

Swansea Bay University Health Board
Community Children's Nursing Service

Delivering the recommendations of the Independent Review of Service

Interim review of progress, achievements and opportunities in the
engagement of parents and patients

1 Background

Following the identification of a number of concerns regarding patient, parent and carer experience within the Community Children's Nursing (CCN) Team an independent review was undertaken between March and September 2021 to cover the period April 2019 to September 2020. A total of 20 children receiving Continuing Care during that period were included.

The experiences of the children and families were fundamental to the review and the report notes that the meetings with families were powerful and moving. The families were not critical of the CCN Service as a whole but identified concerns about specific issues, including the assessment process, timeliness of provision, cancellations of care and the way that concerns and complaints were addressed and managed.

The views of the CCN Team were also sought and it was clear that staff were aware of the challenges and issues faced by the families and were keen to help resolve them. Amongst the key factors which led to the team being unable to fully deliver the Health Board standards and values was the lack of engagement and partnership working with families.

There were significant opportunities to review and develop the service model so that it reflects what families need and want rather than expecting them to fit in to the current 'offer'. The review highlighted the importance of communication with families and the opportunity to talk about their experience was valued.

A range of recommendations emerged from the review which relate to the development of partnership and engagement with families so that working in partnership with parents becomes a fundamental principle applied by the CNN Service. The establishment of a Parent/Patient Engagement Task and Finish Group has been the key driver in taking forward actions to develop engagement with families and to monitor progress in delivering activity and solutions against the review's recommendations.

A follow up review of the CCN Service is being undertaken by the same team who conducted the initial review to see if the current service is fit for purpose. The families involved in the original review have been invited to share their recent experience of the service including any changes, improvements or issues that remain of concern.

In addition, the Head of Quality Improvement for Neath Port Talbot & Singleton Service Group has asked Cath Broderick, the Independent Engagement Specialist supporting the Task and Finish Group to conduct an interim review of the CCN Service's progress and achievements against the recommendations relating to engagement and communication from the initial review.

2 The Recommendations

This report reviews progress against those recommendations that are focused specifically on engagement and communication with families and also the way in which Community Children’s Nursing teams, leaders and staff are working in partnership with parents to ensure that families receive services that meet their needs and reflect their feedback. These recommendations are:

Recommendation	The Health Board should:
12	Ensure that working in partnership with parents becomes a fundamental principle applied by the CCN Service.
13	Develop a comprehensive ‘Parental Agreement’ that sets out the role and expectations of both the HB and the parents working in partnership.
22	Support the CCN Service in moving to a partnership approach ensuring the ‘what matters to me’ requirement is embedded in all processes.
28	When addressing concerns and complaints, from a family perspective, ensure: <ul style="list-style-type: none">○ the needs of the child continue to be safely met;○ that all feedback is timely and appropriate;○ compassionate care forms the basis of interactions with families regarding concerns and complaints.
29	Consider undertaking engagement events, which includes senior HB representation.

Section 4 of this review will look at specific actions and achievements against recommendations however, it is useful to take a wider look at the strategic approach and working methods taken by the Health Board to provide a complete picture.

3 Strategic approach and achievements

Following the findings of the initial review a Children’s Community Service Improvement Plan was developed in order to identify actions designed to deliver change and improvement against the recommendations of the report. The establishment of a Parent/Patient Engagement Task and Finish Group (the Group) to consider and manage the engagement and feedback needs of the plan has been an effective mechanism and a useful forum for bringing together existing activity, teams, leaders and expertise within the Health Board.

At an early stage the Head of Quality Improvement, who was leading the improvement programme and coordinating the work needed to deliver the activity of the Group, identified the value of bringing an external perspective to the strategic approach taken.

Cath Broderick, the Lay member of the Independent Maternity Service Oversight Panel for Cwm Taf Morgannwg and an engagement specialist, was invited to meet with the Group to share experience from similar tasks relating to improving engagement and communication with women and families in CTM.

What has been effective?

