

Board of Directors' Meeting: 13 April 2023

Agenda item	039/23		
Report Title	Ockenden Report Action Plan Progress Report		
Executive Lead	Hayley Flavell, Executive Director of Nursing		
Report Author	Mike Wright, Programme Director – Maternity Assurance		
QQC Domain: Link to Strategic Goal: Link to BAF / risk:			
Safe	√	Our patients and community	√
Effective	√	Our people	√
Caring	√	Our service delivery	√
Responsive	√	Our governance	√
Well Led	√	Our partners	√
Consultation Communication		Directly to the Board of Directors	
Executive summary:			
Executive summary:		<p>This report provides an update on the following matters:</p> <ul style="list-style-type: none"> • The position in relation to the actions from both Ockenden Reports, as at 14 February 2023. • The Ockenden Report Assurance Committee • A request to have time with the Board to decide and agree future maternity reporting arrangements. 	
Recommendations for the Board:			
Recommendations for the Board:		<p>The Board of Directors is requested to:</p> <ul style="list-style-type: none"> • Receive this report for information and assurance. • Approve the action in section 8.2. • Decide if any further information, action and/or assurance is required. 	
Appendices:			
Appendices:		<ul style="list-style-type: none"> • Appendix One, which is contained in the Supplementary Information Pack that accompanies the Board papers. 	

1.0 Purpose of this report

1.1 This report provides information on the following:

- The position in relation to the actions from both Ockenden Reports, as at 14 February 2023.
- The Ockenden Report Assurance Committee
- A request to have time with the Board to decide and agree future maternity reporting arrangements.

2.0 Context: The Ockenden Reports (2020) and (2022)

2.1 The Board of Directors received the first Ockenden Report – “*Emerging Findings and Recommendations from the Independent Review of Maternity Services at The Shrewsbury and Telford Hospital NHS Trust: our first Report following 250 clinical reviews*”¹ at its meeting in public on 7 January 2021.

2.2 The Board of Directors received the final Ockenden Report – “*Findings, Conclusions and Essential Actions from the Independent Review of Maternity Services at The Shrewsbury and Telford Hospital NHS Trust – Our Final Report*”² at its meeting in public on 14 April 2022. The numbers of actions for the Trust to implement from the two reports are, as follows:

Report	Local Actions for Learning (LAFL's) - SATH only	Immediate and Essential Actions (IEA's) - All providers of maternity care in England	Total no. of actions
First – Dec 2020	27	7 Themes – (25 sub actions)	52
Final – Mar 2022	66	15 Themes – (92 sub actions)	158
Totals	93	117	210

3.0 Phasing of the delivery of the required actions

3.1 The current timeframe profile for all actions (both reports) to be delivered is, as follows:

Financial year	Number of actions expected to be implemented fully during this period
2021-22	40 (all implemented)
2022-23	52
2023-24	102
Yet to be determined	16

¹ www.gov.uk/official-documents. (2020) Ockenden Report – Emerging Findings and Recommendations from the Independent Review of Maternity Services at Shrewsbury and Telford NHS Trust; Our First Report following 250 Clinical Reviews.

² www.gov.uk/official-documents. (2022) Ockenden Report – Final. Findings, Conclusions and Essential Actions from the Independent Review of Maternity Services at The Shrewsbury and Telford Hospital HS Trust.

3.2 With regards to the overall responsibility for leading on the delivery of all the required actions (both reports), the breakdown is, as follows:

Lead agent	Number of Actions
Internal (Trust only)	172
External (combined Trust- external agencies)	38

3.3 All the actions from both reports are summarised in one single Action Plan at **Appendix One**, which is contained in the Supplementary Information Pack that accompanies the Board papers. Also, more detail in relation to any of the actions can be provided on request.

3.4 Since the last version of this report to the Board in February 2023 (with the January 2023 position), the Maternity Transformation Assurance Committee (MTAC) met on 14 February 2023. The MTAC scheduled for March 2023 was postponed due to unforeseen circumstances. As such, the position reported in this report is as at 14 February 2023, when the changes to the following twenty-seven ratings were confirmed:

