

Frimley Local Maternity and Neonatal System Perinatal Equity and Equality

5

Year Plan



Frimley Health and Care





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'By giving every child the best start in life, we will help them fulfil their health, wellbeing and socioeconomic potential.'

Fair Society Healthy Lives (The Marmot Review), Professor Marmot, 2010.

FOREWORD

The Frimley Health and Care area covers a population of over 800,000 people. We work across five places, including Slough, Windsor and Maidenhead, Bracknell Forest, Surrey Heath, and North East Hampshire and Farnham¹.

We cover a relatively affluent area. Life expectancy is generally higher than the national average, with the exception of several pockets of deprivation.

Outside London, Slough is the most ethnically diverse local authorities in England, with White people making up 45.7% of the population². With this diversity, there needs to be equity. It is essential that we respond to each person's unique health and social situation, so that care is safe and personal for all.

We know from the women and families we see, there are health, social and economic inequities and inequalities for women of Black, Asian and Ethnic Minority backgrounds and those from the most deprived areas when accessing and experiencing maternity services.

For example, we know:

- There is a lower uptake of folic acid from Black, Asian and Ethnic Minority communities
- Black / Black British and Asian / Asian British mothers had higher rates of an emergency caesarean section
- Asian / British Asian mothers sustained 3rd or 4th degree perineal trauma

We know this is not right. As a Local Maternity and Neonatal System (LMNS), we are working in partnership with local women and their families, health partners and community groups to determine how maternity and neonatal services need to respond to each person's situation, remaining respectful of their diversity.

Our recent equity and equality assessment provided data for health outcomes, community assets (local services, groups, networks and resources that can help improve community life), and staff experience. The work was underpinned by the four pledges³ the NHS has made to improve equity for mothers and babies and race equality for NHS staff in England. All the discoveries and outcomes from the assessment have informed this co-produced Equity and Equality action plan, ensuring it is aligned with the health inequalities work of the Frimley Integrated Care System (ICS).

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1 - www.frimleyhealthandcare.org.uk/about/frimley-health-and-care-communities-map

2 - ethnicity-facts-figures.service.gov.uk/uk-population-by-ethnicity/national-and-regional-populations/regional-ethnic-diversity/latest

3 - [NHS pledges to improve equity for mothers and babies and race equality for staff](https://www.england.nhs.uk/our-work/nhs-pledges-to-improve-equity-for-mothers-and-babies-and-race-equality-for-staff/) (england.nhs.uk), September 2021

BACKGROUND

Health equity means ensuring that everyone has the chance to be as healthy as possible. However, factors outside of a person's control, such as economic, environmental and social inequalities can determine people's risk of getting ill, their ability to prevent sickness, or their access to effective treatments⁴.

All of these factors are what we refer to collectively as the social determinants of health.

The Dahlgren and Whitehead's rainbow model⁵ (below) is a widely cited model that maps the main determinants of health and the relationship between the individual, their environment and disease.



The first layer is personal behaviour and ways of living that can promote or damage health (e.g. the choice to smoke or not). Individuals are affected by friendship patterns and the norms of their community.

The next layer is social and community influences, which provide mutual support for members of the community in unfavourable conditions, but they can also fail to provide support or have a negative effect. The third layer includes structural factors: housing, working conditions, access to services and provision of essential facilities.

The fourth layer captures the broader political, cultural and environmental conditions in which all these other factors occur. Importantly, many of the determinants of health lie outside of the control of the health care system – so the health sector has to work with partners to influence better outcomes.

4 - World Health Organization (2020) Equity.

5 - [The Dahlgren-Whitehead rainbow \(1991\) - Health inequalities - Patient Safety Learning - the hub \(pslhub.org\)](#)



National picture

Maternity and early years services in the UK care for an increasingly diverse population.

In 2019, more than 1 in 3 of all live births in England and Wales were to mothers born outside the UK and 21% of all babies born in 2019/20 belonged to a Black, Asian or Ethnic Minority group.

In most cases pregnancy and birth are a positive and safe experience for women and their families. However, the MBRRACE-UK report⁶ on maternal and perinatal mortality show a national picture of worse outcomes for Black, Asian and Ethnic Minority groups and for those living in the most deprived areas.

Research by the Office for National Statistics⁷ suggests Black, Asian and Ethnic Minority women have poorer pregnancy outcomes than white women and poorer experience of maternity care. They tended to access antenatal care later in pregnancy, have fewer antenatal checks and ultrasound scans, less screening and were less likely to receive pain relief in labour. Black African women in particular were more likely to deliver by emergency Caesarean section.

In March 2022, Donna Ockenden, reported on her wider investigation into maternity care that 1,862 families at Shrewsbury and Telford Hospital NHS Trust⁸ received over the past 20 years. The report found that babies that should have been born healthy suffered permanent harm or died and identified 60 actions for the Trust to take, and seven immediate and essential actions to improve safety in maternity services across England. One of these actions focuses on listening to women and their families when they have concerns about their care and gathering feedback to ensure the voice of service users and staff are heard.

Covid-19

A recent report by the Office for Health Improvement and Disparities (formerly Public Health England) for Frimley Health and Care Local Maternity and Neonatal System (LMNS) highlighted how the Covid-19 pandemic, and the resulting modifications to health services, had impacted pregnant women across England, increasing the number of negative maternal and perinatal outcomes.

Data shows that mild or moderate Covid-19 infection early on in pregnancy resulted in increased risk of preterm delivery and stillbirth, emphasising the importance of prioritising pregnant people for Covid-19 vaccination⁹.

The pandemic has also elucidated social and racial disparities in these outcomes. A report by MBRRACE-UK¹⁰ found that six of the ten women reviewed who died during or after pregnancy from Covid-19 or its complications were from Black, Asian and Ethnic Minority groups.



6 - [Saving Lives, Improving Mothers' Care: Lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2015–17.](#)

7 - [Pregnancy and ethnic factors influencing births and infant mortality - Office for National Statistics \(ons.gov.uk\).](#)

8 - Final report of the Ockenden review - GOV.UK (www.gov.uk) March 2022.

9 - [Pregnant women now a priority group for Covid-19 vaccination – NPEU, University of Oxford, December 2022.](#)

10 - [Saving Lives, Improving Mothers' Care Rapid report 2021: Learning from SARS-CoV-2-related and associated maternal deaths in the UK June 2020-March 2021.](#)



Cost of living

There are concerns among medical professionals that the cost of living crisis may have a damaging impact on our wellbeing. For the poorest families particularly, times are hard, and look set to get harder as inflation continues to rise and energy prices increase.

In contrast, wages are rising by a maximum of just 5.2% this year (according to the Office for Budget Responsibility), with benefits increasing by just 3.1%. The current basic rate statutory maternity and parental pay from April 2022 is only £156.66 per week. It equates to just 47% of the National Living Wage (for a 35-hour week at the adult rate of £9.50 per hour).

NHS strategy

In June 2020, NHS England wrote to each Local Maternity System (LMS) requesting that four specific actions were undertaken to minimise the additional risk of Covid-19 for Black, Asian and Ethnic Minority women and their babies. Nationally, the NHS is committed to addressing this inequity in outcomes. Two recently published documents set out firstly, four pledges¹¹ for achieving these aims, and secondly, guidance for LMSs on how to align their Equity and Equality action plans¹² with the health inequalities which exist in their areas.

Our action

'Starting Well' is Frimley Health and Care Integrated Care System's (ICS) strategic ambition, created in 2019, to give children the best possible start in life.

Frimley LMNS is continuing to implement the immediate and essential actions from the Ockenden Review. These include :

- Enhancing safety to review incidents, share learning and receive feedback on a regular basis from across our systems, our partners and our Maternity Voice Partnership.
- Listening to a diverse range of women and families to help shape our new and existing services.
- Continuing with our mandatory multidisciplinary training for clinical staff and regular training on fetal monitoring and clinical skills.
- Managing complex pregnancy so that those women have a named consultant lead and working across the system to improve service pathways and support.
- Updating our risk assessment throughout pregnancy to include a risk assessment for "place of birth".
- Ensuring women have informed consent through accurate information, a dedicated maternity website and a new Personalised Maternity Care Plan app.

