

Paper 8

Recommendation <input type="checkbox"/> DECISION <input checked="" type="checkbox"/> NOTE	For information
Reporting to:	Trust Board
Date	3 May 2018
Paper Title	Maternity Metrics
Brief Description	<p>The purpose of this report is to provide the Trust Board with an overview of data within the new maternity metrics for April 2018. The report highlights:</p> <ul style="list-style-type: none"> • Ten clinical quality maternity metrics • Clinical Quality Improvement Metrics (CQIM) • National Maternity Indicators (NMI) • Other Maternity metrics <p>In brief the new dashboard will report on the following:-</p> <p>Key Messages:</p> <ul style="list-style-type: none"> • The new maternity dashboard is in line with nationally recommended indicators derived from the work of the maternity transformation programme • The new dashboard also takes in to account the findings of wave one of the National Maternity Neonatal Health Safety Collaborative (SaTH is in wave 2) • All new metrics are measured against nationally available data • SaTH Maternity has a higher normal birth rate, a lower caesarean section rate and lower episiotomy rate than national data • SaTH Maternity has a lower rate of 3rd/4th degree tears, a lower rate of assisted (operative) births and a lower rate of postpartum haemorrhage than national data • SaTH Maternity has exceptionally high rates of skin to skin contact following birth – 100% and in cases where babies require admission to neonatology, parents have a consultation with a senior member of the team in 100% of cases <p>The new dashboard will be reported to both Quality and Safety Committee and externally to CQRM.</p>

	<p>Top ten clinical quality maternity metrics:</p> <ol style="list-style-type: none"> 1. Normal birth rate 2. Caesarean section rate 3. 3rd/4th degree tears 4. Postpartum haemorrhage 5. Episiotomy 6. Assisted birth (primips) 7. Stillbirth 8. Neonatal death 9. Consultation with parents 10. Skin to skin <p>Clinical Quality Improvement Metrics (CQIM)</p> <ol style="list-style-type: none"> 1. Smoking rate at booking 2. Normal birth rate 3. Caesarean section delivery rate in Robson group 1 women 4. Caesarean section delivery rate in Robson group 2 women 5. Caesarean section delivery rate in Robson group 5 women 6. 3rd and 4th degree tear rate among women delivering vaginally 7. Rate of postpartum haemorrhage of 1500ml or greater 8. Rate of successful vaginal birth after a single previous caesarean section 9. Smoking rate at delivery 10. Proportion of babies born at term with an Apgar score <7 at 5 minutes 11. Proportion of babies born at term admitted to the neonatal intensive care unit 12. Proportion of babies readmitted to hospital at <30 days of age 13. Breastfeeding initiation rate 14. Breastfeeding rate at 6-8 weeks <p>National Maternity Indicators (NMI)</p> <ol style="list-style-type: none"> 1. Mortality and morbidity 2. Clinical care and health promotion 3. Choice and continuity 4. Experience 5. Organisational culture
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Recommended / escalated by	N/A
Previously considered by	N/A
Link to strategic objectives	SAFEST AND KINDEST - Deliver the kindest care in the NHS with an embedded patient partnership approach
Link to Board Assurance Framework	If we are unable to implement our clinical service vision in a timely way then we will not deliver the best services to patients (RR 668)
Equality Impact Assessment	<input checked="" type="radio"/> Stage 1 only (no negative impacts identified) <input type="radio"/> Stage 2 recommended (negative impacts identified) <input type="radio"/> negative impacts have been mitigated <input type="radio"/> negative impacts balanced against overall positive impacts
Freedom of Information Act (2000) status	<input checked="" type="radio"/> This document is for full publication <input type="radio"/> This document includes FOIA exempt information <input type="radio"/> This whole document is exempt under the FOIA

The purpose of this report is to provide the Board with an analysis of data within the new maternity metrics for April 2018. The report highlights the ten clinical quality maternity metrics, the Clinical Quality Improvement Metrics (CQIM), the National Maternity Indicators (NMI) and Other maternity below:

Maternity Metrics	SaTH	National	Source
Episiotomy rate overall	11.1%	22%	NMPA
Overall assisted birth – Primip	18.5%	25.3%	NMPA
Overall assisted birth – Multip	3.2%	5.6%	NMPA
Skin to skin contact within 1 hour of birth	100%	79.8%	NMPA
Babies breastfeeding at discharge	58.1%	68.1%	NMPA
Shoulder Dystocia rate	0.8%	Between 0.58% and 0.70%	RCOG
Induction of labour rate	35.8%	30.2%	NMPA
Percentage of babies < 2500g	2.04%	2.31%	GIRFT
Percentage of deliveries from mothers with placenta- praevia and abruption (spontaneous, unassisted vaginal delivery)	0.39%	0.71%	GIRFT

