Action Plan for SBUHB Children's Community Nursing Service October 2021

Assurance					
Recommendation		Action (s)	Responsibility (Person)	Due date	Monitoring arrangements
5 (page 24 – Governance & Assurance)	Ensure that the CCN Service is supported in developing effective relationships with pathways of care developed to enable all	Fully embed the transforming continuing care outcomes ensuring there is an agreed corporate lead.	HON/Corporate team	April 2022	Monitor via assurance meetings & feedback from families
	relevant services to work together successfully	Ref page 16) Support CCN team to develop partnership forum to encourage joint working.	HON		
34 (page 66 – The views of the CCN Team)	Ensure a compassionate leadership model is in place and that the HB demonstrates its recognition of the	Temporary new leadership now in place – need to continue to work collaboratively with staff.	HON/Division Manager		
	significance and value of this service	The service needs support to strengthen and put in place a sustainable leadership structure for the future.	NPTSSG Workforce team & HB OD team	April 2022	
		Workforce & Development team to provide a bespoke training/awareness	HON/Divisional manager	January 2022	

				r	
		updates for the CCN	Group Nurse		
		Team.	Director		
				February	
				2022	
		Dura dala da ante a cience da		2022	
		Provide compassionate			
		leadership training for all			
		leaders/managers within			
		the Division in order to			
		embed a compassionate			
		culture with focus on			
		compassionate leadership		-	
		principles of :		Reporting at	
				Divisional	
		Ensure the continuing care		business	
		services have a reporting &		meeting	
		monitoring structure at a		completed	
				-	
		division and corporate level		August 2021	
		and agreed escalation		December	
		pathway.		2021 for	
				corporate	
				reporting	
				arrangements	
22 (page 51	Dovelop, robust, pathwave	Monthly transition	Lead Nurse for		
23 (page 51 –		Monthly transition			
	for communication and	meetings to continue with	Childrens		
Care)	service delivery with adult	any potential delays or	continuing care		
	community services as well	concerns re transition to			
	as acute paediatric	reported via the Divisional			
	services.	Business meeting and			
		escalated to the nominated			
		HB lead for CC			

		Identify a link Childrens community nurse for acute paediatrics to assist with pathways of care.	Community Matron		
1 (page 12 – Purpose & Methodology)	Consider whether additional work is undertaken to seek and capture the views of the families of the cohort of children that transferred to Cwm Taf Morgannwg UHB during 2019	Families under the Continuing Care Services to be contacted by letter with invitation to engage in feedback session	Head of Patient Experience, Risk & Legal Services	w/c 15/11/21	Letters under review with Exec Director of Nursing / Head of Communications 27/10/21
2 (page 12 – Purpose & Methodology)	Consider whether to make contact with the parents who wished to participate in the review anonymously but were unable to do so for this review	As above	Head of Patient Experience, Risk & Legal Services	w/c 15/11/21	
Compliance					
Recommendation		Action (s)	Responsibility (Person)	Due date	Monitoring arrangements
6 (page 24 – Governance & Assurance)	Ensure that the storage of health care records is in accordance with the HBs Policy and allows for access to records for	Develop a SOP for the management of community records including storage of historic notes.	Head of Nursing (HON)	Completed	Record keeping assurance audits

children on the active caseload	Undertake a review of the records stored and add to the Information Governance Asset Register in collaboration with the HB lead.	HON	Completed	Asset register
	Undertake period reviews via audits of records to ensure compliance and report to the Division Q & S meeting	Deputy HON		Audit findings reported via Q&S group
Ensure that any future move to online records is managed in line with all legislative, regulatory, national and local policy requirements including consideration of extending the development of the patient portal.	The Health Board Digital services to develop an app for community records. Training on the use of the app to be provided to all community staff when developed. Ongoing audits for	Digital services & Practice development lead Matron	Commenced July 2021 Commenced	
	assurance to be completed.			
Ensure that the CCN Service continues to report issues/concerns via Datix	The community team to have training on governance requirements including reporting any issues/concerns. The operational leads to be	Governance Team	Completed May 17 th 2021 Commenced	Attendance list and future Datix reports
	caseload Ensure that any future move to online records is managed in line with all legislative, regulatory, national and local policy requirements including consideration of extending the development of the patient portal. Ensure that the CCN Service continues to report	caseloadrecords stored and add to the Information Governance Asset Register in collaboration with the HB lead.Undertake period reviews via audits of records to ensure compliance and report to the Division Q & S meetingEnsure that any future move to online records is managed in line with all legislative, regulatory, national and local policy requirements including the development of the patient portal.The Health Board Digital services to develop an app for community records.Ensure that the CCN Service continues to report issues/concerns via DatixOngoing audits for assurance requirements including on governance requirements including reporting any	caseloadrecords stored and add to the Information Governance Asset Register in collaboration with the HB lead.Deputy HONUndertake period reviews via audits of records to ensure compliance and report to the Division Q & S meetingDeputy HONEnsure that any future move to online records is managed in line with all legislative, regulatory, national and local policy requirements including the development of the patient portal.The Health Board Digital services to develop an app for community records.Digital services & Practice development leadEnsure that the CCN Service continues to report issues/concerns via DatixThe community team to have training on governance requirements including reporting any issues/concerns.WCH Governance Team	caseloadrecords stored and add to the Information Governance Asset Register in collaboration with the HB lead.Peputy HONUndertake period reviews via audits of records to ensure compliance and report to the Division Q & S meetingDeputy HONEnsure that any future move to online records is managed in line with all legislative, regulatory, national and local policy requirements including the development of the patient portal.The Health Board Digital services to develop an app for community records. Training on the use of the

