

CTMUHB Board

Maternity and Neonatal Improvement Programme Highlight Report
February 2022

Date of Meeting	31 March 2022
FOI Status	Open / Public
Prepared by	Steve Sewell, Programme Director MNIP
Presented by	Greg Dix, Executive Nurse Director Sallie Davies, Deputy Medical Director
Approving Executive Sponsor	Greg Dix, Executive Nurse Director Sallie Davies, Deputy Medical Director
Report Purpose	Update the group on the progress of the Maternity and Neonatal Programme.

ACRONYMS

ATAIN	Avoiding Term Admissions into Neonatal Units
CNO	Chief Nursing Officer
EPAU	Early Pregnancy Assessment Unit
GAU	Gynaecology Assessment Unit
IMSOP	Independent Maternity Services Oversight Panel
IPAAF	Integrated Performance Assessment and Assurance Framework
MDT	Multi Disciplinary Team
MNIB	Maternity and Neonatal Improvement Board
NNU	Neonatal Unit
QLM	Quality Leadership and Management (Maternity Workstream)
QWE	Quality Women's Experience (Maternity Workstream)
PCH	Prince Charles Hospital
PREM	Patient Reported Experience Measure
PTR	Putting Things Right
SEC	Safe and Effective Care (Maternity Workstream)

1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to provide an update on the progress of the Maternity and Neonatal Improvement Programme in the form of a highlight report.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 This section outlines an overview narrative describing some of the key matters within the Maternity and Neonatal Improvement Programme.
- 2.2 The IMSOP visit on 28th February, 1st March & 2nd March is underway. IMSOP will visit Maternity and neonatal Units at PCH on Monday 28th February, the units at PoW on Tuesday 2nd March, and the Tirion Birth Centre on Wednesday 2nd March.
- 2.3 With regards to the original 70 Royal Colleges recommendations, following the visit, IMSOP will review all the evidence submitted and alongside their visit experiences, relating to 10 of the open recommendations and 10 recommendations that have been verified but require follow up. We will then agree the remaining elements of improvements required, include them (if they aren't already) within the improvement plan and close down all of the Royal Colleges recommendations. Progress will then be tracked through the Improvement Programme.
- 2.4 The Improvement Team are working with IMSOP to create clear and agreed descriptions for each of 42 recommendations within the Neonatal Deep Dive report, and additionally the 14 escalations within the August escalation of Neonatal service concerns.
- 2.5 Recent focus on culture and wellbeing in maternity services has led to a review of progress made, acknowledgement of the challenges that remain from recent pieces of work and the development of a forward plan. This work is being presented at MNIB and then the next People and Culture Committee.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 Please note the "Programme Risks/Issues" are captured on page 2 of the highlight report.
- 3.2 The Covid situation has improved over the past month and is having less impact on the improvement work. The key risk we're seeking to mitigate, having learnt from the Royal Colleges recommendations process, is to clarify the expectations for each of the recommendations described in the Neonatal Deep Dive report. Work to do this with IMSOP has already begun.

4. IMPACT ASSESSMENT

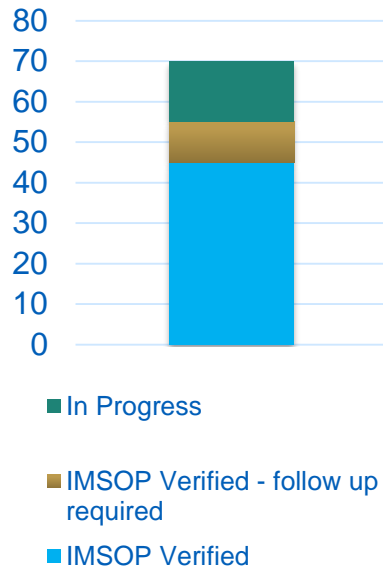
Quality/Safety/Patient Experience implications	Yes (Please see detail below) Please refer to the highlight report for detail.
Related Health and Care standard(s)	Governance, Leadership and Accountability All Health and Care Standards apply.
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) Not required for a progress report.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below) Please refer to the highlight report for detail.
Link to Strategi Goals	Improving Care

5. RECOMMENDATIONS

- 5.1 The Board are asked to note the report.

