

Three Year Delivery Plan for Maternity and Neonatal Care Technical Guidance v1.0

The Three-Year Delivery Plan for Maternity and Neonatal care includes Determining Success Measures that will be used to monitor outcomes and progress in achieving key objectives on the plan. This technical guidance provides details on the construction of each outcome and progress measure so that LMNS and ICBs are clear on how progress will be measured.

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Introduction

The Three-Year Delivery Plan for Maternity and Neonatal care includes Determining Success Measures that will be used to monitor outcomes and progress in achieving key objectives on the plan.

This technical guidance includes the following information to provide clarity on the data sources and indicator construction for these measures:

For each of the four themes, the following details relating to the Outcome Measures in the Delivery Plan are included:

- Measure identifier and short name
- Three Year Delivery Plan theme
- Measure description
- Measure category (Outcome/Progress)
- Data Source
- Numerator
- Denominator
- Exclusions
- Standardisation (Where applicable)
- Organisation levels to be measured
- Desired direction of travel
- Publication link (Where applicable)

In addition, for each of the four themes the following details relating to the progress measures in the delivery plan are included:

- Measure description

- Associated ambition/ deliverable
- Data Source and publication link where applicable
- Additional information pertaining to the measure

Further updates and amendments will be made to this technical guidance in due course, such as when publication links are available for measures not currently in publication.

Summary of Outcome and Progress measures

Delivery Plan Theme	Measure ID and short name	Measure type	Data Source (MI = Management Information)	
Listening to and working with women and families with compassion	T1a: Awareness of medical history during antenatal check-ups	Outcome	CQC National Maternity Survey	
	T1b: Involvement in antenatal care decisions	Outcome		
	T1c: Being listened to during antenatal check-ups	Outcome		
	T1d: Response to concerns during labour and birth	Outcome		
	T1e: Involvement in decisions during labour and birth	Outcome		
	T1f: Kind and compassionate treatment during labour and birth	Outcome		
	T1g: Adequacy of information or explanations during postnatal hospital care	Outcome		
	T1h: Consideration of personal circumstances during postnatal care	Outcome		
	T1i: Being listened to during postnatal care	Outcome		
	T1j: Adequacy of time discussing physical and mental health at the 6-8 weeks GP check	Outcome		
	T1k: Perinatal Pelvic Health Services	Progress		Regional return (MI)
	T1l: Perinatal Mental Health Services	Progress		Regional return (MI)
	T1m: The number of women accessing specialist perinatal mental health services	Progress		NHS Mental Health Dashboard
	Tn: The proportion of maternity and neonatal services with UNICEF BFI accreditation	Progress	UNICEF BFI accreditation	
Growing, retaining and supporting our workforce	T2a Satisfaction with recognition for good work i. Midwives ii. Obstetrics and Gynaecology Specialist Consultants ¹	Outcome	NHS Staff Survey ²	
	T2b Satisfaction with work being valued by your organisation i. Midwives ii. Obstetrics and Gynaecology Specialist Consultants ¹	Outcome		
	T2c Opportunities to discuss and agree learning needs at the start of training i. Trainee Midwives ii. Obstetrics and Gynaecology Specialist Trainees	Outcome	National Education and Training Survey	
	T2d Permitted to attend learning opportunities	Outcome		

¹ Development of measures on obstetricians and gynaecologists experience for national use is at a scoping stage and will be subject to information governance considerations.

² We will also explore how to better understand the experiences of other staff groups, including and staff working in neonatal services.

Delivery Plan Theme	Measure ID and short name	Measure type	Data Source (MI = Management Information)
	i. Trainee Midwives ii. Obstetrics and Gynaecology Specialist Trainees		
	T2e Overall educational experience	Outcome	
	i. Trainee Midwives ii. Obstetrics and Gynaecology Specialist Trainees		
	T2f: Establishment, in-post and vacancy rates for obstetricians, midwives, maternity support workers, neonatologists, and neonatal nurses	Progress	Provider workforce Returns (MI) (in development)
	T2g: Baseline data for obstetric anaesthetists, sonographers, allied health professionals and psychologists.	Progress	Annual census of maternity and neonatal staffing groups
	T2h: Staff turnover (Midwives)	Progress	NHS Workforce Statistics (ESR)
	T2i: Staff sickness absence rate (Midwives)	Progress	
Developing and sustaining a culture of safety, learning and support	T3a Staff experience of learning culture: i. Midwives ii. Obstetrics and Gynaecology Specialist Consultants ¹	Outcome	NHS Staff Survey
	T3b Staff confidence in organisations response to concerns about unsafe clinical practice: i. Midwives ii. Obstetrics and Gynaecology Specialist Consultants ¹	Outcome	
	T3c Recommendation of the service: i. Midwives ii. Obstetrics and Gynaecology Specialist Consultants ¹	Outcome	
	T3d Recommendation of the training post: i. Trainee Midwives ii. Obstetrics and Gynaecology Specialist Trainees	Outcome	National Education and Training Survey
	T3e Comfortable raising concerns: i. Trainee Midwives ii. Obstetrics and Gynaecology Specialist Trainees	Outcome	
	T3f. Supportive working environment for trainee doctors	Outcome	GMC National Training Survey
	T3g. Quality of clinical supervision out of hours for trainee doctors	Outcome	
	T3h. Quality of shift handovers for trainee doctors	Outcome	
Standards and structures that	T4a. Stillbirth rate: i. National level ii. Trust and system level	Outcome	ONS Child and Infant Mortality Statistics MBRRACE-UK Perinatal Mortality Surveillance

