

Annual Report

2021-2022



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Foreword from the Co-Chairs

"I am extremely proud to present DMNVs first ever annual report, a chance for us to reflect on this whirlwind of a year and head into our second with a clear focus and even more determination to accomplish great things, together.

For us, this first year has very much been a crash course into the inner workings and intricacies of our local maternity and neonatal systems and beginning to establish long -term roots within Derbyshire. We have only touched the surface when it comes to listening to the experiences of women, birthing people, their families and local community groups, but we have been able to meaningfully engage on a wide range of issues, from personalised care to bereavement, infant feeding to mental health.

It has certainly continued to be a year of intense challenges for everyone, with the impact of the pandemic continuing to be felt throughout maternity and neonatal services. For, DMNV the challenges have focused in particular around establishing ourselves as a group, expanding our reach within the community and within the healthcare setting. We have also received a very warm welcome, begun to build some brilliant relationships and welcomed new core members into the team.

I feel absolutely privileged to be in a position to listen to the stories and experiences of so many people and families. There are many wonderful people operating within the maternity and neonatal world in Derbyshire, whether they are service users, service user representatives or health care providers, their drive and commitment to making the experience of care the best it can be is inspiring. A special thank you goes to all the new volunteers who have recently joined the DMNV team, your time and dedication is massively appreciated and valued and I can't wait for this next year together!

I am extremely grateful to have met Shilpa, a passionate, determined and unfailingly kind person, I couldn't have asked for a better Co-Chair. A huge thank you to Claire Johnson at NHS Derby and Derbyshire CCG for her unwavering support, being able to count on her advice at all turns is a massive source of support and DMNV would not be here without her.

So, what lies ahead for DMNV in 2022/2023? Without a doubt, we intend to continue working hard to provide opportunities for the voices of local families to be continuously heard and amplified so that together we can continue to improve our maternity and neonatal services. Let's get stuck in!"

Anne Marie Matarrese DMNV Co-Chair for Chesterfield



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"This past year has seen DMNV grow into a committee of strong and passionate individuals committed to improving maternity services. I am especially proud of our achievements so far and we could not have done it without the constant support from Claire Johnson. Thank you for always having our backs, and helping us find our path through everything that has led us to where we are today. We could not have done it without you!

Thinking back to when DMNV first formed a year ago, there was a massive learning curve that we needed to navigate, not to mention the challenges COVID-19 had posed. From understanding how DMNV fits into the feedback system between the hospitals and service users to furthering our reach in the community and forging a relationship with them, DMNV has come a long way.

We recognise that DMNV still has a lot of work to do. There are many areas of care and lines of communication we would like to improve through constant feedback. We plan to be more present in the community going forward as well as continuing to help to improve maternity services further. We have overcome many hurdles to be successful in all the projects we have undertaken so far and we plan on keeping it going.

It is with a heavy heart that I inform you that I will be stepping down as co-chair from 2022, due to a shift in my responsibilities outside of DMNV. However, I remain dedicated to DMNV as part of the committee and will be helping out whenever I can. DMNV is still my passion and will always be part of me. I am eager to see what's in store for us next and am ambitious for our goals going forward. I am grateful for having had this opportunity, to listen to the happy and difficult stories, to tackle the challenges that's come our way and to proudly represent DMNV at events and meetings. I hugely value the friendships and contacts I have built in the community and the hospitals as part of DMNV, your support going forward is invaluable to us.

To my co-chair Anne Marie, I could not have asked for a better partner to share this role with. Your determination, passion and encouragement has been incredible and I look forward to another wonderful year of working with you, albeit, in a different capacity!

2022/23 is going to be great for us. I am excited for the new projects and opportunities that will find DMNV, and as the saying goes, 'the best is yet to come!'

Shilpa Joy DMNV Co-Chair for University Hospitals of Derby and Burton



A Letter from...



March 2022

"I am delighted to see the first Annual Report of Derbyshire Maternity and Neonatal Voices which brings together the amazing body of work which has been achieved over a very challenging year.

The Local Maternity and Neonatal System (LMNS) is the collective term for the clinicians, managers, services users, Local Authorities, NHS providers and Clinical Commissioning Group (CCGs) which come together to plan, deliver and evaluate maternity services across organisational boundaries within the Joined Up Care Derbyshire Integrated Care System (JUCD ICS).

DMNV is an essential partner in our LMNS, helping us to ensure that women and family voices are heard in planning and decision-making and enabling us to collect feedback about how things are working, so that it can be used to make further improvements. Derby and Derbyshire Clinical Commissioning Group funds DMNV to carry out its activities and provides both practical and leadership support for committee members to carry out their roles.

