

95%

GUIDELINE COMPLIANCE
Up from 60–65%

96%

SAFETY CHECK COMPLIANCE
Up from 71% in 12 months

80%

SEPSIS BUNDLE COMPLIANCE
Up from ~40% in 8 months

85–90%

STAFF ENGAGEMENT
From low baseline at go-live

Outcomes evidenced at 15–16 months post-implementation, Women's & Children's Division, NHS Acute Trust

CQC MATERNITY RATING JOURNEY — NHS Acute Trust

INADEQUATE

Jan 2023



GOOD

Sep 2025

THE CHALLENGE

Rated **Inadequate** by CQC in early 2023, this NHS maternity service faced urgent pressure to improve across governance, safety, and staff engagement. Guidelines were managed across intranet folders and shared drives with inconsistent version control and no audit trail of staff engagement. Safety checks ran on paper and Microsoft Forms — oversight was retrospective by design, with gaps discovered after the fact. Staff engagement with clinical content was low at baseline, with no reliable mechanism to measure it.

IMPLEMENTATION

SOPHIA was deployed as a cloud-based platform accessible on any ward device — no VPN, no IT integration required. Three core workflows were established: a version-controlled searchable guideline library; digital safety check dashboards with live completion tracking; and interactive clinical flowcharts for PPH, sepsis, and shoulder dystocia. QR codes at care points and automated reminders drove adoption across twelve staff groups without a dedicated all-staff training programme.

TRANSFORMING SAFETY CHECK COMPLIANCE

Every daily and weekly safety check across the labour ward, birth centre, and associated clinical areas is now completed digitally via QR codes on ward tablets and mobile phones. A live dashboard shows matrons exactly which checks are complete and which remain outstanding for the current day — enabling same-shift intervention rather than retrospective discovery. This structural shift drove safety check compliance from **71% to 96%** in twelve months.

Over 3,900 SOP and checklist completions are recorded each month, with a consistent daily floor above 80 completions. That baseline confirms safety check discipline has become normalised operational behaviour — not an activity that requires chasing.

CQC READINESS & RATING IMPROVEMENT

Guideline currency, MDT approval logs, staff acknowledgements, and safety check histories are continuously generated by normal platform use and available on demand. The compliance lead described opening the live dashboard with inspectors in the room — replacing days of manual evidence assembly.

Following two years of sustained improvement with SOPHIA embedded across governance and safety workflows, the service was rated **Good by CQC in September 2025** — up from Inadequate in 2023. The report noted improved governance, risk management, and culture across the service.

WHAT THIS DEMONSTRATES

The sepsis bundle improved from 40% to 80% in eight months — demonstrating that interactive decision support at the point of care drives compliance change faster than traditional guideline dissemination, particularly for time-critical emergency pathways.

When compliance is a continuous product of daily clinical operation rather than a project triggered by inspection, the regulatory relationship changes entirely. The journey from Inadequate to **Good in under three years** is the most durable proof of what digital governance transformation can achieve.

PLATFORM USAGE — TYPICAL MONTH

3,989

SOP & checklist completions

1,491

Policy & guideline reads

257

Distinct documents accessed

Usage data shows a consistent daily baseline of over 80 completions with spikes on training days and audit events — confirming SOPHIA is embedded in daily clinical workflow, not accessed episodically. The breadth of 257 distinct documents accessed in a single month reflects a genuine reference library spanning the full clinical scope: hypertensive disorders, induction of labour, fetal growth surveillance, VTE prevention, neonatal care, and beyond.

GUIDELINE ENGAGEMENT AT SCALE

Over 1,400 policy and guideline reads per month across more than 250 distinct documents. Staff engagement has risen from a low, previously unmeasurable baseline to **85–90%** across twelve staff groups — in a clinical environment where desk time is scarce. The version-controlled library, in which only live approved documents are visible, gives staff confidence that what they are reading is current. Guidelines are consulted as live clinical reference at the point of care, not in a training room.

PLATFORM CAPABILITIES

- G Version-controlled Guideline Library**
Searchable, audit-ready. Only current approved documents visible. Full MDT approval workflow captured.
- S Digital Safety Check Dashboards**
QR code completion on any device. Live outstanding-checks dashboard per ward for same-shift matron oversight.
- F Interactive Clinical Flowcharts**
PPH, sepsis, shoulder dystocia — complex protocols as guided step-by-step decision tools for use in live events.
- A AI Gap Analysis — SOPHIA Intelligence**
Documentation analysed against NICE guidelines, CQC requirements, and the maternal care bundle. Scored and prioritised.

FROM THE CLINICAL FRONTLINE

“When the CQC come in, I can pull up the dashboard there and then and show them our compliance data. Before SOPHIA, we'd have spent days pulling that evidence together manually.”

Compliance & Assurance Lead, NHS Acute Trust

“Being able to run the gap analysis against the new maternal care bundle before we have to demonstrate compliance would be transformative.”

Audit & Guideline Lead Midwife, NHS Trust

“Tracking audits alongside guidelines would solve a real problem for us — the bureaucracy and the admin. Nothing about this seems worrying; it addresses exactly the issues we have.”

Senior Clinical Lead, Wessex Maternity Safety Network

Request a demo: transformation@carradalefutures.com

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