In November 2021 Frimley LMNS undertook a maternity equity and equality audit to understand the baseline position of where there are inequalities within the maternity services locally, or in outcomes. A high-level summary of those findings can be found in section 3 'Understanding our population'.

A local action plan has been drawn up based on this analysis, setting out key interventions and milestones to sustainably reduce inequity over the next five years. There are a range of initiatives already underway but much more to do to give all women and families the same experience and outcomes.

11 - NHS (2020) NHS pledges to improve equity for mothers and babies and race equality for staff. www.england.nhs.uk/wp-content/uploads/2021/09/C0734-ii-pledges-to-improve-equity-for-mothers-and-babies-race-equality-for-all-staff.pdf

12 - NHS (2021) Equity and Equality Guidance for local maternity systems www.england.nhs.uk/wp-content/uploads/2021/09/C0734-equity-and-equality-guidance-for-local-maternity-systems.pdf

13 - [Frimley Health Maternity: Actioning Ockenden](#).



WHAT WE DO

Our geography

Frimley Health and Care ICS is a partnership of health, care and voluntary sector organisations and communities. Around 850,000 people are registered with a GP in the Frimley system ('our population'). Frimley is comprised of five Places, each with its own unique characteristics:

- Bracknell Forest
- Windsor, Maidenhead and Ascot
- Slough
- Surrey Heath
- North East Hampshire & Farnham



Our services

Frimley Health NHS Foundation Trust (FHFT) offer maternity and neonatal services, supporting approximately 9,500 women and birthing people a year from across Hampshire, Surrey, East Berkshire and South Buckinghamshire. Maternity care is provided at Frimley Park Hospital (FPH) or Wexham Park Hospital (WPH), and additional settings in the community. Both hospital sites offer a wide variety of services including co-located midwifery-led Hubs, for women with uncomplicated pregnancies, to specialist services for women with more complex needs who require a multi professional approach.

The Trust is committed to providing a supportive and safe service, provided by staff dedicated to excellence and working together. Frimley's LMNS reports into Frimley Integrated Care Board (ICB).

Our users

We actively listen to our women and families to develop our services and design support.

Maternity Voices Partnership (MVP) is a voice for women who use local maternity services. which involves groups of women meeting and shaping the changes that we are making. Frimley MVP engage with women and their families from across the Frimley Trust area. This is shared anonymously with the staff and with Frimley LMNS, to see where improvements and changes can be made, where things are working well and in co-producing transformational change.

Our commitment

We are committed to achieving equity in maternity and perinatal outcomes. In addition, one of the strategic priorities, Starting Well, is focused on ensuring that everyone has a fair and equitable chance to experience the best health, working in partnership with local people, communities, and staff.

The vision is for maternity and neonatal care to become even safer, kinder, more personalised and family friendly. It aims for every woman to be able to make informed decisions about her care and overall health, from preconception through to postnatal care and the care of the baby. This will be achieved by having access to individualised information and support throughout her maternity care journey. To realise this, we need well-led organisations in which staff feel supported; enabled and motivated to provide woman-centred care in collaborative teams, promoting a culture of innovation, continuous shared learning, and improvement.

UNDERSTANDING OUR POPULATION

Our population at a glance:

Birth rate, ethnicity and deprivation

- **91%** White
- **1.9%** Mixed / Multiple ethnic group
- **5.1%** Asian / Asian British
- **1.4%** Black / African / Caribbean



2019/20 deliveries

In 2019/20, **28.3%** of deliveries in Frimley were to mothers from Black, Asian and Ethnic Minority groups. This is compared to a national average of **20.6%**



Slough

- **21.3%** of the female population is aged 15-54
- **31.1%** of all pregnancies were in Slough
- **72.3%** births were to non-UK parents



Lowest income deciles

All wards in the lowest three income deciles are in: **Slough and Rushmoor**



Long-term conditions

55.8% of Frimley's pregnant women have one of more long-term health condition compared to a national average of **33%**. Of these women, **31.3%** had a BMI greater than 30, compared to the Frimley population average of **17.5%**



Smoking

5.6% of Frimley's pregnant women were smoking at the time of delivery

This is compared to a national average of **9.6%**



First booking appointment after 16 weeks

White

9.8% Wexham Park Hospital
6.9% Frimley Park Hospital

Black / African / Caribbean

18.5% Wexham Park Hospital
22.4% Frimley Park Hospital



Folic acid before pregnancy

- 17% in Slough
- 36.9% in Bracknell Forest
- 31.1% in Frimley Health
- 27.3% National average





In November 2021 Frimley LMNS undertook a maternity and perinatal analysis to understand the current baseline position with regards to equity for mothers and their babies and families, and for staff working in maternity and neonatal services.

This analysis has been used to develop our equity plan setting out key interventions and milestones and to build a five-year action plan to sustainably reduce inequity.

We will continue to work with our communities and gather data to understand our population in order to target resources effectively.

Key findings

Our maternity population

This work primarily focuses on ethnicity and deprivation, but there are a range of other factors which influence outcomes, and it is intended to focus on these going forward.

Frimley has a diverse population both in ethnicity and levels of deprivation. Our analysis has considered multiple data sources and concludes the following:

Birth rate, ethnicity and deprivation

Statistics from the 2011 Census show:

- 91% of the Frimley population were White
- 1.9% from a Mixed / Multiple ethnic group
- 5.1% were Asian or Asian British
- 1.4% were Black / African / Caribbean / Black British

In 2019/20, 28.3% of deliveries in Frimley were to mothers from Black, Asian and Ethnic Minority groups, compared to a national average of 20.6%.

In 2020-22, 31.1% of Frimley pregnancies were in Slough and 72.3% of births in Slough were to non-UK parents. This compares to 35.2% across England, 39.4% in Windsor and Maidenhead, 34% in Surrey, 30.4% in Bracknell Forest and 21.8% in Hampshire.

As an ICS area, Frimley is on average relatively less deprived than the England average as 35% of the population are in England's least deprived decile¹⁴.

14 - Deprivation deciles are based on the Index of Multiple Deprivation 2019 (IMD 2019), which is the official measure of relative deprivation. Decile 1 represents the most deprived 10% (or decile) of small areas in England and Decile 10 represents the least deprived 10% (or decile) of small areas in England.



The majority of the population are in higher income deciles, however there are some wards with significant rates of deprivation in Slough and Rushmoor:

Five wards are in the second lowest income decile in England:

- Britwell & Northborough in Slough
- Chalvey in Slough
- Cherrywood in Rushmoor
- Elliman in Slough
- Foxborough in Slough

Seven wards are in the third lowest income decile in England:

- Aldershot Park in Rushmoor
- Baylis and Stoke in Slough
- Central in Slough
- Colnbrook with Poyle in Slough
- Farnham in Slough
- Langley Kederminster in Slough
- Wexham Lea in Slough



Risk factors for a healthy pregnancy

Long-term conditions, high BMI and smoking

Of the 9,199 women recorded as pregnant on GP systems in 2020 to 2021, 55.8% of these had one or more long-term conditions (compared to an expected rate for the population of 33%).

Similarly, 31.3% of those women had a Body Mass Index (BMI) of greater than 30, compared to a population-wide rate of 17.5%.

Trust data for 2020/21 shows high BMI rates of greater than 35, are particularly prevalent amongst Black / Black British mothers¹⁵.

Trust data also shows 2020/21 smoking rates at the time of delivery were 5.96% across the two hospital sites. This contrasts with a national position of almost double this rate, with smoking of 9.6% for England.

15 - 18.4% at Frimley Park and 15.3% at Wexham Park; compared to White mothers 9.6% at Frimley Park and 9.4% at Wexham Park.



Accessing care

Prenatal care can help keep both mother and baby healthy. Babies of mothers who do not get prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care.

Across Frimley, Trust data shows different rates of accessing care. This can be seen in timing of midwifery appointments and take-up on Covid-19 vaccinations.

In 2018/19, 62.3% of pregnant women in Frimley had their booking with a midwife within 10 weeks of their pregnancy. This is higher than the England average for that period of 57.8%. However, in Slough this rate was only 54.2%.

Late appointments

Trust data shows, in the period April 2020 to March 2021 that ethnicity also impacts late appointments.

Covid-19 vaccine uptake

This lower rate of pregnant women accessing care in Slough is also reflected in Covid-19 vaccination uptake.

