







Midwives contribution to maximising wellbeing and improving health outcomes

Every contact will count to influence and maximise the health and wellbeing of all women, babies, families and communities throughout pregnancy, birth and the postnatal period and beyond.

Midwives will contribute fully to the public health agenda in conjunction with multi agency partners, service users, volunteers and user groups.

Through partnership working midwives will seek to meet the challenges of reducing health inequalities through improving maternal and population health, ensuring the best start in life, thus contributing to a healthy life expectancy.

Midwives will deliver innovative, evidence based, cost effective, high quality care within multi agency teams across hospital and community based health and social care settings.

Midwives will facilitate a positive and life enhancing transition to parenthood for women and their families in collaboration with women and partners, which will be achieved through the provision of trusted support and personalised care, taking into account individual needs, risk and circumstances.

Sensitive, responsive bereavement services will be provided for those who experience poor outcomes to meet the needs of the grieving process and promote long-term health and well-being.

Midwifery Public Health contribution to Compassion in Practice through maximising wellbeing and improving health in women, babies and families

Midwifery public health actions throughout the maternity pathway

Pre-pregnancy: Contraception cessation, nutrition and exercise advice, optimum Body Mass Index, smoking cessation, folic acid supplementation, pre-existing disease management, advice and guidance

Pregnancy: Direct access to a midwife, which promotes early booking with: Comprehensive information giving and assessment of medical, obstetric and social risk, taking into account the wider determinants of health.

Identification, signposting and appropriate specialist referral of those with

- long term health conditions including diabetes, epilepsy, asthma, cardiovascular disease, essential hypertension, obesity
- previous breast feeding problems, potential breast feeding complications
- mental health issues
- safeguarding issues
- domestic abuse disclosure and safeguarding issues.
- smoking in pregnancy
- drug and alcohol misuse
- learning difficulties
- physical disability
- teenage pregnancy
- sexual health issues

Translation services for non-English speaking women and families

Advice and guidance on healthy nutrition, activity and exercise for all women regardless of Body Mass Index

Promotion of active birth techniques

Supportive and evidence based guidance on antenatal screening programmes, ensuring informed consent and responsive, efficient care

Education programmes that prepare women and their families for pregnancy, birth and parenthood, and convey clear and informative public health messages

Birth

Promoting normality throughout labour and birth within a sensitive and safe birth environment

Psychological and physical care and support throughout labour Skin to skin contact to promote early feeding and bonding Provision of de-briefing opportunities

Postnatal period

Proactive breastfeeding support and infant nutrition guidance Safe formula feeding advice and guidance

Maternal nutrition and postnatal pelvic floor and general exercise advice and guidance Sexual health and contraceptive advice

Provision of newborn screening and supporting vaccination programmes Unbiased, evidence based, safe sleeping and bed-sharing information "Midwives will embrace a greater public health role.
Individual midwives and the midwifery workforce will
expect support from those who plan and commission
maternity services to enable them to meet the
challenges of reducing inequalities and improving
maternal and family health." (Midwifery 2020, DH 2010)

Midwives contribution to outcomes and indicators as specified in the Public Health Outcomes Framework under the four public health domains (**DH 2012**)

Improving wider determinants of health

Domestic Abuse Social connectedness

Health Improvement

Low birth weight of term infants
Breastfeeding
Smoking status at time of delivery
Under 18 conceptions
Diet

Excess weight in adults
Proportion of physically active and inactive adults
Smoking prevalence

Access to non- cancer screening programmes Self-reported wellbeing

Health Protection

Chlamydia diagnoses (15 – 24 years) Population vaccination coverage

Healthcare public health preventing premature mortality

Infant mortality
Mortality from causes considered preventable
Suicide

Midwives contribution to maternity specific outcomes and indicators

Measurement of women's experiences using patient reported outcomes measures (PROMs)

Midwife as first point of contact and booking by 12 completed weeks of pregnancy

Choice of place of birth

1:1 midwifery care in established labour Normal birth rate / caesarean section rate **Core Public Health Competencies**

public health skills and careers framework (Public Health Resource Unit/ Skills for Health 2009)

levels of public health practice

Surveillance and assessment

Assessing the evidence

Policy and strategy

Leadership and collaborative working

Midwives with strategic responsibility in the field of public health working with local authority public health departments and nationally with Public Health England

Population

Community

Individual

Midwifery leaders: Heads of Midwifery and Local Supervisory Authority
Midwifery Officers
Lead midwives for education
Public health consultant midwives
Research midwives,
Named safeguarding midwives
Lactation consultant midwives
Regional screening coordinators

- Contribute to the development and lead on the implementation and review of health improvement programmes across agencies, partnerships and communities
- Needs assessment and population profiling
- Understanding of the commissioning process and its role in improving population health and wellbeing and reducing inequalities Public Health service and policy development
- Research into support for the most vulnerable groups
- Research into wellbeing as a specific outcome of maternity care

Midwives with added responsibility in the field of public health

Community

Individual

Midwifery clinical leaders
Supervisors of midwives
Specialist midwives with primary and secondary health promotion and ill health prevention roles in:
Safeguarding, substance misuse, domestic abuse, teenage pregnancy, ethnic minority issues, smoking cessation, obesity, diabetes
Frenulotomy practitioners
Ante and postnatal screening co-ordinators

- Plan, implement & evaluate health improvement projects and approaches in partnership with women and their families
- Support women and groups to make and maintain informed choices about improving their health and wellbeing
- Communicate to relevant people the health concerns and interests of women & communities.
- Identify and build on community capacity Tailored interventions specific to public health needs of local maternity populations impacting on health outcomes

All Midwives and maternity support workers

All midwives and maternity support workers:

Maximising their role and contributing to improving health and wellbeing through "every contact counts"

- Actively encourage women to think about their own health needs, the health of their babies and families and how this could be improved
- Signpost women and their families to people and agencies that can help them improve their health and wellbeing

Public health education embedded within and throughout pre and post- registration midwifery training NICE public health guidance and public health research embedded within public health midwifery practice

Defined Public Health Competencies - public health skills and career framework (Public Health Resource Unit/ Skills for Health 2009)

Health improvement

Health protection

Public health intelligence

Academic health intelligence

Health and social care quality