

# Joint HOSC SaTH Maternity CQC Update November 2018

Deirdre Fowler

Director of Nursing Midwifery and Quality



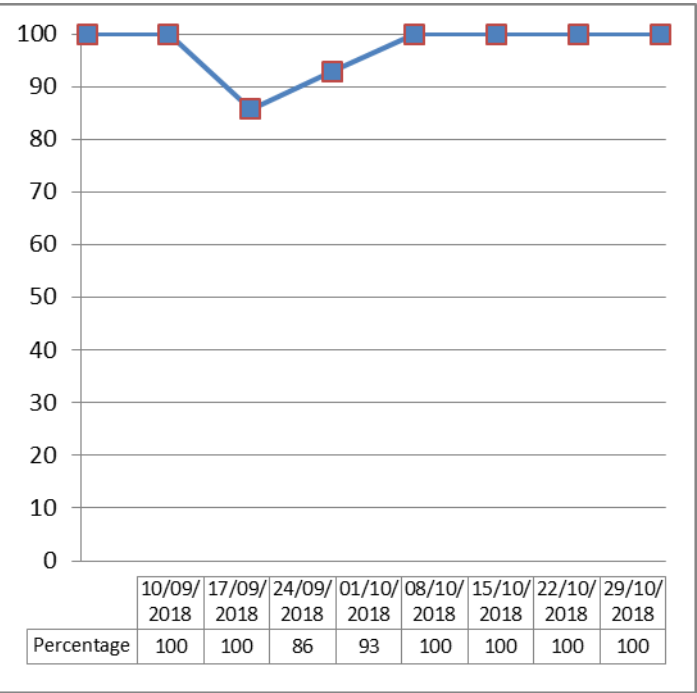
Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

# Maternity Overview – Actions to date

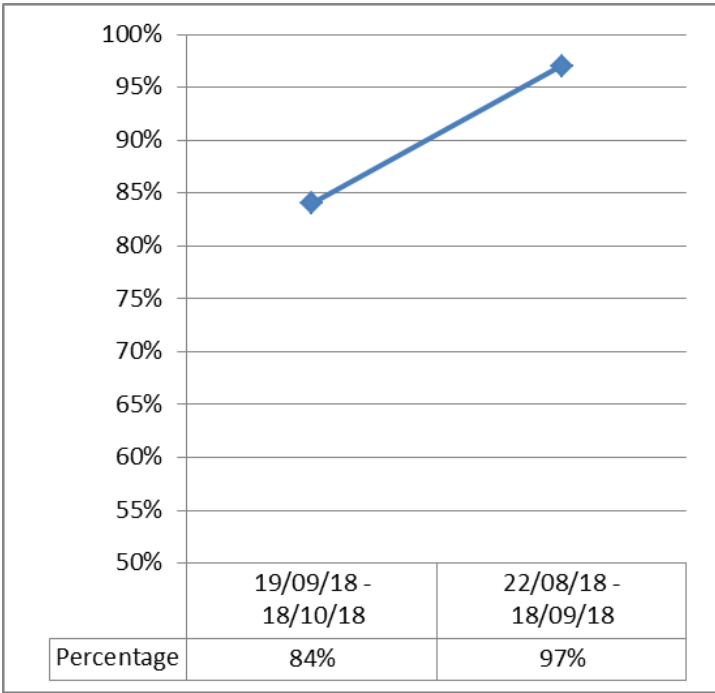
Actions	Completed/Updates
Review of all incidents of reduced fetal movements	Completed 05.10.18
Immediate Action: women with risk factors who have CTG for reduced fetal movements at any MLU - CTG scanned through to delivery suite or triage for immediate medical review	Completed 14.09.18
Subsequent Action: All women who report reduced fetal movements seen on Obstetric Unit Triage for CTG monitoring	Completed 21.09.18
Reduced fetal movement guideline updated and amended to further strengthen escalation and antenatal electronic fetal monitoring guideline updated	Completed 26.10.18
Review of modified early obstetric warning system (MEWS) to further strengthen escalation and timely review from medical staff	Currently benchmarking - Anticipated ratification 19.11.18
Triage standard operating procedure and triage assessment cards updated guidance to include strengthened escalation plan/timely review from medical staff	Completed 09.11.18
To understand and identify if Birmingham Symptom Specific Obstetric system (BSOTs) model is recognised	Awaiting clarification from CQC-factual accuracy
New Proforma & Obstetric Handover Process agreed and implemented Twice daily multi-disciplinary Board Round evidence supplied	Completed 05.10.18
Weekly data reporting and follow up of high risk women with reduced fetal movements who decline or are unable to attend PRH Triage in a timely manner via the Obstetric Risk Meeting	Completed 24.09.18

# Maternity Metrics Compliance

**Twice daily Delivery Suite Ward rounds and completion of proformas**



**Analysis of completion of handover proformas on a monthly basis to be reviewed at Maternity Governance**



The drop in compliance is representative of a evening and morning omission , and further drive demonstrated increased awareness of its importance.

# Maternity Dashboard (copies of full dashboard with papers)

Descriptor	APR	MAY	JUN	Q1	JUL	AUG	SEP	Q2	OCT	SaTH YTD	National Figure	National Data Source
Normal birth rate	69.9%	68.7%	68.4%	<b>68.9%</b>	65.1%	66.7%	71.9%	<b>67.9%</b>	64.2%	<b>67.8%</b>	<b>66.0%</b>	<b>NMPA</b>
Caesarean Section rate %	20.3%	20.4%	22.7%	<b>21.2%</b>	22.7%	20.6%	19.1%	<b>20.8%</b>	19.0%	<b>20.7%</b>	<b>25%</b>	<b>NMPA</b>
PPH 1500ml or greater	1.4%	1.7%	1.3%	<b>1.5%</b>	2.9%	1.6%	2.7%	<b>2.4%</b>	2.3%	<b>2.0%</b>	<b>2.7%</b>	<b>NMPA</b>
Babies/term Apgar score <7 at 5 mins	0.3%	0.8%	0.8%	<b>0.7%</b>	0.3%	0.6%	0.8%	<b>0.6%</b>	1.6%	<b>0.8%</b>	<b>3.5%</b>	<b>NMPA</b>
Crude stillbirth rate				<b>2.6/1000</b>				<b>2.6/1000</b>		<b>2.6/1000</b>	<b>3.5/1000 (2016)</b>	<b>MBRRACE</b>
Vaginal births with a 3rd/4th degree tear	2.2%	3.4%	3.6%	<b>3.1%</b>	1.7%	3.0%	3.3%	<b>2.7%</b>	3.4%	<b>3.0%</b>	<b>3.5%</b>	<b>NMPA</b>
Episiotomy rate overall	10.0%	14.8%	8.7%	<b>11.3%</b>	14.0%	14.1%	11.2%	<b>13.1%</b>	17.5%	<b>13.0%</b>	<b>22.0%</b>	<b>NMPA</b>
Skin to skin within 1 hour of birth	99.4%	99.3%	100.0%	<b>99.6%</b>	100.0%	99.7%	99.7%	<b>99.8%</b>	98.5%	<b>99.5%</b>	<b>79.8%</b>	<b>NMPA</b>
Overall Trust total births	355	418	396	<b>1169</b>	390	390	385	<b>1165</b>	405	<b>2739</b>	<b>375-425</b>	<b>Local</b>