

## **Q&A regarding Maternity Safety Strategy actions and Clinical Negligence Scheme for Trusts (CNST) incentive scheme**

### **Q1) What are the aims of the CNST incentive scheme and why maternity?**

The Maternity Safety Strategy set out the Department of Health and Social Care's ambition to reward those who have taken action to improve maternity safety. We are very happy to support this work by trialling the CNST incentive scheme for 2018/19. The scheme is absolutely discretionary and subject to available funds. Using CNST to incentivise safer care received strong support from respondents to our [2016 CNST consultation](#) where 93% of respondents wanted incentives under CNST to fund safety initiatives. This is also directly aligned to the Intervention objective in our [Five year strategy: Delivering fair resolution and learning from harm](#).

Maternity safety is an important issue for all CNST members as obstetric claims represent the scheme's biggest area of spend (c£500m in 2016/17). Of the clinical negligence claims notified to us in 2016/17, obstetric claims represented 10% of the volume and 50% of the value. These figures do not take into account the recent change to the Personal Injury Discount Rate.

It is important to remember that trusts that improve their maternity safety will be saving the NHS money, allowing more money to be made available for frontline care.

### **Q2) What are the 10 maternity safety actions?**

The actions are as follows:

1. Are you using the National Perinatal Mortality Review Tool to review perinatal deaths?
2. Are you submitting data to the Maternity Services Data Set (MSDS) to the required standard?
3. Can you demonstrate that you have transitional care facilities that are in place and operational to support the implementation of the ATAIN Programme?
4. Can you demonstrate an effective system of medical workforce planning?
5. Can you demonstrate an effective system of midwifery workforce planning?
6. Can you demonstrate compliance with all four elements of the Saving Babies' Lives care bundle?
7. Can you demonstrate that you have a patient feedback mechanism for maternity services, such as the Maternity Voices Partnership Forum, and that you regularly act on feedback?

8. Can you evidence that 90% of each maternity unit staff group have attended an 'in-house' multi-professional maternity emergencies training session within the last training year?
9. Can you demonstrate that the trust safety champions (obstetrician and midwife) are meeting bi-monthly with Board level champions to escalate locally identified issues?
10. Have you reported 100% of qualifying 2017/18 incidents under NHS Resolution's Early Notification scheme?

The precise detail for exactly what is required under each action and how this should be evidenced can be found [here](#).

### **Q3) How many of the actions will the trust need to meet in order to qualify for the CNST incentive payment?**

The expectation is that trusts will be able to demonstrate the required progress against **all 10** of the actions in order to qualify for a minimum rebate of their contribution to the incentive fund (calculated at 10% of their maternity premia).

### **Q4) Why have these actions been chosen?**

These actions were agreed by the National Maternity Safety Champions as reflecting best practice in maternity safety improvement which could be evidenced to demonstrate progress against them. Implementing these actions should deliver a qualitative difference in trusts' performance on improving maternity safety and by doing this, trusts would be expected to reduce incidents of harm that lead to clinical negligence claims. The scheme will therefore reward those trusts who have implemented the **10 maternity safety actions**.

### **Q5) Who else has been involved in designing the scheme?**

The National Maternity Safety Champions were advised by a group of system experts including representatives from:

- NHS England
- NHS Improvement
- NHS Digital
- MBRRACE UK
- Royal College of Obstetricians and Gynaecologists
- Royal College of Midwives
- Care Quality Commission
- Department of Health and Social Care
- NHS Resolution
- Clinical obstetric, midwifery and neonatal staff

We will shortly be agreeing terms of reference to create an Advisory group which will be responsible for confirming the final results as well as evaluating the scheme itself.

**Q6) Who does the scheme apply to?**

The scheme will only apply to acute trusts in 2018/19. However, we want to support the improvement of maternity services in all settings so, if the scheme is successful, we will look at how we can extend it in future years.

**Q7) How will trusts be assessed against the actions and by when?**

Trusts will be expected to provide a report to their Board demonstrating progress (with evidence) against each of the 10 actions using the [template Board report for result submission](#).

