The Shrewsbury and Telford Hospital NHS Trust

Board of Directors' Meeting
14 April 2022

Agenda item	060/22			
Report	Ockenden Report Assurance Committee 15th March 2022 – Co-Chairs' Summary Highlight Report			
Executive Lead	Director of Governance & Communications			
	Link to strategic pillar:		**Link to CQC domain:**	
	Our patients and community	√	Safe	
	Our people	√	Effective	
	Our service delivery	√	Caring	
	Our partners	√	Responsive	
	Our governance	√	Well Led	√
	Report recommendations:		**Link to BAF / risk:**	
	For assurance	√	BAF 1, BAF 4	
	For decision / approval		**Link to risk register:**	
	For review / discussion		970, 1083, 1930, 2027, 2065	
	For noting			
	For information			
	For consent			
Presented to:	N/A			
Dependent upon (if applicable)**:**	N/A			
Executive summary:	1. The tenth meeting of the Ockenden Report Assurance Committee was held on 15th March 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. 2. **Recommendation** The Board of Directors is asked to: • Note the contents of the report			
Appendices	None.			

Ockenden Report Assurance Committee

15th March 2022

Co-Chairs' Summary Highlight Report

1. The tenth meeting of the Ockenden Report Assurance Committee was held on 15th March 2022, a year since the first meeting of the Committee, 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 viewed the Ockenden Report Action Plan to consolidate its understanding of the state of progress, ahead of the publication of the final Ockenden Report at the end of March. It also considered a series of questions that had been raised by key stakeholders, notably in this case by Dr Anthea Wilson of Powys Community Health Council. The Committee was especially grateful to Dr Wilson for taking the time to raise her thoughtful questions in response to the request at the last Committee meeting for stakeholders to express their views and ask questions relating to what they have heard about the Trust's work and progress in implementing and embedding the Ockenden Report actions over the last twelve months. As this was the last meeting of the Committee before the publication of the final Ockenden Report, following an invitation a majority of the Trust Board members also attended the meeting to hear of progress in relation to implementation of the first Ockenden Report.

3. **Responses to Questions from Stakeholders**

   The Women's and Children's Divisional Team responded in detail to the questions that had been raised by stakeholders, as follows:

   - Question 1 - How confident are you (Trust and maternity representatives) that the improvements made as a result of the (first) Ockenden report can be maintained? After all, failings in care occur repeatedly throughout the NHS and it can seem as though lessons learned are readily forgotten.

     In response in his presentation by way of response, Mr Martyn Underwood (Women's & Children's Divisional Medical Director) referenced a number of initiatives and tools, including externally validated feedback and peer review, the services performance based on maternity and neonatal services dashboards, the continuous improvement approach that was being taken and which is being underpinned by an approach that requires the implementation of all actions to be evidenced as embedded before they can be closed (i.e. the use of a reverse RAG (Red, Amber, Green) rating system). Mr Underwood confirmed that he felt confident that the

improvements made to date can be maintained and would continue to be improved upon.

- Question 2 - Is there any further cultural change required to enable service users to become equal partners in care?

  Mrs Annemarie Lawrence (Director of Midwifery) emphasised the critically important role of organisational culture and in enumerating several of the initiatives that had been taken and measures in place, she was keen to stress that changing and improving an organisation's culture is an on-going process that is significantly influenced by the style and approach of its leadership. In this regard, Mrs Lawrence pointed to some of the key new leadership appointments within Maternity Services.

- Question 3 - To an extent, risk is subject to individual interpretation. How have the measures implemented as a result of the Ockenden Report helped to bring a team approach to the interpretation of risk, and have any additional necessary measures been identified during the improvement process?

  In response, Mr Tom Baker (Deputy Director of Operations, Women's & Children's Division) explained the arrangements in place to avoid individual interpretation of risk and the team approach that is adopted. For example, he referenced the weekly neonatal and obstetric incident review meetings that are attended by an expert midwifery advisor to bring an external perspective. In addition, all significant incidents are reviewed weekly in a multidisciplinary team meeting chaired by the Director of Nursing.

- Question 4 - To what extent do the risk assessments carried out at each appointment contribute to the 'whole picture'? Do the information systems allow clinicians to easily view past assessments and take them into account?

  Dr Mei-See Hon (Clinical Director for Obstetrics) explained the arrangements that are in place to ensure that all women undergo a clinical assessment of their care, including the requirements of the electronic notes system, Badgernet, which requires clinicians to confirm identified risks and conduct a risk assessment including the place of birth at each antenatal clinic appointment and on admission to hospital.

- Question 5 – Does the emphasis on training and working together go far enough to support truly collaborative team working? Have you identified further needs or measures that would help?

  Mr Underwood explained the extensive multidisciplinary team working and training arrangements that are in place, and which the Committee has heard about and sought assurance about in several of its meetings. Mr Underwood was also able to share with the Committee the very positive feedback that had been given about the work of the Trust's Maternity Services at the recent regional safety oversight and assurance group meeting.

Responding to the answers, Dr Wilson expressed her appreciation and acknowledged the work and progress that she had witnessed as a Committee member in the last twelve months whilst acknowledging that there would always be more to done.

4. **Ockenden Report Action Plan Progress**

Mr Underwood explained that of the 52 actions (Local Actions for Learning for the Trust and Immediate and Essential Actions for all Trusts), 45 (86%) of the actions had been implemented accounted for by 35 (67%) that had been 'evidenced and assured' and 10 (19%) that had been delivered and not yet evidenced. Only seven (14%) actions are 'not yet delivered' of which six are IEAs and one LAFL, with all 'on track' but reliant for final delivery upon external dependencies. Two of the outstanding actions relate to the requirement for the Trust to be part of a single Local Maternity and Neonatal System, two relate to the development of regional maternal medicine specialist centres, two relate to the introduction of independent maternity advocates to be funded and managed nationally, and one requires implementation by the CQC.

The Committee heard from Dr Hon and Cowley, and Mrs Lawrence regarding the service improvements that had been made in relation to each of the seven main LAFL themes.

As Co-Chair, I wished to acknowledge the tremendous amount of work that the Maternity Services team, supported by others within the Trust, has undertaken and the very positive progress and beneficial service improvements that have been made. Although there would always be more to do, the commitment, energy and dedication of Maternity Services team has been exemplary. Other members of the Trust Board joined with me in expressing this sentiment.

5. **Conclusion and Future Meetings**

During the meeting we heard that the publication date for the final Ockenden Report was scheduled for 30th March 2022. The Committee heard about the general mood of staff and the arrangements that the Trust was putting in place to support staff leading up to and following publication of the report.

Following publication of the final Ockenden Report it would be necessary for the Trust to consider its contents in detail and its response. The Trust would also wish to consider any recommendations and develop its response and actions to them. Consequently, it was agreed that the Committee would not meet in April and May in order that the final Ockenden Report could to be thoroughly considered and a response and actions developed by the Trust. Once this had been undertaken, the Committee would be re-convened in June in order to consider how it will continue to support the Trust and provide assurance in relation to any recommended actions which emerge from the final Ockenden Report.

In response to a concern raised by Ms Garvey, Dr McMahon assured the Committee that reports would continue to be received by the Board of Directors of SaTH (meeting in public) during this period, and that progress would therefore continue to be tracked and assured during April and May.

Dr Catriona McMahon & Ms Jane Garvey
Co-Chairs, Ockenden Report Assurance Committee
22nd March 2022.