

Implementing prevention in the Better Births programme using the Local Maternity System

System recommendations: Bradford District experience

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Background

West Yorkshire & Harrogate Local Maternity System Public Health Prevention Recommendations

- Public Health and Prevention underpin the West Yorkshire & Harrogate Local Maternity Systems (WY&H LMS) plan, from preconception through to birth and beyond.
- The Maternity Health Needs Assessment identified high levels of socioeconomic deprivation across WY&H, which leads to health inequalities and high levels of health need resulting in poorer maternity outcomes.
- It identified a growing need for resources and interventions across the LMS due to increasing obesity rates, smoking in pregnancy (SIP) and other healthy lifestyle, environmental and social factors
- There is a need to prioritise and focus efforts - Every woman and their family should experience a healthy pregnancy wherever possible – There are a range of inequalities that impact on maternity outcomes and contribute to the unjust and avoidable differences in people's health before, during and after pregnancy.

Key Health Inequalities

Key findings from the West Yorkshire & Harrogate LMS needs assessment include:

- Deprivation - 19% of WY population live in the most deprived IMD decile (compared with 10% UK wide)
- High risk factors during pregnancy –substance misuse, domestic abuse, smoking as well as diet and maternal nutrition impact on a child's subsequent health and development outcomes
- Rates of smoking in pregnancy in the most deprived areas of England are 5 times those in the least deprived areas (20% and 4% respectively)
- Younger mothers are more likely to smoke, less likely to take folic acid, and less likely to access antenatal care in early pregnancy
- The proportion of women who are overweight and obese during pregnancy increases with age, with the highest proportion being among those aged over 40 years (40%).

Objectives

Objectives of the West Yorkshire & Harrogate Local Maternity System Public Health Recommendations

- Consider Best Practice across the six places of the Region
- Develop the Recommendations and Benchmarking at place
- Develop clear guidance and pathways
- Deliver Public Health activities in the preconception stage and extend to a range of lifestyle

Bringing the Recommendations to Bradford District

Local Maternity System Prevention journey:

Place based action to improve maternity outcomes within Better Births Every Baby Matters



9 Local Maternity System Priority Areas for Prevention:

Partners include: PHE, Health Visiting, Public Health, Primary Care, CCG, PH Intelligence, Public Health Midwives



Every Baby Matters Bradford District

The Every Baby Matters (EBM) programme aims to improve maternal and infant health and reduce infant mortality across the Bradford District.

- It has a key task of reducing inequalities in the health outcomes of young children and their families
- We implemented a local programme to:
- Systematically audited all the LMS recommendations across maternity sub groups
- Highlight priority areas where partnership working and action required strengthening.
- (due to the sheer number of recommendations) agreed priority outcomes with our Every Baby Matters sub groups
- Agreed a set of partnership outcomes (see box)

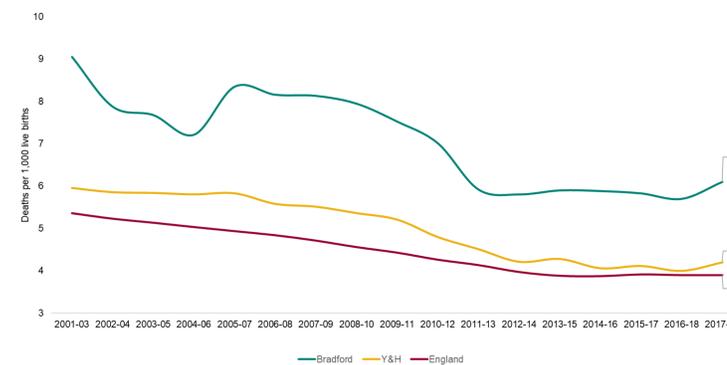


Every Baby Matters Intelligence

EBM builds on the recommendations of the 2006 Bradford District Infant Mortality Commission.

- Focuses on the latest intelligence available which reflects the recommendations set out by EBM – an example of data informed interventions
- Infant Mortality is an indicator of the general health of an entire population.
- Deaths occurring during the first 28 days of life (the neonatal period) in particular, are considered to reflect the health and care of both mother and newborn

Figure 1: Infant mortality in Bradford District, 2001-03 to 2017-19



In 2017-19 the infant mortality rate in Bradford District was 6.1 deaths per 1,000 live births, a slight increase from 5.7 deaths in 2016-18 (Figure 1). The infant mortality rate in Bradford District remains above both the regional average (4.2) and England average (3.9).

The gap between Bradford and the England average has widened to 2.2 deaths per 1,000 live births. Bradford District has the 8th highest infant mortality rate in England. Bradford District has the second highest infant mortality rate within the Yorkshire & Humber region.

Expected Outcomes

Successful implementation of the WY&H Recommendations considers all users of maternity services and with a specific focus on where deprivation is high, there are subsequent needs and poorer maternity outcomes:

- Reduction in numbers using alcohol and other substances
- Increase in provision of PMH support
- Accessible and early intervention in Perinatal mental health
- Reduction in smoking at time of delivery
- Long term smoking cessation – Reduction in SATOD
- Increase in genetic literacy for communities, patients and professionals
- Equitable access to genetic services
- Increased breastfeeding rates
- Improved maternal nutrition messaging
- Prevention and Early Intervention
- Contribute to the reduction of health inequalities for women, their partners and families.

Partners

A key piece of learning has been the added benefits the audit process has had in joining partners and strengthening relationships.

