



CHESTER MATERNITY VOICES PARTNERSHIP

Activity Report March 2019 – September 2020



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LETTER FROM OUR CHAIR



Chester MVP started around 18 months ago with 2 service users coming along to the Countess postnatal ward to share their experiences. Since then, we have listened to over 300 stories about local maternity care!

I am immensely proud of the work we are doing to ensure that maternity services are created and shaped by the families that use them, and I would like to thank everyone in our MVP team for their dedication and commitment towards developing maternity services to provide the best possible care for all in our community.

Over the last year, local maternity services have encountered huge changes. The closure of One to One Midwives and the COVID-19 pandemic have created unprecedented challenges. Although difficult, these challenges have emphasised the importance of having a well-functioning, diverse and inclusive Maternity Voices Partnership, and have created opportunities to increase collaborative work and share best practice.

I am excited for the future of our MVP and I am looking forward to the work we are going to do to develop and improve maternity care in Chester and the surrounding areas.

Gemma Taylor – Acting Chair, Chester MVP, September 2020

WHO WE ARE



Chester Maternity Voices Partnership (MVP) is a team of parents, commissioners, health professionals, and community organisations working together to help make services provided during pregnancy, birth, and early parenthood the best they can possibly be for each family.

Our goal is to make sure all voices are heard and used to impact change. We seek out the voices of those who have recently used or are currently using local maternity services and look for themes in the feedback. We then work together to change and improve care to ensure maternity services are centred around the people using them and meeting their needs.



MEMBERS

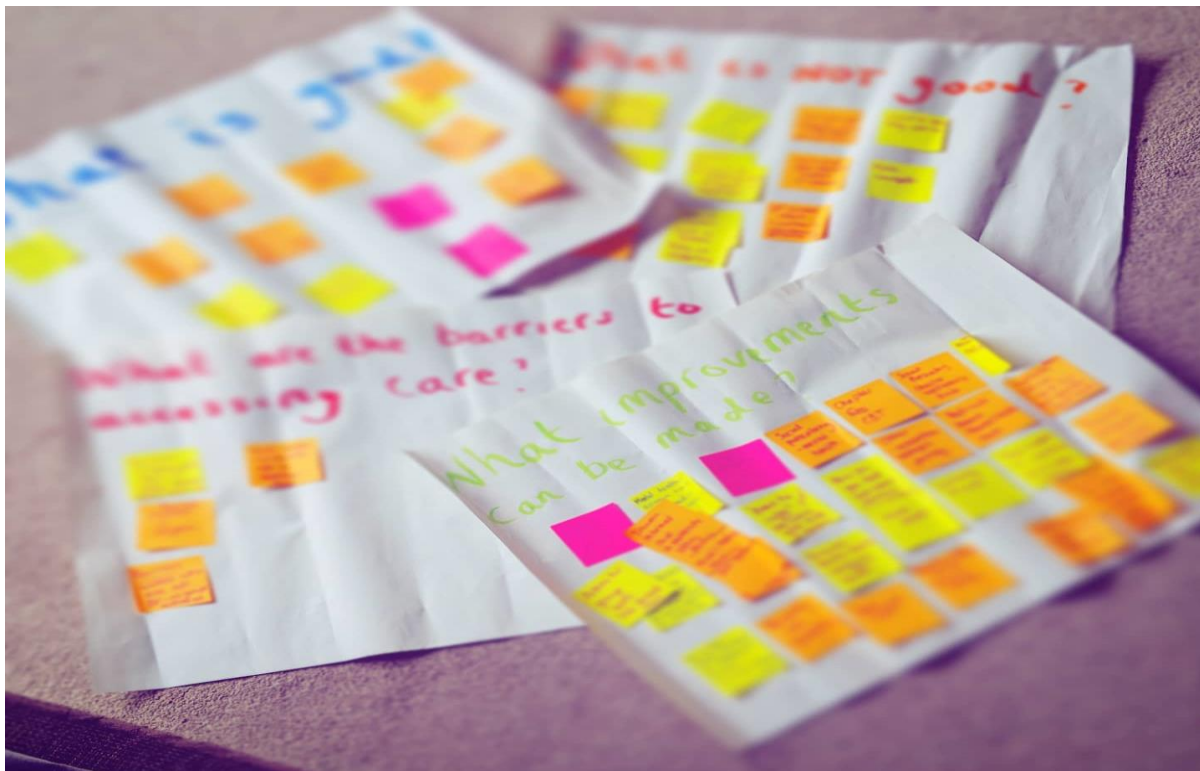
Chester Maternity Voices Partnership Team includes

