

Who we are



LAURA NAISH
Strategic Lead/
Brighton & Hove
Lead



ALIX JAMES
Lead for
Chichester



JORDON CLARKE
Lead for Haywards
Heath & Worthing

A Maternity & Neonatal Voices Partnership (MNVP) brings together service users (women, birthing people, and their families) and healthcare professionals (midwives, doctors, etc.) Who work together collaboratively to review, shape, and improve local maternity and neonatal services.

It ensures that the voices of service users are at the core of decision-making by being embedded within provider trust leadership and directly influencing improvements.

Through this partnership, the MNVP plays a vital role in improving the safety, quality, and overall experience of care for families using maternity and neonatal services.



We have come together to listen to & represent the voices of birthing women, people & their families, in East & West Sussex who receive maternity & neonatal care at Chichester, Worthing, Haywards Heath & Brighton hospitals.

We do this via feedback from surveys, listening events, walk the patch, 15 Steps for Maternity & Neonatal. Attending groups in the community and via our Quarterly MNVP meetings.

We take this feedback and themes and meet regularly with the Trust to ensure that feedback is addressed. We then work together to close the loop on improvements.

What we do

If you have any questions about our annual work plan, then please contact
laura.naish3@nhs.net

www.uhsussexmvp.co.uk

Our Purpose

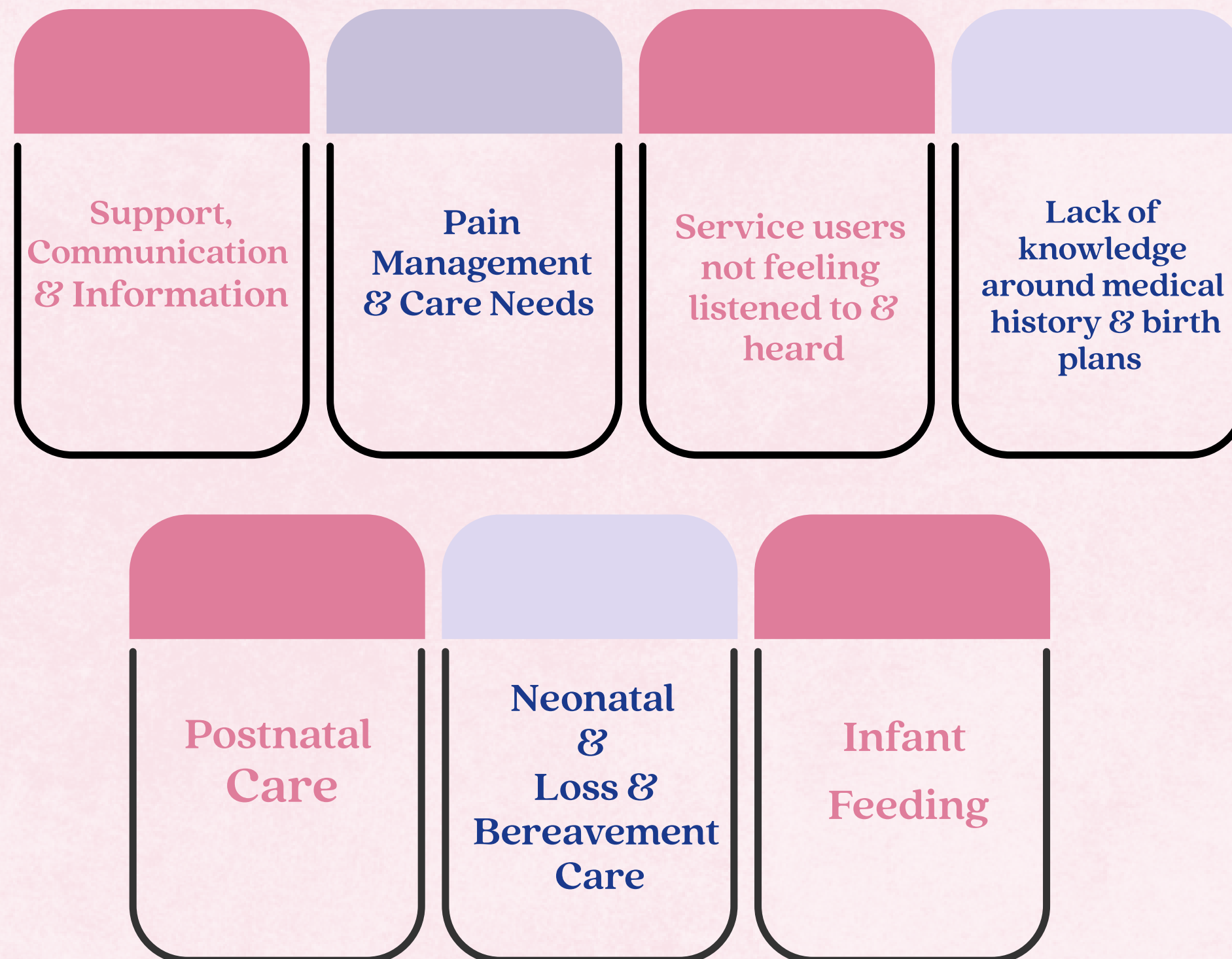
Members and the collective partnership operate on the following founding principles:

