



Use of knowledge management to design a service delivery intervention and the research agenda

Commissioners were concerned by the high rates of perinatal mortality and low birth weight in the Birmingham area. They consulted CLAHRC researchers to help with the refinement and evaluation of an intervention based on lay support.

Working with commissioners to develop an intervention

- A systematic review of social support in pregnancy showed that existing evidence was based on women with medical risk and most interventions were delivered by professionals.
- This and other searches indicated that a service using lay pregnancy outreach workers (POWs) in women with social risk was an unevaluated but plausible intervention.
- The systematic review also confirmed that such an intervention was unlikely to yield a measurable effect on perinatal mortality or low birth weight. It might, however, increase antenatal care attendance and reduce postnatal depression (PND) which is known to affect child development.

Does lay support for women having their first baby with identified social risk factors improve outcomes for women and their babies?

Working with commissioners to refine the intervention

- Service audit showed that multiparous women with social risk already had access to social support, so it was decided to restrict the intervention to first-time mothers.
- Data from a national study of mothers' views showed that they wanted better postnatal support so the POW service was configured to continue into the postnatal period.
- Preliminary work showed that it was hard to spot social risk factors in the antenatal notes, so an easy-to-use checklist was developed for the midwives to use.

Evaluation

- The above development formed the basis of the Evaluation of Lay Support In Pregnant Women with Social risk (ELSIPS) study - a randomised controlled trial of 1,324 women having their first baby who were randomised to either standard midwifery care or the addition of the POW service.
- The results are due in Spring 2013.
- This study is important because, for the first time, we will have evidence to show if lay support improves outcomes.

References

Kenyon S, Jolly K, Hemming K, Ingram L, Gale N, Dann S, Chambers J, MacArthur C. Evaluation of Lay Support in Pregnant Women with Social Risk (ELSIPS): a randomised controlled trial. **BMC Pregnancy Childbirth**. 2012; Feb 29; 12:11.



Recommendations for practice

This is a story of how collaboration between the NHS and university researchers can optimise service development.

What is CLAHRC for Birmingham & Black Country?

The Collaborations for Leadership in Applied Health Research and Care (CLAHRC) is a partnership between the University of Birmingham and a number of NHS organisations in Birmingham and Black Country. We are funded by the National Institute for Health Research with a mission to undertake high-quality applied health research focused on the needs of patients to improve health services locally and beyond.

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