

Avoiding Brain Injury in Childbirth (ABC) Local Clinical Leads

Department:	Patient Safety
Salary:	Dependent on current experience
Hours of work:	0.4 WTE Obstetrician and 0.4 WTE Midwife. We will consider job shares.
Term:	Secondment, minimum seven-month period with possible extension, subject to funding.
Base:	Cambridge. This role will require being on site at hospitals across the East of England. There may be an occasional requirement to attend meetings in Cambridge.
Reports to:	Maternity Clinical Improvement Lead or equivalent in the Patient Safety team
Closing date for applications:	4 August 2025 8am
Date of Interview:	Obstetrician – 12 August 2025 Midwife - 13 August 2025

About Health Innovation East

Great ideas only make a difference for our health when they are put into practice. We are one of 15 regional Health Innovation Networks that support the introduction of innovative technologies, devices and care pathways to transform health and care.

Health Innovation East, the innovation arm of the NHS in the region, comprises of a team of over 60 clinicians, data scientists, life sciences industry experts and skilled programme leaders passionate about helping the best innovations in health and care reach the people, places and problems where they bring the most benefit.

<https://healthinnovationeast.co.uk/>

Our values and commitment to equity, diversity and inclusion

Health Innovation East is fully committed to being an inclusive employer, affording equity of opportunity and welcoming applicants from broad and diverse backgrounds. Staff at Health Innovation East have come together to co-produce our values and expected behaviours. Our values focus on providing trusted expertise, being inclusive, kind and collaborative in all our working relationships and implementing innovations that truly matter to our communities and partners.

What are we looking for?

We are looking for colleagues who share not only our values but also our enthusiasm and commitment to making a difference for our communities. We are united by being dynamic, curious, creative and adaptable. We appreciate the value of evidence and also enjoy trying new and different approaches to solving problems and are comfortable with ambiguity and unanticipated challenges.

ABC Background:

We are looking for midwives and obstetricians to join our Clinical Faculty for the Avoiding Brain Injuries in Childbirth (ABC) Programme. This national initiative aims to significantly reduce avoidable brain injuries during childbirth by 2027 through improved clinical practice, teamwork, and communication.

The ABC Programme focuses on two key clinical challenges:

- Detecting and responding to fetal deterioration during labour (IFD)
- Managing impacted fetal head at caesarean birth (IFH)

By implementing the tools with structured training, we're striving to improve outcomes and experiences for mothers, babies, and families across England. If successful, this programme could reduce litigation costs by up to £1.4 billion annually, alongside significant improvement in care quality. More details can be found [here](#).

Key responsibilities:

- **Provide clinical leadership** to the implementation of the programme across the region
- **Deliver training to trust or site leads** on managing intrapartum fetal deterioration (IFD) and impacted fetal head (IFH), ensuring fidelity to the ABC Programme methods.
- **Provide ongoing coaching and support** (both informal remote support and formal on-site supervision) to Trust training leads to ensure continuous adherence to ABC training methods.

- **Support visits to individual trusts/sites** to oversee and validate training delivery.
- **Collaborate closely with Patient Safety Collaboratives (PSCs) and maternity colleagues**, offering clinical insight to support implementation, quality improvement initiatives, and alignment with existing maternity safety and deterioration strategies.
- **Participate in monthly reporting meetings** with the national Perinatal Deterioration Operational Group (PDOG), providing feedback on training and implementation progress.
- **Support effective integration of ABC training into mandatory staff training** schedules within trusts/sites
- **Support any planned events** or cascade of key messages to perinatal colleagues.
- Additional deliverables may be required but will be discussed and agreed prior to initiation of the workstream.

