

Integrated Care Board

Date of meeting	10 January 2024
Title of paper	Maternity and Neonatal Services Update
Presented by	Professor Sarah O'Brien- Chief Nursing Officer
Author	Stephanie Purcell – Head of Quality & Safety (Maternity and Children and Young People)
Agenda item	14
Confidential	No

Executive summary

The purpose of this report is to provide an updated position of the current progress and status against the national safety programme of work for maternity and neonatal services and an overview of the current CQC inspection ratings of the four maternity services.

In Lancashire & South Cumbria (L&SC) currently there are two maternity services (University Hospital Morecambe Bay and Blackpool Teaching Hospital Trusts) that have been entered onto the Maternity Safety Support Programme (MSSP) as a result of their CQC Inspection. University Hospital Morecambe Trust has an agreed exit criteria with the plan to transition to the sustainability phase of the national programme in early January 2024.

Blackpool Teaching Hospital is in the improvement phase on the MSSP and a key focus is the governance infrastructure, systems and processes. In addition, a bespoke support package is in place from the Neonatal Operational Delivery Network due to the neonatal mortality rates.

The remaining two services, East Lancashire Hospitals Trust has been rated as 'Good' with the Lancashire Teaching Hospitals awaiting the final report and ratings from their inspection in July 2023.

The Local Maternity and Neonatal System (the maternity and neonatal arm of the ICB) has commenced quarterly assurance visits with each Trust to review their progress of compliance for Saving Babies Lives (SBL) Version 3 and the Maternity Incentive Scheme (MIS) Year 5.

As a system for the Year 4 MIS (2022-2023) Lancashire Teaching Hospitals achieved full compliance with all 10 safety actions, East Lancashire Hospital Trust achieved compliance with 9 out of 10, University Hospital Morecambe Bay Trust achieved 7 out of 10 and Blackpool Teaching Hospital achieved 2 out of 10.

The programme of work on developing a LMNS data informed and coproduced Equity & Equality Plan in line with National Guidance has been raised as a significant risk due to data. However, work continues to progress with the aim to have the plan published by Q3 2023-2024.

The LMNS has an established and embedded governance structure which includes clear reporting and escalation routes from Trust to LMNS to ICB and the Regional Maternity Team.

A further report will be provided to the ICB Quality Committee/Board in February 2024 to confirm the final position of compliance for SBL and MIS for each of the four Trusts.

Recommendations

The Board Members are requested to:

1. Note the contents of the report.
2. Receive a further report to update on the SBL and MIS

Which Strategic Objective/s does the report relate to:

Tick

SO1	Improve quality, including safety, clinical outcomes, and patient experience	✓
SO2	To equalise opportunities and clinical outcomes across the area	✓
SO3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	
SO4	Meet financial targets and deliver improved productivity	
SO5	Meet national and locally determined performance standards and targets	✓
SO6	To develop and implement ambitious, deliverable strategies	

Implications

	Yes	No	N/A	Comments
Associated risks	✓			Achieving compliance with National safety programmes
Are associated risks detailed on the ICB Risk Register?				
Financial Implications	✓			For Trusts if they do not achieve compliance with Maternity Incentive Scheme

Where paper has been discussed (list other committees/forums that have discussed this paper)

Meeting	Date	Outcomes
Quality & Assurance Panel	19/09/23	Escalated to National Team
Executive Management Team	31/10/23	Report approved

Conflicts of interest associated with this report

Not applicable.