3.5 MTAC - Approved rating changes

3.5.1 MTAC 14 February 2023

Action Ref.	Theme	Previous Rating	MTAC Approved Rating 14/02/23
LAFI 4.88	Obstetric Anaesthesia	Not Yet Delivered	Delivered Not Yet Evidenced
IEA 11.5	Obstetric Anaesthesia	Not Yet Delivered	Delivered Not Yet Evidenced
IEA 11.6	Obstetric Anaesthesia	Not Yet Delivered	Delivered Not Yet Evidenced
LAFI 14.54	Obstetric Anaesthesia	Not Yet Delivered	Delivered Not Yet Evidenced
IEA 8.4	Complex Antenatal Care	Not Yet Delivered	Delivered Not Yet Evidenced
IEA 8.5	Complex Antenatal Care	Not Yet Delivered	Delivered Not Yet Evidenced
IEA 9.4	Preterm Birth	Not Yet Delivered	Delivered Not Yet Evidenced
IEA 11.3	Obstetric Anaesthesia	Not Yet Delivered	Evidenced and Assured
IEA 1.6	Workforce Planning and Sustainability	Not Yet Delivered	Evidenced and Assured
IEA 1.8	Workforce Planning and Sustainability	Not Yet Delivered	Evidenced and Assured
IEA 5.1	Incident Investigations and Complaints	Not Yet Delivered	Evidenced and Assured
IEA 6.2	Learning from Maternal Deaths	Not Yet Delivered	Evidenced and Assured
IEA 8.2	Complex Antenatal Care	Not Yet Delivered	Evidenced and Assured
IEA 12.4	Fetal Assessment and Monitoring	Not Yet Delivered	Evidenced and Assured
IEA 15.1	Supporting Families	Not Yet Delivered	Evidenced and Assured

IEA 15.2	Supporting Families	Not Yet Delivered	Evidenced and Assured
IEA 15.3	Supporting Families	Not Yet Delivered	Evidenced and Assured
LAFI 14.7	Improving management of patient safety incidents	Not Yet Delivered	Evidenced and Assured
LAFI 14.51	Obstetric Anaesthesia	Delivered Not Yet Evidenced	Evidenced and Assured
IEA 2.8	Safe Staffing	Delivered Not Yet Evidenced	Evidenced and Assured
IEA 2.10	Safe Staffing	Delivered Not Yet Evidenced	Evidenced and Assured
IEA 5.5	Incident Investigation and Complaints	Delivered Not Yet Evidenced	Evidenced and Assured
IEA 8.3	Complex Antenatal Care	Delivered Not Yet Evidenced	Evidenced and Assured
LAFI 14.4	Neonatal Care	Delivered Not Yet Evidenced	Evidenced and Assured
LAFI 14.8	Neonatal Care	Delivered Not Yet Evidenced	Evidenced and Assured
LAFI 14.23	Improving Guideline Process	Delivered Not Yet Evidenced	Evidenced and Assured
LAFI 14.63	Supporting Families After Review is published	Delivered Not Yet Evidenced	Evidenced and Assured

3.6 Introduction of a new Progress Status descriptor – ‘De-Scoped’

3.6.1 Following a multidisciplinary workshop held in January 2023 and in line with standardised project management methodology, a new progress status descriptor – ‘De-Scoped’ was proposed. MTAC approved this change at its meeting in February 2023.

3.6.3 At the workshop, actions with a delivery status of ‘red’ – ‘not yet delivered’ were revisited and it was noted that ten of these actions lie entirely outside the scope of work of the Maternity Transformation Programme (MTP). This is because such actions lie with national/ regulatory bodies and, therefore, are outside the direct control of the Trust.

3.6.4 Whilst it is appropriate for the action to remain ‘red’ – ‘not yet delivered’ for delivery status purposes, it was agreed for the actions to be marked as ‘de-scoped’ in terms of progress rating.

3.6.5 The Board can be assured that, wherever possible, the Division will remain in contact with the National/ Regulatory bodies at regular intervals to retain sight of any future progress with these actions. As a minimum, all ‘de-scoped’ actions will be brought to MTAC on a quarterly basis to monitor for checking.

3.7 First Ockenden Report - Off Track, ‘At Risk’ or ‘De-Scoped’ Actions.

3.7.1 IEA 2.1. ‘Trusts must create an independent senior advocate role which reports to both the Trust and the LMS Boards’ AND IEA 2.2. ‘The advocate must be available families attending follow up meeting with clinicians where concerns about maternity or neonatal care are discussed, particularly where there has been an adverse outcome.’

