CHAIR'S KEY ISSUES

ESCALATING TO QPS BOARD

East Suffolk and North Essex NHS Foundation Trust

ORIGINATING BOARD / COMMITTEE / TASK & FINISH GROUP AND DATE:	Maternity & Neonatal Improvement Board – 21 May 2026
CHAIR:	Dr Freda Bhatti, Chair of MNIB, NED & Safety Champion
LEAD EXECUTIVE DIRECTOR:	Catherine Morgan, Chief Nurse

Agenda Item	Details of Issue	Approval Escalation Alert Assurance Information
Matters Arising	The May meeting was well attended and quorate. The meeting was the first chaired by Dr Freda Bhatti, emphasising her commitment to supporting improvement in the team.	Information
Assurance Report	**BAPM Standards** The Board note the previously reported risks relating to BAPM Standards and a business case for additional staffing including a phased approach, including total cost implications with risk based informed phasing is being prepared for review in July.	Assurance
	Blood Gas Analyser Reliability The Board recognised the discrepancy between point-of-care and laboratory results for bilirubin/electrolytes and despite there being workarounds are in place, this is being escalated to ELT for support when an SBAR has been completed by the team.	Alert
	Workforce The Board had a detailed discussion on workforce pressures with Colchester identified as highest pressure area. The reported position indicates no direct correlation between staffing levels and incidents. Mitigations are in place and include Escalation processes, staff redeployment and active recruitment (15 midwives joining April–June).	Assurance

	Mental Health Experiences of black African and Asian Women The Board received a presentation on mental health experiences of black African and Asian women, which prompted significant discussion and support. Key issues highlighted in the discussion included: - Cultural stigma and silence were described as major barriers to women accessing mental health support. - Women may avoid disclosing difficulties due to fear of child removal by social services. - Cultural expectations, particularly the concept of the "strong Black woman", were seen to actively suppress help-seeking behaviour. - A lack of culturally sensitive care was identified as undermining trust in services. - Migration-related isolation (loss of family support networks) was noted as increasing vulnerability. The Board supported these findings translating into practical service change with support for community-based "stepping stone" services and enhanced EDI training for staff. Opportunities to align with ICB priorities, community ambassadors, and MNVPs were also recommended by the Board.	Information
	Stillbirths Stillbirth rates were discussed as rates remain above the expected benchmark. There is recognition that local rates are higher than comparator regions and contributing factors identified include BMI, ethnicity and demographic patterns. Further analysis on rates is taking place and regional support has been offered.	Alert
	Service Improvements Good progress was noted across several areas: • Advanced Midwifery Practitioner roles have been embedded which are supporting triage and risk management. • Induction of labour improvements with increased vaginal birth rates and reduced neonatal admissions. • Work is continuing on Triage waiting times (with reported improvements in patient feedback evidenced). • BSOTS compliance is now embedded across both sites. • Training compliance reporting as 'green' with CNST Year 8 compliance progressing.	Assurance

	An overview of the maternity incentive scheme year 8 progress was shared, and a second checkpoint for safety action B was declared to board as per requirement, of 31st July 2026.	Assurance
	A summary of learning and compliance for the quarter 4 Perinatal Mortality Review Tool was provided and the report submitted for board approval.	Assurance
	The NHSR claims scorecard themes and actions were discussed with perinatal and board level safety champions, including actions taken to address recurrent themes.	Assurance

Escalation	Support/decision required by reporting committee to resolve an issue within its remit	**Alert**	Proactive notification of subject matter/risk that reporting committee is currently dealing with or mitigating which may require future action/decision
Assurance	Evidence or information to demonstrate that appropriate action is being taken within a reporting committee's remit	**Information**	No action required. Reporting to update on discussion within a reporting committee's remit