

# Board of Directors' Meeting 10 June 2021

Agenda item	139/21			
Report	The Ockenden Report Assurance Committee – Terms of Reference			
Executive Lead	Director of Nursing			
	Link to strategic pillar:		Link to CQC domain:	
	Our patients and community		Safe	$\checkmark$
	Our people	$\checkmark$	Effective	$\checkmark$
	Our service delivery		Caring	$\checkmark$
	Our partners		Responsive	$\checkmark$
	Our governance		Well Led	$\checkmark$
	Report recommendations:		Link to BAF / risk:	
	For assurance		BAF 1, BAF 2, BAF 8	
	For decision / approval		Link to risk registe	er:
	For review / discussion		CRR 16	
	For noting		CRR 18 CRR 19	
	For information		CRR 23	
	For consent		CRR 27 CRR 31	
Presented to:				
<b>Dependent upon</b> (if applicable):				
Executive summary:	As the Board is now aware, the Ockenden Report Assurance Committee has now met on three occasions, with live streaming to the public. Its terms of reference have been discussed in some detail by the Committee members and a final draft is presented herewith for approval by the Board of Directors, under whose delegated authority the Committee operates. Amendments to the document, since last being presented to the Board, are highlighted in the document.			
Appendices	The Board is now asked to approve the terms of reference. <b>Appendix One:</b> Ockenden Report Assurance Committee, Terms of Reference			

The Shrewsbury and Telford Hospital

## OCKENDEN REPORT ASSURANCE COMMITTEE TERMS OF REFERENCE

#### Introduction and Purpose

The Board of Directors has set up the Ockenden Report Assurance Committee, which will be responsible and directly accountable to it.

The principal purpose of the Committee will be to obtain and provide assurance in relation to the delivery, evidence, sustainability and impact of the implementation of the actions arising from the first Ockenden Report (December 2020). It will, therefore, be a time-limited Committee, which will be determined by its programme of work as agreed with the Board of Directors, and which is not expected to extend beyond twelve months.

In establishing this Committee, the Board of Directors is also mindful of the "call to action" signaled in the Ockenden Report that there must be an end to investigations, reviews and reports that do not lead to meaningful change (paragraph 1.13)<sup>1</sup>. It is clear, therefore, that in order to rise to this necessary challenge, the approach to the work of this Committee must be different and which is reflected in its membership and duties set out below.

#### Membership

Members of the Committee will be:

Role		
Chair of SaTH		
Co-Chair - External		
Non-Executive Director - SaTH		
Non-Executive Director - SaTH		
Chief Executive - SaTH		
Director of Nursing - SaTH		
Medical Director - SaTH		
Chief Operating Officer - SaTH		
CCG Representative and Local Maternity and Neonatal system		
Maternity Voices Partnership Representatives (MVP)		
Healthwatch Representatives		

Attendees of the Committee will comprise:

RoleDivisional Medical Director- Women and Children's Care Group – SaTHDivisional Director of Operations – Women and Children's Care Group – SaTHDirector of Midwifery – Women and Children's Care Group – SaTHClinical Director – Obstetrics – SaTHProgramme Director – Maternity AssuranceSenior Project Manager, Maternity Transformation ProgrammeIndependent Governance Consultant

<sup>&</sup>lt;sup>1</sup> www.gov.uk/official-documents. (2010) Ockenden Report – Emerging Findings and Recommendations from the Independent Review of Maternity Services at Shrewsbury and Telford NHS Trust; Our first Report following 250 Clinical Reviews. [Ockenden Assurance Committee TORs – - April 2021

# Chairman, Lodestone – External Communications support Sherwood Forrest Representative Maternity Transformation Workstream Leads Any other member of Trust staff as required to support the Committee in its deliberations Principal Duties

