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
	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:

	RAG Completed On track Delayed, but will complete Significant delays Not yet commenced Total	RAG Count 3 0 4 1 0 8					dd-mmm-yy	dd-mmm-yy			dd-mmm-yy			
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	When will	Current status of action	Progress of action to date	When was the			
Item No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Progress last updated	t Completion Date Lapsed (days overdue)	Evidence	
E 1	Effective	Focus on Leadership and Development	Wider updates for Maternity Services vision inclusive of Continuity of Care Local maternity services transformation Better Births Early Years Transformation Academy work (EYTA) (RK) Community Midwives clear understanding of service and links to wider trust agenda Saving Babies lives	CMW	Louise Wilde	Community Transformation Plan	20-Jan-21	25-Jan-21	Delayed, but will complete	Update required	25-May-21			
E 2	Effective	NNU Team	Robust Matron Reporting through the Matrons reports	NNU All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	17-Mar-21	Completed	Robust Reporting, ward assurance, Staffing, cleanliness, IPC audit.	17-Mar-21		S:/Maternity & S:/Mater Perinatal Directorate\	mity & atal
E 3	Effective	NNU Team	Expectations of Ward manager and Team leaders	All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	17-Mar-21	Significant delays	Update required	27-May-21	-78		
E 4	Effective	Enhanced Safety	A plan to implement the Perinatal Clinical Quality Surveillance Model,	Risk and Governance Team	Louise Wilde n Neil Shah	Ockendon	07-Jan-21	31-Mar-21		Waiting for National Direction on what the model/tool looks like. Using PRMT tool to review all cases and the shared learning and action plans are distributed across the Directorate.	27-May-21	-64		
E5	Effective	Enhanced Safety	All maternity SI's are shared with Trust boards at least monthly and the LMS in addition to reporting as required to HSIB	Risk and Governance Team	Group n	Ockendon	07-Jan-21	31-Mar-21	Completed	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.				
E 6	Effective	Staff Training and working together	Completion of Maternity & PNM Risk and Governance review, and safety implement actions and agree plan for audit of new processes.	All Areas	Risk & Governance Team Neil Shah Louise Wilde	Staff Values Action Pla	01-Mar-21	01-Apr-21		review is complete, with Directorate for approval of TORs. However the set-up of Q &S meeting is required with the appropriate TOR/Memebership	01-Apr-21	-63		
E 7	Effective	Enhanced Safety	Ascertain audits and compliance pertinent to Community Midwifery	CMW	Fiona Macaron Shelley Colley Louise Wilde	Community Midwifery Transformation	25-Jan-21	31-Mar-21		Only commenced Record Keeping end of February 21. Futher scoping is required around Entonex (gases) and home drugs	27-May-21	-64		
E 8	Effective	Enhanced Safety	Risks within community Midwifery to be reviewed to reflect current service needs	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Completed	Safeguarding and community risks need to be captured separately. Community risk needs to capture all issues for community	31-Mar-21			
E 9														
E 11														

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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: 03/Jun/21

On track	0
Delayed, but will complete	1
Significant delays	0
Not yet commenced	0
Total	5
	What thoma door this action

	Unique What theme does this act		What theme does this action	1		Who has to complete the	was this originally	When did we raise this	be completing				an action is yet to be completed	
	ref		relate to?	Describe the action	action?	action?	captured in?	action?	this action?	Current status of action	Progress of action to date	updated?	and has now	
Ite	em No. CQ	C Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status		Progress last	Completion Date Lapsed (days overdue)	Evidence
C	1 Cai	ring	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	Ockendon	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 Cai	ring	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	Ockendon	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 Car	ring	Listening to Women and their Families	Diversity Lead Post 12 moths	LMNS	Louise Wilde Consultant Midwife	LMNS	04-Feb-21	31-Mar-21	Completed	Role has been sent to HR for job matching	31-Mar-21		E39F91EA.msg
c.	4 Cai	ring	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	Completed	Work commenced with updating Maternity and NNU website. Refreshed leaflets have been updated and on BadgerNet portal	05-May-21		S:\W&C Clinical Group Board Paners\Senior
c	5 Cai	ring	Listening to Women and their Families	Maternity Tour for all services to be available online	All Areas	Triumvirate Leads	Staff Values Action Plan	11-Mar-21	01-Apr-21	Delayed, but will complete	Work commenced with comms team and held first meeting 25th April	27-May-21	-63	
С	6													
c	7													
C	8													