Delivery Plan Theme	Measure ID and short name	Measure type	Data Source (MI = Management Information)
underpin safer, more personalised, and more equitable care	T4b. Neonatal Mortality Rate: i. National level ii. Trust and system level	Outcome	i. ONS Child and Infant Mortality Statistics MBRRACE-UK Perinatal Mortality Surveillance
	T4c. Rate of serious brain injury occurring during or soon after birth	Outcome	National Neonatal Research Database/ Neonatal Data Analysis Unit Reports
	T4d. Maternal Mortality Rate	Outcome	MBRRACE-UK
	T4e. Pre-term birth rate i. National level ii. Trust level	Outcome	ONS Child and Infant Mortality Statistics Maternity Services Data Set v2.0
	T4f. Local implementation of version 3 of the Saving Babies' Lives Care Bundle	Progress	National Implementation Tool (To be developed in 2023)
	T4g. Birth in a centre with a neonatal intensive care unit (NICU)	Progress	Badgernet/NNAP via ODNs
	T4h. Avoiding term admissions into neonatal units	Progress	Badgernet via ODNs
	T4i. A periodic digital maturity assessment of trusts, enabling maternity services to have an overview of progress in this area.	Progress	Digital Maturity Assessments (Source details TBC)

Theme 1: Listening to and working with women and families with compassion

Outcome measures

The outcome measures for this theme are based on questions from the Care Quality Commission (CQC) annual maternity survey. These questions have been selected due to their over-arching link to Theme 1 objectives. At national level all of these questions will also be analysed by ethnicity and deprivation. CQC will continue to publish thematic analysis of sub-groups of survey respondents including by ethnicity and deprivation. Trusts and systems will continue to use detailed benchmarking data for all evaluative questions in the CQC Maternity survey to identify areas for improvement.

T1a: Awareness of medical history during antenatal check-ups

Theme

Listening to Women and their families

Measure description

The proportion of women who responded 'Yes *always*' when asked if, during antenatal check-ups, their midwives or doctor appeared to be aware of their medical history?

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2021,2022)

Numerator

Number of respondents who responded, 'Yes *always*' when asked '*During your antenatal check-ups, did your midwives or doctor appear to be aware of your medical history?*'

Denominator

Number of respondents who responded, 'Yes *always*', 'Yes, *sometimes*' or 'No' when asked '*During your antenatal check-ups, did your midwives or doctor appear to be aware of your medical history?*'

Exclusions

Those who responded, '*Don't know /can't remember*'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications/maternity-survey-2022)

Trust and Integrated Care System: To be confirmed.

T1b: Involvement in antenatal care decisions

Theme

Listening to and working with women and families with compassion

Measure description

The proportion of women who, when thinking about their antenatal care, were '*always*' involved in decisions about their care?

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2019, 2021, 2022)

Numerator

Number of respondents who responded, 'Yes always' when asked 'Thinking about your antenatal care, were you involved in decisions about your care?'

Denominator

Number of respondents who responded, 'Yes always', 'Yes, sometimes' or 'No' when asked 'Thinking about your antenatal care, were you involved in decisions about your care?'

Exclusions

Those who responded, 'Don't know /can't remember' or 'I did not want/need to be involved'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National Maternity Indicators section of the [National Maternity Dashboard](#)

T1c: Being listened to during antenatal check-ups**Theme**

Listening to Women and their families

Measure description

The proportion of women who responded 'Yes *always*' when asked if, during their antenatal check-ups, their midwives listened to them?

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2013, 2015, 2017, 2018, 2019, 2021, 2022)

Numerator

Number of respondents who responded, 'Yes always' when asked 'During your antenatal check-ups, did your midwives listen to you?'

Denominator

Number of respondents who responded, 'Yes always', 'Yes, sometimes' or 'No' when asked 'During your antenatal check-ups, did your midwives listen to you?'

Exclusions

Those who responded, 'Don't know /can't remember'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications/maternity-survey-2022)

Trusts and Integrated care system: To be confirmed.

T1d: Response to concerns during labour and birth**Theme**

Listening to and working with women and families with compassion

Measure description

The proportion of women who if they raised a concern during labour and birth felt that it was taken seriously?

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2013, 2015, 2017, 2018, 2019, 2021, 2022)

Numerator

Number of respondents who responded 'Yes' when asked 'if you raised a concern during labour and birth, did you feel that it was taken seriously?'

Denominator

Number of respondents who responded 'Yes' or 'No' when asked 'if you raised a concern during labour and birth, did you feel that it was taken seriously?'

Exclusions

Those who responded, 'I did not raise any concerns'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National Maternity Indicators section of the [National Maternity Dashboard](#)

T1e: Involvement in decisions during labour and birth**Theme**

Listening to Women and their families

Measure description

The proportion of women who, when thinking about their care during labour and birth, were 'always' involved in decisions about their care?

