

Board Report and Action Plan on Implementation of the Saving Babies Lives Care Bundle (Version 3)

Implementation Report

Trust	Bradford Teaching Hospitals NHS Foundation Trust
Date of Report	3.10.23
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Background

Version three of the Saving Babies’ Lives Care Bundle (SBLCBv3) published on 31 May 2023, aims to provide detailed information for providers and commissioners of maternity care on how to reduce perinatal mortality across England. The third version of the care bundle brings together six elements of care that are widely recognised as evidence-based and/or best practice:

1. Reducing smoking in pregnancy
2. Risk assessment, prevention and surveillance of pregnancies at risk of fetal growth restriction (FGR)
3. Raising awareness of reduced fetal movement (RFM)
4. Effective fetal monitoring during labour
5. Reducing preterm birth
6. Management of diabetes in pregnancy

The Care Bundle is now a universal innovation in the delivery of maternity care in England and continues to drive quality improvement to reduce perinatal mortality. It has been included for a number of years in the NHS Long Term Plan, NHS Planning Guidance, the Standard Contract and the CNST Maternity Incentive Scheme, with every maternity provider expected to have fully implemented SBLCBv2 by March 2020.

ONS and MBRRACE-UK data demonstrate the urgent need to continue reducing preventable mortality. Developed 4 years after SBLCBv2, Version 3 of the Care Bundle (SBLCBv3) has been developed through a collaboration of frontline clinical experts, service users and key stakeholder organisations. All existing elements have been updated, incorporating learning from the Clinical Negligence Scheme for Trusts: Maternity Incentive Scheme (CNST MIS) and insights from NHS England’s regional maternity teams. SBLCBv3 aligns with national guidance from NICE and the RCOG Green Top Guidelines where available but it aims to reduce unwarranted variation where the evidence is insufficient for NICE and RCOG to provide guidance. SBLCBv3 also includes a new element on optimising care for women with pregnancies complicated by diabetes.

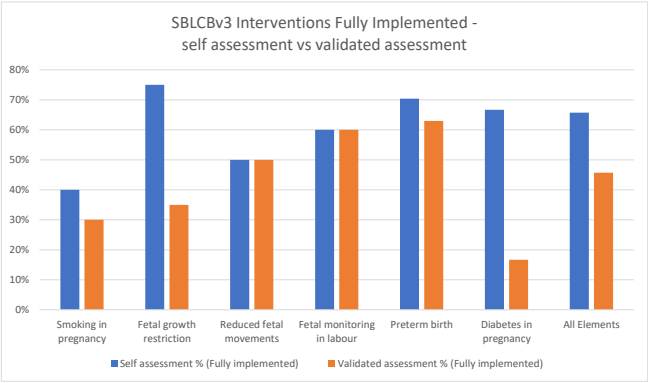
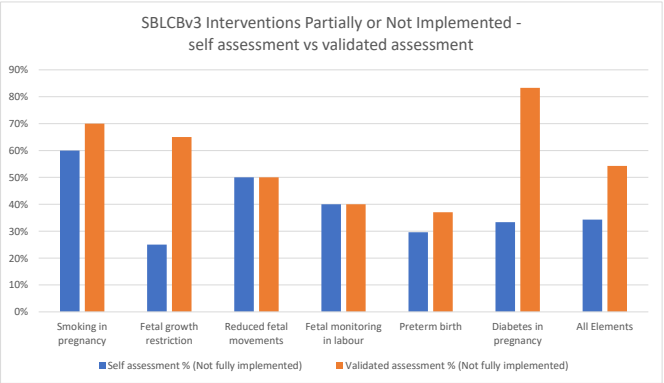
As part of the Three Year Delivery Plan for Maternity and Neonatal Services, all NHS maternity providers are responsible for fully implementing SBLCBv3 by March 2024.

Implementation Grading

Significant Assurance - Except for specific weaknesses identified the activities and controls are suitably designed and operating with sufficient effectiveness to provide reasonable assurance that the control environment is effectively managed.

Implementation Progress

Intervention Elements	Description	Element Progress Status (Self assessment)	% of Interventions Fully Implemented (Self assessment)	Element Progress Status (LMNS Validated)	% of Interventions Fully Implemented (LMNS Validated)
Element 1	Smoking in pregnancy	Partially implemented	40%	Partially implemented	30%
Element 2	Fetal growth restriction	Partially implemented	75%	Partially implemented	35%
Element 3	Reduced fetal movements	Partially implemented	50%	Partially implemented	50%
Element 4	Fetal monitoring in labour	Partially implemented	60%	Partially implemented	60%
Element 5	Preterm birth	Partially implemented	70%	Partially implemented	63%
Element 6	Diabetes	Partially implemented	67%	Partially implemented	17%
All Elements	TOTAL	Partially implemented	66%	Partially implemented	46%