Maternity Clinical Quality Improvement Metrics

Sarah Jamieson
Head of Midwifery
March 2018



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Background

- **Better Births**, the report of the National Maternity Review was published in February 2016 and set out a clear vision: for maternity services across England to become safer, more personalised, kinder, professional and more family friendly; where every woman has access to information to enable her to make decisions about her care; and where she and her baby can access support that is centred on their individual needs and circumstances.
- Implementing the vision set out Better Births will support the Secretary of State's ambition to halve the number of stillbirths, neonatal and maternal deaths and brain injuries by 2030
- The **Maternity Transformation Programme** seeks to achieve the vision set out in Better Births by bringing together a wide range of organisations to lead and deliver across 9 work streams
- **The Sharing Data and Information work stream** aims to improve data and information collection, quality and sharing so it can be used to drive maternity service improvement at local, regional and national levels
- During autumn 2016, a consultation was held with stakeholders to come to a consensus on a set of Clinical Quality Improvement Metrics. In addition, a consultation with stakeholders was conducted during March and April 2017 to come to a consensus on a first version of National Maternity Indicators

Ten clinical quality maternity metrics - SaTH

Metric	SaTH	National	Source
Normal birth rate	71.9%%	66%	NMPA
Caesarean section rate overall	20.2%	27.8%	NHS MS
3rd and 4th degree tear rate among women delivering vaginally	2.2%	3.5%	NMPA
Rate of postpartum haemorrhage of 1500ml or greater	1.7%	2.6%	NMPA
Episiotomy rate overall	11.1%	22%	NMPA
Overall assisted birth – Primip	18.5%	25.3%	NMPA
Stillbirth rate	0.38% (2015)	0.38% (2015)	MBRRACE
Neonatal death rate	0.14% (2015)	0.17% (2015)	MBRRACE
Consultation with parents – Nationally 90% of parents had a documented consultation with a senior member of the neonatal team within 24 hours of their babies admission	100%	90%	NNAP
Skin to skin contact within 1 hour of birth	100%	79.8%	NMPA

CQIM Shrewsbury and Telford Hospital NHS Trust (SaTH)

Clinical Quality Improvement Metrics (CQIM)	SaTH	National	Source
Smoking rate at booking	15.1%	11.6%	MSDS
Normal birth rate	71.9%%	66%	NMPA
Caesarean section delivery rate in Robson group 1 women	5% of CS or 1% of all del	TBC	TBC
Caesarean section delivery rate in Robson group 2 women	14.6% of CS or 2.9% of all del	TBC	TBC
Caesarean section delivery rate in Robson group 5 women	34% of CS or 6.8% of all del	TBC	TBC
3rd and 4th degree tear rate among women delivering vaginally	2.2%	3.5%	NMPA
Rate of postpartum haemorrhage of 1500ml or greater	1.7%	2.6%	NMPA
Rate of successful vaginal birth after a single previous caesarean section	26.9%	28.4%	NMPA
Smoking rate at delivery	15.1%	TBC	TBC
Proportion of babies born at term with an Apgar score <7 at 5 minutes	1.1%	1.2%	NMPA
Proportion of babies born at term admitted to the neonatal intensive care unit	18.6%	TBC	TBC
Proportion of babies readmitted to hospital at <30 days of age	14.9%	TBC	TBC
Breastfeeding initiation rate	75.2%	73.6%	NMPA
Breastfeeding rate at 6-8 weeks	TBC – from CCG's	TBC	TBC

National Maternity Indicators (NMI)

Domain 1: Mortality and morbidity

	SaTH	National	Source
Stillbirth rate	0.38% (2015)	0.38% (2015)	MBRRACE
Neonatal Mortality Rate	0.14% (2015)	0.17% (2015)	MBRRACE
Brain injuries occurring during or soon after birth (still requires further definition) HIE is captured by SaTH (hypoxic-ischaemic encephalopathy)	0.2%	Not currently available	NMPA
Proportion with singleton term infants with a 5-minute Apgar score of less than 7	1.1%	1.2%	NMPA
Proportion of vaginal births with a 3rd/4th degree perineal tear	2.2%	3.5%	NMPA
Proportion of birth episodes with severe PPH of greater than or equal to 1500ml	1.7%	2.6%	NMPA

National Maternity Indicators (NMI)

