Maternity Perinatal Quality Surveillance model for July 2021

	OVERALL	SAFE	EFFECTIVE	CARING	RESPONSIVE	WELL LED
CQC Maternity Ratings - last assessed 2018	GOOD	GOOD	GOOD	OUTSTANDING	GOOD	GOOD

2019	
Proportion of midwives responding with 'Agree' or 'Strongly Agree' on whether they would recommend their Trust as a place to work or receive treatment (reported annually)	72%
Proportion of speciality trainees in O&G responding with 'excellent or good' on how they would rate the quality of clinical supervision out of hours (reported annually)	89.29%

Sherwood Forest Hospitals NHS Foundation Trust

Exception report based on highlighted fields in monthly scorecard (Slide 2)

Obstetric haemorrhage >1.5L (2.6 % July 21)

- Improvement made on previous month, remains reportable via maternity triggers - no lapses in care / learning points identified
- Deep dive in final stages and due to Quality Committee in September. Division have signed up to pilot a care bundle to evaluate the impact
- Benchmarking review with UCLH commenced.

APGARS <7 at 5 minutes (1.3% July 21)

- Rate reduced this month.
- Audit completed and no clinical concerns from June cases, plan to monitor.
- Increase may be attributable to recent education/ information following action plan from Coronial review.
- Term admission data for July remains within expected range and all cases reviewed were deemed unavoidable admissions.
- No term babies were transferred out for cooling.

Staffing red flags

- 19 staffing incidents reported in month.
- Virtual maternity forum continued, positive feedback received in response to the improvements made.
- 2 temporary suspensions of the maternity service due to acuity. Reviewed via scoping no harms identified.

Home Birth Service

- Due to vacancies and sickness homebirth services remains limited, This has been escalated to the CCG and regionally for awareness. Unfortunately we are not an outlier for this.

FFT (91% July 2021)

- FFT shows slight improvement.
- Maternity team to trial the use of QR codes in August to improve FFT compliance.
- Teams reminded monthly about asking patients to complete and all actions being monitored via monthly service line.
- FFT improvement plan reviewed and approved by NMAHP Committee in August.

Maternity Assurance Divisional Working Group

NHSR	Ockenden
• Board Declaration completed 19th July 2021 • NHSR year 4 criteria has been received. Monthly divisional meeting reinstated to review each safety standard. Will be tracked through MAC.	• Initial submission made 30th June 2021 • Assurance provided by the Maternity Assurance Committee • Portal uploads continue

Incidents reported July 21 (84 all no/low harm after review)

Most reported	Comments
Other (Labour & delivery)	No themes identified
Triggers x 14	Various including PPH, term admission

No incidents reported as 'moderate' harm or above.

Other

- Staffing incidents reports remain static this month due to change in requirement to report each shift where staffing is below the agreed minimum levels
- 28.37wte vacancies (19.4%) mainly across the community midwifery service. Active recruitment in place with 15wte newly qualified midwives starting in October 2021
- Challenges currently exacerbated due to track and trace issues alongside annual leave and vacancies. Risk assessment applied where appropriate to support return to work.
- All retired midwives have been written to by the Chief Nurse to see if they would consider offering some hours to support increasing staffing. Two colleagues are in the process of agreeing a plan to help support. RN shifts in place to support the maternity ward. SOP developed to support consistency in approach
- 1 stillbirth case in July, this was anticipated due to known congenital abnormalities. Case reported through PMRT and governance channels. Bereavement support provided to the family.

Maternity Perinatal Quality Surveillance scorecard

Sherwood Forest Hospitals NHS Foundation Trust

		OVERALL	SAFE	EFFECTIVE	CARING	RESPONSIVE	WELL LED
	CQC Maternity Ratings - last assessed 2018	GOOD	GOOD	GOOD	OUTSTANDING	GOOD	GOOD
	Maternity Safety Support Programme	No					

