



# UHSussex Maternity Voices Trustwide Meeting

## Meeting Notes for 28<sup>th</sup> April 2023

<b>Time:</b>	<b>12.30 - 14.30 pm</b>
<b>Location:</b>	<b>Microsoft Teams Online</b>
<b>Chaired by:</b>	<b>Laura Naish, Hannah Daly &amp; Jordon Clarke</b>
<b>Notes by:</b>	<b>Hannah Daly</b>
<b>Attendance:</b>	
Laura Naish	MVP Strategic Chair and Brighton Co Chair
Hannah Daly	MVP Co-Chair- Haywards Heath
Jordon Clarke	MVP Vice Chair – Chichester & Worthing
Gail Addison	Acting Head of Midwifery for Worthing and Chichester Hospital
Alison Clifton	Mental Health Midwife
Andrea Yeboah	Specialist Physiotherapist / WEPP Lead, UHSussex West
Anouk Lloyd	Infant feeding specialist midwife
Cecily Hollingworth	Senior Commissioning Manager
Claire Harris	Midwifery Matron – St Richards
Claire Parr	Clinical Governance Lead Maternity - UHSussex
Emily Dwyer	Assistant Head of Patient Experience - NHS Sussex
Emma Chambers	Director of Midwifery
Emily Moss	Midwife
Fran Humberstone	Infant feeding lead – UHSussex West
Gemma Kyle	Midwife
Graeme Porter	Start for Life – Public Health Lead
Helen Newnham	Healthy Child Program Manager
Jo Gould	Senior lecturer - BSC midwifery course
Jacqueline O’Kane	Midwifery Practice Facilitator & PEF
Jane Canning	Counsellor Midwife - East
Jazmyn Merritt	Service user representative for the perinatal pelvic health transformation programme
Jo Tuck	Health Watch
John Bell	Community Midwifery Matron for RSCH/PRH and PMA
Julie Carr	Midwifery Matron - Worthing
Katharine Fraser	Consultant
Lara Kiziltuna	Senior Commissioning Manager – East Sussex, Brighton and Hove, NHS Sussex
Laura Spicer	Maternity Transformation Lead UHSussex
Lisa Robertson	Midwife
Lucy Bloem	Non-executive Director Maternity Safety Champion – UH Sussex
Michelle Best	Community Midwifery Team Leader for RSCH
Natalie Beckley	Transformation Midwife, UHSx
Peggy Osborne	Community midwife. co-coordinator of additional language antenatal classes and care for pregnant asylum seeker women
Rebecca Elms	Acting Head of Midwifery – Brighton & Haywards Heath
Sue Defreitas	Interim Maternity Matron at PRH
Sarah Harris	Infant Feeding Midwife, UHSussex West
Sharon Gardner-Blatch	Programme Director, Sussex Local Maternity and Neonatal System
Tracey Nevell	Deputy head of Patient Experience and Engagement
Zita Warren	Neonatal Matron - West

Zoe Faulkner	Specialist Infant Feeding
Lucy Newton	Service User
Suze Morris	Antenatal Teacher, Doula and Baby Massage
Karen Penner	Antenatal Teacher, Breastfeeding Counsellor and Peer Supporter
Caroline Wriglesworth	Mothers Uncovered
Anna Weedon	Service User
Susannah Talman	Service User
Nikki	Postnatal Lead Midwives at RSCH
Gabrielle Minkley-Barnes	Doula

Item ref	Item	Action ref.
1.	<b>Welcome - LN opened the meeting, welcomed attendees, and noted apologies.</b>	
2.	<b>UHSussex Trust Wide themes</b> Laura presented the slide to show of each different theme, with service users' comments and experiences.	
2.1	<p><b>Laura Naish:</b> Visiting hours and partner staying overnight: Service users are wanting an extension of visiting hours and the option for partners to stay overnight. Laura acknowledges that this can be a hard topic to talk about, due to some service users experience (particularly in covid) and how they are feeling, but also from the point of view of the trust and how having partners staying overnight can come with its own difficulties and challenges. Partners staying overnight to help those who have had c-sections would be beneficial and how the LGBTQ+ families where the non-birthing parent is wanting to initiate feeding. We need to think of the non-birthing partner not as kind of a separate person and somebody who's kind of in the way and but really of the family as kind of a unit. The non-birthing partner really wanting to be a part of that experience of that kind of momentous period in, in their life and kind of they feel also that they don't want to be separated from their partner in their baby.</p> <p><b>Emma Chambers:</b> Talked about how this is something that is discussed regularly, but there are factors in place that make overnight stays difficult- the hospital spaces are not large enough, nor equipped enough to make partners comfortable, issues with safeguarding can be a problem, and shared spaces on wards are only separated by curtains. Partners historically have not always followed a code of conduct, and this caused more stress for staff and service users. EC is eager to move forward with this and continue to discuss ideas and plans. A whole shoes event has been planned for 22nd September, which will involve the MVP, trust staff and service users, to develop a way forward.</p> <p><b>Emily Moss:</b> Previously there was a lot of issues with behaviours of partners. For Service users who need a support of a partner – due to certain circumstances partners have been enabled to stay with their partner in a private room- but this cannot always be guaranteed. Conversations were had about partners not being able to settle the birthing partner and baby into the postnatal ward and having a very short amount of time after birth- If birth was in the middle of the night.</p> <p>Jane C– asked about letting partner staying for a period to be with their partner and baby. Laura suggested a settling hour.</p> <p>We need to facilitate partners or let them know there is no facilities for them – ie; showers/food. Partners may have had a tough time to and may need sleep and support</p>	<b>001 MVP to keep SU's posted about the discussions and meeting around visiting hours and overnight stays.</b>

