

19-21 Broad Street | St Helier  
Jersey | JE2 3RR

Deputy Doublet  
Chair, Health and Social Security Panel

**BY EMAIL**

26 April 2024

Dear Chair,

**Re: Maternity Services**

Thank you for your letter dated 18 April. I am pleased to accept your invitation to meet to discuss the recommendations from the Review of Maternity Services ([S.R.9/2021](#)). Our Director of Midwifery and Nursing and the Nursing Lead within HCS' Change Team look forward to discussing the ongoing Maternity Improvement Plan and provide an update on the Maternity Strategy. Please see below outlines of these elements:

Health and Social Security Scrutiny Panel – Review of Maternity Services S.R. 9/2021 – 6th July 2021

I have attached, for Panel's review, a response paper to the recommendations outlined in 2021, which identifies closed recommendations. and details Maternity Services' progress for each of the recommendations . Of the 29 recommendations, 19 have been identified as complete by Women's and Childrens Care Group Senior Leadership Team, with robust evidence and/or business-as-usual processes in place. This is an increase from the [update provided in September 2023](#) where 11 in had been achieved.

Of the 10 remaining recommendations, 6 have an expected completion date of June 2024, with a further 2 to be completed in July 2024 and 1 to be completed by September 2024. The remaining recommendation (R4) refers to ongoing work to be completed against the Culture Improvement Plan which will be implemented over the course of the 3 year Maternity strategy.

Progress of all recommendations is included within the Maternity Improvement Plan.

Maternity Improvement Plan

The Maternity Improvement Plan was established on 28th June 2023, with the purpose of delivering coordinated and sustained improvements within Maternity, to address the recommendations from internal and external reports which have been received and been conducted within the organisation since 2018, with clear assurance and accountability. This includes reviews of maternity services in the UK and recommendations of relevance to quality improvement in obstetric and maternity care.

The Maternity Improvement Plan aims to consolidate the themes and actions within the plans, ensuring that the responses become part of the embedded business-as-usual governance process of HCS with a sustained, lasting improvement in our Maternity Services. To date, Maternity Services have completed 99 out of 127 recommendations,

owing to the dedication of staff within the service to ensuring that the plan is successful. Each completed recommendation then undergoes a 30-, 60- and 90- day follow-up review, to evidence ongoing embedment of the recommendation within business-as-usual activities. The Maternity Improvement Plan progress is reported at each HCS Advisory Board, which are publicly available on [gov.je](http://gov.je).

### Maternity Strategy

Maternity Services have commenced drafting their 3-year Maternity Strategy, which will ensure sustainability of the completed Maternity Improvement Plan recommendations and see the completion of the outstanding recommendations. The Senior Leadership Team within Maternity have engaged with the staff fully at the Away Days held in March for the co-design of this strategy, and Maternity Services are further engaging with Jersey Maternity Voices Partnership and Community Providers in the development of the strategy. The co-design of the Maternity Strategy is integral for its success and for continued improvements within the service. The Panel will be aware that the strategy is projected to be published in June 2024, therefore I have attached, in confidence, a draft copy of the working document.

I trust the above is of assistance to the panel.

Yours sincerely,

**Deputy Tom Binet**  
**Minister for Health and Social Services**  
E [t.binet@gov.je](mailto:t.binet@gov.je)



# Health and Social Security Scrutiny Panel – Review of Maternity Services S.R. 9/2021 – 6th July 2021

## Scrutiny Recommendations Response

15 April 2024

## Introduction

The Jersey General Hospital’s Maternity Service has established the Maternity Improvement Plan, the purpose of the programme is to deliver coordinated and sustained improvements within Maternity to address the recommendations from the internal and external reports which have received and been within the organisation since 2018, with clear assurance and accountability. The Health and Social Security Scrutiny Panel – Review of Maternity Services S.R. 9/2021 – 6th July 2021 is included within the Maternity Improvement Plan. The programme aims to consolidate the themes and actions within the plans in addition ensuring that the responses become part of the embedded business-as-usual governance process of the organisation, with a lasting improvement in Jersey Maternity Services.

## Governance Arrangements

Maternity Services provide assurance of progress and embedded changes through weekly Monitoring Meetings with HCS Executives, supported by the Change Team, and monthly written reports to the HCS Senior Leadership Team Change Programme Board and HCS Advisory Board.

Recommendations are subject to scrutiny from Women’s and Childrens Care Group Senior Leadership Team before they are approved as completed with having robust evidence and/or business-as-usual process.

## Health and Social Security Scrutiny Panel – Review of Maternity Services S.R. 9/2021 – 6th July 2021

As of 15 April 2024, 19 out of 29 Scrutiny Panel recommendations have been confirmed as having robust evidence and/or business-as-usual process by Women’s and Childrens Care Group Senior Leadership Team. Completed recommendations are highlighted in blue in this report. The table below identifies completion dates for the remaining recommendations.

Recommendation Number	Expected Completion Dates
3	June 2024
4	-
5	June 2024
7	June 2024
10	June 2024
14	September 2024
19	June 2024
23	July 2024
26	July 2024
29	June 2024

## Recommendation RAG rating key

0	Work to deliver against recommendation is off track and requires resource to mitigate
1	Work to deliver against recommendation is off track but recoverable by operational lead
9	Work to deliver against recommendation is on track no escalation required, evidence is available to support this status.
19	The recommendation is considered complete by WACs SLT with robust evidence and sustainability of business-as-usual processes.
29	<b>Total</b>