Corporate and personal responsibilities

- Promote equal opportunities and affirm that staff, colleagues, patients, and others who encounter Health Innovation East are afforded equality of access, experience and outcomes.
- Observe Health Innovation East's equity, diversity and inclusion pledges in every aspect of your work, avoiding any behaviour which discriminates against colleagues, potential employees, patients, or partners on any grounds
- Uphold and promote the organisation's values
- Work flexibly and collaboratively with others to achieve the organisation's goals and support its values
- Support the organisation in creating an environment that values risk management and promotes the highest standards of health and safety for Health Innovation East's employees, supported by policies and procedures as appropriate
- Ensure up to date knowledge is maintained and comply with current data protection laws and company data protection and confidentiality policies and procedures
- Ensure that we only operate within our remit of not offering clinical advice
- Adhere to all company policies and procedures and any applicable legislation

Person specification:

	Essential	Measured at:	Desirable
Qualifications and training:	Educated to degree level in relevant subject, or with equivalent experience in healthcare. Professional clinical registration (obstetrics or midwifery)	Application	Managerial or leadership qualification
Knowledge and understanding:	Understanding of the aims and objectives of the ABC implementation programme	Application / Interview	Experience of working across system boundaries, e.g. in leadership role, or in change programme
Experience:	Experience of multidisciplinary training (ideally perinatal teams)	Application / interview	Experience of a clinical leadership role
Skills:	Strong influencing and negotiating skills Strong written and verbal communication skills and the ability to adapt and appeal to various audiences. Ability to manage own workload and prioritise work in response to changing requirements and demands Proficient in use of a range of IT software, including MS Word, Excel and PowerPoint	Application / Interview	

	<p>Good communication skills – ability to receive and understand complex information, summarise and disseminate to varied audiences</p> <p>Ability to develop strong working relationships with a wide range of stakeholders</p> <p>Ability to travel regularly across the East of England region</p>		
Disposition/ Aptitude:	<p>Ability to manage any part-time working hours flexibly to meet the demands of the role</p> <p>Ability to maintain credibility of self and the team</p>	Application/ Interview	

This job description is not exhaustive and is intended to be a guide to the principal generic duties and responsibilities required of the post only. It may be amended at any time with the agreement of the post holder and the post holder's line manager

Appointment will be subject to evidence of right to work in the UK and an enhanced DBS check, due to the potential for the postholder to be working in an environment with children and vulnerable adults.

Personal development responsibilities

- Understanding and awareness of own personal development needs
- Maintenance of a compliant professional portfolio where required

Key relationships

Internal – all Health Innovation East's employees will be expected to form key relationships within the organisation relevant to the role.

External – in addition, the successful appointee will need to develop and build relationships with external colleagues as relevant to the role. These may include, but are not limited to, relationships with:

Clinical and operational colleagues within partner organisations, may include but not exclusively:

- NHS Trusts and NHS Foundation Trusts in the East of England
- Integrated Care Systems and Boards in the East of England
- NHS England (regionally and nationally)
- Other Health Innovation Networks
- Care Quality Commission
- Local Government
- Third Sector Organisations
- Patient Advisory Groups/Services

How to apply

To apply please submit your CV and a covering letter, by 8am, Monday 4 August 2025 to recruitment@healthinnovationeast.co.uk specifying your motivation for applying and how you meet our person specification. For an informal discussion, please contact caroline.angel@healthinnovationeast.co.uk.

This job description is intended as an outline of the general areas of activity and will be amended in the light of the changing needs of the organisation.

APPENDIX 1

***Extract from specification (programme guidance):**

Role of Fetal Deterioration Clinical Faculty supporting implementation of Impacted Fetal Head and Intrapartum Fetal Deterioration programmes

Team Definitions for the purpose of the specification:

PDT – Perinatal Deterioration Team.

The team within the Maternity and Neonatal Programme within NHS England responsible for the implementation of the Avoiding Brain Injuries in Childbirth programme.

PSC – Patient Safety Collaborative.

Delivery partners providing the supportive mechanisms, such as Quality Improvement, implementation and safety expertise, for each site in their HIN geography.

