



Department  
of Health

# Surrey Antenatal Pathway Project: mapping provision and developing services across a mixed health economy.

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# Surrey Antenatal Pathway Project: mapping provision and developing services across a mixed health economy.

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# Surrey Antenatal Pathway Project:

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Mapping provision and developing services  
across a mixed health economy

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## **Purpose of Document**

This case study focuses on an improvement in service quality, innovation or a new way of working, specifically along one or more of the strands of the health visiting service vision and family offer:

### **Community**

#### **Universal**

#### **Universal Plus and**

#### **Universal Partnership Plus.**

## **Case Study Overview**

In Surrey there are three providers of health visiting services, made up of two social enterprises and an independent provider. In addition to this there are five maternity units. Hence Surrey represents a complex and diverse health economy. The Antenatal Pathway Project is a collaborative piece of work involving these services. Across our three health visitor providers we currently see an average of 7% of women during the antenatal period. In line with the Health Visitor Call to Action programme, we want to increase this number, working towards 100% delivery of a Universal antenatal offer by 2015. The aim of the Antenatal Pathway Project is to improve the coverage, quality and level of service offered by Surrey-wide health visitors in partnership with maternity services and Children's Centres. Based on the National Pregnancy Pathway, we have mapped our local antenatal provision in order to identify the gaps and so inform the areas of development. As a result of this we have:

- introduced an integrated model of delivery for Preparation for Birth and Beyond developed and implemented by health visitors, midwives and Children's Centres outreach workers
- developed the content and approach of 28-week contact based on user views and evidence-based practice which is underpinned by promotional interviewing and offers a flexible menu of appointments including out-of-hours provision
- jointly revised the health visitor liaison form with midwife colleagues to ensure that there is comprehensive identification of the social and emotional needs of pregnant women and agreed joint training to support implementation
- begun to develop better discharge communication to ensure that health visitors have the correct information from midwife colleagues to inform the new birth visit.

Each health visiting service has taken a lead on one area of development with its relevant maternity/Children's Centre colleagues. The Antenatal Pathway Working

Group is a Surrey-wide forum to share the lessons, insight and challenges from each piece of work. Our Preparation for Birth and Beyond programme and 28-week contact look at Universal provision, initially focusing on all primips in a given geographical location. The health visitor liaison form seeks to better identify those women requiring a Universal Plus/Universal Partnership Plus level of service, and the discharge communication work strives to inform health visitors where there are additional needs so they can offer the right level of service to the woman and her family.

## **Achievements**

- **Preparation for Birth and Beyond:** This work has been led by First Community Health and Care health visiting service with the Welcare Children's Centre and Surrey and Sussex Maternity Service. Working in Redhill West, which has a high level of deprivation, this project has succeeded in developing and delivering an integrated programme. Responding to the need to offer flexible provision, the multi-agency team have delivered the first programme on Saturdays. Jointly targeting and inviting all primips in this hard-to-reach area, the team succeeded in engaging five families. Evaluations show that all participants really valued the programme.
- **28-week antenatal contact:** This work is being led by Central Surrey Health. This contact is initially being offered to a cohort of first-time expectant mothers in the Epsom area. The aligned working group is drafting the content of the visit based on the Healthy Child Programme, to include the new family health needs assessment. Striving to ensure that the service is offered in the right way and being mindful that many women still work at 28 weeks, practitioners have developed a user-friendly questionnaire to ascertain where women would like to receive this contact and what they would like it to include. In order to maximise quality and impact, the team have secured promotional interviewing training to be delivered before the contact is implemented.
- **Communication and liaison with maternity services:** This work is being led by Surrey Community Health with its three main maternity services: Frimley Park Hospital, Royal Surrey Hospital and Ashford and St Peter's Hospitals. With the latter service, the health visiting team have successfully worked with midwifery colleagues to update the liaison form and have agreed joint training, based on the National Institute for Health and Clinical Excellence (NICE) guidance on raising sensitive and complex issues with pregnant women, to embed the process. This service has also secured regular liaison and update meetings with 50% of the midwife teams, developing this communication with the rest of the service. This is supported by exchange of contact details between services and the names of link health visitors. The Guildford health visiting service has succeeded in ensuring that

all discharge forms are received from the Royal Surrey Hospital maternity service. These are then disseminated across the service and anecdotal feedback shows that this recent development is already improving preparedness for the new birth visit.

Across the three projects it has been a huge achievement to engage four out of the five maternity services operating in Surrey in developing this work. Equally, to provide a space where all services can share their progress has been a big step forward.

## **Benefits**

There has been a range of benefits both for the organisations involved as well as for pregnant women and their families. For the local health economy as a whole, in 2010/11 there were 13,222 antenatal admissions not related to delivery across four hospitals (there is no data for Epsom). Taking the average tariff cost of £600 per admission, this equates to an annual spend of over £7.9 million. If the introduction of a more comprehensive antenatal service were to reduce these admissions by just 10%, it would save the Surrey health economy £794,940 and so contribute to the Quality, Innovation, Productivity and Prevention (QIPP) programme savings required.

