Meeting Date	**21 December 2021**	**Agenda Item**	**3.2**
Report Title	External Review of the Children's Community Nursing Team Service		
Report Author	Jane Phillips – Interim Head of Nursing for Children & Young People		
Report Sponsor	Gareth Howells, Executive Director of Nursing & Patient Experience		
Presented by	Jan Worthing, Service Group Director, NPTSSG		
Freedom of Information	Open		
Purpose of the Report	To provide the Quality & Safety Committee with an overview the findings of an external review of the Children's Community Nursing Team Service, share the actions being taken in response to the recommendations and provide an update on the progress made since the report was released.		
Key Issues	• Lack of clear team governance structures with concerns being managed internally with no robust consistent process in place. • The service model for the children's community nursing focused primarily on continuing care and not the delivery of the wider community provision of care. • Limited evidence of the team working in partnership with families. • The culture of care was identified as being complex with what appeared to be an inflexible leadership style.		
Specific Action Required ***(please choose one only)***	**Information**	**Discussion**	**Assurance**	**Approval**
	☐	☐	☒	☐
Recommendations	Members are asked to: • CONSIDER the findings of the report and implications of the quality of the service in the Health Board. • NOTE on 25th November 2021 The Board approved the action plan in response to the recommendations, noting that it will evolve in response to engagement with families and staff.			

	The Executive Director of Nursing will be accountable for the improvement plan and the Service Director and Service Nurse Director are responsible for the implementation of the plan and changes to the service. • NOTE that delivery against the action plan will be scrutinised by Quality and Safety Committee, who will keep the Board updated. • NOTE the update on progress provided within the report.

External Review of the Children's Community Nursing Team Service

1. INTRODUCTION

The purpose of the paper is to share the external report (Appendix 1) into the Health Board's Childrens Community Nursing Team to the Quality & Safety (Q&S) Committee and provide an update on the immediate actions taken by the Children & Young People (C&YP) Division since the publication of the Executive Summary and recommendations. At the Board meeting on 25 November it was agreed the Q&S Committee would receive a quarterly update on the progress made against the action plan (Appendix 2). This will be the first of such updates to the committee.

2. BACKGROUND

In the autumn of 2020 the Executive team commissioned an external review of the Children's Community Nursing (CCN) Team Service. The review was commissioned in response to concerns raised by families who used the service. The review was undertaken by two external reviewers who were commissioned for their experience in providing social care services for families with children and long term commissioning. The focus of the review was on identifying key areas of strength to build on, and areas of potential risk, where further action might be recommended.

The review focused in more detail on:

- the culture of care, particularly focussing on family involvement;
- direct experience of children and families using the service;
- direct engagement with staff within the service; and
- how professional nursing standards are delivered.

The Children's Community Nursing Service team are one of the teams at the forefront of caring for children and young people with complex needs and providing the required level of support for this cohort of families.

The reviewers spoke to families and dedicated skilled nurses and support workers, most with many years' experience. However, limitations were identified that prevented families from receiving the standard of service that given to the Health Board would have been expected or which fully represented the Health Board values. The Executive Summary of the report is attached as Appendix 1.

In summary, there were several key factors which were identified as leading the CCN team being unable to fully deliver to the Health Board standards and values:

- The lack of clear governance team structures; these were ambiguous and did not support easy oversight or the ability to identify concerning trends arising, to address issues in a timely manner, or to support decisions made. It was not possible to see how the Board could be assured as to the standards or safety of the service provided. There was also an accepted practice of incidents not being reported (via Datix) which also served to conceal emerging trends from the wider Health Board. Some immediate issues were identified at the time of the review and were addressed at the time they were raised.

- The service model; whilst this provided services for three distinct categories of children (acute, chronic and Continuing Care), Continuing Care was the primary focus and formed the basis of funded establishment for the whole service. There were concerns about key management data being captured, and its use to support the service as a whole was limited. Service design itself had built-in challenges including the time taken to deliver an approved package of care, registered nurses working office hours whilst HCSW work mostly at night, and meeting a child's needs in a family home which was also the workplace for the HCSW.

- Partnership working; The 'what matters to me' and 'voice and control' requirements that underpin the Social Services and Well-being (Wales) Act (2014) do not appear to have been reflected in the way services have been developed and offered to parents. There was little evidence to show families were partners in the delivery of care. Parents were found to be frustrated due to poor communication and relationship management from the leaders of the CCN Service, leading to a breakdown in the parent / service provider relationship. There was a perception of sanctions being imposed by the service should families complain leading to a lack of trust and / or total breakdown in the relationship with the team.

