# **HQIP Case Study:**



# PPI in national clinical audit – Submission to the Richard Driscoll Memorial Award 2018

This submission demonstrates:

- Creating a patient group to work alongside the programme
- Changes to the audit as a result of PPI
- A blog entry from a woman involved

Date: Autumn 2018

NCAPOP: The National Maternity and Perinatal Audit

Organisation: Royal College of Obstetricians and

Gynaecologists (RCOG)

Websiteaddress: <a href="http://www.maternityaudit.org.uk/">http://www.maternityaudit.org.uk/</a>

## **Brief background of the project**

The National Maternity and Perinatal Audit (NMPA) is the largest quality improvement programme in maternity care in the world. England, Wales and Scotland participate in the Audit, which is based at the Royal College of Obstetricians and Gynaecologists but run in partnership with the Royal College of Paediatrics and Child Health, the Royal College of Midwives and the London School of Hygiene and Tropical Medicine.

There are three components to the NMPA: (1) a biannual survey of organisational structure and features; (2) a continuous clinical audit, which uses data routinely collected in the course of maternity care to derive indicators; and (3) sprint audits, which seek to expand the continuous clinical audit by linking the NMPA's core dataset to other routinely collected information.

#### **Aim**

The NMPA's aim is to encompass the needs of women and their families in every aspect of its activity. The experience of women giving birth is wide – women can be low risk or have risk factors, can need emergency intervention or planned surgery, and can have a healthy baby at term or an ill or preterm baby. Recognising this variety of experience, the NMPA chose to convene a Women and Families Group (WFIG) to advise the project team.

The WFIG consists of eight lay members, including one father, and representatives from six smaller charities. This group was recruited from existing PPI initiatives run by the RCOG but also from a Twitter and Facebook campaign. The intention was to form a group that could, through continuous participation, understand and meaningfully advise the project.

The WFIG reflects women and families with a range of experiences covered by the NMPA clinical measures (such as caesarean section, readmission to hospital, neonatal care use etc.) as well as the three nations in Britain covered by the audit.

## **Planning and delivery**

The NMPA runs biannual workshops for the WFIG, supported by the RCOG's Patient & Public Involvement team and a professional facilitator. These seek to understand the views of the group on a variety of different aspects of maternity care, but particularly how the project can support choice and empowerment of women and families in accessing maternity care. The central contact point for the group is the NMPA's Obstetric Fellow, who organises and co-facilitates these meetings, and provides summary information back to the group and the Project Team. A subset of the Project Team, including one of the clinical leads, attends each meeting. This is supported by a monthly update to the group, who provide detailed feedback on the audit measures, the website, and the NMPA's approach to various aspects of our brief.

In addition to this, engagement with the group takes place virtually, with members being asked for their comments and feedback on elements such as report drafts and information for the public including lay summaries. Members are involved in events such as the Report Launch (held November 2017), with a member of the group speaking about the importance of the audit findings to women and their families to support their informed decision making around maternity care. The NMPA team support members of the WFIG to engage with their local groups around their involvement with, and knowledge of the NMPA, as well as via the wider RCOG core involvement mechanisms including the Women's Network and the Women's Voices Involvement Panel.

# How the initiative has changed the project

The WFIG has altered the NMPA's presentation of information through our website, and in particular our presentation of rates and of organisational information.

One particular example relates to our discussions around birth without intervention (sometimes known as 'normal birth'). The Project Team had discussed including this as a measure of maternity care, but the WFIG felt that the word 'normal' was not acceptable to them. They expressed clear and consistent concern and the Project Team were able to use this in their discussions with external stakeholders, such as the maternity transformation programme. The final agreement is that the term 'birth without intervention' should be used instead. Furthermore, the WFIG were concerned that this measure may be used as a target, and create unfair bias in favour of non-delivery of care (for example, if a woman does not receive an epidural as requested); therefore, when this measure is published in 2019, the WFIG will have clear and structured input into the explanatory text. In this way, the WFIG have demonstrated their power to focus the conversation on positive patient outcomes.

The WFIG have kept the focus of the NMPA on the conversation between healthcare providers and women and families, and support the introduction of a toolkit for the discussion of outcome measures with healthcare professionals. This will be developed alongside the NMPA's next clinical report, due for publication early 2019.

### Women and families' view

(Note, the NMPA does not use the term patient to describe women giving birth).

Members of the WFIG have consistently reported that they feel the workshops are well coordinated and structured, and are a meaningful opportunity to inform the development of the audit. They feel they are comfortable giving their views around the shape of the audit and how the results should be best communicated to ensure women and their families are able to use the findings to feel empowered about their choices.

"I thought it was very well structured and the whole day was facilitated brilliantly."

"So interesting listening to others and their views. I think that as a group of \*just\* Mums we have been made to feel like an integral part of the audit. It's brilliant to see that the importance of women and families' views has been heavily considered. Everyone at the RCOG has been fab. Thank you for allowing me to be involved."

"I have loved every minute of being involved and it was an honour to speak today in front of so many leads and experts. The lecture theatre was full of collaboration, inspiration, passion and drive."

One of the members of the NMPA WFIG wrote a blog piece about her involvement: <a href="https://southwarkbelle.com/2018/02/01/get\_ting-involved-offline-the-national-maternity-and-perinatal-audit/">https://southwarkbelle.com/2018/02/01/get\_ting-involved-offline-the-national-maternity-and-perinatal-audit/</a>

#### **Contact Details**

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**Project:** National Maternity and Perinatal

Team involved: NMPA project team