Maternity Services Data Set
Information Update

Analyst Workshop Events

We recently held half-day events in Leeds and London for analysts who use or plan to use MSDS data, and would like to thank attendees for their input. Analysts attending the events provided feedback to inform our development of visualisations using MSDS data. Slides from the events are available here. We hope to run more events in the future.

Coverage news

130 providers submitted data relating to January and February 2017. These submissions included at least the 3 core tables (MAT001 Mother’s Demographics, MAT003 GP Practice Registration and MAT101 Booking Appointment Details). We are almost at the stage where all trusts known to deliver maternity services have submitted data at least once.

Please can providers ensure that a submission is made every month in order to maintain and improve upon the reporting coverage we have achieved. This enables data to be used to support and progress key work for the Maternity Transformation Programme. Please note that any missed submissions will be followed up so that we can support you in making submissions in subsequent months and may be escalated to senior management in your organisation. Submission deadlines are listed here.

We thank all providers for their continued efforts to improve coverage and data quality and are happy to discuss any queries.

Recording activity in time for submission window

To ensure a timely reporting schedule, the MSDS analysis is based on activity that is reported in the submission for the month that the activity took place.

For example, the January 2017 reports analyse booking appointments that took place in January 2017 and were included in a January 2017 submission. A booking appointment in November 2016 that was not included in the November 2016 submission but was sent for the first time in the January 2017 submission would not be included in the monthly analysis for November or for January.

It is therefore important to ensure that systems are in place for data to be recorded in a timely manner following the activity so that it is included in the MSDS.
submission for the relevant period.

Table 2 in the Appendix to the Executive Summary shows the number of booking appointments in January 2017 and number of deliveries in January 2017 for each provider submitting to the MSDS for that month. A lower than expected number of booking appointments or deliveries in this table for a provider may indicate that activity in January 2017 was not recorded in time to be included in the provider’s submission.

Next steps on coverage

We asked that providers work towards submitting the MAT404 Labour and Delivery, MAT409 Genital Tract Trauma, MAT501 Fetus Outcome and MAT502 Baby’s Demographic and Birth Details tables by the end of April 2017.

Good progress has been made, for example 84 providers submitted the MAT502 table for October 2016, while 101 providers submitted for January 2017.

Providers already submitting these tables should next target:

- MAT401 Medical Induction Method
- MAT406 Anaesthesia Type in Labour and Delivery
- MAT408 Maternal Critical Incident
- MAT508 Neonatal Care Admission
- MAT602 Mother’s Postpartum Discharge from Maternity Services.

Providers already submitting these tables should next target a number of tables related to the payment pathway:

- MAT102 Complicating Medical Diagnosis at Booking
- MAT103 Previous Complicating Obstetric Diagnosis at Booking
- MAT104 Family History Diagnosis at Booking
- MAT112 Dating Scan Procedure

Efforts made to submit any additional maternity data in accordance with the ISN are welcomed.

Maternity Services Monthly Statistics – January 2017

The latest published data from the MSDS relating to January 2017 is now available here. For this period:

- 130 providers submitted data
- 56,765 women were recorded having an antenatal booking appointment
- 33,661 births were recorded by 101 providers.
Data on Delivery Method by Robson group was published for the first time in an Excel file with this report. (Robson groups are 10 population groups used to classify births based on information relating to women's labour and previous birth history.)

The following additional analysis files for January 2017 are available from our supplementary information page:

- Delivery method by previous births and previous caesarean status for singleton term births
- Antenatal pathway and lead antenatal provider based on MSDS booking appointment information.

Monthly reports relating to December 2016 have also been published since the last edition of the newsletter, and are available here.

The monthly reports for February 2017 will be published on 5 July 2017. Data on smoking at delivery and maternal critical incidents is scheduled to be published for the first time from the MSDS as part of these reports. (The SATOD collection publishes data from CCGs on women smoking at delivery.)

As we develop more complex analysis using the MSDS data such as the Robson groupings and delivery method by previous births, we are identifying data completeness and quality issues that can limit the coverage of the analysis and its usefulness. We will flag these issues to providers in these regular information updates, and also contact providers on an individual basis for specific issues.

**Data quality tips relating to recently published measures**

The following tips may be useful to providers seeking to improve their data quality for measures such as the delivery method by previous births or Robson group analysis published for the first time recently:

- MAT409 Genital Tract Trauma – Where a mother suffers a tear and also undergoes an episiotomy to extend the tear, the data provider should submit two groups, one with the relevant GenitalTractTraumaticLesion value for the type of tear, and one with the GenitalTractTraumaticLesion value for episiotomy.
- MAT401 Medical Induction Method – where there is no medical induction, a MAT401 group should be submitted with LabourInductionMethod = 05 (‘None’). We cannot assume that a missing MAT401 table for a delivery episode means that there was no medical induction.
- MAT404 Labour and Delivery – LabourOnsetPresentation (the presentation of the baby at the onset of labour) is key for the Robson group analysis, as this is needed to identify which Robson group each mother is allocated to.
- MAT101 Booking Appointment Details – several sections of analysis group women by whether they have had previous births or not. It is therefore very important that the fields PreviousLiveBirths, PreviousStillBirths and
Previous Caesarean Sections are as complete as possible and the data in these fields is accurate.

**Data quality notices**

We request that providers making submissions review the data that they are sending to ensure its completeness and quality. Please refer to the monthly data quality notice which you will receive through your SEFT account and the published data quality information available [here](#) to help you plan improvements to completeness and quality.

Data quality metrics for Table MAT301 Maternity Care Plan will be included for the first time in the data quality notices for February 2017 submissions.

We are here to help with all aspects of data submission. If you need any assistance, please contact [enquiries@nhsdigital.nhs.uk](mailto:enquiries@nhsdigital.nhs.uk) including Maternity Services Data Set and your organisation code in the subject line.

**Data Services for Commissioners Regional Offices (DSCRO) MSDS Extract**

DSCROs support the information needs of commissioners and perform their services with staff from commissioning support units (CSUs) who are seconded into NHS Digital and work with data in the regional processing centres.

DSCROs now receive a bespoke extract each month for activity required for their CSUs directly from the BSP. Many CCGs have Data Sharing Agreements with NHS Digital which allows them to receive this data from the DSCRO. This makes the data more widely available to address local information reporting requirements and it is intended to lead to a reduction in separate local data flows.

**MSDS Technical Output Specification (TOS) v1.8.18**

Version 1.8.18 of the TOS was recently published on the [Maternity Services Data Set webpage](#). The main change in this version of the TOS is to the Lower Super Output Area (LSOA) derivation to transition from using 2001 to 2011 census data – see “LOWER SUPER OUTPUT AREA (RESIDENCE) OF MOTHER 2011” in the MAT001 table. Further details can be found within the ‘Change Control’ tab of the TOS. Please note that some of the more recent changes listed in the TOS are yet to be implemented in the live system. We will provide updates on implementation of these changes in future newsletters.

**Contact Us**

If you or others you know wish to be added to the distribution list for future editions of the newsletter, please register via an email to our Enquiries team.
Email (NHS Digital Contact Centre, for general queries):
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Email (Exeter Helpdesk, for Bureau Service portal or other technical issues):
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Useful links

MSDS page: http://content.digital.nhs.uk/maternityandchildren/maternity