Local Maternity and Neonatal System Transformation Programme Blueprint

Version 0.3
Updated: 23 October 2024
To be reviewed: March 2025 (6 monthly)

Version Control and Approval Record

Version number	Changes made	Approval date	Approval Board	Final sign off Board
V0.1	PMO First Draft	21/02/2024		
V0.1	LMNS update First Draft	17/04/24		
V0.2	LMNS update – BOARD APPROVED	24/04/24	24/04/2024	24/04/2024
V0.3	Updates on project numbers and approved projects	23/10/24	23/10/24	23/10/24

The aim of this document is to provide a clear framework for the Norfolk & Waveney Local Maternity and Neonatal System (N&W LMNS) to support systemwide service transformation, quality assurance and improvement as detailed in *Better Births, NHS Long Term Plan* and *Three-year Maternity and Neonatal Delivery Plan*

The N&W LMNS programme is underpinned by the *Better Births Vision for Maternity Services:*

- to offer women and their families safer, more personalised, kinder, professional and more family-friendly services
- to ensure every woman has access to information to enable her to make informed decisions about her care and about where she and her baby can access support that is centred around their individual needs and circumstances.
- to ensure all staff are supported to deliver care which is woman-centred, within high performing teams and in well-led organisations in which a culture of innovation and continuous learning is fostered and where organisational and professional boundaries are broken down.

The N&W LMNS Programme Board

The purpose of the Norfolk and Waveney LMNS Board is to provide the mechanism through which we will work to transform maternity services collaboratively and strategically, with a focus on delivering high quality, safe and sustainable maternity services and improved outcomes and experience for woman and their families for Norfolk and Waveney in line with the Three-Year Delivery Plan for Maternity and Neonatal Services March 2023.

Aims and responsibilities

The LMNS Board will provide the oversight and challenge to the delivery and implantation of the aims and priorities of Norfolk and Waveney LMNS underpinned by the Maternity Three Year Plan and NHS long Term Plan, while providing strategic assurance to the Integrated Care Board (ICB) and Integrated Case System (ICS) to:

- Ensure that quality and safety is central to system planning, decision-making and delivery.
- Ensure the implementation of strategies agreed by the LMNS Board to achieve the Maternity Transformation Objectives.
- Ensure oversight of performance through the receipt of dashboards and reports on changes in the operating environment, including in respect of national policy or regulatory requirements, which impact upon the LMNS.
- To ensure that women's voices are heard through the inclusion and equal partnership of the Maternity and Neonatal Voices Partnership (MNVP).

Programme: LMNS (Local Maternity and Neonatal System)

Programme:

A group of related projects managed in a coordinated way to obtain benefits and control, not available from managing them individually.

Sub-Programmes:
Digital & Data, Perinatal Optimisation, Personalisation, Workforce Transformation.

Sub- Programmes

Sub-Programmes are components of larger programmes.

Projects

Projects

Projects are comprised of a set of tasks that must be completed to achieve a specific aim(s) or change(s) within a defined timeline.

Digital & Data
- Fixing the Digital Divide - Digital gifting
- E3 - National Patient Safety Alert
- Electronic Patient Record (EPR)

Perinatal
- Data and performance reporting
- Neonatal Morbidity & Mortality
- Support for parents

Personalisation
- Antenatal Education
- Infant Feeding
- Social Prescribing

Workforce Transformation
- Student Capacity & Experience
- Retention & Succession Planning

Previous Years Completed Projects 23/24

Improving lives together
Norfolk and Waveney Integrated Care System

23/24 Projects

Objective	Ref. No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	How will this Project help achieve Objective 3- Effectively utilise capacity across all Health System Partners	Keys Risks & Issues	Status
3b	LMNS 6.1	Women and Birthing People in Dispersal Accommodation standard operating procedure	Contribute to Regional SoP to ensure pathways for women & birthing people in dispersal accommodation reflect local practice and are adopted	July 23	Nov 23	Improved access to services		Complete
3b	LMNS 6.2	Targeted Interventions	Work with Trusts to ensure services for diabetes and contraception are targeted to vulnerable groups	Mar 22	Nov 23	Improved access to services		Complete
3b	LMNS 6.3	Inclusion health local learning events	Deliver local learning events with a focus on inclusion	Mar 23	Jan 24	A full Programme of maternity health inclusion events agreed and delivered across N&W		Complete
3b	LMNS 6.4	Maternity and vulnerable adults collaborative working group	Establish and work with this group to ensure a collaborative approach to working with vulnerable groups in maternity	Mar 23	Oct 23	Improve efficiencies through collaborative working and supporting the most vulnerable in our communities		Complete
3b	LMNS 5.2	Perinatal Pelvic Health Service	As an Early Implementer site to prepare for mainstreaming and baselining the PPHS from 1 April 2024	Aug 21	Mar 24	Improved access to services	NHSE baselining of funding	Complete
3b	LMNS 4.1	Training & Education	To identify system gaps and support development of system wide training (as required)	July 23	Mar 24	Addressing system training gaps and ensuring more efficient system working to deliver staff training	Trust capacity	Complete
3b	LMNS 3.3	Optimisation Initiatives PeriPrem Kaiser Mat NEOSIP NEWT 2	Working across the system to ensure optimisation of care within neonatal units and maternity is delivered and accurately recorded by implementing the appropriate tools	Sep 23	Mar 24	Working across the system to ensure consistent tools are applied to support safe care and meeting CNST requirements	Digital capabilities & EPR	Complete
3b	LMNS 2.2	Supporting a digital culture including the implementation of the reflection toolkit	Working with Trusts to support development of a digitally efficient workforce.	Mar 23	Mar 24	System approach to digital culture	EPR , therefore only available in QEH	Complete
3b	LMNS 1.3	Personalised Care & Support Plans	To develop and implement a personalised care and support planning tool, for use across the system informed by service user voice.	Mar 21	Mar 24	Supporting the delivery of systemwide personalised care	Digital versions only available at QEH	Complete

24/25 Projects

Objective	Ref. No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	How will this Project help achieve Objective 3- Effectively utilise capacity across all Health System Partners	Keys Risks & Issues	Status
b3	**LMNS 202**	Dashboards and data	continue to develop LMNS Dashboard to support Quality Assurance and Quality Improvement. (phase 2)	01 Mar 24	25/9/2024	• **ICB:** Use data to compare their outcomes to similar systems and understand any variation and where improvements need to be made.	Lack of digital resource to automate dashboard, which is required prior to being able further develop.	Complete 25/9/24
b3	LMNS1.2	Midwifery Continuity of Carer	a) antenatal and postnatal continuity b) implementation of Midwifery Continuity of Carer (MCoC).Working across the system to support development of personalised care models	1/3/23	25/09/24	Improved access to Care	Workforce skill set	Complete 25/09/24
b3	LMNS 4.3	Labour Ward Coordinator project	a) antenatal and postnatal continuity b) implementation of Midwifery Continuity of Carer (MCoC).Working across the system to support development of personalised care models in each Trust in line with national guidance.		28/8/2024	Improved access to Care	Workforce capacity	Complete 28/8/24
b3	LMNS5.2	Workforce	Working with Trusts and Maternity & Neonatal Voices Partnerships to ensure that parents of a child in Neonatal Intensive Care Units (NICU) are listened to and supported appropriately		19/9/2024	Improved access to care	Workforce capacity	Complete 19/8/24
b3	LMNS1.5	Care for bereaved Families	As required in the 3-year maternity and neonatal plan - Based on Service user feedback, support improvement in care for bereaved families across the system.		28/8/2024	Invest to ensure availability of bereavement services 7 days a week by the end of 2023/24. This will help Trusts to provide high quality bereavement care including appropriate post-mortem consent and follow-up.		Complete 28/8/24

Road Map – Progress to-date
What have we achieved so far?

