

## Board of Directors' Meeting 10 March 2022

<b>Agenda item</b>	043/22		
<b>Report</b>	Ockenden Report Assurance Committee 15 <sup>th</sup> February 2022 – Co-Chairs' Summary Highlight Report		
<b>Executive Lead</b>	Director of Governance & Communications		
	<b>Link to strategic pillar:</b>		<b>Link to CQC domain:</b>
	Our patients and community	√	Safe
	Our people	√	Effective
	Our service delivery	√	Caring
	Our partners	√	Responsive
	Our governance	√	Well Led
	<b>Report recommendations:</b>		<b>Link to BAF / risk:</b>
	For assurance	√	BAF 1, BAF 4
	For decision / approval		<b>Link to risk register:</b> 970, 1083, 1930, 2027, 2065
	For review / discussion		
	For noting		
	For information		
For consent			
<b>Presented to:</b>	N/A		
<b>Dependent upon</b> (if applicable):	N/A		
<b>Executive summary:</b>	<p>1. The ninth meeting of the Ockenden Report Assurance Committee was held on 15<sup>th</sup> February 2022 and was livestreamed in public. This brief report provides a summary of key points/issues that the Co-Chairs wish to draw to the attention of the Board of Directors.</p> <p>2. <b>Recommendation</b></p> <p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> <li>Note the contents of the report</li> </ul>		
<b>Appendices</b>	None.		

## **Ockenden Report Assurance Committee**

**15<sup>th</sup> February 2022**

### **Co-Chairs' Summary Highlight Report**

1. The ninth meeting of the Ockenden Report Assurance Committee was held on 15<sup>th</sup> February 2022 and was live streamed in public. This brief report provides a summary of the key themes discussed and highlights any particular matters which the Co-Chairs feel should be drawn to the attention of the Board of Directors.
2. Again, on this occasion, Ms Jane Garvey chaired the meeting. The Committee received presentations and updates on progress relating to the implementation of the Ockenden Report Action Plan, the work that is underway relating to improving organisational culture, and the improvements that have been made to the quality governance and assurance arrangements within the Trust's maternity services.
3. At the outset of the meeting the Committee also heard from Ms Flavell about the results of the CQC 2021 Maternity Services Survey. She explained that the national survey included 122 NHS Trusts with responses from more than 23,000 women with an adjusted response rate of 52%. The sample for the survey was drawn from women who gave birth in February 2021 during the third national Covid-19 lockdown. The survey asked women about their experiences of care at three different stages of their care – antenatal, labour and birth, and postnatal care. Ms Flavell explained that the survey report assessed the variation in trust results for questions on labour and birth, and care on the ward after birth, as women can receive antenatal and postnatal care from different providers. In the analysis (<http://www.cqc.org.uk/maternitysuryey>) trusts were identified where women's experiences were better, or worse, than expected when the results for the survey were compared across trusts. Ms Flavell went on to explain that each trust has been categorised into one of five bands – 'much worse than expected,' 'worse than expected,' 'about the same,' 'better than expected' or 'much better than expected.' Pleasingly, Ms Flavell reported that the Trust's results placed it in the category of 'better than expected' together with six other trusts. No trusts were identified as 'much better than expected.'

#### **4. Ockenden Report Action Plan – Summary Update**

The Committee received a high-level summary of current progress regarding implementation of the Ockenden Report recommendations/actions. Ms Flavell explained that to date 43 (83% overall) of the actions have been implemented, comprising 27 actions (52%) evidenced and assured and 16 (31%) delivered but not yet evidenced. She explained that nine actions (17%) are not yet delivered. Of these nine actions, as we heard at the meeting in February LAFL (Local Action for Learning) 4.90, relating to the need to ensure that senior anaesthetic staff participate in maternity services incident investigations, remains to be delivered with plans to do so. Whilst the other eight outstanding actions are dependent on

continuing to secure progress with external partners, it is nevertheless important that the Trust ensures that each of these outstanding actions is delivered. The Committee heard about the current state of progress and plans to deliver these outstanding actions.

Whilst the Trust Board has continued to be updated through regular monthly Ockenden Report Action Plan updates, the intention is that the meeting of the Committee in March will take the opportunity to review the action plan in detail and explore the embedded improvements to maternity services that have occurred. Such an approach seems timely and appropriate given that it is expected that the final Ockenden Report is due for publication at the end of March and by that time this Committee will have existed for twelve months.

## **5. Improving Organisational Culture**

The Committee heard from Ms. Rhia Boyode (Director of People & OD), Ms. Vicki Robinson (Interim People & OD Business Partner for Women's and Children's Services) and Ms. Claire Eagleton (Interim Matron for Acute Inpatient Services & Maternity Outpatients) regarding the range of work and initiatives that are being undertaken at corporate and directorate level to engage with staff and improve the organisational culture.

Ms. Boyode explained the work that the Trust had been undertaking with NHSEI and Kings College London regarding a structured approach connected to the Trust's and National priorities – Trust Culture Dashboard & NHS seven people promise initiatives. The Maternity Services team explained the work that was being undertaken to continue to celebrate success, the good progress with “stay conversations”, and the positive uptake and engagement with the new “Improvewell” app.

## **6. Maternity Services – Quality Governance and Assurance arrangements**

The Committee was reminded that the Ockenden Report had specifically drawn attention to the need for the Trust to improve its quality governance arrangements – *“for the governance documentation considered so far for this report the review team have found inconsistent governance processes for the reporting, investigation, learning and implementation of maternity-wide changes.”* It was explained that 22 (made up of 15 Local Actions for Learning, and 7 Immediate and Essential Actions) of the actions in the Ockenden Report focus on quality governance and of these twelve have been delivered and assured, seven have been delivered but not yet evidenced, and three have not yet been delivered.

The Committee heard specifically about the quality governance Ockenden Actions relating to the Quality Governance Team, incident investigation and learning processes. Improvements in the quality governance structure were reported with specific reference to LAFLs (Local Actions for Learning) 4.59 and 4.60, with both actions delivered but not evidenced. It was also explained that IEAs (Immediate and Essential Actions) 1.2 and 1.6 relating to the requirement for external clinical

opinions following a neonatal death, neonatal brain injury and maternal death, and the requirement for maternity serious incidents to be reported to the Trust Board respectively, had been delivered and evidenced. IEA 1.1 requiring structured reporting mechanisms remains outstanding and requires the development of a standard operating procedure to demonstrate how it will report both internally and externally through the LMNS (Local Maternity and Neonatal System).

## **7. Future Meetings**

The next meeting of the Committee is scheduled for 15<sup>th</sup> March 2022, commencing at 2.30PM. As explained above, it is the intention to spend time undertaking a “deep dive” into the Ockenden Report Action Plan in order to consolidate the Committee’s understanding of the state of progress, ahead of the publication of the final Ockenden Report at the end of March. We wish to hear from our external stakeholders about their views of what they have heard about the Trust’s work and progress in implementing and embedding the Ockenden Report actions over the last twelve months. We also wish to take the opportunity to reflect on how the Committee has operated since it was set up a year ago and any lessons for improvement.

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**Dr Catriona McMahon & Ms Jane Garvey**  
**Co-Chairs, Ockenden Report Assurance Committee**  
**1<sup>st</sup> March 2022.**