PROGRESS IN NUMBERS:

RCOG Recommendations



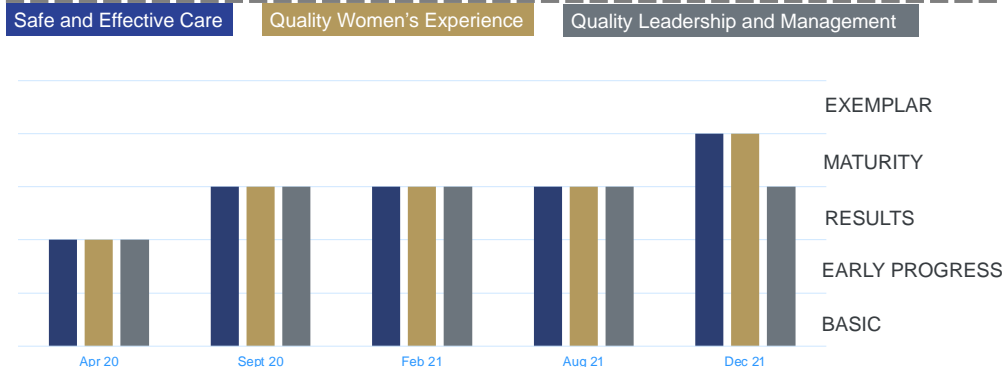
THREE THINGS YOU NEED TO KNOW:

- The IMSOP Visit (28th February, 1st and 2nd of March) started on 28th February and is due to run for 3 days. The Units have spent lots of time preparing the visit, which will cover a general overview of the Maternity and Neonatal Services, as well as specific recommendations
- The IMSOP Neonatal Deep Dive full report was published on 10th February. Staff briefings were held across the week beginning 7th February and wellbeing support offered.
- Of the Historic Serious Incident Reviews, the final 6 will be reviewed at Assurance Closure Panel (ACP) in the next week, twelve reviews having been through ACP require minor amendments before final closure.

PROGRAMME LEVEL MILESTONES:

Milestone	Due	Progress
Maternity and Neonatal Assurance Framework	Jan 21	A final draft version is ready for signoff at March MNIB and through ILG structures
Historic SIs signed off through Panel process	Feb 22	On track to completed by end of March 2022.
Neonatal Clinical Reviews all reviewed by Clinical Cabinet	Mar 22	Jointly with IMSOP – work is progressing to schedule.
Neonatal Nursing Rotation with UHW begins	Mar 22	The agreed rotation is due to start at the end of March.

IPAAF ASSESSMENT PROGRESS



SUPPORT AND DECISIONS NEEDED FROM BOARD:

None.

TOP PROGRAMME RISKS AND ISSUES:

Risks/Issues	Latest Progress	Rating	Trend
Covid Response Impact delays progress and/or IMSOP process of assurance.	The challenges of IMSOP access to services to validate progress remain, however, to mitigate some of these we've agreed revised ways of working that should help, through periodic Showcases and clinical huddles. IMSOP visit on 28 th Feb – 2 nd March will provide IMSOP Panel members with further assurances in a number of areas.	Very High	▼ □
Unclear RCOG recommendation requirements	During February we've agreed to finalise definitions for 18 open and follow-up recommendations. Proposal on criteria required for exit from Special Measures is under discussion with IMSOP.	Very High	▼ □
The level of available programme team and operational resource impacts on progress	The Programme Improvement team is fully resourced except for one Neonatal Experience and Engagement role.	Very High	► ?
Neonatal Deep Dive makes recommendations that extend the programme	The Deep Dive report was published on 10 th Feb. 2021. An Action plan is being developed to respond to the wider set of recommendations in the Deep Dive report.	Very High	► ?
The wide range of assurance leads to multiple resource intensive processes, distracting from improvement progress.	Recent discussions with IMSOP have agreed to streamline some assurance processes. To improve assurance around improvement work, we've agreed to shift the focus away from Royal College recommendations to key milestones within the improvement work..	High	► ?
The publication of the Deep Dive report in February could have a negative impact on the morale of staff	Staff sessions on the DD report have been held on both sites and further sessions will be held in coming months. A staff briefing newsletter has been published and there will be a helpline for staff to call to address any concerns. Staff will also have access to a psychologist.	High	► ?

