

<b>Meeting Title</b>	<b>Regulation and Assurance Committee</b>		
<b>Date</b>	<b>13.07.21</b>	<b>Agenda item</b>	<b>RC.7.21.11</b>

## MATERNITY INCENTIVE SCHEME (CNST) YEAR 3

Presented by	Sara Hollins, Director of Midwifery		
Author	Sara Hollins, Director 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 3.		
Key control	Yes		
Action required	For decision		
Previously discussed at/ informed by			
Previously approved at:	Committee/Group	Date	
Key Options, Issues and Risks			
<p>Executive Team Meeting (ETM) and Regulation and Assurance Committee on behalf of the Board are fully sighted on the Maternity Incentive Scheme (MIS) and the requirement to sign off the submission prior to 15 July 2021, to enable a discount on the premium (Approximately £500k).</p> <p>The attached document (appendix 1) provides an update against all ten criteria and confirms that we are proposing to be fully compliant against all ten standards.</p> <p>The contents of the document and the plan to declare full compliance with the scheme, was discussed with the Chief Nurse for Bradford District and Craven Clinical Commissioning Group, on 1 July 2021 as required for the submission to NHS Resolution.</p> <p>It also provides detailed information and assurance that the service has achieved full compliance with the implementation of The Saving Babies' Lives Care Bundle, Version 2, including the required audits and subsequent action plans.</p> <p>Since this report was prepared there has been a further delay to the submission date which has been extended to 12 noon, Thursday 22 July 2021. The delay is due to a technical error with the Board declaration form and does not affect or alter the safety actions and associated evidence.</p>			
Analysis			
<p>The document shows, by each standard, the standard to be met, the evidence required and an assessment of compliance.</p> <p>The Trust will be able to declare full compliance with the scheme following the presentation of the Neonatal Medical and Nursing workforce paper and associated action plan, required to meet compliance with Safety Action 4 on 12 July 2021 to ETM.</p>			
Recommendation			
<ul style="list-style-type: none"><li>ETM/Regulation and Assurance Committee are asked to acknowledge the contents of the paper.</li><li>ETM/Regulation and Assurance Committee is asked to acknowledge that full compliance with the scheme can be declared on 15 July 2021, subject to ETM receiving and agreeing the Neonatal Medical and Nursing workforce paper and associated action plan on 12 July 2021.</li></ul>			

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- ETM/Regulation and Assurance Committee is asked to note the detailed information and assurance that the service has achieved full compliance with the implementation of The Saving Babies' Lives Care Bundle, Version 2, including the required audits and subsequent action plans.
- ETM/Regulation and Assurance Committee are asked to note and support the plan in place to increase the percentage of neonatal nurses trained in Newborn Life Support from 82% to >90% by the end of the year.
- Consultant Anaesthetist attendance at PROMPT has been challenging during the pandemic as the priority was providing clinical care in intensive care. However, 85% compliance has been achieved and this will increase to 91% by 28 July. ETM/Regulation and Assurance Committee are asked to note this.
- ETM/Regulation and Assurance Committee are asked to note that the contents of the document and the plan to declare full compliance with the scheme, was discussed with the Chief Nurse for Bradford District and Craven Clinical Commissioning Group, on 1 July 2021 as required for the submission to NHS Resolution.
- ETM/Regulation and Assurance Committee are asked to record that this paper will be presented to Trust Board at the end of July.

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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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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"/>

<b>Regulation, Legislation and Compliance relevance</b>
<b>NHS Improvement: (please tick those that are relevant)</b> <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
<b>Care Quality Commission Domain:</b> Choose an item.
<b>Care Quality Commission Fundamental Standard:</b> Safety
<b>NHS Improvement Effective Use of Resources:</b> Clinical Services
<b>Other (please state):</b>

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

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## 1 PURPOSE/ AIM

The purpose of the report is to provide Executive Team Meeting and Regulation and Assurance Committee with an update on the actions and assurance required to enable full Board sign off of the MIS.

## 2 BACKGROUND/CONTEXT

This is the third 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. The scheme was paused at national level during 2020, due to the Covid-19 pandemic, and the submission date was delayed from August 2020 to 15 July, 2021. As a result of the pandemic and the amended timescales, there have been a number of changes to the original safety action standards and to the minimum evidence required to demonstrate compliance.

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

The ten safety action titles remain unchanged in year three. However, Trusts are required to provide Boards with additional evidence to demonstrate compliance than that required for years one and two, including assurance that the impact of Covid-19 has been considered and appropriately responded to within maternity services.

The 90% denominator of all staff groups attending emergency multi-disciplinary training (MDT), and all staff who attend neonatal resuscitations attending newborn life support (NLS) training, has been removed from the final submission. However, the scheme requires that where compliance is below 90%, Trust Boards are committed to supporting face to face training when it is reinstated.

Both maternity and neonatal staff groups are predominantly 90% compliant, and there are robust recovery plans in place to ensure that the staff groups below 90% achieve compliance by the end of the year. ETM/Regulation and Assurance Committee are asked to note that these plans are in place.

Several of the safety actions are intrinsically linked to evidence required to demonstrate assurance that the maternity service is compliant with the recommendations and immediate and essential actions following the December 2020 Ockenden report. Along with other external methods of cross-checking the self-declaration process, the service will receive an assurance site visit from the Regional Midwifery Officer's team from July onwards.

The contents of the document and the plan to declare full compliance with the scheme, was discussed with the Chief Nurse for Bradford District and Craven Clinical Commissioning Group, on 1 July 2021 as required for the submission to NHS Resolution.

Since this report was prepared there has been a further delay to the submission date which has been extended to 12 noon, Thursday 22 July 2021. The delay is due to a technical error with the Board declaration form and does not affect or alter the safety actions and associated evidence.

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### 3 PROPOSAL

Regulation and Assurance Committee is asked to note the update and recommendation that full compliance can be declared on 22 July 2021 subject to ETM receiving and agreeing the Neonatal Medical and Nursing workforce paper and associated action plan on 12 July 2021. The paper will then be received at the next Trust Board meeting for completeness.

### 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.

### 6 RECOMMENDATIONS

- ETM/Regulation and Assurance Committee are asked to acknowledge the contents of the paper.
- ETM/Regulation and Assurance Committee is asked to acknowledge that full compliance with the scheme can be declared on 15 July 2021, subject to ETM receiving and agreeing the Neonatal Medical and Nursing workforce paper and associated action plan on 12 July 2021.
- ETM/Regulation and Assurance Committee is asked to note the detailed information and assurance that the service has achieved full compliance with the implementation of The Saving Babies' Lives Care Bundle, Version 2, including the required audits and subsequent action plans.
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<b>7</b>	<b>Appendices</b>
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1. Appendix 1 Maternity Incentive Scheme (MIS)
2. Appendix 2 MIS Safety action 5 action plan
3. Appendix 3 Copy of SBL Survey 5 - RAG for RAE
4. Appendix 4, summary of Saving Babies' Lives care bundle Version 2 audits and action plans
5. Appendix 5 Audit report - Risk status for FGR at booking
6. Appendix 6 CO monitoring April 21
7. Appendix 7 FGR audit 3rd centile Oct 2020
8. Appendix 8 FGR audit report- march 2021
9. Appendix 9 FGR Risk Assessment Action Plan
10. Appendix 10 RFM Tommy leaflet audit feb21
11. Appendix 11 RFM, audit Jan 2021
12. Appendix 12 Steroids 34 weeks audit
13. Appendix 13 Steroids audit report