Freedom of Information Request: Our Reference CTMUHB_222_21

You asked:

Services offered to BAME women in the Health Board

1. What services do you provide for BAME women in the antenatal period?

The current service involves a risk assessment as part of the booking process and care is planned based on that risk assessment.

There are no specific clinics identified for BAME women in the antenatal period.

2. What services do you provide for BAME women in Labour?

The current service involves a birth plan appointment with a midwife and/or obstetrician at around 36 week's gestation to ensure care in labour is individualised. At the onset of labour, a risk assessment as part of the routine care, to prioritise care based in individual need.

There are no specific clinicians identified with a *special interest* in BAME women's needs in labour.

3. What services do you provide for BAME women in the postnatal period?

The current service involves a review of the plan of care as part of the discharge process from hospital, Midwifery Led Unit or home post birth and care is planned based on that review and needs assessment.

There are no specific care pathways identified for BAME women in the postnatal period.

4. Do you caseload or offer continuity of care for vulnerable BAME women

There is no specific pathways of care for vulnerable BAME women.

All women have a named midwife to oversee antenatal and postnatal care. Continuity is prioritised and the service is working towards continuity targets identified in the All Wales Maternity Vision (2019), i.e. routine antenatal care should be given by no more than 2 community midwives and the discharge from maternity services should be undertaken by the named midwife to facilitate any questions or outstanding issues.

5. Do you offer Vitamin D supplementation or advise pregnant women to take them?

The service recommends Vitamin D supplementation following NICE guidance (2014). Women in low income families are provided with "Healthy Start" vitamin supplementation and appropriate information giving, readily available through Antenatal Clinic and their named Community Midwife.

Snap shot audits suggest good uptake of this service of around 75%. Training is provided by Public Health Specialist Midwife to community and clinic teams to ensure knowledge is updated and clear recommendations are implemented across the service.

6. Do you provide interpreting services in all consultations with pregnant women?

Yes via the "Language Line" service, which is available in all clinical areas. IPads available across service to support the online interpretation. Clear guidelines for use are available for all staff.

If face to face interpretation services are considered essential – this can be arranged in advance.

The standard is clear – family members are not to be used as interpreters and this standard is audited through the multi-disciplinary governance process.

7. Are there any other services that you offer that is not listed above?

None

<u>Services provided to BAME staff in your Health Board</u>

1. Do you have BAME forum in your trust

Cwm Taf Morgannwg University Health Board has a BAME staff network with over 260 members.

2. Health and wellbeing sessions (diabetic; BP checks; Mental health)

We have established well-being support via a new monthly on-line 'café' which aims to support staff from a well-being and mental health perspective, the first meeting focussed on support for staff who have friends and families affected by COVID-19 in India and other countries. Staff also have access to internal Mindfulness, Long COVID-19 Support and back to base sessions. CTM has recently commenced the roll out of weight management sessions for staff. We have also provided a range of other communications and support in relation to this e.g. access to spiritual and well-being support from our chaplains, Well-being team etc.

3. Professional midwifery advocates (PMA) sessions for BAME staff

None currently - general training roles are being rolled out through the BAME network with midwifery roles being highlighted for the future.

4. Are there any other services that you offer that is not listed above?

In addition to the on-line 'café' we have introduced the following:

- Celebrating Black History Month;

- Establishing a working group within the network with all roles filled by staff of Black, Asian and Minority Ethnic origin thus providing not just empowerment but development opportunities;
- Running a WhatsApp group for members which provides support on day to day issues, sharing information and general conversation;
- Providing well-being support during the current crisis for staff of Indian origin;
- Establishing a buddy system, staff have now been trained and it will be launched this month;
- Establishing an easily accessed system (the first in Wales) for reporting racism to enable staff to quickly access recourse to advice and support – to be launched this month as above;
- Including network members on all stakeholder reference groups for senior recruitment;
- Identifying staff of Black, Asian and Minority Ethnic origin to be trained in media and communications;
- Including network members in the review of our Employee Experience pathway, specifically attracting and recruiting staff, on-boarding, developing and retaining and moving on;
- Proactive work such as developing a video aimed at our Black, Asian and Minority Ethnic communities, encouraging uptake of the COVID-19 vaccine and delivered in range of languages by our own staff;
- One of our junior doctors has developed a welcome pack for overseas staff to understand a wide range of relevant issues from political structures to local expressions etc.
- We also support our local BAME outreach workers and partnership board in terms of linking them to our BAME staff and sharing information, enlisting support for their initiatives etc.
- We provide intensive pastoral support to newly recruited staff from overseas; and
- All of our staff have access to our Employee Wellbeing Services (please see attached).

During the pandemic CTM proactively identified and regularly wrote to our staff of Black, Asian and Minority Ethnic origin, encouraging them to undertake risk assessment and as part of this programme wrote to all staff whose ethnicity was not recorded on the Electronic Staff Record to request this information to gain a better understanding of the cultural diversity of our staff.. This enabled us to undertake pay gap analysis to inform our action plan. We also contacted staff via a regular newsletter, which has been sent out monthly for the last 5 months.

The above initiatives are also relevant to our health board's 'Values and Behaviours' framework, as treating everyone with dignity and respect and listen, learning and improving are fundamental to our cultural change.