

Using MBRRACE data to change national policy in relation to multiple pregnancies and to target improvements in local practice



The 2015 MBRRACE report findings have been used to highlight the much higher perinatal mortality rate in twin pregnancies with national policy makers. Consequently commissioners and regulators agreed to explicitly include them in their updated frameworks when last raised in parliament. Furthermore, the English maternity review acknowledged the vital importance of, 'Providing appropriate care for women pregnant with more than one baby'.

The UK Government has suggested using MBRRACE data to report back on the progress made with twins separately during their annual review of the ambition to reduce stillbirths. Furthermore, the Department of Health have agreed a £500,000 grant for a three-year Tamba project. The project will see Tamba and project partners, working with targeted maternity units in England to help them fully implement the NICE multiple pregnancy guidance (no.129). The 37 target units have been chosen on the basis of a range of indicators including:

- Stillbirth and neonatal death rates from both MBRRACE and ONS
- Patient safety incidents
- Clinical negligence claims
- Compliance with the guidance drawn from the Tamba / NCT Maternity Services survey published in 2016

Tamba and the NCT recently issued a joint report based on a survey examining mothers of twins, triplets or more experience of care during their pregnancy, and how it aligned with NICE guidance. Results showed 80% of units were still to deliver guidance fully. This follows research that shows a general lack of awareness among clinical teams. Frustratingly, evidence from units which have embedded the guidelines fully, show reductions in stillbirths, lower C-section rates, fewer late term neonatal admissions and shorter hospital stays.

The Tamba project looks to work with strategic clinical networks, CCGs, local politicians, trust boards and staff at maternity units to help them embed the guidance. Some key elements of the project include support with auditing existing services, sharing best practice between units, increasing professional knowledge and skills through conferences and online learning resources. During pilot tests before submitting the grant application, early results suggest the mix of indicators is a good starting point to target improvements.

The perinatal mortality rate for twins and multiples is higher than any other high risk group in the UK

- According to the 2015 MBRRACE report, the perinatal mortality rate for mothers expecting twins was 16.9 in a 1,000. This increased in the latest report to 19 in 1,000. In contrast, the rate for singleton pregnancies dropped to 5.5 in a 1,000.
- Data from the maternity safety thermometer suggests multiples are twice as likely as singletons to face immediate medical concerns at birth.
- NRLS records show that at one hospital trust 64% of all multiple births resulted in patient safety incidents.
- Based on patient feedback and a telephone survey conducted by Tamba, less than 20% of hospital trusts in England follow NICE guidelines for multiple births.

THE RATES OF PERINATAL MORTALITY AND PATIENT HARM ARE HIGHER IN TWINS AND MULTIPLES PREGNANCIES

High rates of mortality and patient safety incidents for multiples are not inevitable - they can be improved

- Published research shows that hospitals that follow NICE guidelines for multiple births record lower rates of mortality and late term neonatal admissions for multiples than hospitals that don't.
- Tamba used the MBRRACE data to persuade the Government to support a new project to improve clinical practice in those units where outcome data suggests there is need for quick improvement.
- Tamba will work with maternity units to help them follow these NICE guidelines to make a difference.

HOSPITALS FOLLOWING NICE GUIDELINES HAVE LOWER RATES OF MORTALITY AND HARM

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www.tamba.org.uk

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TWINS & MULTIPLE BIRTHS ASSOCIATION