

Maternity Transformational Plan 2021

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Ockendon Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Community Transformational Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Triumvirate Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
LMS Patient Survey Monkey	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Safety Culture Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine

Current Date:
25/Mar/21

RAG	RAG Count
Completed	1
On track	6
Delayed, but will complete	1
Significant delay	0
Not yet commenced	0
Total	8

Unique ref	What theme does this action relate to?	Describe the action	Which Team has raised the action?	Who has to complete the action?	Which action plan was this originally captured in?	When did we raise this action?	When will be completing this action?	Current status of action	Progress of action to date	When was the progress last	Flag to indicate instances where an
Item No.	CQC Domains	Themes	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Progress last updated	Completion Date Lapsed (days overdue)
E 1	Effective	Focus on Leadership and Development	CMW	Louise Wilde	Community Transformation Plan	25-Jan-21	25-Jan-21	On track	HOM holding Matrons meeting to provide wider updates to share strategic overview to then enable dissemination of information to staff.	25-Jan-21	-59
E 2	Effective	NNU Team	NNU	Louise Wilde	Triumvirate Action Plan	03-Feb-21	17-Mar-21	On track	Robust Reporting, ward assurance, Staffing, cleanliness, IPC audit.	17-Mar-21	-8
E 3	Effective	NNU Team	NNU	Louise Wilde	Triumvirate Action Plan	03-Feb-21	01-Feb-21	Delayed, but will complete	Matron to Set clear expectation of ward manager, Staffing, Rostering forward view of staffing.	01-Feb-21	-52
E 4	Effective	Enhanced Safety	Risk and Governance Team	Louise Wilde Neil Shah	Ockendon	07-Jan-21	31-Mar-21	On track		31-Mar-21	
E 5	Effective	Enhanced Safety	Risk and Governance Team	Group	Ockendon	07-Jan-21	31-Mar-21	On track	Monthly report is required which will be presented to board which highlight the safety of Maternity services, to include Perinatal mortality and morbidity and maternal mortality and risk and Governance and workforce, and CNST and Saving babies lives and all other national regional updates. Perinatal mortality review Board and Perinatal risk management group All cases (72 hour reviews) that require review are taken by the Directorate leadership team to trust wide moderate harm meeting prior to calling of SI. Chaired by chief nurse and medical Director. Also reported on SETIS, directorate leadership and group leadership team meet with medical director at SI review meeting to sign off prior to sending off to CCG. All signed off SI's (trust wide) are shared at monthly executive quality committee and are reported quarterly through to board.	31-Mar-21	
E 6	Effective	Staff Training and working together	All Areas	Risk & Governance Team Neil Shah Louise Wilde	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	Review complete, with Directorate for approval of TORs etc. Action plan in place	01-Apr-21	
E 7	Effective	Enhanced Safety	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Commenced Record Keeping end of February 21	31-Mar-21	
E 8	Effective	Enhanced Safety	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Safeguarding and community risks need to be captured separately. Community risk needs to capture all issues for community	31-Mar-21	

Maternity Transformational Plan 2021

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Ockenden Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Community Transformational Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Triumvirate Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
LMNS Patient Survey Monkey	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Safety Culture Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine

Current Date:
25/Mar/21

RAG	RAG Count
Completed	0
On track	0
Delayed, but will complete	0
Significant delay	0
Not yet commenced	0
Total	0

Unique ref	What theme does this action relate to?	Describe the action	Which Team has raised the action?	Who has to complete the action?	Which action plan was this originally captured in?	dd-mmm-yy When did we raise this action?	dd-mmm-yy When will be completing this action?	Current status of action	Progress of action to date	dd-mmm-yy When was the progress last	Flag to indicate instances where an	
Item No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Completion Date Lapsed (days overdue)	
C 1	Caring	Listening to Women and their Families	Work with service users through your Maternity Voices Partnership (MVP) to develop a robust mechanism for gathering service user feedback, and that you work with service users through your Maternity Voices Partnership (MVP).	All Areas	Consultant Midwife Louise Wilde Helen Hurst	Ockenden	07-Jan-21	07-Jan-21	Completed	Consultant midwife leads on MVP work stream. SWB MVP reinvigorated following the commissioning and tender lead by SWBCCG. Meeting is convened 4 meetings a year. HoM has maintained contact with MVP CCG lead throughout COVID and prior to first reformatted meeting structure. Chair of MVP is user rep and lay person. LMNS engagement work stream continues with input from service users to inform services. Have engaged with women through '15 steps' and have just completed an assessment.	07-Jan-21	
C 2	Caring	Listening to Women and their Families	The identification of an Executive Director with specific responsibility for maternity services, confirmation of a named non-executive director who will support the Board maternity safety champion bringing a degree of independent challenge to the oversight of maternity and neonatal services and ensuring that the voices of service users and staff are heard.	MVP	Helen Hurst Louise Wilde Consultant Midwife	Ockenden	07-Jan-21	07-Jan-21	Completed	Safety champion meeting is Professor David Carruthers, Medical Director Non- Executive Director is Harjinder Kang Midwives Obstetrician Neonatologist Role of DOM has altered to allow Trust representation	07-Jan-21	
C 3	Caring	Listening to Women and their Families	Diversity Lead Post 12 months	LMNS	Louise Wilde Consultant Midwife	LMNS	04-Feb-21	31-Mar-21	Delayed, but will complete	Role has been sent to HR for job matching	31-Mar-21	
C 4	Caring	Listening to Women and their Families	Website update with leaflets and new information	Risk and Governance Team	Ranjit Rayat	Staff Values Action Plan	11-Feb-21	01-Apr-21	On track	Work commenced with updating Maternity and NNU website. Refreshed leaflets have been updated and on BadgerNet portal	01-Apr-21	
C 5	Caring	Listening to Women and their Families	Maternity Tour for all services to be available online	All Areas	Ranjit Rayat	Staff Values Action Plan	11-Mar-21	01-Apr-21	On track	Work commenced with comms team	01-Apr-21	

