

Wigan Maternity Voices Partnership

Online Meeting via Microsoft Teams, 30<sup>th</sup> July 2020, 10am

MINUTES

Item	Action
<p><b>1. Welcome &amp; Introductions</b></p> <p><b>In attendance:</b>            Julie Watkinson, Wigan CCG            Rachel Richardson, Wigan CCG            Angela Cullen, Wigan CCG            Nicky Ainscough, Wigan CCG            Zoe Stevens, Physiotherapist, Happy Mum, Healthy Bump            Andrea Arkwright, WWL            Fiona Bryant, WWL            Anne-Marie Goodall, WWL            Angela Cropper, WWL            Ruth Horridge, WWL            Cathy Brewster, GM MVP            Vicky Davies, Breastfeeding Together            Rachael Cunliffe            Charlotte Simm            Amy Napier            Jemma Hutchinson            Emma O'brien</p> <p><b>Apologies:</b>            Sarah Howard - Bereavement Midwife and Rainbow Clinic Lead Midwife at WWL            Kathryn Ashton, WWL            Janet Waterhouse, Startwell Manager, Ince            Linda Coakley, Weight Management Service</p>	
<p><b>2. Key Updates</b></p> <p>JW checked in with the group and thanked everyone for getting involved in the first online Maternity Voices meeting. JW explained how the online meeting was an opportunity for everyone to catch up and share their experiences of COVID, a situation which has had many different impacts on people's lives. We recognise that some new mums with new babies may be struggling more during COVID and may require additional support. Future online maternity meetings are a good way of keeping the group connected and providing information on different services and support. We will look to arrange a face-to-face meeting again when it is safe to do so.</p>	

<p><b>Wigan Borough CCG</b> – Julie Watkinson, Commissioning and Transformation, Assistant Director informed the group that the CCG were in discussions with the Department of Health on how to move forward with commissioning services for the future.</p> <p><b>Wrightington, Wigan and Leigh NHS Foundation Trust</b> - Anne-Marie Goodall, Outpatient Matron shared the Trust had experienced a very difficult few months due to COVID, with the first few weeks being hard on Maternity Services with the need to adjust to new ways of working.</p> <p><b>Updates from Wigan Maternity:</b> From 27<sup>th</sup> July mums can now choose to have a 2<sup>nd</sup> birth supporter, once in established labour and on delivery suite. The community midwives will document who the nominated birth partner is, and masks will need to be worn and temperature checked before they can accompany mum.</p> <p>Currently awaiting confirmation from scans on when these can restart.</p> <p>Community midwives carrying out booking appointments mostly over the telephone and are now beginning to re-introduce the 16-week face to face appointment.</p> <p>Wigan Maternity were pleased to be able to retain a birthing partner through the pandemic as well as continuing to offer the home birthing service. Cathy Brewster, GM Maternity Voices congratulated Wigan on this achievement and passed on her thanks to the team at Wigan.</p> <p>Continuity of Care Team, which was due to be launched back in April, was softly launched on 6<sup>th</sup> July but with no comms issued around this yet. The new model of care is a group of midwives who look after mums during pregnancy throughout the antenatal and postnatal period. This is a really positive outcome, as in previous meetings, consistency of care was highlighted as an important factor to mums during pregnancy. Wigan Maternity hope to have more midwives starting to work around this process and have already had some positive feedback, following the birth of around 7 or 8 babies.</p> <p>JW asked if AG had if some feedback around the new model of care could be shared at a future meeting. AG to have a think about how some feedback could be obtained and discuss at the next meeting.</p> <p>Andrea Arkwright said she would be happy to do a survey around the continuity of care model, possibly after 6 months, to obtain some patient feedback.</p> <p>Angela Cropper updated on the Transitional Care Unit at Wigan, which has been suspended at the moment due to COVID and staff redeployment. The unit is usually staffed by Midwives and Neonatal Nurses and designed to support keeping mothers and their premature babies together. Catherine Hargreaves or</p>	<p>AG</p> <p>NA</p>
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<p>Allison Kurfurst, WWL could be invited to a future meeting to discuss Transitional Care, once re-instated. NA to invite to future meeting.</p> <p>During COVID women have had access to TVs free of charge to support with the suspension of visiting. Maternity staff have noticed more interaction between women on the bays and more relationship building which has been very positive to see.</p> <p>When visiting does resume, the Maternity Unit may consider having a window in which partners are not on the ward in order to increase relationships with women, which could encourage mums to keep in touch in the community.</p> <p>Wigan Maternity are looking to include Dilaplan as part of a routine induction, a non-hormonal method to induce labour which may also allow women who have previously had a caesarean to have a vaginal birth.</p> <p>Although early transfer is something which was already available it has been more utilised over the last few months with mums wanting to be at home with partners and other children.</p> <p><b>Breastfeeding Together</b> – Vicky Davies said the service has provided lots of support to families during COVID via different channels including Zoom and Microsoft Teams. Funding for Breast Feeding Together would be coming to an end on 5<sup>th</sup> August and although they hope to be able to run as a stand-alone charity, without funding this may not be possible. Vicky expressed her concern at losing peer support/volunteer service for families.</p> <p>Anne-Marie had been in discussions with the Local Authority and had developed a plan along with The Health Visiting Team around Breast Feeding. Communication around this is due to go out week commencing 3<sup>rd</sup> August, to inform women of the new ways of working. At the moment, the plan does not include overnight support but WWL are looking into how this can be managed going forward. Maternity Services would look to involve volunteers and have that peer support attached to the unit as part of future developments.</p> <p>It was unclear if there had been any engagement work around the new model for breastfeeding. JW to arrange to meet with the Local Authority to discuss further.</p> <p><b>Q.</b> Will the Health Visiting Team be fully trained in Breastfeeding? One mum said she didn't get the support she required with feeding from the Health Visiting Team and so she turned to Breastfeeding Together for support.</p>	<p>JW</p> <p>NA</p>
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<p>A. AG could only comment from a Maternity perspective and said that all Midwives receive training in breastfeeding. This would need to be followed up with the Health Visiting Team for a response. NA to follow this up.</p> <p><b>Zoe Stevens Weight Management Service</b> – Staff have been redeployed to Aintree Hospital to support with welfare checks and to help patients who require additional support as well as linking in with Mental Health Services. The Weight Management Service is currently running via telephone and they are looking at more ways to engage with the community i.e. via video. ZS to share with NA a new leaflet promoting the service and a link to the website once these are finalised. The service has been encouraging mums to get their weight checked with their Midwife.</p> <p>ZS informed the group of some online Antenatal Education resources developed by GM and different teams across the whole system, including the Maternity Voices Partnership and Maternity Units in GM&amp;EC. The resources are now live and can be accessed via the existing My Birth My Choice website. NA to share the link with the group.</p> <p>AG updated that WWL have also recently renewed their policy on weight management.</p> <p><b>Actions:</b></p> <p>AG to have a think about how we might get some feedback around the new ‘Continuity of Care’ model and how best to approach this. AG to bring back to the next meeting to discuss how the group could help with this.</p> <p>NA Invite Catherine Hargreaves or Allison Kurfurst, WWL to a future meeting to discuss Transitional Care, once re-instated.</p> <p>JW to arrange to meet with Local Authority to discuss breastfeeding support.</p> <p>NA to contact Health Visiting Team for info around staff training in breastfeeding.</p> <p>ZS to send Weight Management Service leaflet and weblink to NA once finalised for NA to share with the group.</p> <p>NA to share the Antenatal Education resource link with the group.</p>	<p>ZS</p> <p>NA</p>
<p><b>3. Maternity Voices Chair Role</b></p> <p>NA recently emailed out to the group with a Maternity Voices Terms of Reference document, which had been updated in line with COVID. JW asked the group to respond with any feedback they may have in order to get this signed off.</p>	<p>ALL</p>

