

Board of Directors Meeting in Public- Cover Sheet

Subject:	NHS Resolution Maternity Incentive Scheme Year 2 – progress report		Date: 25 July 2019	
Prepared By:	John Glendening – Trust Solicitor			
Approved By:	Elaine Jeffers			
Presented By:	John Glendening / Dr Susanna Al-Samarrai, Consultant Obstetrician and Gynaecologist			
Purpose				
The scheme requires Board assurance of compliance before 15 August 2019, to allow the Chief Executive to sign a declaration of compliance for NHS Resolution.			Approval	
			Assurance	X
			Update	
			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	X	X
Overall Level of Assurance				
	Significant	Sufficient	Limited	None
		X		
Risks/Issues				
Financial	X			
Patient Impact	X			
Staff Impact				
Services				
Reputational	X			
Committees/groups where this item has been presented before				
Quality Committee July 2019 considered progress to 11 July 2019 and provided assurance on actions 1,2,7,10				
Executive Summary				
<p>NHS Resolution insures NHS organisations against the cost of clinical (and other) negligence claims. NHS Resolution launched its 2019 Maternity Incentive Scheme in December 2018. Under the scheme a 10% levy has already been applied to the maternity contribution (premium) paid by trusts to NHSR for 2019/20. This levy will be reimbursed to trusts that can demonstrate compliance with 10 safety actions by 15 August 2019. The potential reimbursement for SFH is £361,428.</p> <p>A committee has been working to coordinate the response and provide evidence of compliance, including the Maternity Head of Service, the lead Clinical Governance Obstetrician, and the Trust Solicitor. The Medical Director and Chief Nurse have been briefed.</p> <p>A summary of the specific safety actions and progress evidencing compliance in incorporated into this front sheet. Details are provided in the associated paper, which along with the scheme rules and supporting evidence is available in the deal room.</p> <p>The paper presents the position to 25 July 2019. Compliance is very nearly complete, and final evidence will be in the form of the minutes following 1 August Board meeting. The Board is invited to provide assurance of compliance to allow the Chief Executive to sign the attached declaration which must be uploaded to NHS Resolution by 15 August.</p>				

NHS Resolution Safety Actions – SFH progress

1. use of perinatal mortality tool	Achieved, evidenced, signed off by Quality Committee	BLUE
2 data submission	Achieved, evidenced, signed off by Quality Committee	BLUE
3 transitional care services	Achieved – details in full submission document / evidence	BLUE
4a medical staffing O&G training survey / action plan	Achieved - evidenced with Board sign off on 1 August that: 50% = proportion of “trainees” gave negative response in survey (although SFH disputes the definition of trainee used for this data set, the action has been progressed as though accurate). Action plan to address has been devised by the Obstetric lead consultant in consultation with the Trust’s Director of Medical Education.	GREEN Blue if Board signs off action plan and minutes reflect this, plus notes proportion of negative responses
4b medical staffing anaesthetic standards (ACSA) Jan-June 2019: <ul style="list-style-type: none"> • 1.2.4.6 dedicated anaesthetist for elective CS lists • 2.6.5.1 24/7 resident duty obstetric anaesthetist • 2.6.5.6 duty anaesthetist participates in LW rounds 	Achieved, and evidence completed with 1 August Board minutes 1.2.4.6 – Not applicable as no elective Caesarean section lists held 2.6.5.1 – see email from ACSA lead consultant anaesthetist 2.6.5.6 – see email from ACSA lead consultant anaesthetist	GREEN Blue with board minutes noting 100% compliance Board approval
5 midwifery workforce planning	Achieved. Evidence in bundle for Board	BLUE
6 Saving Babies’ lives compliance	Achieved. Evidence in PSQG / Quality Committee minutes that are in press	GREEN Blue with receipt of minutes
7 patient feed back	Achieved, evidenced, signed off by Quality Committee	BLUE
8 emergencies training –	Will be achieved with the training of 1 further staff	AMBER

90% each subgroup	member – scheduled for 26 July	Blue by Board meeting
9 obstetric and midwife safety champions bimonthly meetings with Board level safety champions	Achieved – for verbal assurance to Board from Chief Nurse	GREEN Blue at Board
10 100% 2018/19 Early Notification Scheme referral	Achieved, evidenced, signed off by Quality Committee	BLUE

Declaration forms that CE completes with authority of Board



Section A : Please choose your trust in the Guidance tab

Action No.	Maternity safety action	Action met? (Y/N)
1	Are you using the National Perinatal Mortality Review Tool to review and report perinatal deaths to the required standard?	
2	Are you submitting data to the Maternity Services Data Set to the required standard?	
3	Can you demonstrate that you have transitional care services to support the Avoiding Term Admissions Into Neonatal units Programme?	
4	Can you demonstrate an effective system of medical workforce planning to the required standard?	
5	Can you demonstrate an effective system of midwifery workforce planning to the required standard?	
6	Can you demonstrate compliance with all four elements of the Saving Babies' Lives care bundle?	
7	Can you demonstrate that you have a patient feedback mechanism for maternity services and that you regularly act on feedback?	
8	Can you evidence that 90% of each maternity unit staff group have attended an 'in-house' multi-professional maternity emergencies training session within the last training year?	
9	Can you demonstrate that the trust safety champions (obstetrician and midwife) are meeting bi-monthly with Board level champions to escalate locally identified issues?	
10	Have you reported 100% of qualifying 2018/19 incidents under NHS Resolution's Early Notification scheme?	

An electronic signature must also be uploaded. Documents which have not been signed will not be accepted.

	Safety actions	Action plan	Funds requested	Validations
Q1 NPMRT			-	
Q2 MSDS			-	
Q3 Transitional care			-	
Q4 Medical workforce planning			-	
Q5 Midwifery workforce planning			-	
Q6 SBL care bundle			-	
Q7 Patient feedback			-	
Q8 In-house training			-	
Q9 Safety Champions			-	
Q10 EN scheme			-	
Total safety actions	-	-		
Total sum requested			-	

Sign-off process:

Electronic signature

For and on behalf of the board of Please choose your trust in the Guidance tab

Confirming that:

The Board are satisfied that the evidence provided to demonstrate compliance with/achievement of the maternity safety actions meets standards as set out in the safety actions and technical guidance document and that the self-certification is accurate.

The content of this form has been discussed with the commissioner(s) of the trust's maternity services

If applicable, the Board agrees that any reimbursement of maternity incentive scheme funds will be used to deliver the action(s) referred to in Section B (Action plan entry sheet)

We expect trust Boards to self-certify the trust's declarations following consideration of the evidence provided. Where subsequent verification checks demonstrate an incorrect declaration has been made, this may indicate a failure of board governance which the Steering group will escalate to the appropriate arm's length body/NHS System leader.

Name:

Position:

Date: