# Developing our Maternity and Neonatal Strategy



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## Why did we do this



Pregnancy and childbirth are significant life events, and NHS Greater Glasgow and Clyde has always put the needs and wants of women at the centre of the care and support we provide.

To fully understand the changing requirements of women and their families in future, we knew we needed to take a different approach – to innovate.





## **Best Start Scotland: National Driver**





**Family-centred Care** offered to all mothers and babies and that is safe and compassionate, recognising their own unique circumstances and preferences.



**Continuity of Care** experienced by women across the whole maternity journey, with vulnerable families being offered any additional tailored support they may require.



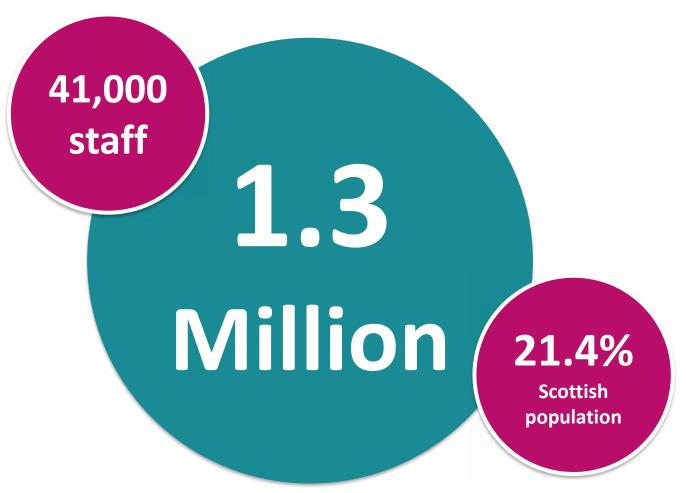
**Evidence Based Services** are redesigned using the best available evidence, to ensure optimal outcomes and sustainability, and maximise the opportunity to support normal birth processes and avoid unnecessary interventions.





## **Population of NHSGGC**









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13,860 women sent our survey



2,878 responses received



400+ pieces of feedback through digital channels



66 clinic interviews conducted



## Initial Engagement: Blended Approaches



Social Media Campaign: raising awareness of our aims and the opportunity to get involved

 Wide reaching engagement helped shape early strategy thinking and more practically develop some of our more specific improvement projects.

Informal Clinic Interviews: complimented our wide-reaching engagement and provided in-depth insights into women's experiences.

**Develop Maternity Service** thinking around strategy direction and how we should focus our ongoing engagement





# **Shaping our Thinking: Initial Learning**



Women shared their views on what was important to them about maternity care, and where they would like to see us make the most improvement.



Listening to and learning from women giving birth, their partners and those supporting them



Ensuring a positive pregnancy, making sure they can access the support and advice you need throughout your pregnancy



Ensure women feel able to make **informed** decisions about their care throughout their maternity journey



Providing easy to access and connected digital maternity services



Provide the right environment for a **positive** birth and early parenting experience



## **Understanding Continuity of in NHSGGC**



Continuity of Care as a model is a way of delivering maternity care so that women receive dedicated support from the same midwifery team throughout their pregnancy.

Greater care continuity underpins the delivery of the key priorities women identified during our initial engagement.

**Approach developed** by NHSGGC's Patient Experience Public Involvement (PEPI) team in partnership with the Continuity of Carer Project Midwife.

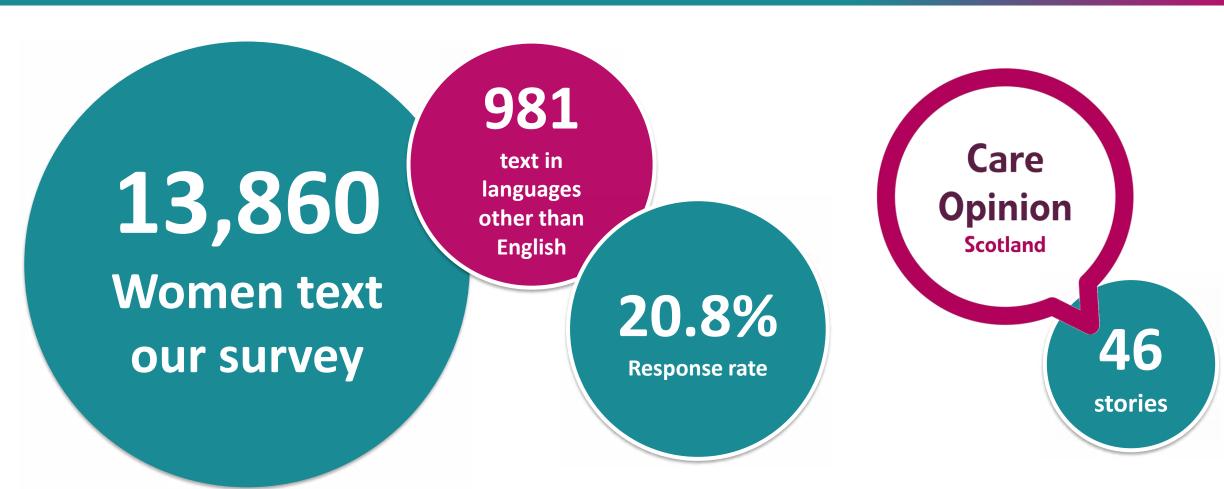
 Aimed to gain a deeper understanding of Continuity of Carer experiences from women who had given birth between January 2022 and March 2023.





