Maternity Perinatal Quality Surveillance model for May 2021

	OVERALL	SAFE	EFFECTIVE	CARING	RESPONSIVE	WELL LED
CQC Maternity Ratings - last assessed 2018	GOOD	GOOD	GOOD	OUTSTANDING	GOOD	GOOD

Sherwood Forest Hospitals
NHS Foundation Trust

2019	
Proportion of midwives responding with 'Agree' or 'Strongly Agree' on whether they would recommend their Trust as a place to work or receive treatment (reported annually)	72%
Proportion of speciality trainees in O&G responding with 'excellent or good' on how they would rate the quality of clinical supervision out of hours (reported annually)	89.29%

Exception report based on highlighted fields in monthly scorecard (Slide 2)

Obstetric haemorrhage >1.5L (3.7% April 21)

- Improvement seen this month after data quality review
- Continue to monitor trend
- Remains reportable via maternity triggers- no lapses in care / learning points

Stillbirths (4.6/1000 in month vs national target <4.4/1000)

- Improved trajectory this month and case review findings to be shared with staff and LMNS
- Potential link with Covid changes around scanning – pre Covid schedule anticipated to commence from June 21

Staffing red flags

- 3 staffing incidents reported in month
- Monitored through local governance including issues & action plans
- Work on-going to explore and address staff satisfaction issues

CQC enquiries

- None

Maternity Assurance Divisional Working Group

NHSR	Ockenden
• Evidence platform created • Peer review & external auditor engaged • Commence final review May • Sign off July	• Divisional working group TOR agreed • Meetings on-going • Reports to Maternity Assurance Committee

Incidents reported April 2021 (71 all no/low harm after review)

Most reported	Comments
Emergency CS (Labour & delivery)	Some duplication in reporting, no themes identified
Triggers x 13	Various including PPH, term admission
No incident s reported 'moderate' harm	

Other

- Quarterly Review Meeting with HSIB Maternity team – no on-going cases at present
- Engagement with SaTH starting to gain traction at divisional level
- New training commenced in April 2021, reflected within statistics. PROMPT training to commence May 2021, confirmation received that face to face can resume and plans made for this. Plan for K2 CTG online package to commence May 2021 following updates and revised plan.
- Midwifery Continuity of Care, statistic to be included on next months scorecard, current data 19% of women during April booked on MCoC pathway with 6% of these receiving intrapartum care. Of the whole of April's booking 5.3% of these were of BAME background.

Maternity Perinatal Quality Surveillance scorecard

Sherwood Forest Hospitals
NHS Foundation Trust

	CQC Maternity Ratings - last assessed 2018	OVERALL		SAFE		EFFECTIVE		CARING		RESPONSIVE		WELL LED				
		GOOD		GOOD		GOOD		OUTSTANDING		GOOD		GOOD				
	Maternity Safety Support Programme	No														
	Maternity Quality Dashboard 2020-21	Alert (national standard /average where availabl	Running Total/ average	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21
Perinatal	1:1 care in labour	>95%	99.81%	100%	100%	100%	99.66%	100%	99.66%	99.66%	99.66%	100%	99.66%	100%	99%	100%
	3rd/4th degree tear overall rate	>3.5%	2.18%	3.20%	2.63%	0.37%	2.11%	2.68%	2.42%	1.02%	2.37%	2.32%	0.84%	2.82%	2.84%	1.10%
	Obstetric haemorrhage >1.5L	Actual	116	7	15	13	21	8	7	11	9	8	8	5	6	10
	Obstetric haemorrhage >1.5L	<2.6%	3.24%	2.49%	5.64%	4.80%	7.37%	2.68%	2.42%	3.75%	3.56%	3.09%	3.38%	%	2.09%	3.70%
	Term admissions to NNU	<6%	3.62%	4.24%	1.84%	1.82%	2.44%	3.00%	3.06%	5.44%	2.34%	4.59%	4.20%	1.99%	4.18%	5.00%
	Apgar <7 at 5 minutes	<1.2%	1.56%	1.77%	0.74%	1.09%	0.70%	1.00%	1.36%	1.36%	2.73%	2.30%	3.35%	0.00%	0.70%	0.73%
	Stillbirth number	Actual	11	1	0	1	0	1	0	1	2	2	1	1	1	0
	Stillbirth number/rate	>4.4/1000	4.63			2.413			2.235			7.198			5.148	
Workforce	Rostered consultant cover on SBU - hours per week	<60 hours	60	60	60	60	60	60	60	60	60	60	60	60	60	60
	Dedicated anaesthetic cover on SBU - pw	<10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
	Midwife / band 3 to birth ratio (establishment)	>1:28		1:30.4	1:28.4	1:27.8	1:30.4	1:30	1:28.5	1:28.5	1:26.4	1:28.5	1:24.6	1:30	1:30	1:30.4
	Midwife/ band 3 to birth ratio (in post)	>1:30		1:31.4	1:30	1:29.9	1:31.4	1:29	1:29.7	1:29.7	1:28.4	1:29:7	1:25.7	1:25.7	1:31	1:31.4
Feedback	Number of compliments (PET)			0	0	0	1	2	1	4	2	1	1	1	3	1
	Number of concerns (PET)			1	3	1	2	5	0	0	3	2	1	2	1	3
	Complaints			0	1	0	2	2	1	1	0	0	2	0	1	0
	FFT recommendation rate	>93%		89%	100%	100%	99%	93%	93%	87%	83%	83%	76%	88%	90%	84%
Training				All training suspended during Covid.												
	PROMPT/Emergency skills all staff groups			94%	MDT training re-launched with PROMPT programme. All staff booked to complete by March							15%	39%	58%	81%	100%
	K2/CTG training all staff groups			88%	CTG training re-launched with K2 programme & revised competency assessment framework. All staff booked to complete by March 21							36%	45%	75%	95%	98%
	CTG competency assessment all staff groups											0%	11%	53%	98%	98%
	Core competency framework compliance			Core competency framework launched December 2020 - for inclusion in maternity TNA for 21/22												6%
Reporting	Progress against NHSR 10 Steps to Safety	<4 <7 7 & above														
	Maternity incidents no harm/low harm	Actual	837	60	45	60	54	59	83	52	68	95	61	62	67	71
	Maternity incidents moderate harm & above	Actual	4	0	0	2	0	0	0	0	0	0	0	1	1	0
	Coroner Reg 28 made directly to the Trust		Y/N	N	N	N	N	N	N	N	N	N	N	N	N	N
	HSIB/CQC etc with a concern or request for action		Y/N	N	N	N	N	N	N	N	N	Y	Y	N	Y	N