Reference	Recommendation	Action Planned/Delivered	Timescales	Progress	Responsible	Monitoring Arrangements	Task & Finish Group
5 (page 24 – Governance & Assurance)	Ensure that the CCN Service is supported in developing effective relationships with pathways of care developed to enable all relevant services to work together successfully	Fully embed the transforming continuing care outcomes ensuring there is an agreed corporate lead.	Apr-22	Outcomes measures discussed at 1st Improvement Group December 22 2021, . **Update March 2022** - Awaiting first data group(24/03) meeting to approve. Update april 2022 - outcome measures completed for approval at Divisional improvement meeting 14/04	HON/Corporate Team	Monitor via assurance meetings and feedback from families.	Data Group
		Support CCN team to develop partnership forum to encourage joint working	Mar-22	**Update March 2022** - still awaiting, further email sent to staff side chair **Update April 2022** - staff side rep confirmed to attend workforce meeting - **Action completed**	HON	Record of notes taken and action log.	Workforce Group
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 significance and value of this service	Temporary new leadership now in place – need to continue to work collaboratively with staff and develop a sustainable leadership structure for the future.	Apr-22	New Head of Nursing in post January 8th 2022. **Update February 2022**- developing Workforce business case **Update March 2022** -awaiting decision BCAG on 30th March. **April 22 update** - feedback that business case will not be going to BCAG on 30/3/22 has been delayed until 13th April 22 due to request for further information. Interim posts need to be put in place at risk until case is approved.	HON/Divisional Manager/NPTSSG	Staff and user feedback and contribution to action plan.	Workforce Group
		Workforce & Development team to provide a bespoke training/awareness for the Team to include compassionate leadership training for all leaders/managers within the Division in order to embed a compassionate culture.	June 22	1st planning meeting with OD lead and Interim Head of Nursing Dec 1 2021. Training programme developed by OD and dates planned for March 2022. **Update April 2022** - only 2 dates provided for the HCSW's - approx 25% of the staff attended The registered staff have not recieved any training days due to staffing constraints	HON Divisional Manager/NPTSSG Workforce Team and HB OD Team	Staff Evaluation Feedback. Monitoring Feedback from users of the service.	Workforce Group
		Ensure the continuing care services have a reporting and monitoring structure at a division and corporate level and agreed escalation pathway.	Completed August 2021 for Division. December 2021 for corporate reporting.	Divisional reporting system in place New guidance includes escalation of concerns Monitoring of progress against the improvement plan is via the HB Q & S Committee	Group Nurse Director/Divisional Manager/HON	Reporting to CYP divisional business and updates via NPTSSG Children's Community Improvement Group. (CCIG).	Data Group
23 (page 51 - The Culture of Care)	Develop robust pathways for communication and service delivery with adult community services as well as acute paediatric services.	Monthly transition meetings to continue with any potential delays or concerns regarding transition to reported via the Divisional Business Meeting and escalated to the nominated HB lead for CC.	Completed December 2021	**Completed December 2021**	Lead Nurse for Children's Continuing Care	Number of escalated concerns.	Data Group
		Identify a link Children's Community Nurse for acute paediatrics to assist with pathways of care.	Completed August 2021	Community Nurse now avaialable for the inpatient wards to discuss referrals **Completed August 2021**	Community Matron	Monitor number of acute paediatric referrals	Workforce Group
1 (Page 12-Purpose and 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 Service to be contacted by letter with invitation to engage in feedback session.	**Completed 17th November 2021.**	**Completed 17th November 2021**	Head of Patient Experience, Risk and Legal Services	Copy of letter	Patient/ Parent engagement group
2 (Page 12 - Purpose and 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.	Families under the Continuing Care Service to be contacted by letter with invitation to engage in feedback session.	**Completed 17th November 2021.**	**Completed 17th November 2021**	Head of Patient Experience, Risk and Legal Services	Copy of letter	Patient/ Parent engagement group
6 (Page 24- Governance and Assurance)	Ensure that the storage of health care records is in accordance with the HB Policy and allows for access to records for children on the active caseload.	Develop a SOP for the management of community records including storage of historic notes.	**Completed September 2021**	**Completed September 2021**	Head of Nursing (HON)	Record keeping assurance audits	
		Undertake a review of the records stored and add to the Information Governance Asset Register in collaboration with the HB lead.	**Completed September 2021**	**Completed September 2021**	HON	Asset Register	
