

Improving Maternity Care Settings

Capital fund programme 2013-14
Information and criteria

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Foreword

Dr Daniel Poulter, Parliamentary Under Secretary of State for Health

Improving Maternity Care Settings

Improvements to over 100 maternity units across the country funded by the £25m Improving Birthing Environments Capital Fund in 2012-13 are making a big difference to families, with more choice and better environments where women can give birth.

I am therefore pleased to announce a new £10m capital fund for projects to improve maternity care settings across England. This year, I want to do even more by extending the funding to projects that:

- support services where the birth rate has increased quickly or where the environment needs to adapt to local demographic population changes, or
- can make a difference to women who have mental health or substance misuse problems.

Families and maternity staff who have already benefitted from improved birthing environments have told us that it was the small things that made a big difference. Things that make maternity care feel more personalised and less 'Institutional', such as:

- Making the rooms feel like a home away from home
- Privacy
- En suite facilities
- Birthing pools and large baths
- Comfortable furniture for themselves and their partners
- Equipment and facilities that allow fathers to support their partner and be involved in the birth

Unfortunately, not all babies are born healthy. In these circumstances, parents often require extra care and support, so I encourage you to consider projects to support women and families when things go wrong, for example dedicated accommodation for bereaved families whose babies were stillborn or for families whose babies are in special care, high-dependency care or intensive care baby units.

I would like to emphasise how important it is that the views and experiences of women and their families locally inform the development and design of maternity care settings. This will help to identify what is important to women and where improvements can have the biggest impact.

At the end of the capital funding programme, you should be able to point to tangible physical improvements in your maternity care environments and show how these contribute to improved and sustainable care provision for women, their partners and their babies.

Pregnancy and childbirth can be the most intimate and personal contact a mother and a family has with the NHS. We must make that experience as welcoming as possible so that women and their partners know that our health service is a welcoming and safe place that looks after people and gives babies and new families the very best start in life.

Dr Daniel Poulter

Parliamentary Under-Secretary of State for Health

What is the programme?

The Department of Health has identified £10 million to fund improvements to the physical environment of maternity care settings in England. Funding will be through the allocation of Public Dividend Capital (PDC). As this is strategic capital, the Department of Health has waived the normal PDC rules for this programme.

At the end of the capital funding programme, maternity services should be able to point to tangible physical improvements in their maternity care settings (antenatal, birthing and/or postnatal) and show how these contribute to improved care provision for women, their partners and their babies.

Available funding

Total available funding is £10 million. The minimum fund will be £5,000. There is no upper limit but we do not expect to fund awards of more than £500,000 – only in exceptional cases will awards be in excess of this figure. As the aim is to benefit the greatest possible number of people, large awards are likely to be few in number if at all.

In order to meet the selection criteria, schemes must:

- constitute a physical improvement in maternity care environments (antenatal, birthing and/or postnatal);
- demonstrate that the views of women and their families locally have informed the development and design of the birthing environment;
- be in line with the applicant's strategic direction;
- not currently or for a period of at least 24 months after the drawing down of funds, be under consideration for service reconfiguration;
- meet the criteria set out in the Space for Health Maternity care facilities: Planning and design manual, Version 0.8:Engalnd (2011);
- demonstrate that due regard has been given to the need to eliminate unlawful
 discrimination, harassment and victimisation and other conduct prohibited by the
 Equality Act 2010; advance equality of opportunity between people who share a
 protected characteristic and those who do not; and foster good relations between
 people who share a protected characteristic and those who do not; and
- represent good value for money, be well-conceived and aspire to the highest design standard.

Eligibility criteria

All NHS Trusts and Foundation Trusts in England are eligible to apply for the new capital funding.

Capital

For the purpose of this programme capital is classified as work that generates a physical asset, with an expected life of more than one year. Department of Health capital resources may only be used to finance the delivery of what, under International Financial Reporting Standards (IFRS), are regarded as non-current assets (tangible, intangible or investments).

A key requirement of non-current assets is that there is a reasonable probability that they will deliver future economic benefit (i.e. valuable service) over more than one year (in most cases many years). A non-current asset can be bought or enhanced (e.g. by building an extension to a house) with capital funds. Expenditure to maintain an asset at its current state (e.g. repainting the walls in a house) is not normally regarded as capital expenditure and cannot be funded with Department of Health capital.

A threshold value of £5,000 per item inclusive of VAT must generally be reached before expenditure can be funded with capital. Exceptions may be allowed, where the assets form part of a group of assets that aggregates to more than £5,000. The most common example of this is in the initial equipping of a building. To qualify as a group, the assets must meet all of the following criteria:

- Functionally interdependent (e.g. an equipment network)
- Acquired at same date and likely to be disposed of at about the same date
- Under single managerial control
- Each component asset of the group must cost £250 or more

Only costs that are directly attributable to bringing a non-current asset into being and into appropriate condition for their intended use can be capitalised and funded with Department of Health capital. For example, professional fees associated with acquiring the asset, delivery costs, installation costs, site clearance and stamp duty are capital expenditure. In-house costs, e.g. staff time that is directly identifiable to bringing a fixed asset into being, may be capitalised but not general administration and wasted costs.

