



**We support
twins, triplets
and more...**

News release

Wednesday February 26

A report released today warns babies' lives are being put at risk by maternity staff ignoring multiple birth guidance

Today's BeCOME report (Better Care of Multiples – an Exploration) reveal shocking variations in clinical practice and care for twin and triplet pregnancies in all parts of the UK.

Babies from a twin or triplet birth are still not getting the correct level of care from many NHS hospitals.

Healthcare staff are failing to follow multiple birth guidance QS46 set out by NICE, despite recommendations to do so featuring in the Government's Saving Babies' Lives Care Bundle¹.

Units in England are already being paid more to deliver a higher level of care via the tariff² but evidence is showing that the money is not getting to the frontline. If units don't improve their care they will also be in breach of their new NHS contracts.

More than 1,000 parents of twins and triplets who had given birth in the last four years responded with the data clearly highlighting the variability of practice.

Keith Reed, CEO at Twins Trust said: "This report shows that opportunities to save twin and triplet babies' lives are being repeatedly missed.

"What's worrying is it's almost a decade since the NICE guidance showing how good care can be delivered was published. But this report shows huge gaps in maternity units delivering care in this way. There are no excuses left for hospitals not to change. We've even set up our own quality improvement team to help them."

With funding from the Department of Health and Social Care in 2016, Twins Trust set up a quality improvement project with the specific aim of improving care for families

expecting twins or more. In just 12 months, there was a marked improvement in outcomes in 27 units who took part.

The most recent results come two years after the first phase of the ground-breaking project was carried out.

They show a 23% reduction in neonatal admissions, an 18% reduction in neonatal deaths, 7% reductions in stillbirths and a 6% reduction in emergency c-sections.

“Good care is saving babies lives,” says Jane Gorringer, from Twins Trust who manages the project, “and we have the evidence to prove it.

“What is frustrating is that only 10% of the units we contact take part in the project despite the evidence showing the improvements it creates.

“These latest results are incredible and show that units continue to follow NICE multiple birth guidelines after we have gone.”

As part of the project, midwives experienced in multiple births audit units and discuss how following the correct appointment schedule and delivery timing for each type of multiple pregnancy maximises the chances of the best possible health outcomes.

They provide access to multiple birth care proformas and twin-specific growth charts and show how, in practice, the guidelines can be followed.

Jane added: “Continuity of care is a huge factor to improving outcomes. Giving care in this way creates the chance for more in depth conversations to take place.

“Parents who see someone different at each appointment often have to describe their situation over and over again which limits the effectiveness of the discussion.

“This can increase the risk of parents receiving inconsistent and conflicting advice which can lead to anxiety.

“A few simple changes can have astonishing outcomes.”

More than 10 units have signed up to pay for the project themselves (DoHSC funding stopped in 2019) but sadly uptake has gone down by two thirds.

Keith Reed said: “This is massively frustrating because we know NHS Trusts and the Government has the money. But there is a lack of urgency.

“Trusts are being paid to deliver care in this way, via the tariff, and getting a huge amounts back from the Maternity Incentive Scheme³ – £millions in fact. Our quality improvement scheme costs each unit just £8,000.

“The average cost of a stay in neonatal care for one baby is £6,112 and improving care in this way saves this many times over.

“I particularly want NHS Resolution to check that any trusts applying for the Maternity Incentive Scheme understand that in order to meet the twin specific requirements of Element Two of the Saving Babies Lives Care Bundle (2019), they need to implement the standards set out in NICE QS46, and that we can support them to do that.

“Local clinical commissioning groups also need to be checking that when they pay for care to be delivered in this way, it’s actually being delivered. At the moment, too few do.

“We call on the Department of Health and Social Care to acknowledge that our project is a key contributor to achieving the Better Births ambition, especially the improvement in continuity of carer among a vulnerable group as set out in the NHS Long-Term Plan.”

Professor Mark Kilby, from Birmingham Women’s Hospital, said: “These data published in the BeCOME Report outline that Multiple Birth antenatal clinics are far from universal in the maternity services infrastructure and care organised in specialist clinics is at best ‘patchy’ within the UK.

“There are of course areas of satisfaction and good practice in maternity care. However, this report highlights that there is no room for complacency in the care of women with multiple pregnancies.

“There needs to be improved investment of resource by NHSE and commissioners so that the designated multidisciplinary care, within specialist multiple clinics allowing continuity of care is universally established and to allow the momentum reducing perinatal mortality in twins and triplets to continue.”

Headlines from the BeCOME report

- The number of parents seeing a specialist consultant has fallen, (see graph on page 59)
- 3 out of 10 parents see or were not sure if they saw a specialist obstetrician, midwife or sonographer
- With twin and triplet pregnancies classed as high risk, often resulting in prematurity, 35% did not discuss how they wanted to deliver their babies before 32 weeks
- Some parents felt they weren’t listened to
- Many parents did not feel prepared for prematurity with only 28% having a discussion about the risks and signs of pre-term labour before 24 weeks. This is often a sign that a unit doesn’t have a specialist team looking after multiple pregnancies. (Through its quality improvement project, Twins Trust will continue its work to try to stop babies needing neonatal care)
- 36% of professionals felt advice about prematurity could be improved

- Of those parents whose babies required neonatal care, 38% were offered the chance to visit the unit before the birth and overall satisfaction with neonatal care was high
- several parents did not have a positive experience of postnatal care...this may reflect the move from multiple specific antenatal care to more general post-natal care where the level of expertise in caring for multiples may be lower. This has been a recurring theme since the 2012 survey (<https://twinstrust.org/uploads/assets/d4bdb2cb-acfc-40d3-bbf5e52202a1d520/Health-Survey-March-2012-final.pdf>)
- More than half surveyed saw the same consultant all or most of the time, 52% saw the same midwife all or most of the time and a quarter saw the same sonographer all or most of the time which shows a lack of continuity of care
- Professionals surveyed were more positive about the adherence to NICE guidelines than parents, showing that parent's experience of care may not be as positive as professionals may think.

Notes to Journalists

For further information on multiple births please contact Alyson Chorley alysonchorley@twinstrust.org or pressoffice@twinstrust.org call 01252 332344 / 07791 383494.

Twins Trust is the only UK-wide charity dedicated to improving the lives and wellbeing of families with twins, triplets or more. Representing 20,000 members and 100 local clubs in the UK, Twins Trust provides help and support to both parents and professionals to meet the unique challenges faced by multiple birth families. We invest in research to save lives, change lives and create better futures for multiple birth families. We also run a unique quality improvement project at Maternity Units to encourage and help with adherence to NICE QS46.

¹Saving Babies Lives Care Bundle - aims to halve stillbirths and neonatal deaths by 2025.

²Tariffs – NHS England pay hospitals when multiples are born. Each pregnancy gets the “intensive tariff” for antenatal care and the “intermediate tariff” for post-natal care which works out as a total extra of £2,368 per pregnancy.

³Maternity Incentive Scheme – launched in 2018 by NHS Resolution, the legal arm of NHS Trusts in England, in order to improve maternity care and reduce the cost of errors. Trusts have to certify that it meets 10 safety stands to quality for payments

For further information, please visit www.twinstrust.org

1. Follow us on: Twitter/Facebook/Insta @twinstrust
2. For confidential and emotional support for families with multiples, please call Twinline which is staffed by trained volunteers that are parents of multiples and can offer support on sleeping, feeding, crying, behaviour, discipline, school issues or special needs. It is free to call on 0800 138 0509 and is open Monday to Friday from 10am–1pm and from 7pm–10pm.