Action Plan

Element 1

Intervention Ref	Self-Assessment Status	LMNS Validated Assessment Status	LMNS Recommendation of Actions Required	LMNS Suggested Improvement Activity
INTERVENTIONS				
1.1	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Additional audit / data extraction required
1.2	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Additional audit / data extraction required
1.3	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audits required
1.4	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required
1.5	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
1.6	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audits required
1.7	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required
1.8	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
1.9	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Evidence of obstetric staff training required
1.10	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0

Element 2

INTERVENTIONS				
2.1	Fully implemented	Partially implemented	0	Audit required
2.2	Fully implemented	Partially implemented	0	Audit required
2.3	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Continue with QI on element 1 to improve compliance
2.4	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required
2.5	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Evidence required from system supplier that software supports SBLV3
2.6	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Await new BP monitors
2.7	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit evidence required
2.8	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	0
2.9	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
2.10	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required
2.11	Fully implemented	Partially implemented	Focus required on improvement of audit levels to meet implementation ambitions and LMNS trajectories.	Evidence required to demonstrate how training compliance will be improved
2.12	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Guideline does not clearly state no SFH measurements if having serial scans
2.13	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
2.14	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
2.15	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
2.16	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
2.17	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Evidence of compliance with guidance required
2.18	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required
2.19	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit suggests high % of missed SGA & FGR, actions to address articulated at meeting, evidence of these actions / MDT meetings would support compliance with this element
2.20	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0

Element 3

INTERVENTIONS				
3.1	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
3.2	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Next working day USS not in place currently and difficult to achieve. Clarification of definition of next working day sought from national team.

Element 4

INTERVENTIONS				
4.1	Partially implemented	Partially implemented	Focus required on improvement of audit levels to meet implementation ambitions and LMNS trajectories.	Good evidence of increasing compliance, continue with ongoing quality improvements
4.2	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Good compliance with clear actions, stretch ambition set
4.3	Partially implemented	Partially implemented	Focus required on improvement of audit levels to meet implementation ambitions and LMNS trajectories.	Local actions with LW coordinators in place
4.4	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Meeting minimum ambition of 80 across quarter 1, continue to monitor and aim for stretch ambition of 95%
4.5	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0

Element 5

INTERVENTIONS				
5.1	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Preterm birth team to be established
5.2	Fully implemented	Fully implemented	Focus required on improvement of audit levels to meet implementation ambitions and LMNS trajectories.	QI and audit requirements met for this element. Further discussion required to set ambitions. National ambition for <6% overall PTB rate by 2025.
5.3	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit / evidence of compliance required
5.4	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Update of LMNS guideline required version 4 due to be published and will be shared
5.5	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.6	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.7	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Continue with QI on element 1 to improve compliance
5.8	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Aspirin not referenced in LMNS preterm birth guideline submitted. This will be added in version 4. This information may be in trust AN care guideline.
5.9	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required
5.10	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Aspirin not referenced in LMNS preterm birth guideline submitted. This will be added in version 4. This information may be in trust AN care guideline.
5.11	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audit required.
5.12	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.13	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.14	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.15	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Suggest review of compliance with use of peri-prem passport or information giving as additional evidence for this element
5.16	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	No specific evidence seen in guideline, data extract does not clearly evidence compliance with this element, further data / audit required.
5.17	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Recommendation of information to women in guideline shared and compliance with optimisation data, but no evidence that women are being given information or of use of periprem passport. Meeting individual
5.18	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.19	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0
5.20	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Data from ODN shows meeting ambition but does not match data submitted - trust to check data sets
5.21	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Data on brain injury required
5.22	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Local audit does not evidence antibiotics but this data is collected by ODN and shared with LMNS, Q1 data >50%, matneoisip ambition 50%
5.23	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	No local data but reported by ODN Meet minimum ambition, stretch ambition of 75% set
5.24	Partially implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Audit submitted not clear, ODN data hows meeting ambition

5.25	Partially implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	Audit submitted not clear, ODN data hows meeting ambition
5.26	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	New element - data collection process to be confirmed
5.27	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	New element - data collection process to be confirmed

INTERVENTIONS				
6.1	Fully implemented	Partially implemented	Fully meets standard - continue with regular monitoring of implementation.	Compliance will be met once new guideline ratified and implemented
6.2	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audits required to evidence compliance New guideline to be implemented
6.3	Fully implemented	Partially implemented	Fully meets standard - continue with regular monitoring of implementation.	Compliance will be met once new guideline ratified and implemented
6.4	Partially implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Audits required to evidence compliance New guideline to be implemented
6.5	Fully implemented	Partially implemented	Focus required on quality improvement initiatives to meet recommended standard.	Compliance will be met once new guideline ratified and implemented
6.6	Fully implemented	Fully implemented	Fully meets standard - continue with regular monitoring of implementation.	0