Ockenden ID	IEA 2.1 and 2.2		
Delivery status	Not yet delivered	Progress status	Off track
Reason of exception	<p>NHSEI has set up pilot scheme to evaluate these roles. Trusts and Integrated Care Systems were invited to place a bid to become a pilot site. One of the conditions of application was that Trust's within a single LMNS arrangement would not be able to apply. Despite this, this Trust, and its Integrated Care System (ICS) has been allocated to become a pilot site. All that is known thus far is that six months' worth of funding will be provided, and the ICS is to lead on this. This will be discussed further at the next MTAC meeting in December. The Board of Directors will be apprised of further details as and when these are known. This action remains 'Not Yet Delivered' and is 'Off Track' and will remain so until this project gets underway.</p>		

3.7.2 IEA 2.4. 'CQC inspections must include an assessment of whether women's voices are truly heard by the maternity service through the active and meaningful involvement of the Maternity Services Partnership.'

Ockenden ID	IEA 2.4		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> • This action rests with the Care Quality Commission (CQC) to deliver and work with the MVP at a national level. Therefore, lies outside the MTP scope of work. • The Trust continues to communicate with system stakeholders with the aim of delivering at pace. • This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8 Final Ockenden Report - Off Track, 'At Risk' or 'De-Scoped' Actions.

3.8.1 IEA 1.1. 'The recommendations from the health and social care committee report: the safety of maternity services in England must be implemented. The investment announced following our first report was welcomed. However, to fund maternity and neonatal services appropriately requires a multi-year settlement to ensure the workforce is enabled to deliver consistently safe maternity and neonatal care across England.'

Ockenden ID	IEA 1.1		
Delivery status	Not yet delivered	Progress status	De-scope
Reason of exception	<ul style="list-style-type: none"> • This action lies outside the scope of work of the MTP, as relies on National bodies to provide funding. Therefore, lies outside the MTP scope of work. • The Trust continues to communicate with system stakeholders with the aim of delivering at pace. • This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.2 IEA 1.4. 'The recommendations from the health and social care committee report: the safety of maternity services in England must be implemented. The feasibility and accuracy of the BirthRate Plus tool and associated methodology must be reviewed nationally by all bodies. These bodies must include as a minimum NHSE, RCOG, RCM, RCPCH.'

Ockenden ID	IEA 1.4		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> • This action lies outside the scope of work of the MTP, as relies on National bodies and NHSEI to review BirthRate Plus tool and associated methodology. • The Trust continues to communicate with system stakeholders with the aim of delivering at pace. • This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.3 IEA 1.7. 'All trusts must ensure all midwives responsible for coordinating labour ward attend a fully funded and nationally recognised labour ward coordinator education module, which supports advanced decision-making, learning through training in human factors, situational awareness and psychological safety, to tackle behaviours in the workforce.'

Ockenden ID	IEA 1.7		
Delivery status	Not yet delivered	Progress status	De-scope
Reason of exception	<ul style="list-style-type: none"> • This action lies outside the scope of work of the MTP, as no nationally recognised labour ward coordinator programme is currently available. • Nevertheless, as mitigation, robust in-house training has been put in place until a programme is made available nationally for our staff to attend. • The Trust continues to communicate with system stakeholders with the aim of delivering at pace. • This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.4 IEA 1.11. 'The review team acknowledges the progress around the creation of Maternal Medicine Networks nationally, which will enhance the care and safety of complex pregnancies. To address the shortfall of maternal medicine physicians, a sustainable training programme across the country must be established, to ensure the appropriate workforce long term.'

Ockenden ID	IEA 1.11		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> This action lies outside the scope of work of the MTP, as the action fully dependent on National bodies (RCOG and RCP). The Trust continues to communicate with system stakeholders with the aim of delivering at pace. This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.5 EA 6.1. 'Nationally all maternal post-mortem examinations must be conducted by a pathologist who is an expert in maternal physiology and pregnancy related pathologies. In the case of a maternal death a joint review panel/investigation of all services involved in the care must include representation from all applicable hospitals/clinical settings.'

Ockenden ID	IEA 6.1		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> This action lies outside the scope of work of the MTP, as relies on Royal Colleges. The Trust continues to communicate with system stakeholders with the aim of delivering at pace. This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.6 IEA 11.4. 'Resources must be made available for anaesthetic professional bodies to determine a consensus regarding contents of core datasets and what constitutes a satisfactory anaesthetic record in order to maximise national engagement and compliance.'

