South East Maternity Dashboard
How can we use the data to improve the quality of care?

Friday 18th December 2015
Why Develop a South East Dashboard?

- Existing dashboards have a mixture of quality metrics and service metrics and did not allow for easy comparisons to other organisations.
- Existing data not linked to quality improvement or displayed in a robust manner.
- Ambition to link routinely collected data with quality improvement across the region.
- The aim was to collect data that should help us and women to inform our practice and improve quality across the region.
Background and Development

- SCN brought together Task and Finish Group in early 2014
- Developed scope of dashboard and process for selecting metrics
- Engaged Quality Observatory to build the dashboard
- Pilot phase February – July 2014 within 5 Trusts across Kent, Surrey and Sussex completed
- External evaluation of pilot carried out by the University of Brighton
- Next phase now underway – roll out within remaining 6 Trusts across Kent, Surrey and Sussex (Dec 15 – March 16)
What is the SE Maternity Dashboard?

- The SE dashboard includes a range of metrics that look at process and outcomes.
- The dashboard provides a clear view of the quality and safety within maternity services.
- Providers of maternity care and commissioners of maternity services can use the dashboard as a quality improvement tool.
- For women and their families, this dashboard provides important information on maternity services within Kent, Surrey, and Sussex.
What is the purpose of the dashboard?

• **What it is designed to do?**
  • Support region wide quality improvement
  • Support conversations between commissioners and providers
  • Allow for focused improvement work and spread of best practice

• **What it is not designed to do**
  • Act as a performance management tool
  • Name and shame individual organisations
How did we chose the current metrics?

- Started with a long list and used consensus to refine list as we went along
- 27 metrics in total
- Look at metrics where quality of care can influence outcome
- Where possible link the metrics to those we can process from HES
- Link to the metrics in the national (RCOG) clinical indicators report
- Need to mindful of wider regulator and commissioner views on choice of metrics
How are we displaying the data?

- Use rates where possible
  - % or per 1000 births etc...
- Display as run charts (rolling 12 months)
- Funnel plots
- Balancing measures
- Both HES and local data included in dashboard
Induced labour

1,608 Women were induced at Brighton and Sussex University Hospitals NHS Trust between September 2014 and August 2015.

28 in every 100 women were induced.

15 in every 100 women were induced and gave birth normally.

6 in every 100 women were induced and gave birth after an emergency caesarean section.

6 in every 100 women were induced and gave birth assisted by a forceps or ventouse procedure.
Our Approach

Six Key Principles

• Measurement for improvement, not judgement
• Understanding variation as well as change
• Encourage ownership of data and information at the frontline
• Focus on learning opportunities
• Use what we have where possible and drive the improvement of data quality
• Develop measurement skills
Current Position

- Local data being submitted from 5 pilot sites and (one additional Trust) across Kent, Surrey and Sussex
- Models for coding the data into the metrics to be refined
- Further work needed on definitions following evaluation and stakeholder feedback
- Public and Patient facing front pages to be developed to enable wider access
- Full roll out within remaining 6 Trusts across Kent, Surrey and Sussex (Dec 15 – March 16)
- Next steps…who knows!
Get in touch

- View the dashboard: [http://maternitydashboard.secscn.nhs.uk](http://maternitydashboard.secscn.nhs.uk)
- SCN website: [www.secscn.nhs.uk](http://www.secscn.nhs.uk)
- Email address: [england.secscns@nhs.net](mailto:england.secscns@nhs.net)