Rec		
1	Description	The Minister for Health and Social Services must ensure that all Maternity Staff are given the opportunity to be involved at some point during the design stages of the Maternity Unit refurbishment. The Minister must also engage with the Maternity Voices Partnership, and the public in general (including fathers/partners), to ensure that recent and future users of the service are able to share their views. [page 25]
	Update	<p>During the recent Maternity Unit refurbishment, maternity staff were invited to provide input during the design stages.</p> <p>Staff were invited to give feedback on colours of rooms, murals and some of the design ideas. Staff were asked about previous use of equipment and what they felt would be good to use in Jersey. It is noted that there were limitations to some of the requests due to the set footprint.</p> <p>During the recent Maternity Unit refurbishment, the Maternity Voices Partnership and Philip's Footprints were invited to share their views to ensure that recent and future users of the service were involved.</p> <p>Maternity Voices Partnership were invited to Maternity Governance Meetings where staff and Maternity Voices Partnership members were asked to provide opinions on colour schemes and murals. Maternity Voices Partnership were given the opportunity to provide opinions on colours of rooms, murals and unit naming.</p> <p>The suggestions from staff and Maternity Voices Partnership were incorporated and used to decorate the refurbishment of the Midwifery Led Unit.</p> <p>Evidence: Enclosed emails regarding inclusion of Philip's Footprints, Maternity Voices Partnership and Staff.</p>
2	Description	The Minister for Health and Social Services should engage an independent estates expert to assess the options for the upgrade work, including a standalone midwifery-led unit, to the Maternity Unit and provide a more rapid response. [page 28]
	Update	<p>A standalone two bedded Midwifery-Led Unit has been included in the Maternity Unit refurbishment. It includes a pool room as well as a low-risk birthing room.</p> <p>The Midwifery-Led Unit is still under development and progress is monitored through the weekly Maternity Improvement Group chaired by the Medical Director. The Lead Midwife is responsible for regular updates on progress.</p> <p>Evidence: Enclosed Maternity Floor Plan and Midwifery-Led Unit mock-ups</p>
3	Description	The Minister for Health and Social Services must ensure that a midwife-led model of care is defined which incorporates, at a minimum, continuity of care in the antenatal and postnatal period, with the ambition of extending this to the intrapartum period. The main objective of the model should be to ensure that care is delivered in the home, or as close to home as possible, to reduce inconsistency of advice in both the antenatal and postnatal periods, and to increase women's satisfaction with the service. [page 35]
	Update	The Maternity Improvement Plan was presented at the Women's & Children's Inset Day (12 March) and at the Maternity Away Days (14 & 21 March). These communications provided a background of progress to date and engaged fully with the service to develop the strategy for the continuation of the Maternity Improvement Plan. It is envisioned that the Maternity Strategy will ensure sustainability of the completed recommendations and see the completion of the outstanding recommendations. The co-design of the Maternity Strategy is integral for its success and for continued improvements within the service. Maternity Services have commenced gathering of ideas and future ways of working identified at the Away Days to

Rec		
		<p>create the Maternity Strategy. Maternity Services will be co-designing their Maternity Strategy during March and April, with the aim for this to be approved in May to enable go live in June 2024.</p> <p>A midwife-led model of care is to be incorporated within the Maternity Strategy and the Midwifery Led Unit remains a priority within the maternity refurbishment.</p>
	4	<p><b>Description</b></p> <p>The Minister for Health and Social Services must ensure that the Local Committee, developed following the initial Culture Summit, includes multi professional and across sector representation and that the Culture Strategy is published as an integrated part of the Maternity Services Strategy. Furthermore, the Culture Strategy should be a statement of the overarching values of the maternity service and the behaviours that will underpin those values. [page 41]</p> <p><b>Update</b></p> <p>Maternity are being supported in the development of a Culture Improvement Plan by the Culture, Engagement and Wellbeing team.</p> <p>The Culture, Engagement and Wellbeing team held listening events with professional groups from September – November 2023, to identify themes of cultural issues. A Maternity Culture Plan has been established and approved to be implemented, led by the Director of Culture, Engagement and Wellbeing, throughout 2024.</p> <p>The Maternity Culture Plan includes specialist mediation, values and behaviours sessions, multi-professional psychological safety in teams, restorative behaviours sessions and Civility Saves Lives sessions.</p> <p>It is recognised that culture change is ongoing, and evidence of cultural change can be seen. Maternity Services, with support from the Director of Culture, Engagement and Wellbeing, are continuing to implement the culture improvement plan for the service.</p> <p>It is noted that cultural improvement is an ongoing element of work within Maternity, with no end date.</p>
5	Description	<p>The Minister for Health and Social Services must ensure that a system-wide maternity strategy is developed without delay which includes cultural values, the proposed model of care (including choices of maternity care and continuity of carer), the maternity care pathway (community/parish led maternity service), expected outcomes, performance measurement framework with KPIs/benchmarks and approach to oversee policy development. [page 42]</p>
	Update	<p>The Maternity Improvement Plan was presented at the Women’s &amp; Children’s Inset Day (12 March) and at the Maternity Away Days (14 &amp; 21 March). These communications provided a background of progress to date and engaged fully with the service to develop the strategy for the continuation of the Maternity Improvement Plan. It is envisioned that the Maternity Strategy will ensure sustainability of the completed recommendations and see the completion of the outstanding recommendations. The co-design of the Maternity Strategy is integral for its success and for continued improvements within the service. Maternity Services have commenced gathering of ideas and future ways of working identified at the Away Days to create the Maternity Strategy. Maternity Services will be co-designing their Maternity Strategy during March and April, with the aim for this to be approved in May to enable go live in June 2024.</p> <p>The Maternity Strategy will provide further detail on this recommendation.</p>
6	Description	<p>The Minister for Health and Social Services must establish a system wide Maternity Task and Finish Group that is accountable to the Independent Jersey Care Model (JCM) Board. This should include a dedicated project manager. The remit of the Group should be to drive forward the development of the Maternity Strategy and to undertake the recommendations identified in the Panel’s report. [page 43]</p>
	Update	<p>It is noted that a Maternity Task &amp; Finish Group accountable to the Independent JCM Board is no longer applicable, due to the dissolution of the Independent JCM Board.</p>