In October 2021, across Frimley, 48% of pregnant women within the last year had received the first dose of a Covid-19 vaccine, and 14% had received a second dose. However, the lowest rates of take-up were in Slough, where first dose rates were between 36% and 42%, compared to rates over 50% in Farnborough, Windsor, Surrey Heath, Farnham, Fleet, Maidenhead and Wokingham.

Folic acid

In 2018/19, 31.1% of pregnant women in the Frimley were taking folic acid supplements before pregnancy, this higher to the rate for England at 27.3%. However, in the same year, folic acid supplement use in early pregnancy varied from 17% in Slough to 36.9% in Bracknell Forest.

Pregnancy complications

Maternity outcomes

Trust data from Frimley Park Hospital and Wexham Park Hospital for April 2020 to March 2021, has been provided for the maternity outcomes highlighted below. This data provides initial indications that will be investigated further and benchmarked on a regional and national level.

Stillbirth

Rates of stillbirth are low. Given these low rates any publication of data broken down by ethnicity risks breaching confidentiality. However, internal analysis does suggest there is some evidence that perinatal mortality rates may be impacted by ethnicity.

Pre-term births

The other maternity outcome where ethnicity was seen to have an impact was in pre-term births, especially in Wexham Park.

Across the two sites, White mothers had a 7.3% chance of a pre-term birth, compared to 9.9% for Asian / British Asian mothers, and 10.3% for Black / Black British mothers.

At Wexham Park (serving the Slough population), this was 8.3% for White mothers, compared to 11.0% for Asian / British Asian mothers, and 12.7% for Black / Black British mothers.

Birth type and complications

Emergency caesarean section and 3rd and 4th degree perineal trauma rates differed significantly by ethnicity:

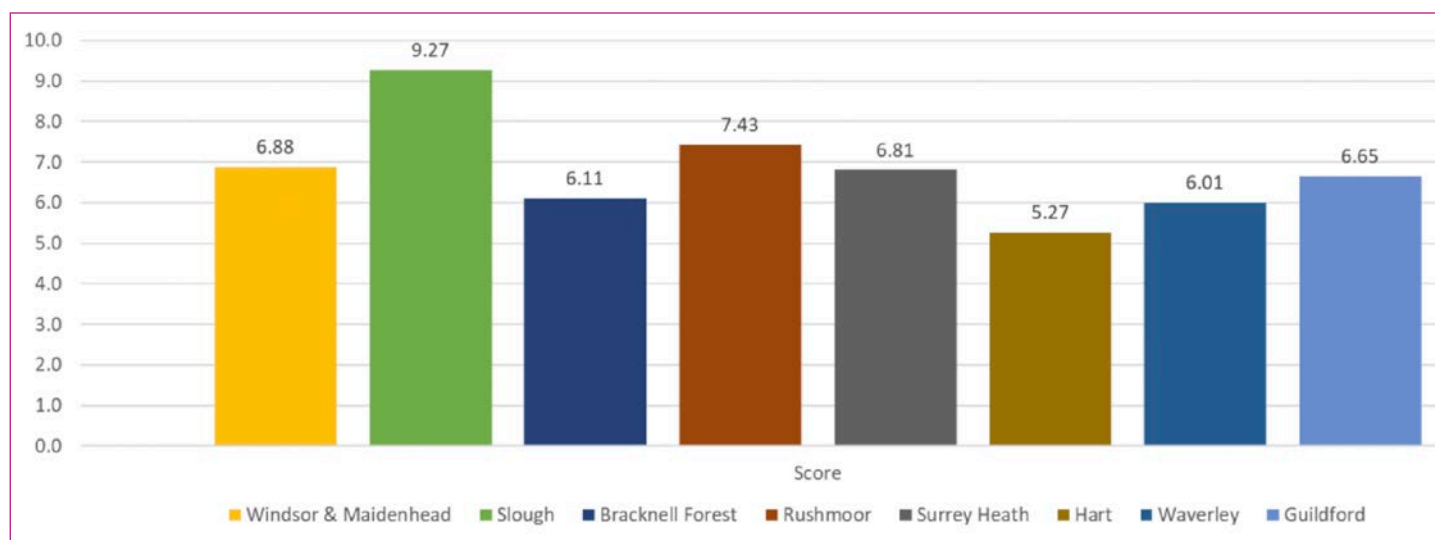
- 27.7% of Black / Black British mothers and 22.7% of Asian / British Asian mothers had an emergency caesarean section, compared to 15.5% of White mothers.
- 2.8% of Asian / British Asian mothers sustained 3rd or 4th degree perineal trauma compared to 1.4% of White mothers and 1.2% of Black / Black British mothers.

Digital exclusion

In March 2021, a communication programme to raise awareness and understanding of challenges and barriers in accessing maternity services across the ICS was delivered through engagement specifically with Black and Asian women. This was in the context of an immediate need to support Black and Asian women in the Covid-19 pandemic.

It found that there were challenges for some women in accessing information as they are not engaging/using social media platforms and not accessing information on the relevant Facebook Maternity pages for Wexham and Frimley. Some women didn't know there was a dedicated maternity website.

Through research and in-depth interviews with Black and Asian women, four communications and engagement campaigns were developed and executed with the support of community networks. These are detailed in section five 'What we have done'.



Average digital inaccessibility score by local authority population














Our community assets

To support women and new parents from across Frimley, an asset mapping exercise has been conducted¹⁶ to identify those assets available in the community that have an impact on the maternity, perinatal, and early start outcomes for the mother and child.

This exercise provided a snapshot in time. These assets include not only the range of support offered at NHS-led Maternity Hubs, but also by local voluntary and community organisations, such as clinics, classes and parents and toddler drop-in groups. They also provide women and their families access to a range of information and advice.

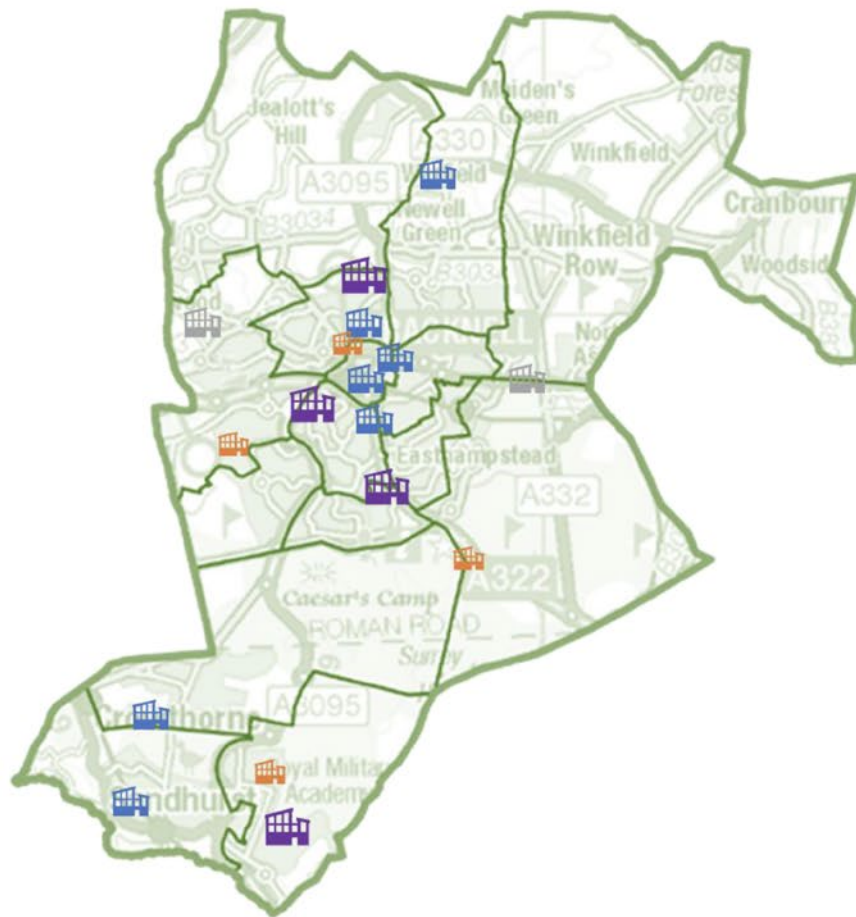
Collating information on, and signposting to, community assets in such a complex system is a challenge and further work is needed to understand what, and where, community assets need to be targeted to those that need them most.

