

Introduction of Specialist Maternity Support Workers to optimise engagement with Treating Tobacco Dependency support services



Project Team

Role	Name	Organisation
Assistant Director of Midwifery/Clinical Lead	Dawn Morrall	ICB
Lead Midwife Healthy Lifestyles and TTD	Michelle Sterry	GHNHSFT
LMNS Midwife	Kay Davis	ICB
LMNS Health Visiting Lead	Sarah Duffy	ICB
Specialist Midwife - TTD	Penny Seaborn-Williams	GHNHSFT
Stop Smoking Advisor	Emma Williams	Healthy Lifestyle (HLS)
Project Manager	Clare Gallagher	ICB
Project Support	Fayez Fayez	ICB

About the Project

Although rates of smoking in pregnancy have declined over the last decade, Gloucestershire has not seen the reduction of the scale that is required amongst pregnant women to meet national targets. In order to reach the national smoking at time of delivery (SATOD) target of 6% by 2022 (Locally our SATOD rate was 10% in 21/22 and 9.5% in 22/23) additional resources are required in terms of leadership and capacity for a system-wide focus on the smoke-free agenda and reduction in smoking rates amongst pregnant women in Gloucestershire.

Aims & Objectives

To reduce the rate of women smoking at time of delivery (SATOD) by 1% by 2024 (this equates to an extra 7 women). We will focus this enhanced support in areas of Gloucester with higher deprivation indices that have been highlighted in equity and equality analysis as having highest rates of SATOD.

The project aims also include:

- Improving the number of opt-out referrals/training boost on Very Brief Advice (VBA) and opt-out referrals process.
- Improving engagement with TTD Support Services by introducing a Maternity TTD team targeting the Gloucester area where the rates are highest for smoking in pregnancy. This is based on the model used in Greater Manchester.
- Improving CO verified quits in line with national targets from Saving Babies Lives v3.
- Improving data quality, collection and sharing.

Measures Used

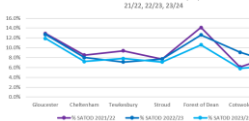
SATOB/SATOD data comparison, referral data, 4 week quit data

Quality Service Improvement and Redesign (QSIR) Tools

Run charts: Baseline data



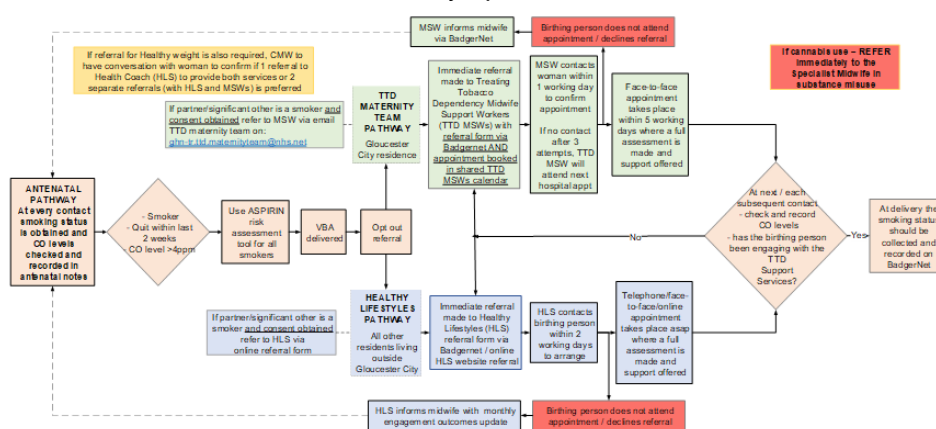
% Smokers at Time of Delivery by District



Infographic data Dec23 – Apr24



Pathway map



Project Outcomes and Impact

- Stakeholder mapping and fishbone diagram completed
- Full year baseline data mapping across maternity pathway completed
- Updated TTD in pregnancy and after childbirth pathway plus policies developed and approved within GHFT
- Recruited total of 3 TTD MSWs / 2 WTE and Project Support Midwife (0.4 WTE) who have undergone full training incl.
- Launch event – September 2023, service went live end of November 23
- GHFT website updated, staff comms circulated and infographic developed with data from first 4 months to be sent to Community Midwives
- New VBA Smoke-Free mandatory Training day session and annual e-learning module created – compliance as of end of April 24 = 72%
- Project risks and issues identified
- Smoke Free Homes and Health Visiting gap analysis completed
- VBA training from HLS for Health Visitors commenced
- Arrangements in place for NRT prescribing for MSWs using HLS pads and direct NRT supply available in antenatal clinic at GRH. SOP developed and agreed.
- DPIA in process to procure digital platform
- Data sharing agreements to be updated and agreed
- EOI completed for procurement of vapes and bid to be developed for financial incentive scheme

Learning for the Improvement Community

This project has demonstrated the importance of clear communication and investing time and engagement in getting data baselines. The MDT approach has improved communications and the progress of the pilot project.

It has also provided an opportunity for using improvement methodologies to support the project development. We will take the QSIR approaches into account following the pilot phase and evaluation in the possible expansion of the project across Gloucestershire.

#one_glos