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	Transformational Action Plans\Maternity Staff Values Action Plan 26 July 2020 (2).doc
Ockenden Action Plan	Transformational Action Plans\NHSE Action Plan_v4.docx
Community Transformational Action Plan	Transformational Action Plans\BP Ockdeon.docx 5.\wac cimical Group Board Papers\Group Action Plan Monitoring Database\Materinity and Permatan Medicine
Triumvirate Action Plan	3:กุพลับานที่เวลาซ้าบนับ อิบัลาต Papers เซโบนิยาคนแต่การสำเหิดที่ทุกบริการ ย์ลเสอลรัยกุษให้ปฏิทัศบาริยากลับลากพอบเนกอ
LMNS Patient Survey Monkey	3. งุงเพื่อ unificat น้ำในนับ ซึ่งให้เปลี้ยีกราจในนับ Activit Plant พื้นที่แบบที่ patabase (maternity and Permatan Medicine 2 system) และ เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเปลี้ยน เป็นเป็น เป็นเปลี้ยน เป็นเป็นเปลี้ยน เป็นเปลี้ยน เป็นเป็นเป็น เป็นเป็นเป็น เป็นเป็น เป็นเป็นเป็น เป็นเป็น เป็น

Current Date: 03/Jun/21

RAG	RAG Count
Completed	18
On track	3
Delayed, but will complete	5
Significant delays	3
Not yet commenced	0
Total	70

	Г	Total	29	1				dd-mmm-yy	dd-mmm-yy			dd-mmm-yy		
	_				Which		Which action plan		When will			the	indicate	
			What the second section and second		Team has		was this originally	When did	be			progress	instances	
	nique ref		What theme does this action relate to?	Describe the action	raised the action?	complete the action?	captured in?	we raise this action?	this action?	Current status of action	Progress of action to date	last updated?	where an action is yet to	
	, cj		relate to:	Describe the death	detion:	uction:		uction:		current status of action	r rogress of action to date		Completion	
Item	n No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion Date	R/A/G Status	Progress	Progress last updated	Date Lapsed	Evidence
R 3		Responsive	Recruitment and retention	Recruitment and retention planning new incentivised plan	CMW	Ranjit Rayat	Community Midwifery Transformation	25-Jan-21	01-May-21	Significant delays	Waiting on Trust decision on funding. However in addition to work alongside HRB to understand a flexiable approach to working arrangments with CMW.	27-May-21	(days overdue)	H:\/Midwfery Recruitment and Retention Strateov.
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-Aug-21	Delayed, but will complete	LMNS has commissioned the servcie which will be completed in August 2021	27-May-21		B36D253D.msg
R 5		Responsive	Enhanced Safety	Review current caseloads inclusive of all clinics across SWBH	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	05-May-21	Delayed, but will complete	Transformational Midwife has scxoped out Cas-load SOP with matrons and building in an audit and SOP	27-May-21	-29	
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	Completed	Staff and team managers are returning every month details reflecting case-load details	27-May-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-May-21	Completed	Includes new process being devised for tracker/Allocation of work workbook/Duty Role	05-May-21		
R 9	I	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	05-May-21	Completed	Reliant upon digital working Use of electronic calendars and Duty Midwife role - Plans to be live from 3.5.21. Pilot well under way as of 19.4.21	05-May-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	Completed	Currently been reivewed in line with Duty midwife SOP and E-Calenders are in operation	27-May-21		
R 11	L	Responsive	Enhanced Safety	Once new process agreed devise pathway/systems as appropriate and communicate these across the Directorate	CMW	Louise Wilde Shelley Colley Randeep Kaur	Community Midwifery Transformation	25-Jan-21	01-Jul-21	On track	Devising communicationb stratety and survey monkey has been sent out to staff 02.06.21.	27-May-21		
R 12	2	Responsive	Enhanced Safety	Once devised work towards Single Pregnancy Record	CMW	Louise Wilde Ranjit Rayat	Community Midwifery Transformation	25-Jan-21	01-Jul-21	Significant delays	Esclated to Trust due to BI support required	27-May-21		
R 13	3	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-Aug-21	On track	Escalated to Group to support with it's implementation and sign off	27-May-21		
R 14	L	Responsive	Enhanced Safety	To review and redesign daily work allocation underpinned by a SOP	CMW	Randeep Kaur Shelley Colley Fiona Macaron	Community Midwifery Transformation	25-Jan-21	31-Jul-21	Completed	Education Task and finish group. As new SOPS/Policies required - Directory of resources to be agreed/ compiled and saved within the shared folders for each Team	05-May-21		
R 15	i	Responsive	Enhanced Safety	Plan to work towards allocating work electronically directly to all staff via Badger Link APP		Randeep Kaur Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-Mar-21	Significant delays	Escalated to Group and Execs as DPIA requires sign off which has caused significatn delays in it's launch	27-May-21	-64	
R 18	3	Responsive	Enhanced Safety	One Community team approach across Sandwell and Birmingham to support cover based upon Clinical need	CMW	Randeep Kaur Shelley Colley Fiona Macaron	Community Midwifery Transformation	25-Jan-21	31-Mar-21	On track	Matrons supporting culutral change by moving staff around and increasing visability	27-May-21	-64	