Maternity Transformational Plan 2021

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Ockenden Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Community Transformational Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Triumvirate Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
LMNS Patient Survey Monkey	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Safety Culture Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine

Current Date:
25/Mar/21

RAG	RAG Count
Completed	0
On track	0
Delayed, but will complete	0
Significant delays	0
Not yet commenced	0
Total	0

Unique ref	What theme does this action relate to?	Describe the action	Which Team has raised the action?	Who has to complete the action?	Which action plan was this originally captured in?	When did we raise this action?	When will be completing this action?	Current status of action	Progress of action to date	When was the progress last	Flag to indicate instances where an	
Item No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Progress last updated	Completion Date Lapsed (days overdue)
R 1	Responsive	Review of the Trust's maternity governance processes	Monthly matrons reports to be presented at the directorate Governance meeting.	All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	11-Mar-21	Completed	Monthly matrons report for each area to include complaints, Compliments, Incident management, Management of the risk Register. Training for new matrons for Risk Register and incident management.	11-Mar-21	
R 2	Responsive	Review of the Trust's maternity governance processes	Share Ockenden report with all staff, attend staff forums to talk about Ockenden report	All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	17-Feb-21	Completed	Share reports with all staff. Attend DS forum to discuss reports. Attend team meetings.	17-Feb-21	
R 3	Responsive	Recruitment and retention	Recruitment and retention planning new incentivised plan	CMW	Ranjit Rayat	Community Midwifery Transformation	25-Jan-21	11-Mar-21	On track	Developing a robust support package for Community Midwifery. Inclusive of mentor for each Band 5 and additional clinical educators for Community to support them through there developing and role. This is CMW specific role. 20 student midwives have been offered jobs and recruiting overseas NNU nurses to become QIS trained.	11-Mar-21	
R 4	Responsive	Enhanced Safety	Refresh birth-rate plus caseload tool	CMW	Helen Hurst Louise Wilde Ranjit Rayat	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	LMNS commissioned to complete with DOM 15.3.21	31-Mar-21	
R 5	Responsive	Enhanced Safety	Review current caseloads inclusive of all clinics across SWB – work already in working progress (Families)	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Discussed with Team managers	31-Mar-21	
R 6	Responsive	Enhanced Safety	Devise Localised caseload weighting tool including acuity reflective of local population needs	CMW	Randeep Kaur Shelley Colley Fiona Macaron	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Launched with TMs due 31.3.21	31-Mar-21	
R 7	Responsive	Enhanced Safety	Identify WTE within Community Midwifery communicate to all staff	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	TMs informed by RK	31-Mar-21	
R 8	Responsive	Enhanced Safety	Devise 'Community Midwifery Daily Activity Tool' to demonstrate daily activity across Sandwell and West Birmingham geographical areas to support decision making based upon clinical need and 'Continuity of Care (COC)'; 'saving Babies Lives'	CMW	Randeep Kaur Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Launched with TMs due 31.3.21 merged with(3.1/3.2)	31-Mar-21	
R 9	Responsive	Enhanced Safety	As part of the Transformational Lead Midwife role review all current processes in place for Community Midwifery team	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 10	Responsive	Enhanced Safety	Revise the current discharge process within the CMW team being received electronically directly into generic email box and or BadgerNet	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 11	Responsive	Enhanced Safety	Once new process agreed devise pathway/systems as appropriate and communicate/liaise to all Liaise with local areas to communicate new agreed process	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 12	Responsive	Enhanced Safety	Once devised work towards Single Pregnancy Record	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 13	Responsive	Enhanced Safety	New streamlined process being scoped for referrals into the service as wider development of Community Administration Hub-Midwifery Contact Centre/Single Point of Access (SPA)	CMW	Ranjit Rayat Randeep Kaur	Community Midwifery Transformation	25-Jan-21	01-Apr-21	On track	On working progress meeting in place for 18th March	01-Apr-21	
R 14	Responsive	Enhanced Safety	To review and redesign daily work allocation underpinned by a SOP	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Significant delays	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 15	Responsive	Enhanced Safety	Plan to work towards allocating work electronically directly to all staff via Badger Link APP	CMW	Randeep Kaur Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Significant delays	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	

R 16	Responsive	Enhanced Safety	Once new process agreed devise pathway/training/systems as appropriate and communicate to all staff/Stakeholders /Local Maternity Units	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Delayed, but will complete	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 17	Responsive	Enhanced Safety	Duty Midwife Role with duties agreed and cascade	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Significant delays	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 18	Responsive	Enhanced Safety	One Community team approach across Sandwell and Birmingham to support cover based upon Clinical need	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Significant delays	Transformational meeting is held with Directorate and Matrons to review action plan. In additional a Task and Finish Group has been developed within the community team to scope out electronic ways of working, view to utilise Microsoft outlook/Badger Link App. however currently awaiting confirmation of Data Protection Information Agreement	31-Mar-21	
R 19	Responsive	Enhanced Safety	Review current CBCP- 'Community Midwifery Daily Activity Tool' will support accurate decision making with Community Business Continuity Plan (CBCP), communicate new version to all staff once completed	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	03-Jan-21	On track		03-Jan-21	
R 20	Responsive	Enhanced Safety	Embed SWB 'We Assure'- Review and agree community version for monthly reporting and submission	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Matrons have new community version, and completed documents sent to R & G	31-Mar-21	
R 21	Responsive	Enhanced Safety	Policies/Standard Operating Procedures (SOPs) to be reviewed and in the absence of any to devise inclusive of those pertinent to all AN/PN appointments –congruent with BadgerNet - Training package to be devised and all staff to be trained with expected standards incorporating Record Keeping Standards and any agreed points of contacts with women during AN/PN period	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	30-Apr-21	On track	In working progress	30-Apr-21	
R 22	Responsive	Enhanced Safety	Continuation of support from Risk Team- PRIME/Learning from incidents/near misses/plus any others dissemination to all staff	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	11-Mar-21	Completed	Complete	11-Mar-21	
R 23	Responsive	Enhanced Safety	Review current patient experience processes in place –reinvigorate/amend as required to meet client needs	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	11-Feb-21	Completed	Envoy system in place to date	11-Feb-21	
R 24	Responsive	Enhanced Safety	Introduce Daily Huddles within each area/family-accessible to those not present electronically	CMW	Randeep Kaur Shelley Colley Fiona Macaron	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Delayed, but will complete	Ad hoc to date - need to reinvigate due to delay in Matrons accessibility	31-Mar-21	
R 25	Responsive	Enhanced Safety	Each Family/Community Midwifery to have a dedicated shared folder to access information	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Completed	Complete	31-Mar-21	
R 26	Responsive	Enhanced Safety	Relaunch and disseminate latest Pathways guidance for Community Midwives due to COVID and during business as usual periods	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-May-21	On track	Resources due to current vacancies COVID pandemic restrictions	31-May-21	
R 27	Responsive	Enhanced Safety	Venue Risk Assessments for Holte/WBA to be located and reviewed to support venues being fit for practice and purpose – disseminated to all staff inclusive of agreed infection control procedures with compliance monitored	CMW	Louise Wilde	Community Midwifery Transformation	25-Jan-21	28-Feb-21	Completed	Resources due to current vacancies COVID pandemic restrictions	28-Feb-21	
R 28	Responsive	Enhanced Safety	Formulate smarter working across venues and clinics in other venues to support appointments and breeches	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-May-21	On track	Resources due to current vacancies COVID pandemic restrictions	31-May-21	
R 29	Responsive	Enhanced Safety	Pathways accessible electronically for all staff to be accessible at all times	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Resources due to current vacancies COVID pandemic restrictions	31-Mar-21	

Maternity Transformational Plan 2021

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Ockenden Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Community Transformational Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Triumvirate Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
LNMS Patient Survey Monkey	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Safety Culture Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine

Current Date:
25/Mar/21

RAG	RAG Count
Completed	0
On track	0
Delayed, but will complete	0
Significant delays	0
Not yet commenced	0
Total	0

Unique ref	What theme does this action relate to?	Describe the action	Which Team has raised the action?	Who has to complete the action?	Which action plan was this originally captured in?	When did we raise this action?	When will be completing this action?	Current status of action	Progress of action to date	When was the progress last	Flag to indicate instances where an	
Item No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Progress last updated	Completion Date Lapsed (days overdue)
WL 1	Well-Led	Confidentiality	Focus group session with professional PMA's	All Areas	Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	18-Feb-21	Completed	Meeting already in the diary	18-Feb-21	
WL 2	Well-Led	Confidentiality	Share confidentiality protocol in next Operational Meeting 18th Feb.	All Areas	Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	18-Feb-21	Completed	Meet with PMA's to suggest my support and attendance if required and to reinforce the message of "confidentiality"	18-Feb-21	
WL 3	Well-Led	Confidentiality	Visible presence in all areas to aid confidential conversations.	All Areas	Louise Wilde Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	03-Feb-21	On track	daily and when possible twice daily walkabouts. Presence on Delivery Suite first thing in the morning.	03-Feb-21	
WL 4	Well-Led	Visibility	Triumvirate Leadership team to create safe place for confidential speak up therefore office space to be reviewed	Triumvirate	Ranjit Rayat Neil Shah Louise Wilde	Triumvirate Action Plan	03-Feb-21	03-Feb-21	Completed	Ranjit to plan in her diary and use City twice per week. Share whereabouts to team	03-Feb-21	
WL 5	Well-Led	Visibility	Triumvirate weekly inpatient walkabouts	Triumvirate	Louise Wilde	Triumvirate Action Plan	03-Feb-21	25-Mar-21	On track	Commenced on each area	25-Mar-21	
WL 6	Well-Led	Visibility	Drop in sessions (Lia's) to be completed with all staff	All Areas	Louise Wilde Neil Shah Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	25-Mar-21	On track	Invitation sent to each member of staff to attend the LIA event. Staff feedback so far to be shared	25-Mar-21	
WL 7	Well-Led	Visibility	Matron of the day to be implemented 08 th Feb to enable coverage from 08:00-17:00on Mon-Fri	All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	08-Feb-21	Completed	Matron of the day Roster implemented to ensure senior presence onsite until 5pm to work in conjunction with the 87 manager of the day. Robust handover to the manager on call at 5nm.	08-Feb-21	
WL 8	Well-Led	Visibility	Increase visibility of Consultant Midwife	All Areas	Consultant Midwife	Triumvirate Action Plan	03-Feb-21	03-Feb-21	On track	Working from community venues. Increase visibility around the areas.	03-Feb-21	
WL 9	Well-Led	Visibility	Visibility from HOM for the community midwives by working out in community at community venues such as AVFC/WBA/SGH	All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	12-Feb-21	On track	Twice a month work from community venues	12-Feb-21	
WL 10	Well-Led	Visibility	Triumvirate LIA's to be implemented	Triumvirate	Consultant Midwife Triumvirate Leads	Triumvirate Action Plan	03-Feb-21	03-Feb-21	On track	Working from community venues. Increase visibility around the areas.	03-Feb-21	
WL 11	Well-Led	Focus on Leadership and Development	Triumvirate 360 Performance reviews	Triumvirate	Group	Staff Values Action Plan	01-Jan-21	01-May-21	Not yet commenced		01-May-21	
WL 12	Well-Led	Focus on Leadership and Development	Triumvirate Psychometric tests for teams	Triumvirate	Helen Hurst	Staff Values Action Plan	01-Jan-21	01-May-21	Not yet commenced	HRD support with the commissioning and interpretation of Psychometric tests	01-May-21	
WL 13	Well-Led	Focus on Leadership and Development	Bespoke RCM Leadership workshops (Band 7 and above) and within the Triumvirate	Triumvirate	Group Trust	Staff Values Action Plan	01-Jan-21	31-Mar-21	Delayed, but will complete	Contacted RCM for bespoke Leadership workshops	31-Mar-21	
WL 14	Well-Led	Focus on Leadership and Development	Roles and responsibilities; Boundaries for all need embedded with expectations and performance management as appropriate (SOPS/Policies and Procedures)	CMW	Louise Wilde Shelley Colley Fiona Macaron	Community Transformation Plan	25-Jan-21	25-Jan-21	On track	monthly monitoring	25-Jan-21	
WL 15	Well-Led	Focus on Leadership and Development	Strategic vision of maternity to be shared across maternity services. Clarify roles and responsibilities of wider specialist midwives to support smarter working	CMW	Louise Wilde	Community Transformation Plan	25-Jan-21	25-Jan-21	On track	Ongoing dedicated CMW debrief arranged	25-Jan-21	
WL 16	Well-Led	Focus on Leadership and Development	Matron Team visibility and robust governance procedures in place including reporting mechanisms/escalation and performance management as required	CMW	Louise Wilde Shelley Colley Fiona Macaron	Community Transformation Plan	25-Jan-21	25-Jan-21	Delayed, but will complete	Need to increase Matrons visibility in CMW teams	25-Jan-21	
WL 17	Well-Led	Focus on Leadership and Development	Team Managers to be visible within teams within ALL community venues inclusive of Holte/WBA	CMW	Louise Wilde	Community Transformation Plan	25-Jan-21	25-Jan-21	On track	Need to increase Matrons visibility in CMW teams	25-Jan-21	
WL 18	Well-Led	Focus on Leadership and Development	Build Trusting Relationship at all levels	CMW	Louise Wilde	Community Transformation Plan	25-Jan-21	25-Jan-21	On track	Ongoing monthly monitoring through LIA's and visible presence	25-Jan-21	
WL 19	Well-Led	Review of the Trust's maternity governance processes	Promoting a safe culture throughout the maternity unit	All Areas	Helen Hurst Claire Hubbard	Triumvirate Action Plan	03-Feb-21	01-Mar-21	Delayed, but will complete	Working with Claire Hubbard Ability to use speak up guardian.	01-Mar-21	
WL 20	Well-Led	NNU Team	Access to Triumvirate for all staff via staffing meetings to speak up	All Areas	Triumvirate Leads	Triumvirate Action Plan	03-Feb-21	03-Feb-21	On track	Monthly Staffing meetings with all staff with HOM.	03-Feb-21	
WL 21	Well-Led	Staff Training and working together	Distribute letter to all staff setting out expectations regarding behaviour and reassurance that they will be supported	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	24.7.20 Letter finalised and agreed by NM. 2.8.20 Email to Directorates to email and send out to all staff	01-Apr-21	