- To thoroughly review and understand the progress and completion of the implementation of all of the actions arising from the first Ockenden Report (December 2020), namely fifty-two actions comprising twenty-seven Local Actions for Learning (LAFL) and seven 'themed' Immediate and Essential Actions (IEAs) which in turn comprise 25 specific sub actions.
- To provide the assurance and accompanying evidence to the Board of Directors, the public, service users (women and families) commissioners and regulators relating to the delivery, sustainability and embeddedness of each of the fifty-two actions arising from the first Ockenden Report.
- To enable delivery of its key principal duties, the Committee will develop, and subsequently agree with the Board of Directors, a detailed work programme, which will include a clear timeline for the completion of its work.
- To ensure that the work of the Committee through its membership is thoroughly informed by the involvement of relevant stakeholders and groups representing service users (women and families)
- To work in a way that recognises the organisational impact of this critical work and which is supportive to Executive Directors directly responsible for the implementation of the Ockenden Report actions and, in equal measure, challenging.
- To ensure that any risks to delivery are identified, understood, and are being appropriately managed and mitigated where possible, and to report to the Board of Directors, by exception, any significant risks to delivery.
- To ensure that the work of the Committee is described and presented in a way that is concise, meaningful, and respectful of women and families.
- To commission any further work, as necessary, to ensure delivery of the Committee's work programme.
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# Quoracy

• Quoracy of the meetings shall be by simple majority of the Committee's members.

# Frequency of meetings

• Meetings of the Committee shall be held in accordance with the requirements of the work programme and at least monthly in order to complete its work in a timely manner.

# Reporting

• The Committee shall report monthly to the Board of Directors in the form of a comprehensive

report provided by the Committee Chair.

- The Board of Directors will also set aside sufficient time at its Board meetings to enable the work of the Committee to be appropriately considered in keeping with the critical importance of this matter. This may take the form of dedicated Board sessions from time to time dealing with the key themes of the Ockenden Report and forming the work programme of the Committee.
- In this way, the work of the Committee will be made available in the public domain. In addition, it will also be open to the Committee and Board of Directors to develop and ensure regular communication and updates on the progress in implementing the Ockenden Report actions.

## Relationship to the role of the Independent External Expert Advisory Panel - Maternity

The External Expert Advisory Panel was established by the Board of Directors in July 2020 to provide external expert advice and scrutiny, together with effective and evidenced assurance of the outputs from the Maternity Improvement Programme and related to the range of actions required and identified from the first Ockenden Report (December 2020).

Through the assurance from the Ockenden Report Assurance Committee to the Board of Directors, it is the intention that the External Expert Advisory Panel provide appropriate additional scrutiny and examination of the work of the Ockenden Report Assurance Committee for the benefit of the Board of Directors.

An **External Expert Advisory Panel – Maternity** has been convened by the Board of Directors to provide expert oversight relating to the Trust's implementation of the recommended actions from the first Ockenden Report (December 2020).

The principal purpose of the External Expert Advisory Panel is to provide independent expert oversight and advice, and in doing so act as a "critical friend" for the benefit of the Trust Board, in relation to the Trust's implementation of the recommended actions contained in the first Ockenden Report.

The External Expert Advisory Panel will act in a way that is complementary to (and supportive of) the Trust's internal assurance and accountability mechanisms which have been established to ensure the implementation of the recommended actions contained in the first Ockenden Report. In this regard, the Trust Board remains ultimately accountable for the implementation of the recommended Report and for ensuring that they are embedded in the organisation.

By providing independent expert oversight and advice in relation to the Trust's implementation of the recommended actions contained in the first Ockenden Report, the Panel will support the Trust Board in enabling it to discharge its responsibility for the provision of Maternity Services that are safe, effective, caring, responsive and well-led on behalf of the women and families of Shropshire, Powys, Telford and Wrekin. The Panel will, therefore, provide a level of additional oversight for the benefit of the Board of Directors.

#### Secretariat

The Committee will be supported by an appropriately skilled and resourced secretariat.

#### Review

In the event that material amendments need to be made to the terms of reference during the life of the committee, approval of the Board of Directors will be sought.			
Approved by Committee:	April 2021		
To be reviewed:	April 2022		

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