



GIG  
CYMRU  
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WALES

Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board

## Agenda Item

### Health Board

#### Maternity and Neonatal Improvement Programme

Date of Meeting	30 <sup>th</sup> July 2021
FOI Status	Open / Public
Prepared by	Steve Sewell, Programme Director MNIP
Presented by	Greg Dix, Executive Nurse Director
Approving Executive Sponsor	Greg Dix, Executive Nurse Director Dom Hurford, Acting Executive Medical Director
Report Purpose	To highlight progress in the Maternity and Neonatal Improvement Programme

#### Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
MNIB	08/07/2021	Noted
Quality and Safety Committee	8/8/2021	Pending

#### ACRONYMS

<b>IMSOP</b>	Independent Maternity Services Oversight Panel
<b>MNIB</b>	Maternity and Neonatal Improvement Board
<b>PREM</b>	Patient Reported Experience Measure
<b>RCOG</b>	Royal College of Obstetricians & Gynaecologists

## 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 Any specific matters that are required to be brought to the attention of the meeting are reflected on page one of the highlight report under the heading "Support and Decisions".

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

Please note the "Programme Risks/Issues" are captured on page 1 of the highlight report.

## 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 new, changed or withdrawn policies and services.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	No
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

## 5. RECOMMENDATIONS

- 5.1 The Health Board are asked to note progress made within the Maternity and neonatal Improvement Programme.

# Maternity and Neonatal Improvement Programme

SROs : Greg Dix and Dom Hurford

June 2021

## OVERALL STATUS

Amber

BENEFITS

Amber

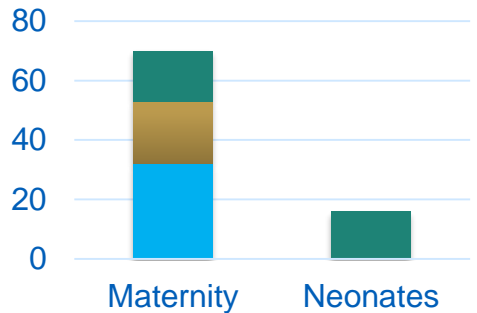
TIME

## FOUR THINGS YOU NEED TO KNOW:

- Clinical Director for Merthyr Cynon CSG appointed, a clinical lead for Maternity improvement was also appointed
- IMSOP Visit to the Health Board set for 19<sup>th</sup>, 20<sup>th</sup> and 21<sup>st</sup> July 2021
- Following agreement that the Health Board would be the primary assurer of evidence, the process to do this has started, with an initial four recommendations being submitted into this process.
- Neonatal Deep Dive review by IMSOP impacted by evidence data issue, work to reload evidence is underway.

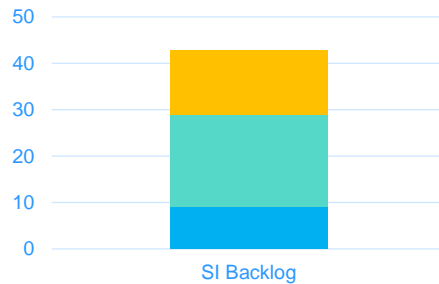
## PROGRESS IN NUMBERS:

RCOG Recommendations



■ In Progress  
■ IMSOP Verified - follow up required  
■ IMSOP Verified

SI Backlog



■ Not Started ■ In Progress  
■ In QA ■ HB Approved  
■ WG Approved

## SUPPORT AND DECISIONS NEEDED FROM XYZ:

- Report presented for noting.

## PROGRAMME LEVEL MILESTONES:

Milestone	Due	Progress
Initiate Culture Baseline Process (Qualitative and Quantitative)	May 21	Both Snapshot (Quantitative) and In Depth (Qualitative) culture work initiated
Implement Reviewed Programme Management Framework	Jun 21	In Progress – final element Milestone plan still in production
Establish New Evidence Process	Jun 21	Established, first batch of recommendations being assessed
Strategy Development Design	July 21	Workpackage drafted, design work to begin soon

## TOP 3 – PROGRAMME RISKS/ISSUES:

Risks/Issues	Latest Progress	Rating	Trend
Covid Response Impact delays progress	IMSOP panels members attending virtual meetings, IMSOP visit due to take place in July	Very High	▼
Unclear RCOG recommendation requirements	Programme Director to present proposed definitions at August IMSOP	Very High	► ?
Neonatal Deep Dive makes recommendations that extend the programme	Review Neonatal plans to address the remaining NN recommendations and identify and include other known improvement work	Very High	► ?