Rec		
		<p>Maternity Services have established a Maternity Improvement Plan which is accountable to HCS Executives through weekly Monitoring Meetings, supported by the Change Team, and monthly written reports to the HCS Senior Leadership Team Change Programme Board and HCS Advisory Board. As part of this, Maternity Services have the support of a Senior Change Manager.</p> <p>The Maternity Improvement Plan includes the Health and Social Security Scrutiny Panel – Review of Maternity Services S.R. 9/2021 – 6th July 2021 recommendations.</p> <p>Please see Scrutiny Panel Report 2021 Recommendation 5 for progress of the Maternity Strategy.</p> <p>Evidence: Enclosed terms of reference for the Maternity Improvement Plan Monitoring Meeting. Public HCS Advisory Board papers can be found <a href="#">Health and Community Services Advisory Board (gov.ie)</a></p>
7	Description	<p>The Minister for Health and Social Services must establish a comprehensive system of performance management, including an annual service user survey and staff survey, to enable benchmarking against other appropriate maternity services. [page 44]</p>
	Update	<p>Service user feedback are collated through surveys from Maternity Voices Partnership and Picker Institute Survey.</p> <ul style="list-style-type: none"> <li>- The Maternity Voices Partnership (MVP) gather women's feedback through their quarterly surveys, which is then collated into an annual report, with improvement themes, to the Maternity Services Leadership Team.</li> </ul> <p>A copy of the Jersey Maternity Voices Partnership Annual Report 2021 - 2022 has been submitted as evidence. This report includes improvement themes identified following MVP surveys. It is noted that the MVP launched in November 2021, and therefore previous years reports are not available.</p> <ul style="list-style-type: none"> <li>- Recently, women can provide their feedback through the Picker Institute Survey. The Picker patient experience survey lead the development of patient experience measures as a way of understanding the quality of person centred care from the patient's perspective. Maternity services had excellent results from this in 2022, the report has been obtained as evidence. Picker Institute surveyed Maternity Services during December 2023 and January 2024, with results provided to HCS Executives in March 2024. These are awaiting final sign-off prior to distribution with the organisation, expected early April. It is noted that Maternity Services received positive outcomes.</li> </ul> <p>Staff feedback is gathered from Be Heard surveys and a review is underway to determine how to use this information to enable benchmarking.</p> <p>The benchmarking of the above service user and staff feedback against other comparable maternity services will be supported through alignment agreements with SHIP (Southampton, Hampshire, Isle of Wight, Portsmouth), as per Scrutiny Recommendation 29.</p>
8	Description	<p>The Minister for Health and Social Services should establish a dashboard similar to the new National Maternity Dashboard to enable easy comparisons, such as Clinical Quality Improvement Metrics, with other maternity providers. The dashboard should be made publicly available. [page 44]</p>
	Update	<p>The Maternity Services dashboard has been updated to be similar to the new National Maternity Dashboard which includes Clinical Quality Improvement Metrics. The dashboard was submitted for review to the HCS Advisory Board on 04/10/2023 who endorsed this and requested an update on the dashboard at each meeting. A high-level dashboard is reported in</p>

Rec		
		<p>the public domain at the monthly to the HCS Advisory Board within the Quality &amp; Performance Report board papers.</p> <p>To enable clear comparison with another maternity provider, Maternity Services were due to benchmark their 2024 service dashboard against the Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) Integrated Care Board (ICB). Ongoing changes to comparison dashboards are being made in NHS England. Once this is finalised, Maternity Services will benchmark their 2024 service dashboard, to be included as an appendix in HCS Advisory Board papers. The 2024 dashboard is used within the Women’s &amp; Children’s Care Group Performance Reviews and is part of business-as-usual processes.</p> <p>Evidence: Public HCS Advisory Board papers can be found <a href="https://www.gov.uk/government/organisations/health-and-community-services-advisory-board">Health and Community Services Advisory Board (gov.ie)</a></p>
9	Description	<p>The Minister for Health and Social Services should engage the Jersey Care Commission to support the maternity system to establish a robust and measurable quality framework, with suitable resources allocated. [page 45]</p>
	Update	<p>The Jersey Care Commission is responsible for providing the people of Jersey with independent assurance about the quality, safety and effectiveness of health and social care services.</p> <p>It is noted that the Jersey Care Commission is currently supported by the Care Quality Commission (CQC), who undertake inspections of HCS (including maternity services) and support the establishment of robust and measurable quality framework from which to benchmark Health &amp; Community Services.</p> <p>The responsibility for the consultation with this framework sits with HCS, Maternity Services are engaging as part of this process. It is noted that there is dedicated resource within the Quality &amp; Safety Team to support HCS with these inspections and achievement of any recommendations.</p>
10	Description	<p>The Minister for Health and Social Services must develop a maternity workforce strategy to consider future workforce requirements, assess different roles to support all aspects of maternity care and explore options for staff rotations with partner organisations. [page 47]</p>
	Update	<p>The Maternity Strategy will include consideration of the Maternity Services workforce following the recently undertaken Birthrate Plus review in October 2023. Birthrate Plus acuity tool is essential for understanding the midwifery workforce requirements.</p> <p>The Maternity Improvement Plan was presented at the Women’s &amp; Children’s Inset Day (12 March) and at the Maternity Away Days (14 &amp; 21 March). These communications provided a background of progress to date and engaged fully with the service to develop the strategy for the continuation of the Maternity Improvement Plan. It is envisioned that the Maternity Strategy will ensure sustainability of the completed recommendations and see the completion of the outstanding recommendations. The co-design of the Maternity Strategy is integral for its success and for continued improvements within the service. Maternity Services have commenced gathering of ideas and future ways of working identified at the Away Days to create the Maternity Strategy. Maternity Services will be co-designing their Maternity Strategy during March and April, with the aim for this to be approved in May to enable go live in June 2024.</p> <p>The Maternity Strategy will provide further detail on this recommendation.</p>



Rec		
11	Description	The Minister for Health and Social Services should develop an appropriate leadership team for maternity services, including the appointment of a Director of Midwifery and an Associate Medical Director, who is also Lead Obstetrician. [page 51]
	Update	<p>Since the recommendation was provided in 2021, Maternity Services has undergone significant change, and the current structure is:</p> <p>Chief of Service (previously Associate Medical Director) - Interim in post since March 2023            Director of Midwifery – Substantive in post since December 2023            General Manager - Interim in post since June 2023            Lead Midwife - Substantive in post            Lead Nurse – Substantive in post</p> <p>This structure was supported at the Inquest held in April 2024 by Coroner Bridget Dolan KC.</p>
12	Description	The Minister for Health and Social Services must endeavour to complete all actions from the Royal College of Obstetrics and Gynaecology reviews of maternity services and have a complete set of key organisational policies in place by the end of 2021 [page 53]
	Update	<p>It is noted that the policies referred to were updated by end of 2021 and recommendations from the Royal College of Obstetrics and Gynaecology review are included as part of the Maternity Improvement Plan.</p> <p>Each policy and guideline include a review date and contact details for the review, and are included on the cover page of each policy/guideline as standard. An embedded business-as-usual process within Quality &amp; Safety ensures that these are monitored and updated as required, led by the Quality &amp; Safety Policy Manager. This role links in with the Maternity Governance Midwife and Women’s &amp; Childrens Risk and Governance Manager.</p> <p>A tracker is available on Microsoft Teams to ensure that guidelines and policies remain updated. This was designed by the Quality &amp; Safety Policy Manager and Maternity Governance Midwife.</p> <p>The weekly Maternity Risk Meeting has continued oversight of all guidelines, as each guideline will have a 3 yearly review date. As part of business-as-usual, new and updated guidelines are being developed to expand the current pool.</p> <p>Evidence:            Template for the Maternity Risk Meeting</p>
13	Description	All birthing women and their partners should routinely be provided with evidence and information concerning their options in respect of pain relief and birth choices, highlighting benefits and risks, and given the opportunity to discuss and understand these prior to labour. All information should be delivered clearly and in a non-judgemental way. [page 57]
	Update	<p>Women are provided with their handheld antenatal records, which includes a QR code that links to the "Pregnancy and birth" page of gov.je. Here, they can access the "Pain Relief in Labour" page. This details each pain relief method available, how it works, the side-effects and complications, and whether the method is available for hospital or home births. This webpage also has further links through to pain relief options on the NHS website.</p> <p>At the 36 week assessment, women attend a double appointment with their Community Midwife. This is to discuss the birth place choice, mode of delivery and pain relief options, which are noted in the handheld antenatal records.</p>

Rec		
		Evidence: Enclosed Blank handheld antenatal record and screenshot of Pain relief in labour webpage
14	Description	The Minister for Health and Social Services should consider opportunities to better link breastfeeding and perinatal mental health support services together and train volunteers locally to provide peer support services. [page 62]
	Update	<p>A Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12 April 2023. The Perinatal Mental Health Midwife commenced in post on 03 September 2023.</p> <p>The Midwife Specialist for Infant Feeding and Perinatal Mental Health Midwife have close working links regarding providing support for women and discuss cases that can be supported by each other and are co-located together. They are reviewing ongoing training provisions for peer support services for women.</p> <p>Further to this, the Midwife Specialist for Infant Feeding and Perinatal Mental Health Midwife are delivering Wellbeing Sessions in conjunction with BBC Jersey, with the first held on 13 March 2024.</p>
15	Description	The Minister for Health and Social Services must ensure that breastfeeding champions are given protected time to undertake the work and training necessary to fulfil their role. [page 64]
	Update	<p>A Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12th April 2023, this role includes developing training for breastfeeding champions.</p> <p>In 2018, 6 members of maternity staff, including the Midwife Specialist for Infant Feeding postholder, completed UNICEF Baby Friendly Initiative Train the Trainer course. This is a 5 day course which provides in depth training and knowledge in relation to infant feeding. The course enables the trainer to teach other staff and support women and families with breastfeeding and infant feeding issues. They also receive training on how to complete quarterly audits and personal skills reviews to ensure staff are complying with the Baby Friendly Initiative standards. Since 2018, 2 of those staff members have left the organisation and funding is required to enable a further 2 to complete the course. Funding for champion training has been highlighted as a need through the Infant Feeding Steering Group.</p> <p>The Infant Feeding Steering Group holds quarterly meetings and comprises of the infant feeding project lead, Midwife Specialist for Infant Feeding, Head of Midwifery/ Lead Midwife, Operational Lead for Family Nursing &amp; Home Care, Public Health and Deputy Raluca Kovacs who is the Baby Friendly Initiative breastfeeding guardian and Chair of the Infant Feeding Steering Group. Terms of reference and meeting minutes from the Infant Feeding Steering Group have been obtained.</p> <p>The breastfeeding Champions have either completed a 5 day train the trainer programme or have shown excellent infant feeding practice at quarterly audits and deemed competent to become an Infant Feeding Champion. Those champions who have not completed the train the trainer course will attend this study as soon as funding allows. There are currently 5 Champions and a further 4 who are wishing to take on the role.</p> <p>As part of business-as-usual, the Midwife Specialist for Infant Feeding holds meetings with the champions and is planning to use those meetings to further train the champions using scenarios of complex feeding issues. A copy of agendas and meeting minutes have been obtained.</p>

