

# Maternity Services Data Set (MSDS) Information Update

December 2017



## Reminder about the submission cycle changes

In October, we stressed the importance of access to timely data for decision making, and explained data will soon be released one month earlier by speeding up the submission process.

This means that between 1 January and 28 February 2018 the submission window will be open for both November and December 2017 data. From then on, the window will open on the day after the previous reporting period closed and be open for two months. For more information please view our [submission dates](#).

## Maternity Services July 2017 report

This [report](#) provides the latest overview of the MSDS and includes the quality improvement metric counts developed by the Maternity Transformation Programme. Please view a summary of the [July 2017](#) and also [June 2017 counts](#). These files highlight the counts that are not available because we need providers to help us to improve the coverage of tables and data items.

## Stakeholder events

Thanks to everyone who attended our recent MSDS events in London and Leeds. The events covered the development of MSDS, maternity payments, data coverage and quality (see below) and wider national data architecture work. It was good to meet you and hear your views, and we appreciate the feedback received. The [slides](#) from the day have been shared with attendees.

## Incentivising Trusts who are improving data quality and coverage

At our events, we discussed the assessment of MSDS data quality and coverage that links to [Safer maternity care: progress and next steps](#). Pages 31-2 outline a new incentive scheme that will provide a discount on Clinical Negligence Scheme for Trusts (CNST) maternity premia to incentivise services to improve safety.

Based on your ability to demonstrate that you are meeting the 10 standards (or criteria), you'll be entitled to at least a 10% reduction in your CNST maternity contribution.

One of the standards will assess if you are submitting adequate MSDS data. We are finalising that standard, which will be linked to the work we are doing with you to improve data. The assessment for the scheme is likely to be based on March 2018 data submitted by the end of May 2018. We'll keep you updated about this, but in

the meantime please ensure that you are making a submission each month, and that it contains all the tables MAT401, 404, 406, 408, 409, 501, 502, 508, 602 where they apply to your organisation. Please also ensure that it includes booking appointments in the month and the right number of births.

You may think you are doing all of this, but in some cases the data may not reach us due to the validation rules applied to the data upon landing. We suggest that you review the [reference data tables](#) in our latest publication to see your data, particularly the count of booking appointments and births in the month. For some trusts, some key data items are missing for all or most of the records, and data. We are starting to increase awareness about this and may have been in touch with you already.

### **Tables required for payment pathway analysis**

Please be reminded that our antenatal pathway analysis that we publish monthly requires some tables in addition to the ones requested for the quality improvement metrics. These are MAT 101, 102, 103, 104, 112, 201 and 205.

The postnatal pathway analysis may be repeated in due course and additionally requires tables MAT 305, 307, 309 and 511.

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