22/23
NHSE LMNS deliverable
- The LMNS fully achieved 14 out of 17 of the NHSE 22/23 deliverables. For the three partially completed robust plans are in place for 23/24

23/24
The LMNS responsibilities are informed by the Three-Year Delivery Plan for Maternity and Neonatal Services, published March 23 which incorporates Ockenden and East Kent recommendations.
- In December 2023 a review of progress was undertaken; as a system, good progress is being made against delivery of the Three-Year Plan requirements.
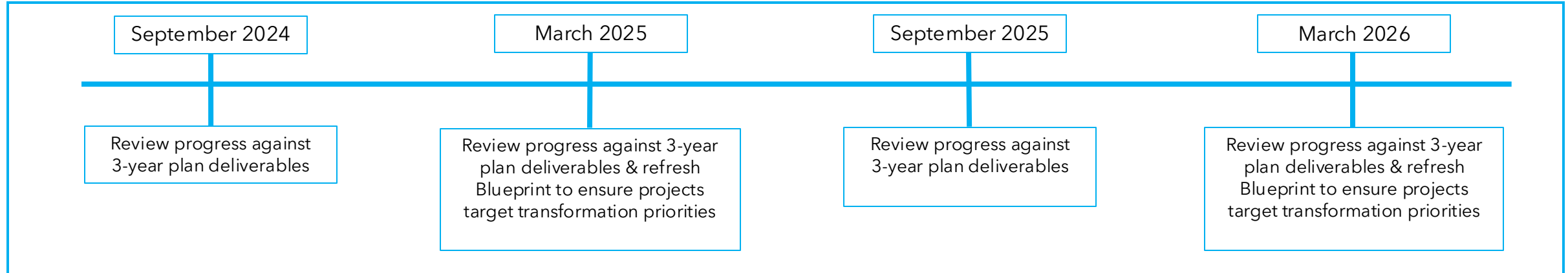
March 2023

March 2024

14 out of 17 of the NHSE deliverables achieved

3 Year Plan x 4 themes
1. Listening to women and families with compassion
2. Growing, retaining and supporting our workforce
3. Developing and sustaining a culture of safety, learning and support
4. Standards and structures that underpin safer, more personalised, and more equitable care

Plan Theme	Key points	RAG
Theme 1 – Listening to and working with women and families with compassion 1. Care that is personalised 2. Improve equity for mothers and babies 3. Work with service users to improve care	A number of Maternity & Neonatal Voice Partnerships (MNVP) requirements are already completed Work is progressing well on: • Achieving UNICEF Baby Friendly Initiative • Commissioning & delivering personalised care and support plans • Commissioning and implementing perinatal pelvic health services by the end of March 2024 • Commissioning and implementing community perinatal mental health services • MNVPs to reflect ethnic diversity of local population and reach out to seldom heard groups	
Theme 2-Growing, retaining and supporting our workforce 4. Grow our workforce 5. Value and retain our workforce 6. Invest in skills	Systemwide work is underway and progressing well to: • Maximise student placements • Monitor and address workforce planning requirements, staff training and compliance with core competency framework • Sharing best practice Areas where work has commenced but require further work include: • ICB to commission and fund safe staffing across the system • ICB to align commissioning of services to meet the ambitions outlined in this delivery plan with the available workforce capacity	
Theme 3: Developing and sustaining a culture of safety, learning and support 7. Develop a positive safety culture 8. Learning and improving 9. Support and oversight	Systemwide work is underway and progressing well to: • Monitor, support and share learning on culture • Respond effectively and openly to patient safety incidents using PSIRF (Patient Safety Incident Reporting Framework), with effective quality oversight and improved data analysis Areas where work has commenced but require further work include: • ICB to Commission services that enable, safe, equitable and personalised maternity care for the local population.	
Theme 4-Standards and structures that underpin safer, more personalised and more equitable care 10. Standards to ensure best practice 11. Data to inform learning 12. Make better use of digital technology in maternity and neonatal services	Systemwide work is underway and progressing well to: • Implement and assure compliance to Saving Babies Lives Bundle 3, Maternity Incentive Schemes and National Standards including CNST (Clinical Negligence Scheme for Trusts) • Using data to compare their outcomes to similar systems and understand any variation and where improvements need to be made • Digital strategies, Procurement of Electronic Patient Record (EPR) that meets Maternity and Neonatal requirements, supporting regional digital maternity leadership networks Areas where work has commenced but require further work include: • Commission care with due regard to NICE guidelines • Support women to set out their personalised care and support plan through digital means	

Programme Road Map – The Journey
Where are we going? (Future State)

September 2024
Review progress against 3-year plan deliverables

March 2025
Review progress against 3-year plan deliverables & refresh Blueprint to ensure projects target transformation priorities

September 2025
Review progress against 3-year plan deliverables

March 2026
Review progress against 3-year plan deliverables & refresh Blueprint to ensure projects target transformation priorities

The LMNS responsibilities are informed by the Three-Year Delivery Plan for Maternity and Neonatal services published in March 23. The plan has been developed to bring together recommendations from recent safety reports, maternity staff and women and pregnant peoples' voices to improve maternity services over the next 3 years. The plan sets out how the NHS will make maternity and neonatal care safer, more suited to individual needs and kinder.

It has four main themes:

1. Listening to women and families with compassion
2. Growing, retaining and supporting our workforce
3. Developing and sustaining a culture of safety, learning and support
4. Standards and structures that underpin safer, more personalised, and more equitable care.

Programme Road Map
How do we get there? (What must we do) Years 24/25)

System approach

- The purpose of the Local Maternity and Neonatal System (LMNS) is to bring together commissioners, providers and service users to develop and implement a locally owned plan. The LMNS is overseen by a board that includes midwives, provider staff, consultants, NHS England, Norfolk and Waveney ICB, UEA and Public Health. The local plan aims to deliver the requirements of the NHS England Three-year delivery plan for maternity and neonatal (March 2023). Quality and safety oversight in line with PQSM.

Maximising alternatives
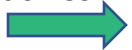
- Potential to look at opportunities for the system form the new hospital programme

Increasing capacity

- Through Perinatal Optimisation and Workforce sub programmes

Planning

- Refresh Blueprint annually
- Review Performance quarterly
- Monthly highlight reporting to LMNS board to ensure on target for deliverables
- Feed into ICB planning cycle

Governance

- Adhering to ICB processes and policies
- Maintain LMNS Board governance
- Implement refreshed Neonatal governance
- Refresh Perinatal Surveillance Governance Structure in line with approved changes and new guidance

Objective - 3b - Continued development of our Local Maternity and Neonatal System (LMNS), including the Three-Year Maternity Delivery Plan

April 2023 to March 2024

Year 1 April 2023 – Sep 2023
- Culture Workshop held
- Publication of LMNS Data Dashboard to automatically report KPIs to LMNS board.
- Review of LMNS governance and reporting

Year 1 Oct 2023 – March 2024
- MNVP action plan produced and published.
- Review of MNVP function supported by national and regional guidance by Jan 24

April 2024 to March 2028

Year 2 April 2024 – Sep 2024
- Revised MNVP approved and ready for implementation.
- LMNS governance and reporting reviewed, refreshed and updated.

Year 2 Oct 2024 – March 2025
- Pelvic Health Prevention Service is embedded.

Year 3 (April 2025) – Year 5 (March 2028)
- We will continue to embed the learning, upskill the workforce, continue to hear the service user voice and drive continued quality and safety measures as part of our usual business.

