DRAFT Terms of Reference

Review of Quality indicators for the SBUHB Maternity Service

Commencing April 2022

This document sets out the terms of reference for an independent assessment of SBUHB Maternity services against the all Wales performance metrics/clinical data and give us a view in terms of any areas the Health Board are outliers and the Health Boards position against the other Health Boards in Wales.

BACKGROUND

In 2020, concern was raised regarding a delay in the provision of a continuing health care packages along with care provided by the Children's Community Nursing (CCN).

As part of the response to this, a [redacted] process was undertaken in September 2021. As part of the [redacted] outcome, it was agreed the Health Board would commission an external short review of the Health boards complaint handling process – [redacted] was commissioned to undertake this review.

The review has been completed and there are a number of inaccuracies/assumptions being made by [redacted] which as a Health Board, we are feeding back as part of the factual accuracies review. [redacted]

[redacted]

Both reports developed by [redacted], have been shared [redacted] and the Health Board now aims to commission an independent external expert in order to establish whether there were any omissions that constitute clinical negligence. This will also be shared with the family once completed.

[redacted] The key question for the Health Board and families using the maternity services and the general public is the safety of the service provided.

The review is required to identify if SBUHB is an outlier in any of the reportable Key Performance Indicators, and where the Health board sits in comparison the other Maternity Services across Wales.

PURPOSE

The purpose of this review therefore is to describe any quality and safety issues, so the Health board can be assured of the quality of its Maternity Services. If any issues are raised, it will also afford the Health Board the opportunity to rectify and ensure services are of a high standard.

SCOPE AND OBJECTIVES

- Review relevant Health Board records and documents to consider the performance of the current service, supported by data and where possible benchmarked against national standards.
- Describe the experience of care provided to women and their babies by the Health Board's maternity services, based on local patient feedback and experience data
- Advise on future improvements and maintenance of quality, patient safety and assurance mechanisms

KEY DELIVERABLES

- A descriptive and analytical report with recommendations suitable for publication.

MEMBERSHIP

- Members of the Peer Review Team to be nominated by the Maternity and Neonatal Network.
- This will also include members of the SBUHB Maternity Services Senior Leadership Team

METHODOLOGY

- As agreed between SBUHB and the Review Team in line with the scope and objectives outlined above. It is anticipated this will take the form of a "table-top" review of the necessary data.

EXPECTATIONS FROM THE REVIEW

It is expected that the Review Team will:

- Have regular contact with the Senior Leadership Team within the SBUHB Maternity Service during the process of the review to share any immediate patient safety concerns;
- Escalate any immediate concerns that might be identified during the review process in real-time so that remedial action can be taken as appropriate;
- Produce a written report with key recommendations for action and improvement as soon as possible after the conclusion of the review

[redacted]

From: [redacted]
Sent: 30 March 2022 14:25
To: [redacted]
Subject: RE: Maternity review INC-152698
Attachments: [redacted]

[redacted] are aware of this but not for sharing other than those mentioned

The family have received a copy from the independent reviewer

From: [redacted]
Sent: 30 March 2022 14:22
To: [redacted]
Subject: RE: Maternity review INC-152698

Hi [redacted]

Thanks, I will speak with [redacted] on her return from leave.

[redacted]

Regards [redacted]

From: [redacted]
Sent: 30 March 2022 14:01
To: [redacted]
Subject: FW: Maternity review INC-152698

Hi [redacted]

Just wanted you to be aware of this one given the concerns raised by [redacted] birth and the SI report as well as the Shrewsbury report which has been released today

[redacted] has mentioned whether the Service Group need to discuss with L&R if any breaches of duty are being identified

Happy to discuss if you need to

[redacted]

[redacted]

[redacted]

From: [redacted]
Sent: 18 March 2022 12:56
To: [redacted]

Subject: RE: [redacted] Review

I agree with [redacted] points. Few updates:

- [redacted]
- [redacted]
- [redacted]
- [redacted]

From: [redacted]
Sent: 18 March 2022 11:57
To: [redacted]

Subject: RE: [redacted] Review

[redacted]

From: [redacted]
Sent: 18 March 2022 10:55
To: [redacted]

Subject: RE: [redacted] Review

[redacted]

- In many ways, this makes it easier in that we progress via a more formal, legal route
- Carry on with our plan in terms of review, assurance and validation for [redacted] comments
- Carry on with our plan in terms of review, assurance and validation of our Maternity KPIs
- [redacted]
- [redacted]
- Maintain our overarching improvement plan for the Children's Service
- Develop a pro-active comms plan and approach
- Have updated the Maternity team, and need to maintain close links/support
- Keep Board in the loop
- Keep WG in the loop
- We will need to pull this together into a plan – just so we all know where we are, provide evidence to our response etc?