- To champion the voices of women, birthing people and their families in the development of maternity and neonatal services.
- To work together as equals, promoting and valuing participation. Collaborating to co-produce solutions together.
- To listen to, and seek out, the voices of women, birthing people & families using maternity & neonatal services, even when that voice is a whisper.
- To reflect the ethnic diversity of the local population and reach out to seldom heard groups, including those most at risk of experiencing health inequalities, parents with experience of neonatal care, and families that has experienced bereavement & loss.
- Understand and work with the interdependency that exists between the experience of staff and positive outcomes for women, families and carers.
- To use experience data and insight as evidence. To be forensic in the pursuit of continuous quality improvement with a particular focus on closing inequality gaps.

Our Key Themes



Survey Themes - March 2024 - March 2025





Neonatal Care

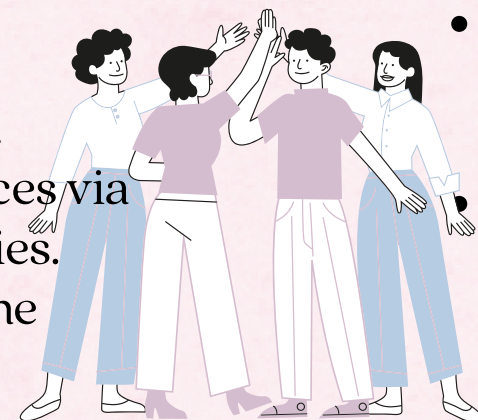


- Hosting a neonatal stay and play/neonatal community group support WH/SRH & TMBU (Sept 25 & Jan 26).
- Hosting 2 instagram lives on neonatal care (Nov 25 & Feb 26).
- Attending the PAG and MNVP/neonatal working together groups.
- Attending PMRT and neonatal business & governance and safety meetings.
- Work on Meals and Meds (SAM) across 4 sites in collaboration with postnatal/neonatal staff.
- Continue to work in partnership with the PAG and Neonatal units to listen to the voices of neonatal families & capture their themes & experiences.
- Taking a business as usual approach to working with these families to embed the service user voice and ensure that the feedback we hear is addressed and improvements are co-produced.
- Collaborating on workstream to take actions from the bereavement & loss listening actions forward.

Baby Loss & Bereavement



- Loss & Bereavement listening event/engagement event to hear voices from WH/SRH (Feb 26)
- Work with Oscars Wish on developing & embedding loss & bereavement training for maternity & neonatal staff.
- Being the service user voice at PMRT meetings, attending to gather themes & insights from these.
- Continue to gather loss & bereavement experiences via our feedback form and 1-1 discussions with families.
- Involvement in and supporting service users in the restorative planning programme workshop.



Creation of an insight bank of experiences to provide service user insights, case studies, voice notes & thoughts.



Listening to Voices

- Lesser Heard Voice Listening Event at RSCH, to hear the voices of minority groups & EAL families. (Nov 25)
 - Attendance at on lesser heard voices baby groups to add to the voices we are hearing.
 - Mental Health, Neonatal or Bereavement lived experience films.
 - What do neonatal parents need? Neonatal focus group/co production group.
 - Survey data collection - expand into site based reports (Re examine in September).
 - Listening to service user feedback on feeling listened to and medical history.
 - Using this feedback to improve MNVP survey percentage as agreed with HOMS.
- Collaboration on workstream to take summit actions forward.