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2019, 2021, 2022)

Numerator

Number of respondents who responded, 'Yes always' when asked '*Thinking about your care during labour and birth, were you involved in decisions about your care?*'

Denominator

Number of respondents who responded, 'Yes always', 'Yes, sometimes' or 'No' when asked '*Thinking about your care during labour and birth, were you involved in decisions about your care?*'

Exclusions

Those who responded, '*Don't know /can't remember*' or '*I did not want/need to be involved*'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications/maternity-survey-2022)

Trusts and Integrated care system: To be confirmed.

T1f: Kind and compassionate treatment during labour and birth

Theme

Listening to Women and their families

Measure description

The proportion of women who responded '*Yes always*' when asked if they were treated with kindness and compassion, while thinking about their care during labour and birth.

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](https://www.cqc.org.uk/publications/maternity-survey-2022) results (New question for 2023)

Numerator

Number of respondents who responded, '*Yes always*' when asked '*Thinking about your care during labour and birth, were you treated with kindness and compassion?*'

Denominator

Number of respondents who responded, 'Yes always', 'Yes, sometimes' or 'No' when asked '*Thinking about your care during labour and birth, were you treated with kindness and compassion?*'

Exclusions

Those who responded, '*Don't know /can't remember*'.

Organisation levels to be reported

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications/maternity-survey-2022)

Trust and Integrated Care System: To be confirmed.

T1g: Adequacy of information or explanations during postnatal hospital care**Main theme**

Listening to and working with women and families with compassion

Measure description

The proportion of women who, when thinking about the care they received in hospital after the birth of their baby, were '*always*' given the information or explanations you needed?

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](https://www.cqc.org.uk/publications/maternity-survey-2022) results (2013, 2015, 2017, 2018, 2019, 2021, 2022)

Numerator

Number of respondents who responded, 'Yes always' when asked '*Thinking about the care you received in hospital after the birth of your baby, were you given the information or explanations you needed?*'

Denominator

Number of respondents who responded, 'Yes always', 'Yes, sometimes' or 'No' when asked '*Thinking about the care you received in hospital after the birth of your baby, were you given the information or explanations you needed?*'

Exclusions

Those who responded, '*Don't know /can't remember*'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications/maternity-survey-2022)

Trust and Integrated Care System: To be confirmed.

T1h: Consideration of personal circumstances during postnatal care at home**Main theme**

Listening to and working with women and families with compassion

Measure description

The proportion of women responding that the midwife or midwifery team that they saw or spoke to 'a/ways' took their personal circumstances into account when giving them advice.

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2019, 2021, 2022)

Numerator

Number of respondents who responded, 'Yes always' when asked, ' *Did the midwife or midwifery team that you saw or spoke to take your personal circumstances into account when giving you advice?*'.

Denominator

Number of respondents who responded, 'Yes always', 'Yes, sometimes' or 'No' when asked ' *Were you given information about any changes you might experience to your mental health after having your baby?*'

Exclusions

Those who responded, 'Don't know /can't remember'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](#)

Trust and Integrated Care System: To be confirmed.

T1i: Being listened to during postnatal care**Theme**

Listening to Women and their families

Measure description

The proportion of women who responded 'Yes *always*' when asked if they felt the midwife or midwifery team that they saw or spoke to always listened to them, while thinking about all the times they were visited at home by a midwife, seen in a clinic by a midwife, or had a phone or video call with a midwife after the birth.

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2013, 2015, 2017, 2018, 2019, 2021, 2022)

Numerator

Number of respondents who responded, 'Yes *always*' when asked '*Did you feel that the midwife or midwifery team that you saw or spoke to always listened to you?*', while thinking about all the times they were visited at home by a midwife, seen in a clinic by a midwife, or had a phone or video call with a midwife after the birth.

Denominator

Number of respondents who responded 'Yes *always*', 'Yes, *sometimes*' or 'No' when asked '*Did you feel that the midwife or midwifery team that you saw or spoke to always listened to you?*' , while thinking about all the times they were visited at home by a midwife, seen in a clinic by a midwife, or had a phone or video call with a midwife after the birth.

Exclusions

Those who responded, 'Don't know /can't remember'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National: [Maternity survey 2022 - Care Quality Commission \(cqc.org.uk\)](#)

Trusts and Integrated care system: To be confirmed.

T1j: Adequacy of time spent discussing physical and mental Health at the 6-8 weeks GP check

Theme

Listening to and working with women and families with compassion

Measure description

The proportion of women who reported that the GP *'definitely'* spent enough time talking to them about their physical health and mental health at the postnatal check-up.

Metric category

Outcome

Data Source (Previous years available)

Annual [CQC Maternity Survey](#) results (2019, 2021, 2022)

Numerator

Number of respondents who responded, *'Yes definitely'* when asked *'At the postnatal check-up (around 6-8 weeks after the birth), did the GP spend enough time talking to you about your own physical health'* and who also responded, *'Yes definitely'* when asked *'At the postnatal check-up (around 6-8 weeks after the birth), did the GP spend enough time talking to you about your own mental health?'*

Denominator

Number of respondents who responded, *'Yes definitely'*, *'Yes, to some extent'* *'No'* or *'I have not had a postnatal check-up with a GP'* when asked *'At the postnatal check-up (around 6-8 weeks after the birth), did the GP spend enough time talking to you about your own physical health'* and when asked *'At the postnatal check-up (around 6-8 weeks after the birth), did the GP spend enough time talking to you about your own mental health?'*

Exclusions

Those who responded, *'Don't know /can't remember'* to either question.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed.