<p>JW apologised for the delay in moving the Maternity Voices Chair Role forward, which had been down to the funding being in last year's budget. JW was pleased to inform everyone that the CCG had recognised the commitment of the group and had allowed the money to be rolled into this year, so work around appointing a new Chair can now be progressed.</p>	
<p>AC has put an advert together for the role and once this is signed off the CCG can start to share.</p>	AC
<p>JW said it is really important to appoint a chair who could drive the group forward and that the successful Chair would be provided with any support they required.</p>	
<p>AC said the CCG had some recent experience of a virtual interview process, which ran smoothly and didn't see any problems with the Chair Role interview running this way. Some of the things the group thought would be important when thinking about the interview/role were:</p>	
<ul style="list-style-type: none"> <li>• Obtaining some questions from the Maternity Group</li> <li>• Creating a focus group</li> <li>• Including a Mum and a Dad who have experience of using the service on the panel</li> <li>• Contacting Dad Matters to see if they could get involved or know of any Dads who may be interested</li> <li>• Looking at interview questions used for other MVPs</li> <li>• Enquiries through pop up groups to see if anyone in Wigan may want to get involved</li> <li>• Involving Startwell Centres</li> <li>• Not too much pressure on Mums</li> <li>• The Chair needs to have an understanding of what MVP stands for and how they can influence change and improve local Maternity Services</li> <li>• Understanding the importance of linking in with wider groups</li> <li>• Training and support for Chair – GM are keen to link in with the new Chair and offer training on 'How to be an MVP Chair'</li> </ul>	CB CB
<p>The group agreed that they are happy for a representative from the Regional Service One Voice to be involved on the interview panel for the MVP Chair.</p>	
<p><b>Actions:</b> Group to email back with any feedback around the updated Terms of Reference AC to share the Maternity Voices Chair Role advert, once signed off CB to share some interview questions, used to appoint MVP Chairs in other areas, with AC. CB to make enquiries through pop up groups to see if there is anyone from Wigan. AC to put some notes together re: focus group</p>	

<p><b>4. Any Other Business</b></p> <p>JW thought it may be helpful to have an update on the new Breastfeeding Together model and how this is working for women. AG to bring some patient feedback to the next meeting, good or bad around the new model.</p> <p><b>Action:</b> AG to bring some patient feedback to the next meeting around Breastfeeding.</p>	<p>AG</p> <p>AG</p>
<p><b>5. Next Meeting:</b> Thursday 24<sup>th</sup> September 2020 1 – 2.30pm, Held online via Microsoft Teams</p>	