Eligible projects

The aim of the programme is to support coherent improvement 'schemes' - these may include a number of improvements that combine to form one overall project. Examples of the kind of schemes that could be supported by the programme are listed below. Please note these examples are for guidance only and we encourage applicants to be innovative in their approach.

Eligible projects could include (but are not limited to):

- Creation or improvement of NHS facilities where the birth rate has increased quickly or where the environment needs to adapt to local demographic population changes
- Creation or improvement of NHS facilities to support women who have or are at risk of developing mental health and/or substance misuse problems in pregnancy or postnatally
- Creation or refurbishment of NHS facilities for antenatal care to encourage early access to maternity services, especially for vulnerable populations or cultures that might not traditionally access maternity services early in pregnancy

Please note that discrete elements of large capital projects or new builds are eligible. However, Department of Health funded elements must be completed within the timeframe of the programme even though the overall project may take place over a longer period and, additionally, you should make clear how the funding for the rest of the project is being secured.

Evidence that statutory planning and building regulations applications are underway must be evidenced. All projects must demonstrate tangible physical improvements in their environments and show how these contribute to improved care provision.

What is not eligible

Proposals which are not eligible include:

- Refurbishment of staff rest rooms.
- Staff training or any other revenue funded activity.
- Information technology except where such technology can be demonstrated to provide an improvement to maternity environments.
- Routine building maintenance and statutory compliance upgrades which fall into planned maintenance schedules. Safety compliance or enforcement issues which should be part of the organisations budgeted costs for delivering care.
- The VAT on professional fees such as architects and externally appointed project managers, although the fee itself is an eligible budget cost. Other non-recoverable VAT on project costs can be included in the budget.
- Recently completed project for which additional funding is being sought, but no new works are being planned.

How to apply

We would only expect one application per NHS service provider. However, where one NHS organisation operates services through multiple sites the application must state this and identify the proposals for each site. Auditable evidence will be required to demonstrate the fund award has been expended on that site.

Applications can be made on the online form available on the Department of Health website.

Please address completed application forms and supporting documentation to:

Karen Todd

Maternity and Starting Well

Department of Health

Richmond House – 310

79 Whitehall

London

SW1A 2NS

Tel: 020 7210 5211

Email: Karen.todd@dh.gsi.gov.uk

Please also copy applications via email to your Local Supervisory Area Midwifery Officer.

Applications must be clearly marked: **Improving Maternity Care Settings Capital Fund 2013 - 14**

Emailed applications are preferred, but these must be confirmed by post in writing to the address above with an application form signed by the Chief Executive or Finance Director of the applicant within five working days of their despatch.

Applicants will be notified by email confirming receipt of application and supporting documentation.

When you are filling in your application form, please give concise answers as some questions have a limit on the number of words you can write (additional information may be provided on a separate sheet if necessary). If you are successful we will ask you to report back periodically by referring to the answers you provide.

It will be necessary to submit a letter of endorsement from the local Clinical Commissioning Group commissioning lead. This is to assure the Department of Health that the proposed improvement project fits the wider strategic plan for maternity in the service's area.

Deadlines

The deadline for applications is 17:00 on 10 January 2014.

You should expect to hear a decision on your application in the week commencing 20 January 2014. If successful, you should be ready to start your project from January 2014.

Assessment process

The Department of Health will approve applicants based upon the recommendation of local area reviewers. Reviewers in each area will include at least one midwife. Following receipt of applications, the local reviewers will select those organisations judged most appropriate for capital allocations.

It is expected that these organisations will be selected having regard to:

- The proposed project and the project aims
- Any specific cultural and diversity issues identified in the application
- Existing activity to improve maternity care.
- Existing activity to create improvements to maternity care settings
- Longer term sustainability and plans for further roll out or sharing best practice
- Proven affordability of any and all current and future revenue consequences (note the Department cannot provide revenue funding for these projects)
- Demonstration that due regard has been given to the need to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010

Governance and Approvals

By local reviewers

Checking that the application meets the basic eligibility criteria

- If further information is required at this stage, a local reviewer will be in contact to request it
- All applications will be considered by the local reviewers, who will provide a list of recommended applications to the Department of Health

Please note that if we receive more applications than the amount of funding available, the reviewers may choose to recommend part funding or supporting specific elements of the project.

The application will therefore ask you to breakdown your project budget into discrete improvements, highlighting these in order of priority.

By the Department of Health

The Department of Health will consider the recommendations from the local reviewers and will make the final decision on the awarding of the funding.