		multidisciplinary review of Datix incidents on a weekly basis, chaired by Deputy HON/HON. The weekly community huddle to include checking with the HCSW staff of any issues with any of the continuing care children or their families/carers. All concerns to be logged via the Datix system, reported to the Divisional Core team and investigated in line with PTR regulations.	Dep / Senior nurse for Continuing care / Community Nursing Team HON	Completed	Monitoring of huddle records Datix reports
9 (page 24 – Governance & Assurance)	Ensure that concerns and complaints are captured and managed in line with all relevant policies and National Guidance	The senior leadership team to monitor any themes and trends relating to community services. The division to be involved in review of concerns with the Patient Experience (CRAG reviews)	HON / Head of Patient Safety / Patient Experience Manager	Commenced	Email to Datix / PE Manager 3/11/21
14 (page 41 – The Service Model)	Track the resource provided for the Nurse Assessor posts and ensure	The leadership team to review the current nursing establishment to ensure	HON	January 2022	

	it is utilised in line with the requirements of the WG Policy Guidance with the correct expertise, knowledge and skills in place to perform this function.	for the Nurse assessor role. This should include benchmarking with other	Dep HON	January 2022
		Succession planning for this specific role to be included in the workforce plans.	HON	March 2022
15 (page 41 – The Service Model)	Review the current processes for quality assurance and multiagency decision making to ensure they are managed in line with WG Guidance.	New guidance to be developed by the service to reflect the multiagency input and ensure clear governance arrangements incorporating the WG guidance.	Lead Nurse for Cont. Care	Completed 1 st Nov 2022
		The transforming Continuing care work stream to ensure the guidance is fully implemented across the agencies.	Transformation leads	March 2022
16 (page 41 – The Service Model)	Ensure that the CCN Service is fully compliant with the HBs Lone Worker Policy.	The CYP division to review Lone working practices against the HB policy with	Dep HON & Head of Safety	December 2022

		involvement of the HB Health & Safety team. A review of the current risk assessments used for each family to be undertaken.	Dep HON	Commenced august 2021	
		Develop CHC scrutiny panel, working in partnership, in order to develop quality assurance and multi-agency decision making	Divisional manager		
17 (page 41 – The Service Model)	Consider scope to develop wider HB community management for out of hours and lone working services	Corporate action - lead to be identified			
21 (page 51 – The Culture of Care)		now in place – need to	HON/Divisional manager	Commenced Jan 2021	Feedback from staff & families
		The service needs support to strengthen the leadership structure for the future	NPTSSG Workforce team & HB OD team	March 2022	

24 (page 51 -	Ensure that safeguarding	Maintain and monitor	Lead Nurse for		Training
The Culture of Care)	is managed and overseen in line with the Wales Safeguarding Procedures	safeguarding training compliance.	Safeguarding		compliance data
		Ensure all staff are able to respond to safeguarding concerns by discussing at weekly huddles.	Dep HON		
		Ensure there is individual and group safeguarding supervision available and attendance is recorded.	Lead Nurse for Safeguarding	December 2021	
26 (page 51 – The Culture of Care)	Ensure appropriate audit processes for Children and Young People Continuing Care are in place that measure compliance with the WG Guidance	report compliance against the standards in the WG guidance through the	Lead Nurse for Cont. Care	December 2021	Audit plan
		Report compliance via the monthly reporting template to the Divisional Core management team meetings.	Lead Nurse for Cont. Care		Divisional care team minutes
		Report compliance via the multi-agency transformation programme.	HON		Transformation meeting minutes

