

Report to the Trust Board

Meeting Date:	Monday 26 th September 2011
Title:	Midwifery Report
Executive Summary:	This report covers the following area: Quality and Standards within the Maternity Service
Action Requested:	<ul style="list-style-type: none"> • Note Midwifery Quality Report
Report of:	Acting Head of Midwifery
Author: Contact Details:	Acting Head of Midwifery Tel: 01902 698398 Email: debrahickman@nhs.net
Resource Implications:	<ul style="list-style-type: none"> • Midwifery staffing – linked to MLU business case
References: (e.g. from/to other committees)	
Appendices/ References/ Background Reading	<ul style="list-style-type: none"> • LSA Regional report 2010/11 • LSA Audit report 2010/11 • NHSLA maternity Standards 2011/12
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>Baby Friendly Initiative level 3 Accreditation</p> <p>The Maternity Unit successfully achieved BFI level 3 Accreditation following an external assessment in June 2011. There are currently only 7/17 other acute Trusts in the Midlands that have full accreditation. This achievement recognises the high standard of care in relation to infant feeding for pregnant women and mothers and babies and identifies we are a unit demonstrating best practice. This accreditation will last for 2 years when reassessment will be required.</p>
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2.

Local Supervising Authority Audit 2010/11

The audit team comprised of Barbara Kuypers Local Supervising Authority Midwifery Officer and Tracy Fulton SHA Project Lead Workforce Development

This years Audit required:

- Pre visit report detailing the Maternity Unit's ability to meet the 5 National Standards

Followed by evidence during the visit that identified:

- The impact of Supervision on Women's choice
- Supervisory involvement in Student learning
- Supervisory involvement in Preceptorship

This was a positive visit overall which resulted in the following commendations:

- A Proactive Philosophy demonstrated by the Supervisory team and supporting evidence
- Recognition at a National Level from the awards won which has aided in raising the profile of the Maternity Unit.
- The Development of creative tool kits which have supported staff development and the inclusion of Women

Recommendations:

- Maintaining the business continuity in the transition of the Head of Midwifery – bedding in new innovations and sharing our expertise regionally.
- Preparing staff for the business of an Midwifery led Unit
- Development of an electronic Supervisory Application to promote access of Supervision to Women – (Regional Recommendation)

3.

Local Supervisory Authority Report 2010/11

The report provided regional data on a range of KPI's and some regional benchmarking against certain data items, key points to note from the report as follows:

- Births at RWHT have risen by 10% in the last 3 years – RWHT has seen the greatest increase across the region in the last 12months (mainly attributed to Women migrating from Stafford).
- Our Normal vaginal delivery rate was 63.4% which placed us 7th in the region of 17 Maternity Units
- Caesarean Section rate was 20.9% which placed us 3rd regionally (Shrewsbury being first)
- Breastfeeding rate was 64% which placed us 6th regionally
- Our ratio of Supervisor to Midwife is currently 1:9.4, the recommendation being a maximum of 1:12
- Ratio of births to Midwife WTE is currently 1:33.4, the recommendation being 1:28 (safer Childbirth) / 1:30 (LSA) – on this we received a RAG status of amber within the region.
- 56% of the regional Midwifery workforce age profile is between 46yrs – 65yrs of age.
- Regionally the homebirth statistics have remained static although an increase in more complex Women requesting homebirth.
- There has been a significant rise in Midwifery Led unit care.

4.

Commissioning Quality Review Visit

This was a positive review, the commissioning team who undertook the audit visit were reassured with the level and standard of evidence supplied and the information provided during the visit.

<p>5.</p>	<p>The only recommendation being the upgrade of the Ward environments within the Maternity Unit.</p> <p>NHSLA</p> <p>We are currently working towards Level 2 CNST Maternity Standards; Our assessment date has been confirmed for March 8th & 9th March 2012.</p> <p>Work is ongoing collating evidence for the 5 Maternity Standards which each have 10 Criteria. There are identified Standard Leads for each of the 5 Standards who work collaboratively with Midwifery Risk manager. A schedule of meetings has been arranged with a scheme of work leading up to the assessment; this is reported through to the Directorate Risk Meeting and Trust Compliance committee.</p>
<p>6.</p>	<p>Midwifery Led Unit</p> <p>Plans have been drawn up and agreed with the Clinical team for a Midwifery Led Unit to be integrated on the 2nd floor of the Maternity Unit. The next phase is for it to be agreed through the Capital Review Group and TMT respectively on October 2011.</p>
<p>7</p>	<p>Summary of achievements</p> <p>National Maternity Survey questions are being repeated through the patient experience tracker – as of 1st September 2011 – this will allow us to compare against the previous survey results and thus monitor and drive areas of improvement within the service.</p> <p><u>High Impact Action – Normalizing birth:</u></p> <p>We have developed and introduced care bundles for high risk women – these tools have been shared regionally. Vaginal Birth following Caesarean Section workshops for mothers has been introduced. These have maximised the opportunities for normal birth and subsequently reflected in our Normal birth and Caesarean section rates.</p>