

Ockenden Report Assurance Committee

Maternity Voices Partnership (MVP) – Working with Women & Families

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Presenter:

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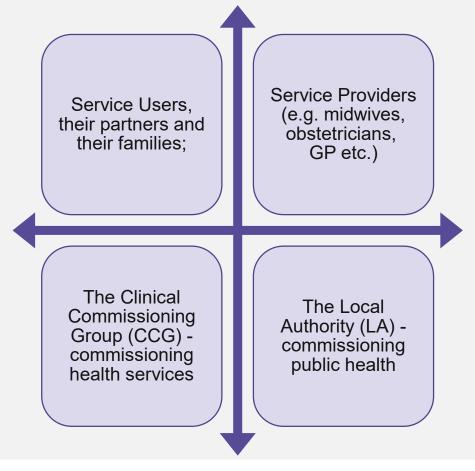
MVP Background

Who, What & Why





A Maternity Voices Partnership (MVP) is an independent team made up of:



✓ An MVP provides a way for this team of people to design & improve maternity care together. All these different people working together to share ideas and identify solutions for the design and improvement of maternity care is called co-production.

✓ The function of the MVP is more than simply to listen; it
is a way of discussing challenges and ways of
overcoming them. The group aims to constantly
support the development and
improvement maternity care for everyone,
regardless of who they are or where they live, so
everyone has access to the same quality of care.

Five Key Principles





Five key principles:

- 1. Coproduce as equals, promoting and valuing participation.
- 2. Seek out and listen to service user experiences.
- 3. Champion the use of service user experience when reviewing services.
- 4. Understand the interdependency of staff experience and positive outcomes.
- 5. Pursue continuous improvement in maternity services.

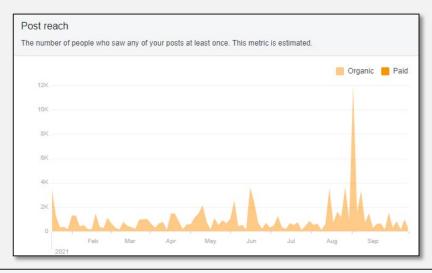


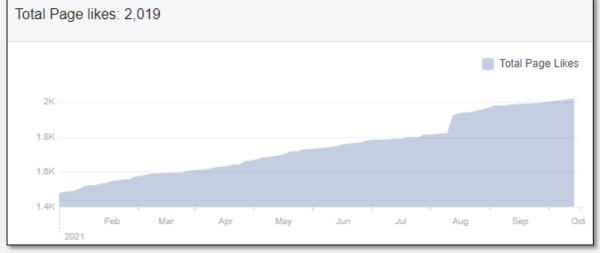
Ways we Involve & Hear The Voices of Our Communities





- ✓ Social Media Facebook, Twitter, Instagram
- ✓ Newsletter
- ✓ Mailing list
- √ Focus groups
- ✓ Feedback survey
- ✓ Ad Hoc surveys
- ✓ Volunteer community







History of Our MVP





(Launched

Apr-21), key

role in MTP &

more!



Telford and

Wrekin

Key-relationships

built

(MVP hub

meetings)