Please note that your application's success cannot be guaranteed and the Department of Health's decision is final

Summary of Criteria Used to Assess the Applications

It is important that you address each criterion in your application. These are not listed in order of importance.

Applications will be assessed and ranked against the following general criteria in addition to the information provided on the capital application form:

- The direct benefits that will accrue to all service users
- Demonstration of service user support (e.g. via user survey results, a letter of support from the MSLC, etc.)
- The extent to which the project demonstrates tangible, physical improvements to the maternity care settings for mothers, fathers and babies
- The extent to which the need for the project is demonstrated
- The viability of the project and evidence of a successful record in delivering outcomes
- The value for money of the planned work
- Evidence that due regard has been paid to the public sector Equality Duty in respect of people sharing protected characteristics. For information on the Equality Duty please refer to the Government Equalities Office link at:

http://www.homeoffice.gov.uk/publications/equalities/equality-act-publications/equality-act-guidance/equality-duty?view=Binary

In considering the overall strength of your application, the local reviewers will particularly look at:

- How your project will make a difference to the experience of care of all pregnant women, their partners and their babies, e.g. the types of services or facilities (antenatal, birthing and/or postnatal) you will offer and how closely your project meets the criteria
- The extent to which the project demonstrates support for services where the birth rate has increased quickly or where the environment needs to adapt to local demographic population changes, or

- The extent to which the project demonstrates it can make a difference to women who have mental health or substance misuse problems.
- Why you think it will succeed in doing this, e.g. the strengths of the project, assurance of further funding and plans to actively involve users and staff in all stages of the project

Core outcomes of the overall programme

There are five potential core outcomes of the overall Department of Health capital funding programme.

Applications should identify which outcomes are relevant to their project and indicate how each outcome will be measured:

- Improving a woman's experience of maternity care (antenatal, birthing and/or postnatal)
- Promoting dignity
- Enabling improved privacy
- Enabling maternity services to be more responsive to the needs of all people using them
- Supporting cultural diversity

The Department of Health has made clear the importance of Quality as the key driver for health service delivery and the need to focus on Innovation, Productivity and Prevention (QIPP) to support this.

The QIPP approach is at the centre of NHS and social care activity and applications should therefore indicate how the proposed work will deliver measurable improvements against the QIPP framework, drawing on the potential key outcomes set out above.

What happens if successful

Initially

If your application is successful, an award letter and information on how to claim payments will be sent to the chief executive or equivalent of the applicant organisation, outlining the terms and conditions of the funding, together with an acceptance form.

The acceptance form must be signed by the chief executive or equivalent of the organisation, agreeing to the conditions of the funding. We also ask you to confirm which dates the project will start and when you expect to complete it.

The Department of Health reserves the right to withdraw funding in the event that no evidence is shown of a service's commitment to delivering the project, so it is important that you keep us up to date with the progress of your project.

Reporting on progress

We are keen to hear about progress of your project and are committed to sharing learning from the projects funded through this programme with the Department of Health and any other interested parties. Therefore if successful you will be required to participate and contribute to this.

Activities may include:

- A written evaluation of the project three months post-completion
- Hosting site visits to monitor progress and provide any support required
- On-going communication with the Department to ensure that your project goes as smoothly as possible and to help solve any issues as they arise

Accounting for your fund award

All successful applicants are expected to maintain records which clearly show how the fund was used. This should include:

- Collating high quality 'before and after' photos as a demonstrable way to evidence the benefit and change the funding has made, and sharing these with us;
- Identifying the fund award separately in the audited annual accounts; and
- Submitting a certified statement of income and expenditure, signed by the trust's auditors, director of finance or similar, confirming that the funding was used in accordance with the application and the terms and conditions of the fund award letter.

Once your project is complete

We will ask for a final report three months from the date your funding was awarded which will ask for further information about what you have achieved and what wider differences the work has made to your maternity services.

In addition, in order to increase and share the learning from the projects that are funded, we will undertake an overall programme evaluation. This could result in the production of a number of detailed case studies of some of the work funded.

Acknowledgments

The Department of Health exists to improve the health and wellbeing of people in England. It is committed to improving the quality and convenience of care provided by the NHS and social services. Its work includes setting national standards, shaping the direction of health and social care services and promoting healthier living.

Women should receive excellent maternity services that focus on the best outcomes for women and their babies and on women's experience of care.

Fund holders will be expected to acknowledge the Department of Health in any information that is circulated about the project. This could include advertisements, publications or other promotional materials.

Further Information

Please see our website or if you need further information, via the contact details below.

Email: Karen.todd@dh.gsi.gov.uk

Website: www.dh.gov.uk
Telephone: 020 7210 5211

Mail to: Karen Todd, Department of Health, Richmond House – 310, 79 Whitehall,

London, SW1A 2NS