

Trust Board Report

Meeting Date:	25 th March 2013
Title:	Midwifery Report
Executive Summary:	This report covers the following area: Quality and Standards within the Maternity Service
Action Requested:	Note Midwifery Quality Report
Report of:	Head of Midwifery
Author: Contact Details:	Head of Midwifery Tel: 01902 698398 Email: debrahickman@nhs.net
Resource Implications:	Midwifery staffing – Birth rate plus
References: (e.g. from/to other committees)	
Appendices/ References/ Background Reading	<ul style="list-style-type: none"> • LSA staff and Supervisors survey 2012 • NPEU Birth Place study 2012 • NHSLA maternity Standards 2012/13
NHS Constitution: (How it impacts on any decision-making)	<p>In determining this matter, the Trust Management Team should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> • Equality of treatment and access to services • High standards of excellence and professionalism • Service user preferences • Cross community working • Best Value • Accountability through local influence and scrutiny

Background Details

1	<p><u>Local Supervising Authority Audit 2012/13</u></p> <p>The audit was undertaken by Barbara Kuypers (Local Supervising Authority Midwifery Officer) in February 2013.</p> <p>This year's audit focussed on the business of supervision and leadership.</p>
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Agenda for the morning.

- Presentation of the Maternity Services at New Cross Hospital
- Presentation and discussion of the LSA Audit for New Cross Hospital Midwives and Supervisors of Midwives.
- Presentation and discussion by the Supervisors of the National Nursing and Midwifery Vision 2012 (6Cs)
- Presentation by the Supervisors as to application of the recommendations of the Morecambe Bay Review (2012).
- LSAMO presentation and discussion of the revised NMC Midwives Rules and Standards (2012).
- LSAMO presentation of the Strategic Way forward for the LSA

Agenda for the afternoon

The afternoon was spent observing the Supervisors in their monthly business meeting. Content of the agenda included:

- Previous Minutes and Matters Arising for Action
- Feedback from various Committees
- Developments within the Midwifery Led Unit
- Education Report from Wolverhampton University LME
- Current Investigations an Midwives on Developmental Support or Supervised Practice
- Supervisor Led Study Day
- Feedback from Contacts SoM
- ITPS and LSA Database

The LSA Midwifery Officer met with all of the Supervisors who are currently appointed at The Royal Wolverhampton NHS Foundation Trust. The summary report concluded that 'In all the visit was very assuring and the group are resilient and pro-active in their work as Supervisors and the LSA were very assured by the visit'.

2

LSA Audit for New Cross Hospital Midwives and Supervisors of Midwives via online survey.

Positives:

Response rate 32.9% (Regional average 21.9%, range 3.8-40.9%)

100% staff have received an annual review in the last 12months

Wide satisfaction with venue, privacy, advice, confidentiality, and timing of supervisory reviews.

Midwives are confident in report being confident in approaching their SoM for advice or support

Midwives are clear when to contact a Manager or Supervisor

Skills and Drills workshops are well attended and are valued by midwives

Midwives view Wolverhampton as a Unit which is Woman centred, with a focus on normality, and good team working

No Supervisor has more than 15 supervisees - the majority of Supervisors report being contacted by supervisees at least once a month or more

The majority of supervisors are confident investigating poor practice, undertaking investigations and writing reports, supporting midwives through an investigation, handling conflict and planning a supervised practice programme

Areas for improvement:

Despite widespread advertisement about the audit 67.1% (2/3rds) of Wolverhampton Midwives did not participate

Only 58% of respondents felt that their SoM was a good agent for change

Only 43% of respondents have contributed to the development of practice guidance

Only 54% of midwives have accessed the National LSA website

The supervisory team have developed an action plan to address the areas for improvement and this will be monitored via the Supervisory team meeting.

3

Midwifery Supervision:

The supervisory team have undertaken 6 investigations since the previous report.

