

## **HEALTH OVERVIEW AND SCRUTINY COMMITTEE 21 SEPTEMBER 2021**

### **UPDATE ON MATERNITY SERVICES**

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#### **Summary**

1. The Health Overview and Scrutiny Committee (HOSC) has requested an update on Maternity Services, in order to seek assurance on progress by Worcestershire Acute Hospitals NHS Trust (the Trust).
2. As a result of an inspection by the Care Quality Commission (CQC) on 9 December 2020, the overall rating for the Service went down from Good to Requires Improvement. It was rated Requires Improvement for being safe and well-led, and Good for being effective. Inspectors did not assess the service for whether it was caring or responsive at this inspection.
3. A senior representative will be present from Worcestershire Acute Hospitals NHS Trust.

#### **Actions following the CQC Inspection of Maternity Services**

4. The CQC focused inspection was carried out in response to whistleblowing concerns and information received about the safety of the maternity department, particularly around midwifery staffing levels, risk and incident reporting and governance. Inspectors found that staffing levels were often lower than planned, with midwives reporting that this led to them being frequently moved within the department. Midwives also said morale was low due to longstanding staffing issues, and that they felt their concerns and views were not being considered by management. A link to the full inspection report is available at Appendix 1.
5. The HOSC has previously been updated on the CQC inspection findings and action being taken by the Trust to respond – details of the report and discussion on 10 March 2021 can be found here: [weblink to agenda and minutes](#)
6. HOSC Members acknowledged the actions outlined by the Trust, the fact that no safety concerns were raised during the inspection and the challenging context of the COVID-19 pandemic. Actions which the Trust had put in place at that time included a sustained focus on safety huddles and Chief Nursing Officer safety walkabouts, increased recruitment, training and governance to strengthen processes. The presentation slides at Appendix 2 set out progress made by the Trust since the CQC inspection.
7. The HOSC agreed the importance of monitoring progress of the Acute Trust's action plan for improvement. The presentation slides at Appendix 2 set out overall progress made by the Trust since the CQC inspection.
8. The Trust's Action Plan is available at Appendix 3.

## **Progress following the CQC Inspection of Maternity Services**

### Action Plan

9. The maternity services developed an action plan to address all of the issues that were raised by the team during the engagement events and this also included the actions recommended by the Care Quality Commission. The action plan has 138 actions; to date 102 actions have been completed, with a further 17 on track to complete within the specified date and a further 19 which are delayed.

10. The 19 actions that are currently delayed are presented in the following four themes:

- Implementation of staffing acuity tools due to high demand of supplier following the publication of the Ockenden recommendations in December
- Implementation of the revised Escalation Policy
- Publication of the revised Standard Operating Procedure for Continuity of Carer
- Development of Professional Midwifery Advocacy Service – recruitment underway

11. These actions have been delayed due to leaders supporting clinical/operational pressures during successive waves of the COVID pandemic.

### Further engagement events

12. In April 2021 Vicky Morris, Chief Nursing Officer retired and the Trust welcomed Paula Gardner as her successor. A special focus on maternity services was led by Paula in May advertised locally as 'Maternity Matters'. Both Paula Gardner and Matthew Hopkins, Chief Executive, held a number of engagement events with the maternity team and a number of additional actions were added to the action plan in an attempt to accelerate some existing actions.

13. The Executive Team have continued to maintain a visual presence in the inpatient areas within maternity services with regular walkabouts and meetings with staff on a 1:1 basis if they have concerns to raise.

14. Paula Gardner is the Board Level Safety Champion for Maternity Services and Simon Murphy is a newly appointed Non – Executive Director Safety Champion for Maternity Services. Monthly walkabouts continue and staff receive feedback on safety issues and have an opportunity to raise concerns during the walkabouts.

### Maintaining a Safe Maternity Service

15. The maternity directorate team have continued to provide a safe maternity service following the CQC inspection in December.

16. Midwifery staffing levels have continued to be challenging due to vacancies, COVID and non COVID related sickness absence; this has been monitored by the Executive and Non- Executive Directors to ensure that the safest staffing has been available across maternity services.

17. Support to manage historic high levels of team sickness has led to a 50% reduction in sickness absence and two successful recruitment events have filled all

current vacancies with all new starters expected to be in post by the end of September.

### Development of a Service Improvement Plan

18. In June 2021 it was recognised that in order to deliver the requirements of the National Maternity Transformation Plan, a local Service Improvement Plan (Appendix 4) was required.

19. Following discussions at Trust Board in July, the Maternity Service Improvement Plan was shared with the maternity team via the local monthly divisional briefing. It is recognised that ongoing communication and engagement is key to the delivery of further improvements.

### **Supporting Information**

Appendix 1 - Care Quality Commission Inspection Report on 9 December 2020 – available on the CQC website: [weblink to CQC inspection report](#)

Appendix 2 – Presentation slides

Appendix 3 - Action Plan

Appendix 4 – Maternity Service Improvement Plan

### **Purpose of the Meeting**

20. Members are invited to consider and comment on the information discussed and agree:

- whether any further information is required
- whether any further scrutiny work is required at this stage.

### **Contact Points**

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### **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

- CQC press release – available on the CQC website: [weblink to press release](#)
- Agenda and Minutes from the Health Overview and Scrutiny Committee on 10 March 2021 and 20 July 2018 – available on the Council’s website: [weblink to agenda and minutes](#)