	Maternity Quality Dashboard 2020-2021	Alert [national standard/average where available]	Running Total/ average	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21
Perinatal	1:1 care in labour	>95%	99.81%	100%	100%	100%	99.66%	100%	99.66%	99.66%	99.66%	100%	99.66%	100%	99%	100%	95%	95%	95%
	Women booked onto MCOC pathway															19%	19%	21%	18%
	Women reccving MCOC intraprtum															6%	6%	1%	0%
	Total BAME women booked															25%	25%	21%	21%
	BAME women on CoC pathway															5%	5%	5%	5%
	3rd/4th degree tear overall rate	>3.5%	2.18%	3.20%	2.63%	0.37%	2.11%	2.68%	2.42%	1.02%	2.37%	2.32%	0.84%	2.82%	2.84%	1.10%	2.46%	0.68%	3.00%
	Obstetric haemorrhage >1.5L	Actual	116	7	15	13	21	8	7	11	9	8	8	5	6	10	13	9	7
	Obstetric haemorrhage >1.5L	<2.6%	3.24%	2.49%	5.64%	4.80%	7.37%	2.68%	2.42%	3.75%	3.56%	3.09%	3.38%	%	2.09%	3.70%	4.56%	3.08%	2.60%
	Term admissions to NNU	<6%	3.62%	4.24%	1.84%	1.82%	2.44%	3.00%	3.06%	5.44%	2.34%	4.59%	4.20%	1.99%	4.18%	5.00%	5.10%	4.60%	4.60%
	Apgar <7 at 5 minutes	<1.2%	1.56%	1.77%	0.74%	1.09%	0.70%	1.00%	1.36%	1.36%	2.73%	2.30%	3.35%	0.00%	0.70%	0.73%	1.37%	1.69%	1.30%
	Stillbirth number	Actual	11	1	0	1	0	1	0	1	2	2	1	1	1	0	0	0	1
	Stillbirth number/rate	>4.4/1000	4.63			2.413			2.235			7.198			5.148			0.000	
Workforce	Rostered consultant cover on SBU - hours per week	<60 hours	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60
	Dedicated anaesthetic cover on SBU - pw	<10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
	Midwife / band 3 to birth ratio (establishment)	>1:28		1:30.4	1:28.4	1:27.8	1:30.4	1:30	1:28.5	1:28.5	1:26.4	1:28.5	1:24.6	1:30	1:30	1:30.4	1:30.4	1:30.4	1:30.4
	Midwife/ band 3 to birth ratio (in post)	>1:30		1:31.4	1:30	1:29.9	1:31.4	1:29	1:29.7	1:29.7	1:28.4	1:29:7	1:25.7	1:25.7	1:31	1:31.4	1:31.4	1:31.4	1:31.4
Feedback	Number of compliments (PET)			0	0	0	1	2	1	4	2	1	1	1	3	1	0	0	0
	Number of concerns (PET)			1	3	1	2	5	0	0	3	2	1	2	1	3	5	3	2
	Complaints			0	1	0	2	2	1	1	0	0	2	0	1	0	0	3	1
	FFT recommendation rate	>93%		89%	100%	100%	99%	93%	93%	87%	83%	83%	76%	88%	90%	84%	91%	88%	91%
Training				All training suspended during Covid.															
	PROMPT/Emergency skills all staff groups			94%	*MDT training re-launched with PROMPT programme. All staff booked to complete by March 21*							15%	39%	58%	81%	100%	100%	100%	100%
	K2/CTG training all staff groups			88%	*CTG training re-launched with K2 programme & revised competency assessment framework. All staff booked to complete by March 21.*							36%	45%	75%	95%	98%	98%	98%	98%
	CTG competency assessment all staff groups											0%	11%	53%	98%	98%	98%	98%	98%
	Core competency framework compliance			Core competency framework launched December 2020 - for inclusion in maternity TNA for 21/22												6%	14%	20%	26%
Reporting	Progress against NHSR 10 Steps to Safety	<4 <7 7 & above																	
	Maternity incidents no harm/low harm	Actual	837	60	45	60	54	59	83	52	68	95	61	62	67	71	72	115	84
	Maternity incidents moderate harm & above	Actual	4	0	0	2	0	0	0	0	0	0	0	1	1	0	0	0	0
	Coroner Reg 28 made directly to the Trust		Y/N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
	HSIB/CQC etc with a concern or request for action		Y/N	N	N	N	N	N	N	N	N	Y	Y	N	Y	N	N	N	N