WL 22	Well-Led	Staff Training and working together	Trust stance on bullying, racism and undermining	All Areas	Group Trust	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed		01-Apr-21
WL 23	Well-Led	Staff Training and working together	Circulate dates of staff Drop in sessions	All Areas	Neil Shah	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	24.7.20 Email finalised and agreed by NS	01-Apr-21
WL 24	Well-Led	Staff Training and working together	Obtain most recent Maternity & PNM We Connect survey results	ADAU All Areas	Triumvirate Leads	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	17.6.20 Email request sent to Ruth Wilkin 23.7.20 Chaser email sent to Ruth Wilkin and Chilia Dawo. 31.07.20 Email received with results of maternity and health visiting survey	01-Apr-21
WL 25	Well-Led	Staff Training and working together	Contact all leavers in last 6 months to discuss their reasons for leaving	All Areas	Helen Hurst	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	List received and contact made to employees	01-Apr-21
WL 26	Well-Led	Staff Training and working together	Finalise, print and distribute directorate local induction folders to all staff including new starters	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed		01-Apr-21
WL 27	Well-Led	Staff Training and working together	Finalise, print and distribute to all admin and clinical areas in the group "Get to know you" poster of Group and directorate leadership teams with roles and responsibilities	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	emailed to everyone in the Directorate	01-Apr-21
WL 28	Well-Led	Staff Training and working together	Send email and letter to all midwives clarifying roles and responsibilities for the Director of Midwifery and the Head of Midwifery	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	23.7.20 ESR updated with new job title. SC sent LW new JD and PS	01-Apr-21
WL 29	Well-Led	Staff Training and working together	Review take up of staff who have completed resilience training	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	23.7.20 Request for information submitted to Nora Parson	01-Apr-21
WL 30	Well-Led	Staff Training and working together	Review take up of managers who have completed Having difficult conversations training	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	23.7.20 Request for information submitted to Nora Parson	01-Apr-21
WL 31	Well-Led	Staff Training and working together	Review participation rates of Maternity Action Learning sets	All Areas	Helen Hurst	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	Positivity meeting is taking place every Tuesdays with all areas	01-Apr-21
WL 32	Well-Led	Staff Training and working together	Review take up of Mental Health training for managers	All Areas	Helen Hurst	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	23.7.20 Request for information submitted to Nora Parson	01-Apr-21
WL 33	Well-Led	Staff Training and working together	Focus group session with professional midwifery advocates	All Areas	Helen Hurst	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed		01-Apr-21
WL 34	Well-Led	Staff Training and working together	Review take up and findings of 'Rate your day'	All Areas	Helen Hurst	Staff Values Action Plan	01-Mar-21	01-Apr-21	Not yet commenced		01-Apr-21
WL 35	Well-Led	Staff Training and working together	Staff survey analysis – we Connect – team entry to Pioneer programme where appropriate	NNU	Phil Velempini Louise Wilde	Staff Values Action Plan	01-Mar-21	01-Apr-21	Not yet commenced	Delayed due to COVID and staffing challenge on NNU.	01-Apr-21
WL 36	Well-Led	Staff Training and working together	Review take up by Directorate We Learn poster competition	All Areas	Helen Hurst	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	3.8.20 Email to directorates to collate information	01-Apr-21
WL 37	Well-Led	Staff Training and working together	To use the output of PDR moderation to inform discussions with managers about their application of scoring	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed		01-Apr-21
WL 38	Well-Led	Staff Training and working together	To review the allocation of TNA over last 2 years to establish if training opportunities are applied fairly	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed		01-Apr-21
WL 39	Well-Led	Staff Training and working together	Posters issued to staff of support services available to raise concerns	All Areas	Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed		01-Apr-21
WL 40	Well-Led	Staff Training and working together	Promotion to staff of availability of mental health apps.	All Areas	Triumvirate Leads	Staff Values Action Plan	01-Mar-21	01-Apr-21	Completed	Details included in letter issued to staff on 28.7.20	01-Apr-21
WL 41	Well-Led	Staff Training and working together	Review take up of Programme for huddles and cuddles	All Areas	Triumvirate Leads	Staff Values Action Plan	01-Mar-21	01-Apr-21	Significant delays	Delayed due to COVID. Launch in July 21	01-Apr-21
WL 42	Well-Led	Staff Training and working together	Health and Well Being Pop up roadshows across community Teams	CMW	Triumvirate Leads	Staff Values Action Plan	01-Mar-21	01-Apr-21	Delayed, but will complete	To be launched in CMW away day in May 21	01-Apr-21
WL 43	Well-Led	Staff Training and working together	Launch Monthly Funky Friday events + promotion of team / directorate social events	All Areas	Triumvirate Leads	Staff Values Action Plan	01-Mar-21	01-Apr-21	Delayed, but will complete	Delayed due to COVID, but to re-launch in July 21	01-Apr-21
WL 44	Well-Led	Co-creating kinder culture in the Maternity Directorate	Support required to address Maternity culture	All Areas	Helen Hurst	Maternity Services Culture	01-Feb-21	01-Mar-21	On track	Commissioned external provider to support the Maternity service to co-create culture via motivation and skills to role model the ambition.	01-Mar-21
WL 45	Well-Led	Review of Safety Culture and learning	External review into Governance and shared learning into how this is disseminated and embedded.	All Areas	Helen Hurst Claire Hubbard	Maternity Services Culture	01-Nov-20	01-Apr-21	Delayed, but will complete	Scoping commenced 11/12, and commissioned services. Date TBC	01-Apr-21
WL 46	Well-Led	Review of Safety Culture and learning	Review/interrogate SCOR survey (Safety Culture 2018) triangulated against the following: Freedom to speak up, staff surveys, listening into action (2020)	All Areas	Helen Hurst	Maternity Services Culture	01-Nov-20	01-Jan-21	Delayed, but will complete		01-Jan-21
WL 47	Well-Led	Roles and responsibilities of senior leadership team	Share roles and responsibility of DGM in QIHD/Ops meetings (18 th Feb) and Directorate. To meet as a Tri every week to discuss Directorate business.	Triumvirate	Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	18-Feb-21	Completed		18-Feb-21
WL 48	Well-Led	Roles and responsibilities of senior leadership team	To meet as a Tri every week to discuss Directorate business.	Triumvirate	Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	18-Feb-21	Completed	To plan in dates after consulting with leads	18-Feb-21
WL 49	Well-Led	Roles and responsibilities of senior leadership team	Each lead to take ownership of the production of the slides and reporting for Directorate review	Triumvirate	Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	18-Feb-21	Completed	Slide decks on S:drive for each lead to complete.	18-Feb-21
WL 50	Well-Led	Roles and responsibilities of senior leadership team	Staff to be advised via Email and News letter of vacancies as they are advertised within the unit	Triumvirate	Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	18-Feb-21	Completed	All adverts for current vacancies to be shared with all staff via Directorate news letter .	18-Feb-21
WL 51	Well-Led	Enhanced Safety	Roll out agreed WCH Group service monthly meetings utilising agreed agenda /Terms of Reference (TOR)/Minutes/Agreed Actions: • RK and Matrons • Matrons and Team Managers • Team Managers Family (Team)	CMW	Shelley Colley Randeep Kaur Fiona Macaron	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Completed	Dates are all planned in	31-Mar-21
WL 52	Well-Led	Enhanced Safety	Community midwives to be represented at QIHD sessions	CMW	Randeep Kaur	Community Midwifery Transformation	25-Jan-21	30-Apr-21	Significant delays	Unable to progress at present due to staffing challenges however scoping out a rota	30-Apr-21
WL 53	Well-Led	Enhanced Safety	Survey monkey to support Community Transformation	CMW	Fiona Macaron Shelley Colley Randeep Kaur	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Completed	Complete	31-Mar-21
WL 54	Well-Led	Enhanced Safety	Community service wide Listening into Action event	CMW	Triumvirate Leads Randeep Kaur	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Planning in place	31-Mar-21
WL 55	Well-Led	Enhanced Safety	Support communication with Community Midwifery teams: • Community Newsletter • Emails • Daily Huddles documented and saved to shared folders/drives • Professional Update Forum • Team meetings	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-May-21	On track	First CMW Newsletter been sent out 12/03/21 named "Community Ties". Community Forums are planned in 25th March. Team Meeting are still to be confirmed	31-May-21