Key

Location of asset		Children's Centres
		Community Centres
		Church-based Centres
Target service user		Pregnant women
		New mothers
		New fathers
		Families
Type of asset / service		In-person groups
		In-person classes / programmes
		In-person clinics
		Virtual groups or classes
Fees and referral type	Whether or not the service requires a referral (and if that is a self-referral or specialist referral)	
	Whether or not there is a fee	

16 - The illustrations in this section of our community assets are based on local authority geographies.

Bracknell Forest community asset map



Children's Centres and Children's Services

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Parents and Toddlers Group		N/A (Free)
	In-person Class	PEEP: Developmental class for parents for <1y		N/A (Free)
	In-person Class	Understanding your baby class for <4m		N/A (Free)
	In-person Drop-in clinics	On-hold with Covid		N/A (Free)
	In-person Group	Mums in Mind: mental health support group		N/A (Free)



Community Centres



Church Groups

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Parent and toddler groups / Dad groups (some covid closures)		N/A (£1 to £5)
	In-person Group	Bracknell twins group		N/A (Free)
	In-person Class	New parent's class		£42
	In-person Class	Home Start Antenatal class		Yes – self (Free)
	In-person At home	Home Start Home visiting	at home	Yes – self (Free)
	In-person Class	Home Start Being a Dad class		Yes – self (Free)

North East Hampshire, Hart and Rushmoor community asset map



Children's Centres and Children's Services

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Class	Antenatal class		N/A (Free)
	In-person Class	Postnatal class		N/A (Free)
	In-person Drop-in clinics	Health visitor clinics Breastfeeding support		N/A (Free)
	In-person Group	Dad's Group		N/A (Free)
	In-person Class	PEEP classes for parents of young children		N/A (Free)
	In-person Group	Baby and toddler groups		N/A (Free)



Community Centres

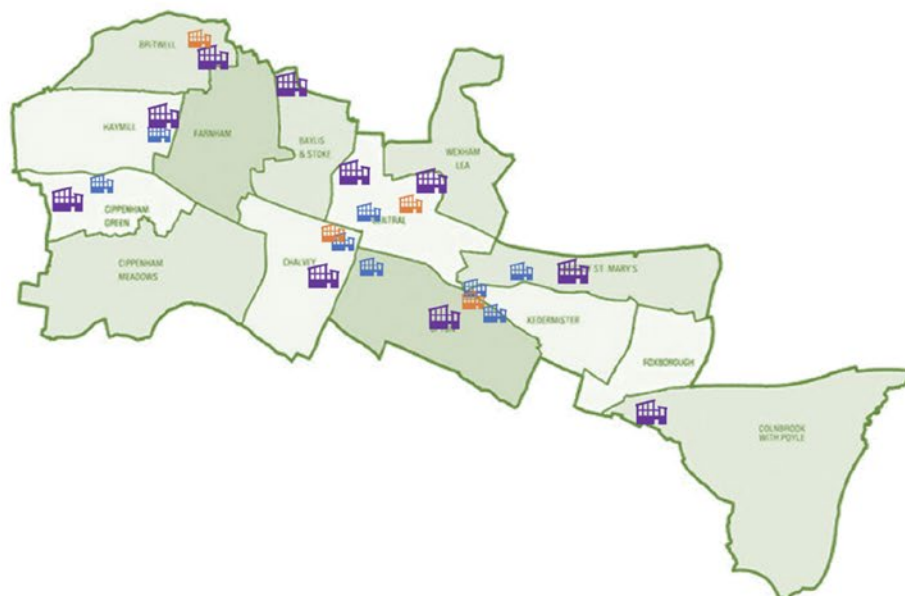


Church Groups

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Feeding support group		N/A (Unknown)
	In-person Group	Pregnancy and postnatal groups		N/A (Unknown)
	In-person Group	Parent and toddler groups / Play cafes		N/A (Unknown)
	In-person At home	Home Start Home visiting	at home	Yes – self (Free)



Slough community asset map



Children's Centres and Children's Services

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Baby Group		N/A (£0.50)
	In-person Group	Play and learn for fathers		N/A (£0.50)
	In-person Drop-in clinics	Health visitor clinics		N/A (Free)
	In-person Drop-in clinics	Breastfeeding support		N/A (Free)
	In-person Class	Family Links Nurturing Programme		N/A (Free)
	In-person Drop-in clinics	Speech and language drop-in	Covid closure	N/A (Free)
	In-person Class	MumZone new mothers' programme		N/A (Free)
	In-person Programme	PEEP Learning Together – attachment classes	via Early Help Hub	Yes – specialist (Free)
	In-person Programme	Aspects of Parenting Course	via Early Help Hub	Yes – specialist (Free)



Community Centres



Church Groups

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Mother and toddler groups		N/A (£1 to £3)
	In-person Group	Bumps and babies groups		N/A (£0.50)
	In-person Groups	Home Start Slough groups - Isolated Mums - Being Dad - Mums with bumps & babies - Women's allotment project		Yes – self (Free)
	Virtual Group	Home Start Slough virtual support group	Virtual	Yes – self (Free)
	In-person At home	Home Start Home visiting	at home	Yes – self (Free)

Surrey Heath community asset map



Children's Centres and Children's Services

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Baby and Me: group for parents with isolation		N/A (Free)
	In-person Class	0-5 parenting course		N/A (Free)
	In-person Drop-in clinics	Health visitor clinics		N/A (Free)



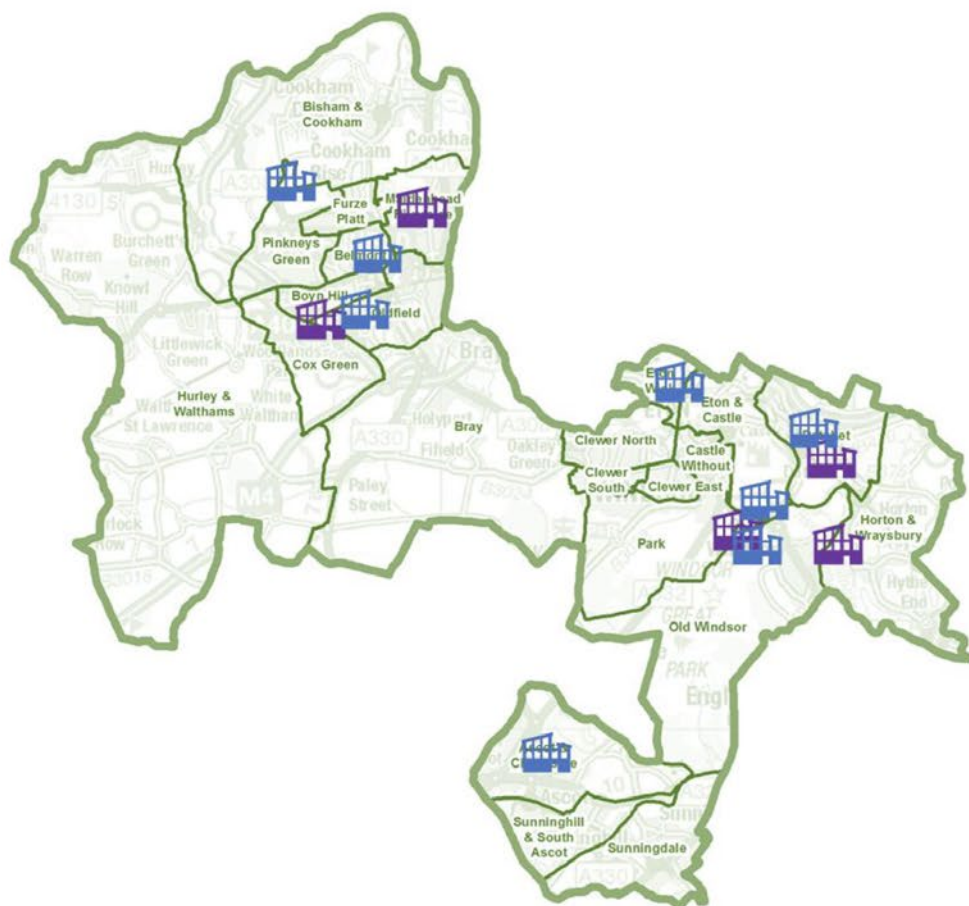
Community Centres



Church Groups

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Pregnancy and postnatal groups		N/A (Unknown)
	In-person Group	Parent and toddler groups		N/A (Unknown)
	In-person Group	Home Start Best Start in Life		Yes – self (Free)
	In-person At home	Home Start Home visiting (covid on-hold, now walk & talk)	at home	Yes – self (Free)

