

Cover page	
Meeting	Trust Board
Paper No.	11
Paper Title	Maternity Dashboard
Date of meeting	7 February 2019
Date paper was written	29 January 2019
Responsible Director	Deirdre Fowler Director of Nursing, Midwifery and Quality
Author	Sarah Jamieson Head of Midwifery
Executive Summary	
<p>This paper is intended to provide the members of the Trust Board with an update on the maternity dashboard.</p> <p>The paper is for information and does not seek any decision making, it is intended to inform, assure and provide opportunity for further discussion and debate.</p>	
Previously considered by	Not previously considered. This paper provides a monthly update to the Quality and Safety Committee and the Trust Board.

The Board is asked to:			
<input type="checkbox"/> Approve	<input checked="" type="checkbox"/> Receive	<input type="checkbox"/> Note	<input checked="" type="checkbox"/> Take Assurance
To formally receive and discuss a report and approve its recommendations or a particular course of action	To discuss, in depth, noting the implications for the Board or Trust without formally approving it	For the intelligence of the Board without in-depth discussion required	To assure the Board that effective systems of control are in place

Link to CQC domain:				
<input checked="" type="checkbox"/> Safe	<input checked="" type="checkbox"/> Effective	<input checked="" type="checkbox"/> Caring	<input checked="" type="checkbox"/> Responsive	<input checked="" type="checkbox"/> Well-led

Link to strategic objective(s)	<input checked="" type="checkbox"/> PATIENT AND FAMILY Listening to and working with our patients and families to improve healthcare <input checked="" type="checkbox"/> SAFEST AND KINDEST Our patients and staff will tell us they feel safe and received kind care <input checked="" type="checkbox"/> HEALTHIEST HALF MILLION Working with our partners to promote 'Healthy Choices' for all our communities <input checked="" type="checkbox"/> LEADERSHIP Innovative and Inspiration Leadership to deliver our ambitions <input checked="" type="checkbox"/> OUR PEOPLE Creating a great place to work
Link to Board Assurance Framework risk(s)	RR 1204 If the maternity service does not evidence a robust approach to learning and quality improvement, there will be a lack of public confidence and reputational damage

Equality Impact Assessment	<input checked="" type="radio"/> Stage 1 only (no negative impact identified) <input type="radio"/> Stage 2 recommended (negative impact identified and equality impact assessment attached for Board approval)
----------------------------	--

Freedom of Information Act (2000) status

- This document is for full publication
- This document includes FOIA exempt information
- This whole document is exempt under the FOIA

Financial assessment

No

Main Paper

Situation

Maternity dashboard

The maternity dashboard was updated in April 2018, in line with the recommendations from the maternity transformation programme (work stream 6) and in line with recommendations from the Maternal Neonatal Health Safety Collaborative wave one. It accurately reflects all of the data to be captured in the evolving national maternity dashboard which is now available on-line (although not yet complete):

<https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-sets/maternity-services-data-set/maternity-services-dashboard>

Following feedback from the last Trust Board meeting, the Care Group were asked to provide the maternity dashboard in a more straight forward way to provide clear assurance to the Board. There was a joint meeting planned, between provider and the CCG's for Friday 19th January 2019 to discuss, evaluate and update the maternity dashboard, however, the meeting did not proceed and the care group is working with the CCG's to identify a future date.

In the meantime the care group has provided a simplified and more straightforward version of the dashboard (attached). However, this will be updated and improved once the meeting between CCG's and provider has taken place.

Background

The purpose of this update is to provide the board with an analysis of data within the maternity clinical dashboard for December 2018. The report highlights the key risks, key strengths and any changes or learning being taken forward.

Assessment

What has gone well?

1. Our stillbirth rate for 2018 is the lowest it has ever been at SaTH.
2. Our CQUIM - Clinical Quality Improvement Metrics – demonstrate that we have performed consistently well in our management of postpartum haemorrhage, caesarean section rates, episiotomy rates and skin to skin contact within 1 hour.
3. Our bookings and birth numbers are consistent with last year and do not demonstrate any reduction in numbers.

What hasn't gone so well?

1. We have had to defer our Unicef Baby Friendly re-accreditation assessment following early indicators that we would not be successful.
2. We have large numbers of our workforce off sick with work related stress.
3. We remain an outlier for midwives scrubbing in theatres, we are the only Trust in the region who does not have 24/7 cover provided by theatres which would release valuable midwifery time to spend on essential midwifery tasks .

