





Maternity Enabling plan 2023 to 2027

Doncaster and Bassetlaw Teaching Hospitals



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Introduction

Our Aim

At Doncaster and Bassetlaw Teaching Hospitals (DBTH), we aim to ensure the whole team are aligned to a clear purpose in the pursuit of excellence for the families who use our maternity services.

The strategy covers the time period from 2023 to 2026 in line with the three year delivery plan for maternity and neonatal services (March 2023) and aligns with the DBTH, Nursing, Midwifery and Allied health Professionals Quality Strategy 2023-2027.

We also know that a more motivated and happier workforce, with the right skills and tools to do their jobs, positively impacts on patient care and safety. We strive to be an employer of choice and to also build on our strong record of people who join us as part of a learning pathway choosing to then become a substantive member of #TeamDBTH.

Our People Strategy supports our True North objectives and our strategic aim to be "the safest Trust in England, outstanding in all we do."

We value #TeamDBTH in its widest sense to include all our people, our learners, students, doctors in training, regular bank workers and colleagues working on our sites from partner organisations.

Our vision is: Healthier together – delivering exceptional care for all.

Our four strategic priorities are:



Maternity services at DBTH

Approximately 4500 women choose to birth at DBTH each year. We are able to offer a choice of places to birth including consultant led units at Doncaster and Bassetlaw Hospitals, a midwife led unit on the Doncaster site and a homebirth service in Doncaster and Bassetlaw.

We provide ante-natal and post-natal care in the community as well as consultant led antenatal clinics at Doncaster and Bassetlaw Hospitals. We have a 24/7 triage service at Doncaster and a maternity assessment centre for lower risk pregnancies at Bassetlaw Hospital for 12 hours a day.

National Drivers

There are a number of national drivers for maternity services these include:

- Better Births Report (2015)
- The NHS Long Term Plan (2019)
- The Ockenden interim and final reports (2020)
- The East Kent Report (2021)
- Three year delivery plan for maternity and neonatal services (2023).



Strategic theme one: Patient safety

We will continuously improve our systems and processes to ensure our families receive high quality, safe and effective care, free from avoidable harm.

Objectives

- Implement the Patient Safety Incident Response Framework (PSIRF)
- Review and learn from patient safety incidents
- Maintain an ethos of honest and open reporting
- Regularly review the maternity and neonatal services, supported by relevant clinical data
- Embed Just Culture tools
- Utilise the Birthrate Plus app data to ensure best utilisation of midwifery staff
- Ensure that the multidisciplinary team attend training together and the senior leadership team attend the perinatal leadership course in 2023
- Ensure staff have access to a Freedom to Speak Up Guardian
- Ensure there is adequate time and a formal structure for review and sharing learning.

- Greater than 90% MDT attendance at training
- Results of the NHS staff survey
- General Medical Council (GMC) national training survey
- CQC inspections looking at a learning and responsive culture, strong leadership and governance.



Strategic theme two: Patient experience

We will provide compassionate and personalised care which meets the individual needs of our families. We will listen and engage with our families ensuring their feedback is reflected in new or changes to services.

Objectives

- Work closely with the Maternity and Neonatal Partnership (MNVP) to develop a variety of ways to feedback their experiences
- Involve the MNVP in the complaints process
- Work with local groups and the voluntary sectors
- Ensure that co-production is the centre of all improvements and changes in the service
- Achieve compliance with the accessible information standard
- Implement the Ask a Midwife
- Consider rollout of maternity continuity of carer in line with the principles of safe staffing
- Achieve the standard of the UNICEF UK Baby Friendly Initiative
- Involve service users in quality governance and co-production when designing and planning of services.

- Increased response rate in the Friends and Family Test
- All complaints responded to in the agreed timescale
- Improved resolution at the bedside / informally
- Improvement in the Maternity (CQC) survey
- Reaccreditation of BFI Gold Award
- Feedback from the MNVP on personalised care plans, the quality and compliance with documented care plans
- Clinical Negligence Scheme for Trusts (CNST) standards and Care Quality Commission (CQC) assessments.



Strategic theme three: Clinical effectiveness

We will ensure our care is provided in a manner which maximises the potential outcomes based on evidence based practice, continuous improvement and the monitoring of clinical outcomes.