- Parents who have accessed maternity care in the last 5 years
- Service user representatives (like Doulas, Antenatal Educators and Lactation Consultants) who have regular contact with those who are pregnant and their families and new parents
- Representatives from local groups and charities who have an interest in maternity services such as Chester Miscarriage Association Group, Dadsnet, NNU Parent Advisory Group, Milestone Mums, Elsie's Moon, The Birth Trauma Association, Healthwatch
- Midwives and Health Professionals currently providing maternity care including those who work for the Countess of Chester and those previously employed by One to One Midwives
- Commissioners of maternity services from Cheshire Clinical Commissioning Group (CCG)

We are also communicating and engaging with the following professionals and organisations to help develop and improve care

- Chester University
- Cheshire, Halton & Warrington Race and Equality Centre
- Chester PRIDE
- Sign Connect
- Cheshire and Merseyside (C&M) Perinatal Team
- C&M Local Maternity System (LMS) Prevent Lead
- Countess of Chester (COCH) Head of Communications
- COCH Digital and Design Lead
- COCH Associate Nursing Director of Urgent Care
- COCH Outpatient and Gynaecology Matron

WHAT WE HAVE DONE



Set up an MVP in Chester



Developed networks and relationships



Acted upon local maternity experiences



Responded to challenges in maternity care



Setting up an MVP in Chester

- **Terms of Reference Agreed**

Used to define the purpose and structure of the partnership and how we will work together towards a shared goal

- **Chair Appointed**

Rehana Jawadwala appointed as Chair

Gemma Taylor appointed as Vice Chair

Gemma became Acting Chair to cover maternity leave

- **Quarterly Cycle Created**

Gather feedback – Brainstorm Themes & Actions – Formal meeting

- 5 Formal meetings with service providers and commissioners held
- 43 MVP members
- 46% of MVP members are service users

- **Communication Strategy Developed**

Posters/leaflets designed – given out at booking/discharge from care

Social media platforms (Facebook, Instagram and Twitter) created and utilised – over 500 posts and 30,000 interactions

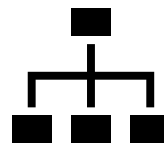
Email, website and digital feedback form developed and monitored

Developing networks and relationships



Strong links with the Countess of Chester maternity unit

Regular meetings with midwifery team
Clear communication channels with named midwives and Head of Midwifery
Direct link with core team



Building relationships with other organisations across Cheshire and North West

Cheshire CCG, C&M LMS, Chester University, Miscarriage Association, Birth Trauma Association, Cheshire Halton & Warrington Race and Equality Centre, Chester Pride, Sign Connect, C&M Perinatal Team, Healthwatch



Close working with regional MVP's

14 MVP chairs in regular communication across North West
Monthly regional meetings online



National MVP networking

24 hours of meetings with national team to share best practice
Better Births – 4 years on conference

Acting upon local maternity experiences

We gather experiences through

- Listening events
- Focus groups
- Visiting parent and baby groups
- Our website feedback form
- Online surveys & social media posts
- 1:1 interaction