Completed reports need to be signed off by the Board, discussed with your commissioner and then submitted to NHS Resolution (with all relevant supporting documentation) **by Friday 29 June 2018** for review by the National Maternity Safety Champions and the Advisory group.

Please note that:

- NHS Resolution will be accessing external data sources to validate some of the trust's responses.
- Completed reports should be sent to NHS Resolution at [contributions@resolution.nhs.uk](mailto:contributions@resolution.nhs.uk)
- If a completed report is not returned to NHS Resolution by **23:59 Friday 29 June 2018**, NHS Resolution will treat that as a nil response and no incentive payment will be made

The proposed timescale is as follows:

Step	Date
Completed Board reports with Board sign-off submitted to NHS Resolution	23:59 Friday 29 June 2018
NHS Resolution to work with National Maternity Safety Champions and Advisory group to confirm final results	By end July 2018
Evaluation of scheme and confirmation of approach for 2019/20	By end July 2018
NHS Resolution to confirm and pay discounts	By end Aug 2018

**Q8) What if my trust has multiple sites providing maternity services**

Multi-site providers will need to demonstrate the necessary progress for each individual site. The Board final report template should therefore include evidence of progress overall and at each site level.

**Q9) How and when will trusts get their discount?**

Discounts are expected to be confirmed and paid by the end of August 2018. NHS Resolution will do this by:

1. Confirming the value of the credit to be made to members; and
2. Issuing a credit note and making the payment.

Please note that any direct debit payments set up on the basis of the original contribution level will not be subsequently adjusted

**Q10) What if my trust is unable to demonstrate the required progress against all 10 actions?**

If your trust is unable to demonstrate the required progress against all of the 10 maternity safety actions, please complete an [action plan template](#) for each safety action setting out a detailed plan for how the trust intends to achieve the required progress and over what time period. Where possible, this should also include an estimate of the additional costs of delivering the plan. A completed action plan is required even where Trusts have already completed this section. However, if this section hasn't been completed, the action plan template alone will be sufficient.

The National Maternity Safety Champions and Advisory group will review these details and NHS Resolution, at its absolute discretion, will agree whether any reimbursement of CNST contributions is to be made to the trust. Any such payments would be at a much lower level than for those trusts able to demonstrate the required progress against the 10 actions and the 10% of the maternity contribution used to create the fund.

**Q11) What if the trust self-certifies as having met the required progress against all 10 actions but subsequent verification suggests otherwise?**

We expect trust Boards to self-certify declarations following consideration of the evidence provided. Where subsequent verification checks demonstrate an incorrect declaration has been made, this may indicate a failure of Board governance which the Advisory group will escalate within the system for further exploration. We will also take steps to recover in full any incentive payment that has been made under the scheme.

**Q12) How will the impact of the scheme be evaluated?**

It is important to make sure we evaluate the scheme to understand whether it has been successful in incentivising sustainable improvement(s) in maternity safety.

We will make a short online survey available in June to capture feedback on key points, such as:

- Whether the scheme has had a positive impact on your ability to deliver safer maternity care?
- Whether the scheme has supported discussions with Commissioners around the delivery of safer maternity care?
- What other areas do you think it would be useful to incentivise through CNST contributions?
- Whether there have been any unintended consequences as a result of the process?
- How the scheme could be improved in future years – e.g. improvements to the verification process?
- Any other thoughts/comments on the scheme

The National Maternity Safety Champions and the Advisory group will use this feedback, as well as third party data sources to review whether the scheme has been successful. If so, we will look at how the scheme could be extended and developed in future years to continue to drive improvements in safety. Future developments could include things like specific neonatal workforce measures or other suggestions put forward during the evaluation process.

**Q13) What should trusts do if they have any queries regarding the scheme?**

Please submit queries to [contributions@resolution.nhs.uk](mailto:contributions@resolution.nhs.uk) This mailbox will be periodically monitored and queries answered as quickly as possible.