



Supplemental Report

Presented to the
Meeting of the
**Reducing Inequalities in Maternity Scrutiny Topic
Group**
on
Monday, 12 September 2022

--

5. Executive Member Response

3 - 6

<p>SCRUTINY RESPONSE</p>	
<p>NAME OF TOPIC GROUP: Reducing Inequalities in Maternity</p> <p>CHAIRMAN: Judi Billing</p> <p>SCRUTINY OFFICER: Fiona Corcoran</p> <p>LEAD OFFICER: Sally Orr</p> <p>EXECUTIVE MEMBER: Fiona Thomson</p>	
<p>DATE OF SCRUTINY: 12 September 2022</p> <p>DATE REPORT PUBLISHED: 12 October 2022</p> <p>DATE RESPONSE DUE: 13 November 2022</p> <p>DATE RESPONSE RETURNED: 9 November 2022</p>	
<p>Recommendations:</p>	<p>Scrutiny Response:¹</p>
<p>1. Develop deeper engagement with communities by investigating locating services in community spaces and undertaking ongoing engagement activity via family centres, maternity hubs etc. Focus on listening in addition to providing information with further development of translation services to support this where required. To be shared at Impact of Scrutiny Advisory Committee (ISAC) 7 March.</p>	<p>Due to workforce shortages and capacity needed on site it is currently not possible for midwifery services to go back into GP surgeries but work is in progress to build relationships with partners and investigate opportunities and venues available to provide accessible, co located care for our service users. One option that we are currently exploring is the viability of locating maternity services in suitable Family Centres. Due to the facilities required, this will not be appropriate in all areas so alternative venues will need to be found.</p> <p>To support with this, we will be utilising learning from successful models within our region.</p> <p>This model will help to ensure that we are providing consistent messaging and information for our families due to the multi-agency approach but also, an opportunity to reach as many families as possible as many of vulnerable families are likely to be accessing support/information from our partners.</p> <p>Ensuring that we are providing information in accessible formats</p>

¹ All abbreviations used must be in full on first use

	remains a priority. To help with this, work is underway to identify the range of languages and dialects spoken so that we can ensure that we are providing the support required. This includes ensuring that our multilingual padlet is updated to reflect this.
2. Improve the quality of data by breaking down and acknowledging refugees and specific ethnic minorities; and to provide HSC with national benchmarking data on HWE and ICP maternity services for Black, Asian and Minority Ethnic women. Bulletin by 25 November 2022.	<p>Work is currently underway to gain this information from the National team in order to provide a benchmark for us regionally and locally to measure ourselves against. This data will be available for us to report back in March.</p> <p>Locally, plans are being discussed to add a requirement to contracts to record ethnicity data and to put in place a robust reporting process to ensure that we have a better understanding of the cultural and language needs of our communities.</p>
3. Integrated Care Partnership (ICP) to ensure cohesive whole-system approach to addressing maternity inequalities beyond the Local Maternity and Neonatal System (LMNS.) This to include data sharing, liaison with GP surgeries, Integrated Care Board (ICB) strategy, social services. To be shared at ISAC 7 March.	The ICB have a health inequalities work stream which incorporates the work of the LMNS. Co ordination of this work across the wider system is underway.
4. The Integrated Care Board (ICB) People's Board to develop system-wide approaches to staff recruitment and retention, including a focus on staff from Black, Asian and Minority Ethnic communities. To be shared at ISAC 7 March.	To further this work, a workforce lead for the LMNS/ICB is being appointed and will be able to feedback our system approach to addressing the gaps.
5. To assess the impact and outcomes of LMNS activity around women's understanding of the service and birth outcomes. To be shared at ISAC 7 March.	<p>The LMNS acknowledges that although there is lots of work going on to raise women's/birthing peoples awareness of the service and birth outcomes, evidence needs to be gathered to provide a true picture of the success of this activity.</p> <p>To support with this, the following work is planned:</p> <ul style="list-style-type: none"> • The current survey is to be reviewed and success

	<p>measured by the increase in responses received.</p> <ul style="list-style-type: none"> • Six monthly visits to the Family Centres to be carried out to obtain direct feedback from women/families • Cultural competency training embedded in staff training • Ensuring 'freedom to speak up' champions are available in every work place
<p>Any further comments on the report or this scrutiny?</p>	

This page is intentionally left blank