

# Swansea Bay University Health Board JET 2024/25 15<sup>th</sup> May 2024

Supplementary Pack: Performance & Data



### Children and Young People, Maternity & Neonates Annual Plan 23/24 Q3 / Q4

### **Key Achievements in CYP**



- ✓ Continued implementation of the outcome of the **OCPs**, with **recruitment to key posts in community services and the obstetric unit**. This will support our aim of women being seen by no more than 2 midwives in the community and support us in reopening community services by redirecting staff and patients from Singleton back into the birth centre and home births
- ✓ Appointment to Head of Midwifery post successful.
- ✓ Clinical Director of Midwifery post advertised.
- ✓ Recruitment to HCSW roles underway.
- ✓ Maternity Services Improvement and Transformation Board in place.



### Maternity Services Unannounced HIW Inspection (2023) Update

#### **IMMEDIATE IMPROVEMENT PLAN**

As at 23<sup>rd</sup> March 2024, a total of 33 actions have been completed, 7 actions in progress and one action to be completed by July 2024.

(All Actions Due Except One)

Actions due – thematic heading	Number Actions Due	Number Implemented	Number Remaining
Staffing levels	10	10	-
Mandatory training	9	4	5
Equipment	2	2	-
Security (premises/abduction)	9	6	2
Handovers	2	2	-
IPC	5	5	-
Security of Fluids	4	4	-
Actions not yet due	1 (July 2024)	Tbc	Tbc
TOTAL	41		

General improvement plan, the table below summarises the present position showing 78 of the total actions have already been completed, 39 actions to be completed by the end of the year, with the exception of one which will be completed in January 2025.

Target Month Actions Due (by end of month)	Number Actions Due	Number Implemented	Number Remaining
Completed at time of submission	6	6	-
November 2023	10	10	-
December 2023	28	28	-
January 2024	22	21	1
February	13	13	-
March on wards	39	TBC	TCB
TOTAL	118		

### **Maternity Services HIW 2019 Inspection Update**

#### **Current status**

Recommendations = 34

Actions = 80

Complete = 76

Not Complete = 3

Recommendation	Action required	New timescale	Lead	Progress
11 Theatre duties	Increase Prompt training compliance	September 2024	Practice development leads a obstetric medical training lead	Training compliance reported monthly dates booked until September with staff allocated to attend
32 Training compliance	Improved compliance of ELearning compliance	March 2024	Practice development leads obstetric medical lead and midwifery managers	Awaiting compliance figures – nursing & Midwifery staff 89% Medical staff 77%
33 Communication channels	ADAU & AAU criteria on wisdom	February 2024 revised date of completion	Antenatal ward manager	Awaiting approval at next A/N forum

## **Maternity and Neonatal Birth Centre Update**

Re-instatement of community services are being considered via a Gateway Process to ensure safety

#### Identified Gateways are:

- 1. Stable clinical establishment (on track)
- 2. Clinical leadership, appointment of 8 Community Team Managers (band 7) (gateway not yet met)
- 3. Midwifery proficiency assessment (on track)
- 4. Environmental and operational assurance (on track)
- 5. Phased reopening of the FMU, prior to home birth services (on track)
- 6. A sustainable solution for the managing the obstetric unit at times of high acuity (Managed as part of the Obstetric Unit OCP).

Plan for re-instatement will be taken to Health Board at the end of May 2024 for approval.

# **Maternity and Neonatal - Independent Review**

- Chair of the Oversight Panel appointed
- Oversight Panel has been appointed
- Expanded draft Terms of Reference (ToRs) received from the Chair of the Oversight Panel
- Currently out for comments
- Deadline for comments for ToRs 10<sup>th</sup> May 2024