- The Group welcomed the external independent perspective of engagement from the Specialist Engagement Advisor who had worked with them, and found the advice, sharing of methodology and expertise useful in designing the way they worked.
- Creating a set of actions to deliver recommendations with measures to monitor achievements
 - Programmes of this nature often define actions required to deliver the recommendations effectively. However, in this programme the identification of a timescale, progress and measures to monitor success, and if needed, to adapt and refine the actions as a result of feedback from parents/patients, have been particularly important.
- Utilising the skills and experience of engagement methods and strategy within the wider HB, building on what already works, whilst testing out new approaches
 - The temptation in the early planning for different approaches to engagement and communication with families was to put resources into one-off engagement workshops and to bring parents and staff together in a co-production event.
 - However, the team recognised that they needed to start engagement early, recognise that parents had limited time to attend events, and to build engagement methods that would be embedded in practice and work for future engagement and communication.
 - The membership of the Group was crucial in identifying what was working in reaching families and children and what methods could be adapted or built on to engage these families.
 - Whilst recognising that they want to explore co-production further, the staff and the Group have been successful in building a range of methods that provide mechanisms to hear the voices of families and staff.
- The methods identified are characterised by developing a practical and phased approach and in developing an engagement strategy that works well at this stage. The strategy is built on key principles of utilising the feedback from families, patients and staff; responding to the issues emerging; identifying opportunities for improvement in individual care and services more widely, and; demonstrating change and improvement through governance measures and feeding back to families and staff “You said, we did”.
 - The initial phase utilised surveys inviting families and staff to share their experience via QR codes;
 - The second phase is exploring the use of “In our shoes” for patients and families experience, followed by;
 - “In Their Shoes” engagement methodology to understand staff experience;
 - The feedback from this methodology will inform the engagement approach to children’s services overall. This building blocks format will ensure that the CCN team and the wider Health Board learns from patients, family and staff voices; embarks on a co-production approach to develop the future methods for

engagement and is able to test and check what they have heard with a wider audience.

- The flexibility and recognition when an approach may not be as effective as first anticipated from the Group and staff involved has been important in making progress with engagement.
- Skills within the Group to support building communication and information resources has been effective. The Group has developed a newsletter to keep families up to date with initiatives and actions and developed surveys to explore family and staff views on the CCN services.
- The nursing and support workers' direct engagement with families provides an immediate and consistent source of feedback and it is this approach that has been more successful than remote access via surveys from the Health Board. The nursing and support worker teams have built relationships with the families and can explore their experience more comfortably and encourage engagement.
- The "What's the Noise" initiative to engage with staff is developing and provides a rich source of insight into the way the service works for staff and families.
- The Health Board is starting to build a picture of the way the service meets families' needs from their perspective and staff's view of how it works and could be developed.
- The use of parent/patient stories within the organisation is at an early stage but will provide valuable illustration of the way the service works.

4 Challenges, opportunities and areas for further development

Many of the methods are still at an early stage in their development and the leadership for the improvement programme, and the Group, have demonstrated flexibility and the desire to learn from what works well. There is awareness that there are opportunities for further development and still some issues to address in a number of areas:

- There are challenges in involving families who have a high level of demand and busy lives. So far, the response from families has been limited and the Group, and staff team, want to explore ways to improve the response to the QR code surveys. It is suggested that the relationships developed with the support workers could be useful identifying how families want to share their views or get involved. It may be helpful to have short interviews with families on site to explore this further.
- Work within the Health Board in engaging children and young people is progressive and the existing mechanisms can be utilised even further in respect of CCN relationships with families, including children and young people.
- There is an action to involve families as part of staff appointments process. This will need further thought, especially in terms of the way families can be supported to engage and bring them into the conversation for co-production and regular feedback.
- The plan to test out more innovative engagement and coproduction that will cascade to wider organisation is at an early stage. Those initiatives being undertaken by the staff teams on wards and in services have demonstrated real successes and sharing this more widely will be useful. A more defined plan to cascade successful methods should be set out.
- At this stage, the ambition to utilise co-production techniques in a workshop which brings together leaders and staff face to face in the room with parents/patients on an Experience Based Co-design model has not been explored in depth. The building blocks

are in place with existing methods identifying views from staff and from families; those experiences can be formally analysed to identify touch points. This would provide the basis for an EBCD workshop.

- There are still more opportunities to demonstrate the impact of engagement to families and also within the organisation on the “you said, we did” model. It would be useful to demonstrate the way that this process is built into the governance structure for children’s services as openly as possible.
- The initial criticisms of the CCN services’ response to families regarding complaints and concerns in the original review will need specific attention following the feedback from the reviewers undertaking further engagement with families. It would be useful to set out how the service has restructured and addressed communication with families and especially, how the feedback has changed and improved care.

Overall, the progress made in engagement and communication with parents and children has been significant given the wide-ranging recommendations. The approach to build on existing skills, experience and activity was a pragmatic and effective choice. Strengthening what already works and is embedded in practice, together with building the skills of staff, is more effective than initiating ambitious “set piece” events that take resource and time to develop. However, there are opportunities to explore with families how they want to be involved, and what support they need to take part.

There are also opportunities to utilise the feedback from engagement with families and staff so far as a basis for any further co-production that brings staff and those using the service together to build CCN services that meet all of their needs.

Cath Broderick

Specialist Engagement Advisor

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