

Meeting Title	Board of Directors		
Date	11.07.19	Agenda item	Bo.7.19.27

MATERNITY INCENTIVE SCHEME (CNST)

Presented by	Karen Dawber, Chief Nurse		
Author	Sara Hollins, Head of Midwifery		
Lead Director	Karen Dawber, Chief Nurse		
Purpose of the paper	To provide Trust Board with the actions and assurance prior to self-certification to complete the Maternity Incentive Scheme (CNST) year 2.		
Key control	Yes		
Action required	For decision		
Previously discussed at/informed by	Quality Committee May and June 2019 Board of Directors May 2019		
Previously approved at:	Committee/Group	Date	
Key Options, Issues and Risks			
<p>The Board is fully sighted on the Maternity Incentive Scheme (MIS) and the requirement to sign off the submission prior to 15 August 2019, to enable a discount on the premium (Approximately £500k).</p> <p>This document provides an update against all ten criteria and confirms that we are proposing to be fully compliant against all ten standards.</p>			
Analysis			
<p>The document shows, by each standard, the standard to be met, the evidence required and an assessment of compliance.</p> <p>We currently are showing fully compliant against 7 of the 10 standards and we are highly confident against the compliance against the remaining standards. The delay being able to be fully compliant is due to the timing of the documents and the reporting periods.</p>			
Recommendation			
<ul style="list-style-type: none">That the Board of Directors delegate responsibility to the Quality Committee to provide final approval prior to sign off no later than the 15 August 2019.That the Board of Directors delegate responsibility to the Workforce Committee to review the 6 monthly staffing report and the GMC survey action plans.That the Board of Directors agree that the Chief Nurse has delegated responsibility to submit the on line declaration no later than the 15 August, following approval at July Quality Committee.That the evidence supporting the submission is reviewed by the assurance team, prior to Quality Committee and that Quality Committee receives an assessment of the evidence and compliance to aid final sign off.			

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Diversity and Inclusion implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performance implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Regulation, Legislation and Compliance relevance	
NHS Improvement: (please tick those that are relevant)	
<input checked="" type="checkbox"/> Risk Assessment Framework	<input checked="" type="checkbox"/> Quality Governance Framework
<input type="checkbox"/> Code of Governance	<input checked="" type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain:	
Care Quality Commission Fundamental Standard: Safety	

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NHS Improvement Effective Use of Resources: Clinical Services
Other (please state):

Relevance to other Board of Director's Committee: (please select all that apply)					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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1 PURPOSE/ AIM

The purpose of the report is to provide the Board with the actions required to enable full Board sign off of the MIS.

2 BACKGROUND/CONTEXT

This is the second year of the Clinical Negligence Scheme for Trusts (CNST) maternity incentive scheme (MIS), intended to support the delivery of safer maternity care in all acute Trusts.

BTHFT was successful in achieving the ten safety actions in year one, and recovered the 10% maternity premium and a share of the unallocated funds.

The ten safety actions remain unchanged in year two. However, Trusts are required to provide Boards with additional evidence to demonstrate compliance than that required for year one.

3 PROPOSAL

Board is asked to note the recommendations.

4 BENCHMARKING IMPLICATIONS

In gathering the evidence and supporting information a number of sources, both internal and external, have been used.

5 RISK ASSESSMENT

All of the standards have been assessed for compliance; we believe there is minimal risk to the achievement of the MIS. However, timescales dictated do mean that Board will be required to delegate authority to the Board Committees for final sign off.

6 RECOMMENDATIONS

- That the Board of Directors delegate responsibility to the Quality Committee to provide final approval prior to sign off no later than the 15 August 2019.
- That the Board of Directors delegate responsibility to the Workforce Committee to review the 6 monthly staffing report and the GMC survey action plans.
- That the Board of Directors agree that the Chief Nurse has delegated responsibility to submit the on line declaration no later than the 15 August, following approval at July Quality Committee.
- That the evidence supporting the submission is reviewed by the assurance team, prior to Quality Committee and that Quality Committee receives an assessment of the evidence and compliance to aid final sign off.

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7	Appendices
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1. Maternity Incentive Scheme (MIS)