Rec					
	<p>Deputy Kovacs requested funding with the Health and Social Services Minister to enable two champions to complete the Train the Trainer course, in 2023, which was rejected as part of the Government Plan debated by the Assembly in December 2023.</p> <p>Evidence: Enclosed agenda and meeting minutes for the Champions meeting</p>				
16	<table border="1"> <thead> <tr> <th data-bbox="177 439 244 584">Description</th> <td data-bbox="244 439 1522 584"> <p>The Minister for Health and Social Services must ensure that the whole maternity system, including GPs, Midwifery, Neonatal and Health Visiting services, demonstrates a commitment to achieving Baby Friendly status and that the plan to achieve BFI full accreditation by Spring 2023 is owned by every service, adequately resourced and closely monitored. [page 64]</p> </td> </tr> <tr> <th data-bbox="177 584 244 1960">Update</th> <td data-bbox="244 584 1522 1960"> <p>The Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12th April 2023.</p> <p>This role supports Jersey to achieve assessments under the UNICEF Baby Friendly Initiative. The Baby Friendly Initiative is a programme designed by UNICEF to help empower parents to build close and loving relationships with their babies and to make feeding choices which support optimum health and development.</p> <p>Jersey began working towards this accreditation in June 2018 and achieved level 1 in January 2021. The Island is due to be assessed for level 2 in 2024 and hopes to gain level 3 accreditation by the end of 2024.</p> <p>In working towards levels two and three, the Midwife Specialist for Infant Feeding will provide staff with structured training and assessments of skills to ensure they are working to clinically set standards of breastfeeding.</p> <p>It is noted that once Stage 3 has been passed, this accreditation lasts for two years with re-assessments to take place annually to ensure standards are being maintained.</p> <p>The BFI Breastfeeding Specialist Health Visitor from Family Nursing &amp; Home Care, leads the UNICEF Baby Friendly Initiative programme and provides support to mothers and families until parents choose to end their breastfeeding journey. This role is responsible, through the Infant Feeding Steering Group for supporting achievements to Level 2 and Level 3 of the accreditation programme.</p> <p>The Infant Feeding Steering Group holds quarterly meetings and comprises of the infant feeding project lead, Midwife Specialist for Infant Feeding, Head of Midwifery, Operational Lead for FNHC, Public Health and Deputy Raluca Kovacs who is the BFI breastfeeding guardian and Chair of the steering group. Terms of reference and meeting minutes from the Infant Feeding Steering Group have been obtained.</p> <p>The Midwife Specialist for Infant Feeding and the BFI Breastfeeding Specialist Health Visitor plan to work collaboratively with GPs in the future and establish GP forums to share best practice of current evidence based infant feeding practice.</p> <p>The whole maternity system is committed to achieving Baby Friendly status which is closely monitored through the business-as-usual Infant Feeding Steering Group.</p> <p>Evidence: Enclosed terms of reference, agendas and meeting minutes for the Infant Feeding Steering Group</p> </td> </tr> </thead></table>	Description	<p>The Minister for Health and Social Services must ensure that the whole maternity system, including GPs, Midwifery, Neonatal and Health Visiting services, demonstrates a commitment to achieving Baby Friendly status and that the plan to achieve BFI full accreditation by Spring 2023 is owned by every service, adequately resourced and closely monitored. [page 64]</p>	Update	<p>The Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12th April 2023.</p> <p>This role supports Jersey to achieve assessments under the UNICEF Baby Friendly Initiative. The Baby Friendly Initiative is a programme designed by UNICEF to help empower parents to build close and loving relationships with their babies and to make feeding choices which support optimum health and development.</p> <p>Jersey began working towards this accreditation in June 2018 and achieved level 1 in January 2021. The Island is due to be assessed for level 2 in 2024 and hopes to gain level 3 accreditation by the end of 2024.</p> <p>In working towards levels two and three, the Midwife Specialist for Infant Feeding will provide staff with structured training and assessments of skills to ensure they are working to clinically set standards of breastfeeding.</p> <p>It is noted that once Stage 3 has been passed, this accreditation lasts for two years with re-assessments to take place annually to ensure standards are being maintained.</p> <p>The BFI Breastfeeding Specialist Health Visitor from Family Nursing &amp; Home Care, leads the UNICEF Baby Friendly Initiative programme and provides support to mothers and families until parents choose to end their breastfeeding journey. This role is responsible, through the Infant Feeding Steering Group for supporting achievements to Level 2 and Level 3 of the accreditation programme.</p> <p>The Infant Feeding Steering Group holds quarterly meetings and comprises of the infant feeding project lead, Midwife Specialist for Infant Feeding, Head of Midwifery, Operational Lead for FNHC, Public Health and Deputy Raluca Kovacs who is the BFI breastfeeding guardian and Chair of the steering group. Terms of reference and meeting minutes from the Infant Feeding Steering Group have been obtained.</p> <p>The Midwife Specialist for Infant Feeding and the BFI Breastfeeding Specialist Health Visitor plan to work collaboratively with GPs in the future and establish GP forums to share best practice of current evidence based infant feeding practice.</p> <p>The whole maternity system is committed to achieving Baby Friendly status which is closely monitored through the business-as-usual Infant Feeding Steering Group.</p> <p>Evidence: Enclosed terms of reference, agendas and meeting minutes for the Infant Feeding Steering Group</p>
Description	<p>The Minister for Health and Social Services must ensure that the whole maternity system, including GPs, Midwifery, Neonatal and Health Visiting services, demonstrates a commitment to achieving Baby Friendly status and that the plan to achieve BFI full accreditation by Spring 2023 is owned by every service, adequately resourced and closely monitored. [page 64]</p>				
Update	<p>The Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12th April 2023.</p> <p>This role supports Jersey to achieve assessments under the UNICEF Baby Friendly Initiative. The Baby Friendly Initiative is a programme designed by UNICEF to help empower parents to build close and loving relationships with their babies and to make feeding choices which support optimum health and development.</p> <p>Jersey began working towards this accreditation in June 2018 and achieved level 1 in January 2021. The Island is due to be assessed for level 2 in 2024 and hopes to gain level 3 accreditation by the end of 2024.</p> <p>In working towards levels two and three, the Midwife Specialist for Infant Feeding will provide staff with structured training and assessments of skills to ensure they are working to clinically set standards of breastfeeding.</p> <p>It is noted that once Stage 3 has been passed, this accreditation lasts for two years with re-assessments to take place annually to ensure standards are being maintained.</p> <p>The BFI Breastfeeding Specialist Health Visitor from Family Nursing &amp; Home Care, leads the UNICEF Baby Friendly Initiative programme and provides support to mothers and families until parents choose to end their breastfeeding journey. This role is responsible, through the Infant Feeding Steering Group for supporting achievements to Level 2 and Level 3 of the accreditation programme.</p> <p>The Infant Feeding Steering Group holds quarterly meetings and comprises of the infant feeding project lead, Midwife Specialist for Infant Feeding, Head of Midwifery, Operational Lead for FNHC, Public Health and Deputy Raluca Kovacs who is the BFI breastfeeding guardian and Chair of the steering group. Terms of reference and meeting minutes from the Infant Feeding Steering Group have been obtained.</p> <p>The Midwife Specialist for Infant Feeding and the BFI Breastfeeding Specialist Health Visitor plan to work collaboratively with GPs in the future and establish GP forums to share best practice of current evidence based infant feeding practice.</p> <p>The whole maternity system is committed to achieving Baby Friendly status which is closely monitored through the business-as-usual Infant Feeding Steering Group.</p> <p>Evidence: Enclosed terms of reference, agendas and meeting minutes for the Infant Feeding Steering Group</p>				