How will we know we are achieving our objective?
- We will see the maternity workforce vacancies reduce and retention improve, with clear evidence of future leaders ready to drive forward maternity improvement.

Current Sub-Programmes

Ref No.	Sub-Programme Title	Sub-Programme Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	What is this project going to achieve (benefits / Impact) Three Year Plan	Key Stakeholders	Keys Risks & Issues	RAG
1	Personalisation	To support the system to deliver care that is personalised through the models of care developed and the implementation of personalised Care & Support Plans (PCSP)	Apr 23	Mar 26	**Theme 1** – Listening to and working with women and families with compassion	NNUH, JPUH, QEKLH, ICB, NHSE, NCC	Digital maturity to deliver the Digital PCSP	🟩
2	Digital & Data	To support systemwide implementation of Electronic Patient Record (EPR) for maternity and neonatal. To Develop a digital maternity dashboard for the LMNS	Mar 21	Mar 26	**Theme 1** – Listening to and working with women and families with compassion **Theme 4 -** Standards and structures that underpin safer, more personalised and more equitable care	NNUH, JPUH, QEKLH, ICB, NHSE, NCC	Digital maturity	🟧
3	Perinatal	Supporting the neonatal services to deliver safe and equitable care resulting in a reduction of preterm births, improved data collection and optimisation of outcomes with parents well supported	Mar 21	Mar 26	**Theme 1** – Listening to and working with women and families with compassion **Theme 2** - Growing, retaining and supporting our workforce **Theme 3-** Developing and sustaining a culture of safety, learning and support **Theme 4 -** Standards and structures that underpin safer, more personalised and more equitable care	NNUH, JPUH, QEKLH, ICB, NHSE, NCC	Digital maturity	🟩
4	Workforce Transformation	To grow retain and support the maternity & neonatal workforce with a focus on culture, retention and succession planning and training & education	Mar 23	Mar 26	**Theme 2** - Growing, retaining and supporting our workforce **Theme 3-** Developing and sustaining a culture of safety, learning and support	NNUH, JPUH, QEKLH, ICB, NHSE, NCC	Staffing skills mix	🟩

Improving lives together
Norfolk and Waveney Integrated Care System

Ref No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	What is this project going to achieve (benefits / Impact) Three-year Plan	Key Stakeholders	Keys Risks & Issues	Impact Assessments Required (EIA, DPIA, CQRA, Comms)	Project Lead & Organisation
LMNS 102	**Infant Feeding**	As part of Start for Life Programme, supporting development of Infant Feeding Peer Support service.	01 Jun 23	01 Mar 25	**Theme 1 – Objective 1 Care that is personalised** **Trusts:** Achieve the standard of the UNICEF UK Baby Friendly Initiative (BFI) for infant feeding, or an equivalent initiative, by March 2027.	NNUH JPUH QEKLH ICB NHSE NCC	Capacity of Trusts to mainstream Recruitment of volunteers		Anne – Loise Schofield – NCC Alana Hunt – LMNS Sarah Collingwood - LMNS
LMNS 104	**Social Prescribing**	To support inclusive access to health services, this project will promote current social support available within the community through risk stratification and signposting, as well as piloting the provision of dedicated maternity social prescribing	April 24	March 25	**Theme 1 – Objective 1 Care that is personalised & Objective 2 Improve equity for mothers and babies** • **Trusts**: Provide services that meet the needs of their local populations, paying particular attention to health inequalities • **ICB:** continue to publish and lead implementation of their LMNS equity and equality action plan	JPUH ICB			Alana Hunt – LMNS Sarah Collingwood - LMNS
LMNS 105	**Antenatal education**	Develop a system wide antennal programme to support personalised care and address findings of LMNS Mortality & morbidity Deep Dive Jan 24	Mar 24	Mar 25	**Theme 1 – Objective 1 Care that is personalised** **Trusts**: Consider roll out midwifery continuity of carer in line with the principles NHS England set out in September 2022. • **ICB:** Commission for and monitor implementation of personalised care for every woman	NNUH JPUH QEKLH ICB NHSE NCC	Capacity of Trusts to mainstream		Alana Hunt - LMNS Karen Warrington - LMNS

Current Projects – Digital and Data
(Sub-Programme 2)

PMO
Project Management across Norfolk and Waveney

Improving lives together
Norfolk and Waveney Integrated Care System

Ref No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	What is this project going to achieve (benefits / Impact) Three-year Plan	Key Stakeholders	Keys Risks & Issues	Impact Assessments Required (EIA, DPIA, CQRA, Comms)	Project Lead & Organisation
LMNS 201	**Fixing the Digital Divide - Digital gifting**	Support the three Norfolk and Waveney Acute Trusts to become a Maternity Digital Hub, collaborating with the Good Things Foundation, to help fix the digital divide in England	01 Mar 24	01 MAR 25	**Theme 1 Objective 2 Improve equity for mothers and babies** • **Trusts:** Provide services that meet the needs of their local population. **NHSE:** Pilot and evaluate new service models designed to reduce inequalities. **Theme 3 Objective 9 Support and Oversight** • **ICB:** Commission services that enable safe, equitable and personalised care for the local population.	NNUH JPUH QEKLH ICB NHSE	Trusts not embedding scheme effectively and sim cards are not distributed to pregnant people who require them. Lack of digital resource to automate dashboard, which is required prior to being able further develop.		Delyse Maidman– LMNS Chloe O'Grady LMNS Jess Nichols QEH Kristy Ellwood NNUH Tracey Hannant / Peta Kerrigan JPUH
LMNS 203	**Electronic Patient Record (EPR)**	To support the inclusion of Maternity and Neonatal in EPR Project Roll Out (Safety Focus)	01 Mar 22	01 May 26	**Theme 4 Objective 12 Make better use of digital technology in Maternity and Neonatal Services** • **Trusts:** Procure an EPR system – where that is not already being managed by the ICB – that complies with national specifications and standards, including the Digital Maternity Record Standard and the Maternity Services Data Set and can be updated to meet maternity and neonatal module specifications as they develop. • **ICB:** Have a digital strategy and, where possible, procure on a system-wide basis to improve standardisation and interoperability • **NHSE:** Set out the specification for a compliant EPR, including setting out the requirements for maternity by March 2024	NNUH JPUH QEKLH ICB NHSE	Timeline Digital resource required System suitability for Maternity and Neonatal services. Current risks with E3 / Magentus relating to NPSA and system fragility Identifying gaps and how these will be resolved		Delyse Maidman LMNS Chloe O'Grady LMNS Jess Nichols QEH Kristy Ellwood NNUH Tracey Hannant / Peta Kerrigan JPUH
LMNS 204	**E3 - National Patient Safety Alert**	To support Trusts to meet the deadline and actions outlined in the NPSA. As a result of the risk associated to the backward and forwards copying of patient records.	07 Dec 23	07 Dec 24	**Theme 4 Objective 12 Make better use of digital technology in maternity and Neonatal services** • **NPSA Alert:** A National Patient Safety Alert has been issued by the NHS England National Patient Safety Team on identified safety risks with the Euroking maternity information system	NNUH JPUH QEKLH ICB NHSE Magentus	Lack of digital resource Magentus unable to provide a suitable solution Contract end dates EPR timelines System failing and Trusts need to move away from MIS.		Delyse Maidman LMNS Chloe O'Grady LMNS Jess Nichols QEH Kristy Ellwood NNUH Tracey Hannant / Peta Kerrigan JPUH

