Our Healthier South East London Maternity STP Programme

A partnership of NHS providers and Clinical Commissioning Groups serving the boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark, with NHS England.
SEL Maternity Vision: Our ambition is for mothers, babies and their families to experience joined up, high quality care during and after their pregnancy. They should be supported to make choices that are right for them, and where risks or complications mean additional intervention is required the care is safe with a good outcome.
Preparing for a healthy and confident pregnancy

**Information on what to expect**  “I want to know what it will be like, what’s happening next and how I can prepare for it.”

**Early information on health and lifestyle changes**  “Earlier guidance on nutrition would have been good. It didn’t hit me until the scan that I’d have to change my diet.”  “I got most of the information from the internet - didn’t feel I got much support or guidance.”  “I get a lot of information online. There are some great Facebook groups for breastfeeding and support that really boosted my confidence around babies’ development.”

Receiving holistic, great quality care close to home

**Continuity of midwife care**  “If I had the power to change one thing in maternity services, I’d like to make sure I’m keeping the same midwives throughout my pregnancy. That makes a big difference in terms of relationship and trust.”

**Clear information about process and services**  “It’s hard to know where to go, many women end up self-refering to services.”  “Help to navigate the system is limited.”

**Better coordination and communication across teams**  “The health visitor didn’t realise I’d already had all my checks done. She should have checked her paperwork before coming over.”

**Guidance and reassurance before the scan**  “Sometimes it’s assumed you know everything about the process.”  “There is a long time until the scan when you are worried. You just want to know the baby is OK.”

**Improved emotional support**  “The first week after birth was incredibly stressful because I didn’t know what I was doing, and had limited support from any friends or family. I was very depressed.”  “The health visitor never checked for post-natal depression. She wasn’t helpful.”

**Supportive relationships with professionals**  “I want choice and I want to be trusted about my own experience and instinct.”  “The doctors and midwives don’t explain things. It’s not new to them, but it’s new to me.”

Feeling supported before and after the birth

**Choice**  “Some GPs don’t make clear the choices that can be made about hospitals and midwives.”  “I didn’t know I had a choice of where to give birth, and whether a midwife or consultant would lead.”

**Better access to information after birth**  “The information pack is confusing and not that useful. There’s too much focus on labour and not enough information about the ante or post-natal periods.”

**Involving family, partners or friends**  “It’s not clear how partners can get involved. It’s much better when they can.”

**Rounded support after birth**  “Many mums face problems with benefits and housing. Once you have a baby your entitlements change, and it’s hard to make sense of it. For under 18s it’s even more complicated.”

**Access to professional and peer support**  “It’s important to have someone to talk to when you need it. Professionals but also other mums can help reassure and give advice.”

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**Features**  These are features of the proposed model of care

- Primary prevention and wellness
- Pre pregnancy support and wellness
- Assessment of pregnancy risk before 10 weeks to assign most appropriate midwife’s team
- Culture of birthing units to encourage normal birth and achieve London Quality Standards
- 8 weeks following birth smooth handover to local care network services (health visiting, primary care, social care)
- Improved coordination through postnatal and neonatal
- Easy access to acute assessment clinic for unexpected problems during pregnancy
This is Our Healthier South East London health and care whole system model

- This is our integrated system model.
- Local Care Networks are the foundation of the whole system model providing person centred services to populations.
- The petals are the pathways providing services to cohorts of people and drawing on specialised services.
- The orange circles represent key features.
- Mental health is embedded throughout the whole system model. It is considered within Local Care Networks and each of the petals.

Mums-to-be will receive a personalised service, continuity of care and a range of birthing options.

Children and young people will be able to access more specialised services through children’s integrated community teams.

A rapid response team will make sure patients who need urgent and emergency care will receive the treatment they need in the right place at the right time and will support patients to return home and move back to local health and care services.

Improve patient outcomes through prevention and early detection and diagnosis of cancer; stronger support for people living with and beyond cancer.

Strong confident communities are a critical part of the foundation of the model. Initiatives will seek to build community resilience so that they support local people to be physically and mentally healthy and take care of peoples social needs.

