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The Royal College of Midwives' response to the Proposed changes to the Public Health Outcomes Framework from 2019/20: a consultation

Royal College of Midwives

15 Mansfield Street, London W1G 9NH

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The Royal College of Midwives (RCM) is the professional organisation and trade union representing the majority of midwives and maternity support workers working in maternity services.

We welcome the opportunity to respond to this consultation and broadly agree with the proposed changes to the Public Health Outcomes Framework.

Our comments on some specific areas are set out below.

Section 3. Indicators that will be replaced with an alternative indicator(s) on the same topic

Indicator number 1.15i

This proposed change to the old indicator is timely and appropriate. The Homelessness Reduction Act (2017) contains a new duty to refer which became effective as of 1st October 2018. Its provisions apply to public sector staff, including midwives and maternity support workers.

The RCM has recently produced guidance for our members in relation to this requirement. As part of their assessment, midwives record a woman's home circumstances and it may be at this point, or at any stage in the maternity journey, that a risk of homelessness becomes apparent. We are aware that some circumstances of homelessness have been hidden from official statistics.

A new and efficient pathway has been created which will simplify the process of referral for housing support and more accurately count the number of women in housing need.

We hope that the new outcomes indicator can capture a truer picture of homelessness.

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Section 5. Indicators proposed for inclusion from 2019/20

Maternal obesity at booking - from the Maternity Services Data Set

The general health risks of obesity are well known, with an increasing body of evidence specific to women in pregnancy and their babies.

Complications for women who are obese include higher risk of miscarriage, stillbirth, preeclampsia, gestational diabetes and postpartum haemorrhage.

Babies whose mothers are obese have an increased risk of congenital anomalies, being born preterm, being a large baby and becoming obese and diabetic in later life.

This suggests women who are obese should be offered referral to weight management services after giving birth to help them achieve a healthy weight before embarking on a future pregnancy¹².

Tracking trends will greatly assist in the planning and evaluation of such services. The inclusion of this indicator will be an important addition to the Public Health Outcomes Framework.

Alcohol use at booking - from the Maternity Services Data Set

The RCM fully supports the inclusion of this indicator. Robust data collected from women at booking will map the extent of alcohol use in pregnancy and its effects over time, even in small amounts³. This will assist with the development and evaluation of interventions.

¹ Care of Women with Obesity in Pregnancy. 2018. <u>https://doi.org/10.1111/1471-0528.15386</u>

² https://www.nice.org.uk/guidance/ph27/chapter/1-Recommendations#recommendation-1-preparing-forpregnancy-women-with-a-bmi-of-30-or-more

³ Low alcohol consumption and pregnancy and childhood outcomes: time to change guidelines indicating apparently 'safe' levels of alcohol during pregnancy? A systematic review and meta-analyses. 2016.

https://bmjopen.bms.com/content/7/7/e015410



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Smoking at booking – from the Maternity Services Data Set

Tackling smoking in pregnancy is a key tenet of the Saving Babies' Lives Care Bundle and is one of a number of initiatives focused on achieving the national ambition to halve the rates of stillbirth, neonatal deaths and brain injury by 2025⁴.

The Evaluation of the implementation of the Saving Babies' Lives Care Bundle in early adopter NHS Trusts in England⁵ reported inadequate collection of data by Trusts on smoking and cessation. There was wide variation in reporting methods that resulted in the ineffective monitoring of outcomes and service delivery.

A robust and consistent national data collection system was a priority recommendation by the Smoking in Pregnancy Challenge Group in 2015⁶. This new indicator will add significance to the already collected data on smoking status at the time of delivery. The RCM supports the inclusion of this indicator to help ensure that local tobacco control activity is responsive and appropriately focused on pregnant women.

⁴ Saving Babies' Lives Care Bundle. 2016. https://www.england.nhs.uk/.../03/**saving-babies-lives**-car-bundl.pdf ⁵Evaluation of the implementation of the Saving Babies' Lives Care Bundle in early adopter NHS Trusts in England. 2018. University of Manchester. https://www.manchester.ac.uk/discover/news/action-plan-can-prevent-over-600stillbirths-a-year/

⁶ Smoking in Pregnancy Challenge Group, Smoking Cessation in Pregnancy; A Review of the Challenge. 2015. http://ash.org.uk/download/smoking-cessation-in-pregnancy-a-review-of-the-challenge/