Where a joint health overview and scrutiny committee makes a report or recommendation to a responsible person (a relevant NHS body or a relevant health service provider[this can include the County Council]), the Health and Social Care Act 2012 and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 provide that the committee may require a response from the responsible person to whom it has made the report or recommendation and that person must respond in writing within 28 days of the request.

This template provides a structure which respondents are encouraged to use. However, respondents are welcome to depart from the suggested structure provided the same information is included in a response. The usual way to publish a response is to include it in the agenda of a meeting of the body to which the report or recommendations were addressed.

Issue: OUHFT Maternity Services in Oxfordshire

Lead Cabinet Member(s) or Responsible Person:

- Yvonne Christley (Oxford University Hospitals NHS Foundation Trust Chief Nurse)
- > Rachel Corser (Chief Nursing Officer, Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care Board)
- > Dan Leveson (Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care Board Director of Places and Communities)

It is requested that a response is provided to each of the recommendations outlined below:

Deadline for response: Thursday 6th February 2025.

Response to report:

Enter text here.

Response to recommendations:

Recommendation	Accepted, rejected or	Proposed action (including if different to that recommended) and
	partially accepted	indicative timescale.
	Partially accepted	OUHFT Maternity Services offer a comprehensive range of mandatory training essential for delivering and maintaining high-quality, safe care. This training equips staff with the necessary skills to provide safe and effective care. All training in OUHFT Maternity Services is multidisciplinary, person-cantered, and focuses on the needs of patients and their families. Training initiatives, such as shared decision-making, are currently in progress and are being developed in collaboration with service users. Enhanced communication skills training for all Maternity staff,
		emphasising empathy, compassion, and kindness are scheduled to become part of Mandatory Training. This training will be included as mandatory by the end of the 2025-2026 financial year. Monthly reviews and monitoring will be conducted through the Trusts training compliance portal, with progress reported through clinical governance processes.
		OUHFT Maternity Services maintain and measure levels of training compliance as part of the Ockenden Report, the Maternity and Neonatal Three-Year Single Delivery Plan, and the Maternity Perinatal Incentive Scheme. Details of the levels of training compliance are measured and recorded in the Trust Board papers.
To continue to improve the support for the welfare and wellbeing of maternity staff in the context of improving OUHFT Maternity Services. It is especially crucial	Accepted	Professional Midwifery Advocacy: OUHFT Maternity Services has invested in the Professional Midwifery Advocate (PMA) role and team have experienced significant growth, increasing from 3 members in January 2023 to 24 members in January 2025. In 2023, the Trust also appointed a PMA/Wellbeing Lead Midwife, dedicating 22.5 hours per

that staff are not subjected to undue negative pressure due to their working in maternal services or as part of efforts to improve OUHFT Maternity Services. week to team building and management, along with an additional 15 hours focused on staff wellbeing initiatives. All PMAs consistently report and monitor PMA data. Staff satisfaction with PMA services has significantly improved between 2023 to March 2024, with 94% of staff recommending the service to colleagues. A two-year evaluation of PMA activity and team growth is planned for January 2025.

The current plan for the PMA team includes several key initiatives. Funds have been secured for Schwartz Rounds, with training spaces arranged and plans to launch the first Schwartz Round in January 2025. The PMA team will also be taking forward the POPPY project in 2025 which is a collaboration between psychologists and midwives. This initiative aims to help staff manage the emotional challenges of their roles by providing psychological support after clinical incidents or experiences of burnout. This project is in the early stages of development.

Four quality improvement (QI) projects are also planned for 2025 in collaboration with the Trusts staff health and wellbeing team. These projects will focus on retention, enhancing staff experience, and supporting staff following traumatic births, miscarriages, or unsuccessful/ongoing fertility treatments. Additionally, the projects will address workplace culture in intrapartum settings.

Staff Wellbeing and Psychological Support

To support the culture, leadership, and well-being of maternity staff, a support service was launched in April 2023 as part of the broader OUH Staff Support Service. A psychologist has been appointed to provide two days of coverage for maternity staff. The service offers both individual and group/team interventions, which are designed to be both proactive and reactive. Staff can access the service through

		self-referral online and are eligible for up to ten sessions of individual psychological therapy for work-related issues. The service also offers various team and group interventions in addition to individual work. These include psycho-education sessions, such as the "Living with Anxiety" workshop, training in resilience models for the PMAs, stress management sessions for the IEMs, reflective practice sessions for the bereavement team, and customised sessions to support teams during periods of transition or change. Looking ahead, plans are in place to offer additional groups and workshops for staff that focus on assertiveness, communication skills, mindfulness, team safety, and anxiety management. Additionally, there will be a session with the Senior Leadership Team aimed at fostering a shared sense of identity and values within both the team and the wider service. Currently, there are three service improvement projects underway within the maternity staff support service, along with a research project investigating the predictors of PTSD in midwives. All the activities outlined above will be evaluated and success measured against movements and increases in staff satisfaction survey results and a continued downward trajectory retention rate.
3. To develop a maternity trauma care pathway for ongoing support for mothers (and their partners) to include those who have experienced difficult births, complications, premature babies, and still births and bereavement. It is recommended that this is undertaken in co-production with voluntary	Partially accepted	In 2022, Oxford University Hospitals (OUH) collaborated with Oxford Health to create a Birth Trauma Pathway. This service provides direct access to the Birth Reflections service, which is designed to help individuals process their birth experiences and manage any emotional challenges they may encounter. Individuals can self-refer to this service, and general practitioners (GPs) can also refer patients. While the service primarily supports individuals up to one year postpartum, referrals after this period are considered on a case-by-case basis.

