

## Quality and Patient Safety Committee

<b>Report Title:</b>	Compliance with CNST Maternity Safety Standard 2
<b>Executive/NED Lead:</b>	Darren Darby, Chief Nurse Angela Tillett, Medical Director Hussein Khatib, NED
<b>Report author(s):</b>	Amanda Price-Davey – Director of Midwifery
<b>Previously considered by:</b>	

Approval     
  Discussion     
  Information     
  Assurance

### Executive summary

In order to meet the requirements of the Clinical Negligence Scheme for Trusts (CNST) Maternity Incentive Scheme, NHS Trusts are required to meet 10 standards.

Within this scheme, Safety Action 1 asks, “Are you submitting data to the Maternity Services Data Set (MSDS) to the required standard?”

As evidence of this, Trust must demonstrate compliance with the following elements –

#### Standard 1

Trust Boards to assure themselves that at least 10 out of 11 Clinical Quality Improvement Metrics (CQIMs) have passed the associated data quality criteria in the “Clinical Negligence Scheme for Trusts: Scorecard” in the Maternity Services Monthly Statistics publication series for data submissions relating to activity in July 2023. Final data for July 2023 will be published during October 2023.

#### Standard 2

July 2023 data contained valid ethnic category (Mother) for at least 90% of women booked in the month. Not stated, missing, and not known are not included as valid records for this assessment as they are only expected to be used in exceptional circumstances. (MSD001)

#### Standard 3

Trust Boards to confirm to NHS Resolution that they have passed the associated data quality criteria in the “Clinical Negligence Scheme for Trusts: Scorecard” in the Maternity Services Monthly Statistics publication series for data submissions relating to activity in July 2023 for the following metrics:

Midwifery Continuity of carer (MCoC) Note: If maternity services have suspended all MCoC pathways, criteria ii is not applicable.

- Over 5% of women who have an Antenatal Care Plan recorded by 29 weeks and also have the CoC pathway indicator completed.
- Over 5% of women recorded as being placed on a CoC pathway where both Care Professional ID and Team ID have also been provided.

These criteria are the data quality metrics used to determine whether women have been placed on a midwifery continuity of carer pathway by the 28 weeks antenatal appointment, as

measured at 29 weeks gestation.

Final data for July 2023 will be published in October 2023.

**Standard 4**

Trusts to make an MSDS submission before the Provisional Processing Deadline for July 2023 data by the end of August 2023.

**Standard 5**

Trusts to have at least two people registered to submit MSDS data to SDCS Cloud who must still be working in the Trust.

**Minimal Requirements**

The “Clinical Negligence Scheme for Trusts: Scorecard” in the Maternity Services Monthly Statistics publication series can be used to evidence meeting standards 1-4. Standard 5 is evidence with an email confirmation of MSDS registered submitters.

The final published scorecard for July data was available in October 2023. The Score Card submitted as evidence demonstrates full compliance. We have also submitted an email confirmation around required standard 5

**Action Required of the Board/Committee**

The QPS Committee is requested to receive and note this report as evidence that ESNEFT meets all of the requirements of safety action 2 of the CNST maternity incentive scheme for year 5, and recommend to the Trust Board that full compliance with this safety action is confirmed within the CNST Maternity Incentive Scheme submission.

<b>Link to Strategic Objectives (SO)</b>		<b>Please tick</b>
SO1	Keep people in control of their health	<input checked="" type="checkbox"/>
SO2	Lead the integration of care	<input type="checkbox"/>
SO3	Develop our centres of excellence	<input checked="" type="checkbox"/>
SO4	Support and develop our staff	<input type="checkbox"/>
SO4	Drive technology enabled care	<input type="checkbox"/>

<b>Risk Implications for the Trust</b> <i>(including any clinical and financial consequences)</i>	If we are unable to meet this safety standard around data submissions, we cannot confidently demonstrate an understanding of the data we are using. There are financial penalties to the Trust for being no complaint with CNST
<b>Trust Risk Appetite</b>	Compliance/Regulatory: The Board has a minimal risk appetite when it comes to compliance with regulatory issues. It will

	meet laws, regulations and standards unless there is strong evidence or argument to challenge them.
<b>Legal and regulatory implications</b> ( <i>including links to CQC outcomes, Monitor, inspections, audits, etc.</i> )	MIS applies to all trusts that deliver maternity services and are members of CNST. If ESNEFT is unable to meet the requirements of the MIS then there is an increased risk of breaches to the Fundamental Standards and associated Regulations as outlined in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2015.
<b>Financial Implications</b>	Risk to reputation and subsequent financial loss by not meeting the incentive scheme standards
<b>Equality and Diversity</b>	No E&D implications identified

<b>1. EVIDENCE submitted to demonstrate full compliance</b>	
0.1	CNST Scorecard – July 2023 Final
0.2	MSDSv2 email confirmation of MSDS submitters