

Update Position in Maternity

February 2021

Progress since last update

Summary

We are progressing well against our compliance actions which is reflected in a positive MSSP report from NHSEI which clearly demonstrates the change in the service through our processes, management of risk and culturally.

Governance and reporting

Our new internal mechanism of reporting and governance has been implemented and gives day-to-day oversight and assurance, streamlines prioritisation and ensures lines of communication are in place. We continue to receive active support and monitoring until the end of February to embed activities. We have established a 'meeting effectiveness scorecard' which allows us to review effectiveness in real time and take actions to improve for each monthly cycle to maintain sustained progress and demonstrate good practice.

Our task and finish group has established the reporting requirements for the service:

- Daily management report to enable teams to react quickly to situations and provide them with the information required to proactively manage aspects of the service
- Weekly assurance report to provide the leadership team with oversight of the service's performance and highlight areas of concern that can be actively managed through the weekly reporting rhythm
- Monthly report to provide detail to the executive team and the Trust board to provide assurance on key metrics and provide the information required to hold the maternity leadership to account.

A measurement framework and dashboards have been developed.

Incident Management

We continue to see a reduction in overdue IMRs and incidents on a weekly basis. Our initial backlog of outstanding and overdue incidents and IMRs stood at 437, as of 12 February this has been reduced to 135.

Additional resource has been provided to support the backlog reduction of incidents and developing robust process for day-to-day operational management and assurance. The level of resource has been reduced by high activity within clinical areas and the requirements to train more colleagues as investigative officers.

To ensure that this issue around the backlog We are providing one-to-one training to each of the Band 7s to own any of their incidents to close them down. We are confident that this is working as the number of new incidents that become overdue (i.e. over 20 days) is very small.

In recognition of this pressure we: have actioned a risk management strategy, identified further external and internal resources, secured dedicated time for investigating officers, maintain a daily meeting to monitor progress against the proposed trajectory and run a daily audit check to review any incident grading discrepancy (as of January 2021 94% of all incidents raised no queries up from 92% in December). Within the backlog we have not found anything that has been raised to a Serious Incident.

Multidisciplinary working

Daily safety huddles are now part of our normal daily rhythm. Attendance at handovers has seen significant improvement with 100% attendance by obstetric consultants, and 99% attendance from the wider team (with reasoning for any non-attendance and individual handovers to follow up for the remaining 1%).

Staffing and recruitment

We have established tools and process in place to monitor staffing levels.

Birtrate+ acuity tool software highlights staffing concerns and any red flags against current activity. This has been implemented into delivery suite and training is now focused on Cedar ward MLBU as part of the 12-week rollout programme.

Staff absences due to testing positive for COVID-19 has reduced since last month but we continue to see an impact. Staff welfare is our key priority, and we are monitoring the impact of reduced staffing numbers for example on scheduled breaks (which has reduced in the last month).

Recruitment remains a priority and we have finalised a recruitment strategy to give this focus. Job descriptions have been aligned to the HEE and Maternity Support Worker competency framework to ensure consistency. We are monitoring interest in our live applications and will use this to inform further changes for example to advert contents.

Engagement with staff and users

We held our first maternity engagement event on 26 January which saw 49 stakeholders attending which included women who are using or who have used the service, MDT staff, local support groups, Maternity commissioner, Health Watch, MPP. We have collected themes on feedback which we can use to begin to co-produce our service improvements. Attendees had some really positive feedback to share on the service and a follow up event date is currently being scheduled.

A communications strategy has been developed incorporating feedback and comments from staff and users. We are now working to operationalise this and establish new communication mechanisms which includes an internal fortnightly newsletter the first of which was shared with staff in early February.

Work in progress

Maternity Improvement Programme Reset

Our new Maternity Improvement Programme structure was launched in early February. This was designed to ensure that the improvement programme has a good mix of compliance and quality improvement activities that are focused on transforming our service and improving outcomes. The reset has identified seven workstreams in the programme:

- Governance and Risk
- Effective Multi-disciplinary Working (formerly Risk Escalation and MLBU)
- Communication and Strategy
- Maternity Pathway Redesign
- Measurement Framework
- Estates and Facilities
- Continuity of Care

We are in the process of establishing leads, defining clear objectives and setting realistic but ambitious timeframes to give the programme the right momentum.

Governance and reporting

We are further embedding the practice of consistent good quality governance with lighter touch support as we progress towards sustaining the change independently. This will be bolstered by consistently utilising the meeting effectiveness process to learn and make adjustments in real time. We will also embed the practice of looking forward and planning the key meetings within the full management rhythm of the service.

We will utilise the new maternity measurement framework and dashboards as part of our management rhythm and regular oversight and decision-making meetings. We have set up a pan-MSE group to review policies and guidelines across the three units to become a single shared practice over time.

Maternity pathway redesign

We are designing a series of engagement sessions to redesign our maternity pathways. This will ensure that we are adhering to best practice protocols and help to make this real in the service. This is also an important opportunity for engagement with staff and with users and an opportunity to coproduce this with the people who understand the service best.

Communications and strategy

We are currently focused on taking our communications strategy and putting it into action, by implementing the identified campaigns for engagement and new and enhance methods for communicating with staff and users.

Our long-term strategy 'Wellbeing in Pregnancy' continues to be discussed with staff and user groups over the next couple of months to get feedback.

Select key upcoming milestones

- 1 March new Head of Midwifery starts
- 2 March next planned user and staff stakeholder engagement event
- 2 March receive next Birthrate+ staffing report
- 31 March complete Continuity of Care business case completed
- March – commence pathway redesign engagement sessions with users and staff

Challenges and risks to delivery

- There is limited capacity to focus on improvement activities in a busy service, with staffing pressures and in light of the ongoing pandemic. We are mitigating this through our programme reset to understand what is most important.
- Roles in the Senior Leadership Team are likely to change over the next few months, potentially bringing more instability into the service and impacting our ability to maintain momentum on key activities. We are actively planning for managed handovers, with transition of the Head of Midwifery role.
- In addition to our Basildon maternity improvement programme we are gearing up for the Trust-wide improvement and alignment. This is an additional front to focus on, but we will be managing through the Cluster 2 Programme Board.