Developed

service user

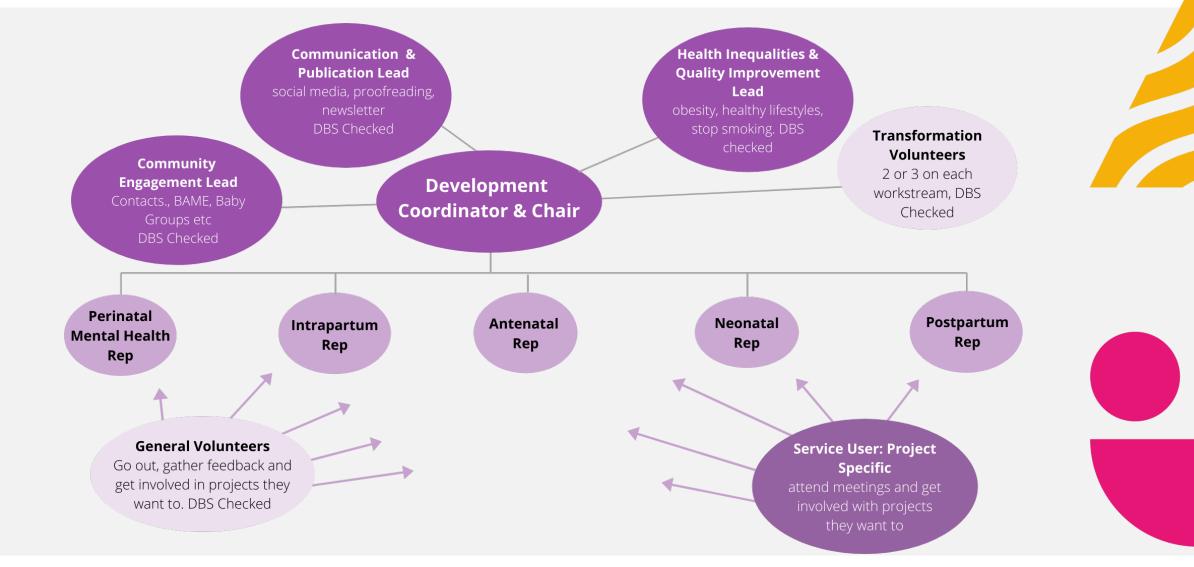
voice at focus

groups

MVP Structure



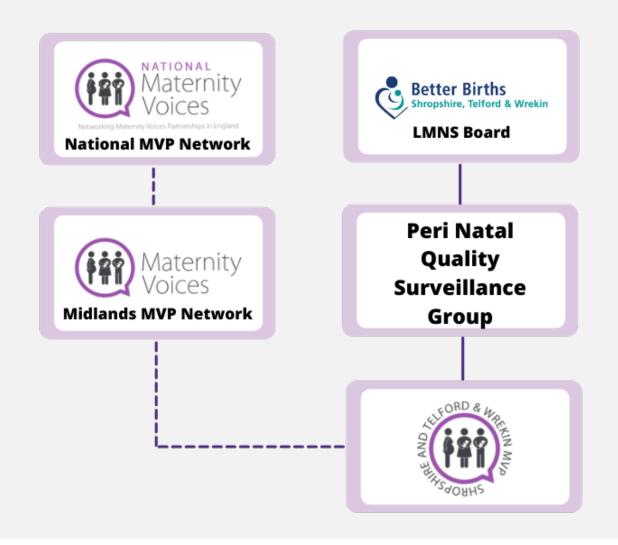




MVP Structure













MVP Projects

Meetings We Attend





Nature of meeting	Meeting name		
Maternity Transformation Programme (MTP)	 Ockenden Report Assurance Committee (ORAC) Maternity Transformation Assurance Committee (MTAC) MTP Comms & Engagement workstream MTP People & Culture workstream User Experience workshops & catch up meetings 		
Internal SaTH	 Labour ward forum Guidelines Weekly Head of Midwifery (HOM) meeting SaTH engagement SaTH Equality, diversity & Inclusion panel 		
Local Maternity and Neonatal System Programme board (LMNS)	 Perinatal Quality Surveillance Group (PQSG) LMNS Programme board Perinatal mental health workstreams Healthy Pregnancy & Healthy Families Workstream Neonatal workstream 		
MVP	 Quarterly MVP hub meetings Regional MVP catch ups National MVP catch ups 		

*Plus ad-hoc focus groups and more...



Project Involvement





Development of new Lighthouse mental health service	Labour and Birth Choices Leaflet	Antenatal education	Perinatal mental health leaflet designs	Enhanced Recovery Leaflet
Bid for Perinatal Pelvic health service	Recruitment and interviews	Breastfeeding peer support program	LMNS cookbook and exercise videos	Midwife Led Unit upgrade
360 Virtual tours	Saving babies lives information leaflet	Birth Reflections service development	Partners COVID-19 Passport	MVP/SaTH Standard operating procedure
Birth Place Choice Leaflet	SaTH Postnatal Survey	Reduced fetal movements campaign	COVID-19 Support	Communication & language training
Personalised Care and Support Plans	SaTH postnatal development plan	Website analysis and redesign	Continuity of Carer	Cross border working