2.2	<p><b>Suspension and staff shortages in homebirths:</b> This theme is around the SECamb strikes that happened over 6 months, and some Service users not being able to give birth in their desired place i.e., at home. There have also been staff shortages that have meant that homebirths have not been able to be facilitated. We know the Trust is working hard to resolve this, and there is an ongoing recruitment drive for staff.</p> <p><b>Emma C:</b> In January, sadly the homebirth services were closed 70% of the time due to ambulance strikes/ ambulance critical incidents/ trust critical incidents and staff shortages, to maintain safety. Decisions had to be made on a shift-to-shift base. To keep Service users and staff safe. In February this had improved to 37% home birth closure- and is getting better. See PowerPoint for more information.</p> <p><b>Emma C:</b> In September there will be a Maternity, strategy, and vision event, around midwifery-led units- all are welcome including service users.</p>	002 Emma Chambers to update on date and time of Maternity Strategy meeting and for the MVP to share and invite service users along.
2.3	<p><b>Infant Feeding Support and tongue tie diagnosis:</b> Some service users have been struggling to get the support that they need on the postnatal ward and in the community. The Trust is working on the Baby Friendly Initiative accreditation. See PowerPoint for more information.</p> <p><b>Anouk:</b> Talked about the struggles with only being a small team, and all working part time, and they are trying hard to grow the team.</p> <p>Funding is challenging at the moment to employ more, and Emma mentioned trying to get volunteers in to help with feeding. At PRH (Princess Royal Hospital)- there is a tongue-tie practitioner rota, so service users and babies are being seen sooner and referrals are smaller. Promotion and knowledge of MILK groups- helping parents in the community.</p>	003 MVP to arrange a separate meeting with Anouk and Fran – Service users experiences and feedback.
2.4	<p><b>Consultant care and Induction of Labour:</b> MVP we had a number of users that came to us and said they were not happy with the consultant led care and the common things have come through is that they were finding their care to be in personal feeling, their thoughts and feelings were not taking into consideration and a few services that felt they were forced into intervene in interventions and procedures such as inductions.</p> <p><b>Actions from MVP:</b> Instagram live the other day on induction of Labour, where we had some questions for <b>Katie Christie</b> and we posed some services of questions to her. We've also done a feedback Friday on induction of labour because KC working on the pathway of induction of Labour, so that we can feedback what service users experiencing and to make their experience better.</p> <p><b>Lucy (Service User) shared her experience</b></p> <p><b>Jane Canning:</b> talked about the feedback she receives when doing birth stories, and how communication is key.</p> <p><b>Emma Chambers:</b> Would love to see is some sort of working group with service users and consultants in the room to talk about how conversations make service users feel.</p> <p>Claire Parr: An audit was done around service users and their perception of how we perceive the information we give across versus how it's received: Majority of women and people reported feeling fully informed about the induction of labour and felt able to voice any concerns throughout the induction process.</p>	004 MVP and Emma to invite Tim Taylor to meetings  005 MVP to send feedback to Emma around consultant lead care.  006 MVP Involving Lucy (Service user) into the discussion around induction of labour pathway.
2.4	<ul style="list-style-type: none"> <li>• Some women and people had a negative experience of induction of labour and did not feel they were given all their information.</li> <li>• so, it either worked well for them or didn't. There was kind of not in between.</li> </ul>	
2.5	<b>Staffing and pressure on Maternity services.</b>	