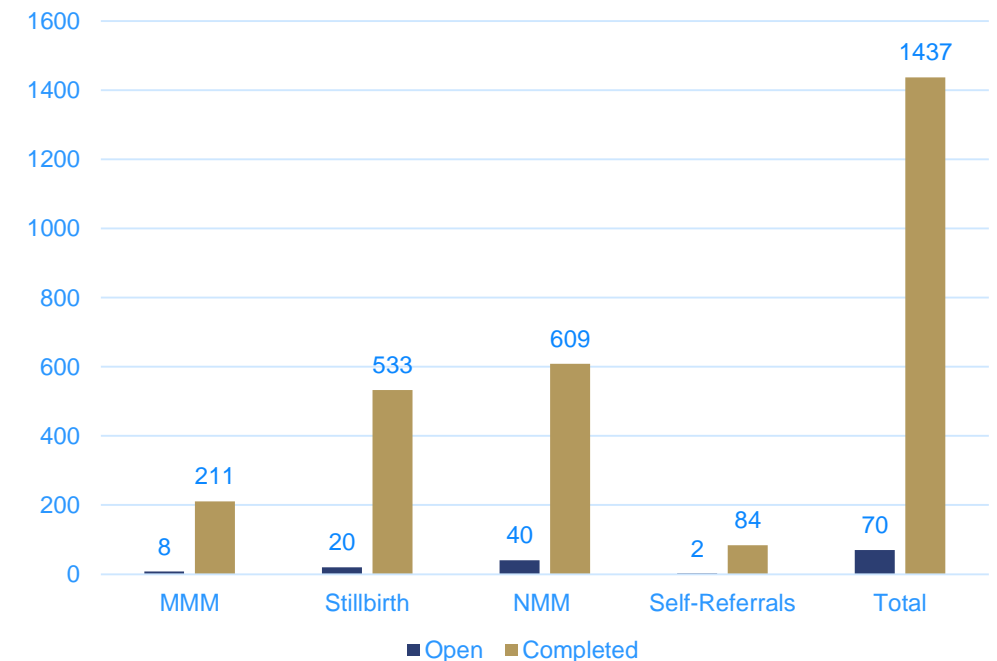
CLINICAL REVIEW:

- Cycles 1-8 of the Neonatal Category of Clinical Reviews Clinical Cabinet are complete. Batch 9 (of 9) is in progress (completion date 25 March 2022)
- 95% of Clinical Review improvement actions are completed (1437 /1507). 5% are in progress.
- Clinical Review Team contracts have been extended to June 2022

Key Risks/Issues:

Lead Midwife Contract Ends Prior to programme Completion.

CRT Actions



Maternity and Neonatal Improvement Programme - Workstreams

SROs : Greg Dix and Sallie Davies

February 2022

NEONATAL IMPROVEMENT:

- High levels of staff sickness / absence continued during February
- Deep Dive report published - 10th Feb. 2022

Milestone	Due	Progress
Implement Hypoglycaemia Pathway	Oct 21	Further delays with training. Concerns escalated. Assurance given that pathway will be introduced 21 st March.
Rollout Neonatal Debrief Tool	Oct 21	Delays continue for Group training involving neonatal and midwifery staff. Training to be performed by clinical UHW team but due to availability and capacity unable to provide until further notice.
Develop and implement IMSOP suggested proformas	Oct 21	Proforma's under development. Each Proforma to be discussed and ratified once completed prior to implementation into the units.
Transitional Care proposal	Dec 21	SBAR completed. SN nurses from Neonates and Maternity supported by Lead clinicians Ward Sisters Neonatal Unit and Postnatal Ward to progress draft of business case. No progress to date due to sickness.
Support programme for nurse rotation to tertiary centre (UHW) Approval	Dec 21	Replanned for March 2022

Note: A Major review of the Neonatal Improvement work is underway, including these remaining milestones and the additional improvements to meet the Deep Dive report. Milestones will be rest rest as part of the process.