Ref No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	What is this project going to achieve (benefits / Impact) Three-year Plan	Key Stakeholders	Keys Risks & Issues	Impact Assessments Required (EIA, DPIA, CQRA, Comms)	Project Lead & Organisation
LMNS 301	**Data and Performance Reporting**	Work with national regional and local colleagues to ensure data is captured / pulled and reported accurately	01 Jul 23	TBC	**Theme 4 Objective 11 Data to inform learning** • **ICB:** Use data to compare their outcomes to similar systems and understand any variation and where improvements need to be made • **NHSE:** At a regional level understand any variation in outcomes and support local providers to address identified issues **Theme 4 Objective 12 Make Better use of digital technology in Maternity and Neonatal Services** • **Trusts:** Aim to ensure that any neonatal module specifications include standardised collection and extraction of neonatal national audit programme data and the neonatal critical care minimum data set.	NNUH JPUH QEKLH ICB NHSE	1. Neonatal data not match maternity data causing discrepancies 2. MIS system within 2 Trusts which could be providing inaccurate data		Lydia Frere Smith – LMNS Florence Waltson- NNUH
LMNS 303	**Neonatal Mortality and Morbidity – Pre-Term & Multiplies Births Pathway**	To work with Trusts to identify areas for improvement relating to Neonatal Mortality and Morbidity rates including preterm birth rates in line with national target of reducing these figures by 6% by 2025	01 Apr 24	March 26	**Theme 4 Objective 10 Standards to ensure best practice** • **Trusts:** Implement version 3 of the Saving Babies lives care bundle by March 24 and adopt the national MEWS and NEWTT2 tools by March 25. • Regularly review and act on local outcomes including stillbirth, Neonatal mortality and brain injury and maternal morbidity and mortality to improve services.. **Theme 4 Objective 11 Data to inform learning** • **Trusts:** Review available data to draw out themes and trends and identify and promptly address areas of concern including the consideration of the impact of inequalities.	NNUH JPUH QEKLH ICB NHSE	1. National documentation not being fit for purpose 2. Staff capacity to implement digital resources.		Lydia Frere Smith – LMNS Florence Waltson- NNUH
LMNS 304	**Support for Parents**	Working with Trusts and Maternity & Neonatal Voices Partnerships to ensure that parents of a child in Neonatal Intensive Care Units (NICU) are listened to and supported appropriately	01 Oct 23	March 25	**Theme 1 Objective 3 work with service users to improve care** • **Trusts:** Involve service users in quality governance and co production when designing and planning delivery of Maternity and Neonatal services. • **NHSE:** Through ODNS support parent representation in the governance of Neonatal services.	NNUH JPUH QEKLH ICB NHSE	1. Current issues with MNVPs in terms of ensuring HMRC compliant 2. Availability and resource to participate.		Lydia Frere Smith – LMNS Florence Waltson- NNUH

PMO — Project Management across Norfolk and Waveney

Improving lives together — Norfolk and Waveney Integrated Care System

Ref No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	What is this project going to achieve (benefits / Impact)	Key Stakeholders	Keys Risks & Issues	Impact Assessments Required (EIA, DPIA, CQRA, Comms)	Project Lead & Organisation
LMNNS 401	**MSWs (Retention and Succession Planning)**	Working with Trusts to support the active retention and succession planning across the system.	June 24	Mar 25	**Theme 2 – Objective 5 - Value and retain our workforce** • **Trusts:** Develop future leaders through succession planning, ensuring this pipeline reflects the ethnic background of the wider workforce • **ICB:** Share best practice for retention and staff support • Highlight common or high-impact retention challenges to the national team to enable consideration of a national launch	NNUH JPUH QEKLH ICB NHSE	Workforce funding		Alana Hunt LMNs
LMNS 402	**Student Capacity and Experience**	Systemwide working to address finding of HASKE report and student charter Preparation and support for employment in or out of the system	June 24	Mar 25	**Theme 2 – Objective 4 - Grow our workforce** • **ICBs:** Work with Trusts and higher education institutions to maximise student placement capacity, ensuring the breadth and quality of clinical placements	NNUH JPUH QEKLH ICB NHSE			Alana Hunt LMNs

Quality and Safety Oversight (BAU)

Ref. No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	Three-year Plan	Key Stakeholders	Project Lead & Organisation
	Governance	• To ensure the LMNS Programme has **robust governance** in place to deliver **Quality & Safety Surveillance** requirements HCIB / SIs / GIRFT / NCCR / RPQOG and PSIRF • Ensure **Perinatal Surveillance Governance** (PQSM) framework reviewed and updated in line with most recent guidance	N/A	N/A	**Theme 3** **Objective 8 – Learning and Improving** • **ICB:** Oversee implementation of the PSIRF safety improvement plan during 2023/24, monitoring the effectiveness of incident response systems in place • **NHSE:** Throughout 2023, support the transition to PSIRF through national learning events. **Objective 9: Support and oversight** • **ICB:** Oversee quality in line with the PQSM and NQB guidance, with maternity and neonatal services included in ICB quality objectives • **NHSE:** During 2023/24, test the extent to which the PQSM has been effectively implemented	NNUH JPUH QEKLH ICB NHSE NCC	Nicola Lovett LMMNS Emma Wiskin LMNS
	Saving Babies Lives Care Bundle	• Ensuring **Saving Babies Lives Care Bundle 3** (SBLCB3) is embedded and maintained across the LMNS and all assurances are in place	N/A	N/A	**Theme 4** **Objective 10 – Standards to ensure best practice** • **Trusts:** Implement version 3 of the Saving Babies' Lives Care Bundle by March 2024 and adopt the national MEWS and NEWTT-2 tools by March 2025. • **ICB:** Prioritise areas for standardisation and co-produce ICS-wide clinical policies such as for implementation of the Saving Babies' Lives Care Bundle.	NNUH JPUH QEKLH ICB NHSE NCC	Nicola Lovett LMMNS Emma Wiskin LMNS
	MIS CNST	Oversight of **MIS CNST** year 6 to ensure compliance	N/A	N/A	**Theme 4** **Objective 10 – Standards to ensure best practice** • **ICB:** Oversee and be assured of Trusts' declarations to NHS Resolution for the maternity incentive scheme.	NNUH JPUH QEKLH ICB NHSE NCC	Nicola Lovett LMMNS Emma Wiskin LMNS
	Quality & Safety oversight	Ensure oversight of systemwide **quality and safety reports and dashboards** to identify areas for quality improvement	N/A	N/A	**Theme 3 7** **Objective 9 – Support and Oversight** • **ICB:** Lead local collaborative working, including the production of a local quality dashboard that brings together intelligence from Trusts **Objective 11 – Data to inform learning** • **Trusts:** Review available data to draw out themes and trends and identify and promptly address areas of concern including consideration of the impact of inequalities • **ICB:** Use data to compare their outcomes to similar systems and understand any variation and where improvements need to be made.	NNUH JPUH QEKLH ICB NHSE NCC	Nicola Lovett LMMNS Emma Wiskin LMNS