organisations that work with families experiencing trauma and who include experts with lived experience. It is crucial to be proactive in reaching out to such patients and their partners in this regard.		The Trust has a dedicated birth trauma midwife and a clinical lead consultant in Postnatal Care who provide additional targeted support for women after childbirth. They also work alongside specialised mental health midwives to identify and address any mental health concerns that may require different referrals. Currently, the Trust is conducting a gap analysis on recent parliamentary reports regarding birth trauma and is assessing the capacity of Birth Reflections to ensure that demand is met.
		OUHFT Maternity Services also collaborates with the Petals baby loss counselling charity, which specialises in supporting parents dealing with mental health issues stemming from bereavement, trauma, or loss related to pregnancy, including miscarriage, stillbirth, termination for medical reasons (TFMR), and neonatal loss. All families experiencing loss within the OUHFT Maternity Service are offered ongoing support through this charity if they wish to access it.
		As indicated above a review of the birth trauma pathway is currently underway. The service will continue to evaluate user experiences related to be reavement care and findings will be monitored and reported monthly via the Maternity Performance Dashboard and the Perinatal Quality Surveillance Report.
4. To establish robust processes through which to monitor and evaluate the effectiveness of measures aimed at improving OUHFT Maternity Services.	Partially accepted	OUHFT Maternity Services has established robust processes for monitoring and evaluating the effectiveness of measures to improve maternity care. OUHFT is dedicated to enhancing services and has complied with the Maternity and Perinatal Improvement Standards (MPIS), maintaining full compliance for the past five years. It is on course to continue this in 2024/25.

The service also receives support from the Maternity Safety Support Programme (MSSP), a national initiative from NHS England designed to enhance the safety and quality of maternity services. OUHT Maternity Services commenced on the programme in January 2022 and has received targeted support to improve care delivery. OUHFT Maternity Services have made significant advancements since starting the program. In December 2024, a review was conducted in collaboration with NHS England and the BOB ICB to assess progress regarding the MSSP exit criteria. The review recognized the improvements achieved and highlighted the considerable impact of leadership from the Maternity, Divisional, Corporate, Executive, and Non-Executive teams in driving these enhancements.

OUHFT has recently enhanced governance within its Maternity and Neonatal services by establishing a new joint governance committee. This committee serves as an essential platform for discussing and addressing safety and risk management issues related to both maternity and neonatal services. By uniting stakeholders from these areas, the committee ensures that safety processes are harmonized and that best practices are consistently shared and implemented. Furthermore, the joint governance committee plays a crucial role in the 'Ward to Board' safety process, ensuring that key risks and themes are effectively communicated to the Trust Board.

OUHFT Maternity Services participates in the nationally required Maternity and Neonatal Safety Programme. This initiative operates collaboratively to improve governance and safety processes in both maternity and neonatal services, with involvement from both executive and non-executive members. It supports the integration of various training and development initiatives. This collaboration ensures a unified approach to safety and quality, fostering a culture of continuous improvement and vigilance.

		OHFT has established an Evidence Group to monitor and evaluate the progress and effectiveness of the improvement activities and actions related to Maternity Services. Updates on this progress are provided through established governance processes, which include the Maternity Clinical Governance Committee, the Trust Clinical Governance Committee, are a routine part of the maternity quality report presented at each Trust Board. Over the next year OUHFT Maternity Services will continue to progress the activities outlined above and embed the newly established governance structures. The service will also work to enhance maternity services enhancing services by implementing the
5. To ensure that coproduction remains at the heart of the design as well as the improvements of OUHFT Maternity Services. It is also recommended for collaboration amongst relevant system partners, to explore the opportunity for coproduction work to maximise the potential of health checks for supporting women who have given birth, with a view to improve their physical and mental wellbeing and that of their families in the long run.	Partially accepted	In the past two years, funding for the Oxfordshire Maternity and Neonatal Voices Partnership (OMNVP) has doubled, allowing for a wider range of activities and increased participation. This additional funding has enabled the Trust to incorporate 'Neonatal' into its work plan. OMNVP representatives are actively involved in the Maternity Clinical Governance Committee and Safety Champions meetings, providing valuable user perspectives. The OMNVP collaborates with the Trust on initiatives such as the Culture Review and the Maternity Development Programme. This partnership includes co-facilitating events and establishing a Maternity Patient Experience Working Group. The OMNVP supports various improvement projects, including enhancing parent education sessions, revising visitor policies, and upgrading the Maternity Assessment Unit. Regular feedback surveys are conducted on topics such as baby loss and neurodivergence to help the Trust better understand family experiences. These initiatives

have led to significant changes within the Oxford University Hospitals (OUH) Maternity Service, ensuring a patient-centred approach to enhancements.