Ockenden ID	IEA 11.4		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> This action lies outside the scope of work of the MTP, as relies on National bodies obtaining resources. The Trust continues to communicate with system stakeholders with the aim of delivering at pace. This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.7 IEA 14.5. 'There must be clear pathways of care for provision of neonatal care. This review endorses the recommendations from the Neonatal Critical Care Review (December 2019) to expand neonatal critical care, increase neonatal cot numbers, develop the workforce, and enhance the experience of families. This work must now progress at pace. Each network must report to commissioners annually what measures are in place to prevent units from working in isolation.'

Ockenden ID	IEA 14.5		
Delivery status	Delivered, not yet evidenced	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> This action lies outside the scope of work of the MTP, as now depends on the network to progress this action to 'Evidenced and Assured'. The MTP has progressed the action to 'Delivered, not yet evidenced'. The Trust continues to communicate with system stakeholders with the aim of delivering at pace. This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

3.8.8 LAFL 14.1. 'Incidents must be graded appropriately, with the level of harm recorded as the level of harm the patient actually suffered and in line with the relevant incident framework.'

Ockenden ID	LAFL 14.1		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> This action lies outside the scope of work of the MTP, as it is superseded by the national implementation of PSIRF. Preparations are underway to enable the efficient roll out system when it becomes available. The Trust continues to communicate with system stakeholders with the aim of delivering at pace. This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

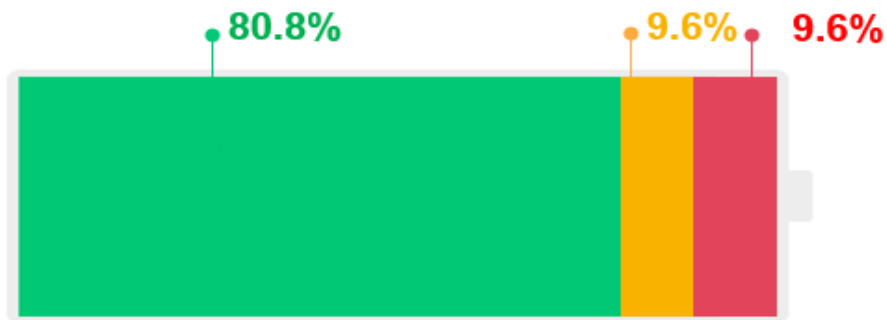
3.8.9 LAFL 14.64. 'There must be dialogue with NHS England and Improvement and commissioners and the mental health trust and wider system locally, aiming to secure resources which reflect the ongoing consequences of such large-scale adverse maternity experiences. Specifically, this must ensure multi-year investment in the provision of specialist support for the mental health and wellbeing of women and their families in the local area.'

Ockenden ID	LAFL 14.64		
Delivery status	Not yet delivered	Progress status	De-scoped
Reason of exception	<ul style="list-style-type: none"> This action lies outside the scope of work of the MTP, as relies on NHSEI, commissioners and mental health trust to secure resources. Systems are in place within the Trust to ensure specialist support for the mental wellbeing of affected families. The Trust continues to communicate with system stakeholders with the aim of delivering at pace. This action will be reviewed at MTAC on a quarterly basis for monitoring purposes. 		

4.0 Delivery and Progress Status

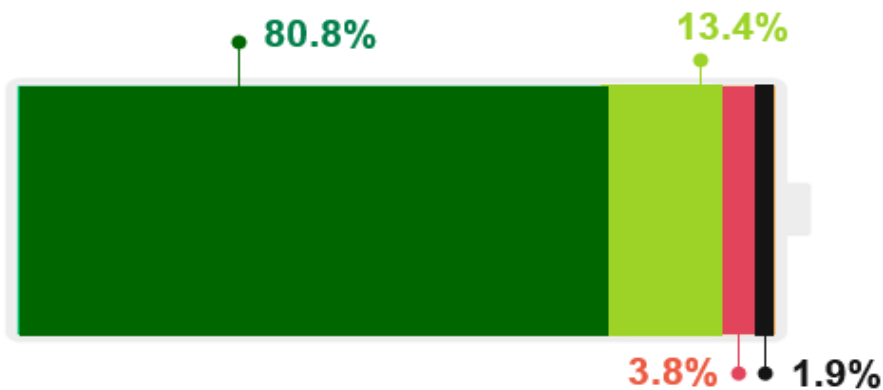
4.1 **First Ockenden Report (2020)**

4.1.1 Delivery battery and statistics



42/52 Actions (80.8%) 'evidenced and assured', 5/52 actions (9.6%) 'delivered, not yet evidenced' and 5/52 actions (9.6%) 'not yet delivered'.