Objectives

- An agreed audit plan shared annually
- Utilise Quality Improvement (QI) methodology
- Utilise Statistical Process Charts (SPC) to monitor progress
- Ensure development opportunities for all staff at all levels
- Implement version three of the Saving Babies Lives Care Bundle
- Implement national Maternity Early Warning Scoring (MEWS) and Neonatal Early Warning Tool 2 (NEWTT2) by March 2025
- Review and act on outcomes from stillbirth, neonatal mortality, brain injury and maternal morbidity and mortality
- Ensure staff are enabled to deliver care in line with national guidance
- Complete the national maternity self-assessment tool and use to inform neonatal and maternity improvement plans.

- Evidence of QI events undertaken
- Annual audit plan published
- SPC agreed and published
- Outcome measures will be maternal mortality, stillbirth, neonatal mortality, brain injury during or soon after birth, and preterm births measured by deprivation and ethnicity
- Fully implement Saving Babies Lives Care Bundle version 3 by 2024
- Achieve 100% of < 27 weeks babies being born in the right place
- Reduce term babies being admitted to the neonatal unit to < 5% (avoidable admissions).



Strategic theme four: Fundamentals of care

We will recognise and deliver fundamentals of care to ensure our families receive the quality of care we would wish for our own loved ones.

Objectives

- Implement personalised care plans
- Utilise best practice guidelines and recommendations from national reports
- Work closely with the MNVP
- Ensure all guidelines up to date and in line with the latest guidance
- Work closely with families who make a complaint, or are involved in a incident utilising their feedback
- Utilise the themes collated from complaints, incidents and the claims dashboard.

- Improved outcomes for mothers and babies
- Reduction in the number of complaints each year
- Utilise the maternity survey results each year to identify areas of improvement.



Strategic theme five: Care of our most vulnerable families

We will focus on improving the experience of care for our most vulnerable families.

Objectives

- Work closely with experts with experience of vulnerabilities
- Ensure they have a named lead professional for their care
- Ensure there is a personalised care plan in place
- Providing services that meets the needs of the local population paying particular attention to the health inequalities this includes informed decision making where we know there is inequalities ensuring access to interpreting services and adhering to accessible information standards in the maternity and neonatal settings
- Collecting disaggregated local data and feedback from the population groups to monitor differences in outcomes and experiences for women and babies of different backgrounds. This data should be used to make changes to services.

Measures

- Outcome measures will be maternal mortality, stillbirth, neonatal mortality, brain injury during or soon after birth, and preterm births measured by deprivation and ethnicity
- Fully implement Saving Babies Lives Care Bundle version 3 by 2024
- Achieve 100% of < 27 weeks babies being born in the right place
- Reduce term babies being admitted to the neonatal unit to < 5% (avoidable admissions).

Strategic theme six: Care planning and documentation

We will embrace digital technology, ensure our families are partners in their plan of care, and reflect their latest needs. Our documentation will always be in line with professional standards and support continuity for our families.

Objectives

- Ensure all families have personalised care plans that they agree and can view
- Ensure all records are made in line with the relevant codes of conduct (RCM, RCOG)
- Implement multidisciplinary handovers
- Improve current safety huddles
- Implement quality board in clinical areas.

- Percentage of personalised care plans documented
- Annual record keeping
- Audit of attendance at handovers.

Growing, retaining and supporting our workforce

The workforce encompasses a wide range of professions including midwives, maternity support workers, obstetricians, anaesthetists, neonatologist, neonatal nurses, sonographers, allied health professionals and psychologists. In order to deliver this strategy we need to:

- Grow our workforce
- Use evidence based tools to assess the workforce required
- Develop and implement a local plan to fill vacancies
- Identify and address local retention issues in a retention and improvement action plan
- Implement equity and equality plan actions to reduce workforce inequalities
- Create an anti-racist workplace
- Identify and address issues highlighted in student and trainee feedback
- Offer a preceptorship programme to every newly qualified midwife and newly appointed band 7 and 8 midwives should be supported by a mentor
- Develop future leaders via succession planning ensuring this pipeline reflects the ethnic background of the wider workforce.

Measuring successes

- Results of the NHS staff survey, what the organisation is doing well with, and what needs improvement
- Results of the National Education and Training Survey – feedback from the current trainees and their experiences
- Results of the General Medical Council (GMC) national training survey
- Establishment in post and vacancy rates as provider workforce return data – what is the vacancy rate, is it improving / getting worse
- Annual census of maternity and neonatal staff groups
- Staff turnover and sickness rates
- CQC inspections
- CNST scheme results.









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