Patients who need planned care across SEL will receive consistent quality and outcomes regardless of the setting.
## Developing the workstream

<table>
<thead>
<tr>
<th>STEP 1 – Stocktake &amp; understand Alignment</th>
<th>STEP 2 – Governance &amp; Mechanisms/Vehicle</th>
<th>STEP 3 – Defining Action</th>
<th>STEP 4 – Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPLETE</td>
<td>ONGOING</td>
<td>STARTING</td>
<td>Sep 2016 – FY20/21</td>
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</tbody>
</table>

- **Provider and CCG visits to understand strategic direction, review effectiveness of current OHSEL activity and understand areas where a SEL approach could support transformation/ add value.**

- **STEP 1 – Stocktake & understand Alignment**
  - **STEP 2 – Governance & Mechanisms/Vehicle**
    - Review and reform existing OHSEL governance and structures to reflect STP shift. Define the purpose and value add of SEL level forums.
    - Plan to convene SEL User representatives, Providers and Commissioners in July 2016 at Maternity network meeting to review and refine SEL work plan.

- **STEP 3 – Defining Action**
  - Developing a starter for ten on SEL health and care system Maternity work programme to share with SEL health economy.
  - Over the next few months work with the system to prioritise areas of focus, agree actions, consider resource requirements and reprioritise where necessary.

- **STEP 4 – Delivery**
  - Deliver defined programme of work with progress assessed through STP governance structures.
### SEL Maternity work programme

<table>
<thead>
<tr>
<th>No.</th>
<th>Objective</th>
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<tbody>
<tr>
<td>1.</td>
<td>Preparing for a healthy and confident pregnancy</td>
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<td>2.</td>
<td>Access to Midwifery antenatal support by 10 weeks</td>
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<td>3.</td>
<td>Continuity of midwifery-led care</td>
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<td>4.</td>
<td>Increasing out of labour ward births</td>
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<td>5.</td>
<td>Implementing London Quality Standards</td>
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<tr>
<td>6.</td>
<td>Implementing Saving Babies Lives Care Bundle</td>
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<td>7.</td>
<td>Postnatal and Neonatal Care</td>
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<td>8.</td>
<td>Perinatal Mental health</td>
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<td>9.</td>
<td>Supporting Activities</td>
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</tbody>
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# South east London STP Maternity Commitments

<table>
<thead>
<tr>
<th>STP Commitments: Meeting standards set out in the national maternity review</th>
<th>STP Commitments: Standardised information on birth setting choices (16/17)</th>
<th>STP Commitments: Full access to local specialist perinatal mental health services (19/20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>STP Commitments: Creating continuity</td>
<td>STP Commitments: Identifying high risk pregnancies before 10 weeks</td>
<td>STP Commitments: Maternity performance dashboard</td>
</tr>
<tr>
<td>STP Commitments: Promoting choice</td>
<td>STP Commitments: Increased out of labour ward births (18/19)</td>
<td>STP Commitments: Standardised maternity specification, including mental health (17/18)</td>
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<td>STP Commitments: Saving Babies Lives care bundle implementation (17/18)</td>
<td>STP Commitments: Local continuity of care ambition achieved (18/19)</td>
<td>STP Commitments: 20% reduction in stillbirths (19/20)</td>
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<td>STP Commitments: Agreed obstetric consultant cover trajectory (17/18)</td>
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*Our Healthier South East London*

*Improving health and care together*
# Summary of interventions

## Personalised care and genuine choice
- Promotion of health and wellbeing
- Provision offered in variety of settings depending on risk assessment/choice
- Standardised information

## Continuity of care
- Scaling up continuity of care and London-wide auditing
- Workforce planning and support

## Safer care, with professionals working together
- Understanding and tackling variation – Network dashboard; London toolkits
- Early risk assessment to target high risk women
- Developing standardised risk assessment and clinical care protocols
- Developing a plan and trajectory to achieve 24/7 consultant presence on labour ward

## Better postnatal and perinatal mental health care
- Prioritising breastfeeding initiation and continuation
- Improved communication and co-ordination through local care network structures/transition to HV services
- Mapping current perinatal mental health access and provision; specification

## Multi-professional working
- Mapping/review of current footprint of services against local care networks
- Ensure all women have birth and post-natal care plans
- Workforce development

## Working across boundaries to provide and commission services
- Population planning network
- Mapping/review of current footprint of services against local care networks

## Payment system
- Population planning network
- Explore outputs from national pilots
What next?

• Delivery
• We have lots of pockets of transformational practice within SEL relating to continuity of care, electronic notes, birthing units and we need to understand where the opportunities are to adopt these at scale.
• In particular we are keen to explore continuity and integration of care pathways for women with high medical or social complexity and develop outline business cases for delivering at a south east London scale.
• Understanding how maternity services interface with strengthened primary care and local care networks