Windsor and Maidenhead community asset map



Children's Centres and Children's Services

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Baby massage group		N/A (Free)
	In-person Class	Emotional first aid course for parents		N/A (Free)
	In-person Drop-in clinics	Health visitor clinics		N/A (Free)
	In-person Group	Asian Women's Group		N/A (Free)



Community Centres



Church Groups

Audience	Format	Service	# locations	Referral (Fees if any)
	In-person Group	Pregnancy and postnatal groups		N/A (Free)
	In-person Group	Parent and toddler groups		N/A (Free to £6)
	Visiting / virtual	Family Friends & Family Action – volunteer support		Yes – self (Free)

Our workforce

NHS Workforce Race Equality Standard

To address a lack of progress in race equality for Black, Asian or Ethnic Minority staff in the NHS, in April 2015 NHS England introduced the NHS Workforce Race Equality Standard (WRES). The WRES data provides a series of indicators of workforce equality and representation at Board level to benchmark continuing improvement of our workforce.

Breaking the data down to Maternity Staff employed by FHFT is reflected of the overall figures of the Trust¹⁷. It shows that whilst there has been improvement for Black, Asian or Ethnic Minority staff there are still areas of improvement:

- 14.8% of the maternity and neonatal staff at Frimley Health are from a Black, Asian or Ethnic Minority background¹⁸.
- Higher percentages of these staff at Bands 5 and below.
- An under-representation of these ethnic groups at Bands 7 and 8a.

The data also highlights disparities in the way Black, Asian or Ethnic Minority staff are treated:

- A higher percentage of Black, Asian or Ethnic Minority employees have been harassed, bullied, or abused by patients, family, or the general public, than white employees.
- A higher proportion of Black, Asian or Ethnic Minority staff compared to white staff experienced harassment, bullying or abuse from staff.
- A lower proportion of Black, Asian or Ethnic Minority staff believed that their trust provides equal opportunities for career progression or promotion compared to white staff.

Career progress

A recent NHS England South East staff survey¹⁹ of our staff from Black, Asian or Ethnic Minority backgrounds found their satisfaction with the progress of their career plans was as follows:

- 60% of ethnic minority respondents reported that they were either satisfied or very satisfied.
- Black / Black British (n=39) respondents reported more dissatisfaction:
- 44% of Black / Black British respondents reported they were either satisfied or very satisfied compared to 60% of all ethnic minority respondents.
- 26% of Black / Black British respondents reported that they were either dissatisfied or very dissatisfied compared to 17% of all ethnic minority respondents.
- 75% of care assistant / support worker respondents (n=4) reported being either dissatisfied or very dissatisfied.
- 76% of doctors reported they were either satisfied or very satisfied compared to 60% of all job roles.



17 - [Frimley Health WRES survey 2021](#)

18 - Statistic provided by FHFT equality Team, April 2022

19 - SE Maternity Equity Survey, NHS England and Improvement May 2022

- 54% of Band 6 and 53% of Band 7 respondents reported that they were either satisfied or very satisfied, compared to 60% of all bands.
- Future work is planned to understand the experiences of these staff to plan for improvements and reduction in identified disparities. This includes staff one-to-one meetings with and a series of listening groups in September 2022, hosted by an external facilitator, to give staff the opportunity to discuss and influence the workforce workstream action plan.

Coproduction to design the five-year plan

Coproduction is a way of working that involves services users and communities to help develop services to ensure they are effective and meet needs of the local population.

Maternity Voices Partnership

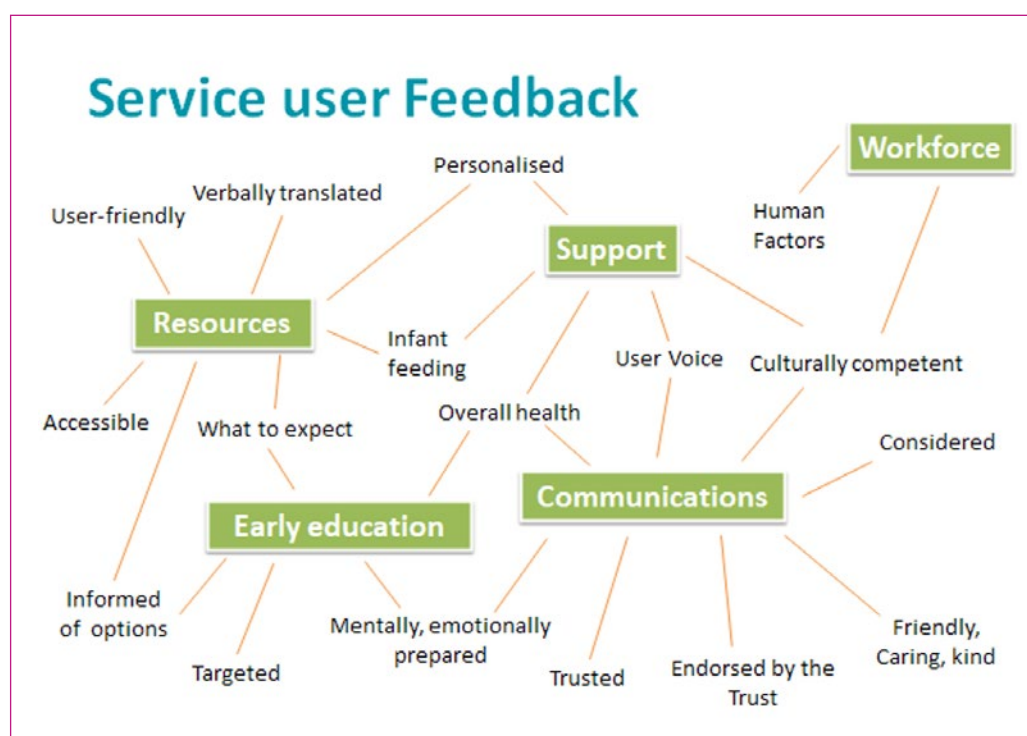
Frimley and Wexham MVP is a group of volunteers who represent the service users and collect feedback from women and their families.

The Frimley system provides dedicated funding and external support to the MVP to create and deliver effective co-production events and ongoing engagement. Currently the MVP works with Frimley LMNS in running focus groups, surveys and providing a service user voice on project steering groups.

The development of the equity plan has been done in conjunction with a working group that includes Partnership volunteers and is co-chaired by the MVP. This group continues to oversee the delivery of the equity strategy.

To ensure the voice of women from a Black, Asian or Ethnic Minority background is heard clearly and strongly in the development of our plans the MVP set up an equity group.

The information that they gather provides a rich source of feedback and recent activities have included listening groups, one-to-one interviews and in-depth surveys.



Listening groups

Whilst we engage with communities, feedback is not always fully representative. Action has been taken to proactively recruit women from a Black, Asian or Ethnic Minority background who have previously used the maternity and neonatal services to hear their specific feedback and experiences on areas of focus such as booking, uptake of folic acid, how best to communicate and barriers to accessing services.

These listening groups will help inform future service improvements and develop further meaningful relationships with women and families.

Regionally, a co-production event was held in April 2022 for women who are from a Black, Asian or Ethnic Minority background or receiving universal credit. Their feedback has been used to inform further elements of the equity strategy.

