

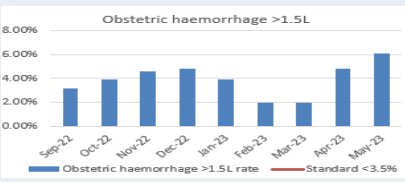
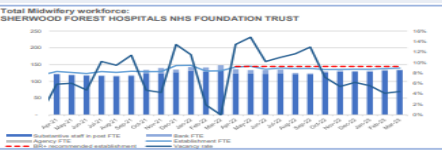
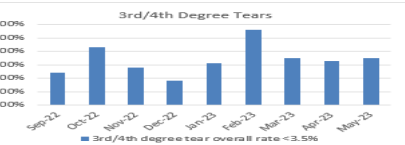
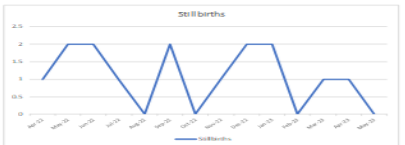
# Maternity Perinatal Quality Surveillance model for July 2023



Sherwood Forest Hospitals  
NHS Foundation Trust

CQC Maternity Ratings- assessed 2023	Overall	Safe	Effective	Caring	Responsive	Well led
	Good	Requires Improvement	Good	Outstanding	Good	Good
Unit on the Maternity Improvement Programme				No		
<b>2022/23</b>						
Proportion of Midwives responding with "Agree" or "Strongly Agree" on whether they would recommend their Trust as a place to work of receive treatment (reported annually)						74.9%
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)						89.2%

## Exception report based on highlighted fields in monthly scorecard using May data (Slide 2 & 3)

<b>Massive Obstetric Haemorrhage (Jun 6.1%)</b>	<b>Elective Care</b>	<b>Midwifery Workforce</b>	<b>Staffing red flags (May 2022)</b>									
<ul style="list-style-type: none"> <li>Increase in cases this month, two cases awaiting MDT review</li> </ul> 	<ul style="list-style-type: none"> <li>Elective Caesarean (EL LSCS_                             <ul style="list-style-type: none"> <li>EL LSCS commenced, and no cancellations noted.</li> <li>Feedback from MNSC- variation of start times- to be taken back to the working group for action.</li> <li>Data quality reviews completed, to be included in next months paper.</li> </ul> </li> <li>Induction of Labour (IOL)                             <ul style="list-style-type: none"> <li>IOL delays improved lead band 6 appointed to support the MDT meetings and exploration of outpatient IOL</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Current vacancy rate 4.2% (blue line), recruited into from the recent Recruitment Event- expected start dates in Sept 23</li> <li>Risk due to high number of expected Maternity Leave- planned over recruitment</li> </ul> 	<ul style="list-style-type: none"> <li>1 staffing incident reported in the month.</li> <li>No harm related</li> </ul> <p><b>Suspension of Maternity Services</b></p> <ul style="list-style-type: none"> <li>No suspension of services within May 23</li> </ul> <p><b>Home Birth Service</b></p> <ul style="list-style-type: none"> <li>30 Homebirth conducted since re-launch, 7 completed in May</li> </ul>									
<b>Third and Fourth Degree Tears</b>	<b>Stillbirth rate (4.0/1000 births)</b>	<b>Maternity Assurance</b>		<b>Incidents reported May 2023 (78 no/low harm, 3*moderate or above)</b>								
<ul style="list-style-type: none"> <li>Rate remains static</li> <li>New Perinatal Pelvic Health Service formed, SFH have key membership and aligns to NHS long term plan.</li> </ul> 	<ul style="list-style-type: none"> <li>No reportable cases for May</li> <li>Rate remains below the national ambition of 4.4/1000 births</li> </ul> 	<p style="text-align: center;"><b>NHSR</b></p> <ul style="list-style-type: none"> <li>Bid funding received.</li> <li>Year 5 released- working group relaunched.</li> <li>Submission due 2<sup>nd</sup> of Feb 2024</li> </ul>	<p style="text-align: center;"><b>Ockenden</b></p> <ul style="list-style-type: none"> <li>Initial 7 IEA- 100% compliant</li> <li>Next regional insight visit planned for Oct 23</li> </ul>	<table border="1"> <thead> <tr> <th>Most reported</th> <th>Comments</th> </tr> </thead> <tbody> <tr> <td></td> <td>MOH, term admissions</td> </tr> <tr> <td>Triggers x 14</td> <td>None required higher escalations</td> </tr> <tr> <td colspan="2">3 incidents reported as 'moderate' need validation through MDT review</td> </tr> </tbody> </table>	Most reported	Comments		MOH, term admissions	Triggers x 14	None required higher escalations	3 incidents reported as 'moderate' need validation through MDT review	
Most reported	Comments											
	MOH, term admissions											
Triggers x 14	None required higher escalations											
3 incidents reported as 'moderate' need validation through MDT review												

