

# Demonstrating the Value of the Local Maternity and Neonatal System (LMNS) in NorthWest London

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## Introduction

The Local Maternity and Neonatal System (LMNS) model was established to drive integrated, equitable, and evidence-informed improvements across maternity and neonatal services. NorthWest London's LMNS has played a pivotal role in aligning diverse providers under a unified vision to deliver safer, more personalised, and more effective care to families. However, in light of national reviews questioning the value of LMNSs, it is imperative to provide tangible evidence of the added value and unique impact of system-wide collaboration. This paper outlines the successes of the NWL LMNS across its three pillars—Assurance, Workforce, and Improvement—and identifies three cross-cutting benefits that could not have been achieved through isolated provider efforts alone.

## Three Key Benefits of System-Wide Working

### Enhanced Equity and Inclusion

The LMNS has funded and implemented a sector-wide Equity and Equality strategy, including cultural safety midwife roles and significant training programmes, that addresses racial disparities in access, outcomes, and experience. Such initiatives depend on shared leadership, pooled resources, and aligned objectives, all of which are made possible through the LMNS structure.

### Operational Efficiency and Shared Innovation

From workforce planning to pathway standardisation, system-wide working has enabled streamlined implementation of national asks such as the midwifery student expansion programme, international recruitment and OSCE training for international recruits. This efficiency reduces duplication, maximises resource use, and ensures consistent care standards across providers.



## Improved Service User Experience and Outcomes

Integrated delivery of services like personalised care plans, perinatal mental health services, and smoking cessation support has demonstrably enhanced accessibility, continuity, and person-centred care. These improvements rely on cross-sector alignment and would be fragmented without a coordinated LMNS.

## Summary of LMNS Achievements Across the Three Pillars

Project/Initiative	Pillar	National/ System Requirement	Implemented	Impact/ Improvement	Could this have been achieved without LMNS?
Neonatal and Stillbirth Audits	Assurance	National	Ongoing	No gaps identified; shared learning across providers	No – Shared audit capacity and learning structures
Maternal Death Review and Inequality Action	Assurance	National	2022–23	Targeted interventions for Black, Asian, and Mixed ethnicity service users	No – Requires system-wide coordination and critical friend review
Midwifery Student Expansion	Workforce	National	2022–23	Student intake increased by 42%	No – Ensured equitable support across providers
Cultural Safety Roles and Training	Workforce	System-identified	2022–25	Training and workshops across providers	No – LMNS-funded and coordinated
Perinatal Mental Health Service	Improvement	National	2023	Improved access to equitable, timely care across the sector	No – Requires cross-sector collaboration
Learning response reviews and learning	Assurance	System-identified	Ongoing	Theme analysis led to system-level improvements to postnatal care	No – Coordination required for cross-sector analysis
Diabetes WG	Assurance	System-identified	Ongoing	Pathway standardisation for SBLCBv3	No – Requires collaborative implementation
Neonatal WG	Assurance	System-identified	Ongoing	Cross-site review and analysis	No – Shared expertise needed
Fetal Wellbeing WG	Assurance	System-identified	Ongoing	Standardised guideline on fetal movements and next steps towards system wide	No – Sector-wide agreement required



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				approach to fetal monitoring and interpretation	
Equity and Equality Strategy	Workforce	National	2022-23	Three-year plan with system-wide solutions to address inequalities	No – Requested explicitly for LMNS
Digital Strategy	Workforce	System-identified	2022-23	Digital strategy finalised and implemented	No – LMNS-led development
Mum & Baby app	Workforce	System-identified	Ongoing	Enhanced communication with service users	No – LMNS enabled development and rollout
Bespoke Trust MDT Cultural Safety Workshop	Workforce	System-identified	2023-24	Mandatory cultural safety workshops across all providers	No – LMNS-funded
Above Difference Training	Workforce	System-identified	2023-24	Transformative training for senior leaders	No – LMNS-funded and evaluated
OPEL/IUT Implementation	Workforce	Regional	2023-24	Standardised escalation and transfer policies	No – Improved efficiency via LMNS
Combined Staffing Report	Workforce	System-identified	2023-24	Quarterly standardised staffing reporting	No – Only feasible through LMNS
International Recruitment	Workforce	System-identified	2023-24	40 international midwives recruited; reduced agency costs	No – Enabled by LMNS-led HR processes
OSCE Programme	Workforce	System-identified	2024-25	Sector-wide preparation for international midwives; cost savings	No – Coordinated LMNS support essential
Professional Development Midwives for Intl Staff	Workforce	System-identified	2023-24	Funded roles improved clinical support and retention	No – LMNS funded and coordinated
Cardmedic App	Workforce	System-identified	2022-25	Pilot project to improve interpreting	No – LMNS funding and pilot delivery



Project/Initiative	Pillar	National/ System Requirement	Implemented	Impact/ Improvement	Could this have been achieved without LMNS?
				services	
Listening Services	Improvement	National	2022	Ensured family voices are heard and responded to	No – Structure ensures quality and consistency
Personalised Care Support Plans	Improvement	National	2022–23	Motivational interviewing training delivered across the sector	No – Substantial planning and team support via LMNS
Translation of PCSPs	Improvement	National	Oct-23	Top six languages included; improved equity	No – Needed system-wide consistency
Supportive Signposting	Improvement	National	Oct-23	Sector-wide launch to improve access to health and social care	No – Relies on multi-agency coordination
Perinatal Pelvic Health Service	Improvement	National	Mar-24	Enhanced early support and referral pathways	No – Multi-disciplinary collaboration needed
Post Birth Contraception Service	Improvement	National	2022	Preventative care offered before discharge	No – Economies and effectiveness via LMNS
Tobacco Dependency Services	Improvement	National	Ongoing	In-house cessation support with better engagement	No – Requires local authority and maternity alignment
Enhanced Maternity Continuity of Care	Improvement	National	2022	Improved outcomes and trust; targeted at high-need populations	Partial – Full consistency needs LMNS
Postnatal Care Standardisation	Improvement	Regional	Ongoing	Standardised postnatal care across sector	No – Effective coordination only possible via LMNS

## Conclusion

North West London's LMNS has demonstrably delivered value across strategic priorities—from assurance to equity to service transformation. The ability to act as a convenor, a funder, and a system integrator has enabled projects of scope and impact beyond what any individual provider could achieve alone. Its role in fostering collaboration, reducing



variation, and amplifying innovation is evident in every pillar. As a system in addition, we have celebrated and shared our successes across London and wider. As we consider the future of LMNSs nationally, NWL's experience offers clear proof of their unique contribution and enduring relevance in driving safe, equitable, personalised and integrated maternity and neonatal care.