PMO — Project Management across Norfolk and Waveney

Improving lives together — Norfolk and Waveney Integrated Care System
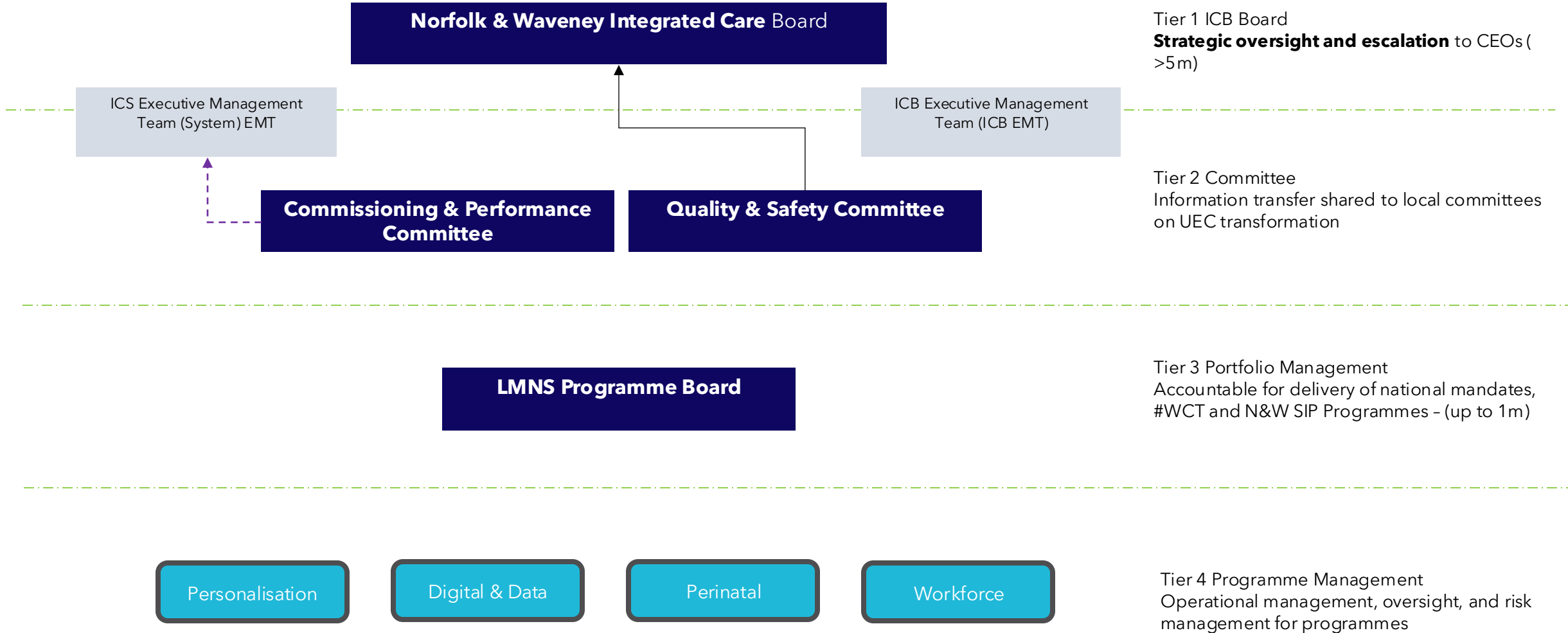
Ref. No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	Three-year Plan	Key Stakeholders	Project Lead & Organisation
	MNVPs development and governance	• Management of MNVPs • Continued review to ensure compliant with latest guidance and CNST requirements • Embedding a sustainable MNVP within N&W	N/A	N/A	**Theme 1** **Objective 2: Improve equity for mothers and babies** • **ICB**: Commission MNVPs to reflect ethnic diversity of local population and reach out to seldom heard groups **Objective 3: Work with service users to improve care** • **ICB:** Commission and fund MNVPs, to cover each Trust within their footprint, reflecting the diversity of the local population in line with the ambition above. • Remunerate and support MNVP leads, and ensure that an annual, fully funded workplan is agreed and signed off by the MNVP and the ICB. All MNVP members should have reasonable expenses reimbursed • Ensure service user rep are members of local maternity and neonatal system board	NNUH JPUH QEKLH ICB NHSE	Toni Jeary – LMNS Sarah Collingwood - LMNS
	Communication & Engagement	Managing newsletters, website, social media, training and local earning events Choices Booklet & PCSPs • Working with Start for Life, Just One Norfolk and the Trust to ensure accessible information is available for service users	N/A	N/A	**Theme 1** **Objective 1: Care that is personalised** • **ICB:** Commission and monitor PCSP and PC • **NHSE:** Produce standardised info to aid decision making **Theme 3** **Objective 7: Develop a positive safety culture** • **ICB:** Provide opportunities for leaders to come together across organisational boundaries to learn from and support each other. **Objective 8 – Learning and Improving** • **ICB:** Share learning and good practice across all Trusts in the ICS.	NNUH JPUH QEKLH ICB NHSE	Mollie Haskey – LMNS Jo Govier – LMNS Alana Hunt – LMNs Sarah Collingwood - LMNS
	Digital Strategies	Monitoring and reviewing Trust and LMNS digital strategies	N/A	N/A	**Theme 4** **Objective 12 – make better use of digital technology in maternity and neonatal services** • **Trusts:** Have and be implementing a digital maternity strategy and digital roadmap in line with the NHS England what good looks like framework • **ICB:** Have a digital strategy and, where possible, procure on a system-wide basis to improve standardisation and interoperability. • Support regional digital maternity leadership networks.	NNUH JPUH QEKLH ICB NHSE	Delyse Maidman– LMNS Chloe O'Grady LMNS
	Training & education	Supporting the system to ensure • All staff are deployed to roles where they can develop and are empowered to deliver high quality care. Specialist roles within each profession, for example the labour ward coordinator, have a job description, orientation package, appropriate training, and ongoing development. • All staff have regular training to maintain and develop their skills in line with their roles, career aspirations, and national standards. • Training is multi-disciplinary wherever practical to optimise teamworking.	N/A	N/A	**Theme 2** **Objective 5 – Value and retain our workforce** ICBS : Share best practice for retention and staff support **Theme 3** **Objective 6 – Invest in skills** • Trusts: undertake an annual training needs analysis and make training available to all staff in line with the core competency framework V2 **Objective 7 – Develop a positive safety culture** • ICB: Monitor the impact of work to improve culture and provide additional support when needed. • Provide opportunities for leaders to come together across organisational boundaries to learn from and support each other. **Objective 8 – Learning and Improving** • ICB: Share learning and good practice across all Trusts in the ICS.	• NNUH • JPUH • QEKLH • ICB • NHSE	Mollie Haskey – LMNS Jo Govier – LMNS

PMO — Project Management across Norfolk and Waveney

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Ref. No.	Project Title	Project Executive Summary (What is your change & how will it be achieved)	Start Date	Implement Date	Three-year Plan	Key Stakeholders	Project Lead & Organisation
	Equity & Equality	• Refresh review and deliver the E&E plan • Ensure population health management data is published to enable targeted interventions to address health inequalities • Health inclusion work	N/A	N/A	**Theme 1** **Objective 2: Improve equity for mothers and babies** • ICB: Lead implementation of LMNS E+E action plan • Commission MNVP's to reflect the ethnic diversity of the local population and seldom heard • Trusts: Provide services appropriate to the demographics and reduce health inequalities ie interpreter services • Collect data and feedback and use to identify and address inequity or inequalities **Theme 4** **Objective 11 – Data to inform learning** • ICB: Use data to compare their outcomes to similar systems and understand any variation and where improvements need to be made.		Lydia Frere Smith - LMNS Sarah Collingwood - LMNS
	Perinatal Pelvic Health Service (PPHS)	• System oversight of PPHS • Development of SPA • Establishment of KPI reporting	N/A	N/A	**Theme 1** **Objective 1: Care that is personalised** • ICB: Commission and implement perinatal pelvic health services by the end of March 2024, in line with national service specifications, to identify, prevent, and treat common pelvic floor problems in pregnant women and new mothers.	NNUH JPUH QEKLH ICB NHSE	Toni jeary – LMNS Jenna sweeney - LMNS
	Performance Management	• Contract management PPHS / MMN / PNMHS / • Using data and intelligence to inform, audits, reviews and Deep Dives • Implementation of Midwifery Continuity of Carer (MCoC). Working across the system to support development of personalised care models in each Trust in line with national guidance.	N/A	N/A	**Theme 1** **Objective 1: Care that is personalised** • ICB: Commission and monitor PCSP and PC • Commission and implement perinatal pelvic health services by the end of March 2024, • Commission and implement Perinatal mental health services • ICB: Commission for and monitor implementation of personalised care for every woman **Theme 3** **Objective 9 – Support and oversight** • ICBS: Commission services that enable safe, equitable, and personalised maternity care for the local population. • Oversee quality in line with the PQSM and NQB guidance, with maternity and neonatal services included in ICB quality objectives. • Lead local collaborative working, including the production of a local quality dashboard that brings together intelligence from Trusts. **Theme 4** **Objective 11 – Data to inform learning** • ICB: Use data to compare their outcomes to similar systems and understand any variation and where improvements need to be made.	NNUH JPUH QEKLH ICB NHSE	Toni Jeary – LMNS Nicola Lovett - LMNS

