

Board of Directors Meeting in Public - Cover Sheet template and Guidance for all governance meetings

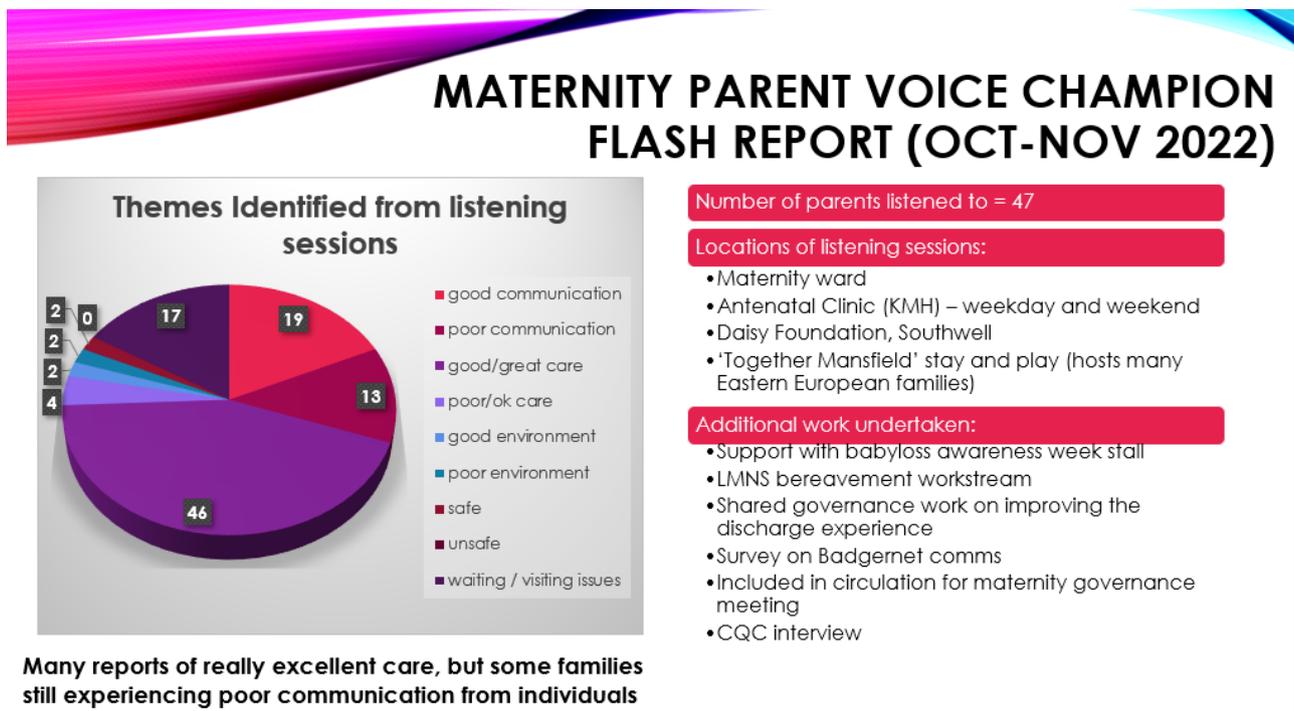
All reports **MUST** have a cover sheet

| | | | | |
|--|---|---|--|--------------------------------|
| Subject: | Maternity and Neonatal Safety Champions Report | | Date: January 2022 | |
| Prepared By: | Paula Shore, Director of Midwifery/ Head of Nursing | | | |
| Approved By: | Phil Bolton, Chief Nurse | | | |
| Presented By: | Paula Shore, Director of Midwifery/ Head of Nursing, Phil Bolton, Chief Nurse | | | |
| Purpose | | | | |
| To update the Board on our progress as Maternity and Neonatal Safety Champions | | | Approval | |
| | | | Assurance | X |
| | | | Update | X |
| | | | Consider | |
| Strategic Objectives | | | | |
| To provide outstanding care | To promote and support health and wellbeing | To maximise the potential of our workforce | To continuously learn and improve | To achieve better value |
| X | X | | X | |
| Identify which principal risk this report relates to: | | | | |
| PR1 | Significant deterioration in standards of safety and care | | | |
| PR2 | Demand that overwhelms capacity | | | |
| PR3 | Critical shortage of workforce capacity and capability | | | |
| PR4 | Failure to achieve the Trust's financial strategy | | | |
| PR5 | Inability to initiate and implement evidence-based Improvement and innovation | | | |
| PR6 | Working more closely with local health and care partners does not fully deliver the required benefits | | | |
| PR7 | Major disruptive incident | | | |
| PR8 | Failure to deliver sustainable reductions in the Trust's impact on climate change | | | |
| Committees/groups where this item has been presented before | | | | |
| Maternity and Neonatal Safety Champions Meeting | | | | |
| Executive Summary | | | | |
| <p>The role of the maternity provider safety champions is to support the regional and national maternity safety champions as local champions for delivering safer outcomes for pregnant women and babies. At provider level, local champions should:</p> <ul style="list-style-type: none"> • build the maternity safety movement in your service locally, working with your maternity clinical network safety champion and continuing to build the momentum generated by the maternity transformation programme (MTP) and the national ambition • provide visible organisational leadership and act as a change agent among health professionals and the wider maternity team working to deliver safe, personalised maternity care • act as a conduit to share learning and best practice from national and international research and local investigations or initiatives within your organisation. <p>This report provides highlights of our work over the last month.</p> | | | | |

Update on Mandated Maternity and Neonatal Safety Champion (MNSC) work for November 2022

1. Service User Voice

Discussed through MNSC meeting was the bi-monthly flash report produced by our Maternity Parent Voice Champion. The main theme identified from the listening events was communication. This theme was discussed in detail and an action taken around communication with women. It was noted that the change in patient records to a digital platform may also enhance the communication, however, as this was only launched mid-November we will need to allow time to observe any potential outcomes.