Key Risk: Negative impact on staff morale post publication of Deep Dive report.

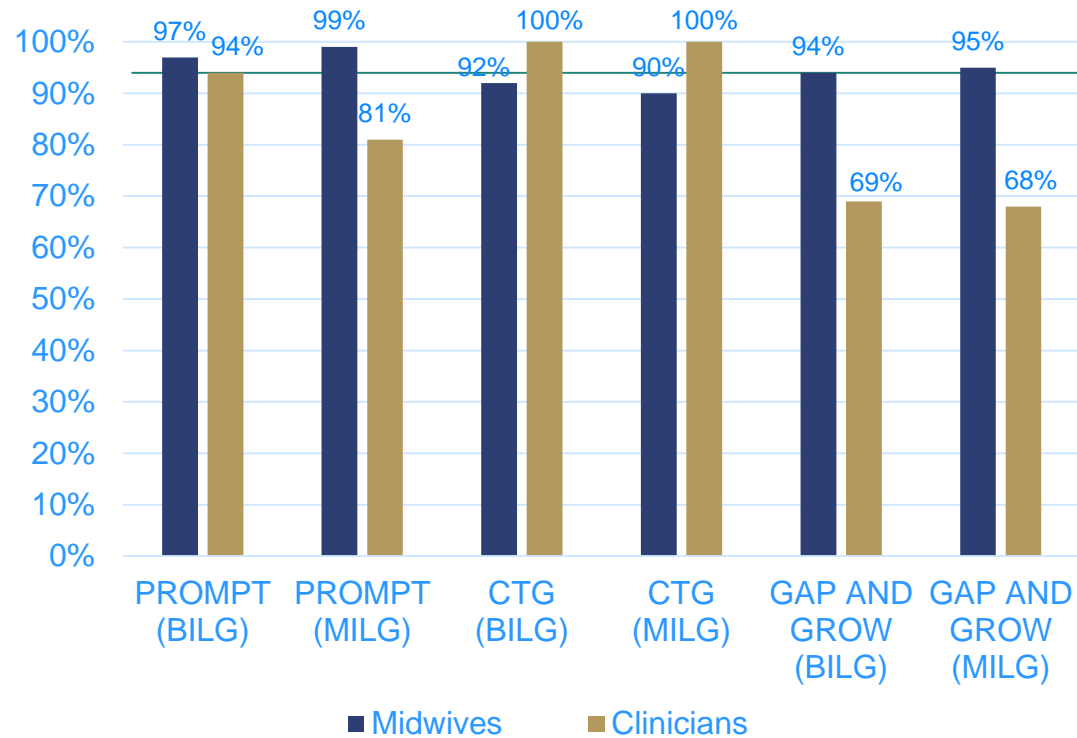
MATERNITY IMPROVEMENT:

- On target to close all SI backlog by end of March 2022
- First Strategy Development Session with CSG Triumvirates

Key Milestones	Due	Progress
QWE: Refine WeSee Experience and Engagement reporting	Jan 22	
QLM: Staff Engagement Sessions on Strategy	Feb 22	Initial themes drawn out and shared with Senior Team
SEC: Develop Journal Club for Midwives	Feb 22	Being launched 4 th March with guest speaker - Chief Editor of "The Practising Midwife"
QLM: Agree Target Culture	Feb 22	Agreed at Maternity Improvement Group
QLM: Culture and Leadership Development Plans (MCILG & BILG)	Feb 22	Meeting to review setup for 8 th March
SEC: Complete Backlog of RCA's with support from DU	Feb 22	On target for closure of backlog cases by 1 st April 2022
SEC: Delivery Unit Assurance Report re:SI process	Feb 22	Dependent on ratified MNAF and closure of SI cases
QWE: Ensure Partner survey sent out automatically via Civica system	Feb 22	Being sent out manually, the team supporting Civica are working on correcting this
QWE - Include feedback from have your say cards into Civica maternity dashboard and include in WEESEE reporting	Feb 22	Led by corporate team and awaiting access to "have your say" data
SEC: Develop Maternity Assurance Framework	Mar 22	Due for signoff at MNIB 31 st March
SEC: Establish a safe social space for staff to support informal knowledge sharing	Mar 22	Capital planning advised works will commence end of March

Key Risk: Operational capacity for QLM workstream.