[redacted]

15 March 2022

[redacted]
Swansea Bay Health Board
(by email)

[redacted]

REVIEW OF COMPLAINT HANDLING

Thank you for your letter of 14 March 2022. It seems that you have fundamentally misunderstood the nature and purpose of the review commissioned by [redacted] that I agreed to carry out. My brief was very clear: to identify any opportunities for learning, both in general and in particular with reference to how the evident unhappiness expressed by [redacted] could have been avoided. I was not asked to review any changes that had been made since, and I was not asked to interview staff – in fact [redacted] was explicit that she did not wish this to happen. I am surprised that you were not briefed on this at the outset, having received explicit assurance that the Chair and Chief Executive of the Health Board were content with the remit of the review that I had agreed to undertake.

I have carried out the review requested on the basis agreed, and have offered suggestions that in my view would have significantly improved the response to [redacted] throughout. I have not attempted to judge whether the Health Board or its staff have passed or failed against the minimum standards set out in applicable guidance, which was never my remit.

In line with the process set out at the outset, I agreed to send you a draft copy of the report to offer you the chance to point out any matters of factual accuracy that you wanted me to consider. I did not ask you to comment on matters where your judgement differs from mine: it is the nature of an independent report that the findings remain independent and not subject to alteration by others. My notes on your specific bullet points need to be read in that context.

- The final report now includes a brief explanation of the method adopted.

- The Covid-19 pandemic is referred to and acknowledged as a source of delay; nevertheless any suggestions for improvement would have to include reducing delay.

- I was not asked to assess the improvement plan and have not done so.

- The sections following on from "the response fell short in both respects" under the headings of Investigations and Continuing Care Assessment set out in what respects the response fell short. A phrase is now added to clarify that.

- There is a wealth of material on good practice in safety investigations that I am sure you do not need me to identify for you. All sources stress the importance of openness and transparency, prompt investigation and involvement of the patient and family throughout. The point is made in the spirit of alerting you to the opportunity for improvement, not as a judgement on compliance with regulations on minimum performance.

- The delay in the investigation reports is unsatisfactory, because neither needed to take as long and, again, this is not a judgement against the minimum standard required in the statutory guidance. These were not complex investigations, they involved a handful of staff, and they were internal not external.

- If you reread the sentence in your letter where you ask for my qualifications and experience as an obstetrician, you will see a perfect microcosm of an organisation responding in a closed and unconstructive manner. I have identified learning points as I was requested to do, and you have reacted with a challenge to my credentials that is at best negative and defensive, and at worst hostile and aggressive. My assessment of the maternity incident report depends on my experience as an independent investigator, where my track record speaks for itself, and you should be sure that I have looked at very many incident reports.

- [redacted] As I am sure you are aware, there is a significant difference between an independent assessment and an opinion provided in support of a legal defence. Mine was an independent assessment, offered in the spirit of identifying future learning, and it is based on the recorded documentation that the Health Board made available.

- [redacted] my suggestion was that that contact point needed to have the knowledge and authority to bring in other professionals as necessary for the welfare [redacted] that the Health

Board was caring for, which did not happen soon enough. In my view this is sufficiently explicit to require no further spelling out in the report.

[redacted] it was clear from the initial discussions with [redacted] that that they should form part of the review. In looking at them, I had a significant concern that the obvious shortcomings of the maternity investigation meant that important learning had been missed. That is why there is a side letter identifying my concerns not included in the review itself.

I welcome your decision to obtain an independent obstetric report on [redacted] maternity care, and I trust that [redacted] will be involved from the outset; your commitment to take forward further learning and to work with [redacted] is also welcome.

A final report taking into account comments on factual accuracy is attached, along with the side letter registering my additional concerns. As my review was clearly not what you wanted, although through no fault of my own, I have no intention of submitting an invoice.

