

10th January 2018**Agenda Item: 7****REPORT OF NOTTINGHAMSHIRE CLINICAL COMMISSIONING GROUPS****NOTTINGHAMSHIRE LOCAL MATERNITY TRANSFORMATION – BETTER BIRTHS****Purpose of the Report**

1. To brief members of the Health and Wellbeing Board on the Nottinghamshire Maternity Transformation Plan, which was submitted to the National Maternity Board on 30th October 2017.
2. To discuss how the Health and Wellbeing Board can contribute towards the implementation of the Nottinghamshire Maternity Transformation Plan,
3. Highlight the fact that this plan does not cover Bassetlaw CCG, since Bassetlaw CCG is part of the South Yorkshire and Bassetlaw STP and Local Maternity System.

Information and Advice

4. In February 2016 *Better Births* was published, setting out the Five Year Forward View for NHS Maternity Services in England. The report stated:

‘Our vision for maternity services across England is for them to become safer, more personalised, kinder, professional and more family friendly; where every woman has access to information to enable her to make decisions about her care; and where she and her baby can access support that is centred around their individual needs and circumstances.

And for all staff to be supported to deliver care which is women centred, working in high performing teams, in organisations which are well led and in cultures which promote innovation, continuous learning and break down organisational and professional boundaries.’

5. *Better Births* also recognised that realisation of the vision could only be achieved through locally led transformation, suitably supported at regional and national levels. A timeline was set for all local areas to adhere to as follows:
 - By March 2017, establish a Local Maternity Systems (LMS), to design and deliver maternity services across boundaries, where appropriate. The Local Maternity System (LMS) is expected to be coterminous with the STP footprint and involve all commissioners and providers of maternity services, as well as service users in the local area.

- By October 2017, establish a shared vision and a complete a transformation plan, outlining how *Better Births* will be implemented the end of 2020/21. The Local Maternity Transformation Plans will state how the LMS will deliver the following by the end of 2020/21:
 - Improved choice and personalisation of maternity services so that:
 - ✓ All pregnant women have a personalised care plan
 - ✓ All women are able to make choices about their maternity care, during pregnancy, birth and postnatally.
 - ✓ Most women receive continuity of the person caring for them during pregnancy, birth and postnatally.
 - ✓ More women are able to give birth in midwifery settings (at home and in midwifery units).
 - Improved safety of maternity care so that by 2020/21 all services:
 - ✓ Have reduced rates of stillbirth, neonatal death, maternal death and brain injury during birth by 20% and are on track to make a 50% reduction by 2030.
 - ✓ Are investigating and learning from incidents, and are sharing this learning through their Local Maternity Systems and with others.
 - ✓ Are fully engaged in the development and implementation of the NHS Improvement Maternity and Neonatal Quality Improvement programme.
6. Clinical Commissioning Groups (CCGs) are the main commissioners of NHS maternity services across the country. In Nottinghamshire, in line with the STP footprint, a Nottinghamshire LMS Transformation Board is in place covering Mansfield & Ashfield, Newark & Sherwood, Nottingham North & East, Nottingham West, Rushcliffe and Nottingham City CCGs. Bassetlaw CCG is part of the South Yorkshire and Bassetlaw LMS. The LMS Transformation Board has overseen production of the Nottinghamshire Plan, which has been co-produced with local service users and maternity staff. The Plan is based on the following four considerations:
- a. An understanding of the local population and its needs for maternity services.**
 The local Joint Strategic Needs Assessment (JSNA) brings together relevant information, with the latest needs assessment for maternity care and relevant other service areas, e.g. mental health, weight management. In order to ensure that services truly meet the people they serve, the LMS has considered the population profile, geographical and socio-economic factors, e.g. health inequalities, disability, transport and the needs of culturally diverse communities.
- b. An analysis of the gap between current service provision and the vision set out in *Better Births***
 Nottinghamshire LMS has completed a thorough benchmarking exercise, including robust engagement and consultation with service users and staff, to ensure an honest and accurate assessment of the current position.
- c. Alignment with other local plans**
 Nottinghamshire LMS must ensure that the strategic vision and objectives are aligned to the overall delivery of the STP. It will also be important to ensure that there is a coherent strategic vision between the local Maternity Transformation Plan, local Health and Wellbeing Strategies and other key plans.

d. The financial case for change

This should include an assessment of overall affordability, transition and recurrent costs, assumptions about savings and how maternity transformation will contribute to the STP's financial balance.