Rec	
17	<p><b>Description</b></p> <p>The Minister for Health and Social Services must ensure that the utmost priority is given to appointing a specialist breastfeeding support midwife by the end of Q1 2022 to champion the UNICEF standards and mentor/upskill staff whose breastfeeding support skills require refinement. [page 65]</p>
	<p><b>Update</b></p> <p>A Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12th April 2023.</p> <p>Part of this role is to:</p> <ul style="list-style-type: none"> <li>- champion the UNICEF standards through supporting the UNICEF Baby Friendly Initiative programme</li> <li>- provide professional support for midwives and health visitors on breastfeeding support, including up to date guidance which is achieved through monthly meetings with the breastfeeding champions</li> </ul> <p>The postholder has been appointed to and will fulfill their job description under business-as-usual activities.</p> <p>Evidence:                      Enclosed HCS Communications regarding the Midwife Specialist for Infant Feeding</p>
18	<p><b>Description</b></p> <p>The Minister for Health and Social Services should ensure that relevant information about infancy feeding and, specifically, how to deal with breastfeeding issues, is provided to women and their families routinely during their antenatal appointments. [page 65]</p>
	<p><b>Update</b></p> <p>A Midwife Specialist for Infant Feeding has been appointed to and commenced in post 12th April 2023.</p> <p>This role supports Jersey to achieve assessments under the UNICEF Baby Friendly Initiative. The Baby Friendly Initiative is a programme designed by UNICEF to help empower parents to build close and loving relationships with their babies and to make feeding choices which support optimum health and development. Jersey began working towards this accreditation in June 2018 and achieved level one in January 2021. The Island is due to be assessed for Level 2 in early 2024 and hopes to gain level 3 accreditation by the end of 2024.</p> <p>In working towards levels two and three, the Midwife Specialist for Infant Feeding will provide staff with structured training and assessments of skills to ensure they are working to clinically set standards of breastfeeding.</p> <p>It is noted that once Stage 3 has been passed, this accreditation lasts for two years with re-assessments to take place annually to ensure standards are being maintained.</p> <p>Women are given both verbal and written information on all aspects of infant feeding during the antenatal period. Antenatal conversations around feeding take place before 34 weeks of pregnancy. Written information is provided using "The Mothers and Others Guide ", this is a booklet provided to all women when they receive their maternity wallet at their first scan. This guide is written to the UNICEF BFI standards.</p> <p>Breastfeeding discussions are further documented in the Pregnancy Notes page 27, of which a copy has been obtained as evidence.</p> <p>An Infant Feeding Guideline has been ratified and published in December 2021. This has been made available to all HCS Staff through the intranet. A copy of this has been obtained as evidence. A policy and guideline review date and contact details for the review have been identified and included on the cover page of each policy/guideline as standard. An embedded</p>

Rec		
		<p>business-as-usual process within Quality &amp; Safety ensures that these are monitored and updated as required, led by the Quality &amp; Safety Policy Manager.</p> <p>The BFI Breastfeeding Specialist Health Visitor from Family Nursing &amp; Home Care, leads the UNICEF Baby Friendly Initiative programme and provides support to mothers and families until parents choose to end their breastfeeding journey. This role is responsible, through the Infant Feeding Steering Group for supporting achievements to Level 2 and Level 3 of the accreditation programme.</p> <p>The Midwife Specialist for Infant Feeding has established an Infant Feeding web page which went live on gov.je in December 2023. This page contains information and links related to infant feeding.</p> <p>As part of the Midwife Specialist for Infant Feeding role, they are available to provide extra support with feeding for those who have complex medical histories. They are also available to support them antenatally with colostrum harvesting and care planning.</p> <p>Evidence: Enclosed handheld antenatal records, Mothers and Others guide, and evidence from Recommendation 17</p>
19	Description	<p>The Minister for Health and Social Services should ensure that the “Pregnancy and birth’ page on the Gov.je website is regularly updated and that women are made aware of the website during the very early stages of pregnancy. [page 68]</p>
	Update	<p>Women are made aware of the website during the early stages of pregnancy through their hand held records, which include a QR code that links to this page. The Antenatal Notes used in Jersey are based upon the Perinatal Institute Antenatal Notes.</p> <p>The Midwife Specialist for Infant Feeding has established an Infant Feeding web page which went live on gov.je in December 2023. This page contains information and links related to infant feeding.</p> <p>Work is underway to establish who is responsible for regularly updating the “Pregnancy and Birth” page on gov.je. It is noted that external communication is to be included within the Maternity Strategy, due to be published in June 2024.</p>
20	Description	<p>The Minister for Health and Social Services must ensure that every expectant mother is routinely asked about her feelings and mood at every antenatal appointment to ensure that any issues are recognised and acted upon as early as possible. [page 72]</p>
	Update	<p>For every expectant mother, their handheld records, which are updated at every antenatal appointment, includes questions regarding their feelings and mood. The Antenatal Notes used are provided by the Perinatal Institute and a copy of these (dated 26.07.2023) have been obtained as evidence. Pg. 6, 19, 20, 25, 30.</p> <p>It is further noted that a Perinatal Mental Health Midwife has been appointed to, who will ensure further progress is made regarding this as part of their role. There is also a "Mental health and pregnancy" page on the "Pregnancy and birth" page on gov.je website.</p> <p>It is already business-as-usual practice to ask expectant mother's feelings and mood at their antenatal appointment.</p>

