>	<ul style="list-style-type: none"> <li>✓ Engage regionally and nationally in collaborative partnerships to aid midwifery recruitment and retention i.e. international recruitment</li> <li>✓ Transformation of workforce and roles. i.e AMP introduction</li> </ul>	<ul style="list-style-type: none"> <li>• Reduced vacancy rates</li> <li>• Improved retention</li> <li>• Workforce plan</li> </ul>







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We will support delivery of effective & efficient models & pathways of care to reduce duplication; improve coordination and to ensure financial sustainability for the future	<ul style="list-style-type: none"> <li>✓ Review our delivery models across our 3 hospital sites and community in alignment with the maternity transformation agenda</li> <li>✓ Ensure effective utilisation of capacity</li> </ul>	<ul style="list-style-type: none"> <li>• Choice of place of birth</li> <li>• Individualised care</li> </ul>
We will utilise our Estates to maximise efficiency and improve care delivery and service users experience	<ul style="list-style-type: none"> <li>✓ Community Hubs - Community premises at the heart of our communities and areas of need</li> </ul>	<ul style="list-style-type: none"> <li>• Community premises linked to primary care networks</li> </ul>
We will invest in innovation and technology to maximise efficiency	<ul style="list-style-type: none"> <li>✓ A refreshed Maternity dashboard including SPC charts that are patient centric which supports delivery of the Maternity Strategy</li> <li>✓ Digital Transformational plan in alignment with LMNS/ICB</li> </ul>	<ul style="list-style-type: none"> <li>• Digital transformation undertaken</li> <li>• Increased number of digital apps</li> </ul>



# Working in partnership

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<p><b>We will work with our partners to deliver great local accessible care with a focus on care being delivered in the right place</b></p>	<ul style="list-style-type: none"> <li>✓ Work in partnership with the LMNS</li> <li>✓ Work with the MVP, *women, service users and experts by experience who use or have used our maternity services in order to improve our services</li> <li>✓ Constantly listen to hear, to innovate and to learn from others, to ensure we deliver the best possible maternity outcomes and experience</li> <li>✓ Maternal medicine - LMNS wide networks. Consultants with interest in Maternal/ Fetal medicine, joint clinics with tertiary unit. Specialist midwifery roles</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence of Co-productive with MVP</li> <li>• Co-design with system partners / LMNS</li> <li>• Development of networks for maternal and fetal medicine</li> <li>• Specialist midwifery roles for maternal and fetal medicine</li> </ul>
<p><b>We will work closely with our Children and Young People Services</b></p>	<ul style="list-style-type: none"> <li>✓ Develop our Transitional Care / Neonatal outreach</li> <li>✓ Neonatal outreach service provision for IVAB/bilibeds</li> </ul>	<ul style="list-style-type: none"> <li>• BAPM compliant Transitional Care</li> <li>• Development of Neonatal outreach</li> </ul>
<p><b>We will work in partnership with our communications team to develop a robust communication plan for maternity services</b></p>	<ul style="list-style-type: none"> <li>✓ Develop our website and digital resources</li> <li>✓ Development of a robust communication plan to assist with the strategy</li> </ul>	<ul style="list-style-type: none"> <li>• Communication strategy</li> <li>• Improved website</li> <li>• Digital transformation undertaken</li> <li>• Increased number of digital apps</li> </ul>





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Please do not hesitate to contact us should  
you require this document in an alternative  
format.

The information in this report is correct to the  
best of our knowledge as of March 2023.

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