In October 2020 the LMNS began working with partners to devise a new governance structure for the MVP in Derbyshire. By April 2021, the Co-Chairs and supporting roles were appointed and began the journey of developing a collaborative, inclusive Maternity and Neonatal Voices Partnership. This has been a work in progress with some changes along the way, but it has become a successful and established part of maternity and neonatal services in Derbyshire.

Maternity and neonatal services have been particularly hard-hit by the coronavirus pandemic, and we are grateful to DMNV for helping us to understand the impact on families and for supporting outward communications, all while getting to grips with their own newly-established partnership. It is also very encouraging to see the in-roads DMNV have made into local communities, in particular their engagement with a more diverse range of voices which will be integral to our 'equity and equality' agenda.

Working with Anne Marie and Shilpa has been a pleasure due to their enthusiasm and commitment to improving the experience of service users. I wish Shilpa every success moving forward and thank her for her time as Co-Chair. 2022/23 will focus on building the network we have established and continuing to develop services through open communication and coproduction with UHDB and CRH, with lots more exciting projects and further developments for the committee."

Brigid Stacey

Senior Responsible Officer for the Derbyshire LMNS Chief Nursing Officer, Derby and Derbyshire CCG

A Letter from...



March 2022

"As I pause to reflect on the challenges of the last 12 months, I would like to say a massive thank you, to everyone involved in the work of the Derbyshire Maternity and Neonatal Voices. It's been a tough year, but with the work and collaboration we are now really beginning to show how feedback from service users can influence improvements in maternity services

We have involved the DMNV in a number of workstreams within Chesterfield maternity services. We have been delighted to have service users involved in recruitment process of some of our key midwifery posts and participate in the focus groups alongside our maternity and neonatal teams namely the Infant feeding lead midwife and the Senior Matron.

As a service we are passionate to have women and families engaged in working with us to continually improve and develop our services such as the induction of labour pathway, bereavement pathways and infant feeding services. We are seeing more and more improvement activity being undertaken in coproduction, with service users and maternity professionals working side by side to find solutions and drive transformation to improve outcomes and experience for women and their families.

We are very positive for the year ahead as we develop our Maternity transformation programme and look forward for the opportunities for our service users to work alongside us on this transformation journey. We are equally looking forward to not only work in partnership with the DMVP but our partner provider UHDB as we develop a more system wide approach of quality improvement and service development.

Julie Mycock

Deputy Head of Midwifery Chesterfield Royal Hospital

A Letter from...

University Hospitals of Derby and Burton

March 2022

"UHDB maternity services recognise the huge importance that the DMNV have made over the last year by representing and engaging service users across Derbyshire and Staffordshire. Over the past year, we have strengthened our relationships with the DMNV and worked in partnership to review implement and co-produce changes that support the recommendations of the Ockenden review.

Over the past year, the DMNV and wider service users have supported a review of UHDB's maternity web pages and access to patient information, reviewed the local maternity hand held records and are engaged with our Midwifery Continuity of Carer workstream. The team have supported UHDB to undertake work in reviewing equity of service, access and information for families from BAME communities. All of this work has offered valuable feedback with regard to identifying areas for improvement.

Ongoing work continues with the DMNV to coproduce and implement Personalised Care and Support plans, to enable pregnant people to contribute to and feel empowered in making choices related to their care. We will continue to strengthen key communications between UHDB and DMNV to ensure service users receive up to date information about local maternity services.

During 2022/23 we hope to continue and build on the work already in progress and continue to identify future projects that improve quality of care for all women accessing maternity care."

Lorraine Purcell Head of Midwifery University Hospitals of Derby and Burton

What Is An MVP?

A Maternity Voices Partnership (MVP) is an independent NHS working group: a team of volunteers, birthing women and people, and their families; commissioners; and providers (midwives and doctors) and other partners working together to review and contribute to the development of local maternity and neonatal care by putting the experiences of birthing women and people, and their families at the centre.

MVPs are an ideal platform for the **co-production** of maternity services and a way for commissioners and Trusts to consult with the public – also helping them fulfil their statutory obligations for patient participation involvement.

They provide a **mechanism for real time ongoing feedback** and **co-design of services**, enabling coproduction on maternity and neonatal development projects and ensuring that birthing women and people, and their **families are actively involved** in service development and improvement.



In December 2020 the **Ockenden review** highlighted the importance of an effective Maternity Voices Partnership, stating that it is "imperative that family voices are strongly and effectively represented in each LMS (Local Maternity System) through the Maternity Voices Partnerships".

Listening to and centering the experiences of birthing women and people, and their families throughout their maternity and neonatal journey is key to the work of the MVP, together with strong collaborative working between all parties involved and is crucial to the development of high quality personalised care for everyone accessing the maternity service.



