Bradford Teaching Hospitals
NHS Foundation Trust

Headline Report – Maternity Services Quarter 3 including update on key metrics in January and February 2020

Together, putting patients first

Report Headlines

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- Challenging CQC inspection:
  - Reflected and responded positively to comments and concerns raised
- Midwifery and Obstetric Staffing:
  - Agreement to increase midwifery establishment by 5.22 WTE and recruit to 6.33 WTE maternity leave cover
  - Consultant Obstetric and Gynaecologist agreement to recruit 4 x locum posts
- New Maternity Dashboard:
  - Demonstrates consistently good outcomes for normal birth, caesarean section, instrumental birth
  - Presentation of monthly stillbirth figures provides improved visualisation of monthly trends
  - Breastfeeding initiation rate lower than usual. Thought that this could be a data collection issue as no contributory changes in practice. To be monitored.
- PMRT:
  - Neonatologist capacity to complete reviews within timeframe escalated as a concern

Report Headlines

- Improved Monthly Review of Stillbirths:
  - 10 stillbirths in Q3. 4 cases still awaiting cause. No obvious themes or trends following review of the 6 other cases. Remaining case was a concealed pregnancy/unwitnessed birth
- Continuity of Carer:
  - Improved position in Q3
  - On track to deliver 35% target by end of March 2020 (target 35%)
- HSIB update:
  - 3 cases reported during Q3. 5 in total.
  - 4 completed reports returned. No additional issues to those identified during initial 72 hour reviews.
  - Quarterly HSIB update to be presented at PSSC, including lessons learned. 1st presentation due in March.
- 2 SI's in Q3:
  - 1 x never event of a retained tampon during perineal repair
  - 1 x SI identified retrospectively following PMRT review. 36 week IUD, missed opportunity to act on a small baby. Datix not completed at the time of the event

2019/20 CQC Inspection

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- What they said:
  - Concerns raised regarding perceived lack of understanding of monthly stillbirth position, including why the rate increased during 2019
  - Confusion regarding reported midwifery staffing position and what they 'saw' during the inspection
  - Criticism that the service did not adhere to mitigation described in the maternity theatres ventilation risk assessment
  - No safety concerns requiring immediate action identified by the inspectorate team
  - Recognition of improvement work as a result of previous inspections/quality summit
- Immediate action taken:
  - Additional information requests were provided within the required timeframe
  - Included clarity on stillbirth, midwifery staffing and theatre mitigation in place
  - Processes changed to ensure that Trust Board have sight of monthly stillbirth rate and that the service are acting on themes/trends emerging
  - Bi-monthly midwifery staffing paper approved and agreement given to increase the establishment. Immediate recruitment commenced
  - Service have reflected on the comments and concerns raised and have identified a number of key areas requiring focus and transformation in order to become outstanding

Q4 focus on:

- Improved delivery of one to one care in labour:
  - Improved position in December but dropped again in January
  - ‘Re-launch’ of definition in January through lessons learned
  - Audit to check definition embedded planned in March
  - Maternity ‘Work as One’ week planned in April with focus on one to one care

- Becoming an ‘outstanding’ maternity service:
  - Planned programme of work to move the service to outstanding
  - Team are presenting the ambition and what we need to achieve this to the Executives in March
  - Initial thoughts include major QI/transformation work in antenatal services in line with Saving Babies Lives implementation

January / February 2020 – Update KPI

- Work has started on the preparation for the new Maternity Theatre suite
  - Activity through theatre 2 is being monitored on a daily basis and reviewed by the risk team weekly
  - Building should commence

- 1 to 1 care in labour, the rate fell in January and has increased in February
  - January
  - February

- IUD / Still Births in January and February have all had a 72 hour review and the reviews have been seen by the Chief Nurse of Medical Director. All will be reviewed as part of the PMRT
  - January 4 Still Births
  - February 3 Still Births