WL 56	Well-Led	Enhanced Safety	Training package to be devised and all staff to be trained with expected standards incorporating Record Keeping Standards and any agreed points of contacts with women during AN/PN period. Plus any additional	CMW	Fiona Macaron Shelley Colley Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-May-21	Completed	Jo Bryer Digital midwife working towards	31-May-21
WL 57	Well-Led	Focus on Leadership and Development	Enabling staff to speak up confidentially	Directorates	Group Trust	Staff Values Action Plan	10-Mar-21	01-Apr-21	On track	Chief Nurse, Group Director of Operations and Group Director is undertaking speak up sessions for the clinical group. These are running 15th & 22nd March 2021.	01-Apr-21
WL 58	Well-Led	Focus on Leadership and Development	WCH development sessions in place running across all three Directorates	Directorates Triumvirate	Group	Staff Values Action Plan	04-Jan-21	31-Dec-21	On track	Every month development sessions are been run to aid and develop all senior leaders across all three Directorates	31-Dec-21
WL 59	Well-Led	Visibility	Increase visibility for Community Matrons across the Community teams	CMW	Fiona Macaron Randeep Kaur Shelley Colley Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Delayed, but will complete	Meeting Matrons on 18/03/21	31-Mar-21
WL 60	Well-Led	Staff Training and working together	Sharing of Maternity and Perinatal journey with all staff in the Directorate	All Areas	Helen Hurst Neil Shah	Safety Culture	25-Feb-21	31-Mar-21	Completed	QIHD session completed 13th March to share the Maternity journey to all staff	13-Mar-21
WL 61	Well-Led	Focus on Leadership and Development	Robust Supervision between Triumvirates and Group directors	Triumvirate	Group	Staff Values Action Plan	25-Feb-21	31-Mar-21	On track	Regular fortnightly 2:1's in place to link in with the Triumvirate	13-Mar-21
WL 62	Well-Led	Focus on Leadership and Development	Quarterly Speak up events scheduled within Directorate with Trust Executive team	Triumvirate	Group Trust	Staff Values Action Plan	25-Feb-21	31-Mar-21	On track	Medical director/ Chief Nurse/ Chief Operating Officer and Group directors to complete a regular speak up events within Directorate	13-Mar-21
WL 63	Well-Led	Focus on Leadership and Development	Regular quarterly attendance from Trust executive Team at QIHD	Triumvirate	Trust Group	Staff Values Action Plan	25-Feb-21	31-Mar-21	Delayed, but will complete	to arrange timetable in conjunction with Executive team and group directors	13-Mar-21