Rec		
		<p>The Perinatal Mental Health Midwife can support the Womens, Childrens &amp; Family Care Group to continually improve in these aspects through their business-as-usual activities.</p> <p>Evidence: Enclosed handheld antenatal records and Perinatal Institute antenatal notes</p>
21	Description	<p>The Minister for Health and Social Services must appoint a specialist perinatal mental health midwife by the end of Q1 2022. [page 78]</p>
	Update	<p>A Perinatal Mental Health Midwife has been appointed to and commenced in role 03 September 2023.</p> <p>Communications were distributed to the Women’s and Childrens Care Group by the Director of Clinical Services on 15 August 2023 which included the Perinatal Mental Health Midwife role.</p>
22	Description	<p>The Minister for Health and Social Services must ensure that, when recruited, the Perinatal Mental Health Midwife organises and encourages education and training of all midwives in perinatal mental health and the delivery of care to make sure there is a consistent assessment and referral across all services. [page 78]</p>
	Update	<p>A Perinatal Mental Health Midwife has been appointed and commenced in post on 03 September 2023. Following commencement in post of the Perinatal Mental Health Midwife, training and education for midwives has been established.</p> <p>This training is to include the perinatal mental health pathway, as per Scrutiny Recommendation 26, to ensure there is a consistent assessment and referral across all services. A 2024 training calendar has been approved at the Maternity Risk Meeting in January 2024, and the Perinatal Mental Health Midwife has commenced organising training days aligned to this.</p> <p>The Perinatal Mental Health Midwife is to further establish a resource folder including information and support that can be accessible to midwives.</p> <p>Evidence: Enclosed 2024 Perinatal Mental health Teaching Calendar</p>
23	Description	<p>The Minister for Health and Social Services must introduce guidance which ensures that all fathers/partners are routinely asked about their mental health (either directly or through the mother) during pregnancy and following the birth of the baby. The Minister should ensure that as part of the pathway, access to mental health support for fathers/partners should be expedited. [page 79]</p>
	Update	<p>It is noted that there is a WACs Counsellor in post who can see families, with the Perinatal Mental Health Midwife who commenced in post on 03 September 2023.</p> <p>Following commencement in post of the Perinatal Mental Health Midwife in September 2023, the perinatal mental health pathway has been reviewed in close collaboration with the Mental Health Team. The new pathway identifies, for mothers and their partners, Adult Mental Health services, the Perinatal Mental Health Midwife support, WACs Counsellor support, Health Visitor support and charities too. It is noted that the referral length of time is dependent on the severity. This is being confirmed within the Perinatal Mental Health Services Standard Operating Procedure, due to be published in July 2024.</p> <p>The Perinatal Mental Health Midwife has commenced discussions with Mental Health services and Mind Jersey regarding father/partner mental health support.</p>

Rec		
24	Description	<p>Following pathway approval, this will be shared with Maternity staff to ensure understanding of the services on offer and the delivery of consistent care to women and their partners.</p> <p>Further to this, the Perinatal Mental Health Midwife has led a multi-disciplinary team to establish and develop a Jersey Post Birth Wellbeing Plan to be provided to women during the antenatal period. This wellbeing plan is to be inspired by Ireland’s Post Birth Wellbeing Plan. This booklet will cover nutrition, exercise, sleep, emotional wellness and support and services available for mothers and partners. A survey was launched in November 2023 in collaboration with multi-agency colleagues for members of the public to provide their input to the plan. The Plan is due to be launched in mid-2024.</p>
		Update
25	Description	
	Update	<p>Women’s and Childrens Care Group has improved access to labour debriefs offered through the Maternity Listening Clinic or by Consultants.</p>