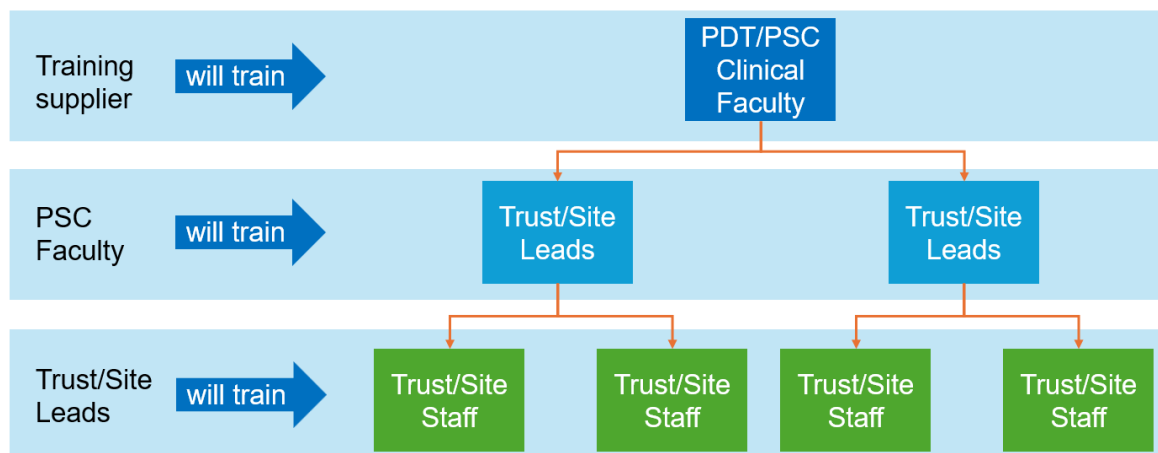
Clinical Faculty

Subject matter experts providing clinical credibility to the delivery of the training component of the ABC programme. The clinical faculty will comprise of Obstetric and Midwives trained to deliver IFH and IFD in a way that continues to provide high fidelity to the ABC approach.

Context

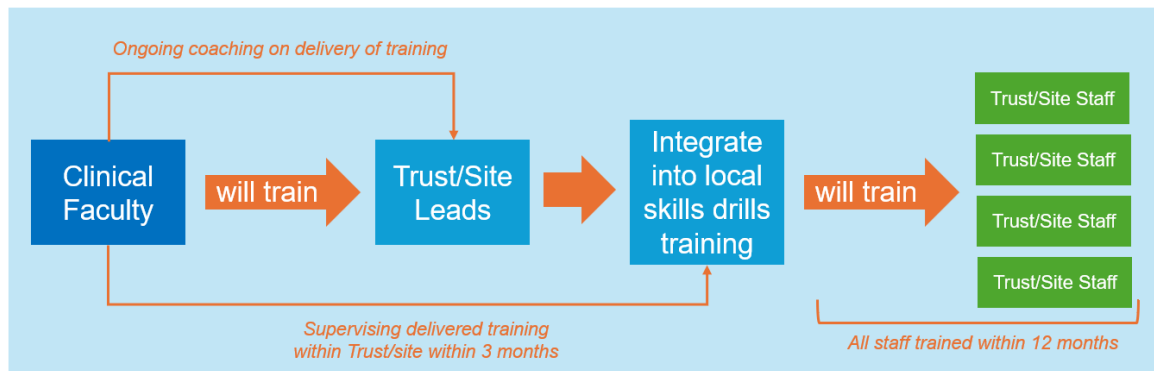
- The Avoiding Brain Injury in Childbirth (ABC) collaborative have developed two new pathways/tools to support best practice with regard to intrapartum fetal deterioration (IFD) and the management of impacted fetal head at caesarean section (IFH).
- The training developed by the ABC collaborative for both IFD and IFH has been designed to be delivered and taught by clinicians with expertise in obstetrics and midwifery.
- The model we are employing for this is a cascaded training programme. Where an external training provider (subject to procurement) will provide the training to the clinical faculty and PSCs. The clinical faculty (T3) will in turn provide the training to the leads within the individual organisations (T2) (Trust/Site Leads) who will in turn train their own clinical staff (T1). T2 training can be held in an offsite venue compiling of more than one organisation/site where necessary.
- It is important for the PSCs to also undertake the training, not to deliver it, but to have a holistic view of both IFH and IFD, which will provide both credibility and insight when supporting implementation.
- Based on current expectations and subject to recruitment and procurement requirements:

- External training provider (subject to procurement) to have fully trained all PSC faculty in both tools/programmes by October/November 2025.
- Clinical faculty, with support from PSCs, to have trained all Trust/site leads (T2) on IFH training to be completed where possible in the financial year 2025/26.
- Clinical faculty, with support from PSCs, to have trained all Trust/site leads (T2) on IFD training where possible by end of August 2026.



Core roles

- The plan is for clinical faculty supported by PSCs within each of the 15 HINS (once trained) to provide training to Trusts/Site leads on both programmes. The PSCs will be able to provide vital support on quality improvement and implementation techniques, along with supporting feedback to the Perinatal Deterioration Operational Group (PDOG). The PSCs are also well placed to advise on alignment of the culture and leadership programme and provide insights from wider deterioration work in maternity and neonatal services.
- This training will be delivered to the Trust/site training/education leads, who in turn will deliver the training to the clinical teams.
- The clinical leads will also provide ongoing coaching and support to these Trust leads.
- This coaching will be both in the form of informal remote as well as formal on-site.
- In addition, there will be an expectation for the clinical faculty to go and supervise training sessions within the individual Trusts/sites to ensure ongoing fidelity of the training.
- Each team of clinical faculty will require sufficient capacity to support all Trusts/sites within their HIN geography.



Intrapartum Fetal Deterioration (IFD)

- The clinical faculty, supported by the PSC, will need to structure delivery of training for all Trust/Site leads to start in November and be completed where possible by the end of August 2026.
- The training for IFD will be ongoing alongside IFH over the initial six months but then activity can increase accordingly.
- The clinical faculty, supported by the PSC, will need to agree with each Trust/site that they will provide staff to be trained and agree to integrate the training into planned mandatory training for the following 18 months for all relevant staff.

Assumptions

- There will be an equal balance of midwifery and obstetric lead time in each PSC team. This provides the credibility to clinical teams and ensure fidelity of the ABC approach is maintained.
- Training of individual Trust/site teams does not necessarily have to be undertaken by midwifery and obstetric leads together and can flex depending on the number of people being trained within each Trust/site.
- Training for each Trust/site team on **either** programme will take 3-4 hours.
- Following training of Trust/site teams the clinical leads will go back to oversee at least one training session in person (half day minimum, per programme, within 3 months) and will provide further check in calls with those Trusts/sites (supported by the PSCs).
- For multi-site Trusts it may be appropriate for teams from multiple sites to be trained together.

Impacted Fetal Head (IFH)

- The clinical faculty will need to structure delivery of training for all Trust/Site leads to start in November and be completed where possible by the end of the financial year 2025/26.
- Part of the core offer as well as training will be to provide additional training materials to support the implementation of the IFH training. Where there

are existing relevant training materials available these will not be replaced. The Perinatal Deterioration Team are sourcing the required equipment for delivery of the programme. The PSCs and clinical faculty will support the scoping of these requirements with local training/education leads.

- The need for additional training materials will be based on a per site basis and the baseline requirement will be for each site where training may occur to have access to the PROMPT Flex manikin with the Enhanced Caesarean Section Module and a PROMP flex baby.
- The PSC and clinical faculty will need to agree with each Trust/site that they will provide staff to be trained and agree to integrate the training into planned mandatory training for the following 12 months for all relevant staff.