Maternity Transformational Plan 2021

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Ockendon Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Community Transformational Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Triumvirate Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
LNMS Patient Survey Monkey	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine
Safety Culture Action Plan	S:\W&C Clinical Group Board Papers\Group Action Plan Monitoring Database\Maternity and Perinatal Medicine

Current Date:
25/Mar/21

RAG	RAG Count
Completed	0
On track	0
Delayed, but will complete	0
Significant delay	0
Not yet commenced	0
Total	0

Unique ref	What theme does this action relate to?	Describe the action	Which Team has raised the action?	Who has to complete the action?	Which action plan was this originally captured in?	When did we raise this action?	When will be completing this action?	Current status of action	Progress of action to date	When was the progress last	Flag to indicate instances where an	
Item No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Progress last updated	Completion Date Lapsed (days overdue)
S 1	Safe	Mandatory Training	Ensure everyone within Directorate is compliant with the MT training (100% club)	All Areas	Triumvirate Leads	Ockendon	25-Jan-21	25-Jan-21	Delayed, but will complete	Ongoing monthly monitoring within Directorate and appropriate escalation from Team managers and ward managers to commence counselling procedures	25-Jan-21	
S 2	Safe	K2	Increase compliance in K2 professional training for Midwives	All Areas	Louise Wilde Risk & Governance Team	Triumvirate Action Plan	25-Jan-21	25-Jan-21	Delayed, but will complete	Midwives are currently at 80% compliance. Targeted work by Education Team to increase compliance. Ensure that all computers have access to K2.	25-Jan-21	
S 3	Safe	K2	Increase compliance within the medical team.	All Areas	Neil Shah Risk & Governance Team	Triumvirate Action Plan	03-Feb-21	25-Jan-21	Completed	NS to write to all Medics.	25-Jan-21	
S 4	Safe	NNU Team	Discuss with HR Performance concerns	NNU	Louise Wilde	Triumvirate Action Plan	03-Feb-21	03-Feb-21	On track	Discussion held with HR BP second meeting in progress	03-Feb-21	
S 5	Safe	Staff Training and working together	Implement consultant led labour ward rounds twice daily (over 24 hours) and 7 days per week.	Delivery Suite	Neil Shah	Ockendon	07-Jan-21	07-Jan-21	Completed	Twice daily consultant rounds already in place at 09.00/17.00 Mon-Fri and 09.00/15.00 weekends. Medical cons cover rota 9hrs/week resident on Unit. Consultant is present on labour ward for 12 hours (08.30-20.30) Mon-Fri. Cons presence 20.30-08.30 Mon/Tues. Out of hours on call is covered and weekend working is 08.30-15.30 resident; thereafter on call. Dedicated cons ward rounds minimum of twice a day with LW team (junior doctors/MW Coordinator); all management plans recorded on BDGNet	07-Jan-21	
S 6	Safe	Staff Training and working together	Confirmation that funding allocated for maternity staff training is ring fenced and any CNST Maternity Incentive Scheme (MIS) refund is used exclusively for improving maternity safety	All Areas	Trust Group	Ockendon	07-Jan-21	07-Jan-21	Completed	Ring-fenced HEF funds for Midwives and nurses over a 3 year period released this year. Training needs analysis undertaken yearly and funded by the Trust. Understanding is that the monies went into Trust account	07-Jan-21	
S 7	Safe	Managing complex pregnancy	All women with complex pregnancy must have a named consultant lead, and mechanisms to regularly audit compliance must be in place	All Areas	Neil Shah	Ockendon	07-Jan-21	01-Apr-21	Delayed, but will complete	Running dedicated Speciality clinics which are undertaken as a team/dual consultant approach. Named lead specific to each clinic. Options to work towards process for recording this named clinic/service lead consultant for each complex preg case is in hand – IT/BDGNet solution	01-Apr-21	
S 8	Safe	Managing complex pregnancy	Understand what further steps are required by your organisation to support the development of maternal medicine specialist centres	All Areas	Neil Shah	Ockendon	07-Jan-21	01-Apr-21	Delayed, but will complete	Currently we provide joint specialist clinics - renal clinic, diabetes in preg, Obs neurology, Obs Haematology and Perinatal mental health clinic. Additional dedicated specialist clinics/services run in preterm labour, multiple pregnancy, infectious disease, substance abuse, VBAC, maternal medicine, fetal growth, FGM, Hypertension in preg, Obs Anaesthetic. Joint Obs/Rheumatology pending resolution of the pandemic. Fully functional, staffed Foetal medicine Unit. Following regional request (19-20) to scope a Maternal Medicine offer across the region waiting on assigned levels. Engaged at a network level for the development of the maternal medicine networks working towards a tiered specialists centre system – supplied data and attended regional MM development meeting hosted by Spec Comm. Next meeting March 21	01-Apr-21	