The service values and actively incorporates feedback from external partners and service users. In response to a Healthwatch report, the Banbury Sunshine Centre has launched several support services for vulnerable families. These services include the Saplings group, which offers weekly antenatal classes focusing on healthy eating, oral hygiene, and mental health awareness. The centre also hosts a baby group to foster community among families after childbirth. Additionally, a Multicultural Team has been established to provide peer support and help families connect with relevant voluntary services.

OUHFT Maternity Services work alongside the Buckinghamshire, Oxfordshire, and Berkshire Local Maternity and Neonatal System (BOB LMNS), NHS England, The National Childbirth Trust, Sands, and the Maternity and Neonatal Safety Improvement (MNSI) programme. The focus of these activities is on enhancing patient safety, integrating digital solutions, and addressing health inequalities. Internally, the Trust collaborates with the Executive team, divisional leadership, and specialist teams in areas such as Patient Experience, Patient Safety, Governance, and Assurance.

OUHFT Maternity Services will continue to coproduce improvement activities with the OMNVP, healthcare professionals, service users, family members, and relevant system partners to discuss and review OUHFT Maternity Services. The service will also continue to create channels for service users and families to provide feedback on OUHFT Maternity Services and use this feedback to make continuous improvements.

		In the next 12 months OUHFT Maternity Services will work to enhance service user satisfaction with maternity care and experiences through various feedback channels. This will be measured by conducting regular surveys, focus groups, and feedback forms completed by women who have given birth. Additionally, the service will track health outcomes, such as lower rates of postnatal depression, improved physical health, and higher overall family wellbeing scores, to evaluate the success of coproduction and collaboration efforts. Regular audits and assessments of OUHFT Maternity Services will ensure continuous improvement and adaptation to meet the evolving needs of service users and their families.
6. For there to be clear communication with patients, including in indigenous languages for those who may not be fluent in English.	Partially accepted	OUHFT Maternity Servies are committed to addressing inequalities in maternal and perinatal health through various initiatives aimed at improving access, experiences, and outcomes for women and birthing individuals at high risk of poor health outcomes. The introduction of a dedicated Equality, Diversity, and Inclusion (EDI) midwife in 2022 has significantly advanced the development and implementation of the EDI agenda within OUHFT Maternity Services. This role has been crucial in promoting an inclusive environment, ensuring equitable care for all service users, and addressing disparities in maternal health outcomes. By focusing on comprehensive EDI strategies, the EDI midwife has facilitated the integration of best practices, improved staff training, and fostered a culture of respect and understanding. This progress underscores the commitment of the services to create a supportive and inclusive maternity care system that meets the diverse needs of the local community.

The Trust collaborates with communities through Equal Start Oxford (ESO), an initiative launched in early 2023 aimed at improving maternal and perinatal health for vulnerable populations in Oxfordshire. ESO works closely with local midwifery teams and includes maternity advocates who assist with non-health-related issues such as immigration, welfare benefits, housing, and food insecurity. They also provide interpreting services and support for drop-in spaces for pregnant women and new parents, with a particular focus on the East Timorese community. Later this year, the Equal Start framework will expand into high-need areas like Didcot and Banbury, partnering with local communities to assess their needs and implement initiatives to improve healthcare access.

A key aspect of the ESO (Excellence in Social Outcomes) is the Maternity Health Justice Partnership, which supports midwives in addressing non-health-related needs and tackling modifiable social determinants of health. This initiative features a joint obstetric and midwifery clinic designed for vulnerable pregnant women, ensuring they receive the essential care they need. Overall, ESO aims to improve access to OUHFT Maternity Services for marginalised groups, promoting the well-being of every mother and baby in Oxfordshire.

Oxfordshire has seen an increasing number of dispersed asylum seekers arriving at hotel accommodations. Pregnant women in these hotels often struggle to access timely maternity care due to several challenges. These include language barriers, a lack of understanding of how NHS OUHFT Maternity Services operate, and transportation issues that make it difficult to attend hospitals. To address these challenges, a monthly joint obstetric and midwifery clinic has been established at both the Oxford Witney Hotel and Horton Hospital. This initiative is supported by a caseworker from Asylum Welcome, with

the aim of meeting the needs of pregnant asylum seekers residing in the two hotels near the hospital.
OUHFT Maternity Services will continue to collect feedback from women who have used OUHFT Maternity Services to evaluate their satisfaction with co-production initiatives and communication efforts. These activities will include assessing the availability and effectiveness of communication in indigenous languages, ensuring that non-English speaking service users are fully supported and well-informed throughout their healthcare journey.
Physical and mental health indicators among postpartum women and their families will also be monitored and evaluated to identify improvements or areas that require attention.