

Improving access to health care

Médecins du Monde (MDM) UK has launched a new online forum - HEALTHlink - to improve access to healthcare services for migrant workers, asylum-seekers and refugees.

The new network will provide a forum for midwives and other healthcare professionals to exchange information and best practice to help marginalised people access health care.

The charity says that undocumented migrants have common reoccurring problems when trying to access services they are entitled to. The forum aims to be an opportune place for people to share their experiences and find out where they can get information quickly. All too often language barriers and not being able to



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understand how bureaucracy works, means this section of the community is completely reliant on health professionals to obtain the services they require.

MDM UK's director Susan Wright says: 'This is a call to action, to help the UK's most vulnerable. This group is nearly invisible; they live alongside us, but are not able to visit a doctor or dentist when they need them most. Through the new

network we will link up healthcare professionals who are determined to change this. They will work together to provide access today and they will urge the government to take steps to ensure access tomorrow.'

It is hoped that the forum will be a tool for influencing policy with members, providing information and taking part in research.

New members can sign up to the forum at: www.mdmhealthlink.org.uk

Call for overall maternity strategy for Wales

An independent watchdog has called on the Welsh Assembly Government to develop a comprehensive strategy for maternity services.

This follows a review of the provision of maternity care in Wales - the strategy should highlight good practice and offer guidance on local service planning.

As part of the review, the Wales Audit Office surveyed women about maternity provision and found that a 'significant minority' of women felt they were not always treated with dignity and respect or kindness and understanding.

Antenatal care generally met

good practice guidelines, but some women did not receive enough check-ups and there was generally low attendance at antenatal classes. The way labour was managed also gave rise for concern. A significant minority felt they were left alone and worried during or after labour and some Trusts could have done more to prevent unnecessary caesarean sections (CS). Women were least satisfied with the postnatal phase of care, with over a third of women unhappy with the quality of support they received for infant-feeding.

Most Trusts have now developed action plans aimed

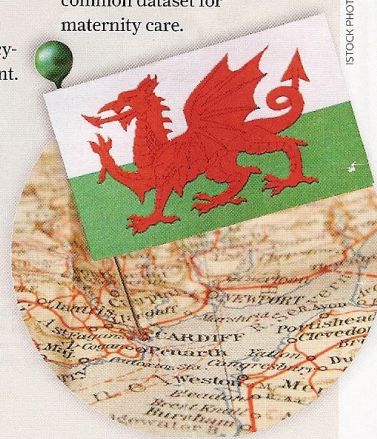
at addressing the issues the audit office has highlighted, but it has not assessed the effectiveness of these plans.

The RCM's UK Board for Wales board secretary Helen Rogers said that the RCM welcomes the recommendations, although it does pose a number of challenges for the service, those who work in it, policy-makers and the government.

The College welcomes the call to develop a comprehensive strategy document that sets out a vision for maternity services. It also welcomes the proposal that where midwifery staffing levels fall below recommended levels, local health boards should undertake an assessment

of the adequacy of their staffing requirements for delivering safe and high-quality services.

And, while there is work to be done, especially in relation to CS some of the proposals are already being implemented, such as the caesarean toolkit and the start of work on a common dataset for maternity care.



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