







James Paget University Hospital Maternity and **Neonatal Voice Partnership Annual report** 2023









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Introduction

Maternity and Neonatal Voices Partnerships (MNVPs) are working groups made up of teams of women, birthing people and their families, commissioners and providers (midwives and doctors) working together to review and contribute to the development of local maternity and neonatal care.

In Norfolk and Waveney, MNVPs are aligned to each of our three Acute Trusts. As MNVPs, our aim is to create and maintain an independent forum for co-production for maternity and neonatal services that places service user voice at its heart and brings together maternity and neonatal service users and staff, wider Trust leadership, commissioners and other strategic partners.

Our purpose is twofold:

- 1. To seek out and listen to the voices of women and birthing people, families and carers using maternity and neonatal services from all ethnicities, backgrounds and communities within our local population.
- 2. To use service user experiences and insight to work creatively, respectfully and collaboratively towards solutions that are co-produced with service users and staff.

Members of the collective forum operate on the following values:

- · We are committed to diversity and equal opportunities
- We uphold women and birthing people's human rights in pregnancy and childbirth.
- We are multidisciplinary and our members bring with them different beliefs, values and experience.
 - All these perspectives will be valued and respected.
- All of our members will have an equal opportunity to contribute to discussions and decision-making processes. We will ensure we are inclusive, enabling all our members to participate fully and ensuring our communications are understandable to all.
- Our members will act in a public service capacity and will adhere to the Nolan principles for conduct in public life.









Facts about our Trust

James Paget University Hospital (JPUH) is based in Gorleston and serves a population of 250,000 within Norfolk and Suffolk including two substantial areas of deprivation with Great Yarmouth and Lowestoft.

More than 164,000 people in Norfolk and Waveney live in areas classed as within the 20% most deprived in England - these communities are mainly situated in urban areas including Great Yarmouth and Lowestoft within the JPUH catchment. There are also pockets of deprivation in rural areas.

The JPUH maternity department is a shared midwife and consultant service with a consultant-led delivery suite, midwife-led birthing unit (Dolphin Suite). It is currently the only Trust within Norfolk and Waveney to have rolled out Continuity of Carer with the specialist Bluebell team.

Maternity and neonatal services include:

- Ultrasound Department
- Antenatal Clinic
- Dolphin Suite (MLBU) with two pools and three rooms
- Neonatal Intensive Care Unit
- Central Delivery Suite
- Maternity Assessment Unit
- Ward 11 covers both antenatal, induction of labour and postnatal care
- Eden Team specialist team
- Bluebell Team Continuity of Carer team

In 2022-23, there were 1,740 births at the JPUH, averaging at 145 births per month. This is a slight increase since last year, which goes against the national downward trend for births in England.









About James Paget University Hospital Maternity and Neonatal Voices Partnership

Maternity

Kaya Thorpe is our Maternity and overall MNVP lead. Kaya has been part of the MNVP since March 2020, moving to a Co-Chair position in September 2020 and on to become Chair in April 2022. Kaya has had three babies under the JPUH maternity team. While her youngest is now four years old, she remains embedded within the local birth and postnatal community as the Chief Executive Officer of a local infant feeding charity working directly with families who are under the JPUH Maternity Team. Kaya brings to the MNVP a solid passion and drive to elevate the voices of the most deprived women and birthing people under the Norfolk and Waveney LMNS. Having been in post for almost four years, Kaya has developed an innate understanding of how the MNVP needs to function in order to be accessible to local families. Her links within the community ensure engagement and outreach activities can successfully reach key families voices and ensure they are heard. Kaya is not afraid to force discussions around difficult decisions and works hard to ensure that service users have a clear voice in their care.

Neonatal

Hannah Barker is our Neonatal Lead. She joined the MNVP in October 2022, initially working alongside Kaya as Vice-Chair. Hannah moved into the post of Neonatal Lead in July 2023. As a Type-1 diabetic, Hannah has lived experience of diabetic pregnancy, pre-eclampsia, premature labour, induction of labour, instrumental birth, and birth trauma within the JPUH maternity services. Although her daughter is now four years old, Hannah is involved with a local breastfeeding charity for whom she volunteers, so remains at the heart of antenatal, birth and postnatal experiences. Hannah has a deep passion for education and advocacy, both for staff and for service users, to enable families to make informed choices for a positive experience for all. It is important to Hannah that all families are catered to, listened to and heard. Hannah comes from a deprived background herself, so has a personal understanding of the challenges families face when using maternity services. She recognises that the needs within deprived communities look very different to those of more affluent neighbourhoods and is helping to ensure the accessibility of support and information to all.