This has resulted in:

4 requiring no more than Local action

2 requiring Developmental programmes

No Midwives have required supervised practice programmes or referral to the NMC. Both Developmental and Supervised practice programmes are validated and monitored by the LSAMO to ensure appropriateness and completion within the designated timeframe.

4

Birth rate plus

The Midlands and East SHA took the decision last year to use birth rate place as the recognised staffing/dependency tool to inform Midwifery staffing based on complexity. The RCOG still recommends a standard ratio of 1:28 Midwife to births and this is the

standard cited in Maternity CNST standards 2012/13.
 Birth rate plus audit was undertaken within the Maternity service in April 2012 and confirmed that the Maternity service requires a ratio of 1:30 based on our current case mix; this can be considered to be a more detailed review of dependency and staffing than RCOG as it looks at all areas of the Maternity service and its population.

As of December 2012 the Maternity service received 3,999 births which based on the above ratio requires 133.3 WTE **clinical** Midwives, this leaves us with a deficit of 12.85 WTE. A 90/10 split between clinical Midwives and Maternity support workers is deemed acceptable and included within the model. Current recruitment has seen us recruiting to existing vacancies within funded establishments.

Table 1 identifies the woman to Midwife ratio by month from the start of the financial year 2012 to present.

Month	Ratio
April	34.4
May	34.4
June	34.3
July	34.2
August	33.8
September	33.8
October	33.8
November	33.8
December	33.8
January	33.8
February	33.8

Additional activity would require additional staffing to support.

5

Midwifery Led Unit

The Midwifery led unit has now been open since Mid-October 2012 and currently has currently facilitated 220 births. The Maternity service has seen an increase in its 1:1 care in labour metric and a downward trend in its epidural rates and caesarean section rates however recognises that the numbers are small and we are still in the infancy of the unit opening.

Transfers out of the Midwifery led unit are audited monthly to assure appropriateness of care and transfer, below indicates the transfer rates up till December 2012.

RWT	Birth place study
•Total birth on MLU 113 (Oct – Dec)	
•Rate transfers primips 16%	40%
•Rate transfers multips 3.5%	10%
•Labour transfers 19.4%	
•Postnatal transfers 6.2%	
•Physiological 3rd stage 68.2%	

The above demonstrates local transfer rates compared to some of those identified in the recent Birth place study for alongside midwifery led units.

6

NHSLA

We have our Level 2 CNST Maternity assessment in March 2013, the Maternity service retained level 1 in its previous assessment 12months ago.

The Maternity service has undertaken a substantial amount of work to ensure new standards implemented in April 2012 are incorporated into our local guidance and to address issues highlighted in the previous report.

The informal visit held with our assessor in October 2012 recognised the work undertaken to date as being positive and significant in working towards a successful assessment this time round.

The Multidisciplinary team are engaged and keen to demonstrate the safe and effective care provided by the Maternity service.

7

Environment:

The Maternity service was successful in securing 170k from the DOH bids to improve maternity environments. The service identified the need to improve accommodation for families who are transferring across neonatal networks for intensive maternity and neonatal care. They will also support a significant proportion of families who have babies within the neonatal service for a prolonged period of time to bond prior to discharge.

The phased Maternity refurbishment completed late December 2012, this has made a significant difference to how the service operates providing much needed upgrades to patient accommodation. We now have access to discharge facilities to support patient flow and a designated baby clinic to maintain safety of babies in the inpatient area.

8

Patient Experience:

Question	March 2012	Nov 2012
Receiving appropriate help from a Midwife when accessing the service	93%	97.6%
were you given consistent advice by Midwives & support staff	80.7%	97%
Were you provided with sufficient information with regards to your recovery	85.3%	97%
Were you offered choices around your place of birth	99%	93%
Were you able to mobilise in labour and adopt positions comfortable for you	100%	93%
Did you feel completely supported by the Midwife caring for you in labour	98%	97%