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Blueprint programmes	PM Lead	August 2024	September 2024	October 2024	November 2024	December 2024	January 2025	February 2025	March 2025	April 2025	May 2025	June 2025	July 2025	August 2025	September 2025	October 2025
		0															
Personalisation	Alana															
Infant feeding	Sarah								End of project							
Social Prescribing	Sarah	Great Yarmouth offer launch by 29th July 2024		Remaining areas within Norfolk by 31st Oct 2024	Waveney offer launch by 30th Nov 2024 Embedding	Embedding PDSA's - any initial improvements Comm's and engagement Targeted support for any identified barriers	Embedding PDSA's - any initial improvements Comm's and engagement Evaluation Targeted support for any identified barriers	Evaluation								
Antenatal education	Karen	Funding approval	Scoping		Implementation & roll out				Initial 3-month review of the programme implementation, plan for annual review and evaluation moving forward							
Digital and Data	Delyse															
Fixing the Digital Divide	Chloe		EDAM PID to LMNS Board													
Electronic Patient Record (EPR)	Chloe EPR no dates in workbook yet.		EPR update Requested LMNS Board													
National Safety Patient Alert	Chloe					Identify impacted questions and workflows Assess print option for all workflows Magentus to confirm whether have ability to prevent back copying Business Continuity plans										
Perinatal	Lydia															
Data Performance Reporting	Chloe			Meeting with Delyse Lydia workstream	PID Nov/Dec											
Neonatal Mortality and Morbidity-Pre-Term Multiplies Birth Pathway	Chloe	Proposed Start Date: July 2024		Induction plan meeting with Project team	Project manager Midwife due to start				Assessment							
Support for Parents	PID being developed			PID to board in October					Closure date							
Transformation Workforce	Alana															
MSW (Retention and Succession Planning)	Karen		Map current MSW workforce against the refreshed framework by 30th Sept 2024	Develop a clear education and training plan to enable all current and future MSWs to meet the requirements by 31st Oct 2024.	MSW's who meet the requirements as Maternity Support Worker occupational code N9C on ESR by 30th Nov 2024.											
Student Capacity and Experience Draft in Horns Doms	Karen		PID approval by 30th Sept 2024	Identify trust leads and set up task and finish group by 14 Oct 2024.	Review and standardise role requirements for student midwife leads/clinical educators and student support from HEI's by 30 Nov 2024.	Review and standardise placement capacity and spread by 31st Dec 2024.										

LMNS – BAU Timelines

Business as usual	PM lead	August 2024	September 2024	October 2024	November 2024	December 2024	January 2025	February 2025	March 2025	April 2025	May 2025	June 2025	July 2025	August 2025	2025	2025
MNVP Development and Governance	Toni															
Management of MNVPs	Sarah monthly		ESR Payments	CAN close												
Continued review to Ensure Compliant with Latest Guidance and CNST Requirements	Sarah			Review			Review			Review						
Embedding a Sustainable MNVP within N&W from Sarahs workbook	Sarah								End							
Independent Review HWN	Toni								Final report							
Perinatal Pelvic Health PPHS service	Jenna															
System Oversight of PPHS	Andy				(orange)	(orange)										
Development of SPA	Andy			(orange)	(orange)	(orange)	(orange)									
Establishment of KPI Reporting	Andy	(orange)	(orange)	(orange)												
Performance Management	Toni															
Contract Management PPHS/MMN/PNMHS	Andy				QTR report 2		QTR report 3				QTR report 4 plus annual Report					
Using Data and Intelligence to inform Audits, Reviews and Deep dives	Toni / EmmaW			Board report			Board Report			Board Report			Board Report			
Personalised Models of Maternity Care	Toni / Alana															
Quality and Safety Oversight	Nicola															
PQSM	NL/EW		Sept Board													
SBL	NL/EW					LMNS Board	LMNS Board		end		year 7 to comence					
CNST	NL/EW					LMNS Board	LMNS Board		end		year 7 to comence					
Digital																
Dashboards and Data	Chloe	How to use Guide		Development of Dashboard MSDS Closed sept												

N&W Governance (Reporting) Structure – Tier 1 – 4

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Norfolk & Waveney Integrated Care Board

ICS Executive Management Team (System) EMT

ICB Executive Management Team (ICB EMT)

Commissioning & Performance Committee

Quality & Safety Committee

LMNS Programme Board

Personalisation

Digital & Data

Perinatal

Workforce

Tier 1 ICB Board
Strategic oversight and escalation to CEOs (>5m)

Tier 2 Committee
Information transfer shared to local committees on UEC transformation

Tier 3 Portfolio Management
Accountable for delivery of national mandates, #WCT and N&W SIP Programmes – (up to 1m)

Tier 4 Programme Management
Operational management, oversight, and risk management for programmes

For N&W LMNS, the following quadrants form the basis of the programme, supporting the delivery of *Three year maternity and Neonatal Delivery Plan* locally.