2023 Achievements

2023 has been quite a year for the JPUH MNVP. We were part of the team facing CQC in January 2023 and we were also a pilot MNVP for the CCF roll out in March 2023. We have worked tirelessly and dealt with multiple changes within senior leadership team while supporting the trust to move on from the CQC report. We have been part of the change to remove continuity of carer from the trust and supported with bringing service users voice to the table. As the Maternity Lead, this has been the most challenging year to run an MNVP and I am incredibly proud of how far we've come. We have progressed our 2023 workplan plan as far as possible whilst prioritising CQC and CCF work. Throughout we have consistently kept our focus on ensuring service user voice is heard at a strategic level within the Trust. The changes we have made are impactful and driven by service users. Being the MNVP lead for JPUH has been incredibly difficult this year. Nothing prepares you for a poor CQC report, but I am confident we are in a much better position and a far better MNVP than we were a year ago. We may be small but we are mighty! Hopefully 2024 will be much calmer and enable us to stabilise and progress alongside our JPUH Maternity and Neonatal Teams. I have to mention key staff members who have supported us this year with our previous HOM and consultant midwife Kelly Stevens and Katy Dogbey being key members of the MNVP for the first six months. Our PDM team, Charlotte Trevor, Angela Sutton, Jenny Keys, Sam Burrows, Vandana Choudary and our recent HOM Ros Bullen-Bell have enabled us to truly form a key part of the maternity team this year and strengthen our relationship with staff across the board.

Our relationship with staff within the Norfolk and Waveney LMNS has also continued to strengthen. It has been a pleasure to work with Toni, Nicola, Sarah and the wider team. We have progressed to a place where there is a high value on service user voice and engagement with the MNVP. It has been a pleasure to contribute to projects which offer a standardised approach across the 3 Trusts such as the Induction of Labour guidance and patient information leaflets and the new Personalised Care and Support Plans (PCSP).

Kaya MNVP Maternity Lead









Communications and engagement









Social media

- Our Maternity and Neonatal Facebook pages have a combined reach of 1.6k
- Neonatal Voices is also on Instagram however reach is still small. We aim to develop an Instagram presence for Maternity Voices in 2024.
- Our website is currently down and will hopefully be back up and running shortly.









Other communications/ publications/ leaflets/ posters etc.

OUR CHOICES We understand making decisions and talking to staff is difficult at this time. This pack is to support you and your family to make the choices that are important to you. You can change your mind at any point.	Please circle your choices, you can discuss with staff what options are appropriate for your care			MEMORY MAKING Please circle the options you would like to consider		James Paget Maternity & Neonatal Voices
	Gas and air	Epidural	Waterbirth	Handprints and footprints	Photographs	Weigh my baby
If you have chosen a name for your baby please tell us here	Pain relief options	C-Section	Music playing	Aching arms bear	We will dress our baby	We have clothes for our baby
	Lights turned low	No music playing	First to see our baby's sex	Sibling pack	Family to meet our baby	Read a book with baby
James Paget Maternity & Neonatal Voices	Baby to be dressed before holding them	Hold baby straight after birth	Staff to remain outside unless asked			

MEMORY MAKING (April 2016) Notice Paget Matternity & Matt	BIRTH CHOICES Address Poget. Value Programme P
We want to support you to make the memories you want with your baby. Please write down here anything that you might want to do.	We want to support you to make the right birth choices for you. Please write down anything you would like us to consider or questions you have.
We will aim to support your family in their journey	We will aim to support your family in their journey

Listening events

February 2023 - Continuity of Carer

- June 2023 Ward 11
- September 2023 Neonatal and multiple births
- November 2023 Homebirths

Events attended

Wow Bus events with the LMNS









Surveys and polls

Core Competencies Framework

Topics chosen were:

- Bereavement
- Maternal Mental Health
- Maternity Emergencies

Bereavement care was highlighted as one of the biggest areas of need in terms of improvements to staff training and highlighting service user voice. We oversaw the production of a staff training video capturing service user experience and carried out a survey and listening event. We bought together the *Our Choices* pack for families to use with staff to enable informed choice surrounding birth and memory making. The work is not fully embedded yet, but there is movement towards improvement of staffing working with bereaved families and will progress this piece in 2024.

