



We support all maternity service users to navigate the system as it exists, and campaign for a system which truly meets the needs of all

25th June 2025

To: Wes Streeting, MP, Secretary of State for Health and Social Care

Dear Wes Streeting

I am writing this open letter on behalf of AIMS (Association for Improvements in the Maternity Services) in response to your announcement of a rapid national investigation of maternity and neonatal services and to offer our support for this initiative. AIMS welcomes the long-overdue recognition that maternity service failings are a systemic issue that needs an NHS wide response. We feel strongly that what is needed now is not more talk, but action. We hope that the review will move swiftly to focus on nationwide implementation of the necessary improvements. We would go further, and suggest that you liaise with colleagues across the whole of the UK, recognising that this issue is not confined to England. .

Too often we have seen Trusts fail to implement recommendations from national and local enquiries without being held to account. As you so rightly said in your speech “There’s too much obfuscation, too much passing the buck and giving lip service, too much shrugging at a cultural problem that we fail to address.” This is something that AIMS has repeatedly sought to highlight. NHS England’s Maternity Transformation programme never achieved the intended transformation and now appears to have been downgraded ([www.aims.org.uk/campaigning/item/maternity-transformation-where-are-we](http://www.aims.org.uk/campaigning/item/maternity-transformation-where-are-we)). We hope that this new initiative will not suffer the same fate.

We believe that the taskforce needs to focus on a clear and effective plan for ensuring that evidence-based recommendations, especially those from the [Better Births report](#), inform co-production of care pathways with maternity service users, and that these care pathways are then implemented, adequately funded, and evaluated regularly. This will require transparent monitoring of progress, with data published at local and national level.

There also needs to be a recognition that radical change is required. It will not be enough to set targets. NHS Trust managers and staff at all levels will need to embrace new ways of working that genuinely put women and their families at the centre of care.

**Association for Improvements in the Maternity Services**

**Registered Charity No. 1157845**

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Like you, AIMS is appalled by the suffering caused to families when poor care has led to the death or injury of a baby or a mother. However, deaths and serious injuries, tragic as these are, are just the tip of the iceberg in terms of the damage that families are suffering because of how they are treated by the maternity services. AIMS, and particularly our helpline volunteers, hear far too many distressing stories of obstetric violence—where women feel unheard, unsupported, and traumatised by the care they receive, as described in our position paper [aims-position-paper-obstetric-violence.pdf](#). The report of the [Birth Trauma APPG](#) highlighted how many thousands of women are affected by trauma, even when their births have appeared to be 'straightforward'.

You ask “how can we ensure that women and their partners are always listened to when they raise concerns about their pregnancy or labour?” AIMS believes that a model of relational care (known as Continuity of Carer [aims-position-paper-continuity-of-carer.pdf](#)) is essential to tackle this issue. If a woman is cared for through pregnancy, birth and afterwards by a midwife whom she comes to know and trust, this both enables her to feel confident in raising concerns and makes it more likely that her concerns will be heard and acted on. You also mention your understanding that sharing a personal account with a stranger is difficult. Yet under the current system women are expected to repeatedly share their past experiences with a succession of different carers. This is not only distressing, but risks important details being lost.

Continuity of Carer has been recognised as particularly important for women from Black, Asian and minority ethnic communities and from the most deprived groups. AIMS hopes the review will maintain support for current plans to implement Midwife Continuity of Carer as set out in the CORE20+5 agenda. However, we would like to see the review go further and produce a plan to implement the Better Births recommendation that “Every woman should have a midwife, who is part of a small team of 4 to 6 midwives, based in the community who knows the women and family, and can provide continuity throughout the pregnancy, birth and postnatally.”

Another issue which you mentioned in your speech, is the widespread lack of staff. Staffing levels need to be properly monitored, in order to make sure there are adequate numbers of midwifery, obstetric, and other staff to provide high quality maternity care. The recent CQC report “[National review of maternity services in England 2022 to 2024](#)” says “To keep people safe and ensure that people receive consistently safe, good quality care, we expect services to ensure there are appropriate staffing levels and skill mix. Through our inspection programme, we found variation in this area. Some services had good oversight of staffing levels.” It is shocking that most did not.

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You say that the new National Maternity and Neonatal Task Force will bring together experts, staff, campaigners and representatives of families. As a lay-run organisation that has campaigned tirelessly for improvements to the UK's maternity services for 65 years, AIMS is keen to play a part in this. Please let us know how we can get involved.

Best wishes

Nada Higson on behalf of the AIMS Campaigns Team  
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### **What is AIMS?**

Since 1960, AIMS has been a leading advocate for improvements in UK maternity care. We are a lay-led organisation with national and international links, and a membership that includes health and care professionals as well as lay people. Collectively, our volunteers have decades of experience researching, advocating and campaigning for improvements in UK maternity care. We run an email and telephone helpline for women as they seek to navigate the maternity services, and we offer a range of information resources. We have a large network of people, via our volunteers and members, who engage regularly with mothers, health care providers and others. We use our knowledge, influence and experience to work collaboratively with others to support policy change at local and national level.

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