Yours sincerely,

[redacted]

Bwrdd Iechyd Prifysgol Bae Abertawe
Swansea Bay University Health Board

Cadeirydd / Chair: **Emma Woollett**
Prif Weithredwr/Chief Executive: **Mark Hackett**

gofalu am ein gilydd, cydweithio, gwella bob amser
caring for each other, working together, always improving

[redacted]

Dyddiad/Date: 14th March 2022

Swansea Bay University Health Board
One Talbot Gateway
Seaway Parade
Port Talbot, SA12 7BR

Private & Confidential
Response by email: [redacted]

Dear [redacted]

I write further to your email of 22nd February 2022 which included a copy of your draft report into the complaint handling of a complex case, and a letter outlining your views of an incident investigation undertaken within the Health Board relating to [redacted].

As you are aware, the Health Board commissioned you to complete a review of the complaint handling of a complex case as agreed through a [redacted]. We would have expected to have seen a discussion with our staff on this and I understand this has not yet occurred.

I would request that you consider the following points and produce an amended report:

- Explain the methodology adopted and documents reviewed to help you produce the report. It should be made clear that you have completed the review of the complaints handling without speaking to any staff.

- The impact of the COVID19 pandemic placed an unprecedented pressure on our staff, resulting in nursing and clinical teams being allocated to areas of most need and administrative staff called away from their day jobs to support them. This did result in delays for some complaint responses being answered and this context would be helpful to be included in the report.

- Include reference to the work the Health Board has already started prior to your review which has been incorporated into an improvement plan. All serious patient safety incidents undergo an initial 72-hour rapid review in line with the National Incident Reporting Framework in Wales introduced in the Summer of 2021. Focus is on meeting with the patient or [redacted] at the outset of investigations. Complaint handling training has been provided and the Public Service Ombudsman's complaints trainer has also provided training to staff.

Page 1

- Early Course section. You state "The response fell short in both respects." It would be helpful to understand the detail of how the responses fell short so that we can consider the learning.

- Investigations section. You state “contrary to good practice”. It would be helpful to include reference to the good practice and relevant standards/regulations/guidance etc.

- Investigations section. You state “The maternity report is dated June 2019 and the neonatology report September 2019, three and six months respectively after [redacted]. This delay is unsatisfactory”. It would be helpful if you could refer to evidence to support this statement. In Wales, the National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 refer to timeliness of investigations and supporting guidance which recognises that serious incidents can take 6 months to investigate. We are aware of NHS England’s timescales to complete serious incidents is also within 6 months.

Page 2

- Investigations section. You have stated “The maternity report is of poor quality, appears defensive, and omits significant features of care in labour. Both the delays and the lack of frankness are likely to have impacted adversely on the wellbeing of [redacted] from the outset.” It would be helpful to include details of your qualifications, where you practiced as a Consultant Obstetrician & Gynaecologist and when you last practiced in this field either at the start of the report or end of the report since I am unclear about your medical background. Clearly we are looking to take forward the concerns you raised and investigate them now they have been raised, but it will be an issue our own teams will no doubt raise. As the Health Board requested a review of the complaint handling we had not requested this information at the outset although it now becomes relevant in view of some of the views expressed.

Page 5

- Other Issues section. You have made the comment “*In any event, it was significantly suboptimal care, which increased the* [redacted]*concern”.* In relation to the gastrostomy site. I understand that you have been notified that the Health Board has obtained a joint report with solicitors representing the family from a Consultant Paediatric Gastroenterologist and his findings are different to those expressed by you. I would request that you remove this comment from the report and the whole paragraph.

Page 6/7

- Learning Points section. You stated, “Additionally, a named liaison person for the [redacted], with the knowledge and authority to respond to questions and bring in other professionals where necessary, would offer significant advantages”. [redacted] had a named point of contact (Head of Quality & Safety for Singelton/NPT Service Group) who met with them weekly to work through their existing and new concerns. There was also a Gold Command Executive lead group established to oversee the concerns, subject access requests and freedom of Information requests.

While the Health Board did not request a review of the serious incident investigations which took place relating to [redacted] birth and immediate aftercare, we have decided to obtain a detailed review of the report and care provided from an independent Consultant Obstetrician. We are committed to sharing this review with [redacted] as I am clear we need to maintain an open, transparent relationships with them.

There is a great deal of learning already taken forward by the Health Board and we will use this report to take forward further learning. We will work with the family to continue to improve the services we provide.

