

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

9 MAY 2022

MATERNITY SERVICES

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) since its last update in September 2021.
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 that inspection.
3. Senior Representatives from the Trust have been invited to attend the meeting.

Maternity Service Action Plan

4. Despite the ongoing clinical and operation pressures experienced, due to the COVID-19 pandemic, the Maternity Directorate has continued to work positively to achieve completion of the majority of the actions included in the Improvement Action Plan which was shared at the HOSC in September 2021.
5. There are now only five outstanding actions to be completed to meet all of the recommendations made by CQC in its report published in March 2021. An action plan was presented to the Trust Board on 7 April 2022, detailing all outstanding actions. It is expected that all of the required actions will be completed by September 2022.

Current Challenges

(i) Maintaining a Safe Maternity Service

6. Throughout the pandemic it has been extremely challenging to maintain safe staffing levels due to vacancies, COVID and non-COVID related sickness absence. A monthly detailed report is shared with the Trust Board (Appendix 1) which outlines the current staffing challenges and all actions undertaken to ensure that the Trust continues to provide the safest service for women, birthing people and their families.

(ii) Maternity Service Improvement Plan

7. The Maternity Service Improvement Plan (Appendix 2) was launched as planned on 29 September 2021. Following the launch, all three work streams (led by senior clinicians) have completed engagement events and have clear objectives to complete to demonstrate improvements in maternity services.

8. Current Key Performance Indicator compliance demonstrates an improvement on all indicators except Personal Development Reviews (PDRs). It has been incredibly difficult to complete PDRs on a one-to-one basis as the local leadership team have also been supporting the delivery of clinical services.

9. The latest wave of COVID has required the Trust to direct all clinical staff to front line services. Despite this, some work identified in the initial round of engagement events has continued and it is expected that further engagement events will take place throughout spring and summer and inform the next stages of this plan.

Implications of the Independent Review of Maternity Services at Shrewsbury and Telford Hospital Trust (Ockenden Reports)

10. Following concerns raised by families about the safety of maternity services at Shrewsbury and Telford NHS Trust, an Independent Review took place, led by senior midwife Donna Ockenden. In December 2020 the first inquiry into maternity services at Shrewsbury and Telford NHS Trust was published, and a number of immediate and essential actions (IEA) were outlined within the report, to be implemented at Shrewsbury and Telford and across the wider maternity community. Over the last 12 months the Maternity Team have provided evidence to the NHS England & Improvement Regional Team on two occasions to demonstrate current compliance against the IEAs.

11. On 7 April 2022, the Maternity Directorate shared a report with the Trust Board (Appendix 3) outlining the current compliance at 92% against the IEAs prior to submission to the regional team. Further work is planned to meet all of the outstanding actions.

12. On 30 March 2022, the second and final Ockenden report was published. Within the report there were a further 60 essential actions for each Trust to deliver. The Trust's maternity team have reviewed the report and have started to draft a gap analysis and action plan to inform the Board of any areas of concern or future improvement. This will be reviewed by the Trust Board in June 2022.

Purpose of the Meeting

13. The HOSC is asked to consider and comment on the information provided and agree:

- whether any further information or scrutiny is required at this time.

Supporting Information

Appendix 1 – [Link to Trust Board Agenda 7 April 2022. Read pdf pages 18 to 26 for Midwifery Safe Staffing Report February 2022](#)

Appendix 2 – Maternity Service Improvement Plan

Appendix 3 – [Link to Trust Board Agenda 7 April 2022. Read pdf pages 26 to 29 for Ockenden Compliance Report February 2022](#)

Contact Points

Emma James / Jo Weston, Overview and Scrutiny Officers Tel: 01905 844964 / 844965
Email: scrutiny@worcestershire.gov.uk

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:

- Agenda and Minutes of the Health Overview and Scrutiny Committee on 21 September 2021, 10 March 2021 and 20 July 2018.
- [Final report of the Ockenden review - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/94444/final-report-of-the-ockenden-review.pdf)

[All agendas and minutes are available on the Council's website here.](#)