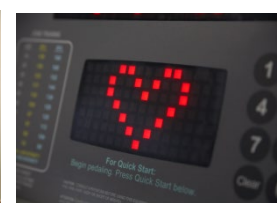
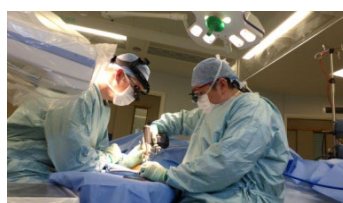


Board of Directors

January 2023

**Maternity and Neonatal update November/December
and Maternity Incentive Scheme submission**

Sara Hollins, Director of Midwifery



Highlights November/December

- November:
- Trust Board asked to note/approve:
 - Appendices 2, 3 and 4, the neonatal medical and nursing action plans and supporting review paper, required to demonstrate compliance with safety action 4 of the Maternity Incentive Scheme, Year 4. Papers approved at November People's Academy
 - 90% of all staff groups completed PROMPT and Neonatal Life Support training by the 4 December, meeting compliance with Safety Action 8 of the Maternity Incentive Scheme, Year 4.
- December:
 - Obstetric attendance audits, required to demonstrate compliance with Safety Action 4 of the Maternity Incentive Scheme (MIS), Year 4.
 - Appendix 5, quarterly Perinatal Mortality Review Tool report, required to demonstrate compliance with Safety Action 1 of the MIS
 - Board to note the maternity dashboard (numerical) and that there have been 2 incidences where 1:1 care in labour has fallen below 90%. Co-ordinators have resumed data validation and this has been updated on the action plan for MIS

Maternity Incentive Scheme

- Year 4 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 have declared full compliance with the scheme in the previous 3 years
- The year 4 scheme has had a number of pauses and delayed submission date in acknowledgement of the ongoing challenges post pandemic during late 2021/22
- The Board Declaration Form must be signed by the Chief Executive and the Accountable Lead for commissioning maternity services at the ICS, and submitted no later than 12 noon on Thursday 2 February 2023.

Board Reporting Process

- The Maternity and Neonatal Services Monthly Update Paper is used as the primary mechanism for updating Board on progress throughout the reporting year
 - Quarterly ATAIN reports
 - Quarterly PMRT reports
 - Bi-annual Midwifery Workforce papers
- Throughout the year the evidence required to demonstrate compliance is also presented and discussed in a number of places
 - ATAIN/PMRT/Early Notification Scheme (ENS)/HSIB cases discussed at joint obstetric/neonatal speciality meetings, core governance groups and at the bi-monthly Maternity Safety Champion Meetings
 - Workforce Papers are discussed and approved at People Academy prior to presentation to Board
- All maternity Board papers are shared with the maternity leads at the ICS monthly Maternity Oversight Meetings

Board Reporting Process

- An annual MIS summary is provided pre-submission including additional information, for example Saving Babies' Lives audits and action plans, and a final assessment of the position of each of the 10 safety actions
- Same summary is shared with the ICS Maternity Leads
- Meeting on 26 January, post Board to provide final confirmation of completion of any outstanding actions/evidence
- Followed by a meeting with the CEO on 26 January to complete the Board reporting form to enable CEO submission by 12 noon on 2 February 2023

Year 4 Position

- The Maternity Service believes that the standards for each of the 10 safety action have been met, subject to:
 - Board acknowledging/approving the final reports included in the November and December update papers
 - Board acknowledging/approving the audits/action plans for Saving Babies' Lives, included as appendices to the MIS annual paper
 - That Safety Action 1 will meet compliance if the Board submission paper includes the mitigation narrative regarding the 1 baby where surveillance information was not completed within 4 weeks of death.

Year 4 Position

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?	Y
2	Are you submitting data to the Maternity Services Data Set to the required standard?	Y
3	Can you demonstrate that you have transitional care services to support the Avoiding Term Admissions Into Neonatal units Programme?	Y
4	Can you demonstrate an effective system of clinical* workforce planning to the required standard?	Y
5	Can you demonstrate an effective system of midwifery workforce planning to the required standard?	Y
6	Can you demonstrate compliance with all four elements of the Saving Babies' Lives care bundle?	Y
7	Can you demonstrate that you have a mechanism for gathering service user feedback, and that you work with service users through your Maternity Voices Partnership (MVP) to coproduce local maternity services?	Y
8	Can you evidence that a local training plan is in place to ensure that all six core modules of the Core Competency Framework will be included in your unit training programme over the next 3 years, starting from the launch of MIS year 4? In addition, can you evidence that at least 90% of each relevant maternity unit staff group has attended an 'in house', one-day, multi-professional training day which includes a selection of maternity emergencies, antenatal and intrapartum fetal surveillance and newborn life support, starting from the launch of MIS year 4?	Y
9	Can you demonstrate that there are robust processes in place to provide assurance to the Board on maternity and neonatal safety and quality issues?	Y
10	Have you reported 100% of qualifying cases to Healthcare Safety Investigation Branch (HSIB) and to NHS Resolution's Early Notification (EN) Scheme from 1 April 2021 to 5 December 2022?	Y

Questions?