Yours sincerely

From: [redacted]
Sent: 11 March 2022 11:46
To: [redacted]
Cc: [redacted]
Subject: No Surprises Report - 09 03 2022 (002)

Hi both

Please find the attached no surprises report – this has been submitted today, and relates to a family who had raised a number of concerns over a 2-year period subsequent to their son's birth in March 2019. These related to a delay in the provision of a continuing health care package along with care provided by the Children's Community Nursing (CCN) – you would have seen the report.

[redacted] As part of the [redacted] outcome, it was agreed the Health Board would commission an external short review of the complaint handling process of this family's complaints – [redacted] was commissioned to undertake this review ([redacted]

The review into the complaints process has been completed, although there are a number of inaccuracies/assumptions being made by [redacted] which as a Health Board, we are feeding back as part of the factual accuracies review.

[redacted]

So the purpose in my emailing is to update you and to provide some context to the attached

Let us know if you want to talk through or need any further information, and we will ensure we update as this is progressed.

Best wishes

[redacted]

Subject: FW: [redacted] Review

I think we have tried here – [redacted] clearly feels [redacted] is an obstetric expert and I think we need to ascertain his expertise since I understood he was not an obstetrician . I think [redacted] was ascertaining this
I would welcome any advice you have on how we should address this now . bw

[redacted]

[redacted]

From: [redacted]
Sent: 22 February 2022 15:13
To: [redacted]
Subject: RE: Review of complaints process

Dear [redacted],

Further to previous discussion, I have spoken to [redacted]

Please find attached copies of the draft report and additional letter that we discussed. Please let me know of any factual inaccuracies that I need to take into account, by Tuesday 8 March.

If there are any queries in the meantime, please let me know.

Kind regards,
[redacted]

[redacted]

From: [redacted]
Sent: 10 March 2022 11:35
To: [redacted]
Subject: RE: Report

Dear [redacted]

It occurs to me that the deadline of 8 March for comments on factual accuracy has passed, and you have not sent anything. [redacted], I wonder if you are now intending to offer any? I would suggest that it would be reasonable to assume not, unless I hear by close tomorrow, Friday 11 March.

Kind regards,
[redacted]

[redacted]

From: [redacted]
Sent: 22 February 2022 15:13
To: [redacted]
Subject: RE: Review of complaints process

Dear [redacted],

Further to previous discussion, I have spoken to [redacted]

Please find attached copies of the draft report and additional letter that we discussed. Please let me know of any factual inaccuracies that I need to take into account, by Tuesday 8 March.

If there are any queries in the meantime, please let me know.

Kind regards,
[redacted]

[redacted]

From: [redacted]
Sent: 22 February 2022 16:31
To: [redacted]
Subject: RE: Review of complaints process

Thanks [redacted] –this is not a review of our complaints processes, but an overview of [redacted] – much of which has been picked up and reviewed previously ....

Will catch up

[redacted]

From: [redacted]
Sent: 22 February 2022 16:03
To: [redacted]
Subject: FW: Review of complaints process

Dear Both

Please see attached [redacted] draft report a letter relating to the maternity care.

I will share with the Service Group Directors to obtain factual accuracy comments.

[redacted]

[redacted]

[redacted]

From: [redacted]
Sent: 22 February 2022 16:09
To: [redacted]

Subject: FW: Review of complaints process
Attachments: [redacted]

Dear All

Please find enclosed [redacted] report which we can provide factual accuracy comments back to him before 8th March 2022. The second document has only been provided to [redacted] and relates to concern with the maternity investigation.

Please let me know if you would like to meet up to discuss.

[redacted]

[redacted]

[redacted]

From: [redacted]
Sent: 22 February 2022 16:05
To: [redacted]
Cc:

Subject: FW: Review of complaints process
Attachments: [redacted]

Follow Up Flag: Follow up
Flag Status: Flagged

Dear [redacted]

The draft report (1st document) has just been shared with [redacted] so there is the risk of social media posts, although we have reminded [redacted] that the report has been completed in line with the [redacted] The second document I understand has only been shared with [redacted]

[redacted]

[redacted]

[redacted]

From: [redacted]
Sent: 22 February 2022 15:13
To: [redacted]
Subject: RE: Review of complaints process
Attachments: [redacted]

[redacted]

From: [redacted]
Sent: 18 February 2022 14:52
To: [redacted]
Subject: RE: Review of complaints process

Dear [redacted]

Many thanks, that is good news. I will contact [redacted] but not on a Friday, to arrange a time to talk through point one. Hopefully that will take place early next week, and I will get back to you to arrange the timing on point two.