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	Completed	Matrons have new community version, and completed documents sent to R &G	05-May-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.	CMW	Louise Wilde Risk & Governance Team Fiona Macaron Randeep Kaur	Community Midwifery Transformation	25-Jan-21	30-Apr-21	Delayed, but will complete	In working progress and working with Community team in line with RCOG guidance	27-May-21	-34	
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	Completed	Effective handover in place now and evidenced in hsared drive.	27-May-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	Completed	Completed and available on S:drive	05-May-21		
R 28	Responsive	Enhanced Safety	Formulate smarter working across venues and clinics in other venues to support appointments and breeches to ensure CMW have a sustainable future home.	CMW	Fiona Macaron Shelley Colley	Community Midwifery Transformation	25-Jan-21	31-May-21		Reliant upon Digital working (Electronic allocation/Calendars) roll out pilot well underway go live date 3.5.21. Trust direction required on future venues due to cost pressures	27-May-21	-3	H:\Ranji\CMW Venues-updated \V4.docc
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		Resources due to current vacancies COVID pandemic restrictions all available on S:Drive for CMW	31-Mar-21		
R 30													
R 31													

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
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Ockenden Action Plan	Transformational Action Plans\NHSE Action Plan v4.docx
	Transformational Action Plans\BP Ockdeon.docx
Community Transformational Action Plan	5. (WAC Clinical Group Board Papers/Group Action Plan Monitoring Database/Materinity and Permatal Medicine
Triumvirate Action Plan	3: (www.c.cinticar-6/000p-60ard-Papers yolloop-Accioit Half-IniófricoTing-databas'e yn ACE/hilly And Permatar inieuicine
LMNS Patient Survey Monkey	 งงงงงงงงงงงงงงงงงงงงงงงงงงงงงงงงงงงง
Safety Culture Action Plan	3. γνώς ciniicar ἀτούρ οθάτα Papers (ατθαρ Αυτίου Pian Iviolitoring Database (waternity airu Perniatar meurcine

Current Date: 03/Jun/21

RAG	RAG Count
Completed	52
On track	2
Delayed, but will complete	7
Significant delays	0
Not yet commenced	2
Total	63