It is 'imperative that family voices are strongly and effectively represented in each Local Maternity System through the Maternity Voices Partnerships'

Ockenden Review - December 2020

Who We Are: Our Team

Derbyshire Maternity and Neonatal Voices (DMNV), is an independent multi-disciplinary advisory and action forum with service users at the centre. DMNV is committed to diversity and equal opportunities and upholds women's human rights in pregnancy and childbirth. We are multidisciplinary and our members bring with them different beliefs, values and experience: all these perspectives are valued and respected

Our committee brings together **service users**, **service user representatives**, **healthcare professionals** and other **partners** from organisations involved in maternity care with local birthing women and people and their families.

Our professional membership includes the Heads of Midwifery, Infant feeding midwives, neonatal nurses, health visitors, continuity and bereavement midwives from **Chesterfield Royal Hospital** and **University Hospitals of Derby and Burton**, and **Clinical Commissioning Group representatives**. We also receive **admin support** for our Board meetings and wish to thank Laura Harmer for all her work. We have a **dedicated and passionate group of volunteers** who help us to lead on a variety of themes and help us to engage with birthing women and people and their families across the area.

Our **heartfelt gratitude** goes to all our volunteers for all their time and **contributions to DMNV**, which is invaluable. The team is continuously and rapidly expanding: we are always looking for more volunteers from around Derbyshire and **everyone is very welcome to join**.

Some of our wonderful volunteers



Faye Freeman Neonatal Lead



Michele McFarlane Engagement Lead



Kate HartSammy FretwellBereavement &Bereavement &Mental Health LeadMental Health Lead



Maria Howe Equity & Equality Lead

See appendices for full membership list: Appendix A - Membership

"We are multidisciplinary and our members bring with them different beliefs, values and experience: all these perspectives are valued and respected"

What We Do

Our aim is to make sure the voices of birthing women and people and their families are included in the development and improvement of maternity and neonatal services in Derbyshire.

We hold quarterly online Board meetings where we provide updates to all our partners and discuss maternity services in the area - challenges, successes, ongoing projects, feedback received and outstanding issues.

Additionally we host an informal evening online monthly group catch up, attended by both service users and health care providers, which also gives potential new volunteers the chance to meet us, ask questions and learn more about what we do and how to get involved.

Feeding your baby what worked what could well about have been

We gather feedback in a variety of ways, encouraging people to contact us and share their stories via social media, launching specific surveys or hosting face to face feedback events. We receive a lot of enquiries and requests for support from service users and often signpost them to relevant services and put them in direct contact with healthcare providers where necessary.

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| What was good |
| about your experience? |
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We collate and anonymise all feedback received, identify themes and then discuss these with the Trust with a view to making **positive change**s to the maternity service.





We get involved in specific projects that might be happening within the Trust, **joining their working group**s and we are consulted on proposed service changes, **we review and co-produce** maternity leaflets and communications.

We attend numerous **local and regional meetings and forums** to represent the voice of maternity and neonatal service users: we spend an average of **16 hours a month attending or chairing meetings**. We are also part of the **Midlands MVP Chair group** as well as national MVP forums, which are brilliant sources of support and inspiration for our work.



My Personalised Care and Support Plan

Helping to prepare you for pregnancy, birth and the first few days with your baby



Joined Up Care Derbyshire



University Hospitals Derby and Burto

"I don't see it as a job, it is my privilege to support families through an unimaginable time"

-Angela Thompson, Lead Specialist Midwife in Bereavement Support, Royal Derby Hospital



This year we have begun establishing a significant **online presence**, tripling our following on our social media accounts, and **meaningfully engaging** with our followers on numerous topics. One of our aims on social media has also been to **bring health care providers and service users closer together**, by featuring staff profiles, providing updates from the Trusts and encouraging service users to share their positive experiences of care. We now maintain a social media presence across multiple channels, such as Facebook Instagram, and are expanding to Twitter and an **engagement platform** hosted by Joined Up Care Derbyshire (all links can be accessed on the final page).

We are also actively seeking out the voices of local communities we do not often hear from - we are establishing community links and striving to continue providing feedback from a more representative **cross section of service users**. We are always looking for new volunteers who would like to be involved and have plans for recruitment initiatives in 2022.



Neonatal

It has been an exciting few months for the neonatal side of DMNV. We have made a start on several projects and look forward to expanding on these in the coming year. We have made **good links with staff** at Chesterfield Royal Neonatal Unit, and from feedback from them and parents have decided to look at creating a "**parents pack**" which could be used as an induction onto the unit and used throughout the stay there. It would contain information such as helpful terminology, where to get food/drinks, local supermarkets and amenities etc. Hopefully this could be used a template and **replicated** at UHDB. Alongside this we hope to **film a tour of each unit**, allowing for potential parents to become familiar with them if they know that their baby may need care on NICU.