- Culture of care; This was identified as being complex with what appeared to be an inflexible leadership style. Staff were left feeling demoralised and frustrated having raised concerns relating to workload and their ability to sustain a safe service during the pandemic. No evidence was found to reassure the Board that concerns were appropriately addressed or resolved. The review highlighted that any continuing care decisions for paediatric cases were made by the adult panel who had limited knowledge to support decision making in such cases. There also appeared to be a lack of knowledge and understanding of the Continuing Care process within the wider HB management and governance arrangements, which reduced the ability to audit and monitor the implementation of the WG guidance to provide adequate assurance to the Board

- The experience of children and families; None of the families were critical of the CCN Service as a whole and many praised aspects of the service but there were concerns about specific issues which were not appropriately addressed. A recurrent theme included the Continuing Care assessment process. Many families spoke positively about the HCSWs that actually deliver the care and of Registered Nurses who helped and supported them to navigate the process to access care.

- The views of the CCN Team; In analysing the views and responses from all Registered Nurses in the team and a cross-section of HCSWs, it was clear staff were aware of the challenges and issues faced by the families and were keen to help resolve them. The review team felt the staff they met were caring and committed with innovative ideas that could help shape the team moving forward.

3. GOVERNANCE AND RISK ISSUES

3.1 FEEDBACK

- **Staff Feedback**

Formal feedback of the report findings to the staff working in the Childrens Community Nursing team commenced on 22nd November 2021 and has been via; individual staff sessions or group feedback either face to face or virtual. Each member of the team received a copy of the executive summary and recommendations. The reviewers, senior Service Group and Children & Young People Divisional management team have been in attendance at each session.

A hundred percent of the registered nursing staff have taken up the offer of feedback. However, to date just over ten percent of the unregistered workforce have received formal feedback. Further offers to meet with the reviewers and the senior team have been made.

The nursing staff have been given an opportunity to review the draft action plan and their support to contribute further to the final plan has been requested.

In addition to the wider Health Board announcement into the external review by the Chief Executive, the C&YP Division has commenced wider communication of the report and sharing of the action plan with all staff within the service to ensure the learning is shared across.

- **Family Feedback**

All the families who were originally contacted to request their participation into the review have been sent the executive summary and offered an appointment to meet with the reviewers and the senior C&YP team for verbal feedback.

At the time of writing the report six families have met with the reviewers and a further four appointments have been arranged. There are families who initially met with the reviewers as part of the external review who are yet to make contact with the Health Board.

A summary of the discussion with each of the families or groups has been taken, a copy of the record then shared with them. This provides the families with a record any actions agreed to be taken forward. It also assists the service to capture any further feedback, which can be considered for inclusion into the action plan.

Following the sharing of the report and the resulting media interest there have been a few families who have contacted the Health Board to share their experiences of the community services in particular the continuing care provision. Appointments have been arranged to meet with each of these families to hear their concerns and consider what further action can be taken. The Concerns team are supporting the C&YP Division with these meetings.

3.2 ENGAGEMENT & PARTICIPATION

- **Staff Participation**

The C&YP Division has established regular meetings with the community nursing team and the intention is to include service development and action plan progress into these meetings. Staff attending the feedback have already expressed an interest in leading on or being involved in future developments.

There are constraints to this being successful due to the current staffing levels within the team and clinical commitments. It is therefore essential that additional resources are provided to support staff to fully contribute to or participate in any improvement initiatives.

- **Family Participation**

During the feedback sessions families have been asked how they would like to be involved with service improvements and developments in the future. The Health Board has highlighted to them how important their views and contribution are in successfully implementing changes for the better.

It is acknowledged that for many families caring for a child or young person with complex health needs time is very limited and therefore any time they give must have outcomes. It is positive that some families have already indicated they wish to contribute to future service developments.

Future engagement plans with families will take different forms once the feedback sessions have concluded and we have established what the families want.

- **Participation from wider stakeholders**

The continuing health care transformation board established with the two local authorities has a wide membership already contributing to the future development of continuing care services. In light of the report those stakeholders are likely to have further comments to make which will need to be incorporated into the action plan.

3.3 MONITORING OF PROGRESS

- **Divisional monitoring**

An extraordinary Divisional Business meeting was held on 30th November 2021, involving member of the Divisional senior team to discuss the report and to request a self-assessment of all service areas within the Division in order to share the findings and learning across the Division. The Division has incorporated the external review report and action plan into the C&YP business and quality & safety meetings to ensure there are robust arrangements in place to implement and monitor the actions. The Divisional Manager and Head of Nursing will be responsible for overseeing the improvement work at an operational level and will have robust reporting mechanisms in place to ensure the service group directors are updated on progress and as necessary identify what support can be given to the division.

- **Service Group monitoring**

The Neath Port Talbot & Singleton Service Group (NPTSSG) has established a Childrens Community Service Improvement Group (Appendix 3), the terms of reference for the group are currently being drafted and will be ratified at the first meeting on 22 December 2021. The monthly improvement group will be chaired by the Group Nurse Director. Reporting arrangements will be to the NPTSSG Quality & Safety Group and quarterly reporting to the Health Board Q&S Committee.