			-	Which Team	Who has to	Which action plan was this originally	When did	When will be			the progress	indicate instances	
Unique ref		What theme does this action relate to?	Describe the action	has raised the action?	complete the action?	captured in?	we raise this action?	completing this action?	Current status of action	Progress of action to date	last updated?	where an action is yet to	
Item No.	CQC Domains	Themes	Action	Team	Action Owner	Action Plan	Date Raised	Completion	R/A/G Status		Progress	Completion Date Lapsed (days overdue)	Evidence
WL 5	Well-Led	Visibility	Triumvirate weekly walkabouts across Inpatients and Outpatient areas	Triumvirate	Louise Wilde	Triumvirate Action Plan	03-Feb-21	25-Mar-21	Completed		25-Mar-21		Ht Wanit Rayat docx
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	Completed	Invitation sent to each member of staff to attend the LIA event .Staff feedback so far to be shared	05-May-21		
WL 7	Well-Led	Visibility	Matron of the day to be implemented 08 th Feb to enable coverage from 08:00-17:00om 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 B7 manager of the day. Robust handover to the manager on call at 5pm.	08-Feb-21		H.\Duty Matron June 21.docx
WL 8	Well-Led	Visibility	Increase visibility of Consultant Midwife across all areas to promote the role od Consultant midwife	All Areas	Consultant Midwife	Triumvirate Action Plan	03-Feb-21	03-Feb-21	Completed	Completing daily walk-about on MLU and DS	03-Feb-21		
WL 9	Well-Led	Visibility	Increase visibility of HOM for the Community Midwives by working in community at community venues such as AVFC/WBA/SGH	All Areas	Louise Wilde	Triumvirate Action Plan	03-Feb-21	12-Feb-21	Completed	Twice a month work from community venues	12-Feb-21		
WL 10	Well-Led	Focus on Leadership and Development	Triumvirate LIA's to be implemented across the Directorate	Triumvirate	Consultant Midwife Triumvirate Leads	Triumvirate Action Plan	03-Feb-21	03-Feb-21	Completed	Working from community venues . Increase visibility around the areas.	05-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	Completed	Contacted RCM for bespoke Leadership workshops commences in 11th June	31-Mar-21		
WL 14	Well-Led	Focus on Leadership and Development	Roles and responsibilities and for Community team managers supported through monthly 1:1's	CMW	Louise Wilde Shelley Colley Fiona Macaron	Community Transformation Plan	25-Jan-21	25-Jan-21	Completed	Matrons having monthly 1:1's with team managers	27-May-21		
WL 15	Well-Led	Focus on Leadership and Development	Strategic vision of Maternity to be shared across maternity services.	CMW	Louise Wilde	Community Transformation Plan	25-Jan-21	25-Jan-21	Delayed, but will complete	Maternity vision to be shared across all the Directorate	27-May-21	-129	
		Focus on Leadership and Development	Clarify roles and responsibilities of wider Specialist Midwives.	All Areas	Fiona Macaron Jade Hellier Shelley Colley	Community Transformation Plan	25-Jan-21	01-Jul-21	On track	SPW to be invited to the next community Forum to detail there role and responsibility	27-May-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	Completed	Need to increase Matrons visibility in CMW teams	05-May-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	Completed	Need to increase Matrons visibility in CMW teams	05-May-21		
WL 18	Well-Led	Focus on Leadership and Development	Build trusting relationship at all bandings	CMW	Louise Wilde Triumvirate Leads	Community Transformation Plan	25-Jan-21	25-Apr-21		Commenced Tim Keogh' Maternity Culture work and the work undertaken by Debbie Graham.	27-May-21	-39	
WL 19	Well-Led	Review of the Trust's maternity governance processes	Promoting a Safety 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.	27-May-21	-94	
WL 20	Well-Led	Focus on Leadership and Development	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	Completed	Monthly Staffing meetings with all staff with HOM and Directorate Lia completed 25th March	23-Mar-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' across all Directorates	All Areas	Helen Hurst Group	Staff Values Action Plan	01-Mar-21	01-Apr-21	Not yet commenced		01-Apr-21	-63	
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 waiting for the programme to recommence	05-May-21	-63	
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	Completed	Handovers have commenced back on Delivery suite and NNU at 12.00 daily with the LMNS	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	Completed	Group leads with Exec sponsor are doing coffee and chats over the next 12 months	01-Apr-21		

WL 43	Well-Led	Staff Training and working together	Launch monthly social events across Directorate	All Areas	Triumvirate Leads	Staff Values Action Plan	01-Mar-21	01-Jul-21	Completed	Monthly senior team "catch-ups" in place over lunch time. First one took place in May 2021 27-May-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	Delayed, but will complete	Commissioned external provider to support the Maternity service to co-create culture via motivation and skills to role model the ambition.	-94
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	Completed	Scoping commenced 11/12, and commissioned services. Date TBC 05-May-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	Completed	Invested in external agency t completed Maternity Safety Culture work 05-May-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	Delayed, but will complete	Forums are noiw up and running dedicated to CMW, however due to the increase of staffing shortages a dedicated QIHD is delayed and looking at rotating staff to attend QIHD 27-May-21 rather having a separate QIHD.	-34
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	Delayed, but will complete	Planned June/July 21 - moved Oct/Nov due to speaker availability 27-May-21	-64
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	Completed	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 30-Apr-21	
WL 57	Well-Led	Focus on Leadership and Development	Enabling staff to speak up confidentially by creating safe spaces and re-looking at how each member of the Triumvirate team positions themselves within the Directorate	Directorates	Triumvirate Leads	Staff Values Action Plan	10-Mar-21	01-Apr-21	Delayed, but will complete	To re-locate in separate offices to allow staff to approach Triumvirate leads. CD is already in a separate office. 27-May-21	-63
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	Completed	Every month development sessions are been run to aid and develop all senior leaders across all three Directorates 05-May-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	05-Apr-21	Completed	Meeting Matrons on 18/03/21 and cleared diaries to place themselves into the community Mid venues 05-May-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	Completed	Regular fortnightly 2:1's in place to link in with the Triumvirate leads and monthly Directorate reviews if additional escalation is required	
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	Completed	Medical director/ Chief Nurse/ Chief Operating Officer and Group directors to complete a regular speak up events within Directorate	
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	Completed	to arrange timetable in conjunction with Executive team and group directors 05-May-21	
WL 64	Well-Led	Clinical Parnways	SOP to be devloped for clear roles and responsabilities for when the On-call for CMW who are working 5.00-20:00 every day	CMW	Fiona Macaron Shelley Colley	Community Tranformation Plan	01-Jun-21	01-Jul-21	On track	SOP scoped, need to finalise with Team managers 02-Jun-21	
WL 65											
WL 66											
WL 67											