S 9	Safe	Monitoring Foetal Wellbeing	Implement the saving babies lives bundle. Element 4 already states there needs to be one lead. We are now asking that a second lead is identified so that every unit has a lead midwife and a lead obstetrician in place to lead best practice, learning and support. This will include regular training sessions, review of cases and ensuring compliance with saving babies lives care bundle 2 and national guidelines.	All Areas	Risk & Governance Team	Ockendon	07-Jan-21	07-Jan-21	On track	Named Saving babies lives lead commenced substantively September 2020. Lead obstetrician is identified and in place for Labour ward. Regular review of the morning audit and CTG interpretation. Also recruiting Lead Obstetrician for the Maternity and Perinatal Directorate.	07-Jan-21	
S 10	Safe	Risk Assessment throughout pregnancy	A risk assessment must be completed and recorded at every contact. This must also include ongoing review and discussion of intended place of birth. This is a key element of the Personalised Care and Support Plan (PSCP). Regular audit mechanisms are in place to assess PSCP compliance	All Areas	Risk & Governance Team	Ockendon	07-Jan-21	07-Jan-21	Completed	BadgerNet template which shows what is completed for each lady. Antenatal care guideline in place. Saving babies lives audit in place. Risk assessment is updated on every contact and documented on BadgerNet	07-Jan-21	
S 11	Safe	Informed Consent	Trust should have the pathways of care clearly described, in written information in formats consistent with NHS policy and posted on the trust website.	All Areas	Risk & Governance Team Louise Wilde	Ockendon	07-Jan-21	07-Jan-21	Completed	All pathways of care in written and posted on Trust website in different languages. In addition audio transcript is available. BadgerNet portal offers information in multiple languages	07-Jan-21	
S 12	Safe	Safeguarding	Completion of Safeguarding business case requesting support of 2.00 WTE Band 6's	Risk and Governance Team	Louise Wilde Shelley Colley Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	04-Feb-21	Delayed, but will complete	Business case now with HOM for final clinical ratification ready to presentation to the group	04-Feb-21	
S 13	Safe	Safeguarding	Twice monthly meetings with safeguarding lead	Risk and Governance Team	Louise Wilde Shelley Colley	Triumvirate Action Plan	03-Feb-21	29-Jan-21	On track	Ensure matron oversight. Twice monthly meetings with SG lead midwife. SG supervision training commissioned for 17th and 25th May.	29-Jan-21	
S 14	Safe	Safeguarding	Ascertain current issues with safeguarding issues pertinent to Community Midwifery and agree actions	CMW	Shelley Colley	Community Transformation Plan	25-Jan-21	03-Mar-21	On track	Ongoing	03-Mar-21	
S 15	Safe	Safeguarding	Ascertain Immediate and longer term actions for Community Midwifery alongside corporate team	CMW	Shelley Colley	Community Transformation Plan	25-Jan-21	01-Oct-21	On track	Ongoing	01-Oct-21	

S 16	Safe	Safeguarding	Lack of clarity regarding safeguarding function within Community midwifery	CMW	Shelley Colley Louise Wilde	Community Transformation Plan	25-Jan-21	01-Apr-21	On track	Ongoing	01-Apr-21
S 17	Safe	Health and Well Being	Open door drop in sessions for staff every week Wednesday	CMW	Randeep Kaur	Community Transformation Plan	25-Jan-21	01-Oct-21	On track	Ongoing and in place	01-Oct-21
S 18	Safe	Safeguarding	Review current provision of Restorative Supervision, Safeguarding Supervision plus any others	CMW	Louise Wilde	Community Transformation Plan	25-Jan-21	31-Mar-21	On track	Ongoing	31-Mar-21
S 19	Safe	Health and Well Being	Review current team stress risk assessment	CMW	Fiona Macaron Shelley Colley	Community Transformation Plan	25-Jan-21	31-Mar-21	Delayed, but will complete		31-Mar-21
S 20	Safe	Health and Well Being	Survey Monkey – Way forwards Build a safe and secure infrastructure within Community Midwifery'	CMW	Randeep Kaur Shelley Colley Louise Wilde Fiona Macaron	Community Transformation Plan	25-Jan-21	01-Mar-21	Completed	Completed survey	01-Mar-21