- **Wider stakeholder monitoring**

  Providing progress updates to wider stakeholders will be a priority to ensure there is confidence and assurances that the service and the health board is committed to improving Childrens community nursing services.

The Health Board has a Children & Young People Strategic Board where progress against the action plan will also be reported.

3.4 STAFF WELLBEING & DEVELOPMENTAL NEEDS

- **Wellbeing support**

The Childrens Community Nursing team have been under a significant amount stress over the past 18 months and maintaining the wellbeing of the team has been the priority. Staff have been offered weekly catch up meetings with the Head of Nursing, with offers of support from the Divisional Manager, Service Group Director and Group Nurse Director.

The effect of significant staff absence in such a small team would have had serious implications for the continuity of services for children and their families. Staff have been sign posted to wellbeing and guardian services with many of the staff having taken up the support. The Head of Nursing and the Deputy Head of Nursing will continue to meet frequently with the team in acknowledgement that the service provision must be maintained despite the impact of the external review outcome and the media interest.

- **Psychology support**

The Health Board will be providing psychology support for the team members with a plan to facilitate two sessions in January 2022. One session will be for the Health Care Support Workers and the other for the registered nursing team. The psychologist at the end of each session offer support individually for those staff who require it.

- **Risk Assessment**

The risk of the team reacting to the external review and outside media interest has been assessed and included on the C&YP risk register. The number of qualified staff with the level of knowledge and experience in children's community nursing and continuing care is very small. Minimal numbers of staff absences would be critical to business continuity of the service. The current risk scoring is 20 with ongoing monitoring of the team continuously reviewed.

- **Organisational Development Plans**

Cultural factors were identified by the review as contributing to the way services were provided to children and their families. Workforce business partners and the Head of Nursing held a first planning meeting with the Organisational Development (OD) facilitators last week to consider the future developmental needs of the team.

The aim is to provide a bespoke development plan – which will be shared once the initial work with the Childrens community team members, and the OD facilitators has taken place in January 2022.

This bespoke development plan will be in addition to more general programmes currently available through the Health Board OD services to include:

- Footprints
- Bridges
- Impact training
- Coaching for performance

4. FINANCIAL IMPLICATIONS

There will be financial implications to fully implement the report recommendations which are yet to be quantified. The Service Group through the newly established Childrens Community Improvement Group will oversee the plans and associated business cases.

Areas identified as requiring early attention are:

- Develop a sustainable senior nursing leadership structure

- additional staffing requirements identified in the action plan which will need to be quantified to meet the staffing levels required. Establishing the exact staffing levels will require the development of a dataset of key management information relating to the community service to capture the level of activity.

- Meeting the Children & Young People's Continuing Care Guidance recommendations for additional roles such as a lead nurse assessor will need to be appointed.

- To provide 'out of hour' support for a service providing 24-hour care in a community setting

- Appoint a Service Group improvement lead to support and oversee the implementation of the improvement plans and support the Divisional team to deliver the recommendations.

5. RECOMMENDATION

For the Quality & Safety Committee to note the progress to date since the external report into the Childrens Community Nursing review was published on 24 November 2021.

Governance and Assurance		
Link to Enabling Objectives ***(please choose)***	**Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities**	
	Partnerships for Improving Health and Wellbeing	☒
	Co-Production and Health Literacy	☒
	Digitally Enabled Health and Wellbeing	☐
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	☒
	Partnerships for Care	☒
	Excellent Staff	☒
	Digitally Enabled Care	☐
	Outstanding Research, Innovation, Education and Learning	☐
Health and Care Standards		
(please choose)	Staying Healthy	☒
	Safe Care	☒
	Effective Care	☒
	Dignified Care	☒
	Timely Care	☒
	Individual Care	☒
	Staff and Resources	☒
Quality, Safety and Patient Experience		
Implementation of the improvement plan will improve the quality and safety of the children's community nursing service (see appendix 2)		
Financial Implications		
There are financial implications to implementing the improvement plan which will be better understood once key actions are completed.		
Legal Implications (including equality and diversity assessment)		
Staffing Implications		
The children's community nursing team are being supported throughout the process, there is a risk to sustaining the services which has been included on the Children & Young People Risk Register		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
The 'what matters to me' and 'voice and control' requirements that underpin the Social Services and Well-being (Wales) Act (2015) do not appear to have been reflected in the way services have been developed and offered. The improvement plan has been developed to comply with this Act.		
Report History	The Quality & Safety Committee have received updates of the external review whilst in progress.	
Appendices	**Appendix one - Executive Summary**	

	 Executive Summary.pdf **Appendix two – Community Action plan** **Appendix three - Neath Port Talbot Singleton Service Group Assurance Meeting framework**