



NEIGHBOURHOOD
MIDWIVES YOU KNOW & TRUST

Creating a self-managing
organisation within
a healthcare setting

Neighbourhood Midwives

- Neighbourhood Midwives launched as an employee-owned social enterprise in July 2013.
- Long held vision of being commissioned by NHS to offer continuity through a self managed model which works for women AND midwives
- Opportunity came through new policy initiative Better Births Report and Pioneer Programme
- NHS Pilot devised and developed in partnership with Waltham Forest CCG and integrated into Local Maternity System (LMS)

A
radically
different
approach
to provide
continuity of carer

- NM wanted to demonstrate in practice what the Better Births Report (2014) said was needed to transform NHS maternity services - a fundamentally different approach to replace the increasingly fragmented medical models of care
- To achieve this, NM aspired to be a Teal organisation, using self-managing processes and structures in place of the more traditional 'command and control' style of management

NM's Coaching System

Coaching System

Spaces:

- 121 check in's
- Team & CST meetings etc

Structures:

- Learning partners, roles
- decision making (advice process)

Coaching Practices

- Confirmation Practices
- Reflective feedback
- Compassionate Communication
- Skilled Helper
- Non-negotiables

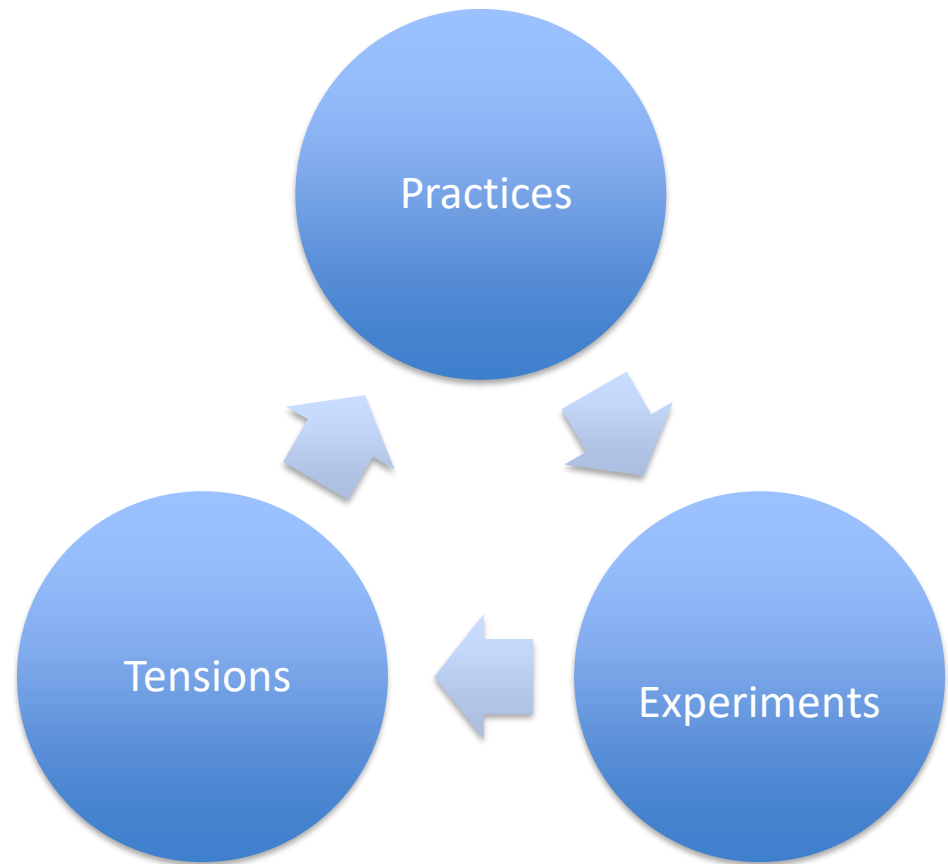
Providing
Care
through
Core
Capabilities

- Connecting
- Booking Visit
- Results and screening
- 24/7 Support
- Referrals
- Emergency referrals
- Antenatal Pathway
- Antenatal Classes
- 36 Week Birth Talk
- Labour and Birth
- NIPE
- Postnatal Care
- Postnatal Drop-in
- Discharge

Delivering
NM's
Purpose
through
Support
Capabilities

- Planning & Scheduling
- Knowledge & skills
- Info & policy (inc IT)
- Equipment
- Estates
- Pastoral support
- Professional support
- Crisis support
- Improving
- Assurance
- Demand generation
- Horizon scanning
- Influence
- External relationships
- Contracts
- Financials & payroll
- Screening programme
- Recruitment
- Onboarding
- Offboarding

Continuous
Participatory
Change
(Brave New
Work)



A different
organisational
mindset:

‘People
Positive’

(Brave New Work)

- NM wanted to develop a very different culture to the NHS norm...
- We encouraged midwives to ‘bring their whole selves to work’
- We focused on developing trust and feeling safe to speak up/challenge

NM –
Creating a ‘Circle
of Safety’

‘A team is not a group of
people who work together.
A team is a group of people
who trust each other’

Simon Sinek
‘Leaders eat Last’

NM's Waltham Forest NHS Practice

<u>OUTCOME</u>	<u>NM's NHS Service 16-19</u>	<u>National Statistics</u>
Known midwife at birth	81%	16% (CQC 2019)
Spontaneous Vaginal birth(including breech)	73%	56.7% (NHS mat stats 18-19)
Home births	45%	2.1% (office for Nat stats 18)
Breastfeeding @ birth	99%	75% (NHS mat stats 18-19)
Breastfeeding @ discharge/6 weeks	94% exclusive & partial	46.2% exclusive & partial @ 6-8 weeks (Public Health England 18-19)

Outcomes based on 342 women cared for by NM's NHS service between November 2016 – January 2019.

These women were all low risk at booking.

Comparisons are made with the most recently available data:

CQC 2019 survey of women's experience of maternity care (CoCr: page 56)

https://www.cqc.org.uk/sites/default/files/20200128_mat19_statisticalrelease.pdf

NHS maternity statistics 2018-19

<https://digital.nhs.uk/data-and-information/publications/statistical/nhs-maternity-statistics/2018-19>

Office for National statistics 2018

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/livebirths/datasets/birthcharacteristicsinenglandandwales>

NHS maternity statistics 2018-19

<https://files.digital.nhs.uk/D0/C26F84/hosp-epis-stat-mat-summary-report-2018-19.pdf>

Public Health England 2018-19

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/845706/2018_2019_Annual_Breastfeeding_Statistical_Commentary.pdf

Reasons for
closure of pilot
and some of the
lessons learnt

- Financing the pilot and ongoing funding issues
- Moving goalposts
- Lack of decision making/makers
- Commissioning cycle and long term planning
- Wider integration issues
- Great outcomes, feedback and positive evaluations don't protect you!

Questions and discussion