In order to reach as many parents as possible, we have also had input in **designing some promotional material**. For parents who have had their baby in a neonatal care setting we recognise that going home is an **important milestone** and so have created a tag that can be used on a pram or car seat that has our contact information on one side and a poem on the other.

We held our **first focus group online**, which had a general topic of "families of neonatal babies" aimed at those who had accessed care at the **Royal Derby Hospital**. This generated some interesting discussions and will help to drive forward some of our future plans. It was lovely to hear **praise for the staff** and the many positive stories from families. It also highlighted a few areas that could be improved on including **continuity of care in community** services once discharged home. This will be form part of our conversation with the various trusts that attend meetings facilitated by **Joined Up Care Derbyshire**.

Moving forwards into **2022 & 2023** we are hoping to hold **further focus groups** incorporating families who have accessed care in Burton and Chesterfield. We've begun setting up a private **Facebook group for neonatal parents and staff**, that will be used a feedback forum and will allow for quick responses using polls for "hot topics" in line with the monthly LMNS meetings.

We are also aiming to promote the Neonatal Voices side of DMNV by **sharing more content from NICU families** on our social media, and hope to set up a new feature called **"A Day in the Life"** which will include stories from staff and patients in both maternity and neonatal.

Equity & Equality

An important area of **priority** for DMNV, we have kept equity and equality of care in **mind in all areas of our work**. We now include diversity and inclusion questionnaires in all our surveys to monitor whether the **feedback we receive is reflective of our population** and where we need to improve. We also have an ongoing DMNV committee member equity survey.

We have begun to establish **good community links in North Derbyshire** and look to strengthen this work in 2022. In December 2021 we presented at the **BME Forum** of North Derbyshire, introducing DMNV and highlighting the problems experienced by families affected by inequalities in maternity and neonatal care. As a result we now work closely with **LINKS CVS and the Asian Association of Chesterfield** in particular, with whom we have organised a first face to face feedback session in February, which brought together women from Chesterfield's Muslim Women's group. The event resulted in **great engagement and input** from participants and more sessions aimed specifically at different community groups will be taking place in the following months. We are also starting to **create links with community groups in South Derbyshire** and are planning an event in Derby for May 2022.

We reviewed a survey on **experiences of care for BAME women** at Chesterfield Royal and promoted it at our events and via our social media. In October we spoke at a **webinar on Black Women's Maternal Health** as part of events organised for Black History Month at Chesterfield Royal Hospital. Efforts have been made to reach out to **Derbyshire's LGBTQ+ community** and families. In November we attended an LGBTQ+ Competency in Birth and Beyond **training** to better understand the problems affecting LGBTQ+ people in their maternity journeys and **we are committed** to making sure their views and experiences are **included and represented** within DMNV.

A collaboration is underway with the **Birth Companions** charity, who support pregnant women at **HMP Foston Hall** with the aim of looking at their **experiences of care** and specific needs via a survey and feedback sessions. The longer term goals would involve **training for staff, leaflets** and including Birth Companions in an upcoming **15 Steps at UHDB.** More time and volunteer support is needed to help this project progress.

In terms of **communication**, our newly designed promotional material will be **translated into 5 languages** and we have plans in the future to look into producing a **leaflet** specifically aimed at women and people from a BAME background on their rights during the perinatal period and steps they can take to **reduce inequalities in care**. We are also conscious of having measures in place to **target specific areas** within Derbyshire to reach people with complex social factors or those living in lower socioeconomic areas and who may be more at risk of poorer outcomes. We work to ensure that our overall communication is as **inclusive and representative** of our population as possible.

Induction Of Labour

In December we were invited to join **Chesterfield Royal's Outpatient Induction of Labour Working Group** which brings together midwives, consultants, the improvement team and DMNV, and a very successful collaboration is underway. We are looking to gain an understanding of experiences around the outpatient induction service but **also experiences of care following inductions more generally** and more longer term plans in the pipeline.

The group has **co-produced a comprehensive service user survey** on experiences of inductions (touching on issues around communication, informed consent, mental health, feeding etc) which will launch in April. In March we will hold the first of a series of **focus groups to gain more feedback** from service users on this topic. The event will be held in Chesterfield at the Asian Association of Chesterfield and will provide moments of reflection and discussion among service users and subsequently also with midwives.

A lot of service users reach out to us with their experiences of induction so this project, which we hope will be extended to UHDB, will prove very useful in **guiding**, **informing and help to shape induction services in Derbyshire**.

