

What mechanisms drive the successful delivery of high-quality maternity care within organisations? A realist review



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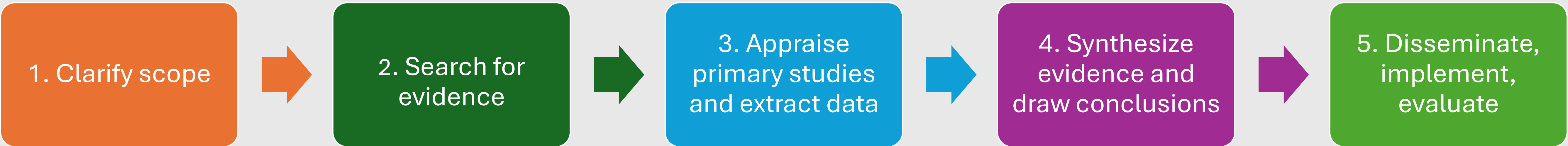
Introduction:

Safe, high-quality maternity care is an essential component of healthcare provision to ensure the wellbeing of mothers, birthing people and their babies. However, there are known challenges and struggles to deliver great maternity care that leads to low rates of adverse outcomes, an optimal use of resources, and high rates of maternal and staff wellbeing consistently and equitably within England.

Objective:

Our review seeks to synthesise these issues framed within a different focus, drawing on ‘what works well’ through identifying and learning from successes in maternity care and through using a realist perspective that seeks to understand the context and mechanisms that produce (positive) outcomes to provide causal explanations of what works, why and how.

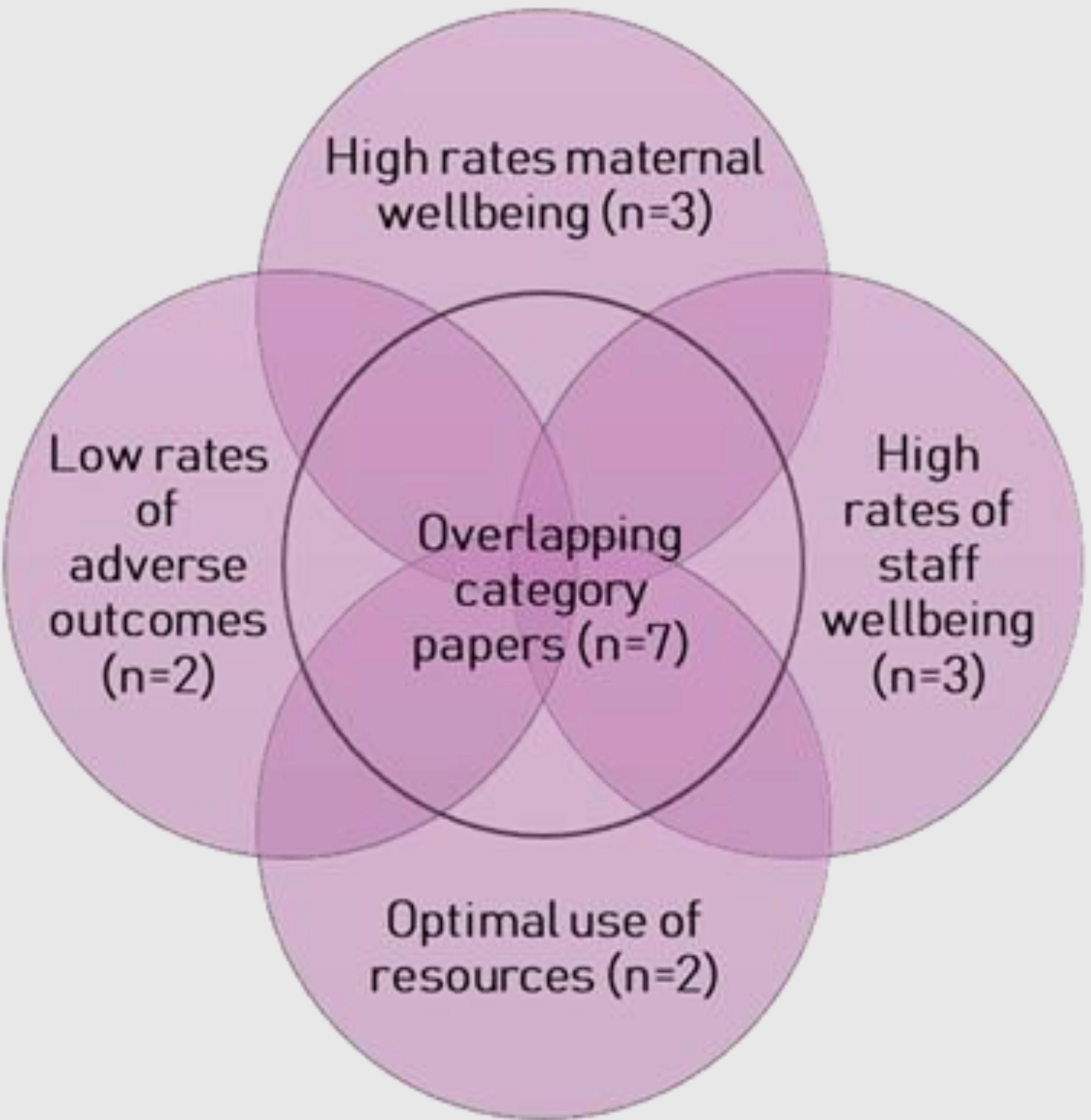
Methods: Key steps in realist review
(Pawson et al., 2005)



Steps taken so far:

- Background search ~ 17 index papers included
 - Generating Context-Mechanism-Outcomes
 - Initial Programme Theory (IPT) development
 - Stakeholder and PPI engagement
- 10 IPTs, 6 selected and four taken forward for testing

Fig. 1 pre-established outcome indicators and number of index papers



Stakeholder engagement and PPI:

- Representatives of a governing body or organisation
- Patient or service user representatives
- Frontline staff (midwives, obstetricians, neonatologists, anaesthetists)
- Maternity managers
- Academics (lecturers/researchers)

Themes of the four chosen IPT's:

1. High-quality maternity adopts a broader definition of safety (beyond just physical safety);
2. The organisation of maternity care is centred on women's values and individualised/personalised needs by resourcing staff effectively;
3. Visible and supportive leadership enhancing the workplace and safety culture;
4. The system & workplace environment supports optimal clinical performance.

Next steps:

- Create a search strategy per IPT
- Search the literature and test the hypotheses (IPT's) for confirming / disconfirming data
- Refine the IPT's, draft conclusions, and disseminate

Example Initial Programme Theory:

High-quality maternity adopts a broader definition of safety (beyond just physical safety)

IF maternity organisations, leadership and staff adopt a perspective of safety that includes both technical/clinical safety and psychological, emotional and cultural safety as defined by all stakeholders involved in maternity care which is embedded throughout all governance structures intelligent data gathering, and resourcing,
THEN all stakeholders adopt and champion a broad perspective on safety, creating a clinically, emotionally, culturally and psychologically safe environment for all
LEADING TO all four outcome indicators (Fig. 1).