Stay safe,
[redacted]

From: [redacted]
Sent: 18 February 2022 11:41
To: [redacted]
Subject: RE: Review of complaints process

Dear [redacted]

Hope you are well and staying safe. There have been a few problems with the storm, although nothing as serious as we were anticipating at this stage. We are in the peak now until approx. 1pm and then we have been advised it will reduce in severity.

I am very grateful to you for taking the time to explain, and again I am sorry that you are in this position and grateful to you for working with us to navigate a solution. On the basis of the information you have set out in your e-mail and reassurance, I am happy for us to return to the position we discussed on the telephone, set out below.

- [redacted]
- Draft report shared with the Health Board [redacted] to undertake a factual accuracy check, screen for any GDPR/confidentiality issues and make recommendations for any redactions required. Response to be provided to [redacted] within 2 weeks of receipt of the report.
- [redacted] to provide the Health Board and [redacted] with the final report.

Perhaps you can consider and advise if you are happy to proceed as outlined above.

Thanks

[redacted]

From: [redacted]
Sent: 18 February 2022 11:10
To: [redacted]
Subject: RE: Review of complaints process

Dear [redacted]

Thank you for your email. I hope that the storm is not causing too many problems today.

I have taken some time to think about this, because I am concerned that our positions are not converging, particularly following the most recent telephone call when I understood that we had reached agreement on a way forward. It seems to me that this tracks back to a lack of trust in the process that I have been undertaking, and I guess that is understandable given that all the conversations in setting this up were with somebody who has now left, and internal communication appears to have been incomplete. Let me set out briefly what I agreed at the outset.

First, the review would be as complete as possible a look at the opportunities to do things differently, which included understanding the underlying causes as well as the mechanics. Second, it would be focused on systems and human factors, and any issues of individual conduct or competence were outwith my remit. Third, no individuals would be identified other than [redacted] if they wished to be. Fourth, the process would be independent of both Health Board and [redacted] and the Health Board would not receive the report in advance. All of this is in line with how I approach all independent investigations, and was agreed at the outset by [redacted] She subsequently emailed that she had "spoken to the Chair and Chief Executive and they are both content to proceed as we have discussed".

In keeping with that agreement, my proposed report is relatively brief, and identifies seven broad areas where there is scope for improvement in my view. It does not make recommendations, and it does not specify the detail of how (or whether) to make any changes, as those are properly for the Health Board. There is no blame attributed to anyone, and no individuals are identified or criticised.

You raise issues of litigation and information governance that I do not understand. All of the information supplied was the Health Board's, the clinical information was, I understand, specifically authorised by the [redacted], no other

family is referred to and, in fact, there is no direct use in the proposed report of any of the material. All of it will, of course, be destroyed on completion.

It seems to me that there is an underlying issue of trust in this as an independent investigation which has been undertaken in good faith. Whilst I think I understand the reasons for it, it is not a satisfactory position now, nor on which to base the next steps. In light of that, I think it is for the Health Board to say how you wish to proceed.

Best wishes,
[redacted]

From: [redacted]
Sent: 17 February 2022 20:54
To: [redacted]
Subject: Re: Review of complaints process

Dear [redacted]

We will accept your conclusions. It's more the recommendations (if you are making any) and whether they are reasonable/achievable. I am sure they are, although without seeing the report it is difficult to say.

In receiving the report, the Health Board would not alter the report, we would let you know of any factual inaccuracies and if there are any recommendations, we know we could not comply with then we would explain that to you and then as it's your report it is for you to decide how you change it or not.

[redacted] If the Health Board does not have prior site in terms GDPR checking/suggesting redactions where appropriate, then we cannot be held liable for any IG breach or any claim arising out of the report. The purpose of seeing it in advance isn't to change it, it's to highlight any issues to you for you to consider.

Let me know how you want to proceed.

Thank you

Best wishes

[redacted]

Get Outlook for iOS

From: [redacted]
Sent: Thursday, February 17, 2022 6:35:08 PM
To: [redacted]
Subject: RE: Review of complaints process

Dear [redacted]

Thank you for the phone call earlier and the plan below. It differs in one respect from what we discussed, but unfortunately it is an important difference. The fact checking needs to take place simultaneously by the Health Board and the [redacted]. As we discussed, if the [redacted] are presented with a report that has already been seen by the Health Board and subsequently amended, they are unlikely to accept that it is an independent report. When we spoke, your view was that the terms of the [redacted] would safeguard against wider dissemination before any factual accuracy amendments had been made.