Personalised Care & Continuity of Care

Personalisation is a topic which comes up a lot in the feedback we receive, particularly around **informed consent**. We are working on a **poster** specifically on this topic which has been shared widely and reviewed by many service users and HCPs. The poster will be distributed soon and we believe it will be a very **useful tool for both service users and clinicians**, to better understand their rights and what they can expect when making decisions about their care.

TWe worked together with the **NHS Derby and Derbyshire CCG** to provide comprehensive service user feedback on the new **Personalised Care and Support booklet** and to produce a document which felt inclusive and representative of the needs of parents from a multitude of backgrounds. We have been working with **PCP Champion midwives**, organising meetings with them and looking at including **service user feedback in the training** that they offer. We look forward to a our continued collaboration with both teams at Chesterfield and UHDB.

With regards to continuity, DMNV Co-Chairs reviewed the continuity of carer plans to meet the National trajectories and took part in a a Confirm and Challenge within the Maternity Transformation Board meeting to **ensure coproduction of the service provision** and to review the System Trajectory. We have **regular meetings with the Continuity Lead Midwives** who update us on developments of the service. The feedback we have received from service users highlights the big **positive impact that continuity of carer** has and will continue to have on their care as the service expands.

Homebirths

With the challenges of COVID and staffing pressures affecting home birth services in 2021 and entering 2022, **home births have been an important topic** for service users. We have listened to, **supported** and **signposted** numerous people who were planning a home birth but were affected by the suspensions of the home birth service (at Chesterfield in August and ongoing at UHDB). We received many requests for information and updates on the suspension and maintained **communication** with the Trusts on this issue. We have continued to **collate feedback** from service users about how the suspension of the service has impacted their experience, which will be extremely useful in our work this year.

There has been a **strong interest in homebirths generally**, in particular looking at how to improve evidence based communication around home births for service users via posters and leaflets, as well as the communication between health care providers and service users on **choice of place of birth**. Unassisted births and Birth Before Arrivals are issues that have also been raised by a number of service users and service user representatives and which we look forward to working on together as a group this year.

With all this in mind, the **DMNV Homebirth Working Group** will be launched in April 2022 which will bring together midwives, obstetricians, service users and birth workers and we look forward to seeing this work progress in 2022. We hope a **collaborative approach** to the subject across both Trusts will help to **generate practical ideas** about how to improve the service across Derbyshire and surveys aimed at both service users & providers will help to gain a full understanding about **challenges and improvements**. Improved communication and information on this theme will also prove central.

Bereavement & Maternal Mental Health

Since we first set up, many bereaved parents reached out to say they wanted to get involved in our work and we have been **working closely with bereavement midwives at both Trusts** right from the start. Together with the midwives and **Chesterfield SANDS** we launched a short **survey** on experiences of care following a loss, and received a good level of responses, particularly from people who had experienced miscarriages. Themes emerged from the survey, namely communication during or following a loss, adequate spaces for parents when receiving news, care for bereaved families in subsequent pregnancies and miscarriage **support and information**.

We held a **first focus group** which brought together health care providers from both Trusts, SANDS and bereaved families and a great discussion was had. A second focus group is due to take part in the coming months and more exciting developments will take place following the recent appointment of two **joint DMNV Bereavement and Mental Health Volunteer Leads**.

We have been kept apprised of the developments in the new **Maternal Mental Health service** and are very much looking forward to further contributing with service user input to its development. It is a service which will be strongly welcomed by many families.

Infant Feeding

A topic which always generates very good levels of **engagement and feedback** on our social media. We have been building great working relations with infant feeding leads at both Trusts and also with BfN Derbyshire and peer support groups. We take part in the regular County-level meetings with the **Infant Feeding Steering Group**, where we bring attention to the latest feedback from service users and also update on our ongoing projects. These meetings are particularly helpful as we strive for **effective joint working** and strengthening collaborations with partners and stakeholders from around Derbyshire.

Over this past year we have been **providing feedback to infant feeding leads** on topics such as feeding guidelines, tongue tie and on the County infant feeding strategy document. In October we gathered substantial feedback on infant feeding experiences via **social media**, which highlighted the crucial role of infant feeding support workers and local peer support teams, the effects of COVID restrictions and the **complexities affecting families** in the diagnosis and treatment of tongue tie. Infant feeding is also kept present in other DMNV work, such as in our IOL survey or when gathering feedback at events.

We are working with Chesterfield Royal to produce **infant feeding videos** for their new website and hope to also launch regular **Facebook Live Q&A sessions** with the infant feeding leads in the very near future.

Communication & Engagement & Outreach

Communication between service users and health care providers is an issue which comes up a lot in feedback in a variety of contexts, from information on COVID restrictions, maternity care infographics or suspension of services. We have ongoing constructive and regular conversations with the Trusts and also recognise there are improvements we can make in this area.

