

## Board of Directors' Meeting 11 August 2022

Agenda item	154/22				
Report	Ockenden Report Assurance Committee 19 July 2022 – Co- Chairs' Summary Highlight Report				
Executive Lead	Director of Governance & Communications				
Report Author	Catriona McMahon, Trust Chair				
	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	$\checkmark$	
	Report recommendations:		Link to BAF / risk:		
	For assurance		BAF 1, BAF 4		
	For decision / approval		Link to risk register:		
	For review / discussion			027,	
	For noting 2065				
	For information				
	For consent				
Presented to:	N/A				
<b>Dependent upon</b> (if applicable):	N/A				
Executive summary:	<ol> <li>The twelfth meeting of the Ockenden Report Assurance Committee was held on 19th July 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.</li> <li>Recommendation         <ul> <li>The Board of Directors is asked to:</li> <li>Note the contents of the report</li> </ul> </li> </ol>				
Appendices	None.				

### **Ockenden Report Assurance Committee**

#### 19<sup>th</sup> July 2022

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

- 1. The twelfth meeting of the Ockenden Report Assurance Committee was held on 19<sup>th</sup> July 2022 and was live streamed in public.
- 2. 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.
- 3. Again, on this occasion, Ms Jane Garvey chaired the meeting. The Committee heard from the Director of Midwifery in relation to progress regarding implementation of the interim/first Ockenden Report and progress in reviewing and progressing actions in relation to the final Ockenden Report. As part of the Committee's wish to understand better the impact that service changes, arising from the Ockenden Report actions, are having for the benefit of service users, the Committee also received a thoughtful and positive presentation from the Deputy Director of Midwifery.

# 4. Progress Update in implementing the actions from the First and Final Ockenden Reports

Ms Annemarie Lawrence, Director of Midwifery, gave an update on progress in implementing the actions from the first and final Ockenden Reports.

For the first Ockenden Report the considerable progress that has been made was reported (remaining in line with what we heard at the June meeting), with the outstanding actions dependent on external parties for completion. For ease, progress can be summarised as follows:

- 46/52 Actions have been implemented (88.5%), comprising 42 actions evidenced and assured and 46 actions delivered but not yet evidenced
- 6 actions (11.5%) have not yet been delivered, and of these 5 are 'on track' to be delivered and 1 is 'off track'.

The 'off track' action relates to the LMNS (Local Maternity and Neonatal System) and the need to operate in a multi-unit/maternity service LMNS. This has been an outstanding action for some time and it is important that it is resolved at a system level as soon as possible. We heard in the meeting about the progress of the arrangements that are being put in to place and that LMNS colleagues would be providing an update at the August meeting of the Maternity Transformation

Assurance Committee. The Ockenden Report Assurance Committee will continue to pursue this matter.

In relation to the final Ockenden Report, Ms Lawrence reported that 34 actions (21%) of actions had been implemented, with 29 actions (18%) are green, i.e., 'evidenced and assured' and 5 actions (3%) amber, i.e., 'delivered not yet evidenced'. We heard that the team is working to deliver the actions at pace but commensurate with the need to be thorough and ensuring that the actions are truly embedded. As reported last time, with this in mind the 'confirm and challenge' session has now taken place between the Divisional team and Executive Directors to ensure that appropriate and realistic timeframes have been set for the delivery of all actions.

#### 5. Bereavement Care – Service Users Feedback

In line with the Committee's wish to better understand the impact of service improvements for service users resulting from implementation of the Ockenden actions, we heard from Ms Claire Eagleton (Deputy Director of Midwifery) about improvements in bereavement care and positive user feedback.

Ms Eagleton reminded the meeting that the Ockenden Reports set out a number of actions in relation to be eavement care and confirmed that 5 of the 6 actions had been completed. She shared with us the arrangements that were in place to support be reaved families and the improvements that had been made. In particular, she shared with the meeting some moving patient stories and the positive feedback that the service had received.

Finally, Ms Eagleton explained that the next steps and work underway related to the implementation of the recommendations of the Sands (Stillbirth and neonatal death charity) review undertaken at the end of 2021.

#### 6. Next Meeting

The next meeting is scheduled for Tuesday 23<sup>rd</sup> August 2022, 2.30 – 4.30PM.

The standing invitation for Trust Board members (who are not standing members of the Committee) to join the meeting remains.

Dr Catriona McMahon Co-Chair, Ockenden Report Assurance Committee 28<sup>th</sup> July 2022.