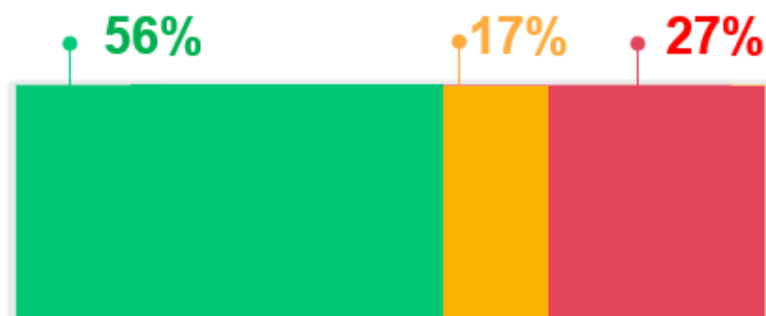
4.1.2 Progress battery and statistics



42/52 Actions (80.8%) 'complete', 7/52 actions (13.4%) 'on track', 2/52 actions (3.8%) 'off track' and 1/52 (1.9%) 'de-scoped'.

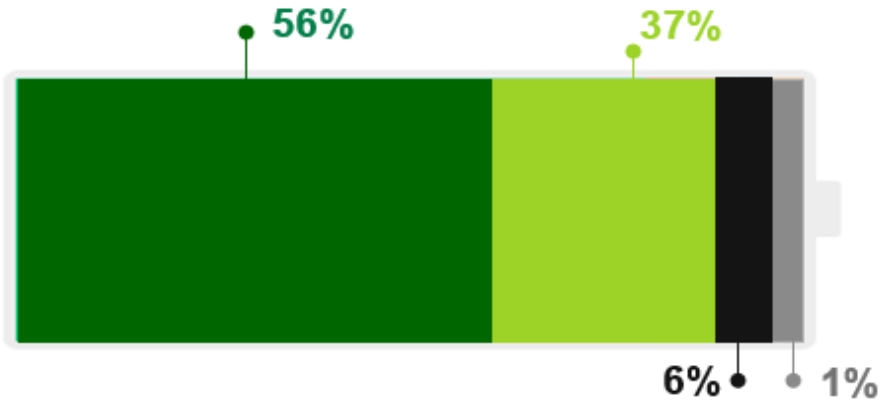
4.2 Final Ockenden Report (2022)

4.2.1 Delivery Battery and Statistics



88/158 actions (56%) 'evidenced and assured', 27/158 actions (17%) 'delivered, not yet evidenced', and 43/158 actions (27%) 'not yet delivered'.

4.2.2 Progress Battery and Statistics

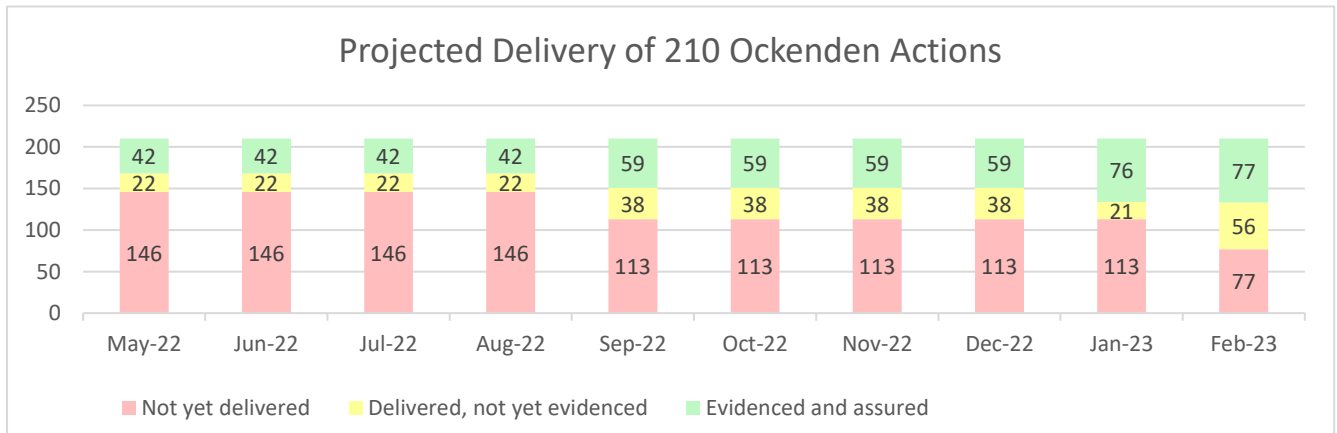


88/158 actions (56%) 'complete', 59/158 actions (37%) 'on track', 9/158 actions (6%) 'de-scoped', and 2/158 actions (1%) 'not started'.