## IMSOP Next Step Actions

Action	Status	Progress and Upcoming Deliverables	On Track
Development of robust plans to manage the clinical review feedback process.	Complete	Aligning current processes and joint communications and handling plan for the Stillbirth Category and Neonatal Category. Evaluating previous communication with women and families.	Ongoing Activity
Review of the impact of COVID-19 on the Improvement Programme.	Complete	IMSOP and DU members continue to be invited into many of the key meetings via MS Teams. Discussion with IMSOP on risk mitigation took place in June. On site IMSOP visit now planned for July.	Ongoing Activity
Review arrangements for monitoring, evaluating and reporting progress within the MNIP.	In Progress	A new strengthened and simplified programme management structure is mostly in place. A reviewed risk register is 'live', more focused highlight reporting is in place, a Roadmap outlining work to the end of the year has been issued, and milestone plan is well developed.	Yes
Further development of the IPAAF.	Complete	IPAAF for Maternity and Neonatal Services has been further developed – and more in depth review is planned for July/August 2021	
Identification of a longer term structural solution to service integration.	Complete		
Progression of an Engagement Cycle Process Map.	Complete		
Development of PREMS.	In Progress	The Civica system is live and surveys built, work to structure data and establish connections to different capture devices (e.g. iPads) should be complete in a couple of weeks, so testing can begin.	Yes
Ongoing response to themes from complaints and concerns.	In Progress	Developed thematic reports for shared learning and reflection. Plan developing to embed into ILG governance and inclusion in the newsletter.	Yes
Develop a process to communicate progress.	In Progress	Development of Maternity Services communication strategy, the supporting webpage templates have been created and should be live with content by the end of July.	Yes
Review the systems and processes for serious incident reviews.	In Progress	SI systems and processes are operational, which are being assured through WG DU assurance exercise. Positive feedback from WG DU has already been received. There are challenges with volume, services capacity and experience of CTM staff to undertake the outstanding reviews (including SI Backlog).	At Risk

## CLINICAL REVIEW:

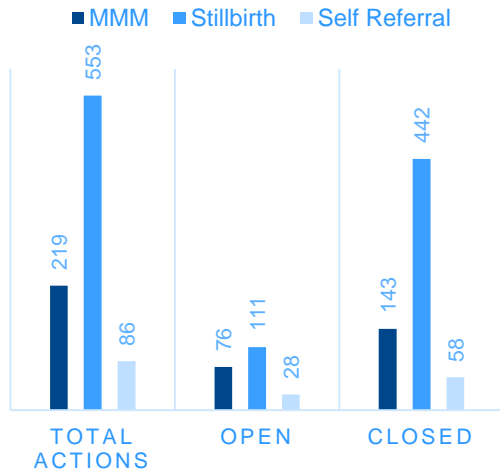
All women in the stillbirth category have received a letter informing them the review of their care is complete.

Findings from the stillbirth category are being analysed in clusters of actions.

### Key Risk:

**Maternity and Neonates teams process alignment for the Neonates Category reviews.**

## ACTIONS IDENTIFIED THROUGH CLINICAL REVIEW



## NEONATAL – Quality of Families Experience

First My Maternity My Way Neonatal session planned for July

Engagement Strategy and plan delayed.

### Key Risk:

**Insufficient Resource due to workload driven by Sis and Deep Dive activities..**

## NEONATAL – Quality Leadership and Management:

Culture snapshot survey initiated in conjunction with maternity.

More in-depth Culture work to be discussed with the OD team – similar to the Maternity work.

Values activities being embedded into the weekly team meetings.

**Key Risk; Unclear workstream objectives now most of the recommendations have been achieved.**

## NEONATAL – Safe and Effective Care:

1<sup>st</sup> Joint Neonatal and Maternity performance board with WG happened on 21<sup>st</sup> June, outcome - pending.

Intranet Guidelines system in place.

Prototype Dashboard available.

### Key Issue:

**Resolved – Links to Swansea Bay Guidelines are now enabled within the CTM Neonates Guidelines area of the intranet.**

## MATERNITY – Quality Leadership and Management:

Culture Baseline (Snapshot survey and In Depth assessment) began.

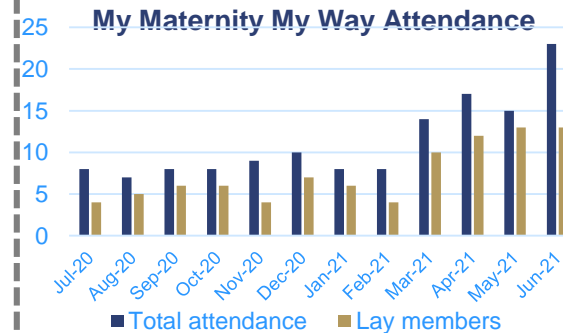
Clinical Director for Merthyr Cynon was appointed and as part of the same process a maternity clinical lead for this programme was also appointed.

### Key Risk:

**Governance link between the programme and emerging ILGs.**

## MATERNITY – Quality of Women's Experience

PREMS surveys due to be tested in July



## MATERNITY – Safe and Effective Care:

WG DU undertaking assurance review for 6 SI related IMSOP recommendations.

1<sup>st</sup> WG Maternity performance board took place 21<sup>st</sup> June.

WeSee handover newsletter ready for circulation in July

### Key Risk:

**Workstream Lead Vacancy – New CD expected to take on this role**