Perinatal Pelvic Health Physiotherapy Services (PPHS)

The Challenge

The NHS Long Term Plan set a commitment to *improve access to postnatal physiotherapy to support women who need it to recover from birth* and to ensure that *women have access to multidisciplinary pelvic health clinics and pathways across England*. The Delivery Plan for Maternity and Neonatal Services required all Local Maternity and Neonatal Systems (LMNS) to commission Perinatal Pelvic Health Physiotherapy Services by March 2024.

The Programme

Cheshire and Merseyside LMNS commissioned I.H.S in July '22 to lead the establishment of a C&M PPHS service following a successful national pilot application, securing £550k to:

- Embed evidence-based practice in antenatal, intrapartum and postnatal care to prevent & mitigate pelvic health issues resulting from pregnancy and childbirth
- 2. Improve the rate of identification of pelvic health issues antenatally and postnatally
- 3. Ensure timely access to NICE-recommended treatment for common pelvic health issues antenatally and postnatally

Our Approach and Methodology

Utilising our programme management methodology, we developed at pace a detailed programme plan and robust programme governance ensuring an integrated approach with partners and stakeholders across the LMNS. This includes NHS Trusts, Community and Mental Health Trusts, Local Authorities, Maternity Voices Partnerships, NHSE, SCW CSU and other national pilot sites.

There is significant variation/inequity in services to support women with pelvic floor difficulties across C&M and a national shortage of specialist physiotherapists. Recognising this national shortage our priority was to quickly recruit and grow specialist skills to appropriately address pelvic health issues and reduce disparity of access for women requiring specialist physiotherapy. Recruiting new staff roles, training and upskilling the workforce was crucial to establishing a high quality, equitable PPHS.

We underpinned the PPHS programme with comprehensive engagement with service users and under-represented communities ensuring co-production of accessible services for women.

The Impact

We developed a hub and spoke model for PPHS services and successfully recruited a team of pelvic health physiotherapists, physiotherapy / midwifery assistants and PPHS Specialist Midwives. A bespoke PPHS competency-based training programme was designed for physiotherapy staff, Health Visitors and PPHS Specialist Midwives.



Standardised clinical pathways and SOPs covering PPHS responsibilities based on national best practice and clinical guidelines were developed, incorporating staff and women's feedback.

We directed the multi-lingual engagement team to work with system partners including MVPs and Voluntary Community & Social Enterprise sector to collect service user feedback from mothers across C&M including Black, Asian & Minority Ethnic groups and those living in the most deprived areas.

We launched a Women's Health campaign 'let's talk about pelvic health' including a series of webinars and information sessions specifically targeted at those women less likely to seek medical help and worked with community advocates to reach into communities where culturally these issues and conditions would not usually be discussed.

A PPHS Minimum Data set was established to ensure that referrals can be tracked and audited and monitor Referral to Treatment times and assess whether PPHS is being accessed at an equitable rate by those likely to experience health inequalities.

A PPHS Clinical Network was established, bringing together current clinical workforce and newly recruited physiotherapists and Specialist Perinatal Pelvic Health Midwives. The Network was key to sharing lessons learnt and best practice and provided a peer support group for the newly recruited clinical staff.

Conclusion

The C&M LMNS now has a fully functioning PPHS service, commencing within 6 months of our recruitment, and is now providing high quality care to women across C&M with the following outcomes:

- All women receive routine antenatal education on pelvic health problems to identify issues/seek treatment.
- All women receive pelvic floor muscle training as part of routine antenatal care
- All staff providing care and support are competent and confident in identification and management of pelvic health problems; accessing training as required to maintain their skills.
- Women are referred into PPHS in a timely manner.
- Clear and streamlined referral pathways are in place for all women for at least 12 months postpartum.
- Fewer women experience obstetric injury during birth; especially 3rd and 4th degree tears.
- There are fewer emergency readmissions into acute services due to wound breakdown.
- Women experience improved pelvic health antenatally and postnatally following treatment and intervention from PPHS services.