We are regularly invited to **provide our input** on information leaflets, we are part of the team reviewing Chesterfield's **maternity website** and anticipate lots of positive changes. In 2021 we also provided service user comments on **UHDB's handheld notes booklet** and were given a virtual 'tour' of Chesterfield's **online pregnancy notes** system, providing comments for improvement.

One of our goals this year has been to work on our **promotional material** and we have worked closely with graphic designers to produce a bundle of **fresh and engaging content**, including a new logo. These are due to be printed and distributed Derbyshire-wide in the next month (see Appendix B).

In the past few months we have been producing a **newsletter/update** following our informal monthly meetings to keep current members, partners and potential new volunteers up to date on our projects and where we need support. We are also in the process of setting up **two specific closed feedback groups on Facebook,** one aimed at **neonatal parents** and the other at perinatal **practitioners** or anyone involved in supporting parents in the perinatal period.

In the past few months we have **expanded our team** to include **neonatal**, **engagement**, **bereavement & mental health volunteer leads** which will have a huge impact in terms of our capacity to expand our reach, increase the feedback we receive and engage with the local community and health care providers. A **key priority** for us going into 2022 is the **recruitment of new volunteers** and engagement with the wider community.

We hope that our new promotional material placed in **strategic areas** around the county will drive more people towards DMNV. We also intend to put together a **welcome pack** for prospective volunteers to get a better understanding of what we do and organise **online 'induction' events** every few months to explain what we do and a chance to meet the team and ask questions.

Spending Plan

The total DMNV budget provided by DDCCG 2021/22 was £11,946

This included £7200 for remuneration of the Co-Chairs and £4746 allocated budget.

Spending for 2021/22 included £1513.22 on rebranding and publicity materials; £440.29 on engagement activities and £1080 on training.

The underspend on 8/3/22 is £1207.40 when the pending invoices have been included. It is anticipated that this will be significantly reduced by March 31st, 2022 with the expenditure for merchandise and printing of neonatal tags and informed choice posters deducted.

A proposal for changes to the allocation 2022/23 are included in Appendix C A detailed spending plan is included in Appendix D

Challenges

Many of the challenges we have faced relate to issues from setting up and finding our feet as a new group. **COVID restrictions** significantly affected our ability to organise **face to face meetings** for part of the year. It also took a significant amount of time to set up our bank account, due to internal governance checks but also following our Treasurer stepping down in September. The bank account was set up in January 2022 and we hope to able to have **direct access to funds** within March 2022.

As a group, our understanding of the **time commitment** in making the DMNV work is much more than originally anticipated and this has obviously increased as our projects and involvement with the Trusts and local community continue to grow. The **Co-Chair role**, for instance, is averaging (for one Trust) **50-60+ hours monthly**, with the need to devote further time in order to adequately support the work of DMNV.

We have struggled to **recruit a new social media volunteer** after our original volunteer stepped down. Social media without a doubt plays a **key role** in reaching and engaging people and raising the profile of DMNV. The role also requires some level of **communication skills and a time commitment** which we feel would benefit from being remunerated. Generally, DMNV would benefit enormously from more **joint working with the communications teams at both Trusts**, helping to raise the profile of our joint work and gaining more local support.

In reviewing the composition of our committee, we would really benefit from **increased representation** and participation from **neonatal staff**, **obstetricians and GPs**. As our positive examples of co-production **continue to grow**, highlighting that we are indeed a cohesive team of service users and health care providers, we hope that even more staff will respond to our call and view us as **increasingly reputable partners** they wish to work alongside.

DMNV in 2022 & 2023 Themes & Goals



stakeholders in Derbyshire

Carrying out 15 Steps & Walk The Patch at both Trusts; working together on feedback on postnatal care on the wards

A Word From Our Partners

"DMNV are a key partner on the Derby City and Derbyshire County Infant Feeding Steering Group, regularly attending since September 2021. DMNV bring learning from feedback from parents/ carers to the Group, and will be supporting the Group to embed co-production in the development of an Infant Feeding Strategy in 2022. "



Carol Ford, Public Health Lead, Derbyshire County Council



BME Forum & Derbyshire Maternity & Neonatal Voice partnership

Following on from an enquiry via Anne Marie at Derbyshire Maternity and Neonatal Voices (DMNV) and a subsequent meeting with Co-Chair, CRH and the BME group Leaders in Derbyshire, we have started a very worthwhile new working partnership together. The DMNV is very keen on working on BME maternity issues, something that is really important to the BME members. The first session was on 4th February, with the Chesterfield Muslim Women's group (CMWG) & Asian Association of Chesterfield (AA), at the Asian Centre. This session focused on maternity issues that affected CMWG & AA members and their experiences during and after childbirth. The Forum is looking forward to the next session in April 2022 with the Chesterfield Filipino group & North Derbyshire Refugee Support group.

