

Board of Directors' Meeting 10 November 2022

Agenda item	210/22			
Report	Ockenden Report Assurance Committee (ORAC) 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:	<p>1. The fourteenth meeting of the Ockenden Report Assurance Committee was held on 18 October 2022 and was livestreamed in public. The meeting scheduled for September had been cancelled due to its proximity to Her Majesty's, Queen Elizabeth II's, State Funeral and the period of national mourning. 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. Recommendation</p> <p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> Note the contents of the report 			
Appendices	None.			

Ockenden Report Assurance Committee

18 October 2022

Co-Chairs' Summary Highlight Report

1. The fourteenth meeting of the Ockenden Report Assurance Committee was held on 18 October 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. As explained at the last meeting, Ms Jane Garvey had relinquished her role as Co-Chair of the Committee due to other pressing commitments and I was pleased to confirm that Ms Maxine Mawhinney had kindly agreed to take on the role of Co-Chair. Brief biographical details were provided for Maxine Mawhinney who again is a journalist, news presenter, with similar professional curiosity that I am sure will support the Committee's discussions. Unfortunately, on this occasion due to her ill-health Maxine Mawhinney was unable to join the meeting as intended, but we look forward to welcoming her to the meeting in November.
4. Following our agreed approach to review progress of the implementation of the Ockenden Reports actions and to focus on a service improvement area arising out of the report actions, we heard from Mr Martyn Underwood (Medical Director, W&C Division) and Ms Annemarie Lawrence, Director of Midwifery, on progress in implementing actions from the first and final Ockenden Reports respectively, and from Dr Mei-See Hon (Clinical Director for Obstetrics, Women's and Children's Division) and Ms. Claire Eagleton – Deputy Director of Midwifery on risk assessment throughout pregnancy – focusing on antenatal contacts and support.
5. **Progress Update in implementing the actions from the First Ockenden Report**

Mr Underwood explained that 44/52 actions had been delivered and that audits were being carried out to ensure that the actions remain green and that the evidence was being updated to ensure that that it remained up to date. Of the eight actions not 'not yet delivered', two were internal actions that on review have moved back from amber to red. LAFL 4.89 (Local Action for Learning) had moved back to red due to the quality improvement lead doctor (anaesthetics) no longer being in this post (the action relates to the need for a quality improvement methodology to be used in obstetric anaesthetic services to audit and improve clinical performance). The second relates to LAFL 4.73 and IEA (Immediate and Essential Actions) relating to the establishment of regional Maternal Medicine Centres and that whilst this officially went live in April, the service was auditing referrals through to the service before the action can be confirmed as delivered. The fact that both of these actions have been given a reduced delivery status following review tends to support the rigour of the process that had been adopted. The other six outstanding actions

relate to the actions that are dependent on wider system actions with which the Committee is familiar and upon which an update was provided by the director of Nursing and NHSE Maternity Improvement Support.

Mr Underwood advised the Committee of the recent NHSE Insights visit that had reviewed seven IEAs with the positive feedback and a compliance score of 89%. Finally, he confirmed that there had also been positive feedback from an internal audit undertaken by MIAA with positive feedback on the day and their report due in November.

6. Progress Update in implementing the actions from the Final Ockenden Report

Ms Annemarie Lawrence gave an update on implementing the actions from the final Ockenden Report. She explained that 64/158 (41%) of the actions have been 'delivered' with 50 (32%) of these 'evidenced and assured'. In terms of a discussion on progress of delivery, the Committee was reminded of the approach which the service was taking and was based on a prioritisation exercise to determine the order and timescale in which the actions were to be delivered, with patient safety factored in as a critical component influencing early prioritisation. Based on this approach and timetable, Ms Lawrence felt that work to deliver the actions was on balance on track, although recognisably with still much more to do and with work continuing at pace to deliver.

Ms Lawrence also referenced the positive feedback about the work of the service following the Ockenden assurance visit that had been described at the Regional Perinatal Quality Committee.

7. Risk assessment throughout pregnancy – focusing on antenatal contacts and support

Dr Mei-See Hon and Ms Claire Eagleton gave a detailed presentation on the management and assessment of risk throughout pregnancy. Dr Hon reminded the Committee of the significant emphasis that the first Ockenden report had placed on the need for a thorough risk assessment throughout the antenatal period (LAFL 4.54, IEAs 5.1 & 5.2). The issues before the service went on an improvement journey were explained and included service users being unaware of their risk classification, absence of discussion about place of birth at each appointment, non-standardised approach to risk assessment within the care plan, etc.

Ms Eagleton described the service improvements that had been made, which, in some cases, had been implemented prior to publication of the first Ockenden report. Service improvements have included risk assessments completed at every antenatal appointment and included as a mandatory field within the Badgernet system, service users informed of their risk status throughout pregnancy and able to make informed choices, etc.

The Committee also heard (via a video clip) about the impact the improvements had made to a service user's experience.

Whilst each of the actions described in the first Ockenden report have been completed the plan is to make further improvements still.

8. Discussion and Reflection

As part of our concluding discussion, we normally reflect on the meeting and a few themes emerged that are worth sharing, as follows:

- We heard about the role of the Maternity Transformation Assurance Committee in rigorously reviewing the evidence and delivery status of each of the actions and at this meeting it had been encouraging to learn of the downgrading of two actions as part of that rigorous process;
- We heard about the imminent publication of the East Kent Report (which as a Committee we will wish to consider) from the NHSE Maternity Improvement Lead. He also shared encouraging remarks about the journey that the service has been on and the progress that he felt had been made since he joined the Trust over eighteen months ago;
- Reflecting on the comments made by the Director of Midwifery regarding progress in implementing the actions and stakeholder positive feedback, the Chair of the Trust's Audit Committee wished this positive confirmation of good progress to be drawn to the attention of the Trust Board but without any sense of complacency as to what still needed to be progressed.

9. Date and Time of Next meeting

The next meeting is Tuesday 22 November 2022 at 2.30pm (live streamed)

Dr Catriona McMahon
Co-Chair, Ockenden Report Assurance Committee
3 November 2022.