Theme 1 Progress measures – Links and additional information

Progress measure description	Ambition/ Deliverable	Source of data	Additional information
T1k: Perinatal Pelvic Health Services are in place	All women have equitable access to specialist care	ICB/LMNS	Whether perinatal pelvic health services have (a) been commissioned sustainably and (b) are fully operational i.e. available across the ICB in line with service specification.
T1l: Perinatal Mental Health Services are in place		ICB/LMNS	Whether perinatal mental health services have (a) been commissioned sustainably and (b) are fully operational i.e. available across the ICB
T1m: The number of women accessing specialist perinatal mental health services	By 2023/24, at least 66,000 women with moderate/complex to severe PMH difficulties can access care and support in the community.	MHSDS NHS Digital Publication (Indicator MHS91)	The number of women in contact with specialist community perinatal mental health services includes women who had at least one attended contact (F2F or video). All other consultation mediums are excluded, such as telephone, SMS or email. Women are only counted once nationally in the reporting period, even if receiving multiple episodes of care.
T1n: The proportion of maternity and neonatal services with UNICEF BFI accreditation	Achieve the standard of the UNICEF UK Baby Friendly Initiative (BFI) for infant feeding, or an equivalent initiative, by March 2027.	UNICEF BFI accreditation	Trusts are classified as having achieved the standard when they have an award of 'Gold Award', 'Full accreditation', 'Full accreditation/Re-accredited' or 'Full Accreditation (Covid-19)'

Theme 2: Growing, retaining and supporting our workforce

We will determine overall success by listening to staff: Our outcome measures for this theme will be the NHS Staff Survey, the National Education and Training Survey, and the GMC national training survey. These questions have been selected due to them relating closely to Theme 2 objectives. Trusts and systems should continue to use results of other survey questions to identify areas for improvement.

T2a Satisfaction with recognition for good work

Theme

Growing, retaining and supporting our workforce

Measure description

The proportion of i) Midwives ii) Obstetrician and Gynaecology Specialist Consultants³ who are satisfied with the recognition they get for good work.

Metric category

Outcome

Data Source (Previous years available)

[NHS Staff Survey](#) (2015 to 2022)

Numerator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded '*Satisfied*' or '*Very satisfied*' when asked how satisfied they are with the recognition they get for good work.

Denominator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded when asked how satisfied they are with the recognition they get for good work.

Exclusions/ Filters

Filters:

³ Development of measures on obstetricians and gynaecologists experience for national use is at a scoping stage and will be subject to information governance considerations.

- i) Midwives' responses are identified from the response 'Midwives' to the question, 'What is your occupational group?'
- ii) Responses from Obstetrician and Gynaecology Specialist Consultants³

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

T2b Satisfaction with work being valued by your organisation.

Theme

Growing, retaining and supporting our workforce

Measure description

The proportion of i) Midwives ii) Obstetrician and Gynaecology Specialist Consultants⁴ who are satisfied with the extent to which their organisation values their work.

Metric category

Outcome

Data Source (Previous years available)

[NHS Staff Survey](#) (2015 to 2022)

Numerator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded '*Satisfied*' or '*Very satisfied*' when asked how satisfied they are with the extent to which their organisation values their work.

⁴ Development of measures on obstetricians and gynaecologists experience for national use is at a scoping stage and will be subject to information governance considerations.

Denominator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded when asked the extent to which their organisation values their work.

Exclusions/ Filters

- i) Midwives' responses are identified from the response '*Midwives*' to the question, '*What is your occupational group?*'.
- ii) Responses from Obstetrician and Gynaecology Specialist Consultants⁴

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

T2c Opportunities to discuss and agree learning needs at the start of training

Theme

Growing, retaining and supporting our workforce

Measure description

The proportion of i) midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees that had an opportunity to discuss and agree their learning needs with a supervisor, a mentor or senior colleague at the start of their time in their practice placement or training post.

Metric category

Outcome

Data Source (Previous years available)

[National Education and Training Survey](#) (2019 to 2022)

Numerator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees responding 'Yes' to *'At the start of my time in this learning environment (practice placement or training post), I had the opportunity to discuss and agree my learning needs with a supervisor, a mentor or a senior colleague.'*

Denominator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees responding 'Yes' or 'No' that *'At the start of my time in this learning environment (practice placement or training post), I had the opportunity to discuss and agree my learning needs with a supervisor, a mentor or a senior colleague.'*

Exclusions/ Filters

Nil response or responses of *'Don't know'*.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

T2d Permitted to attend learning opportunities**Theme**

Growing, retaining and supporting our workforce

Measure description

The proportion of i) midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who were allowed to attend learning opportunities to meet their curriculum or course requirements.