## **Continuity of Care**







### **Process Used**



#### Survey produced in;

Arabic, English, Polish, Romanian and Urdu

Witamy, NHS Wielki Glasgow i Clyde chcialoby uslyszec o NHSGGC would like to hear about your experience of Twoim doswiadczeniu maternity services through a Serwisów Polozy Buna, NHS Gre survey <a href="https://link.webropol.co">https://link.webropol.co</a> ankiete https: Clyde ar dori s om/s/nhsmat experienta dumneave... serviciile de maternitate prin intermediul acestui sondaj https://link.webropol.co

m/s/nhsmatcare



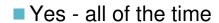




### What we heard

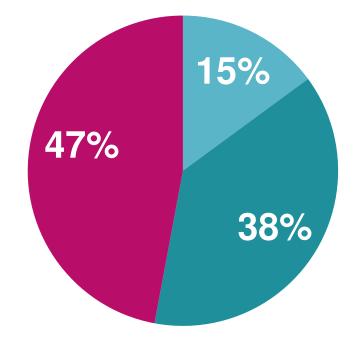


## Did women see the midwife who carried out their first appointment again?



Yes - some of the time

No - it was a difference midwife at each appointment



More consistency with midwives, more time to discuss options, more time and care given when making birth plan, more care over/less dismissive of possible complications that could be helped by other departments i.e physio





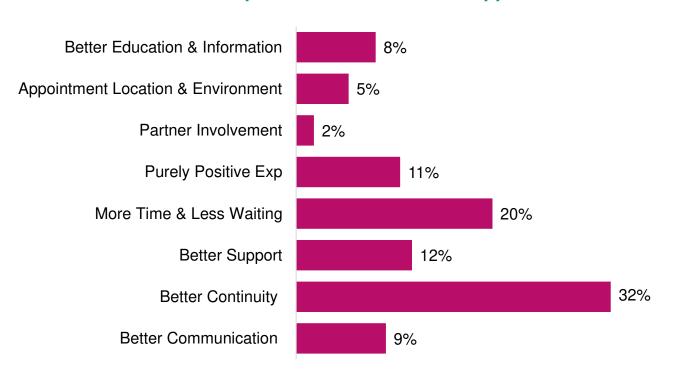
Having a "dedicated" midwife makes all the difference. Because sometimes you see the same staff but they don't remember you while MY midwife she knew me and my surroundings. She was just perfect and it alleviated a lot of the stress/ and anxiety.



## **Findings and Themes**



#### **Areas of Improvement for Antenatal Appointment**





Be more inclusive, at antenatal classes. I opted out of these classes as they were geared towards pregnant women only and did not include the father. Father's need to be more included in this aspect to help prepare them for birth and post birth.

They are all amazing midwifes and doctors at the Princess Royal maternity hospital and continue being your fantastic selfs yous are all doing an excellent job





More time to ask questions, it was so fast I often thought of them after the appointment. Discuss the leaflets together rather than give them to me to read at home, so I can ask questions on the spot and avoid worrying later



## Next steps and immediate improvements



#### **Maternity Next Steps**

- Improving CoC by moving towards a caseload holding model of care.
- Providing midwives with their own clinics with increased appointment times
- Develop Maternity Voices Partnership to shape ongoing strategy development and implementation.
- Explore how we can expand our engagement in partnership with our equalities team

#### **PEPI Team Next Steps**

- Apply learning to other area of work and the boards Moving Forward Together transformation programme
- Being able to directly target recent service users changes how we think about surveys, its not just about volume and a scatter gun, being able to carefully target who we reach and link responses to services with confidence has been a game changer for developing improvements and learning

