



Sherwood Forest Hospitals NHS Trust
Action Plan- Maternity Service Regional and System Insight
Visit
4th October 2022









The purpose of the visits was to provide assurance against the 7 immediate and essential actions (IEAS) from the Ockenden report. The Insight Visit Team used an appreciative enquiry and learning approach to foster partnership working to ensure that the actions taken to meet the Ockenden recommendations were embedded in practice.

A Regional and System team conducted the Insight Visit on the 4<sup>th</sup> of October 2022.

The following action plan will be monitored through the Maternity Assurance Committee, with this and the report being shared with our Maternity and Neonatal colleagues and Trust Board.

To note the below points do not cover the area which we have already self-assessed amber. None of the below actions have led to any green assessed IEA's requiring to become amber.

The insight team have advised that we score any IEA's that contain work related to SBLCB as amber due to our current system and regional agreed divergence.







Identified Points for Celebration identified from the review of the 7 IEA's

- Supportive, open and honest organisation with a shared understanding of issues at all levels and strong culture of escalation.
- Loyal staff with access to career development and progression, who genuinely enjoy working at the unit
- Experienced senior leadership team with clear executive and NED visibility
- Wide range of specialist midwife roles in place with knowledgeable, enthusiastic and inspiring staff in post
- Good engagement with the executive team and safety champions demonstrating close links to Parents Representative
- A strong Parents Representative employed on temporary basis who is able provide robust user feedback

Maximising the potential to reach minority groups Links closely with all staff groups and senior leadership team







The below actions where identified as points for consideration from the review of the 7 IEA's. These points do not cover the area which we have already self-assessed amber due to the ongoing work around the Trust website. None of the below have led to any green assessed IEA's requiring to become amber.

	Action	By Whom	When	Evidence
1	Strengthen audit plan	Matron for Maternity Governance/Audit Midwife	Nov 22	Revised audit plan
2	<ul><li>Obstetric Workforce</li><li>Specialist roles</li><li>Increased pressure due to birth rate</li></ul>	Clinical Chair	Nov 22	Revised PA plan Divisional plan for increased activity
3	<ul><li>PMRT</li><li>Lead Midwife</li><li>External review plan</li></ul>	Matron for Maternity Governance	Nov 22	Email confirmation System plan for external review support
4	Birthrate Plus-work towards recommendations (report due Nov 22)	Director of Midwifery	Jan 23	Revised establishment





The team provided additional points to celebrate and consideration, listed below, which are already under action through local governance meetings.

### **Additional Celebration Points**

- Effective induction of labour pathway in place keeping delays to a minimum
- Excellent Blood spot screening QI project –improving the screening pathway and experience of women and babies
- Introduction of the Each Baby Counts Escalation Tool to improve safety and support staff in structured conversations
- Listening event has been undertaken to hear the voices of obstetric trainees and plan solutions following concerns raised in HEE survey

#### **Additional Points for Consideration**

 Progress the work underway to fully implement BSOTS when staffing allows continue to monitor outcome data and ability to achieve timely assessment in triage

