

Meeting of the Quality and Outcomes Committee on 25th November 2021

Report Title	Maternity Perinatal Quality Surveillance Matrix Monthly Update	
Report Author		
Executive Lead		

1.	Report Summary		
This re	eport provides the board monthly oversight with regards to the safety matrixes of our		
	nity and neonatal services.		
	Key points to note cluding decisions taken)		
•	Induction of labour (IOL) waiting times remains a concern leading to complaints. This is usually because of capacity on CDS. Has been escalated to trust, is on risk register.		
•	 Non-compliance in night-time consultant ward rounds noted. No change 		
•	There were 19 Datix related to workforce (service provision/staffing) including 6 related to multiple delayed IOL /9 related to non-compliance with BAPM standards		
•	UHBW Maternity attempted to divert / are on divert once during the reported period.		
•	Total LSCS rate up at 38.7% from 35.8 in September and 32.3% in August. Highest monthly rate this year.		
•			
•	No HSIB cases		
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•	Staff concerns shared monthly with the Maternity and Neonatal Safety Champions and actions fed back to staff, current themes include:		
•	Staffing		
•	Capacity- delayed IOL		
•	Estates on level E		
•	Following feedback the HoM held a focus group with our Somali representatives to ensure we continue to receive their feedback and learn how we can improve our offer of care to this population group. Feedback is being circulated with clinical teams and further focus groups and actions to address concerns are planned.		
•	Focus groups with our midwifery hubs service users continues. The feedback about the continuity of carer pathway of care was universally positive from the women, Somali women were also represented in this last focus group.		
3.	Risks		
	If this risk is on a formal risk register, please provide the risk ID/number.		
The ria	sks associated with this report include:		
	Alavad alactiva I SCS		
	delayed elective LSCS delayed induction of labour		



33/3623/988 NICU staffing/BAPM			
4. Advice and Recommendations			
(Support and Board/Committee decisions requested):			
This report is for Information.			
5. History of the paper			
Please include details of where paper has previously been received.			
Quality Assurance Committee	19/11/2021		

Recommendation Definitions:

- Information report produced to inform/update the Board e.g. STP Update. No discussion required.
- **Assurance** report produced in response to a request from the Board or which directly links to the delivery (including risk) of one of the Trust's strategic or operational priorities e.g. Quality and Performance Report. Requires discussion.
- **Approval** report which requires a decision by the Board e.g. business case. Discussion required.