## Other

- Three moderates reported, awaiting MDT review meeting (reported month end-two relate to term admissions to the neonatal unit and one to ITU admission related to HELLP syndrome).
- MOH has increased this month and picked up through the MDT review, three cases had unplanned admission to ITU for HDU care, these are going to be reviewed thematically.
- SBLCB, remain compliant, new lead in post, version 3 launched working on the Divisional action plan).
- Entonox working group established key action plan, assurance around current exposure but risk to current levels of control. Focus on education, estates and monitoring plan.

# Maternity Perinatal Quality Surveillance scorecard

Quality Metric	Standard	Running Total/ average	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Trend
1:1 care in labour	>95%	99.81%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Spontaneous Vaginal Birth			55%	55%	54%	43%	56%	56%	55%	60%	60%	
3rd/4th degree tear overall rate	<3.5%	2.18%	2.40%	4.30%	2.80%	1.80%	3.10%	5.60%	3.50%	3.30%	3.50%	
3rd/4th degree tear overall number		46	4	8	6	2	5	9	6	6	7	
Obstetric haemorrhage >1.5L number		59	9	9	14	14	5	5	5	13	19	
Obstetric haemorrhage >1.5L rate	<3.5%	3.24%	3.20%	3.90%	4.60%	4.80%	3.90%	2.00%	2.00%	4.80%	6.10%	
Term admissions to NICU	<6%	3.62%	3.10%	1.30%	2.00%	3.20%	5.40%	3.40%	3.40%	3.40%	3.40%	
Stillbirth number		8	2	0	2	2	2	0	1	1	0	
Stillbirth rate	<4.4/1000	4.63	3.300			3.240			4.000			
Rostered consultant cover on SBU - hours per week	60 hours	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	
Midwife / band 3 to birth ratio (establishment)	<1:28		1:27	1:27	1:27	1:27	1:27	1:27	1:27	1:27	1:27	
Midwife/ band 3 to birth ratio (in post)	<1:30		1:29	1:29	1:29	1:29	1:29	1:29	1:29	1:29	1:29	
Number of compliments (PET)		0	2	2	2	3	2	3	3	6	9	
Number of concerns (PET)		9	1	2	1	1	1	1	1	1	2	
Complaints		11	0	0	0	0	0	0	0	0	0	
FFT recommendation rate	>93%		91%	89%	90%	90%	89%	91%	91%	91%	90%	

External Reporting	Standard	Running Total/ average	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Trend
Maternity incidents no harm/low harm		595	96	72	80	79	64	70	64	70	77	
Maternity incidents moderate harm & above		0	0	0	0	0	0	0	0	0	3*	
Findings of review of all perinatal deaths using the real time monitoring tool	May-23	PMRT- No reputable cases in May, case reported in April has report in draft. No initial learning identified. Previously issue around partogram improved with digital notes.										
Findings of review all cases eligible for referral to HSIB	May-23	No cases met reportable thresholds in May. One case currently active (early neonatal death reported in March). Two cases reviewed in 2023, one with no safety recommendations, one with 3 relating to escalations, clinical and risk assessment. Action plans have been completed and are monitored through governance										
Service user voice feedback	May-23	New role commenced in post within the ICB of the Maternity and Neonatal Independent Senior Advocate to support SFH.										
Staff feedback from frontline champions and walk-about	May-23	MNSC on the 6th of June, feedback around the EL LSCS list, detailed in the exception report. Positive re-launch of triage and clear plans for embedding articulated.										
HSIB/CQC/NHSR with a concern or request for action		Y/N	N	N	N	N	N	N	N	N	N	
Coroner Reg 28 made directly to the Trust		Y/N	0	0	0	0	0	0	0	0	0	
Progress in Achievement of CNST 10		<4 <7 7 & above										