Metric category

Outcome

Data Source (Previous years available)

[National Education and Training Survey](#) (2019 to 2022)

Numerator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees responding '*Good*' or '*Outstanding*' when asked to rate the quality of their practice placement or training post for '*Being allowed to attend learning opportunities to meet my curriculum or course requirements.*'

Denominator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who responded '*Unsatisfactory*','*In need of improvement*', '*Satisfactory*', '*Good*' or '*Outstanding*' when asked to rate the quality of their practice placement or training post for '*Being allowed to attend learning opportunities to meet my curriculum or course requirements.*'

Exclusions/ Filters

Nil response or responses of '*I haven't been in the practice placement or training post long enough*' or '*Not applicable or relevant to my experience*'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

T2e Overall educational experience

Theme

Growing, retaining and supporting our workforce

Measure description

The proportion of i) midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who reported a positive overall educational experience.

Metric category

Outcome

Data Source (Previous years available)

[National Education and Training Survey](#) (2019 to 2022)

Numerator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who responded, '*Good*' or '*Outstanding*' when asked to rate 'The overall educational experience I gained in my current or most recent practice placement / training post'.

Denominator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who responded '*Unsatisfactory*,' '*In need of improvement*,' '*Satisfactory*,' '*Good*' or '*Outstanding*' when asked to rate '*the overall educational experience I gained in my current or most recent practice placement / training post*'

Exclusions/ Filters

Nil response or responses of '*I haven't been in the practice placement or training post long enough*' or '*Not applicable or relevant to my experience*'.

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

Theme 2 Progress measures – Links and additional information

Progress measure description	Ambition/ Deliverable	Source of data	Additional information
T2f: In-post and vacancy rates for obstetricians, midwives, maternity support workers, neonatologists, and neonatal nurses	Workforce capacity to grow as quickly as possible to meet local needs. Aligned local and national strategies	Provider Workforce Return using: a. Funded Establishment – Full time equivalent (FTE) b. Staff in post – substantive, bank and agency (FTE)	Collected monthly at Trust level. Breakdown is not currently available for neonatologists and neonatal nurses – in development
T2g: Baseline data for obstetric anaesthetists, sonographers, allied health professionals and psychologists.	supporting recruitment to those vacant posts identified through workforce planning.	Annual census of maternity and neonatal staffing groups	Details to be confirmed
T2h: Staff turnover (Midwives)		Data source: ESR Turnover data published in NHS Workforce Statistics - NHS Digital (Turnover from organisation benchmarking tool – XLSX file)	NHS Digital publications provide technical definitions. Available monthly Further work on other professional groups is pending
T2i: Staff sickness absence rates (Midwives)		Data source: ESR Sickness absence rate published in NHS Sickness Absence Rates - NHS Digital (Sickness absence benchmarking tool, Monthly Data Text File)	

Theme 3: Developing and sustaining a culture of safety, learning and support

Achieving meaningful changes in culture will take time and progress measures are difficult to identify and can have unintended consequences. We will primarily determine overall success by listening to the people who use and work in frontline services.

Our outcome measures for this theme are midwives' and obstetrics and gynaecology specialists' experience using the results of the NHS Staff Survey; the National Education and Training Survey and the GMC National Training Survey. We will explore how to better understand the experiences of other staff groups.

T3a Staff experience of learning culture

Theme

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of i) Midwives ii) Obstetrician and Gynaecology Specialist Consultants⁵ who agree that when errors, near misses or incidents are reported, their organisation takes action to ensure that they do not happen again

Metric category

Outcome

Data Source (Previous years available)

[NHS Staff Survey](#) (2015 to 2022)

Numerator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded 'Agree' or 'Strongly Agree' when asked whether they agree or disagree with the following: "When errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again".

⁵ Development of measures on obstetricians and gynaecologists experience for national use is at a scoping stage and will be subject to information governance considerations.

Denominator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded when asked whether they agree or disagree with the following: "When errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again".

Exclusions/ Filters

- i) Midwives responses are identified from the response 'Midwives' to the question 'What is your occupational group?'
- ii) Obstetrician and Gynaecology Specialist Consultants responses⁵

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

Midwives: National Maternity Indicators section of the [National Maternity Dashboard](#)

T3b Staff confidence in organisations response to concerns about unsafe clinical practice

Theme

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of i) Midwives ii) Obstetrician and Gynaecology Specialist Consultants⁶ who agree that their organisation would address their concerns about unsafe clinical practice

Metric category

Outcome

⁶ Development of measures on obstetricians and gynaecologists experience for national use is at a scoping stage and will be subject to information governance considerations.

Data Source (Previous years available)

[NHS Staff Survey](#) (2015 to 2022)

Numerator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded 'Agree' or 'Strongly Agree' when asked to what extent do they agree with following statement about unsafe clinical practice: "I am confident that my organisation would address my concern".

Denominator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded when asked to what extent do they agree with following statement about unsafe clinical practice: "I am confident that my organisation would address my concern".

Exclusions/ Filters

- i) Midwives responses are identified from the response 'Midwives' to the question 'What is your occupational group?'
- ii) Obstetrician and Gynaecology Specialist Consultants responses⁶

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

T3c Recommendation of the service

Theme

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of i) Midwives ii) Obstetrician and Gynaecology Specialist Consultants⁷ who agree that they would recommend their organisation as a place to work or be happy with standard of care provided by their organisation if a friend or relative needed treatment.

Metric category

Outcome

Data Source (Previous years available)

[NHS Staff Survey](#) (2015 to 2022)

Numerator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded 'Agree' or 'Strongly Agree' to either of the following statements: '*I would recommend my organisation as a place to work*' or '*If a friend or relative needed treatment they would be happy with the standard of care provided by this organisation*'.

