NHS Resolution

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April 2026
FOI_7752

The following information was requested on 27 February 2026:

For your reference, page 32 of the following NHSR document states that "we will share 100% of concerns derived from Early Notification and Maternity Incentive Scheme cases with the national maternity safety group at least quarterly".

https://resolution.nhs.uk/wp-content/uploads/2023/06/4211_NHSR_Business-Plan_V6-DV0.13-Access-FINAL.pdf

Under the Freedom of Information Act, could you please provide these concerns which have been shared with the national maternity safety group since April 2017.

Our Response

Thank you for your enquiry and associated documentation, relating to the NHS Resolution (NHSR) business plan for 2023-2024 and the sharing of concerns identified through the Early Notification and Maternity Incentive Schemes. Please accept our sincere apology for the delay in responding to your request. We needed more time to consider the available information and provide as full a response as possible, within FOI guidelines.

The national maternity safety group is coordinated by NHS England (NHSE) and was established in 2020. Prior to this (March/April 2017 to October 2020), NHS Resolution expanded an internal Early Notification scheme meeting and convened a national maternity surveillance meeting, which coincided with the early days of the COVID-19 pandemic. This aimed to bring together key stakeholders in maternity to discuss Trusts of concern/ share intelligence and reduce the burden on Trusts during this challenging time.

The national maternity safety group meeting has held several names since being established in 2020, including but not limited to maternity safety surveillance and concerns group (MSSCG) and national perinatal safety surveillance group (NPSSCG). The meeting is now called the National Perinatal Surveillance Group (NPSG). Terms of reference and meeting attendance have also evolved over time and in line with the

perinatal quality oversight model: https://www.england.nhs.uk/long-read/perinatal-quality-oversight-model/. NHSE coordinates this meeting and may be able to provide more information on the group if needed.

We have reviewed the records NHSR holds on the information we have provided to the national group since it was established. The information shared by NHSR has mainly been in relation to intelligence from the Early Notification (EN) scheme, as well as the Maternity Incentive scheme (MIS). We have provided data and a summary of themes from 2022 onwards (when records were established, in line with our business plan commitment). Prior to this date (2020-2022) the process was maturing, and we do not hold a complete record within NHSR, but a review of available records suggests that the themes/trends shared during this earlier period were broadly similar to those summarised below. NHSE may hold additional information covering the period from October 2020 onwards. For further information, please contact NHS England directly at england.contactus@nhs.net.

Where we have indicated approximate numbers of Trusts, this information relates to the maternity services within the Trust. This is based on a review of the available information held at NHSR within the limits of FOI and may not be complete.

Time Period / Number of Months In Which Information Provided by NHSR	**Approximate number of Trusts**
1 November 2022 to 31 March 2023 (3 months data)	33
1 April 23 – 31 March 24 (9 months data)	40
1 April 24 – 31 March 25 (8 months data)	23
1 April 25 – 31 March 26 (9 months data)	6

In general, the themes included, but were not limited to:
- Updates on Trusts where the reporting rate for the Early Notification scheme had changed.
- Updates on Trusts the EN team were working with due to concerns or proactively to share learning back to the Trust.
- Trusts where there were challenges obtaining medical records.
- Clinical themes, not limited to, but including themes regarding CTG interpretation, delays in babies being cooled, themes regarding guidelines.
- MIS compliance, including reverification outcomes. Details of the reverification process is available on our website here
- Intelligence sharing to support discussions.

For the reasons provided above, and due to the fact that the information is held across various files, our search was limited to the information which could be readily accessed and considered within the appropriate limits afforded under the FOI Act. We estimate that further interrogation of the records would have exceeded the appropriate limit, and would have added limited additional information. Section 12(1) of the FOIA is a provision which allows a public authority to refuse to comply with a request for information where the cost of compliance is estimated to exceed a set limit (known as the 'appropriate limit'). The 'appropriate limit' for NHS Resolution is £450. This equates to 18 hours of work at the rate of £25 per hour set out in the 'Fees Regulations'.

We are also not able to provide information relating to individual trusts or cases as we believe that disclosure of information with this level of granularity is exempt under Section 40(2) by virtue of section 40(3A) (a) of the FOI Act, where disclosure to a member of the public would contravene one or more of the data protection principles. The data protection principles are set out in Article 5 of the General Data Protection Regulation. We take the view that it would not be fair or lawful (given the sensitive and confidential nature of the information held) to disclose such information and any disclosure would therefore contravene the first data protection principle.

In some instances, the likelihood exists that individuals who are the subject of this information may be identified either from this information alone, or in combination with other available information. In addition to this, as this information is considered to be sensitive personal data (the data subjects' medical condition), NHS Resolution believes it has a greater responsibility to protect those individuals' identities, as disclosure could potentially cause damage and/or distress to those involved.

We have therefore based our response on the information that was readily available, and summarised this in a non-identifiable way, illustrating the key points of information flow between NHSR and the national maternity safety group over this period, as per your request.

For further information about our Early Notification Scheme please see: Early Notification Scheme.

For further information about our Maternity Incentive Scheme please see: Maternity Incentive Scheme - NHS Resolution

This concludes our response to your request.

If you are not satisfied with the service that you have received in response to your information request, it is open to you to make a complaint and request a formal review of our decisions. If you choose to do this, you should write to Joanne Appleby, Deputy Data Protection Officer for NHS Resolution, within 28 days of your receipt of this reply. Reviews of decisions made in relation to information requests are carried out by a person who was not involved in the original decision-making about the request.

If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a review of the decision. Generally, the Information Commissioner will not make a decision unless you have exhausted the local complaints procedure. The address of the Information Commissioner's Office is:

Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

https://ico.org.uk/