Sushri Wells, BME Engagement Coordinator, Links CVS, Chesterfield

"In 2021 we had the opportunity to connect with the DMNV, to look at bereavement care and baby loss experiences within our local hospitals. We began by using Baby Loss Awareness Week to work together to raise awareness of baby loss in our local community, sharing experiences and encouraging the conversations around miscarriage, stillbirth, TFMR and any baby loss experience.

We have worked together to encourage all those isolated in their grief to find their voice. We understand how powerful the patient voice is, and thanks to the DMNV we have already worked on a survey to collect information on care experiences during and after the loss of a baby and held the first focus group, bringing health care providers and local bereaved parents together with myself, as a Chesterfield Sands representative and bereaved parent. It was such a positive meeting with the opportunity for discussions around baby loss, bereavement care and pregnancy care after loss.

We are looking forward to collaborating further with the DMNV this year to improve care and we are so very grateful to them for giving bereaved parents/families the opportunity to be heard." Nicky Whelan – Chesterfield Sands Chair





"Derby Community Parent Programme trains volunteers to provide perinatal peer support for expectant and new parents who receive maternity care from Royal Hospital in Derby. We have been excited to see the development of the Derbyshire Maternity & Neonatal Voices and the hard work that has gone into getting the group off to such a flying start. Any opportunity for parents to share input, ideas and feedback is welcomed by DCPP and we look forward to working closely with DMNV to ensure that expectant and new parents are well supported. Shelley McBride, Community Development Director

Appendix A DMNV Full Membership List

Over 2021/2022 we have had contributions from many different people, from service users, service user representatives to Midwives, Heads of Midwifery and the Derby & Derbyshire CCG team. Our sincerest thanks go to all those who, in various capacities, have helped us in this crucial first year, continue to support our work and help to raise the profile of DMNV day to day.

Moving into 2022/23 our membership is being formalised into the following members:

Anne Marie Matarrese Co-Chair Faye Freeman Neonatal Volunteer Lead Michelle McFarlane Engagement Volunteer Lead Kate Hart Bereavement & Mental Health Volunteer Lead Sammy Fretwell Bereavement & Mental Health Volunteer Lead Maria Howe Equity & Equality Volunteer Lead Shilpa Joy - Service User Hannah Ketcher Service User Maria Martin Service User Amy Boning Service User & Birth worker Nicola Carter Service User Representative

Claire Johnson Maternity Transformation Project Midwife/DMNV - CCG Link

Patricia Paine Director of Midwifery (UHDB) Lorraine Purcell Head of Midwifery (UHDB) Jane Haslam Maternity CNST/Saving Babies Lives Lead Midwife (UHDB) Karen McKilwrath - Community Midwifery And S. J. Birth Centre Matron (UHDB) Angela Thompson Lead Specialist Midwife in Bereavement Support (UHDB) Claire Brackenbury Lead Midwife - Continuity of Carer (UHDB) Jennifer Corfield Midwife, PCSP & Smoking Cessation Advocate (UHDB) Katy Thompson, Specialist Midwife - Infant Feeding (UHDB)

Amanda Mansfield Head of Midwifery (CRH) Julie Mycock Deputy Head of Midwifery (CRH) Pauline Twigg Midwife/Workplace Representative/Vice Chair Staff Side (CRH) Rachel Wright Safety/Transformation Lead Midwife (CRH) Siobhan Almond Infant Feeding & Wellbeing Lead Midwife (CRH) Nicola Imrie Neonatal Nurse (CRH) Lee Alexander Improvement Programme Lead (CRH)

Appendix B Promotional Material

With thanks to Stephen Kay and the Hyphen Creative team for all their work!



Appendix C

Recommendations from

Joined Up Care Derbyshire

BACKGROUND

"DMNV were formed in April 2021 following the resignation of the previous chair leading to the Derbyshire Maternity Voice Partnership disbanding. The new group was developed with a system approach and full collaboration with the LMNS. Governance has been provided by Derby and Derbyshire CCG with the CoChairs employed through a contract for services. A budget was determined to cover promotion, engagement, training and support, along with the payment for the Chairs.

The key committee roles were recruited initially to include a Co-Chair and Social Media lead for CRH and the same for UHDB. There was also a Treasurer. The aim was to make the committee more collaborative and share the roles to increase involvement of others and make it easier for providers to liaise with the partnership. Social media management was seen as a key activity as communication is an area where problems arose with the previous committee. Volunteer service users were invited to join the group along with interested maternity and neonatal staff and members of groups associated with maternity care. During the year the Social Media Lead roles and the Treasurer role became vacant. This led to the CoChairs taking on more responsibility for the tasks associated with these roles however, they continued to fulfil all other aspects of their role leading to an increase in hours worked. The partnership was set up with the intention of also representing neonatal parents and recently a Neonatal Voices Lead has been appointed within the partnership and will liaise and support developments within CRH and UHDB to ensure that parents with babies in Neonatal Units are represented and services for neonates are coproduced with service users.