Impact assessments				
	Yes	No	N/A	Comments
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	
Data privacy impact assessment completed			✓	

Report authorised by:	Professor Sarah O'Brien, Chief Nursing Officer
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ICB Board – 10 January 2024

Maternity and Neonatal Services Update

1. Introduction

- 1.1 Nationally the scrutiny of maternity services has increased significantly over the last 3 years due to several high profile independent inquiries into maternity services. Both the Ockenden (2020) and East Kent (2022) report identified serious failings in the safety and quality of those services which resulted in avoidable deaths and injuries. Unfortunately, another investigation into maternity services is currently underway at Nottingham University NHS Trust and the announcement last month that an independent inquiry would be commissioned at Countess of Chester Hospital into Neonatal Services.
- 1.2 In March 2023 NHS England published the Three-Year Delivery Plan for Maternity & Neonatal Services. The aim of the single delivery plan (SDP) is to make care safer, more equitable and more personalised.
- 1.3 The findings and recommendations from previous independent reviews of maternity services from Ockenden (2020, 2022) and East Kent Report (2022) have been incorporated into the SDP.
- 1.4 Within the SDP there are four themes; Listening to women and families; workforce; safety culture and improving standards and structures.
- 1.5 Across the four themes there are deliverables aligned to Trust, Local Maternity & Neonatal System (LMNS)/ICB and Region. The LMNS is a team within the ICB that lead on the oversight, monitoring and assurance of the Quality and Safety of maternity and neonatal services who report directly into the ICB Quality Committee.
- 1.6 The LMNS has been working with partners across the system to ensure there is clear reporting and oversight against each of the deliverables.

2. Care Quality Commission (CQC)

- 2.1 In July 2022 CQC advised of a new approach to the inspection of maternity services which applied to all NHS acute maternity services that had not been inspected and rated since April 2021. The focus of the inspection would be on the safe and well-led domains. Below is a summary of the CQC rating for each of the maternity services within LSC.
- 2.2 University Hospital of Morecambe Bay Trust (UHMBT) CQC inspection in May 2021 resulted in Royal Lancaster Infirmary (RLI) with the overall rating of 'Requires Improvement' and Furness General Hospital (FGH) and

Westmorland Hospital with the overall rating of 'Inadequate'. As a result of this inspection the trust was entered onto the Maternity Safety Support Programme (MSSP), which is a national (NHSE) programme of support.

- 2.3 A re-inspection of maternity services took place in April 2023 at FGH and RLI where the overall rating of 'Requires Improvement' was applied. However, in the published report there was acknowledgement of several areas that had demonstrated significant improvement since the last inspection. Please refer to Appendix 1 for a full overview of domain ratings.
- 2.4 UHMBT has an agreed exit plan and criteria for stepping off the MSSP programme as the service is demonstrating sustained and embedded improvement.
- 2.5 Blackpool Teaching Hospital inspection was carried out in June 2022 where the overall rating of the service was 'Inadequate', with the domains of safe and well-led also rated as inadequate. This resulted in the service being entered onto the MSSP.
- 2.6 The key priorities for improvement at BTH are in relation to the governance infrastructure, systems and processes specifically around the identification of incidents, quality of 72- hour reviews and investigations. In addition, a targeted support package is in place due to neonatal mortality including the establishment of a system improvement board. An external review of all neonatal mortality cases has been undertaken with the final report due to be disseminated by the end of November 2023.
- 2.7 East Lancashire Hospitals Trust (ELHT) inspection was undertaken in November 2022, and covered all three sites; Burnley, Blackburn Birthing Centre and Rossendale Primary Care Centre. All services had the overall rating of 'Good' and a rating of 'Good' against the safe and well-led domains.
- 2.8 Lancashire Teaching Hospitals Trust (LTH) inspection took place in July 2023, all three sites; Royal Preston; Preston Birth Centre and Chorley Birth Centre were inspected. The full inspection report and associated ratings have not yet been published.

3. Maternity Safety Support Programme (MSSP)

- 3.1 The MSSP is a national programme. Maternity services are formally entered onto the programme if they are rated requires improvement or inadequate in the well led and/or the safe domains by the Care Quality Commission.
- 3.2 The oversight and assurance of this is led by the Regional Chief Midwife, therefore, the LMNS has little to no visibility on Trusts who are on the programme, this has been raised with regional colleagues.

