



Briefing from the Pregnancy and Baby Charities Network for Westminster Hall debate on Progress towards the National Ambition to reduce baby loss - Tuesday 20 July, 9.30am

About the Pregnancy and Baby Charities Network

The Pregnancy & Baby Charities Network is a network of national charities who are committed to improving outcomes and reducing inequalities for new and expectant parents and their babies. We work to:

- Make the UK the safest place in the world in which to have a baby, regardless of ethnicity, income or circumstances
- Give all sick and premature babies the best chance of survival and quality of life
- Provide every family with the bereavement care they need after pregnancy and baby loss.

Introduction

Now is a critical time for perinatal care. Recent reports from the Health and Social Care Committee, the Ockenden Review of maternity services at Shrewsbury and Telford Hospital NHS, the ongoing investigation at East Kent NHS Trust, and the devastating revelations from Nottingham University Hospitals Trust, highlight just how much more there is to do before the UK is the safest place in the world in which to have a baby.

Progress towards the National Ambition

As we emerge from the extraordinary pressures of the past 18 months, we believe it is vital that the Government take the opportunity to reset and refocus perinatal services across England on meaningful and long-lasting transformation. Because, while there has been progress towards reducing the stillbirth and neonatal death rate, there has been limited progress towards achieving any statistically significant reduction in the rate of brain injury, and the ambition to reduce preterm birth is currently “not on track to be met,” according to the recent report from the Health and Social Care Committee’s Expert Panel.

We are calling on the Government to take additional steps to achieve the National Ambition to halve stillbirths, neonatal deaths, maternal deaths, and brain injuries by 2025 by:

- Publishing an annual report through the Department of Health and Social Care on implementation, milestones, and achievements, to support ongoing transparency about areas of progress and areas where work still needs to be done
- Improving quality of care in line with NICE guidelines and reduce variation in service delivery
- Establishing an expert maternity task force in every region of the country to work with services which are identified as performing poorly by clinical audit or the Care Quality Commission (CQC)
- Including neonatal deaths below 24 weeks within reporting figures and a plan to reduce late miscarriage losses
- Setting an ambitious target to achieve continuity of carer throughout pregnancy, birth, and beyond by prioritising those with a higher risk of poor outcomes
- Implementing the Smoking in Pregnancy Challenge Group recommendations to ensure smoking in pregnancy is reduced to 6% by 2022 in line with the Government's 2017 ambition.

Question: Will the Government commit to taking these steps?

Expanding the National Ambition to include other areas of avoidable and preventable pregnancy loss

Reducing twin stillbirths and neonatal deaths by 50% is key to delivering between 5-7% of the total number of baby deaths that need to be avoided to achieve the National Ambition.

The latest MBRRACE-UK Confidential Enquiry into Stillbirths and Neonatal Deaths in Twin Pregnancies found that 'in around 1 in 2 baby deaths, the care was poor. If care had been better it may have prevented the baby from dying'.

Miscarriage care should be improved in line with recommendations recently published in the Lancet *Miscarriage series*.

The PBCN therefore calls for an expansion of the National Ambition to:

- Reduce avoidable and preventable losses in multiple pregnancies
- Introduce a graded model of care giving parity to mental and physical health and care after each miscarriage
- Make emergency miscarriage care available to all 24/7
- Ensure specialist recurrent miscarriage services are available no more than one-hour drive from home

Question: Will the Government commit to expanding the National Ambition to include other areas of avoidable and preventable pregnancy loss?

Tackling inequalities

While the overall stillbirth and neonatal death rates have reduced, our Network is particularly concerned that babies from minority ethnic and socio-economically deprived backgrounds remain at an increased risk of death.

Inequalities in outcomes exist for women during pregnancy and childbirth and their babies. Women from Black, Asian or other minority ethnic groups, those who live in deprived areas and those with severe and multiple disadvantage have poorer pregnancy outcomes and higher maternal death rates. The 2020 MBRRACE-UK Saving Lives, Improving Mothers' Care report shows that risk of maternal death in 2016-18 continued to be more than four times higher among women from Black ethnic minority backgrounds compared with white women, and the risk is twice as high for women from Asian backgrounds compared to white women.

The Office for National Statistics (ONS) latest Births and infant mortality by ethnicity in England and Wales release, published in May 2021, highlighted that there are substantial inequalities in infant mortality rates between white and other ethnic minority groups. Pakistani, Black Caribbean, and Black African babies were highlighted as having the highest mortality rates, some of this variation may be explained by other areas of inequality including deprivation. The association between social deprivation and child mortality is clear, and we also know that there are modifiable factors that can make a difference.

Question: In order to tackle this, will the Government commit to publication of specific, national targets before the end of 2022 that reflect a bold commitment to action on inequalities due to ethnicity and deprivation, underpinned by specialist pathways and work streams in every Local Maternity System. These should be developed in partnership with those who have relevant lived experience and build on the knowledge and expertise of specialist agencies in each area?

Enhancing data collection and sharing

Enhanced data collection and sharing is needed to identify groups whose outcomes are worse than the average, and to set targets for improvement. The PBCN recommend:

- Collecting and publishing data on loss during pregnancy pre-24 weeks' gestation including early pregnancy loss
- Ensuring Maternity Safety Action 24-hour notification of all perinatal deaths
- Ensuring data are consistently collected on ethnicity and complex social factors in pregnancy and the postnatal period so mothers' needs and outcomes can be better understood and such data to be publicly available in a form that is accessible
- Ensuring data are consistently collected on other adverse perinatal outcomes, including brain injury?

Question: Will the Government commit to enhanced data collection and sharing?

Giving all sick and premature babies the best chance of survival and quality of life

We are calling on the Government to give all sick and premature babies the best chance of survival and quality of life by fully implementing the neonatal transformation review by 2025, ensuring that all parents are at the heart of caring for their babies.

Over 100,000 babies are born premature or sick and admitted to neonatal care each year across the UK. NHS England's 2018 review of neonatal care highlighted significant variation in neonatal

resources and outcomes across England and set out a comprehensive programme of transformation needed to deliver consistent services across the country.

Question: Will the Government commit to this implementation plan to continue to be fully resourced, supported and delivered over the coming years to make progress in reducing neonatal mortality?

There is also a need for a trained specialist nurse for every baby in neonatal intensive care. Evidence is clear that consistent provision of 1:1 nursing for babies in neonatal intensive care correlates with improved survival, and 1:1 neonatal intensive care nurse staffing ratios are recommended in both the British Association of Perinatal Medicine Service standards and the Department of Health Toolkit for Commissioning Neonatal Care.

However, reviews against this standard routinely show it is not consistently met, in part because of a significant shortage of neonatal nurses.

Question to the minister: Will the Government commit to investments to develop the neonatal nursing workforce, including through the recruitment, training and retention strategies, to be upheld throughout the period of neonatal transformation to ensure a sustainable neonatal nursing workforce now and into the future?

Further information

Contact: Jess Reeves – jessica.reeves@sands.org.uk

More information: on the Pregnancy and Baby Charities Network is available [here](#).
The Network's 2021 UK Manifesto is [here](#).