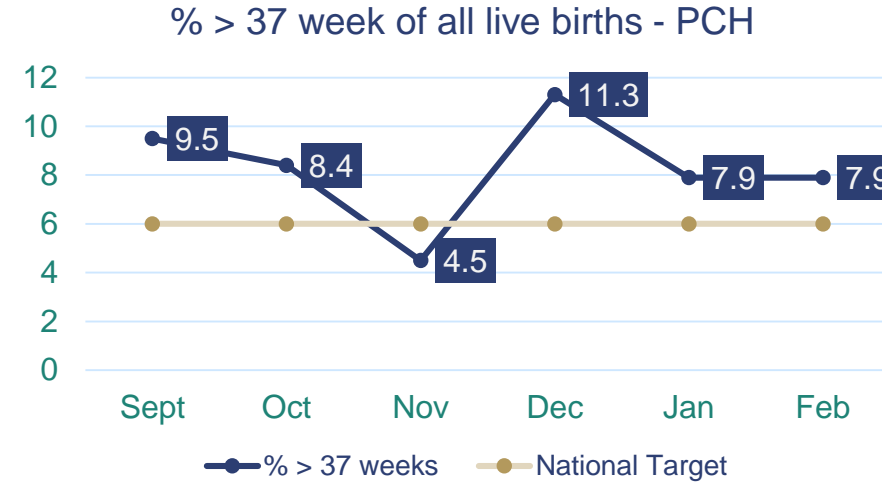
Maternity - Training Compliance (February 2022) (compliance target 95%)



This graph shows the latest position with regard to mandatory training compliance. Training compliance by Midwives is in line with target. Training compliance of clinicians for Gap and Grow is well below the target level in both BILG and MLIG, actions to address remaining gaps in training compliance have been agreed.

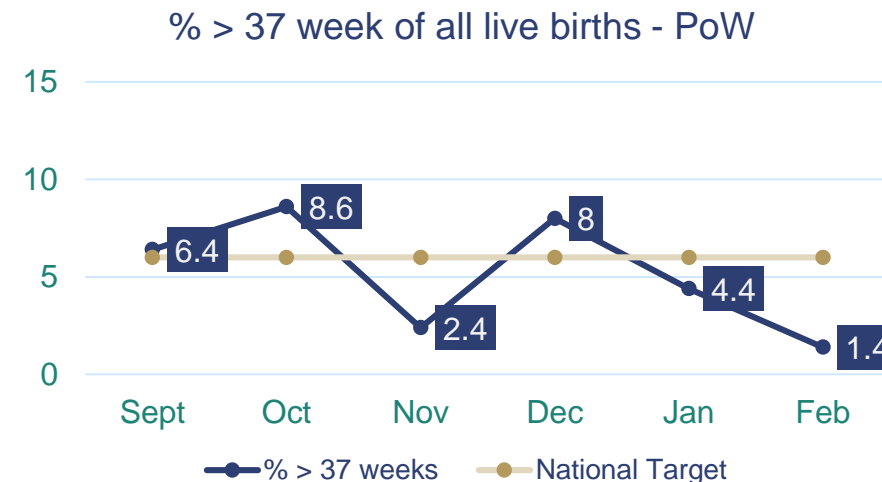
Annual PROMPT reports show that CTM have the best compliance rates in Wales