Transformation
- Personalisation
- Digital & data
- Workforce
- Perinatal

Quality & Safety
- PSIRF
- Safeguarding & neonatal death
- Maternal Deaths
- Quality oversight
- Quality & Safety Committee
- Assurance
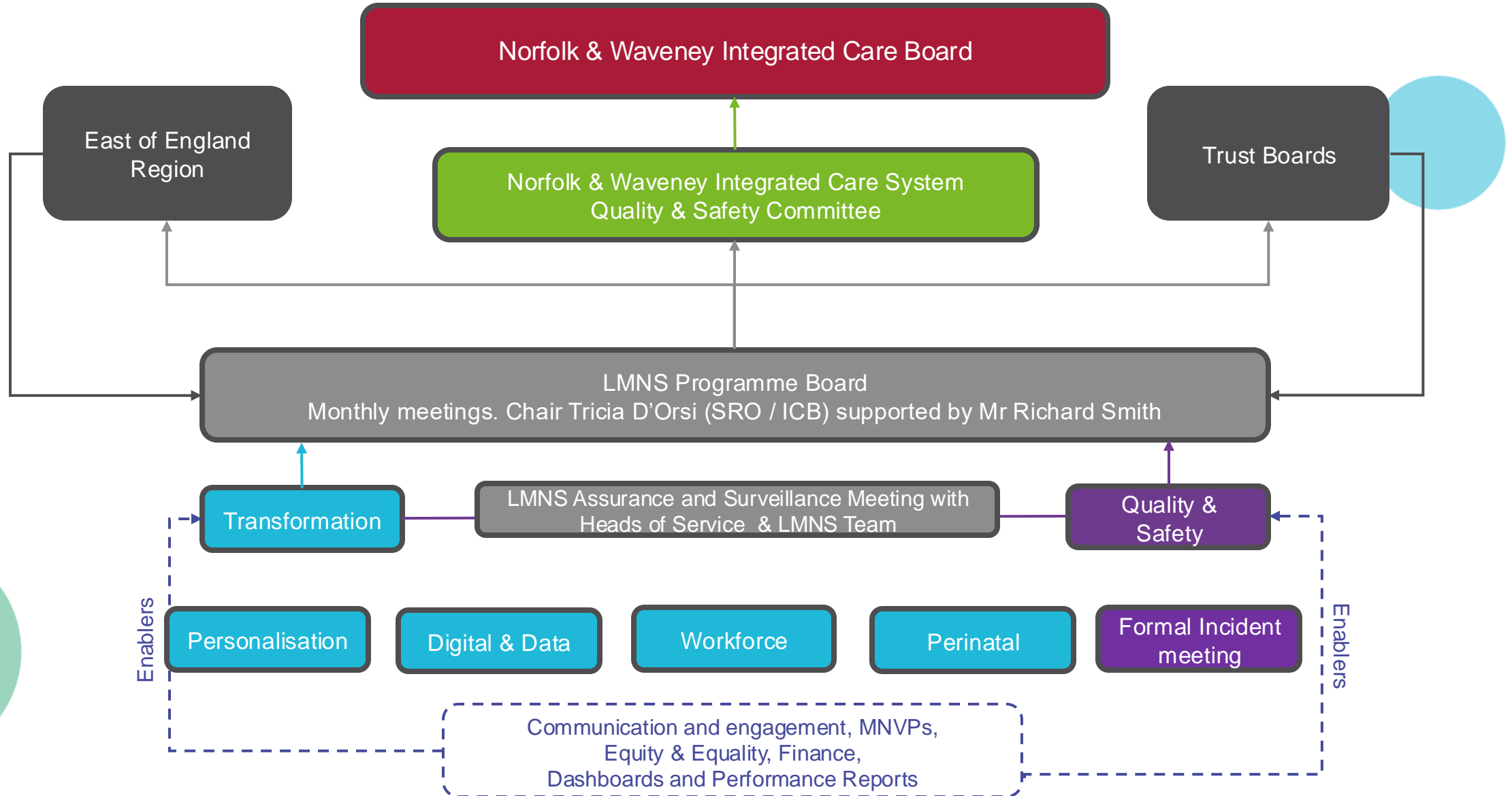- Performance analysis
- Digital oversight
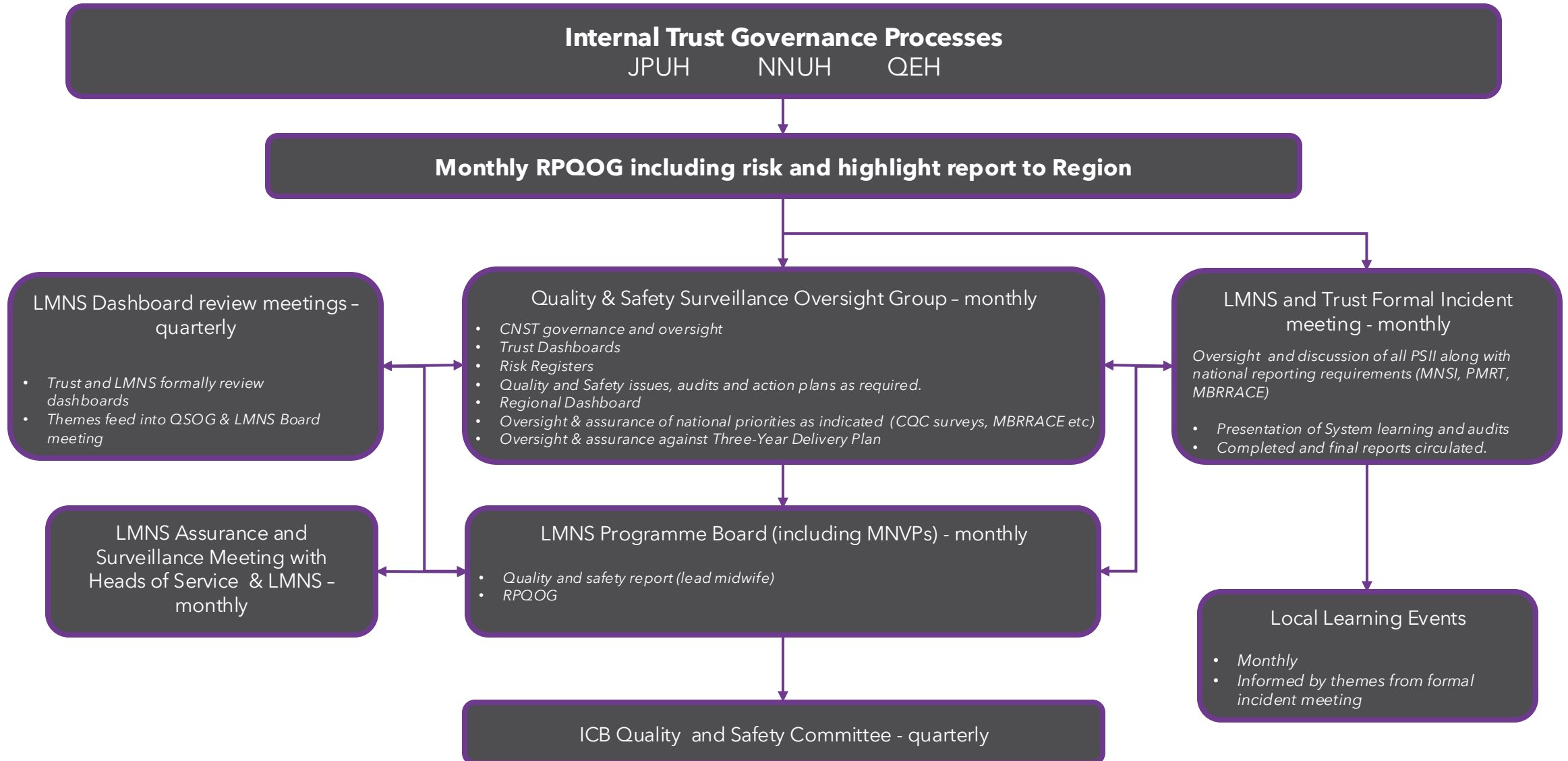- Audits (IoL)

Strategy
- Three-year plan commissioning
- ICS joint strategic forward plan
- Start for Life
- Health inequalities
- Culture
- Women's Health Hubs
- Smoking in Pregnancy
- Digital strategies

Business as usual
- MNVP
- Equity & equality
- Risk Management
- Quality & safety reporting
- Monitoring – MMN / MMHS / Hubs / RPQOG / NNCCR
- PPHS – System leadership
- Safeguarding
- Data analysis
- Communication
- Local Learning Events
- PCSPs
- Training & education

Perinatal Surveillance Governance Structure

Internal Trust Governance Processes
JPUH   NNUH   QEH

Monthly RPQOG including risk and highlight report to Region

LMNS Dashboard review meetings – quarterly

- *Trust and LMNS formally review dashboards*
- *Themes feed into QSOG & LMNS Board meeting*

Quality & Safety Surveillance Oversight Group – monthly

- *CNST governance and oversight*
- *Trust Dashboards*
- *Risk Registers*
- *Quality and Safety issues, audits and action plans as required.*
- *Regional Dashboard*
- *Oversight & assurance of national priorities as indicated (CQC surveys, MBRRACE etc)*
- *Oversight & assurance against Three-Year Delivery Plan*