Postnatal Care, Pain Management & Medical History



- Walk the Patch/site visits every 3-6 months.
- Work on Meals and Meds (SAM) across 4 sites/collaboration with postnatal/neonatal staff.
- Getting involved in projects relevant to pain medication in labour, birth and on the postnatal ward.

Support, Communication & Information



- Website enhancement & update, move to new MNVP URL
- Hosting Instagram Live on Gestational Diabetes (Oct 25).
- Coproduced Induction of labour service user information film.
- Podcast involvement with Anna Byrom on co-production & sharing learning with other MNVP's.
- Work with the education team to develop training with a service user lens.
- Getting involved in the local Midwifery degree course syllabus to share MNVP work & co-production.
- Creation of a mental health signposting & support leaflet, with local, national and specialist support details.
- Service user co-production event on infant feeding support OR input into staff training (Dec 25).



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Our Continuing Commitments

- Continue to work on 15 steps actions with maternity & neonatal teams.
- Strive for co-production & collaboration with service users from the ground up in all of the projects we work on.
- Increase MNVP membership & continue to recruit service user voices and volunteers to support with MNVP work.
- Work with VCSE groups to increase diversity of MNVP members to include lesser heard voices, including fathers, LGBTQIA+ families, neurodiverse members & minority ethnic groups.
- Outreach to minority ethnic groups, lesser heard voices & those in isolation via listening events, VCSE groups & 1-1 discussions.
- A commitment to Walk the patch at each maternity unit every 6 months.
- A commitment to engage with service users in the community at antenatal clinics, baby groups, listening events etc. every 3 months.
- Increase survey responses and engagement, extending the geographical areas where responses come from, increasing the methods that people can feedback via and ensuring we are hearing all voices.
- Use social media to communicate with service users and build up resources to support them. Via our website, Facebook, Instagram. (IG lives, feedback Fridays, surveys and our website).



Meeting Commitments

As an MNVP we will host quarterly meetings to discuss our work, what we are hearing from service users and what actions we are taking to support improvement in these areas. You can find out about [joining our](#) meetings here.

The MNVP will have strategic influence at trust level and contribute to the quality and safety agenda.

By Attending these meetings, leads can influence decision-making by being quorate members of strategic meetings. This will give us an overview of governance, guidelines, safety incidents & PMRT. These meetings will inform thematic learning and action plans which the MNVP will be part of.

NB; Maternity Voices Partnership expectations and limitations: NHS Sussex has commissioned the MNVP to complete the 2025/26 workplan and deliver its responsibilities.

Any additional work that is undertaken outside of the annual work plan or core MNVP work will need to be discussed & funded separately as it arises.



Project Planner 2025/26

July 2025	August 2025	September 2025	October 2025	November 2025	December 2025
- Quarterly MNVP Meeting - Annual Workplan - Annual Report	- Website Update & Relaunch - Project planning	- Survey data collection - site specific - Neonatal stay & play WH/SRH - Walk the Patch/site visit to tie in with safety NED	- Quarterly MNVP Meeting - Instagram Live-GD - Induction of labour filming	- Lesser heard voices listening event- RSCH - Instagram Live on Neonatal 1 of 2	Infant Feeding co-production event OR input into staff training
January 2026	February 2026	March 2026	Ongoing Projects		
- Community Engagement - Quarterly MNVP Meeting - TMBU Neonatal Stay & Play	- Loss & Bereavement Listening Event - Instagram Live on Neonatal 2 of 2	- Survey data collection & reporting - Walk the Patch/site visit	- Signposting & Support Mental health leaflet. - Neonatal/Bereavement or Mental Health lived experience video. - Work with Oscars Wish on developing & embedding loss & bereavement training for maternity & neonatal staff. - Work on Meals and Meds (SAM) across 4 sites, collaboration with postnatal/neonatal staff. - Getting involved in the Midwifery degree course syllabus.		