

Board of Directors Meeting: September 2024

Agenda item	CNST INFORMATION PACK Appendix 25		
Report Title	Minutes of the Quad/Safety Champions Quarterly Meeting Q1		
Executive Lead	Hayley Flavell, Executive Director of Nursing		
Report Author	Kim Williams Interim Director of Midwifery		
CQC Domain:	Link to Strategic Goal:		Link to BAF / risk:
Safe	Our patients and community	√	Trust Risk Register id:
Effective	Our people	√	
Caring	Our service delivery	√	
Responsive	Our governance	√	
Well Led	Our partners	√	
Consultation Communication	Maternity Governance Committee, August 2024 W&C Divisional Committee Meeting, August 2024 Quality and Safety Assurance Committee, August 2024 LMNS/PNQSG TBC		
Executive summary:	These are the minutes from the quarterly Safety Champions/W&C Quad meeting as per Safety Action 9.		
Recommendations for the Board:	The Board is asked to: Receive the report in line with CNST Safety Action 9.		
Appendices:	None		

Perinatal Quad / Board Safety Champions Quarterly Meeting
Monday 29th July 2024
MS Teams
MINUTES

In Attendance	Kim Williams	Interim Director of Midwifery
	Carol McInnes	Divisional Director of Operations
	Julie Plant	Divisional Director of Nursing
	John Jones	Executive Medical Director
	Sarah Dunnett	Non-Exec Director
Apologies	Andrew Sizer	Divisional Medical Director
	Mei-See Hon	Obstetric Clinical Director
	Annemarie Lawrence	Director of Midwifery

	Welcome and apologies
	Welcome and apologies were noted as above. This meeting has been set up to satisfy the ask of Safety Action 9. KW and CMc to clarify re: CNST requirements due to CD being unable to attend.
	Declarations of Conflicts of Interest
	No declarations made.
	Perinatal Culture and Leadership Development Programme (PCLDP)
	CMc update, course is completed, correspondence received last week from Improvement manager working with West Midlands Patient Safety Collaborative (PSC), part of health Invasion West Midlands is now leading on the programme. Matneo programme have asked PSCs to support Quads to support leadership capacity, capability and improvement related to the safety culture within maternity and neonatal units. They have developed a support offer to share with SaTH and to build on the programme and current improvement work. They have raised questions relating to the governance infrastructure for the project working groups which is aligned to the MTP work. A meeting is to be set up in due course.
	Understanding Local Culture
	KW highlighted that looking at complaints, Incidents and recent CQC maternity survey we are exploring how we improve the culture aligned to behaviours and communication with service users. Overall, the CQC survey was promising, some of the qualitative comments were disappointing. The service is in the process of implementing quality improvement programmes. Community, Triage, Antenatal Clinic, Diabetes, Postnatal Ward are in the process of registering QI projects and subsequent engagement events with staff and service users through MNVP. The aim of each project is to look at efficiency and experience within in each. Postnatal Ward has received

	<p>negative comments via complaints and CQC survey, this is being addressed through the QI project.</p> <p>SD discussed politeness and being proactive, suggestion made relating to short observational framework as an example of improving communication. KW agreed that this is something that the SLT could implement. CMc advised that Culture remains an important element of the People and Culture Workstream of the MTP. The next phase of planning is a workshop focussing on culture, providing support for staff addressing unprofessional behaviours. CMc suggested a broader discussion is needed pertaining to engagement. JP highlighted the lack of a senior leadership team in the neonatal area, a matron has been successfully appointment, the ward manager post is out to recruitment.</p> <p>JP discussed complaints pertinent to communication, KW highlighted some recent complaints relating to communication with service users. SD raised a point relating to seldom heard groups and outcomes, questioning if they are over-represented in complaints. CMc highlighted the work of the EDI midwife and the plans moving forward from Good to Outstanding in addressing inequalities and diversity within the workforce. SD highlighted the challenges of being the only organisation in the LMNS, SD has reached out to neighbouring Trusts, networking with Safety Champions.</p>
	Cultural Score Survey
	<p>CMc advised that a piece of work is to be completed following the Culture Score Survey results, however the uptake for this survey has been light. A meeting is due to take place to undertake an action plan.</p>
	Safety Champions Dashboard
	<p>The Maternity and Neonatal Locally Agreed Dashboard was shared during the meeting. KW explained that this dashboard gives us an opportunity to assure the Safety Champions and provides the overarching position of the division. This works well as it is an opportunity to escalate concerns and review quarterly.</p>
	AOB
	<p>JJ advised he was looking into work relating to Duty of Candour.</p>
	Closing remarks
	<p>Meeting closed.</p>
	Date of Next Meeting
	TBC