The Local Maternity Transformation Plan sets out the vision and priorities for maternity services in Nottinghamshire for March 2021, detailing how this will lead to improved outcomes and mapping what needs to be done to implement this vision.

7. This mapping includes:

- A clear statement from both a service and service user perspective on how services will be different once the Plan is implemented.
- Actions and milestones, with responsible owners.
- Processes to ensure delivery, monitoring, assurance and evaluation.
- Interdependencies with other work streams of the STP.
- Workforce development required to deliver the model of care.
- Description of how the Plan was co-produced with mothers and families (service users) and staff and how they will be involved in implementation.
- Outline of how key messages and updates will be communicated to stakeholders and the public.

8. Nottinghamshire LMS Vision

As a LMS, we aim to ensure that women, their babies and families can:

- Access consistently safe and high quality services during pregnancy, birth and postnatally
- Choose from a range of providers that can support and meet their individual needs
- Be assured that these services will work collaboratively, reduce variation and improve outcomes
- Have good experiences of care in a location that is as close to home as possible

9. Nottinghamshire LMS Priorities

From the data and feedback we have gathered and considered whilst compiling this Plan, it is clear that there are many areas identified as priorities for improvement in Nottinghamshire and that if addressed, would make the most difference to women, their families and babies in Nottinghamshire.

Delivery of the Plan depends on a substantially improved information technology system being in place to deliver interoperability, together with a maternity workforce configuration (and skill mix) and adequate systems of payment in place to support service transformation. These enablers are fundamental to delivering our priorities, which are to:-

- Improve access to maternity services by 12 weeks and 6 days (with a medium term aim of access by 10 weeks, as recommended by NICE) and across the maternity pathway

- Improve identification and support for women with mental health needs
- Improve the support and experiences of women with complex social needs. This includes pregnant women experiencing homelessness, domestic abuse, substance misuse issues or who have learning difficulties, are very young, are migrant or asylum seekers and/ or who have difficulties with written and spoken English.
- Improve continuity of carer in the antenatal and postnatal period
- Improve patient choice in maternity care.
- Improve women's experience of maternity services.
- Improve access to screening and vaccination.
- Reduce rates of smoking in pregnancy and Smoking At Time of Delivery(SATOD)
- Increasing rates of home birth and midwifery led care
- Reduce the rate of stillbirth, neonatal and maternal deaths and brain injuries that are caused during or soon after birth.
- Reduce infant mortality rates
- Improve postnatal care in all settings
- Increase rates of breastfeeding initiation and continuation.

10. Nottinghamshire LMS Model / Local Maternity Offer

Our local maternity offer and the Nottinghamshire vision for maternity care is summarised on page 49 of the Local Maternity Transformation Plan, see electronic link to full plan.

NHS England (NHSE) and the Regional and National Maternity Transformation Board will oversee implementation of the Nottinghamshire Local Maternity Transformation Plan.

11. Next Steps

There is a requirement by NHSE to resubmit the Plan on 31st January 2018, having addressed any points raised through feedback following submission of the Plan in October 2017. The LMS Transformation Board will oversee implementation of the Plan through regular reporting from the five workstreams established to lead on different elements and actions. In addition, some resource has been made available to CCGs/the STP to fund programme management support for this process and plans are being developed to ensure there is capacity to deliver this.

Other Options Considered

12.None. Development and implementation of Better Births and the Local Maternity Transformation Plan are requirements for CCGs and service providers.

Reason/s for Recommendation/s

13.To ensure the Health and Wellbeing Board has oversight of the Local Maternity Transformation Plan and endorse the content of this report

Statutory and Policy Implications

14.This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights,

the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

- 15.** There are no immediate financial implications. However, improving maternal health and wellbeing and maximising the quality of local maternity services will lead to reductions in complications of pregnancy, fewer neonatal and infant deaths and fewer cases of brain injury in babies, with a linked reduction in the considerable associated costs to families, the health service and society as a whole.

RECOMMENDATION/S

- 1) Consider the content of this report and the Local Maternity Transformation Plan.
- 2) Provide comments regarding the content and consider how the HWB can contribute towards the implementation of the Nottinghamshire Maternity Transformation Plan.
- 3) Decide whether the Board wishes to consider the South Yorkshire and Bassetlaw Maternity Transformation Plan.

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Constitutional Comments (LMc 15.12.17)

- 16.** Health and Wellbeing Board is the appropriate body to consider the contents of this report.

Financial Comments (DG 15.12.17)

- 17.** The financial implications are contained within paragraph 14.

Background Papers:

Nottinghamshire Local Maternity Services (LMS) Local Transformation Plan