Domain 2: Clinical care and health promotion

	SaTH	National	Source
Normal birth rate	69%	66%	NMPA
Caesarean section rate Robson Group 1 Robson Group 2 Robson Group 3			NMPA
Proportion of infants who are small-for-gestational-age (birthweight below 10th centile) (singletons)	<10 th centile not currently captured but will be once GROW interface is in place – currently capture <2.5kg = 3%	6.3%	NMPA
Percentage of babies < 2500g (NB: not part of NMI but currently captured at SaTH and assessed against GIRFFT)	2.04%	2.31%	GIRFFT
Proportion of live born babies who are breastfed for the first feed	75.2%	73.6%	NMPA
Proportion of births between 23+0 and 27+6 which occur outside of a hospital with a neonatal intensive care unit	0.4%		NMPA

National Maternity Indicators (NMI)

Domain 3: Choice and continuity of carer

	SaTH Score	National Score	Source
Percentage of women responding with 'Yes, always' when asked if their decisions about how they wanted to feed their baby were respected by midwives	9.1 About the same	7.9 - 9.6	CQC Maternity Survey
Percentage of women responding with 'Yes, always' when asked if they felt that midwives and other health professionals gave them active support and encouragement about feeding their baby	8.3 About the same	6.9 – 8.9	CQC Maternity Survey
Percentage of women responding with 'Yes, definitely' when asked if they got enough information from either a midwife or doctor to help them decide where to have their baby	8.0 About the same	5.2 - 8.9	CQC Maternity Survey
Percentage of women that saw a midwife as much as they wanted at home or in a clinic after the birth	5.8	3.1 – 9.8	CQC Maternity Survey
Percentage of women not offered any choices about where to have their baby	TBC	TBC	CQC Maternity Survey
Percentage of women responding with 'Yes' when asked if when thinking about their stay in hospital, if their partner or someone else close to them was involved in their care, were they able to stay with them as much as they wanted	5.8 About the same	9.8	CQC Maternity Survey

National Maternity Indicators (NMI)

Domain 4: User experience

	SaTH Score	National Score	Source
Percentage of women responding with 'Yes, always' when asked if during antenatal care they were involved enough in decisions about their care	9.0 About the same	8.0 - 9.4	CQC Maternity Survey
Percentage of women that were not left alone by midwives or doctors at a time when it worried them	8.2 About the same	6.2 - 8.8	CQC Maternity Survey
Percentage of women responding with 'Yes, always' when asked if they felt that midwives and other health professionals gave them active support and encouragement about feeding their baby	8.3 About the same	6.9 - 8.9	CQC Maternity Survey
Percentage of women responding with 'Yes, always' when asked if when thinking about the care they received in hospital after the birth of their baby, were they treated with kindness and understanding	9.0 About the same	7.5 - 9.3	CQC Maternity Survey
Percentage of women responding with 'Yes, always' when asked if they need attention while in hospital after the birth, were they able to get a member of staff to help them within a reasonable time?	9.1 About the same	7.5 - 9.4	CQC Maternity Survey
Percentage of women responding with 'Yes, always' when asked if during their antenatal check-ups they were given enough time to ask questions or discuss their pregnancy	8.7 About the same	7.7 - 9.4	CQC Maternity Survey
Percentage of women who, having raised a concern during labour and birth, felt their concern was taken seriously	9.0 About the same	6.3 - 9.3	CQC Maternity Survey

National Maternity Indicators (NMI)

Domain 5: Organisational culture

	SaTH score	National score	Source
Proportion of midwives responding with 'Agree or Strongly Agree' on whether they would recommend their trust as a place to work or receive treatment	TBC	TBC	NHS Staff Survey
Proportion of midwives responding with 'agree' or 'strongly agree' with the statement "When errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again"	TBC	TBC	NHS Staff Survey
Proportion of specialty trainees in Obstetrics & Gynaecology responding with 'strongly agree or agree' on whether their working environment is one which helps build the confidence of doctors in training	TBC	TBC	GMC Survey
Proportion of specialty trainees in Obstetrics & Gynaecology responding with 'excellent or good' on how would they would rate the quality of clinical supervision out of hours	TBC	TBC	GMC Survey
Proportion of specialty trainees in Obstetrics & Gynaecology responding with 'agree or strongly agree' with the statement 'handover arrangements between shifts in my post ensure continuity of care for patients'	TBC	TBC	GMC Survey
Proportion of women whose discharge from the hospital was delayed for any reason	7.1 Better	3.6 – 7.2	CQC Maternity Survey
Proportion of women who were not given a sufficient reason for their delayed discharge from the hospital			CQC Maternity Survey

Other metrics not included in CQIM or NMI

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