

# Improving maternal and neonatal safety

**The Patient Safety Collaborative (PSC) Improving maternal and neonatal safety workstream supports the Maternal and Neonatal Health Safety Collaborative, which contributes to the wider national Maternity Transformation Programme. This is working to improve the safety, outcomes and experience of women and babies using maternal and neonatal care in England.**

The regional patient safety collaboratives provide expertise and support to maternity and neonatal staff, helping to build capacity and capability for improvement and reduce the rate of stillbirths, neonatal deaths and brain injuries occurring during or soon after birth.

**The focus is on:**

- quality improvement support and coaching for teams undertaking improvement projects
- providing expertise and practical support in measurement for improvement
- supporting teams who are carrying out safety culture surveys and debriefing
- hosting and coordinating local learning systems across the country to support system level improvement and the 44 local maternity systems

## PReCePT

**PReCePT, a project developed with support from the West of England AHSN and co-designed with a wide range of stakeholders, including patients and clinicians, contributes to preventing cerebral palsy.**

One per cent of all births are before 30 weeks and 10 per cent of these babies have cerebral palsy. Cerebral palsy affects around 2.5 babies per 1,000 a year in the UK.

PReCePT provides a quality improvement toolkit, information materials and practical tools to support staff and raise awareness of

the importance to the administration of magnesium sulphate to women in premature labour.

Following independent evaluation this project has been accepted for national adoption. In the West of England, since 2014, 300 mothers in 5 trusts have received the treatment, potentially preventing 7 cases of cerebral palsy. NHS England has endorsed PReCePT for national implementation and is recommending its spread across the country. It is estimated that up to 700 babies could benefit from this intervention each year across England.



## Local Learning System

**Wessex PSC hosts the Wessex Maternal and Neonatal Local Learning System (LLS) in collaboration with regional partners. The LLS is a forum bringing together partners, including the local maternity system, maternity and neonatal networks, royal colleges, staff delivering care from across all professions and women and families.**

The LLS includes staff at all levels across organisations and professions across the maternity and neonatal pathway, and has a focus on safety and improvement.

The local learning system enables shared learning and creates an opportunity to tackle system-level improvement on topics such as supporting smoke-free pregnancies and stabilisation and optimisation

of the very pre-term infant. Wessex PSC supports this improvement work with coaching, helping to build capability in quality improvement across maternity and neonatal care.

Each of the 15 patient safety collaboratives are supporting local learning systems in their area.



**“We are delighted to be part of the LLS. It has given us the opportunity to bring clinicians of all professions together to share their achievements and gain support with the more challenging elements of their quality improvement journey. The range of projects being talked about is undoubtedly going to contribute to the safety improvement we are all working towards.”**

### **Suzanne Cunningham**

Director of Midwifery and Lead for Neonatal Services, Southampton, Hampshire, Isle of Wight, Portsmouth and Dorset Local Maternity System and participant in the Wessex Local Learning System