

# **Maternal Reducing Inequalities Care Bundle (MRICB)**

Information for Primary Care (Pilot Sites)



## Briefing for Primary Care: Maternal Reducing Inequalities Care Bundle (MRICB) Pilot

### Purpose of this Briefing

This briefing is to inform primary care colleagues across London that the **Maternal Reducing Inequalities Care Bundle (MRICB)** pilot has now launched across six maternity sites at Barts, Chelsea and Westminster and GSTT.

Primary care plays an essential role in early engagement, continuity, health promotion, and supporting equitable access to maternity services.

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### About the MRICB

The MRICB is a targeted intervention designed to reduce longstanding inequalities experienced by Black and South Asian women and birthing people. The Care Bundle focuses on four key components that are known to reduce preventable harm and improve outcomes:

- Improving early access to care
- Strengthening communication and use of interpretation
- Increasing awareness of vitamin D supplementation in pregnancy
- Ensuring a consistent response to reduced fetal movements

Primary care teams are essential partners in supporting these aims—particularly through timely referral, accurate health promotion, and consistent messaging.

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### Vitamin D Supplementation: Updated Pilot Guidance

As part of the MRICB pilot, participating maternity sites are **increasing the recommended dosage of vitamin D supplementation** during pregnancy for women and birthing people who meet criteria for deficiency risk.

#### What primary care should know

- Women and birthing people may present with questions about the updated vitamin D offer at maternity sites.
  - The increased dosage is in line with pilot guidance and is being monitored for effectiveness and acceptability.
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- Please continue to provide routine advice on vitamin D as per national guidance and reassure women and birthing people that the change they may hear about at maternity sites relates specifically to the MRICB pilot.

If helpful, this pack contains a short FAQ for practice teams and reception staff (Appendix C).

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## Pan-London Maternity Self-Referral Form

1. A **Pan London online maternity self referral form** is now available and can be used by all pregnant women and birthing people and birthing people to directly access maternity services in their preferred trust (Appendix B).

### What primary care should do

- **Signpost pregnant women and birthing people to the online form at the earliest opportunity** — including during telephone triage, initial discussions, health checks, and opportunistic encounters.
- Use consistent language such as: *“You can refer yourself directly for maternity care using the Pan London self-referral form. You don’t need a GP appointment to start your maternity care.”*
- Encourage early referral—ideally before 10 weeks’ gestation.


If you would like posters, QR codes, or website copy for practice use, we can provide these.

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### Why This Matters to Primary Care

Primary care professionals are often the first point of contact in pregnancy. Your role is vital in:

- Supporting **early access** to maternity care
  - Ensuring **consistent messages** about vitamin D, interpretation needs, and reduced fetal movements
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- Helping reduce gaps in access and outcomes for **Black and South Asian women and birthing people and birthing people**
  - Strengthening partnership working between general practice, maternity services, health visitors, and community organisations
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### What Happens Next

- The pilot is live now across six London maternity sites until summer 2026.
  - Evaluation will take place throughout to understand what works best for women and birthing people, families, and staff.
  - Primary care will receive updates through ICS Comms channels, GP bulletins, and the London Region Maternity Team.
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### Where to Find More Information

2. If you would like further detail, digital assets, or briefing materials for practice staff, please contact: [england.maternity.londonregion@nhs.net](mailto:england.maternity.londonregion@nhs.net)



## Appendix A: Positive Pregnancy Test (Suggested Accurx Reply)

You have recently had a positive pregnancy test. Please book your first assessment with maternity services using the link below at your preferred hospital:

Refer yourself for NHS pregnancy care – NHS: <https://www.nhs.uk/nhs-services/refer-yourself-for-nhs-pregnancy-care/>

We recommend starting the following from the day you get a positive pregnancy test:

- 400 micrograms of folic acid daily throughout pregnancy
- 1000 IU of vitamin D daily during pregnancy and while breastfeeding. More information is available here: <https://www.nhs.uk/pregnancy/keeping-well/vitamins-supplements-and-nutrition/>

If you have any health conditions for which you see a GP or hospital doctor, please contact the practice, as you may need a different dose of vitamins.

For further advice on diet, vitamins, pets, and other important topics, please see read: <https://www.nhs.uk/pregnancy/finding-out/health-things-you-should-know-in-pregnancy/>



**VITAMIN D IN PREGNANCY**

All women require a minimum of 400IU/day Vitamin D supplementation during pregnancy, but the below categories require a higher maintenance dose during pregnancy and when breastfeeding.

- High Risk Population for Vitamin D insufficiency:
- BMI > 30
  - Risk of pre-eclampsia
  - Risk of GDM
  - EDD November – March
  - Non-Caucasian
  - Women who cover skin when outside
  - Housebound

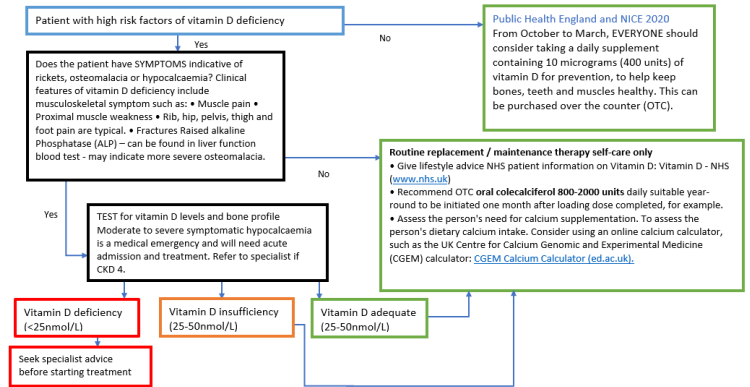
Supplement with a minimum of 1000 units per day

See below for local trust guidelines if considering a Vitamin D blood test. If uncertain about whether someone should have more than the recommended amount of Vitamin D listed above, please consult the flowchart below.