Rec		
		<p>A debrief service is offered to all women.</p> <p>Within Jersey General Hospital, there is a notice board for families with information on how to access a debrief service at the entrance to Maternity Ward, with a Debrief roller banner within the Maternity Ward corridor. Further to this, Consultants may offer a formal debrief session with their patients.</p> <p>A Maternity Listening Clinic is offered to provide support to women and their families fortnightly, held by the Professional Midwifery Advocated (PMA). Women can self-refer, or can be referred to the clinic by their Community Midwife, GP or Health Visitor.</p> <p>Further to this, it is noted that a Perinatal Mental Health Midwife has been appointed and commenced in post on 03 September 2023 who, alongside the Women’s and Childrens Counsellor, can support the Womens, Childrens &amp; Family Care Group to continually improve in these aspects through their business-as-usual activities.</p> <p>Evidence: Enclosed photos of notice board and Debrief roller banner</p>
26	Description	<p>The Minister for Health and Social Services should provide quarterly updates to the Panel in respect of the new perinatal mental health pathway for assurance that maternity and mental health staff are working collaboratively and delivering consistent care to women and their partners.</p>
	Update	<p>It is noted that there is a WACs Counsellor in post who can see families, with the Perinatal Mental Health Midwife who commenced in post on 03 September 2023.</p> <p>The Perinatal Mental Health Midwife has commenced close discussions with Mental Health colleagues to ensure a robust assessment, pathway and referral process for women across the services.</p> <p>The new pathway identifies, for mothers and their partners, Adult Mental Health services, the Perinatal Mental Health Midwife support, WACs Counsellor support, Health Visitor support and charities too. It is noted that the referral length of time is dependent on the severity. This is being confirmed within the Perinatal Mental Health Services Standard Operating Procedure, due to be published in July 2024.</p> <p>Following pathway approval, this will be shared with Maternity staff to ensure understanding of the services on offer and the delivery of consistent care to women and their partners.</p> <p>Further to this, the Perinatal Mental Health Midwife has led a multi-disciplinary team to establish and develop a Jersey Post Birth Wellbeing Plan to be provided to women during the antenatal period. This wellbeing plan is to be inspired by Ireland’s Post Birth Wellbeing Plan. This booklet will cover nutrition, exercise, sleep, emotional wellness and support and services available for mothers and partners. A survey was launched in November 2023 in collaboration with multi-agency colleagues for members of the public to provide their input to the plan. The Plan is due to be launched in mid-2024.</p>
27	Description	<p>The Minister for Health and Social Services must ensure that the Maternity Voices Partnership reports to the maternity services leadership team on an annual basis to provide feedback from women and their families as to their experiences of the service</p>



Rec	
	<p data-bbox="256 241 1493 338">The Maternity Voices Partnership provides an annual report to the Maternity Services Leadership Team which includes feedback from women and families on the experiences of the service.</p> <p data-bbox="256 376 1474 510">A copy of the Jersey Maternity Voices Partnership Annual Report 2021 - 2022 has been obtained as evidence. This report includes improvement themes identified following Maternity Voices Partnership surveys. It is noted that the Maternity Voices Partnership launched in November 2021, and therefore previous years reports are not available.</p> <p data-bbox="256 544 1485 640">The Maternity Voices Partnership are invited attendees to the quarterly Maternity Governance Meetings, where the annual report is discussed. Improvement themes from the report are then incorporated into the Maternity Improvement works.</p> <p data-bbox="256 674 1485 741">It is noted that this is part of wider engagement between the Maternity Voices Partnership and Maternity Senior Leadership Team.</p> <p data-bbox="256 779 1497 875">Compilation of the annual report is owned by the Maternity Voices Partnership who are invited to the quarterly Maternity Governance meetings to discuss and present their findings. Maternity Services are awaiting the 2023 annual report.</p> <p data-bbox="256 913 1222 976">Evidence:                      Enclosed Jersey Maternity Voices Partnership Annual Report 2021 - 2022</p>
28	<p data-bbox="196 987 1493 1084"><b>Description</b>                      The Minister for Health and Social Services should request feedback of families on their experiences of maternity care. This could be an annual or a bi-annual survey and/or during the six-week and two-year checks. [page 86]</p> <p data-bbox="196 1151 1493 2018"><b>Update</b>                      The Maternity Voices Partnership provides an annual report to the Maternity Services Leadership Team which includes feedback from women and families on the experiences of the service.</p> <p data-bbox="256 1285 1474 1442">A copy of the Jersey Maternity Voices Partnership Annual Report 2021 - 2022 has been submitted as evidence as part of Recommendation 27. This report includes improvement themes identified following Maternity Voices Partnership surveys. It is noted that the Maternity Voices Partnership launched in November 2021, and therefore previous years reports are not available.</p> <p data-bbox="256 1487 1485 1621">The Maternity Voices Partnership are invited attendees to the quarterly Maternity Governance Meetings, where the annual report is discussed. Improvement themes from the report are then incorporated into the Maternity Improvement works. Compilation of the annual report is owned by the Maternity Voices Partnership.</p> <p data-bbox="256 1659 1437 1816">Further to this, Maternity services undertook a Picker Survey in December 2022, a copy of Maternity Services 2022 results have been obtained as evidence. The Picker patient experience survey lead the development of patient experience measures as a way of understanding the quality of person centred care from the patient’s perspective. Maternity services had excellent results from this in 2022.</p> <p data-bbox="256 1854 1453 2018">Picker Institute surveyed Maternity Services during December 2023 and January 2024, with results provided to HCS Executives in March 2024. These are awaiting final sign-off prior to distribution with the organisation, expected early April. It is noted that Maternity Services received positive outcomes. Maternity Services received excellent results from the survey completed in 2022. The Picker patient experience survey lead the development of patient</p>

Rec		
		<p>experience measures as a way of understanding the quality of person-centred care from the patient's perspective.</p> <p>Regular patient experience Picker Surveys are the responsibility of HCS and are organised by the Patient Advisory Liaison Service (PALS) Team.</p> <p>Evidence:                      Enclosed Jersey Care Commission Patient Experience Evaluation 2022 and 2022 Picker Survey posters</p>
29	Description	<p>The Minister for Health and Social Services should create an independent senior advocate role within maternity services which reports to the Health and Community Services Executive Team. [page 88]</p>
	Update	<p>It has been discussed that the "independent senior advocate role" is aligned with a Non-Executive Director from the HCS Advisory Board. It is noted that the HCS Advisory Board has been established and recruitment to the Board is ongoing.</p> <p>Maternity Services, led by the Chief Officer, are currently reviewing partnership with SHIP (Southampton, Hampshire, Isle of Wight, Portsmouth). As part of this partnership, it is envisaged that clinical alignment can be made with their Integrated Care Board (ICB), which includes an independent senior advocate.</p>