	<p>We have all heard within the news the pressure that all maternity hospitals are currently under and the how the trusts- nationwide are working hard to recruit more midwives and other healthcare professionals. <b>EC:</b> presented a slideshow on recruitment and birth rates.</p> <p>The trust will be fully recruited by the Autumn 2023.</p>	
<b>3.</b>	<p><b>MVP News:</b></p> <ul style="list-style-type: none"> <li>• Jordon and Laura attended the health watch “enter and view” at Brighton, Worthing and Chichester hospitals.</li> <li>• New MVP Survey is LIVE!</li> <li>• The MVP is in the process of co-producing a discharge video with the trust.</li> <li>• The MVP will be visiting the MVP sites for international day of the midwife.</li> <li>• 15 steps for maternity are coming up at all 4 sites.</li> </ul>	
<b>3.1</b>	<p><b>Princess Royal, Haywards Heath – Hannah Daly (Co Chair)</b></p> <p>Hannah discussed the feedback she received from her walk the patch visits and in the community visits- and opportunities for change amongst some of those comments.</p> <p>Hannah also discussed what she has coming up. See slides for more info.</p>	
<b>3.2</b>	<p><b>St Richards, Chichester – Jordon Clarke (Vice Chair)</b></p> <p>Jordon discussed celebrations and considerations from the feedback she has been receiving. See slides for more information.</p>	
<b>3.3</b>	<p><b>Worthing Hospital, Worthing – Jordon Clarke (Vice Chair)</b></p> <p>Jordon discussed celebrations and considerations from the feedback she has been receiving, and what her plans are over the next few months.</p> <p>See slides for more information. <i>A discussion around service users missing medication rounds and having to wait medication to be brought to them, and the wait sometimes being long was discussed and that the trust is already in talks around how this can be improved.</i></p>	
<b>3.4</b>	<p><b>Royal Sussex County Hospital, Brighton - Laura Naish (Co Chair)</b></p> <p>Laura discussed her service user feedback and her upcoming events and work. See slides for more information.</p>	
<b>4.</b>	<p><b>Trust Maternity, Commissioning and LMNS updates</b></p>	
<b>4.1</b>	<p><b>Emma Chambers:</b></p> <ul style="list-style-type: none"> <li>• The Trust is working on the Maternity safety support programme and funding.</li> <li>• Currently a challenging time with ongoing doctors' strikes coming up.</li> <li>• Badgernet is launching in May in Worthing and Chichester.</li> </ul>	
<b>4.2</b>	<p><b>Sharon Gardner Blatch- LMNS:</b></p> <ul style="list-style-type: none"> <li>• Discussed the three-year delivery plan for maternity and neonatal services. The MVP (Maternity Voices Partnership) will become the MNVP Maternity and Neonatal Voices Partnership. The title of “chairs” will disappear, and they will become leads.</li> </ul>	
<b>4.3</b>	<p><b>Laura Spicer:</b> Transformation Midwives update:</p>	

	<ul style="list-style-type: none"> <li>• There has been so work done around service user feedback, about leaving their babies to go to the toilet/ missing drug rounds etc. A poster has now been created that will hopefully be going in every bay, that has information for parents to read to help them with any questions or concerns they may have.</li> <li>• Some work is being done around premature birth and how we optimise the care pathways for premature babies.</li> <li>• baby TV screens are hopefully going to be implemented in all of the waiting areas for antenatal clinics and this is going to have an accessibility element to it. So, people will be able to scan the TV screen and be taken to a link where information can be translated into different languages</li> <li>• Work is being done around making information more friendly to service users who English is not their first language.</li> </ul>	
<p><b>4.4</b></p>	<p><b>Cecily Hollingworth:</b></p> <ul style="list-style-type: none"> <li>• The perinatal equity work focuses on those experiencing the most inequity in experience and outcomes, including those living in rural isolation, those of black, Asian and mixed ethnic backgrounds and those living in areas of deprivation.</li> <li>• Discussions have recently focused on those living in rural areas and how we can ensure services are accessible to them, including looking at access to private transport and bus routes.</li> <li>• The work of the MVP in hearing the voices of those from ethnically diverse backgrounds and how we work together to understand experiences and improve those experiences is crucial.</li> <li>• An important element of which is training and educating our perinatal colleagues to be more inclusive in their practice.</li> </ul>	
<p><b>4.5</b></p>	<p><b>Alison Clifton: Perinatal Mental Health Midwife:</b></p> <ul style="list-style-type: none"> <li>• Whilst the birth rate might be going down, certainly people's mental health issues aren't really subsiding.</li> <li>• Discussed maternal journal for pregnant and postnatal Service users where they can do some artistic activity – hoping to roll these out in areas that people can't always access groups – such as TMBU</li> <li>• The team are also working in partnership with the health visitors trying to set up a group for young people in Brighton</li> <li>• They are also hoping to roll out an 8-week mindfulness course in the autumn for people who are pregnant.</li> </ul>	
<p><b>4.6</b></p>	<p><b>Jazmyn Merritt: Perinatal pelvic health programme:</b> See Slides for more information.</p>	
<p><b>4.7</b></p>	<p><b>Kent Surrey and Sussex Neonatal update:</b></p> <ul style="list-style-type: none"> <li>• 3D tours are currently being created at all 13 sites in Kent Surrey and Sussex.</li> <li>• Service users have been involved in the creating of these videos.</li> <li>• Worthing and PRH hospitals have been completed – photos have been completed.</li> <li>• There is a live survey- that is for parents who have used the NICU unit</li> </ul>	<p><b>007 MVP Follow up on medication going to parents on SCBU/NICU units, so they don't miss out.</b></p>
<p><b>5.</b></p>	<p><b>AOB: None</b></p>	

Meeting close - Date of next meeting: Monday 3rd July 11am-1pm

**NB - Please note as of January 2023 we have moved to meeting notes and actions due capacity and workload. You can also view the power point presentation for each meeting via our website. MVP members also have access to the recording of each meeting.**

**If you would like to discuss anything covered in this meeting or would like to be added to our membership, please contact one of the co-chairs -**

Laura Naish	MVP Strategic Chair and Brighton Co Chair – <a href="mailto:laura.naish3@nhs.net">laura.naish3@nhs.net</a>
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