Matron away day

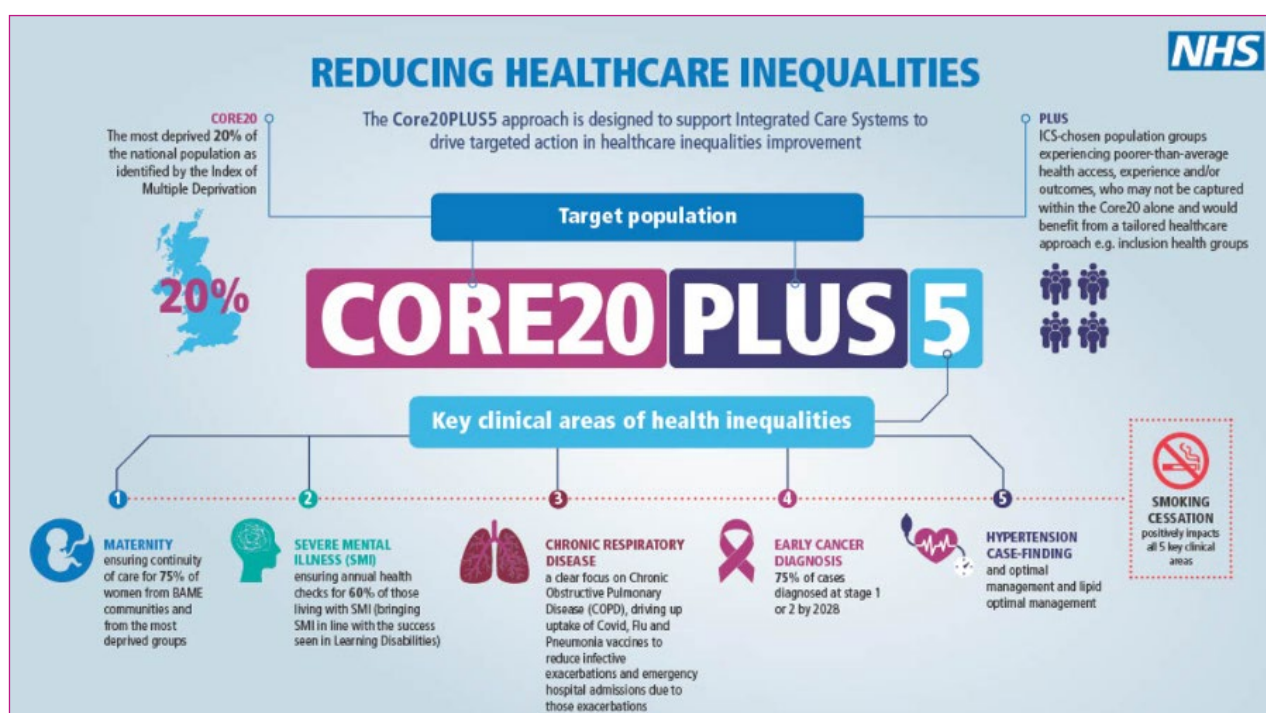
The Maternity Leadership team have been involved in development of the action plan and will continue this role to deliver the actions. In May 2022 there was an away day with the Matrons to review the data, identify possible interventions and discussion points for the staff listening groups planned in September 2022.

Staff forum

FHFT runs a staff forum which is chaired by a Medical Consultant. The forum has a membership of 25 staff and includes very senior managers as well as more junior colleagues from clinical and non-clinical areas. The forum, which is sponsored by the Trust Board, is actively involved in equality, diversity and inclusion work taking place.

Other routes

Well-developed links with the Trust Equality Lead, the ICS Board and leadership team ensures that equality, diversity and inclusion is at the heart of what we do. In 2019, we established our Frimley ICS Strategy – Creating Healthier Communities. Reducing health inequalities is at the heart of the approach and forms one of its overarching objectives. The strategic ambitions reflect the five clinical focus areas of the national Core 20 Plus NHS programme that require accelerated improvement of outcomes for key target populations. One of these areas is maternity.





OUR FIVE-YEAR PLAN

Equity means that all mothers and babies will achieve health outcomes that are as good as the groups with the best health outcomes.

For maternity and neonatal services this means responding to each person's unique health and social situation, increasing support as health inequalities increase, so that care is safe and personal for all.

National Equity and Equality guidance²⁰ set out five national priorities for local maternity systems to achieve this:

Priority 1

Minimise the additional risk of Covid-19 to pregnant women from ethnic minorities and their babies by:

- Understanding their higher risk levels and the raised potential for clinical action
- Providing tailored communications
- Discussing the use of vitamin D and folic acid supplements to lower vulnerability to Covid-19 and birth defects

Priority 2

Mitigate against digital exclusion by offering face-to-face appointments for those who cannot use video or phone consultations.

Priority 3

Improve the collection of and recording of ethnicity and other health inequalities risk factors such as living in a deprived area, weight, diabetes, and other long-term conditions.

Priority 4

Understand the local population and staff experience and co-produce plans to design preventive programmes targeting those at greatest risk of poor health outcomes.

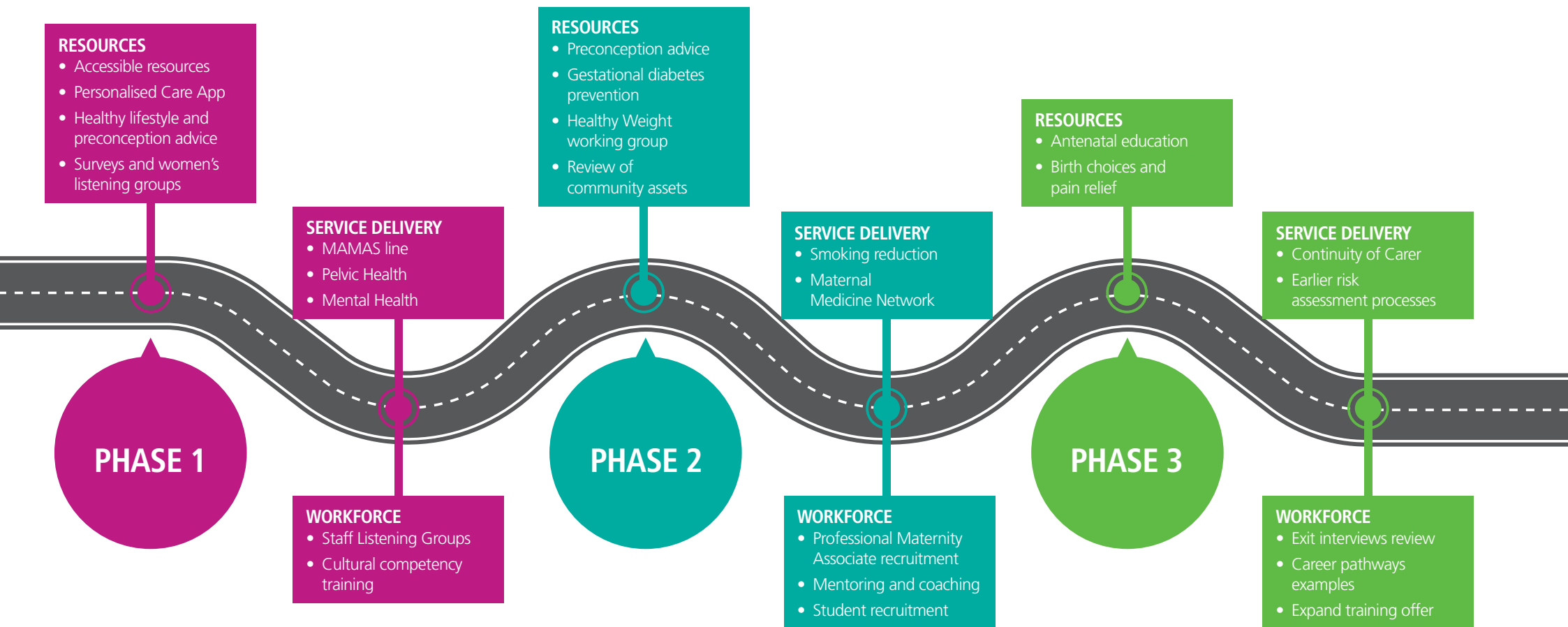
Priority 5

LMNS Equity and Equality action plans should be agreed by the LMS board and the ICS partnership board to strengthen leadership and accountability and published.



Five-year plan:

Creating the best start for families and babies



WHAT WE ARE DOING

Over the past two years we have undertaken a considerable amount of work to engage and support women of Black, Asian or Ethnic Minority backgrounds to help to reduce the risks they exposed and improve their baby's future health.

Our maternity services, like all health services, also had to respond to the Covid-19 pandemic which, evidence shows, disproportionately affected those from a Black, Asian or Ethnic Minority background.