Neonatal Term Admissions



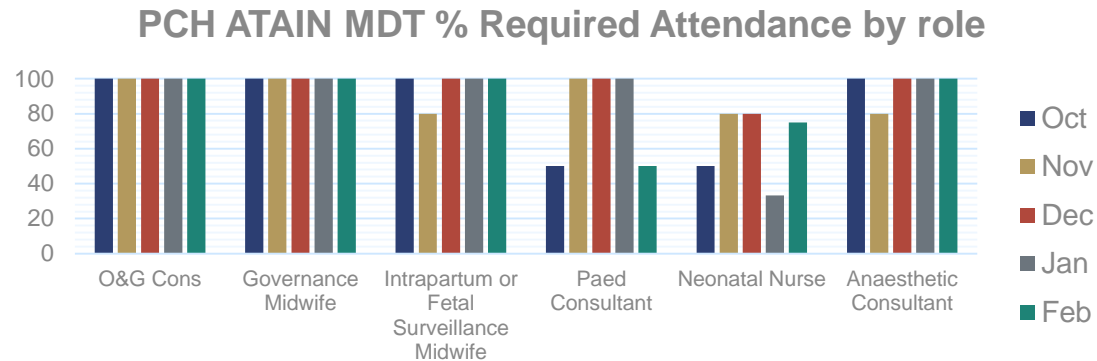
Term Admissions in PCH have remained constant at 7-9% in February. POW has seen a reduction to 1.4%

The main causes for term admissions is Respiratory Distress which accounted 50%.



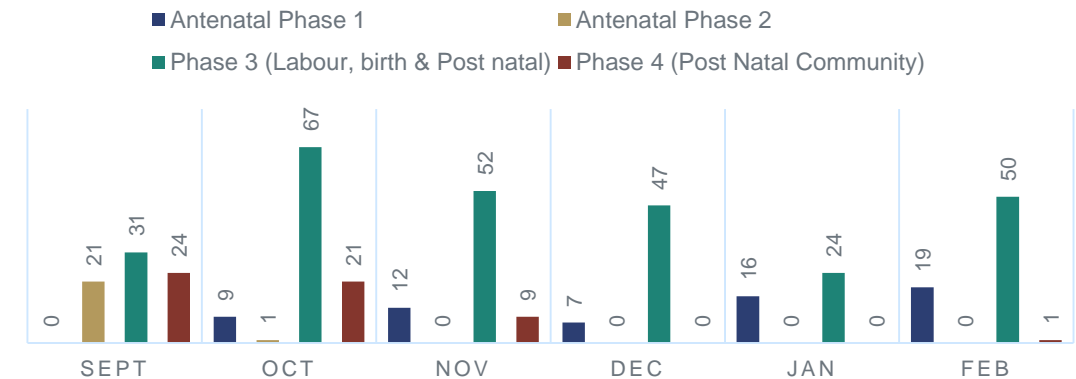
KEY PROGRAMME METRICS

ATAIN MDT Average Attendance per meeting during each month by role



The Senior Nurse for Neonates has since implemented a rota which will enable the attendance of a Neonatal Nurse at every meeting. Similarly the job plan of the Consultant Neonatologist has been reviewed and updated to allow attendance at these meetings. It is anticipated that from March 2022 there will be an improvement in the Neonatal attendance. These meetings are held weekly.

Maternity - PREMS Survey Responses – Feb 22



The number of responses are lower than expected. Meetings are ongoing with the Civica team to trouble shoot data flow and data quality issues, including understanding full response rate expected, successful send out rates and final response rate to the survey..

Maternity - PREMS Key Question Responses

	Dec 21	Jan 22	Feb 22
Antenatal Did you feel your questions and concerns were listened to?	80%	83 %	78%
Antenatal Was information provided easy to understand and were you comfortable to ask questions?	80%	77 %	65%
Labour– During birth, were you supported to make choices which were right for you?	89%	86 %	86%
Labour– Did you have confidence and trust in the staff caring for you during labour?	95%	95 %	91%

This table shows the average percentage response for 4 key questions within the PREMS survey. This gives an indication of the response levels, however, with small numbers of responses some caution needs to be highlighted when interpreting these numbers. The validity of the responses will improve when response rates rise.