I am happy to try to modify the basis on which I had agreed to take this on as far as I can consistent with this being a sustainably independent review, and given its origin in the [redacted]. Simultaneous fact-checking would fit with

that, but not prior release of draft to the Health Board. It should also be made clear that any resulting amendments will be restricted to matters of factual accuracy, not disputed conclusions.

Best wishes,
[redacted]

From: [redacted]
Sent: 17 February 2022 18:05
To: [redacted]
Subject: Review of complaints process

Dear [redacted]

Thank you for your time today. As discussed, I have set out below a plan to review the draft report and process of finalising the report.

- [redacted]
- Draft report is shared with the Health Board only initially to undertake a factual accuracy check, screen for any GDPR/confidentiality issues and make recommendations for any redactions required. The Health Board will also assess if the recommendations are reasonable and achievable. Response to be provided to [redacted] within 2 weeks of receipt of the report.
- [redacted] to review the Health Boards response and share the revised draft report with [redacted] and agree with [redacted] the timescales in which they can provide feedback on the report.
- [redacted] to provide the Health Board and [redacted] with the final report.

Perhaps you can consider the above and let me know if you are in agreement.

Best wishes

[redacted]

Rydym yn croesawu gohebiaeth yn y Gymraeg neu'r Saesneg. Atebir gohebiaeth Gymraeg yn y Gymraeg, ac ni fydd hyn yn arwain et oedi.

We welcome correspondence in Welsh or English. Welsh language correspondence will be replied to in Welsh, and this will not lead to a delay.

Mae'r neges hon yn gyfrinachol. Os nad chi yw derbynnydd bwriadedig y neges, rhowch wybod i'r anfonwr ar unwaith. Dylai unrhyw un o'r datganiadau neu'r sylwadau a wneir uchod gael eu hystyried fel rhai personal ac nid o reidrwydd yn fhai a wneir gan y Bwrdd Iechyd, na chan unrhyw ran gyfansoddol o'r Bwrdd Iechyd neu gorff cysylltiedig. Dylech fod yn ymwybodol, o dan delerau Deddf Rhyddid Gwybodaeth 2000, y gallai fod yn ofynnol i'r Bwrdd Iechyd gyhoeddi cynnwys unrhyw e-byst neu ohebiaeth a dderbynnir.

This message is confidential. If you are not the intended recipient of the message, then please notify the sender immediately. Any of the statements or comments made above should be regarded as personal and not necessarily those of the Health Board, any constituent part or connected body. Please be aware that under the terms of the Freedom of information Act 2000, the Health Board may be required to make public the content of any email received.

Rydym yn croesawu gohebiaeth yn y Gymraeg neu'r Saesneg. Atebir gohebiaeth Gymraeg yn y Gymraeg, ac ni fydd hyn yn arwain et oedi.

[redacted]

From: [redacted]
Sent: 13 October 2021 17:35
To: [redacted]
Subject: FW: Action Plans for [redacted]
Attachments: DRAFT ACTION PLAN FOR CCN SERVICES_SEPTEMBER 2021.docx; LFER Data Breach [redacted]

Hi [redacted]

This looks fine to me

Did you have time to adapt this info for the Handling plan
Quick update from [redacted]

[redacted] also informed me she has made contact the external reviewer for complaints process and is having a meeting, he is happy with the timeline and documents embedded arrangement being made to send this by secure e-mail and will then arrange to link with [redacted] at a later date
[redacted] has again tried to speak to [redacted] without success , [redacted] wondered if you have had the opportunity to link in with her
[redacted] is meeting with [redacted] to do over the Action plan for IG Breach regrettably this is not until the 5th November due to every ones availability
Think that is all for now

Thanks

[redacted]

From: [redacted]
Sent: 12 October 2021 17:48
To: [redacted]
Cc: [redacted]
Subject: Action Plans for [redacted]

Hi both

As discussed, attached are the actions plans for:

- [redacted]
- CCN services external review (pending final sign off on Friday 15/10/21)
- Data Breach Report

If you could review and add in any of your comments / suggestions that would be helpful

Many thanks

[redacted]