The partnership is going from strength to strength in its involvement in coproduction of services and communication between service users and providers. The current volunteers have worked exceptionally hard to establish their position within the LMNS and develop effective links with all involved. Their work over the next year will expand on the strong foundations they have laid this year.

PROPOSAL

The role of DMNV within the LMNS is continuing to expand to reflect the requirement for coproduction within service provision. Nationally, recognition is given for their involvement in service development and the expectation is for the partnership to represent the local community with a particular focus on increasing the voice of the underserved communities including BAME. The diagram below shows the areas currently requiring DMNV involvement and this must be considered when devising an annual plan for 2022/23 and the allocated budget to support their commitment.

Appendix C

The Role of DMNV in the LMNS



The budget allocation will need to reflect the increased time commitment by the Co-Chairs to achieve the coproduction, consultation and outcomes reflected within the national guidelines and recommendations. The final Ockenden report is likely to support and promote the involvement of the MVP and it remains a critical aspect of CNST/MIS Year 4. Remuneration through a Contract for Services has been successful in 2021/22 and should continue into the next financial year however, as demonstrated the time commitment has proved to be more than expected for the PPI Level 4 involvement and should be increased to 45 hours per month to reflect this. Consideration needs to be given to the fact that during the last year meetings have been virtual, but it is anticipated to resume. There will be an increased cost associated with this for room hire and service user expenses. The committee structure will also be evaluated to ensure that the partnership is effective and develops into a collaborative, sustainable element of maternity services.

NEXT STEPS

The proposed changes to the Contract for Services and associated increase in budget required will be taken to the Maternity Transformation Programme Board for agreement. The partnership requires the continued support of the LMNS and once the transition into an Integrated Care System is completed at the end of June, 2022, they will take on this role replacing Derby and Derbyshire CCG as the governing body. DMNV will be encouraged to continue their excellent work in service user involvement and coproduction with providers, into 2022/2023.

The challenge will be to involve service users from a range of backgrounds and experiences to truly reflect the communities in Derby and Derbyshire to ensure that service provision meets the needs of the majority, rather than a minority. The voice of everyone is important in developing the Maternity and Neonatal services responsively while improving safety and accessibility."

Claire Johnson

Maternity Transformation Project Midwife

Appendix D Treasurers Report

| ACTIVITY | DETAIL | ORIGINAL BUDGET | PURCHASE | COST | PENDING |
|---------------------------|---|-----------------|---|-------------------------|---|
| OUT OF POCKET EXPENSES | Paid to service users | £1,000 | | | March Service user payments x20 |
| FACEBOOK PUSH POSTS | £5 per day for one week per month for 4 months (£140 x 2) | £280 | Facebook push post | 14 | Survey platform Canva |
| | 1000 pens @ 0.16 250 tote bags @1.25 250 trolley keyrings @ 0.59 | £516 | | | - 100 |
| PUBLICITY MATERIALS | | | Materials redesign | 6.4.91 | Printing |
| TRAINING | | £500 | NMV training LGBQT+ | 1060 20 | |
| PSYCHOLOGICAL SUPPORT | To support DMNV members following supporting service users with traumatic stories £100 per hour x6 | £600 | | | |
| MOBILE PHONE X2 | For social media leads | | 1 phone | 175 | |
| ENGAGEMENT EVENTS | To be decided | £1,000 | January venue hire March meeting materials | | March IOL event venue/ childcare/materials Translation costs for posters |
| FLOAT/PETTY CASH | | £500 | September event refreshments and materials January event materials Microphone | 39.44 20.85 33.99 | |
| | 9 | £4,746 | | 2043.28 | |

email our team ddccg.derbyshirematernityvoices@nhs.net



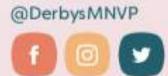
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visit our website www.derbyshireinvolvement.co.uk/dmnv



feedback. share your

We love story with us!



Together we can all make a difference in maternity & neonatal services

Neonato

Who We Are

We're an independent NHS committee made up of volunteers, parents and health care professionals.

What We Do

We gather feedback on your experiences of pregnancy, birth and postnatal care to help improve local maternity and neonatal services. We listen to and value ALL members of our communities, their partners, families & supporters to achieve the best level of care for everyone.

Adaptar in mitterence and become Molunteer

Share Your Story

working with you to improve maternity & neonatal services