2. Staff Engagement

The MNSC Walk Round was completed on 9 November 2022. Similar themes to previous walk rounds have been report around the increased activity and the issues around the estates as to how this is impacting on the daily activity.

The Maternity Forum was cancelled due to ongoing Trust wide pressures this month and is rescheduled for the 19th of December 2022.

3. Governance

On 22 November 2022 the Trust had a 3-day visit from the Care Quality Commission (CQC). This was part of the national planned review of all Maternity Services across England following the recommendation from the Ockenden Report. We are awaiting the full report but have yet, to date, received any urgent escalations or requests for further information. Any subsequent action plans from this report will be monitored through the MNSC and Maternity Assurance Committee (MAC) meetings.

4. Ockenden

The National team are currently out for consultation, for a single delivery plan, which is understood to propose that the findings from the Ockenden and Kirkup Report be combined under a singular assurance framework. Initially anticipated for early 2023, this has now been delayed until Easter 2023.

Through the quarterly Ockenden Assurance Meeting, an agreement has been reached within the system to focus upon three key aspects from the East Kent report. Once the details have been finalised these will be reviewed through both the MNSC meeting and MAC. Attendance continues at both the monthly and quarterly Ockenden Assurance Panel. The outstanding action required for full compliance sits with the development of the website at SFH.

5. NHR:

The divisional working group continues to work on the delivery of the scheme, meeting fortnightly to review the progress and upload progress to the shared portal. The revised timeframes have been presented through the MNSC and MAC and approved.

No risks have been identified and the safety actions are being prepared for the review through MAC.

6. Quality Improvement Approach

As part of the national QI work for the Maternity and Neonatal Safety Improvement Programme, the MDT team at SFH have produced the below pre-term checklist. This has been produced in line with the driver diagram for the Mat/Neo SIP and in conjunction with colleagues at NUH to allow for standardisation within the system. This will now be taken through a PDSA cycle in clinical practice.

Optimisation and stabilisation of the pre-term infant checklist

This checklist must be completed for all births <34/40 and accompany baby on transfer to NNU.

All to be used on the form

Surname: _____
 First Name: _____
 Hospital Number: _____
 NHS Number: _____
 DOB: _____

Date of birth: / / Time of birth: / /

Time of NCU admission: Gestation: AWD

Type of birth: Birthweight: g

APGARS @ 1 @ 5 @ 10

| 1. Magnesium sulphate | | For all babies born < 30/40 | |
|--|------------------------------|-----------------------------|------------------------------|
| Was magnesium sulphate given? | Yes <input type="checkbox"/> | Date and time: | |
| No <input type="checkbox"/> | If no, reason: | | |
| 2. Antenatal steroids | | | |
| Were antenatal steroids given? | Yes <input type="checkbox"/> | First dose (date/time): | |
| No <input type="checkbox"/> | Second dose (date/time): | | |
| If no, reason: | | | |
| 3. Intrapartum antibiotics | | | |
| Were prophylactic intrapartum antibiotics given? | Yes <input type="checkbox"/> | Antibiotics given: | |
| No <input type="checkbox"/> | Last dose (date/time): | | |
| If no, reason: | | | |
| 4. Right place of birth | | | |
| Was birth in a hospital with access to a NICU? | Yes <input type="checkbox"/> | If no, reason: | |
| No <input type="checkbox"/> | | | |
| 5. Delayed cord clamping | | | |
| Was there delayed cord clamping at birth? | Yes <input type="checkbox"/> | Duration of delay: | |
| No <input type="checkbox"/> | min sec | | |
| If no, reason: | | | |
| 6. Early colostrum | | | |
| AN counselling on benefits of EBM? | Yes <input type="checkbox"/> | Colostrum pack given? | Yes <input type="checkbox"/> |
| | No <input type="checkbox"/> | | No <input type="checkbox"/> |
| First feed (date/time): | EBM expression (date/time): | | |
| | | | |
| 7. Normothermia | | | |
| Temp on admission to NICU: | | °C | Details of thermal care: |
| | | | |
| DATIX completed and number | | | |

Version 1. Issue Date: October 2022 Review Date: October 2025. Reproduced with kind permission of NUH 001973

5.Safety Culture

The Pathway to Excellence Survey feedback has been provided, with SFH celebrating after it was globally recognised as an excellent place for nurses and midwives to work. The Trust is one of only five in Europe to receive Pathway to Excellence® designation from the American Nurses Credentialing Center (ANCC), showing its commitment to creating a healthy work environment where nurses feel empowered and valued.

The staff survey has now closed, and we are awaiting these results. The SCORE survey remains on track for Q4 2022/23 and will be used to provide a local quality improvement plan, triangulating the PTE and staff survey findings.