

Maternity and Neonatal National Assurance Assessment

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Terms of reference

Wales maternity and neonatal assurance assessment stakeholder engagement

Background

The Cabinet Secretary for Health and Social Care has commissioned an assurance assessment of the maternity and neonatal services in Wales.

This nationally commissioned assurance assessment will focus on identifying areas of good practice and those of concern within maternity and neonatal care across Wales and will provide information and recommended actions that will improve the safety, quality and equity of maternity and neonatal care.

The assurance assessment will be led by an independent Chair and the final report is expected by the end of the calendar year.

The assessment will inform the refreshed recommendations for the maternity and neonatal safety support programme and will:

- Strengthen national oversight of perinatal (maternity and neonatal) care quality and safety through a unified, experience-led and evidence-based assessment, undertaken in partnership with service users, staff, providers, and system leaders.
- Promote equity and consistency by identifying and addressing unwarranted variation in care quality, outcomes, and the lived experiences of women and families.
- Accelerate improvement by capturing, celebrating, and spreading learning from exemplary practice across all services.
- Safeguard patients, families and staff by ensuring that any quality or safety concerns are rapidly identified, escalated, and resolved, with measurable and sustained impact.

The assurance assessment will consider whether health boards in Wales providing maternity and neonatal services have:

- Safe, effective, and person-centred service provision that reflects the priorities and commitments set out in the National Perinatal Quality Statement.
- Robust governance and oversight arrangements that promote accountability, transparency, and a culture of safety and learning.
- Appropriate identification, learning, and timely action in response to themes emerging from incidents, complaints, and concerns, with clear evidence of feedback loops and improvement.
- A positive organisational culture that values staff wellbeing and fosters multidisciplinary teamwork, alongside a strong commitment to women's, babies'

and families' voices, experiences, and outcomes as central to service design, delivery, and improvement.

Purpose

Stakeholder engagement plays a vital role in ensuring that the voices, experiences, and perspectives of women, babies, families, and staff are central to the assurance assessment, helping to shape meaningful, people-centred improvements in perinatal care.

This will be undertaken through a number of approaches. One of which will be a stakeholder panel. The purpose of this panel is to ensure stakeholders inform and critique the process of the assessment, and are fully engaged with the assurance assessment, to include the emerging themes, findings, and final recommendations. It will provide a forum for dialogue between the assurance assessment panel and the principal stakeholders with interests in the assurance assessment, during the assessment process, providing updates on progress.

In addition to the stakeholder panel, a women and families consultative group will be established supported by a series of women and family meetings. This consultative group will play a key role in understanding the experiences and expectations of women and families, using these experiences to shape future services.

The views of wider stakeholders will be obtained through a range of forums including one to one meetings, questionnaires and requests for information.

Learning will be shared openly with health boards and stakeholders throughout the assessment, so that improvements can be made quickly to strengthen the safety, experience, and outcomes for women, babies, families and staff in maternity and neonatal care.

Methodology and expectations

The methodology and expectations for the assurance assessment are set out in the Wales perinatal (maternity and neonatal) assurance assessment terms of reference.

Stakeholders

Women, families, and communities

- Women with recent lived experience of maternity and neonatal care (including positive, negative, and complex cases such as stillbirth, preterm birth, disability, or neonatal death).
- Partners, families, and carers of those who have used services.
- Representatives from seldom-heard communities including but not limited to global majority groups, LGBTQ+ families, people with learning disabilities, migrant or refugee women and women with substance misuse or safeguarding concerns.
- Parent and patient advocacy groups:

As highlighted above, the views and experiences of women, families and communities will be realised through a women and families consultative group supported by a series of women and family meetings and considered by the women, parents and family engagement workstream.

Maternity and neonatal workforce

- Midwives (including student, community, hospital-based, and consultant midwives)
- Neonatal nurses
- Obstetricians
- Neonatologists and paediatricians
- Anaesthetists and perioperative workforce
- Resident doctors and students
- Perinatal mental health specialists
- Allied health professionals
- Health visitors
- Maternity support workers
- Educators

The views and experiences of the maternity and neo-natal workforce will be gathered and assessed by the staff experiences workstream.

Clinical and organisational leaders

- Directors and Heads of Midwifery
- Clinical Directors of maternity and neonatal services
- Executive Directors of Nursing and Medical Directors
- Chairs and Chief Executives of health organisations
- Clinical governance leads
- Quality and safety leads
- Llais, HIW, HEIW and Royal Colleges – Royal College of Nursing (RCN), Royal College of Midwives (RCM), Royal College of Obstetricians and Gynaecologists (RCOG), Royal College of Paediatrics and Child Health (RCPCH), Royal College of Anaesthetists (RCoA), Neonatal Nurses Association (NNA)
- Regulatory bodies – NMC, GMC, Health and Care Professions Council

The views and experiences of the clinical and organisational leaders will be gathered and assessed by the stakeholder panel.

Role of the Stakeholder Panel

There are many stakeholders with an interest in this assurance assessment and regular communications and engagement will be in place throughout the process.

The stakeholder panel will serve to bring together key stakeholders (but will not include all) to:

- Represent the views of their organisations in relation to the assurance assessment and its activities, and where possible, the views of wider stakeholders.
- Consider the scope and terms of reference for the assurance assessment and provide a steer on priorities.
- Support the assurance assessment panel/team in identifying sources of information and analysis, strategies and proposals which may impact on, or need to be taken account of in the assessment.
- Review and provide feedback at key stages in the assessment process, to include feedback on the draft report, prior to finalisation.
- Facilitate a strong stakeholder 'voice' and communicate information to a wider group of local and national stakeholders.

Whilst the stakeholder panel is not a formal decision-making body; its perspectives are a vital part of the assurance process. The views and insights of members will be actively considered throughout the assessment, and the Chair will ensure they are meaningfully reflected and contribute, where appropriate, to the findings and outcomes of the assurance assessment.

Membership

Membership of the stakeholder panel and women and family's consultative group will be kept under review to ensure it continues to reflect the voices and interests of women, babies, families, and wider stakeholders throughout the assurance assessment process.

The family's consultative group will be chaired by the family engagement lead from the assurance assessment panel, reinforcing its role in keeping lived experience at the heart of the work. The stakeholder panel will be chaired by the independent chair of the assurance assessment panel.

Stakeholder organisations are encouraged to provide consistent representation by nominating one attendee for each meeting. Where this is not possible, a suitable substitute may attend to ensure that the perspectives of women, babies, and families continue to be heard and represented.

Secretariat

Secretariat for the meetings will be provided by NHS Performance and Improvement supported by Welsh Government-.

Meetings of the stakeholder panel will be virtual via MS Teams, at least monthly.

Version Control

Version 1	August 2025	Draft version for consideration by Independent Panel
Version 2	September 2025	Final version agreed by Independent Panel