How will we improve?

1. Smoking at Time of Delivery- a Public Health Midwife has been seconded for 4 years (financed by Telford and Wrekin Council and CCG), who continues to concentrate on the Telford and Wrekin pregnant smoking population to change habits and drive down this figure. The CCG has just increased their funding to support an additional band 3 support worker and increase the Midwife's hour to full time.
2. We are looking at ways to improve our induction of labour pathway. Learning from other organisations, we are exploring the option of outpatient induction of labour and also offering a 24/7 induction of labour service which would improve flow, enhance patient experience and reduce unnecessary delays in inductions.
3. We aim to improve staffing levels across our maternity service in order to ensure that we can achieve re-

accreditation of our Baby Friendly status with Unicef, provide one to one care in every woman's labour, reduce sickness levels in staff, ensure compliance with training and increase safeguarding supervision and training.

4. We have completed a business case for provision of scrub cover for our maternity theatres.
5. We are working with our teams to finalise and implement our response to the CQC findings and continue with our aspirations to be a 'Good' service, this also includes attention to strengthening an open and inclusive culture

Recommendation

Maternity services continue to provide the monthly dashboard and report this via the newly formed Maternity Oversight Committee and CQRM meetings. The Care Group is working with the CCG's to identify a date for a joint meeting between provider and the CCG's to discuss, evaluate and update the maternity dashboard.

Descriptor	OCT	NOV	DEC	Q3	YTD	National Figure	Source
Smoking rate at booking	15.1%	12.6%	19.7%	15.7%	17.0%	19.9%	NMPA
Normal birth rate	64.2%	67.7%	64.4%	65.4%	67.4%	66.0%	NMPA
Smoking rate at delivery	16.0%	16.6%	19.2%	17.2%	16.3%	11.7%	NMPA
Proportion of babies born at term with an Apgar score <7 at 5 minutes	1.6%	0.6%	0.6%	0.9%	0.7%	3.5%	NMPA
Proportion of babies born at term admitted to the neonatal intensive care unit	20.3%	17.6%	18.4%	18.8%	18.3%		
Breastfeeding initiation rate	76.9%	74.5%	70.1%	74.0%	75.7%		
Stillbirth rate					2.6:1000	3.5:1000	MBRRACE
Brain injuries - HIE	0.2%	0.0%	0.0%	0.1%	0.1%		NMPA
Proportion with singleton term infants with a 5-minute Apgar score of less than 7	1.6%	0.6%	0.6%	0.9%	0.7%	1.2%	NMPA
Proportion of birth episodes with severe PPH of greater than or equal to 1500ml	2.3%	2.3%	1.7%	2.1%	2.0%	2.7%	NMPA
Episiotomy rate overall	17.5%	13.0%	11.3%	14.0%	12.8%	22.0%	NMPA
Skin to skin contact within 1 hour of birth	98.5%	99.7%	100.0%	99.4%	99.6%	79.8%	NMPA
Babies breastfeeding at discharge	44.2%	44.3%	44.5%	44.3%	45.4%	68.1%	NMPA
Shoulder Dystocia rate	1.7%	0.5%	1.1%	1.1%	0.8%	0.7%	RCOG
Induction of labour rate	42.4%	44.2%	40.4%	42.4%	39.8%	28.5%	NMPA
Rate of 1:1 care in established labour	98.9%	98.6%	97.9%	98.5%	97.7%		
Overall Trust total births	405	393	362	1160	3494	375-425	Local
% of births in Consultant Unit	92.1%	90.6%	91.2%	91.3%	89.6%	86.6%	NMPA
% of birth in a MLU or at home	7.9%	9.4%	8.8%	8.7%	10.2%	14.3%	NMPA
% of births in any MLU	6.9%	7.9%	7.2%	7.3%	8.4%	11.8%	NMPA
% Home Births	1.0%	1.5%	1.7%	1.4%	1.8%	1.4%	NMPA
% BBA/Other	0.0%	0.0%	0.0%	0.0%	0.2%	0.3%	NMPA
Overall Assisted Births rate %	13.2%	10.9%	10.7%	11.7%	9.6%	10%-13%	GIRFT
Caesarean Section rate %	19.0%	20.3%	23.7%	20.9%	21.0%	25%	NMPA
Number of Bookings	411	430	385	1226	3813	400-450	Local

