

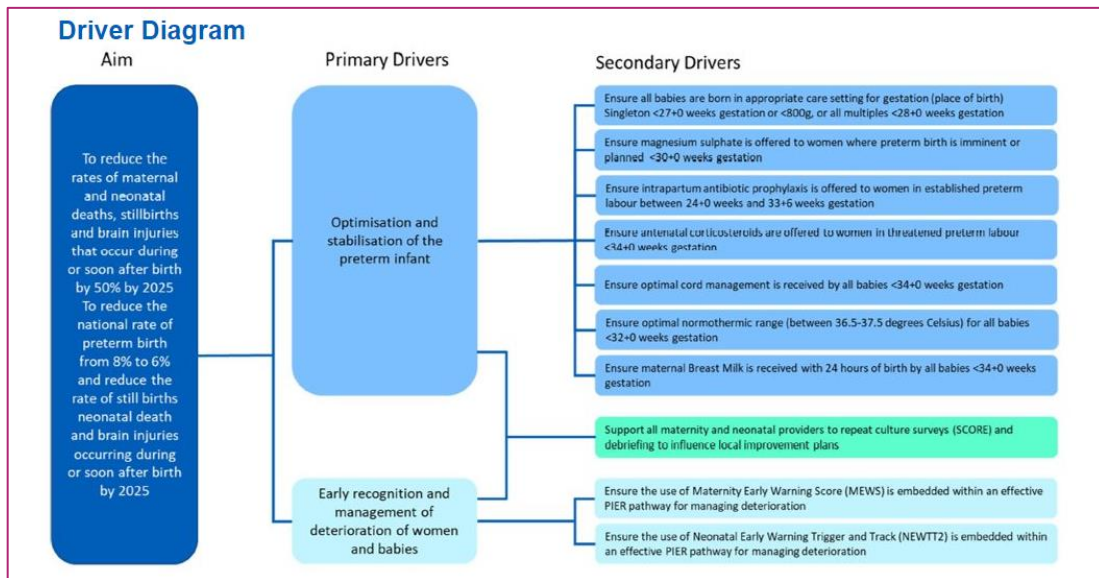
# Maternity and Neonatal

## Programme outline and aims

For more information on our programme aims and the outline of the MatNeoSIP, visit our [website](#)



## Plan for this year



## NHS Futures

Please join the Health Innovation Manchester MatNeo SIP workspace on the [NHS Futures platform](#). This platform provides useful information and resources for the MatNeo SIP including links to presentations at previous learning events.

## Learning events

Alongside Innovation Agency NW Coast and the Northwest Neonatal Operational Delivery Network we are hosting optimisation Special Interest Groups (SIG) over the next 12 months. Please hold the dates for your diary:

Tuesday 4th October 13:30 to 16:00

Thursday 15th December 10:00 to 12:30

## Meet our team



**Wendy Stobbs** is the Head of Programmes for the Patient Safety Collaborative within HInM. She is a nurse by background, having worked in NICU, anaesthetics, health promotion, organisational change, and latterly quality improvement.

**Caroline Finch** is Programme Development Lead for the Maternity and Neonatal Safety Improvement Programme. Caroline is a registered midwife, and her previous role was as an advanced midwifery practitioner in a local maternity unit.



**Catherine Nash** is the Quality Improvement Lead Nurse with the Northwest Neonatal Operational Delivery Network. Catherine is a neonatal nurse who has previously worked both clinically and as a ward manager.



**Rebecca Williams** is the Project Officer for the Maternity and Neonatal Safety Improvement Programme. Rebecca supports Caroline to deliver the MatNeoSIP programme. Rebecca has previously managed and supported various projects within several NHS organisations.



**Leanne Hill** is the Project Administrator for the Maternity and Neonatal Safety Improvement Programme. Leanne provides administrative support to the team.



## Our priorities for 2022/2023:

### Discover – Q1

- Engage with stakeholders about how we deliver the specification.
- Identification of improvement teams.
- Gather baseline data on the 7 key interventions to be implemented for each Trust.
- Facilitate launch event of the Optimisation care pathway.
- Organise support calls with each Trust.
- Work with teams to define the nature of any gaps or specific issues that will be addressed by developing fishbone diagrams, process maps and stakeholder analysis.
- Collaborate with Innovation Agency NWC and Operational Delivery Network to facilitate the first SIG event.
- Complete network plan.
- Comms and engagement.
- Support LMS with the rollout of the Each Babies count toolkit

### Define/Develop – Q2

- Continuing with support calls with each Trust.
- Support teams to further enhance the driver diagram/change ideas.
- Each team to plan their first Plan Do Study Act (PDSA) cycle
- Collaborate with Innovation Agency NWC and Operational Delivery Network to facilitate the second SIG event.
- Comms and engagement
- Prepare Trusts for the launch of the final framework and tool for NEWTT2 (date TBC).
- Support Trusts to embed the tool within an effective PIER pathway for managing deterioration.

### Develop/Deliver – Q3

- Continuing with support calls with each Trust.
- Review data and specifically looking at the NW ODN toolkit.
- Collaborate with Innovation Agency NWC and Operational Delivery Network to facilitate the third and fourth SIG event – to enable shared learning.
- Review of first PDSA cycle and support teams to deliver further PDSA cycles.
- Comms and engagement.
- Review sustainability.
- Continued support for implementation of NEWTT2
- Prepare Trusts for the launch of MEWS (date TBC)
- Support the Trust to embed the MEWS tool into the PIER pathway for managing deterioration (date TBC)
- To work with local leaders to support a repeat of the national culture survey (date TBC).

### Deliver/Sustain – Q4

- Continuing support calls with each Trust
- Further collaboration and shared learning with Innovation Agency NWC and Operational Delivery Network (dates TBC).
- Complete evaluation and review sustainability.
- Develop case studies.
- Work with local leaders to support effective debriefing of clinical teams following the culture survey

## Share your successes

If your unit has a success story regarding implementing the optimisation measures, please [get in touch](#) and we will share in the next newsletter and potentially in our wider communication channels.