The Shrewsbury and Telford Hospital NHS Trust

Board of Directors' Meeting
8 December 2022

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<tr><td>Executive summary:</td><td colspan="4">1. The fifteenth meeting of the Ockenden Report Assurance Committee was held on 22 November 2022 and was livestreamed in public. This brief report provides a summary of key points/issues that were discussed at the meeting and highlights any matters the Co-Chairs wish to draw specifically to the attention of the Board of Directors; there being none on this occasion.

2. Recommendation

The Board of Directors is asked to:

• Note the contents of the report</td></tr>
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Ockenden Report Assurance Committee

22 November 2022

Co-Chairs' Summary Highlight Report

1. The fifteenth meeting of the Ockenden Report Assurance Committee was held on 22 November 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. Ms. Maxine Mawhinney chaired the Committee on this occasion for the first time. Earlier in the day Ms Mawhinney had visited the Maternity Unit and had met key members of the staff and leadership team.

4. Following the publication in October of the report of the independent investigation into maternity and neonatal services at East Kent Hospitals University NHS Foundation Trust, chaired by Dr Bill Kirkup CBE, we had taken the opportunity to invite colleagues from East Kent to observe the work of the Committee and the meeting was joined by the Trust's Chair, Chief Nurse and Project Lead for Maternity Services.

5. It seemed appropriate, therefore, to start with a brief presentation from Ms Hayley Flavell (Executive Director of Nursing) regarding the East Kent Report. Ms Flavell explained that whilst there are many similarities and themes to the findings in the Ockenden Reports, the East Kent set out a more limited number of five recommendations, mostly to be led nationally, as follows:

    - Theme: Monitoring safe performance – finding signals among noise – recommending "The prompt establishment of a Task Force with appropriate membership to drive the introduction of valid maternity and neonatal outcome measures capable of differentiating signals among noise to display significant trends and outliers, for mandatory national use".
    - Theme: Standards of clinical behaviour – technical care is not enough – recommending that "Those responsible for undergraduate, postgraduate and continuing clinical education be commissioned to report on how compassionate care can best be embedded into practice and sustained throughout lifelong learning; and, Relevant bodies, including the Royal Colleges, professional regulators, and employers, be commissioned to report on how the oversight and direction of clinicians can be improved, with nationally agreed standards of professional behaviour and appropriate sanctions for non-compliance."
    - Theme: Flawed team working – pulling in different directions – recommending that "Relevant bodies, including the Royal College of Obstetricians and Gynaecologists, the Royal College of Midwives and the

Royal College of Paediatrics and Child Health, be charged with reporting on how teamworking in maternity and neonatal care can be improved, with particular reference to establishing common purpose, objectives, and training from the outset; and, Relevant bodies, including Health Education England, Royal Colleges, and employers, be commissioned to report on the employment and training of junior doctors to improve support, teamworking and development."

- Theme: Organisational behaviour – looking good while doing badly – recommending that "The Government reconsider bringing forward a bill placing a duty on public bodies not to deny, deflect and conceal information from families and other bodies. Trusts be required to review their approach to reputation management and ensure there is proper representation of maternity care on their boards. NHSE reconsider its approach to poorly performing trusts, with particular reference to leadership."
- Theme: Action for the Trust – recommending that "The Trust accept the reality of these findings; acknowledge in full the unnecessary harm that has been caused; and embark on a restorative process addressing the problems identified, in partnership with families, publicly and with external input."

In conclusion, Ms Flavell explained that Trusts had been advised by NHSEI not to progress with the actions from the final Ockenden Report and East Kent Report pending the introduction of a national action plan/standardised approach for these. Despite this, Ms Flavell confirmed that the Trust would continue to undertake a gap analysis against the East Kent Report findings and actions and map any additional actions/requirements to the Maternity Transformation Plan apprising the Committee and Trust Board accordingly.

6. 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 Dr Mei-See Hon (Clinical Director for Obstetrics, 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 Mr Guy Calcott (Consultant Obstetrician) and Ms Kim Williams (Deputy Director of Midwifery) on a key theme of staff training and working together.

7. **Progress Update in implementing the actions from the First Ockenden Report**

   Dr Hon explained that 46/52 actions had now been delivered (representing an improvement on last month's delivery status of 44/52) and that audits are being carried out to ensure that the actions remain green with refreshed evidence to keep it up to date. Of the six actions 'not yet delivered', one is 'on track' and progressing (LAFL 4.100), one is 'at risk' (LAFL 4.89 - relating to the anaesthetics action and requirement for a quality improvement lead, previously explained to the Committee), and four are described as 'off track' being the actions previously described as outwith the Trust's control (IEAs 1.4, 2.1, 2.2, 2.4). In relation to the latter actions, Dr Hon explained that system partners have confirmed that work is underway on all of them.

8. **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 77/158 have now been 'delivered' (49%, compared with 64/158 or 41% last month) and of the 51% 'not yet delivered', over half are underway. Ms Lawrence provided an update on movements in the delivery status of actions approved at the recent meeting of the Maternity Transformation Assurance Committee. She noted that whilst the Trust had received much positive external stakeholder feedback, there remained much still to do with work continuing at pace.

9. **Staff training and working together – Focus on multidisciplinary training and demonstration of how this translates to the care provided in the delivery suite**

   Mr Guy Calcott and Ms Kim Williams gave a detailed presentation on staff training and working together. Mr Calcott reminded the Committee of the significant emphasis that the first and final Ockenden reports had placed on the need for multidisciplinary team working and training and the progress which had been made and continued to be made.

   Ms Williams explained the role of PROMPT (Practical Obstetric Multi-Professional Training) training in training in a multidisciplinary way to reduce obstetric emergencies, which it was explained had pre-dated the Ockenden reports as a recognised training tool. Ms Williams confirmed that the evidence base had demonstrated that as an outcome of PROMPT there had been a 50% reduction in Hypoxic Brain Injury (HIE), 40% reduction in school-aged cerebral palsy, 100% reduction in permanent brachial plexus injury, and 40% quicker delivery at emergency caesarean section.

   The Committee also saw (via a video clip) a PROMPT training simulation in action and the benefits of training on a multidisciplinary basis. The Committee was reminded that PROMPT as a tool provides more than just learning how to manage obstetric emergencies – in addition, it promotes a culture of psychological safety and a commitment to continuous improvement at all levels.

10. **Date and Time of Next meeting**

    The next meeting is Tuesday 31 January 2023 at 2.30pm (livestreamed)

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