Denominator

The number of i) Midwives and ii) Obstetrician and Gynaecology Specialist Consultants who responded to either of the following statements: '*I would recommend my organisation as a place to work*' or '*If a friend or relative needed treatment they would be happy with the standard of care provided by this organisation*'.

Exclusions/ Filters

- i) Midwives responses are identified from the response 'Midwives' to the question 'What is your occupational group?'
- ii) Obstetrician and Gynaecology Specialist Consultants responses⁷

Organisation levels to be measured

Trust, Integrated Care System, National

⁷ Development of measures on obstetricians and gynaecologists experience for national use is at a scoping stage and will be subject to information governance considerations.

Desired direction of travel

Increase

Publication link

Midwives: National Maternity Indicators section of the [National Maternity Dashboard](#)

T3d Recommendation of the training post**Theme**

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of i) midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who would recommend their practice placement or training post to friends and colleagues as a place to work or train.

Metric category

Outcome

Data Source (Previous years available)

[National Education and Training Survey](#) (2019 to 2022)

Numerator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who responded '*Likely*' or '*Extremely likely*' when asked '*how likely are you to recommend this practice placement or training post to friends and colleagues as a place to work or train*'.

Denominator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who responded, '*Extremely Unlikely*', '*Unlikely*', '*Neither likely nor unlikely*', '*Likely*' or '*Extremely likely*' when asked '*how likely are you to recommend this practice placement or training post to friends and colleagues as a place to work or train*'.

Exclusions/ Filters

Nil response or responses of '*Don't know*'

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

T3e Comfortable raising concerns**Theme**

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of i) midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees who are comfortable raising concerns.

Metric category

Outcome

Data Source (Previous years available)

[National Education and Training Survey](#) (2020 to 2022)

Numerator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees responding 'Yes' when asked '*Do you feel comfortable raising concerns?*'

Denominator

Number of i) Midwifery placement students and ii) Obstetrician and Gynaecology Specialty trainees responding 'Yes' or 'No' when asked '*Do you feel comfortable raising concerns?*'

Exclusions/ Filters

Nil response

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

To be confirmed

T3f. Supportive working environment for trainee doctors**Theme**

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of specialty trainees in Obstetrics & Gynaecology who agree that the working environment is a fully supportive one.

Metric category

Outcome

Data Source (Previous years available)

GMC [National training survey \(NTS\) – Doctors in training](#) (2022)

Numerator

The number of specialty trainees in Obstetrics & Gynaecology who responded 'Agree' or 'Strongly agree' when asked to what extent do you agree with the following statement '*The working environment is a fully supportive one*'.

Denominator

The number of specialty trainees in Obstetrics & Gynaecology who responded when asked to what extent do you agree with the following statement '*The working environment is a fully supportive one*'.

Exclusions/ Filters

None

Organisation levels to be measured:

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National Maternity Indicators section of the [National Maternity Dashboard](#)

T3g. Quality of clinical supervision out of hours for trainee doctors**Theme**

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of specialty trainees in Obstetrics & Gynaecology who rate the quality of clinical supervision out of hours as good.

Metric category

Outcome

Data Source (Previous years available)

GMC [National training survey \(NTS\) – Doctors in training](#) (2015 to 2022)

Numerator

The number of specialty trainees in Obstetrics & Gynaecology who responded 'Good' or 'Very Good' when asked "Rate the quality of clinical supervision, OUT OF HOURS, in this post"

Denominator

The number of specialty trainees in Obstetrics & Gynaecology who responded when asked "Rate the quality of clinical supervision, OUT OF HOURS, in this post"

Exclusions/ Filters

None

Organisation levels to be measured

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National Maternity Indicators section of the [National Maternity Dashboard](#)

T3h. Quality of shift handovers for trainee doctors**Theme**

Developing and sustaining a culture of safety, learning and support

Measure description

The proportion of specialty trainees in Obstetrics & Gynaecology who agree that handover arrangements always ensure continuity of care for patients BETWEEN SHIFTS.

Metric category

Outcome

Data Source (Previous years available)

GMC [National training survey \(NTS\) – Doctors in training](#) (2015 to 2022)

Numerator

The number of specialty trainees in Obstetrics & Gynaecology who responded 'Agree' or 'Strongly agree' when asked to what extent do you agree with the following statement "Handover arrangements in this post always ensure continuity of care for patients BETWEEN SHIFTS"

Denominator

The number of specialty trainees in Obstetrics & Gynaecology who responded when asked to what extent do you agree with the following statement "Handover arrangements in this post always ensure continuity of care for patients between shifts"

Exclusions/ Filters

Those who responded 'Not applicable'

Organisation levels to be measured

Trust, Integrated Care System, National

Desired direction of travel

Increase

Publication link

National Maternity Indicators section of the [National Maternity Dashboard](#)

Theme 4: Standards and structures that underpin safer, more personalised, and more equitable care

Outcome measures for this theme are those relating to our existing safety ambitions: maternal mortality rate, stillbirth rate, neonatal mortality rate, rates of brain injury occurring during or soon after birth, and preterm birth rate. We will monitor these measures nationally by ethnicity and deprivation.