We have listened to over 300 stories and experiences about local maternity care

Our identified themes and current workplan include

Early Labour Care

Partner's Experience

Perinatal Mental Health

Maternity Bereavement Care

Communication



Induction of Labour



Continuity of Care

Amplifying Voices

Culturally Safe Care

Language



We have undertaken the following actions

- ❖ We have created a working group with members of the senior management teams from COCH gynaecology and the accident & emergency department to improve miscarriage care and instigate the SANDS National Bereavement Care Pathway. We are co-producing an information booklet and a care pack that will be given to families experiencing miscarriage. We petitioned for a Bereavement Midwife to be put in post and 2 midwives have now undertaken this role.
- ❖ We are part of a north-west region working group looking at changing guidelines and the way information is provided to families to improve their experience of induction of labour. Propess is now being used and changes to the environment have been made following our recommendations. Rooms now display posters with birth affirmations and have mood enhancing lights.
- ❖ We are looking at the many ways language and communication can impact a family's experience of maternity care. We have co-produced a leaflet about choice and the right to decline recommended care pathways. We are creating learning tools for staff to highlight and achieve effective communication and comprehension. We are also developing strategies to ensure families feel that they have had all their questions answered and are happy with the decisions made.
- ❖ We are working with the Perinatal Mental Health team and Milestone Mums to look at how care can be improved and devise ways to support good mental health.
- ❖ We instigated the 6 steps to better births in theatre strategy to improve family's experience of caesarean birth.
- ❖ We are part of developing postnatal care to hold the needs of the family at its heart. Prior to the current COVID-19 crisis partners visiting on ward 32 was changed from 9am-9pm to 7am-11pm following feedback given through the MVP.
- ❖ Experiences shared also formed a role in developing the maternity-neonatal collaboration that enables babies to be given care on the postnatal ward rather than being taken to the neonatal ward for antibiotics.
- ❖ Decaffeinated drinks are now available on maternity wards due to feedback provided through the MVP.
- ❖ We are co-producing C&M Personal Care and Support plan with our LMS
- ❖ We have participated in listening events aimed at families from Black Asian and Ethnic Minority families and co-produced 'Black Breastfeeding Week' social media campaign



Responding to challenges in maternity care

COVID-19 has had a huge impact on maternity services from March 2019 onwards

Expectant families and new parents have experienced considerable changes in their maternity journey, and maternal and perinatal mortality rates have been identified as being significantly higher in families from Black, Asian and Minority Ethnicities

KEY ACTIVITIES

Throughout the COVID-19 pandemic we have maintained close communication with the Chester Maternity Leadership Team, communicating daily with the Head of Midwifery, conveying changes to maternity services, answering questions submitted and working to co-produce official COCH communication.

We increased regional and national collaborative working

We were able to move to digital community engagement quickly through our website and online listening events

We asserted family's wishes regarding the homebirth service during COVID-19 and successfully appealed for it to be reinstated as soon as was safe to do so.

We engaged with the multidisciplinary team at COCH to enable partners to attend scans, maternity medical procedures and visit ward 32

We collaborated with C&M MVP Chairs to create an action plan to support Black, Asian, and Minority Ethnicity families

We shared ideas for tailored communications about how to reach those who experience digital deprivation

We collated translation resources for maternity care and disseminate across C&M Maternity Units and National MVPs

We have increased our social media following by 175%



PLANS FOR THE FUTURE

Sustainability

- Work with Cheshire CCG to finalise funding to ensure Chester MVP can continue contribute to care improvement

Language and Communication

- Create dictionary of insensitive maternity language and appropriate alternatives
- Co-produce social media strategy and maternity unit video tour with COCH Head of Communication and Digital & Design Lead
- Establish 'reflections on care' into maternity huddles and study days
- Include 'fishbowl' exercise in formal MVP meeting

Maternity Bereavement Care

- Facilitate key members of the COCH team providing care (A&E, EPAU, Junior Drs, Jubilee team) to undertake specialist training in maternity bereavement care
- Co-produce a standard operating procedure for loss in early pregnancy

Induction of labour and Care in Early Labour

- Create crib sheet with ideas for midwives to share with families about how to cope in early labour
- Discuss feedback with maternity leadership team gained from focus groups on induction of labour and care in early labour
- Continue to co-produce literature about induction of labour

Amplifying Voices

- Continue to participate in C&M BAME Network Events
- Contact Cheshire West Council Inclusivity Officer and Traveller Liaison Officer



- Engage with The Dale Barracks community midwife and undertake military family listening event
- Continue to develop relationship with Chester PRIDE and attend LGBT+ parenting events
- Continue to develop relationship with Sign Connect

Culturally Safe Care

- Develop unconscious bias training with Cheshire & Merseyside Prevent LMS Prevent Lead
- Translate birth affirmations displayed in rooms into Arabic, Kurdish, and Polish
- Work with Lead Midwife for Better Births to ensure families receive individualised Continuity of Care

Perinatal Mental Health

- Identify and disseminate pathway for mental health support for dads
- Survey 8-week postnatal GP check access during COVID-19
- Work with Lead Midwife for Better Births to ensure families receive individualised Continuity of Care

Neonatal Postnatal Experience

- Work with NNU Parent advisory group to gain understanding of the postnatal experience of families whose babies require NNU care

Breastfeeding

- Gather feedback about breastfeeding experiences in Cheshire and how care can be improved

Outpatient Environment

- Identify who is responsible for what was previously the 'Comfort Café' and work to improve the environment in this area