3.3 A national review of the MSSP is planned by the new Chief Midwife for England, to evaluate the effectiveness and impact of the programme to ensure it is fit for purpose. UHMBT and BTH have been invited to contribute to the review and provide feedback on their experience.

4. Saving Babies Lives (SBL) Version 3

4.1 The SBL programme was launched at the beginning of July 2023 with the expectation that the LMNS will lead on the oversight and assurance. Previously this was led by the Regional Team.

4.2 A Standard Operating Procedure (SOP) was published outlining the roles and expectation of the LMNS and the Trusts, including the completion of an implementation tool and quarterly assurance visits.

4.3 The requirement for the LMNS is to undertake a minimum of two quarterly assurance visits with each Trust to monitor and track progress. Including the setting of minimum and stretch targets for each of the 6 elements.

4.4 The LMNS has planned 3 visits with each of the trusts which commenced in September 2023.

4.5 For this year there is an additional care bundle so a total of 6 care bundles for Trusts to implement.

4.6 Several risks have been identified in the ability of Trusts to achieve compliance; this is due to the late publication in Q2 (2023-2024) which means that Trusts have 6 months to achieve this extensive programme of work. This has also been reported across the North-West therefore a meeting is to be convened with the National Team to escalate concerns.

5. Maternity Incentive Scheme (MIS) Year 5

5.1 MIS Year 5 scheme was launched on 31st May 2023 with the deadline for Trusts to submit their final declaration form by 1st February 2024. As with the Year 4 scheme this needs to be signed off by both the Chief Executive Officer of the Trust and the Accountable Officer of the ICB.

5.2 The LMNS has planned 3 quarterly assurance visits with each Trust to review the progress and evidence. The visits commenced in September 2023.

5.3 Please see Appendix 2 for the overview of the Trusts current position against each of the 10 safety actions.

5.4 Whilst each of the Trusts have an action plan in place to achieve compliance against each of the 10 safety actions. As a system the current risks identified in achieving full compliance with the 10 safety actions are in relation to safety action 6 (SBL), safety action 8 (multi-professional training).

6 Governance

- 6.1 The LMNS has an established and embedded governance structure. This includes a Maternity & Neonatal Quality Assurance Panel and a Maternity & Neonatal Serious Incident Oversight Group. (Please refer to Appendix 3 for LMNS Governance structure). The Regional Team are assured that the current reporting and forums in place are robust.
- 6.2 The membership of these meetings includes representation from each of the maternity services, key partners from across the system such as Neonatal Operational Delivery Network (ODN), Maternal Medicine Network and Maternity Neonatal Safety Improvement Programme (MatNeo SIP).
- 6.3 At these forums a review and triangulation of data and intelligence from various sources is undertaken. This includes the Neonatal ODN quarterly governance and dashboard updates so as a system able to understand where trusts are in relation to outcomes and quality metrics. Both these forums provide an opportunity to identify if further support is required and to share learning across the system.
- 6.4 There are clear reporting and escalation routes to ICB Quality Committee and the Regional Maternity Team.
- 6.5 Current reporting to ICB Quality Committee is quarterly therefore the LMNS is drafting a timetable of reporting key topics so there is increased visibility and oversight of maternity and neonatal services.

7. Equity and Equality Plan

- 7.1 A national deliverable for the LMNS is to develop and publish a data informed and co-produced Equity and Equality Plan.
- 7.2 The deadline for publication of the plan has not been met due to number of challenges with data, specifically in access to cleansed system level data. As all four maternity services have implemented electronic record notes (Badegernet) and currently there is no single repository for this data to be collated.
- 7.3 The LMNS identified this as a significant risk therefore this has been uploaded onto the ICB Corporate Risk Register. Ongoing discussions are underway with the ICB Digital team to explore the options available.
- 7.4 The LMNS is continuing to progress this programme of work as there is an established E&E oversight Group, a plan on a page has been developed with the aim for the full plan to be published by Q3 2023-2024 on Lancashire & South Cumbria Resource Hub.