27 (page 51 - The Culture of Care)Ensure concerns and complaints processes: - are managed in accordance with HB and national policy requirements;Training on governance requirements and Concerns and Redress to be provided to the nursing team.Service Governance Team- responses are appropriate and proportionate with any sanctions only applied with the proportionate appropriate and any sanctions only applied with theAll responses to be approved at Head of Manager and Service Group Director level.Service Governance Team
Care) - are managed in accordance with HB and national policy requirements; - responses are appropriate and proportionate with any sanctions only applied with the Group Director level are managed in accordance with HB be provided to the nursing team responses are All responses to be approved at Head of Team -
Accordance with HB and national policy requirements;be provided to the nursing team.Service- responsesare appropriateAll responses to be approved at Head of Nursing/DivisionalService Governance Team- number of teamNursing/Divisional Manager and Service applied with theService Governance Team
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agreement of senior
HB managers Any disputes between HON/ Divisional
families and the service Manager
must be escalated and
managed by the Division
senior team.
Escalation of unresolved HON/ Divisional
disputes to be reported to manager
the Service Group
Directors.
Head of Patient Commenced
Monthly Concerns.
Redress and Assurance Experience,
Group meetings with HON Risk & Legal
/ Deputy HON / Divisional Services /
Manager
Feedback
Manager

31 (page 61 – The Experience of the Children & Families)	Ensure staff are fully aware of the HB Policies and any relevant professional regulatory requirements regarding the use of various social media apps to communicate with each other	Updating to be provided to all the registered and non- registered staff which includes access to relevant corporate policies. Information Governance training compliance to be implemented and monitored.	December 2021 January 2022			
		Awareness session with CCN staff using advice from IG.	Assistant Directorate Manager, C&YP	Completed	Email to SK for evidence 8/11	
Service Developr	Service Development					
—						
Recommendation		Action (s)	Responsibility (Person)	Due date	Monitoring arrangements	
Recommendation 10 (page 41 – The Service Model)	Identify a dataset of key management information related to the CCN Service	Action (s) The Division to review all community activity including acute and chronic care and develop data collection methods to report and demonstrate the level of community based activity provided.		Due date January 2022	Monitoring arrangements	

		identify agreed reporting levels. Benchmark with other Childrens Community Nursing teams across Wales to establish reporting systems and compare activity.	Deputy HON	January 20222	
		Consider options, such as a Patient Involvement Group, in line with families wishes following disclosure of CCN report.	HON / Head of Patient Experience, Risk & Legal Services	November 2021	Consider options once feedback sessions have taken place with families
11 (page 41 – The Service Model)	Consider whether the current skill mix and staffing establishment is sufficient to meet the demands placed upon all elements of the service including step down services if a child is no longer deemed eligible for Continuing Care	Undertake a review of the current activity across the community nursing service and assess the staffing requirements to manage the caseloads. Consider the appointment plans for the nursing team including opportunities for rotational posts into the secondary setting.	Deputy HON	January 2022 January 2022	

		Liaise with adult services to consider the option for some staff to transfer to adult services when the young person transitions if appropriate.	HON	January 2022
		Benchmark with other CCNT services in Wales on staffing levels.	Deputy HON	January 2022
18 (page 41 – The Service Model)	to deliver more flexible and timely care including a review of the bank and agency processes	Work with Bank Service to look at the expected activity and demands on the service and explore the prospective of using agency staff when there are staff shortages or new packages requiring commencement.	HON/Bank Manager	December 2022
19 (page 41 – The Service Model)	Ensure a multiagency approach to develop local pathways agreed and jointly owned by the HB and its partners	Fully embed the Transforming continuing care pathways and monitor via the quality assurance meetings.	HON	February 2022
25 (page 51 – The Culture of Care)	Ensure the skill mix model of 24-hour service delivery is reviewed with benchmarking models across other HBs in Wales	Review the current staffing rosters and establishments – with particularly attention to registered nurse availability out of hours. Benchmark existing community nursing staffing	HON/Service Group Director Support from Workforce Business Partner/Rostering Team.	February 2022

	was data in other LID's		
	models in other HB's		
	across Wales.		
30 (page 61 – The Experience of the Children & Families)	Temporary new leadership now in place – need to continue to work collaboratively with service users going forward. Establish formal and informal mechanisms for user engagement and actively encourage participation.	Service Nurse Director/HON	December 2021
	 Develop various forums to gain involvement – groups or social media involvement. Involve users and their families in any service development Actively seek involvement in any guidance or parent information development Invite users and families to be involved in appointments of staff into the team 	HON/Patient Experience Manager	Commence Jan 2022