For health visiting services, there is a clear benefit from earlier intervention with parents: it allows need to be properly assessed and responded to and hence a longer-term improvement in outcomes for both the child and their family. Recent evidence demonstrates the importance of the antenatal period for the child's development and outcomes. The introduction of programmes such as Preparation for Birth and Beyond and approaches like promotional interviewing will support positive outcomes for the child.

The Department of Health's research entitled *Parents' Views on the Maternity Journey and Early Parenthood* suggests that between 28 and 40 weeks women often feel isolated, anxious and unsupported by health services. Better antenatal provision could reduce those feelings. On a local level, recent evaluation of the Preparation for Birth and Beyond programme highlights some of the benefits for women and their families. Equally, recent user involvement in developing the 28-week contact demonstrates the potential benefit of better antenatal provision: 99% of the 87 women asked said they would value a contact from the health visitor at this point in their pregnancy.

## **Challenges**

Implementing any kind of change will include barriers and obstacles to be overcome. These projects are no different. While one of the successes has been the level of engagement of all partner agencies, this has not been achieved without some

struggles and sharp comments. Ensuring alignment of service priorities is key in overcoming these challenges where services are struggling for capacity. Equally, some of our timelines for project delivery have slipped. While this may have felt out of our control, for example securing training in the month it is planned for, there are some lessons to be learnt here, for example in communicating with the training organisation earlier. Looking within our own health visiting services there is the challenge of how you engage staff in the projects. Again, where teams are working with reduced capacity it can be a challenge to engage practitioners to take on additional work. In ensuring comprehensive delivery there is a need to go beyond a few interested and motivated individuals to harnessing whole teams. While the Health Visitor Call to Action programme will increase health visitor numbers for many services, this increase has yet to be realised, hence increasing the service offer now can feel overwhelming to practitioners.

### **Learning, Sharing and Sustainability**

The development of antenatal provision across Surrey continues to be a learning journey. Key insights include the following.

- **Delivering a service which is family led rather than service led:** In cases where clinics, appointments and groups need to be provided outside normal 9am. 5pm hours based on what our families want, this is a challenge to our current approach. We are learning how to shift the culture within health visiting services to respond to this.
- **Enhancing our antenatal offer in hard-to-reach areas:** There are difficulties in engaging families in areas of high deprivation. We have endeavoured to overcome these by making our promotional materials relevant, working with outreach workers to support attendance and providing a flexible service. We have linked with another area of high deprivation (Hastings) to understand their approach. While we have managed to engage some families, as we roll out our offer we will need to consider more ways to increase the uptake of the service by these groups.
- **Using a project management approach in service development:** Using project management to develop health visiting services is generally a new approach. Highlight reporting and assessing our progress against milestones has been very useful in keeping us on track. This is something we are keen both to embed through all Health Visitor Call to Action programme work and to develop, for example through the Building Community Capacity programme.

In terms of disseminating the learning from these projects, as noted above this is currently done locally via the Surrey Antenatal Pathway Project meeting. In terms of sharing the learning from this work more widely, we have presented a stand at the Community Practitioners and Health Visitors Association (CPHVA) conference and will be looking at how to reach others through the Communities of Practice as these



forums develop. Equally, we hope people will read this case study and contact us if they would like more information.

Sustainability is key to the successful long-term implementation of fledgling projects. We are working on processes to ensure that these antenatal projects are sustainable, including setting up a computerised discharge system with the child health team, developing incremental plans to roll out area-specific provision across whole services and developing the monthly planner system to calculate uptake of the 28-week contact. We look forward to developing an antenatal offer which is comprehensive, high quality and equitable in its provision, so improving the outcomes of all our local families and children.

Figure 1: First Community Health and Care flyer for Preparation for Birth and Beyond



**First Community Health & Care**

**New baby, New you,  
New opportunity!**

**Saturday 6<sup>th</sup> & 20<sup>th</sup> October 2012 10 – 3pm**

If you are 20-26 weeks and ready to think beyond your pregnancy, your local midwife, health visitor and children's centre outreach worker are offering new opportunities for you to attend a two-day workshop. Here you will find out more about:

- Labour
- Your developing baby
- Caring for you and your baby
- Support available

**welcare**  
*strengthening families*  
**A Sure Start Children's Centre**

**NHS**

**Book your place now for you and your partner or one other.**  
**Contact: Welcare Sure Start Children's Centre on 01737 780884.**  
**Venue: Welcare Sure Start Children's Centre, 24 Warwick Road, Redhill, RH1 1BU.**

Picture Source: Lookhealthy.org

Figure 2: Central Surrey Health flyer for the 28-week contact



## Pre-birth contact with a health visitor

**From 10th December 2012 to 25th January 2013**

- Take up the opportunity to meet a health visitor before your baby is born
- Part of a pilot project by Central Surrey Health to improve support for expectant mums.

**BENEFITS:**

- ✓ Meet and build relationships with health visitors before birth
- ✓ Feel better informed and prepared for parenting
- ✓ Understand more about the health visiting service
- ✓ Greater awareness of breast feeding support and education
- ✓ Increased awareness of local support services for young children and families.

 Your local clinic will contact you to arrange a date to meet a health visitor



Vision: to be known as a pioneering and innovative organisation that empowers its co-owners to consistently deliver exceptional care for a healthier community.  
Central Surrey Health is committed to putting our patients first and listening to feedback with the aim of improving our services.