

Sharing between maternity services and children's services Greater Manchester case study

Children's centres throughout Greater Manchester wanted to promote earlier engagement with pregnant women and new parents but they did not know who they were and how best to access their information.

The issue

Children's centres provide help and advice to parents, carers and children about child and family health, parenting, money, training and employment. This help and advice can be invaluable to pregnant women and new parents, and it can greatly improve outcomes for the family.

The children's centres wanted to engage with as many pregnant women and new parents as possible but did not have access to their contact details, leaving them reliant on word of mouth and generic advertising.

Reaching an answer

An initial evaluation showed that, although some work had been carried out and information sharing agreements had been signed by some authorities and NHS trusts, they were largely based on the draft agreements produced by NEWGG (now i-Network) in December 2010 and information sharing was not taking place.

An AGMA red book is given to all new mothers in Greater Manchester and contains a specific tear out page. At one of the early visits following the birth of the child, the page is filled out by the community midwife or health visitor, and then passed on to the relevant children's centre, either directly or via the local authority. However, this paper-based, postnatal record was not routinely being shared with the local authority. There was also no way of sharing contact details before the birth, even though it was felt that antenatal contact with the families would prove useful.

Pennine Acute Trust came closest to sharing the information and because they worked with 4 of the local authorities, they were chosen as a pilot site for the development of procedures that could be adapted by the other 6 NHS trusts across Greater Manchester.

Work had already been done by Pennine Acute Trust including:

- Drafting the information sharing protocol and agreement which contained details of the information that was to be shared.
- Working with midwives to ensure that any consent given to share information was informed consent.

Further work was undertaken to:

- Develop a process for extracting antenatal contact details from the Euroking system at the acute trust and electronically delivering them to the local authorities.

- Develop a process for taking the paper-based postnatal contact details and sending them on to the local authority.
- Provide contact details and secure email addresses for contacts at the local authority.

Outcomes

The first paper-based postnatal information was exchanged in July 2012 and the first electronic antenatal information was exchanged in September 2012.

It has since been discovered that contact details for pregnant women and new parents are being shared using a paper-based system between Wrightington, Wigan and Leigh Trust and Wigan MBC. This system is working well and is a fair substitute when it is difficult to make changes to the maternity services electronic systems.

Lessons learnt

In order to make sure that information sharing between the NHS trusts and local authorities could happen, special consideration needed to be given to the following points:

- Communication throughout the concerned organisations is essential. It was clear that, even where information sharing protocols were signed early in 2011, it did not translate into actual information sharing because operational staff were largely unaware of the strategic decisions being made.
- To ensure that the data sharing took place, many people were needed, including:
 - Information governance manager – NHS Trust
 - Information governance manager – LA
 - Lead midwife – NHS Trust
 - Midwives taking details when booking appointments
 - District midwives and health visitors collecting red book forms
 - IT system support staff – NHS Trust
 - Children’s services information management staff – LA
 - Children’s centre staff – LA
 - Caldicott Guardian – NHS Trust
 - Caldicott Guardian – LA
 - Someone with knowledge of both NHS and LA staff structures who could gather the cast together and move the process on
- Not all electronic maternity systems are capable of providing electronic files but there are ways around this and paper-based documents were better than nothing.
- As a result of the large number of people involved in making information sharing work, it was essential that an individual took responsibility for working on the process from start to finish.