



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

17th August 2026

Dear Helen Morgan

The AIMS Campaigns Team have seen that you have proposed the [motion F8](#) - Tackling the Maternity Crisis - for your forthcoming party conference. It is really good to see political parties engaging on this issue - thank you.

We wonder whether we might encourage you to include an additional point in your motion, and call for **all women to have access to a community-based full pathway continuity of midwifery carer model of care**.

This model means that a woman's whole maternity journey is supported by an individual midwife who provides most of the midwifery care throughout, including during birth, and supports all other interactions with the service. In effect, the continuity midwife becomes a "key account holder" coordinating the mother's care. Too often, women and families are left to coordinate their own care, repeating information, navigating services, and chasing responses. This proposal shifts that burden back where it belongs: onto the system. It offers a single point of responsibility across the pathway, helping to ensure that care is joined up and that concerns do not fall through the gaps.

This model of care has proven safety benefits and responds uniquely well to the call in both the Amos and the most recent Ockenden report to better 'listen to women'. It enables a relationship based on mutual trust and respect to develop between mother and midwife, encouraging clear and accurate communication, which is essential for safety. It also allows for a highly focused attention on the individual woman's needs and her autonomy. Having this kind of relationship supports women to feel confident in raising concerns and makes it more likely that these concerns will be heard and acted on.

AIMS firmly believes that this policy must be taken off the 'too hard' pile and delivered. We see it as a key 'moonshot' policy that must be included in the forthcoming Modern Service Framework. As the Amos report says "Continuity of carer is not a luxury - it is a clinical safety mechanism, and service design must reflect that."

[This paper](#) from KCL researchers sets out the excellent evidence-base for the policy, even stronger now than when it was included in the Better Births (2016) recommendations, in part thanks to learning from [implementation efforts in South London](#), where this model of care was supported by National Lottery funding (which has now come to an end). We find [this six minute video](#) particularly poignant in terms of giving a sense of the quality of care that was provided under this programme.

Association for Improvements in the Maternity Services

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You can also find more information about the policy, from a lay perspective, in [the AIMS position paper](#) and our [most recent campaigns article](#) on the topic.

Thank you for considering this suggestion, and please do not hesitate to let us know if we can be of any further assistance on this matter.

We are also copying this letter to Layla Moran MP and Alison Bennet MP. We are pleased to see that they are members of the Parliamentary and Mayoral Expert Reference Group, part of the National Maternity and Neonatal Taskforce structure set up by the Department of Health and Social Care. AIMS is represented on the Charities and Third Sector Expert Reference Group, so we look forward to working with them in that context.

Yours

Nadia Higson for the AIMS Campaigns Team

Cc Layla Moran MP
Alison Bennett MP

Who 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. 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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