8. Conclusion

- 8.1 Across L&SC all four maternity services have now had their CQC Inspection completed. As a result, two services were entered onto the national MSSP programme with UHMBT due to step off the programme in early January 2024.
- 8.2 ELHT has been rated as 'Good' across all 3 sites and LTH are awaiting the inspection report and ratings.
- 8.3 The national safety programmes, MIS and SBL have been identified as a risk in Trusts being able to achieve full compliance. This is primarily due to the late publication of SBL and the extensive work required across each of the 6 care bundles. This has been further impacted by the doctor's industrial action. These risks have been uploaded onto the LMNS/ICB risk register and are monitored closely by the ICB maternity team.
- 8.4 Work continues on the LMNS E&E plan even though significant challenges have been identified around a single data repository. The aim is to have the full plan published by the end of Q3 2023-2024. This risk has been recorded on the ICB Corporate Risk Register.
- 8.4 The LMNS has established governance system and processes in place including dedicated forums with key partners across the system to review the quality and safety of maternity and neonatal services.
- 8.5 Clear reporting and escalation routes to both ICB Quality Committee and Regional Maternity Teams are in place.

9 Recommendations

The Board Members are requested to:

1. Note the contents of the report.
2. Receive a further report to update on the SBL and MIS

Stephanie Purcell

2 October 2023

Appendix 1-CQC Rating

University Hospital Morecambe Bay Trust

Site	Safe	Effective	Caring	Response	Well-led	Overall
Royal Lancaster Infirmary	Requires Improvement ↓ Aug 23	Good ↑ Aug 23	Good ↔ Aug 23	Good ↔ Aug 23	Requires Improvement ↔ Aug 23	Requires Improvement ↔ Aug 23
Westmorland General Hospital	Inadequate Aug 21	Requires Improvement Aug 21	Not Rated	Requires Improvement Aug 21	Inadequate Aug 21	Inadequate Aug 21
Furness General Hospital	Requires Improvement ↔ Aug 23	Requires Improvement ↑ Aug 23	Good ↔ Aug 23	Good ↔ Aug 23	Requires Improvement ↑ Aug 23	Requires Improvement ↑ Aug 23

Blackpool Teaching Hospital

	Safe	Effective	Caring	Response	Well-led	Overall
Blackpool	Inadequate Sept 22	Requires Improvement Sept 22	Good Sept 22	Inadequate Sept 22	Inadequate Sept 22	Inadequate Sept 22

East Lancashire Hospitals Trust

Site	Safe	Effective	Caring	Response	Well-led	Overall
Burnley General Hospital	Good Jan 23	Good Jan 23	Good Jan 23	Good Jan 23	Good Jan 23	Good Jan 23
Blackburn Birth Centre	Good Jan 23	Good Jan 23	Good Jan 23	Good Jan 23	Good Jan 23	Good Jan 23
Rossendale Primary Care Centre	Good Jan 23	Not Rated	Not Rated	Not Rated	Good Jan 23	Good Jan 23

Appendix 2- Maternity Incentive Scheme Year 5 Overview

Safety Action		ELHT	LTH	BTH	UHMBT
1	PMRT Tool				
2	MSDS				
3	Transitional Care/ATAIN				
4	Clinical Workforce Planning				
5	Midwifery Workforce Planning				
6	Saving Babies Lives (Version 3)				
7	Listening to Women & Families				
8	Training Plan/Multi-professional training				
9	Board Assurance				
10	HSIB				

Key	
Complete	The Trust has completed the activity with the specified timeframe – No support is required
On Track	The Trust is currently on track to deliver within specified timeframe – No support is required
At Risk	The Trust is currently at risk of not being deliver within specified timeframe – Some support is required
Will not be met	The Trust will currently not deliver within specified timeframe – Support is required

Appendix 3- LMNS Governance Structure

