

Setting up a Maternity Voices Partnership: practical steps

By Pauline Cross, Consultant Midwife in Public Health

This is my personal advice based on many years of experience setting up several new Maternity Services Liaison Committees (MSLCs) in the South East of England.

1. Identify and agree a budget, either a commissioned hosting arrangement or pooled budget between strategic partners. This should be in the region of £8000-£10,000 per annum to include remuneration for service-user Chair and Vice-Chair; expense remuneration for service-user members; crèche provision; venue hire; an annual development day and outreach consultation. Advice on levels of remuneration should be available via local maternity networks. Also see NHS England policy.¹
2. Identify and agree MVP administrative support. This can be provided internally i.e. by CCG admin staff or externally through service user members who get remunerated for time and stationery costs. This will be in the region of approximately 1 day per month. The MVP will fail without effective administrative support.
3. Identify and agree a lead person who will act as CCG link for the Chair and Vice-Chair. This role should be included within the post-holders job-plan and job description. The individual undertaking this role will take on, or delegate, the setting up of the committee and the recruitment of individuals with the kinds of skills needed for the role of Chair and Vice-Chair.
4. Once in place, the MVP link can work with PPI and other stakeholders to agree a MVP membership list and identify which post-holders or organisational representatives should be invited to attend the first meeting. It is imperative that this includes a diverse range of service-users representative of the local community as well as disadvantaged and marginalised group representatives. This element is worth some good time investment as members and potential chairs will come via these conversations and interested parents can find out about what the MVPs might expect to achieve, how they work and what the remuneration arrangements are. The MVP link should expect to have conversations with people interested in the Chair and Vice-Chair roles prior to the first meeting, putting them in touch with more established MSLC/MVP Chairs where necessary in order that they understand what will be expected of them and what they may gain from such a role.
5. Set the first meeting in a child-friendly centrally placed venue with crèche space, book crèche, invite stakeholders and hopefully vote in a Chair and Vice-Chair. It is important that

this meeting is facilitated by someone skilled at managing meetings in which service-users and professionals are equal partners.

6. The MVP link will need to spend time with and be available to the Chair and Vice-Chair, particularly in the first three months, and thereafter with regular meetings and contact. Support for post-holders new to this function should be available via maternity networks.

7. After the initial meeting, a pre-meet between the MVP link and the Chair and Vice-Chair should occur in a place convenient to the service-user before each MVP meeting. This may be held at one of the service-user's home if they have very young children or a local café or children's centre.

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¹ NHS England, 2015. Working with our Patient and Public Voice Partners Reimbursing out of pocket expenses and involvement payments. Available at:

<https://www.england.nhs.uk/wpcontent/uploads/2015/05/ppv-expenses-involvement-policy.pdf>
(Accessed 27 April 2016).