Maternity emergencies is our next priority; this has taken time due to the impact of the CQC work on the MNVP. Themes coming out of our engagement activities with families include post-partum haemorrhage and staff communication. We aim to produce service user voice and staff training films to improve care relating to these areas.

We had a surprisingly small volume of feedback on maternal mental health considering the size of the issue. We have decided to relaunch this survey this year.

Maternity Survey

2023 has been our most successful year in terms of service user feedback. Across all our survey work we have seen engagement rates triple this year. Through the maternity survey in particular, families told us that having the same midwife deliver antenatal and postnatal care was the most important factor to them. It was no surprise that our most positive feedback was linked to continuity of carer. Other issues of note included consultant-led care, Ward 11, birth choices and communication.









Neonatal Survey

Responses to our neonatal surveys are increasing which is a really positive development. Themes coming out of this work in 2023 include the need for improved discharge information and better family involvement in decision-making - particular outside of visiting hours. Families also told us that, overall, they feel safe and that their babies are well-cared for by the NICU team.

What we have achieved this year

- The relaunch of our maternity survey and development of a new neonatal survey
- Four key listening events based on service user feedback
- Support for the Core Competencies Framework pilot
- Our ongoing bereavement work
- Involvement in the 15 steps to maternity and Sixty Supportive Steps to Safety visit
- Our full engagement with the Trust's CQC work, with additional funding and work time allocated to support this
- Presenting a session at the Midwifery Mandatory Day on informed consent and service user voice
- MNVP on-site presence within the Trust two days per month
- Input into PCSP engagement work with the LMNS
- Involvement in Trust-specific peri-prem work
- Participation in key staff interviews such as HOM, DOM, Consultant Midwife
- Input into the Maternity Improvement Plan
- Work to support Trust compliance with CNST
- Co-production of an action plan in response to CQC survey results
- Supporting the trust surrounding important translation documents

The impact of the CQC inspection in early 2023 meant a big adjustment to our original workplan as we focussed our efforts on supporting the Trust response and subsequent action plan. But, as with every year, we have done our utmost best to support the needs of our service users and our Trust in what has been a very challenging year.









Future plans

In addition to our ongoing work to support the Trust to progress its CQC action plan, our focus in 2024 will be on the following areas:

Neonatal

 Continue our work to grow our engagement with neonatal service users and strengthen our links with NICU staff

Community outreach

• Build a strong team of targeted MNVP outreach volunteers across the area to further embed our presence within local communities to ensure their voices can be heard.

Accessibility

- Accessibility is a key area of focus and we will continue to progress the development of language and birth choices cards for service users and improved translation services.
- Look at language use within infant feeding and develop a survey for Infant Feeding staff to support positive communications with service users.

Personalisation

- Develop and run a survey with service users around the implementation of the new Personalised Care and Support Plan with the aim of supporting maternity and neonatal staff with the delivery of this new initiative to improve personalised care.
- Roll out monthly education sessions for doctors and midwives covering MNVP aims, purpose and objectives and how their work can impact on service users.
 We will use these opportunities to continue our work to highlight the importance of informed consent and personalised care.

Targeted projects

- Continue to build upon our work to improve bereavement care and pathways.
- Extend our focus on supporting neurodiverse service users by developing a suite of resources aimed at supporting the needs of this cohort, in collaboration with the Eden team.









- Scope and develop a focused piece of work around supporting service users with diabetes.
- Delayed booking in appointments has been highlighted as an area of need and we will support the Trust to explore ways to highlight the importance of timely booking in.
- Maternity emergencies, specifically post-partum haemorrhage and staff communication, will be an area of focus. We aim to produce service user voice and staff training films.

Finance

Funding proposal for 2024-2025

	Monthly	Annually
Maternity Lead (4 days PPV)	£600	£7200
Neonatal Lead (3 days PPV)	£450	£5400
Community Engagement Lead (0.5 days PPV)	£75	£900
Subscription for Website		£122
PPV Travel Expenses		£100
Listening Event Resources (4 events per year face to face)		£300

Predicted total expenditure for financial year:	£14,022.00
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