SEL Clinical Guideline for the Management of Vitamin D insufficiency and deficiency in Adults

**INTERPRETATION OF RESULTS AND MANAGEMENT**

Management of Vitamin D levels in adults over 18 years of age (Excluding CKD 4 and above)  
Routine testing for 25 hydroxyvitamin D level is not recommended



## Appendix C: Pan-London Self-referral form

Please click on the icon to open the form.



Pregnancy Care  
Self-referral Form (M:

# Frequently Asked Questions (FAQ) for Primary Care Providers

## 1. What is the MRICB pilot?

The Maternal Reducing Inequalities Care Bundle (MRICB) is a programme designed to reduce inequalities experienced by **Black and South Asian women and birthing people and birthing people** by focusing on early access, communication and interpretation, vitamin D supplementation, and responses to reduced fetal movements.

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## 2. Why does primary care need to know about this?

Primary care is often the first point of contact in pregnancy. Clear signposting, early referral, consistent messaging, and awareness of the updated vitamin D offer help ensure women and birthing people access care promptly and receive accurate, equitable support.

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## 3. What is changing with vitamin D supplementation?

Participating maternity sites are **increasing the dosage of vitamin D supplementation** for eligible pregnant women and birthing people as part of the pilot. This is evidence based and being evaluated. Primary care should continue providing routine vitamin D advice as per national guidance and be aware that women and birthing people may ask about the pilot's higher dose.

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## 4. Do GPs need to prescribe the increased vitamin D dosage?

No. The increased dosage is provided within maternity services at participating pilot sites. GPs should offer standard guidance and reassurance but do not need to make changes to prescribing.

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## 5. What should I tell women and birthing people about the Pan London maternity self-referral form?

You should encourage women and birthing people to self-refer as early as possible, ideally before 10 weeks' gestation, using the Pan London online form. This form allows women and birthing people and birthing people to refer directly to their chosen maternity service without needing a GP appointment first.

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## 6. How can we access the self-referral form?

The form will be available at all six participating pilot sites online maternity page:

- Guy's and ST Thomas Hospital
  - Newham Hospital
  - Royal London Hospital
  - Whipps Cross Hospital
  - Chelsea Hospital
  - West Middlesex Hospital
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## 7. Does this change the GP's role in early pregnancy care?

No. The GP's role remains important for:

- Ensuring early referral
- Identifying safeguarding concerns
- Reviewing pre-existing medical conditions
- Providing continuity for non-pregnancy care

This pilot simply streamlines access to maternity services.

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## 8. Is there training or information we can share with reception teams?

Yes. Short scripts, FAQs, and signposting materials can be provided to ensure consistent messages from reception and administrative staff.

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## 9. What about interpretation needs?

The MRICB emphasises consistent use of professional interpreters.


If women and birthing people disclose communication needs during primary care interactions, please:

- Record interpretation requirements
  - Encourage women and birthing people to highlight this during self referral
  - Avoid reliance on family members for interpretation
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## 10. How will primary care be updated as the pilot progresses?

Updates will be shared via:

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- ICS and GP bulletin communications
  - London Region maternity updates
  - Optional weekly pilot drop-ins

If you would like to be added to the update distribution list, the maternity team can arrange this.

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## **11. Who can I contact if I have questions?**

Please contact: [england.maternity.londonregion@nhs.net](mailto:england.maternity.londonregion@nhs.net)

We can also provide printed materials, digital assets, and briefing slides for team meetings.

## Appendix E – Social Marketing Campaign Poster Examples

Access to Care - English



**Are you pregnant, breastfeeding or planning to get pregnant?**



Taking Vitamin D helps your baby develop strong bones and reduces your risk of complications.

Vitamin D is free for many and can be taken in tablet or liquid form.

Search 'NHS pregnancy vitamins' online or speak to your midwife to find out more.



SCAN HERE

Access to Care - Gujarati



**શું તમે ગર્ભવતી છો, સ્તનપાન કરાવી રહ્યા છો અથવા ગર્ભવતી થવાનું આયોજન કરી રહ્યા છો?**



વિટામિન D લેવાથી તમારા બાળકના હાડકાંને મજબૂત રીતે વૃદ્ધિ કરવામાં મદદ મળે છે અને જટિલતાનું જોખમ ઓછું થાય છે.

વિટામિન D ઘણા માટે મફત છે અને તે ટેબ્લેટ અથવા પ્રવાહી સ્વરૂપમાં લઈ શકાય છે.

વધુ જાણવા માટે ઓનલાઇન 'NHS pregnancy vitamins' શીધો અથવા તમારી મિડવાઈફ સાથે વાત કરો.



SCAN HERE

Access to Care – Somali



**Miyaad leedahay uur cusub?**



Iskaa isugu gudbi ballantaada ugu horreysa ee umulisada sida ugu dhaqsaha badan marka aad ogaato inaad uur leedahay.

**Miyaad u baahan tahay caawimaad?**

Ka baadh onlaynka 'NHS pregnancy self refer' ama la hadal GP-kaaga si aad wax badan uga ogaato.

Haddii aad u baahan tahay turjubaan, keliya codso — waan ku faraxsanahay inaan ku caawinno.



SCAN HERE

Vitamin D - English



**Are you pregnant, breastfeeding or planning to get pregnant?**



Taking Vitamin D helps your baby develop strong bones and reduces your risk of complications.

Vitamin D is free for many and can be taken in tablet or liquid form.

Search 'NHS pregnancy vitamins' online or speak to your midwife to find out more.



SCAN HERE