4.3 Delivery Status – Both reports combined.

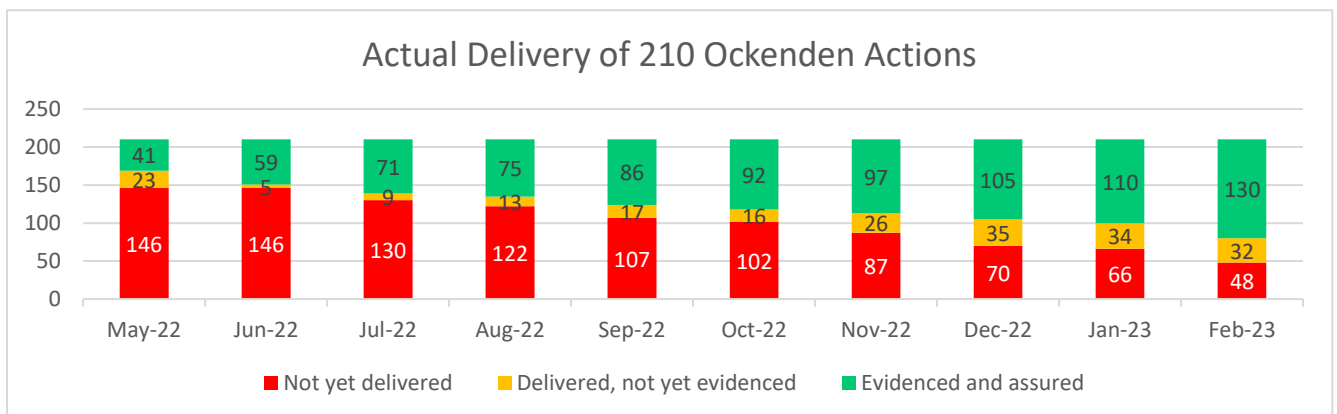
4.3.1 Planned Delivery Trajectory

The following graph shows the projected delivery trajectory for all IMR actions.



4.3.2 Actual Delivery Trajectory

The following graph shows visually the progress that is being made with the delivery of the 210 actions from both reports, and is ahead of plan:



5.0 The Ockenden Report Assurance Committee (ORAC)

5.1 ORAC last met on 28th March 2023.

5.2 The meeting considered progress against all Ockenden actions, especially at the first anniversary of the publication of the final Ockenden Report on 30 March 2022. The key topic for this meeting was a focus on learning from complaints.

6.0 Next Steps

6.1 The work to address the outstanding actions from both 'Ockenden' reports continues with energy and commitment, all with the objective of improving care for women and families sustainably and providing a better working environment for staff.

7.0 Summary

7.1 Substantial progress continues to be made against the delivery of the Ockenden Reports' actions. From the first report, 47/52 (90% - rounded percentages) actions have been 'delivered', with 42 (81%) of these already 'evidenced and assured'. From the final report, 115/158 (73%) of the actions have been 'delivered', with 88/158 (56%) of these 'evidenced and assured'. In total, both reports, 162/210 (77%) of actions are now 'delivered', with 130/210 (62%) now 'evidenced and assured.' Work continues at pace to deliver the rest of the programme.

8.0 Future Status of this Report

8.1 In the version of this report that was presented to the last Board of Directors' meeting in public in February 2023, it was proposed to change the format of this report. This to meet the following action from the Independent Maternity Review.

LAFL 14.24 - The Trust Board must review the progress of the maternity improvement and transformation plan every month.

8.2 The Maternity Transformation Programme is large and complex. Therefore, before any changes to reporting are made, the Maternity top team requests to meet with the Board to explain this in more detail, and to agree future reporting requirements. The Board of Directors is requested to accept this request.

9.0 Action required of the Board of Directors

9.1 The Board of Directors is requested to:

- Receive this report for information and assurance.
- Approve the action in section 8.2.
- Decide if any further information, action and/or assurance is required.

Hayley Flavell
Executive Director of Nursing
30 March 2023

Appendix One: The Ockenden Report Action Plan at 14 February 2023, which is contained in the Supplementary Information Pack that accompanies the Board papers.