

Board of Directors Meeting in Public - Cover Sheet

All reports **MUST** have a cover sheet

Subject:	Maternity and Neonatal Safety Champions Report	Date: 1 September 2022		
Prepared By:	Paula Shore, Director of Midwifery/ Head of Nursing			
Approved By:	Phil Bolton, Chief Nurse			
Presented By:	Paula Shore, Director of Midwifery/ Head of Nursing, Phil Bolton, Chief Nurse			
Purpose				
To update the Board on our progress as Maternity and Neonatal Safety Champions		Approval		
		Assurance	X	
		Update	X	
		Consider		
Strategic Objectives				
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value
X	X		X	
Identify which principal risk this report relates to:				
PR1	Significant deterioration in standards of safety and care			X
PR2	Demand that overwhelms capacity			
PR3	Critical shortage of workforce capacity and capability			
PR4	Failure to achieve the Trust's financial strategy			
PR5	Inability to initiate and implement evidence-based Improvement and innovation			
PR6	Working more closely with local health and care partners does not fully deliver the required benefits			
PR7	Major disruptive incident			
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change			
Committees/groups where this item has been presented before				
Maternity and Neonatal Safety Champions Meeting				
Executive Summary				
<p>The role of the maternity provider safety champions is to support the regional and national maternity safety champions as local champions for delivering safer outcomes for pregnant women and babies. At provider level, local champions should:</p> <ul style="list-style-type: none"> • build the maternity safety movement in your service locally, working with your maternity clinical network safety champion and continuing to build the momentum generated by the Maternity Transformation Programme (MTP) and the national ambition • provide visible organisational leadership and act as a change agent among health professionals and the wider maternity team working to deliver safe, personalised maternity care • act as a conduit to share learning and best practice from national and international research and local investigations or initiatives within your organisation. <p>This report provides highlights of our work over the last month.</p>				

Update on Mandated Maternity and Neonatal Safety Champion (MNSC) work for July 2022

1. Service User Voice

Work to ensure that the service user's voice is heard continues to gain strength at SFH. Sarah Seddon, our parent's voice representative, has produced a helpful infographic into the learning from her "walk the patch" sessions which includes the KMH, NWK and Community settings. This infographic can be found in Appendix 1.

2. Staff Engagement

The MNSC Walk Round was completed on 5 July 2022. Team members continue to report the increased activity and the impact across the service. Due to the moved Maternity Forum meeting in June the senior leadership team hosted two Maternity Forums on the 5 July 2022 and 25 July 2022. During each meeting staff discussed the plans around the re-implementation of the full homebirth service in September 2022 and the upcoming secondment opportunities, specifically within community and antenatal clinic overbookings. The last point provided an action for the Divisional General Manager who attended the meeting.

The senior leadership team also updated staff around the communication plan for Speaking up avenues, noting the increased external pressures.

3. Governance

Ockenden: Out of the final 5 IEAs, 4 have been peer reviewed and we are awaiting the final review which relates to anaesthetics. The LMNS has commenced a quarterly panel meeting in which evidence for the initial 7 IEA's will be reviewed. *There is no plan yet for the final 15 IEA's.* SFH have submitted the gap analysis performed by the MVP chair, for review through the panel. This action was one of the two outstanding parts of IEA 7.

We also are starting to prepare for the planned Ockenden Quality Insight Visit ,which will be performed by the regional team, as part of one of their recommendations from the report. The visit is planned to take place on 4 October 2022.

NHSR: The divisional working group continues to work on the delivery of the NHSR scheme. We have raised a risk in regard to the divisional business management support for NHSR and actions are underway to meet all current deadlines. Forward reporting has been mapped against key meetings and 360 Assurance have commenced external validation process on 4 of the 10 safety actions.

4. Quality Improvement Approach

The Early Implementor Site (EIS) work around smoke-free pregnancy has produce its first quarterly data, as below, which has showed improvements in the number of CO readings recorded and the percentage of smokers at time delivery data (SATOD). This data will be presented regionally.

2022-23 TDTS KPIs	Ambition	source	April	May	June	July
Number booked at SFHFT		dashboard	357	349	292	309
% of women who have a recorded smoking status at booking	100%	ORION	92.44%	96.57%	90.42%	91.27%
Booking smoking status unknown			27	12	28	27
% of women smoker at booking		ORION	14.57%	17.82%	16.10%	17.15%
Number of women smoking at booking		ORION	52	62	47	53
% of CO readings at booking	>95%	ORION	85%	85%	86%	84%
Number of booking CO readings		ORION	305	298	252	261
% of CO readings at 36 weeks	>95%	ORION	85%	87%	91%	83%
Number of 36 week CO readings		ORION	233	247	265	259
Number of women given birth			267	285	287	316
SATOD %	<15%	ORION	18.87%	16.79%	15.09%	14.79%
Number of women smoking at TOD		ORION	50	47	43	46

5. Safety Culture

As part of the wider review of the current plan for surveys within the organisation, it has been noted that the planned survey time for SCORE would coincide with the Pathway to Excellence Survey, the National Staff Survey and the implementation of the new digital system. To ensure the optimum results the SCORE survey has been delayed until Q4 2022/23. The previous results from the culture survey (PASCALS 2018/19) alongside the staff survey results can and will be used to inform local quality improvement plans.