		Provide		
		opportunities for		
		regular formal and		
		informal feedback		
		on the services		
		their children		
		receive.		
32 (page 66 -	Ensure a more streamlined	Ensure each HCSW has a	HON	January 2022
The views of the		registered nurse identified		····, ·
CCN Team)	the CCNs with their team of	as their line manager to		
	HCSWs to ensure	support development and		
	appropriate delegation,	manage performance.		
	competence and	manage performance.		
	assurance mechanisms	Ensure the record keeping	HON	January 2022
	are in place	audits include monitoring	hon	
	are in place	the documented care		
		against the individual care		
		plans.		
		Identify a process for the	HON	January 2022
		registered staff to	non	January 2022
		undertake regular reviews		
		of the care provided by the		
		HCSW including		
		observational visits at		
		night.		
33 (page 66 -	Review the roles	Undertake a review of the	HON/Group Nurse	March 2022
The views of the	undertaken by the various	roles and responsibilities of	Director/Workforce	
CCN Team)	bands of staff and ensure	the Band 3 and Band 4	Business Partner	
,	that staff skills and abilities	staff to ensure staff are		
	are utilised to their full			
	potential	g	HON	January 2022

Partnership and I	Engagement	Benchmark with other HB's to establish the role descriptors for each of the Band's.			
Recommendation		Action (s)	Responsibility (Person)	Due date	Monitoring arrangements
12 (page 41 – The Service Model)	Ensure that working in partnership with parents becomes a fundamental principle applied by the CCN Service	into the culture by establishing ways to gain the views of families.	HON/ & Patient Experience Manager	December 2021	
		Ensure views and issues are shared by the HCSW's and acted upon by the named CCN via the weekly Huddles.	HON	January 2022	Monitoring the huddle record sheets.
		Support the named CCN to make decisions and decide upon changes rather than all decisions requiring permission by the operational lead of the service.	HON	January 2022	
		Plan future assurance monitoring process to incorporate peer review (which could be external to the division).	HON	January 2022	

	Develop a comprehensive 'Parental Agreement' that sets out the role and expectations of both the HB and the parents working in partnership	New parental agreement to be developed seeking views from families.	Lead nurse for Cont care.	Completed first draft Nov 2022 NEXT STEP - parental involvement
22 (page 51 – The Culture of Care)	Support the CCN Service in moving to a partnership approach ensuring the 'what matters to me' requirement is embedded in all processes.	Through the weekly huddles and feedback processes ensure children & young people and their parents views are integrated into what we do.	HON	January 2022
		Ensure there is a service wide approach to gaining views and encouraging engagement which needs to be promoted to all staff.	HON/ & Patient Experience Manager	January 2022
		Training to be provided to all staff on engagement and the benefits of feedback.	Patient Experience Manager	January 2022
28 (page 51 – The Culture of Care)	from a family perspective, ensure:	Concerns and Redress training to enable the community nursing service to ensure all concerns are responded to in line with the Health Board values and in line with the Concerns & Redress Regulations.	Redress Teams & Concerns Assurance Manager	January 2022

	 that all feedback is timely and appropriate; compassionate care forms the basis of interactions with families regarding concerns and complaints. 	All responses to be managed via the WCH governance team and approval by the HON/ Divisional manager & the Service Group Director.	HON/W&CH Governance Team	December 2021	
	oomplainto.	Monitoring of compliance to these standards to be reported via the CRAG reviews	W&CH Governance Team	December 2021	Sample questions to HON/Deputy
		Patient Experience Team and C&YP Service Directors to develop relevant and appropriate feedback questions to monitor and improve services provided	HON / Patient Feedback Manager	December 2021	HON 8/11 – ? to meet with PE Team
29 (page 61 – The Experience of the Children & Families)	Consider undertaking engagement events, which includes senior HB representation	The Division to work in partnership with the corporate team to develop an engagement plan.	HON / Patient Feedback Manager	December 2021	
Strategic Plannin	g				
Recommendation		Action (s)	Responsibility (Person)	Due date	Monitoring arrangements
3 (page 24 – Governance & Assurance)	Consider the most appropriate position for the	The Division to work in partnership with the corporate team to agree	Service Group Director/Service Nurse	January 2022	

	CCN Service within the HB structure	the future structure of the CCN Service.	Director/Executive Director of Nursing/Chief Operating Officer		
4 (page 24 (Governance & Assurance)	Develop clear and effective governance arrangements for the CCN Service that includes adequate resource allocation from the governance team	adequate resources and	Service Group Director/Service Nurse Director	January 2022	
		Set out reporting arrangements to ensure staff notify the governance team of any governance matters relating to the Childrens community service.	W&CH Governance Team	December 2021	
20 (page 41 – The Service Model)	Continue to build upon regional work including multiagency service planning to address consistent and recurring gaps in universal and specialist services. To	Undertake a review of the service provision across the region and benchmark with other Health Boards in how they support families. The HB to share the	HON Head of Patient Experience,	January 2022	To be added to
	support this the HB should consider sharing the recommendations with LA partners	recommendations and Executive Summary of the	Risk & Legal Services		agenda of Directors of Social Services meeting w/c 15/11