Legacy Action Plans	Link to Action Plan
Maternity Values Action Plan	Transformational Action Plans\Maternity Staff Values Action Plan 26 July 2020 (2).doc
Ockenden Action Plan	Transformational Action Plans\NHSE Action Plan_v4.docx
Community Transformational Action Plan	Transformational Action Plans\BP Ockdeon.docx 5.\wac chinical group board rapers\group action rian monitoring batabase\materinty and reminatal medicine
Triumvirate Action Plan	3. ywśc. conticar shody solaru Pápers y of Copraction Phát i iniófnito Ting of taquasis y waitin i North Phát i dran we urune.
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Current Date: 03/Jun/21

RAG Count

Completed	17
On track	1
	-
Delayed, but will complete	2
Significant delays	0
Not yet commenced	0
Total	20
10tai	20

		Total	20					dd-mmm-yy	dd-mmm-yy			dd-mmm-yy		
	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?		Current status of action	Progress of action to date	When was the progress last updated?	Flag to indicate instances where an	
It	em No.	CQC Domains	Themes	Action	Team		Action Plan	Date Raised	Completion	R/A/G Status	Progress	Progress last updated	Completion Date Lapsed (days overdue)	Evidence
S	1	Safe	Mandatory Training	Ensure everyone within Directorate is compliant with the clinical MT training	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	27-May-21	-129	S:\Maternity & Perinatal Directorate\
s	2	Safe	К2	Increase compliance in K2 professional training for Midwives	All Areas	Louise Wilde Risk & Governance Team	Triumvirate Action Plan	25-Jan-21	25-Jan-21	Completed	Midwives are currently at 80% compliance . Targeted work by Education Team to increase compliance. Ensure that all computers have access to K2.	05-May-21		S:\Maternity & Perinatal Directorate\
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	e 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 98hrs/week resident on UnitConsultant 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			
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 HEE 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. Need to look at the audit eleemnt which remains incomplete.	27-May-21	-63	
S	8	Safe		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	Completed	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	Completed	Named Saving babies 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.	05-May-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 PCSP 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	Intormed 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	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	CMW	Louise Wilde Shelley Colley Ranjit Rayat	Triumvirate Action Plan	03-Feb-21	04-Feb-21	Completed	Business case now with Trust for final approval	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	Completed	Ensure matron oversight. Twice monthly meetings with SG lead midwife. SG supervision training commissioned for 17th and 25th May. Post has now moved to the corpotate team	05-May-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	Completed	Action plan in place along with Business case to support safegurading Team. SC to obtain further clarity via corporate team. Vacancy advertised as current lead leaving. Discussions taking place to reloacte respurce and team to corporate team	05-May-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	Completed	Action plan in place along with Business case to support safegurading Team. SC to obtain further clarity via corporate team. Review 3.4.21. Vacancy advertised as current lead leaving. Discussions taking place to reloacte respurce and team to corporate team	05-May-21
S 16	Safe	Safeguarding	Lack of clarity regarding safeguarding function within Community midwifery	смw	Shelley Colley Louise Wilde	Community Transformation Plan	25-Jan-21	01-Apr-21	Completed	Action plan in place along with Business case to support safegurading Team. SC to obtain further clarity via corporate team. Review 3.4.21. Vacancy advertised as current lead leaving. Discussions taking place to reloacte respurce and team to corporate team	05-May-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	Completed	Action plan in place along with Business case to support safegurading Team. SC to obtain further clarity via corporate team. Review 3.4.21. Vacancy advertised as current lead leaving. Discussions taking place to reloacte respurce and team to corporate team	05-May-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	Completed	Action plan in place along with Business case to support safegurading Team. SC to obtain further clarity via corporate team. Review 3.4.21. Vacancy advertised as current lead leaving. Discussions taking place to reloacte respurce and team to corporate team	05-May-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	Completed		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