Examples of Great Co-production (Maternity Voices





✓ MLU Upgrade



✓ 360 Tour



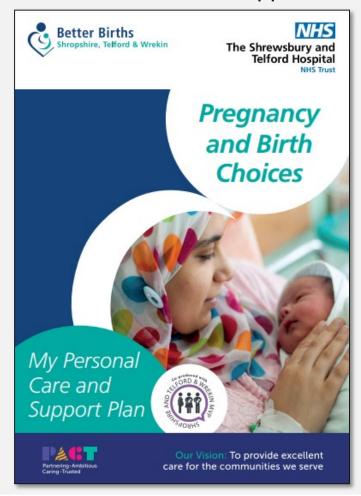


Examples of Great Co-production (Maternity V



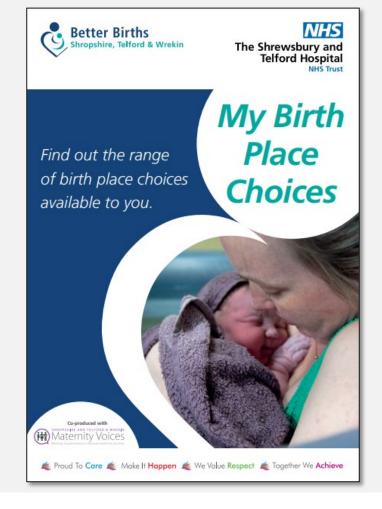


Personalised Care & Support Plan





Birth Place Choice Leaflet







MVP Feedback

Surveys We Have Carried Out





- ✓ Antenatal Education
- ✓ Friends of Princess Royal Shop
- ✓ Caesarean Section Experience
- ✓ Personalised Care baseline survey Supported
 SaTH survey
- ✓ Continuity of Carer Survey
- ✓ Reduced fetal movements survey
- Regular gathering of experiences and general feedback which is given to SaTH monthly





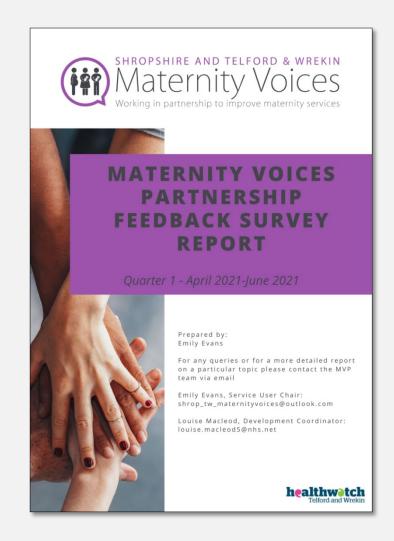
What would have improved your experience during your time in the operating theatre and recovery?

MVP Feedback Survey





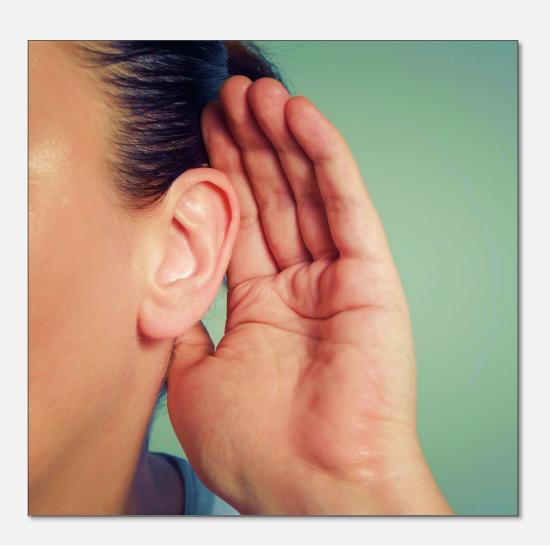
- Launched in April 2021.
- Hosted on Healthwatch Telford and Wrekin Website.
 <u>https://www.healthwatchtelfordandwrekin.co.uk/shropshire-and-telford-wrekin-maternity-voices-feedback-form</u>
- Range of in depth questions covering the whole perinatal experience.
- We also gather demographics on people completing the form.
- Shared on social media regularly, business cards with QR code link delivered to SaTH.
- Open to women and birthing people who have used services within last 2 years.
- Reported quarterly to MVP hub meeting to inform MVP work programme.
- Informs the Perinatal Quality Surveillance process.
- Results published on our website and social media.
 https://www.healthwatchtelfordandwrekin.co.uk/maternity-voices-partnership



The MVP Feedback Survey Report Q1







MVP Feedback Survey:

- 100 respondents during April 2021-June 2021
- 60% first time parents
- 94% White British
- 85% aged between 25-39

Key Themes:

- Continuity of Care
- Language, communication and information
- Postnatal contact

Key Themes Q1





Continuity of Care:

- This encompasses not only midwifery care (Continuity of Carer) but also continuity of consultants, locations of care and standards of care.
- When asked 'what would improve antenatal care' a third of the responses mentioned continuity of care. Building a trusting relationship with service providers is highly important.