T4ai. Stillbirth rate (National ambition England level monitoring)

Theme

Standards and structures that underpin safer, more personalised, and more equitable care

Measure description

The rate of stillbirths per 1000 births

Metric category

Outcome

Data Source (Previous years available)

Office of National Statistics [Child and Infant Mortality in England and Wales](#) (2010 to 2021)

Numerator

The number of stillbirths in England in the calendar year

Denominator

The total number of births in England (live births and stillbirths) in the calendar year

Exclusions/ Filters

Stillbirths are defined as: A baby born after 24 or more weeks completed gestation and which did not, at any time, breathe or show signs of life.

Organisation levels to be measured:

National

Desired direction of travel

Decrease

Publication link

[Child and infant mortality in England and Wales - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/child-population/child-mortality/child-and-infant-mortality-in-england-and-wales)

T4aii. Stillbirth rate (ICS and Trust level monitoring)**Theme**

Standards and structures that underpin safer, more personalised, and more equitable care.

Measure description

The rate of stillbirths per 1000 births

Metric category

Outcome

Data Source (Previous years available)

[MBRRACE-UK Perinatal Mortality Surveillance Reports \(2013-2020\)](#)

Numerator

The number of stillbirths in England in the calendar year

Denominator

The total number of births in England (live births and stillbirths) in the calendar year

Exclusions/ Filters

Stillbirths are defined as: A baby delivered at or after 24+0 weeks gestational age showing no signs of life, irrespective of when the death occurred.

Births less than 24+0 weeks gestational age and terminations of pregnancy are excluded from the mortality rates reported.

Standardisation

Trusts: 'Crude rates', 'stabilised and adjusted rates' and 'stabilised and adjusted rates excluding congenital anomalies' to be measured.

Systems: 'Crude rates' and 'stabilised rates' to be measured.

See [MBRRACE-UK Perinatal Mortality Surveillance Report – Technical Document](#) for further details.

Organisation levels to be measured:

Trust, Integrated Care System

Desired direction of travel

Decrease

Publication link

[Reports | MBRRACE-UK | NPEU \(ox.ac.uk\)](#)

T4bi. Neonatal Mortality rate (National ambition England level monitoring)

Theme

Standards and structures that underpin safer, more personalised, and more equitable care

Measure description

The neonatal mortality rate per 1000 live births

Metric category

Outcome

Data Source (Previous years available)

Office of National Statistics [Child and Infant Mortality in England and Wales](#) (2010 to 2021)

Numerator

The number of neonatal deaths at 24 weeks gestation and above in England in the calendar year

Denominator

The total number of live births at 24 weeks gestation and above in England in the calendar year

Exclusions/ Filters

Neonatal deaths are defined as: The death of an infant aged under 28 days

Births below 24 weeks gestation are excluded from the mortality rate used to track progress against the National ambition.

Organisation levels to be measured:

National Trust and Integrated Care Board

Desired direction of travel

Decrease

Publication link

[Child and infant mortality in England and Wales - Office for National Statistics \(ons.gov.uk\)](#)

T4bii. Neonatal mortality rate (ICS and Trust level monitoring)**Theme**

Standards and structures that underpin safer, more personalised, and more equitable care.

Measure description

The neonatal mortality rate per 1000 live births

Metric category

Outcome

Data Source (Previous years available)

[MBRRACE-UK Perinatal Mortality Surveillance Reports](#) (2013-2020)

Numerator

The number of neonatal deaths at 24⁺⁰ weeks gestation and above in England for births in the reported year, where a neonatal death is defined as a liveborn baby (born at 20⁺⁰ weeks gestational age or later) who died before 28 completed days after birth.

Denominator

The total number of live births at 24⁺⁰ weeks gestation and above in England in the calendar year

Exclusions/ Filters

Births less than 24⁺⁰ weeks gestational age and terminations of pregnancy are excluded from the mortality rates reported.

Standardisation

Trusts: 'Crude rates', 'stabilised and adjusted rates' and 'stabilised and adjusted rates excluding congenital anomalies' to be measured.

Systems: 'Crude rates' and 'stabilised rates' to be measured.

See [MBRRACE-UK Perinatal Mortality Surveillance Report – Technical Document](#) for further details.

Organisation levels to be measured:

Trust, Integrated Care System

Desired direction of travel

Decrease

Publication link

[Reports | MBRRACE-UK | NPEU \(ox.ac.uk\)](#)

T4c. Rate of serious brain injury occurring during or soon after birth.

Theme

Standards and structures that underpin safer, more personalised, and more equitable care.

Measure description

The rate of serious brain injury occurring during or soon after birth, per 1000 live births

Metric category

Outcome

Data Source

Numerator: National Neonatal Research Data Base – [Neonatal Data Analysis Unit Reports](#) on Brain injury occurring during or soon after birth: annual incidence and rates of brain injuries to monitor progress against the national maternity ambition.

Denominator: Office for National Statistics (ONS) Birth Summary Tables for England.

Numerator

Annual number of infants who received at least one episode of care within a neonatal unit in England with a brain injury occurring during or soon after birth.

Denominator

All live births in England

Exclusions/ Filters

Numerator

Population: All babies admitted to a neonatal unit in England.

Time period after birth: All brain injuries that are detected during the neonatal unit stay.