Nationally, women from these ethnic groups made up more than half (56%) of pregnant women admitted to hospital with Covid-19. Asian women were four times more likely than white women to be admitted to hospital with Covid-19 during pregnancy, while Black women are eight times more likely.

Resources and communication

'Are You Ready for Pregnancy?' awareness campaign

There is a clear link between a mother's health before pregnancy, the risks she is exposed to or exposes herself to, and her baby's health. We know that healthy women who have fewer complications in pregnancy are more likely to have healthy babies who grow into healthy children.

During the Covid-19 pandemic, Frimley LMNS launched the #ReadyforPregnancy campaign, to encourage women across East Berkshire, Surrey Heath, North-East Hampshire and Farnham to get fit and healthy before trying for a baby.



The campaign promoted hints and tips to motivate and enthuse women to adopt healthier lifestyles prior to pregnancy - through diet, exercise, good mental health and limiting unhealthy behaviour such as smoking and drinking alcohol. The campaign also promoted wider national Covid-19 messaging on how women could protect themselves and their baby.

The year-long campaign focused on a specific topic each month, delivering targeted messaging and video content across social media, via Twitter and Facebook.

Working with Slough Borough Council, the Are you Ready for Pregnancy booklets have been translated into Hindi, Punjabi, Urdu, Somali, Polish, Romanian, Bengali and Arabic languages. These have been made available online and in local venues in Slough and Aldershot for women who don't have access online.

EasyRead literature, videos in community languages, sign language videos (youtu.be/EfHCigtVVro) and were also distributed to hundreds of local stakeholders to share the content across their websites, community publications and newsletters.

Over 2,550 people visited the Frimley Maternity site:

www.frimleyhealthandcare.org.uk/maternity/planning-your-pregnancy/readyforpregnancy-campaign

Ifrah Mohamed, Chair and Co-founder of Slough Integration Services and community support worker including the Somali community living in Slough, said:

"It's so important that women have all the information they need to make their own informed choices before and during pregnancy. Having access to information in their own language will definitely help them to make small changes that will make big differences to both them and their baby."

Pelvic health

In the Frimley population, 2.8% of Asian / British Asian mothers sustained third or fourth-degree perineal trauma, compared to 1.4% of White mothers and 1.2% of Black / Black British mothers.

Frimley LMNS has launched its first pilot Perinatal Pelvic Health Service in Slough to support these women in January 2022, after being successful in their bid to be an Early Implementer of the scheme. The service provides all women with antenatal education about pelvic floor dysfunction, identifying those who require additional support through a new screening tool. Depending on their level of risk, women will be signposted to a range of help and resources:

- Low risk – signpost to education resources
- Medium risk – pelvic floor workshop and healthy pregnancy advice
- High risk or symptoms – pelvic health physiotherapy consultation

The service has been co-designed with service users and partners through focus groups and surveys.

Promoting free online parenting courses for 0 – 18 years

During Covid-19, with children having to be home schooled and more financial and emotional pressures on families, Frimley LMNS launched free online courses to help parents and carers support their child.

The online guides and classes, provided by the NHS backed Solihull Programme, covered a range of topics relevant to expectant parents, parents, grandparents and carers of children of all ages, including those with Special Educational Needs and Disabilities (SEND). Topics included:

- Understanding your pregnancy, labour, birth and your baby
- Understanding your baby
- Understanding your child 0 to 19 years
- Understanding your teenager's brain

The guides are available in different languages.



"This course has been an absolutely invaluable gift to me. It has and will change so many aspects of my life. I am undoubtedly a better parent and more rounded and fulfilled person as a result. Some aspects have literally been like 'Eureka' moments to me! I wish I'd known all this years ago."



Maternity Personalised Care Plan app

Personalised care means people have choice and control over the way their care is planned and delivered, based on 'what matters' to them, their family situation, and their individual needs.

This needs to be reflected within a personalised care plan, drawn up following conversations with Mums-to-be and their midwife or obstetrician, so that their care reflects their needs and wishes.

Frimley ICS and the Trust have worked together to develop a mobile app version of a personalised care plan and help women manage their pregnancy healthcare – allowing you to add appointments and notes of things you may want to discuss with your midwife or other care professional. This app is due to launch in Autumn 2022.

The Maternity Personalised Care Plan app also provides links and resources for pregnancy, birth and beyond (linking to videos in a range of languages), to support those women who are less likely to access formal antenatal education to feel knowledgeable and involved in the decisions about their care.



Slough Genetic Literacy Task and Finish Group

Awareness of inherited conditions and the impact they can have on parents, carers and communities is a priority for our collaborative works across Slough. As demonstrated in Blackburn and Darwen²¹, improving awareness and take up of genetics screening can have significant increased levels of service approval, informed choice and awareness of the importance of considering genetics as a factor in reproductive choices.

A Task and Finish Group is supporting the development of a local service, specifically aimed at supporting communities - through health promotion, resources and improving services - who may be at greater risk of inherited conditions.

Training and resources will also be provided to professionals to develop their awareness and improve their familiarity and confidence to support these communities.

Service delivery

Maternity Hubs

We know that a child's experiences from conception through their first five years will go on to shape their next fifty²², so providing support at the right time through our Maternity Hubs will improve outcomes and experiences for parents, carers, and their children.

Frimley LMNS has 12 Maternity Hub locations across the ICS patch where most women receive their antenatal and postnatal care. These Hubs also provide infant feeding support, glucose tolerance testing, smoking cessation and vaccinations. In 2022, as part of the Digital Maternity Fund, the Hubs were awarded funding to improve the infrastructure, technology and connectivity in a number of these sites to support these services. Looking to the future, plans are being developed with partners to move towards a Family and Maternity Hub model to link with and co-locate more services - a key enabler for the Continuity of Carer model.

21 - [Blackburn and Darwin inherited disorders project, Developing and evaluating a culturally appropriate genetic service for consanguineous South Asian families \(researchgate.net\)](#) Khan et al 2010.

22- [Ipsos MORI report \(royalfoundation.com\)](#).



Infant feeding

The Infant Feeding group aims to promote infant feeding as early as possible and offer support for service users throughout their journey.

Both Frimley and Wexham hospitals are delivering infant feeding support and care in line with the BFI (Baby Friendly Initiative) standards and are accredited. BFI is now recognised and supported by government policies including the NHS long term plan.

Recently the group have produced a number of useful videos with Healthier Together partners which will be translated and promoted in community groups. Following feedback from service users, proposals are also being developed to introduce infant feeding peer support in the hospital and community settings.



Maternal Medicine Network

The UK Government has set a target to reduce maternal and neonatal deaths by 50% by 2025 through better provision of joined up care for women with medical problems that pre-date or arise in pregnancy, or post birth.

Under the NHS Long Term Plan, maternal medicine networks will be established so that by March 2024 every woman in England with medical problems has access to specialist advice and care. The model service specification includes key performance indicators (KPIs) relating to outcomes and equalities and requires that information and guidance is co-produced, culturally competent and delivered through accessible channels.

The network covers Buckinghamshire Healthcare NHS Trust, Royal Berkshire NHS Foundation Trust, Great Western Hospitals NHS Foundation Trust, Frimley Health NHS Foundation Trust including Wexham Park Hospital, Northampton General Hospital NHS Trust, Milton Keynes University Hospital NHS Foundation Trust, Oxford University Hospitals NHS Foundation Trust; with the John Radcliffe Hospital, Oxford, nominated as the Network Maternal Medicine Centre.

MAMAS Advice and Support Line

Pregnant women and new mothers can now get 24-hour support after a new telephone service was launched at FHFT in Spring 2022.

The Maternity and Midwifery Advice and Support (MAMAS) Line is a collaboration with South Central Ambulance Service (SCAS) and provides a single point of contact for women from 16 weeks into their pregnancy through to 28 days postpartum.

A team of midwives will give consistent, evidence-based advice to women who are concerned about their pregnancy or who think they may be in labour. They will also signpost other callers to alternative services when appropriate.

The team also monitor 999 calls, to provide support and guidance when needed to paramedics on the road. A separate advice line is available for healthcare professionals such as GPs and health visitors. The scheme replaces separate telephone triage lines at Wexham Park and Frimley Park hospitals, ensuring all future calls are answered in a timely manner and improving the experience for women.