Language, Communication & Information:

- The way people are spoken to, the words used and body language can have a huge impact on how people feel about the care they received.
- Information must be provided clearly and without bias or pressure so people can make an informed choice about their care.

The continuity was key for me personally. I needed to build up trust. The support I had from all three (midwife, EPAS and consultant) was incredibly important in my case

Individualised, catered for my mental health needs and kept me well antenatally and postnatally. My midwife was brilliant, she took the time to answer my questions and develop a plan with

I felt as though I was told what to do without any full explanations or information/ evidence, rushed through any decisions (like induction) without a single piece of info or evidence, and was too nervous and overwhelmed to speak up.

Key Themes Q1 & Going Forwards





Postnatal contact:

 Services users indicated that they wanted or expected more contact and support postnatally. This is both physical support around recovery but also emotional support. Many postnatal services were impacted by Covid including home visits (from midwives and health visitors), weigh-in clinics and feeding support. Follow up physical exam to check C-section scar (3 and 6 months maybe) and advice on how to massage it. Up to date advice on pelvic floor exercises. Advice and support on how to manage a newborn and an older child after major surgery.

Going Forwards:

- Reports will continue to be published quarterly, highlighting key themes. We will also report on actions and improvements made based on the feedback reports.
- MVP focus will be on ensuring we are gathering feedback from a representative sample of service users.

More Midwife appointments and check ups and lots more health visitor check ups, I haven't seen or heard from and health visitor since I rung at 6 weeks old! He's now nearly 8 months old.





Maternity Transformation Programme (MTP) —

Involvement with MTP: Workstreams & recruitment

How does the MVP work with the MTP team?





- ✓ Worked with the team since summer of 2020.
- ✓ Built relationships with the core MTP team.
- ✓ Regularly sit on MTP workstreams for Comms and Engagement and People and Culture.
- ✓ Developed User Experience Card System to increase Service User voice in developments.
- ✓ MTP and MVP team work well together and really spend time to work with and include the MVP in the work that is going on.



User Experience Card System





1. **UX cards completed** and
compiled by
MVP based on
theme.



2. **UX cards explained** at UX workshop with service-users & staff. UX cards **prioritised** based on MoSCoW. Then, categorised based on effort (S, M, L, XL).



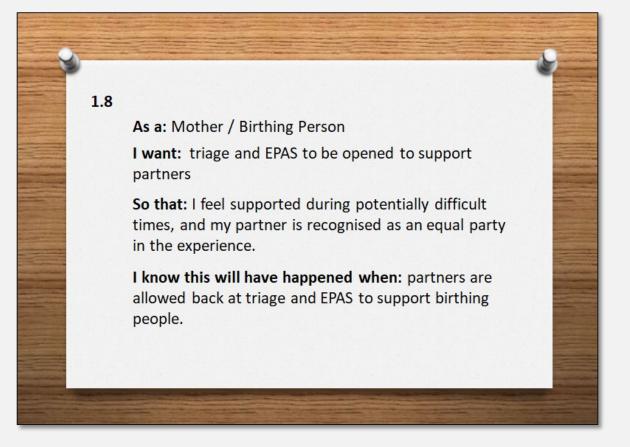
5. Meaningful change is achieved as expressed on UX card and fed back to service-users/staff.



4. UX actions are **delivered**



3. In a separate meeting with MVP, actions are produced from the UX cards in priority order.







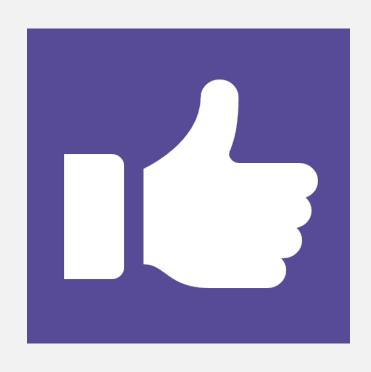


Next steps

Next Steps







- 1. Increase MVP Membership (service users, support people and staff).
- 2. Increase reach to seldom heard groups.
 - Use volunteers to get out and about in the community to take survey out to more people.
 - Use Community Engagement Lead to make links with key community leaders to increase knowledge of MVP and support seldom heard voice communities interaction.
- 3. Fully embed MVP feedback as evidence within the quality surveillance process.
- 4. Develop feedback app to enable volunteers to take feedback form out into rural communities.
- 5. Develop partners feedback form to gather partners experiences.
- 6. Encourage more Health professionals to engage with us and refer families to us and our feedback form.



Thank you