Conditions to be included:

a. Infants with a diagnosis consistent with hypoxic ischaemic encephalopathy: term and near-term infants only

b. Infants with a diagnosis of intracranial haemorrhage, perinatal stroke, hypoxic ischaemic encephalopathy (HIE), central nervous system infection, and kernicterus (bilirubin encephalopathy): all infants

c. preterm white matter disease (periventricular leukomalacia): preterm infants only

d. Infants with a recorded seizure: all infants

Denominator:

Births were extracted from a dataset containing birth registrations linked to their corresponding notification and infants missing gestational age and where birth weight was inconsistent with gestational age were excluded.

Organisation levels to be measured:

National, System

Desired direction of travel

Decrease

Publication link

National: [Brain injury occurring during or soon after birth \(imperial.ac.uk\)](https://www.imperial.ac.uk/research/brain-injury-occurring-during-or-soon-after-birth/)

Integrated Care System: To be confirmed.

T4d. Maternal mortality rate

Theme

Standards and structures that underpin safer, more personalised, and more equitable care

Measure description

The rate of maternal deaths during pregnancy and up to six weeks after the end of pregnancy per 100,000 maternities

Metric category

Outcome

Data Source

[MBRRACE-UK Saving Lives Improving Mothers' Care](#)

(Numerator: MBRRACE UK, Denominator: Office for National Statistics, General Register Office for Scotland, Northern Ireland Statistics and Research Agency)

Numerator

The number of women who died in the UK from direct and indirect causes, classified using ICD-MM (World Health Organisation 2012), during pregnancy or up to one year after the end of pregnancy within the reported triennia.

Denominator

All maternities in the UK

Exclusions/ Filters

Deaths due to COVID 19

Organisation levels to be measured:

UK level

Desired direction of travel

50% reduction between 2009-11 and 2024-26

T4ei. Pre-term birth rate (National ambition monitoring)

Theme

Standards and structures that underpin safer, more personalised, and more equitable care.

Measure description

The rate of pre-term births expressed as a percentage

Metric category

Outcome

Data Source

The National Maternity Safety Ambition: ONS – Annual Child and Infant Mortality Statistics

Numerator

The total number of births at between 24+0 weeks and 37+0 weeks Gestation

Denominator

The total number of births (live and still) at 24+0 weeks gestation and over

Exclusions/ Filters

Births below 24+0 weeks gestation

Organisation levels to be measured:

National

Desired direction of travel

Decrease

Publication link

[Child and infant mortality in England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

T4eii. Preterm birth rate (Trust level)**Theme**

Standards and structures that underpin safer, more personalised, and more equitable care.

Measure description

The rate of pre-term births expressed as a percentage

Metric category

Outcome

Data Source

Maternity Services Data Set v2.0 - Clinical Quality Improvement Metric

Numerator

Number of live singleton babies born whose gestational length was between 22⁺⁰ and 36⁺⁶ weeks.

Denominator

Number of live singleton babies born whose gestational length was between 22⁺⁰ and 45⁺⁰ weeks.

Exclusions/ Filters

Multiple births

Organisation levels to be measured:

Trust

Desired direction of travel

Decrease

Publication link

[National Maternity Dashboard - Clinical Quality Improvement Metrics](#)

Theme 4 Progress measures – Links and additional information

Progress measure description	Ambition/ Deliverable	Source of data	Additional information
T4f: Local implementation of version 3 of the Saving Babies' Lives Care Bundle using a national tool.	Implement version 3 of the Saving Babies' Lives Care Bundle by March 2024 and adopt the national MEWS and NEWTT-2 tools by March 2025.	MSDS v2.0	Implementation will be tracked using Saving Babies Lives Care Bundle Version 3 – Progress and Outcome Measures from MSDS v2.0 Collected by Trust
T4g: Of women who give birth at less than 27 weeks (<28 weeks for multiple births) or with birthweight < 800g, the proportion who give birth in a trust with on-site neonatal intensive care.	85% of births at <27weeks (<28 weeks for multiple births) or with birthweight < 800g in maternity hospitals with a designated NICU	BadgerNet – ODNs - Quarterly Assurance (Neonatal Transformation)	This is a count of mums, not babies. Includes births in all settings. Collected quarterly by Neonatal ODN Also reported annually by NNAP
T4h: The proportion of full-term babies (gestation greater than or equal to 37 weeks) admitted to a neonatal unit within 28 days of birth, measured through the ATAIN programme.	We want to reduce harm leading to avoidable admissions to neonatal units for babies born at or after 37 weeks. Admissions to NNU for babies born ≥37 weeks gestation, by first admission only, should be less than <6%	BadgerNet – ODNs via Quarterly Assurance (Neonatal Transformation)	To include all admissions for all lengths of stay
T4i: A periodic digital maturity assessment of trusts, enabling maternity services to have an overview of progress in this area.	Women can access their records and interact with their digital plans and information to support informed decision-making. Parents can access neonatal and early years health information to support their child's health and development.	To be confirmed	

	<p>Information meets accessibility standards, with non-digital alternatives available for those who require or prefer them.</p> <p>All clinicians are supported to make best use of digital technology with sufficient computer hardware, reliable Wi-Fi, secure networks, and training.</p> <p>Organisations enable access to key information held elsewhere internally or by partner organisations, such as other trusts and GP practices.</p>		
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