The new phone number is shared with women in their maternity notes and widely publicised in our hospitals, clinics and in the community. The MAMAS Line also offers users the option of translation services.



Maternal Mental Health Services

One in five pregnant women experience mild to severe mental health problems in pregnancy or after birth. To support women affected the Frimley ICS, working with mental health provider Surrey and Borders Partnership NHS Foundation Trust, has launched its Maternal Mental Health Services.

The services provide specific, evidence based short term therapies for women with moderate, severe, or complex mental health difficulties associated with loss and trauma directly arising from, or related to, their maternity experience.

The services were developed with health professionals, feedback from over 300 individuals in the community, and 20 women with lived experience who took part in virtual workshops.

'In person' treatment will be provided in the most deprived areas of the Frimley ICS.

Pulse oximetry screening

In 2022 FHFT introduced newborn screening for critical congenital heart defects (CCHD) - a simple bedside test called pulse oximetry. This test estimates the amount of oxygen in a baby's blood. Low levels of oxygen in the blood can be a sign of a critical CCHD and other conditions, such as respiratory disease and sepsis.

This is safe, painless, and simple test which all babies will have which will reduce mortality in newborn babies with CCHD and, through early detection, will improve long-term quality of life for babies within Frimley ICS.

Continuity of Carer

The Continuity of Carer (CoC) model is the gold standard in maternity care, ensuring that women receive dedicated support from the same midwifery team throughout their pregnancy.

This relationship between care giver and receiver has been proven to lead to better outcomes and safety for the woman and baby, as well as offering a more positive and personal experience. This included fewer preterm births, miscarriages, stillbirths, and neonatal deaths (Sandall et al 2016). Women receiving CoC were also less likely to have regional anaesthesia or require an episiotomy.

The model also saw women expressing higher maternal satisfaction with the information, advice and explanations received, the preparation for labour and birth, choice for pain relief. Women also felt more able to make choices and decisions and experienced more empathic care.

Implementation at FHFT

In January 2022, the Board at FHFT agreed to introduce CoC across Wexham and Frimley Park Hospitals. As this requires a complete service change it will be introduced in phases, requiring additional funding for midwifery staff, additional recruitment and retention of the workforce.

Those communities and populations most likely to benefit will be prioritised first. Local analysis shows (as reflected in the wider national data) geographical areas with the highest levels of social deprivation, and the areas with the highest population of Black and Mixed Ethnic families tend to experience the poorest perinatal outcomes.

Those priority areas in Frimley are Rushmoor and Slough (ranked as in the most deprived 20% of England²³) and Aldershot and Farnborough, where higher proportions of Black, Asian or Ethnic Minority populations live²⁴. The long-term ambition is to roll out CoC widely to all communities thereafter.

23 - The Index of Multiple Deprivation of localities (Lower Layer Super Output Areas LSOA): (<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>).

24 - The Shape Atlas Place tool (shapeatlas.net) was used to map higher proportions ethnicity populations across the FHFT locality.

Community assets

Case study – Slough allotment project for pregnant and new mums

In May 2020, Frimley LMNS provided seed funding to HomeStart Slough to set up an allotment for pregnant and new mums with mild to moderate mental health needs.

The project aims to women to grow their own plants, feel connected with nature, and meet other new mums to support the physical and emotional wellbeing.

The project is currently supporting five families, with positive feedback from the women and the volunteers. This community led resource is promoted by the Perinatal Mental Health Midwifery team in Wexham Hospital, and other community partners to encourage women to join the project.



Case study – Mums' Zone, Get Berkshire Active

The Mum's Zone is a holistic health and wellbeing intervention offering pregnant and new mums free physical activity classes and wellbeing support.

The programme is already running across various sites in Slough, such as the Jamia Masjid and Islamic Centre, and links in with the drop-in Café Mama sessions already taking place in the community.

The plan is to expand this programme to the Chalvey and Britwell wards in Slough, which are in the 20% most deprived areas in England.

Our workforce

The Midwifery Council has integrated cultural competence into its competencies for entry to the register of midwives. These competencies provide details of the knowledge, skills and attitudes expected of a midwife to work within the Midwifery Scope of Practice. These include that midwives “demonstrate an understanding of and the ability to challenge discriminatory behaviour to promote equity and inclusion for all” and consistently provide and promote non-discriminatory care.

Recent changes in the Royal College of Obstetricians and Gynaecologists core curriculum requires that “the doctor is able to champion the healthcare needs of people from all groups within society”, and are aware of broader social and cultural determinants of health as well as an individual’s social wellbeing.

Cultural awareness campaign

To support greater inclusivity as a workplace and as a service provider for women from ethnic minority backgrounds, significant action has already been undertaken across the Trust. This includes our award-winning cultural awareness campaign to combat maternity inequalities.

To develop the campaign Maternity Voices Partnership interviewed thirty Black, Asian or Ethnic Minority mums-to-be to understand their experiences, the barriers, and specific needs accessing maternity services in Frimley.

A communications campaign targeted Black and Asian communities to gather more insights through the following channels:

- A dedicated radio campaign on Asian Star in Hindi and Punjabi
- An 8-week Facebook advertising campaign
- A dedicated page with translated materials on the Frimley LMNS Maternity website



The insights gathered were used to build cultural competency awareness training and targeted communications to staff working in maternity, neonatal and paediatric services.

Recruitment, retention, and development

Where a workforce reflects the community it services, patient care and experience improve. It is therefore important that recruitment and retention plans consider the ethnicity of the population.

It is also important that there is representation at Black, Asian or Ethnic Minority staff across bands to ensure role models for staff and focus attention on staff development and recruitment in Band 7 roles and above, where Black, Asian or Ethnic Minority staff are under-represented.

Activities in the plan and workforce strategy provide detail on how we plan to improve this.

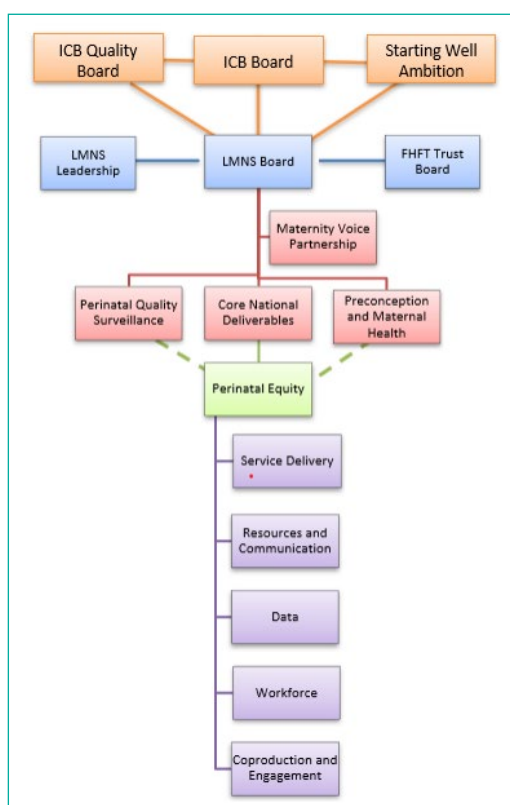


GOVERNANCE

The Frimley LMNS equity strategy and action plan will be monitored by the Project Leads and will be reported at the Frimley LMNS Board which feeds into the ICS Boards.

The LMNS Board meets bi-monthly and is chaired by Frimley ICB Chief Medical Officer and LMNS Senior Responsible Officer. The below structure outlines how LMNS deliverables are reported on.

Each action and project will have benefits and success measures which will be monitored throughout its lifecycle to respond to challenges accordingly. The MVP will assist in ensuring our service users are engaged and co-producing services so that they are fit for purpose.



Interdependencies

A key element will be monitoring the interdependencies with other workstreams and risks. Through clear reporting and governance processes any changes or new interdependencies will be identified. Current workstreams to be engaged with include:

- ICS equality strategy
- FHFT equality strategy
- Starting Well Ambition programme
- ICS Sustainability and Transformation programme
- FHFT estates programme
- FHFT workforce strategy
- Children and Young People Programme

**Frimley Local Maternity and
Neonatal System Perinatal
Equity and Equality**

5

Year Plan