LMNS and Trust Formal Incident meeting - monthly

Oversight and discussion of all PSII along with national reporting requirements (MNSI, PMRT, MBRRACE)

- *Presentation of System learning and audits*
- *Completed and final reports circulated.*

LMNS Assurance and Surveillance Meeting with Heads of Service & LMNS – monthly

LMNS Programme Board (including MNVPs) - monthly

- *Quality and safety report (lead midwife)*
- *RPQOG*

Local Learning Events

- *Monthly*
- *Informed by themes from formal incident meeting*

ICB Quality and Safety Committee - quarterly

LMNS Programme Team Organogram

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KEY

- ICB Post
- LMNS - Substantive
- LMNS - Temporary Posts

**Children, Young People & Maternity Team
LMNS ICB - April 2024**

Richard Smith
Lead Specialist Provider for the ICS, covering Maternity and Babies

Rebecca Hulme
Associate Director of Children, Young People and Maternity for N&W ICB and Norfolk Children's Services

Senior Programme Manager
Toni Jeary
8b 37.5 hrs

LMNS Lead Midwife
Nicola Lovett
8b 37.5hrs

Digital Midwife
Delyse Maidman
B8a 37.5hrs

Transformation Midwife
Emma Wiskin
B8a 37.5 hrs

Transformation Midwife
Alana Hunt
B8a 37.5 hrs

Transformation Midwife
Lydia Gerrie
B8a 37.5 hrs

Senior Project Officer
Karen Warrington
16 hrs
Sarah Collingwood
22.5 hrs
B6

Senior Project Officer
Andy Trohear
B6 37.5 hrs

Senior Project Officer Digital
Chloe O' Grady
B6 37.5 hrs

Lead PHP Physio
Jenna Sweeney
B7 33 hrs

Practice Innovation Midwife Systemwide
Mollie Haskey
B7 37.5 hrs

Practice Innovation Midwife Systemwide
Jo Govier
B7 37.5 hrs

Senior Adminstrators
Leanne Blowers 21.5 hrs
Rosalia Peck 16 hrs
B4

Programme Blueprint

Appendices

PMO Project Management across Norfolk and Waveney

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Meeting Name and Description	Approval to Create	Terms of Reference	Reporting	Risks	Documentation
Tier 4 Board Operational management, oversight, and risk management for sub Peri Prem- Programmes & Sub-Programmes	Yes - Formal approval is required from a tier 3 Board to create all tier 4 boards	Yes – Full ToRs are to be created and applied	Reporting to Transformation Board, Performance Committee and EMT but could be required to report to any board or committee at tier 3 and above	Red – Any impact to delivering the Sub- Programme or project, to be escalated to the Transformation Board, Performance Committee	• Action Log • Decision Log • Risk Register • Terms of Reference • Reporting Pack • Governance Structure
Tier 5 Steering Group To create and embed transformation across system and within organisations, for the duration of the Sub- Programme/project lifecycle	Yes – Formal approval is required by the tier 4 Board for all steering group creation	Yes – Full ToRs are to be created and applied	Reporting to the tier 4 board on a monthly basis Co-ordinate feedback from underpinning project groups and or task & finish groups	Red – Any impact to delivering the Sub- Programme or project, to be escalated to tier 4 board Amber - raised to tier 4 board for information but being managed at steering group level	• Action Log • Decision Log • Sub- Programme Plan • Risk Register • Terms of Reference • Reporting Pack • Governance Structure • Lessons Learned • Conflicts of interest • Metrics & Finance • Impact Assessments
Tier 6 Project Group To review and progress work allocated by the steering group This is only created if the piece of work duration is longer than six months but is not expected to exceed eighteen months	Yes – Formal approval from the steering group for project group creation	Yes – Light ToRs are required	Reporting to the steering group on a monthly basis High level bullet points on progress, key risks, lessons learned	Red – Any impact to delivering the Sub- Programme or project, to be escalated to steering group Amber - raised to steering group for information but being managed at project group level	• Action Log • Decision Log • Project Plan • Risk Register • Terms of Reference • Reporting Pack
Tier 6/7 Task & Finish Group To review and progress work allocated by the steering group for a duration of a few weeks to six months	No formal approval is required but you are required to inform the steering group of the creation of any task & finish groups	No – A mission statement	Reporting to the steering group on a monthly basis High level bullet points on progress, key risks, lessons learned	Red – Any impact to delivering the Sub- Programme or project, to be escalated to steering group Amber - raised to steering group for information but being managed at task and finish group level	• Action Log • Decision Log • Risk Register

LMNS Programme Board
- Ensuring programme is delivering to strategic objectives and that required benefits are being achieved

LMNS Programme Lead & LMNS Clinical lead (PM & Lead Midwife)
- Overarching accountability for developing the programme objectives and managing projects to ensure they are in line with, and deliver, the LMNS & LTP priorities
- Provides overall direction and strategic guidance for the programme and projects.
- Ensures programme and projects are delivered on time and to budget.
- Champions the programme and projects to stakeholders.
- Supports the project SROs, leads and project teams, making key decisions and unblocking potential issues.
- Responsible for resolution of risks and issues (escalating to the LMNS Programme Board as required).
- Provides monthly Highlight Reports for LMNS Programme Board and other Groups / Boards as required.

LMNS Sub Programme Lead working with Project Support Officers
- Provides clinical input, advice and authorisation for the programme and to the individual projects as required
- Works with clinical leads across the system to ensure project deliverables meet clinician requirements effectively, efficiently and safely.
- Attends programme and project operational meetings as required
- Advises on clinical feedback and approval process for the project output.
- Accountable for the individual projects, managing the project team ensuring delivery of allocated project objectives & deliverables within the agreed timescales & budget
- Ensures benefits are identified and can be / are measured once project has been implemented.
- Responsible for producing and maintaining project documentation (PID, Workbooks as required, Project Plan Impact Assessments etc.)
- Responsible for day-to-day management and control of projects, including escalation of project risks and issues to Programme Lead as required.
- Leads project teams and works with partners, providers, suppliers etc. to maximise use of deployed resources and ensures effective communications to all stakeholders.
- As required, regularly updates the workbook (project plan)
- Produces a project summary for the LMNS Board as required.

LMNS Administration Support
- Provides administrative assistance to LMNS Board and Assurance meetings.
- Ensures meetings arranged, agendas set and attendance checked
- Supports Chair during meeting with apologies, sharing agendas and presentations
- Takes responsibility for liaising with project lead to ensure; actions and decisions logged, action log and presentations shared, actions are followed up and updated prior to next Sub Programme meeting
- Ensures LMNS Programme Board and Assurance meetings have appropriate administrative support as agreed with PM

LMNS - Personalisation Sub-Programme

Progress Report
DD Month Year

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Project Management across Norfolk and Waveney

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Programme	Sub-Programme Name	SRO	Name	Overall Prog RAG
		Programme Lead	Name	
		Provider Lead	Name	

What have we achieved since last report (time period)

Activities planned for next reporting period

Key Programme Milestones (for this time period)

Key Programme Risks (Description)	Mitigation Action	Issues to be escalated	RAG
			RED
			AMBER
			GREEN

Decisions to be made/ escalated to board

EXAMPLE Programme Summary
Headline Scope & Exception Reporting   DD Mon Year

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PMO Project Management across Norfolk and Waveney

Programme	Sub-Programme	SRO	Name	Overall Prog RAG
		Programme Lead	Name	

Project Ref	Project Title	Key project milestones (with dates)	Progress / Comments / Escalation	Key project risks (with mitigation actions / support requested)	Project Lead	Planned Comp	Current RAG
							RED
							AMBER
							GREEN
							COMP