		Undertake periodic assurance audits of records to ensure compliance and report to the Division Q&S meeting.	Jan-22	Delayed until February 2022 due to staff unavailability. **Completed 1st march 2022**	Deputy Head of Nursing	Audit findings reported via Division Q&S Group	

Ref	Objective	Action	Date	Update	Lead	Measure	Group
7 (Page 24- Governance and Assurance)	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.	Commenced July 2021	Awaiting final version - end January 2022 the division requested an update - final elements to be agreed and the community team will be meeting again with the digital team. **Update April 2022 -** follow up meeting with digital team in March awaiting final nursing assessment programmes to be finalised.	Digital Services	Review and evaluation of the system by digital team and users.	Data Group
		Training on the use of the app to be provided to all community staff when developed.	TBC when system is ready for implementation.	awaiting finalisation of the app	Digital Services and Practice Development Lead	Attendance Logs	Data Group
8 (Page 24 - Governance and Assurance)	Ensure that the CCN Service continues to report issues/concerns via Datix	The community team to receive governance training to include reporting issues/concerns.	Completed May 17th 2021	Completed May 17th 2021	WCH Governance Team	Attendance List and future Datix reports	Workforce Group
		The Operational Leads to attend weekly multidisciplinary incident review meetings chaired by the HON or Deputy HON.	Completed July 2021	Completed July 2021	Deputy HON	Monitoring number of reported incidents and outcomes of reviews	Workforce Group
		The weekly community huddle to include checking with the HCSW of any issues with any of the continuing care children or their families/carers.	Completed July 2021	Completed July 2021	Deputy/Senior Nurse for Continuing Care/Community Nursing Team	Monitoring of huddle records	Workforce Group
		All concerns to be logged via the Datix system, reported to the Divisional Core team and investigated in line with PTR regulations	Completed May 2021	Completed May 2021	HON/All Nursing Staff	Datix reports	Workforce Group
9 (page 24- Governance and Assurance)	Ensure that concerns and complaints are captured and managed in line with all relevant polices and National Guidance	The Senior Leadership Team to monitor any themes and trends relating to community services	Commenced May 2021	Completed May 2021	HON/WCH Governance Team	Via Quality Safety and Exception reporting	Workforce Group
		The Division to be involved in review of concerns with the Patient Experience (CRAG Reviews)	Mar-22	Awaiting a date from the corporate patient feedback team for a CRAG review. **Update April 2022 -** date arranged 6/4/2022 - cancelled until after 19th April.	Patient Feedback Team	Outcome report from CRAG review	Patient/ Parent engagement group
14 (Page 41 - The Service Model)	Track the resource provided for the Nurse Assessor posts and ensure 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	The Leadership team to review the current nursing establishment to ensure there is adequate resources for the Nurse Assessor role. This should include benchmarking with other HB's	Feb-22	Workforce paper prepared and going to Senior Management Team February 2022. **Update March 2022** -awaiting decision on business case at BCAG on 30th March 2. **April 22 update** - feedback received that business case will not be going to BCAG on 30/3/22 has been delayed until 13th April 22 due to request for further information. Interim posts need to be put in place at risk until case is approved.	HON	Report to CYP Divisional Business Meeting	Workforce Group
		A Specific Nurse Assessor job description to be developed.	Feb-22	Job Description completed January 2022; awaiting final approval of workforce paper. **Update March 2022** -awaiting decision on business case at BCAG on 30th March . **April 22 update** - feedback received that business case will not be going to BCAG on 30/3/22 has been delayed until 13th April 22 due to request for further information. Interim posts need to be put in place at risk until case is approved.	Deputy HON	Via Job Evaluation Team	Workforce Group
		Succession Planning for this specific role to be included in the workforce plans.	Apr-22	Update March 2022 - draft workforce plan developed.	HON	Divisional Workforce Group	Workforce Group
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 multi-agency input and ensure clear governance arrangements incorporating the WG Guidance.	Completed 1st Nov 2021	Completed 1st Nov 2021	Lead Nurse for Continuing Care	Ratified in CYP Divisional Q&S meeting.	
		The Transforming Continuing Care work stream to ensure the guidance is fully implemented across the agencies.	Mar-22	Planning for a workshop to be held with the Health Board and local authorities in February 2022. **Update March 2022** - Update and feedback requested. **Update April 2022** - transformation workshop held in February did not result in fully agreeing regional policies. Plans in place to discuss further with current lead for the HB	Transformation Leads	Transformation monitoring process	

Ref	Recommendation	Action	Timescale	Progress Update	Lead	Evidence	Monitoring Group
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 involvement of th HB Health and Safety Team.	Dec-21	Meeting with HB Health & Safety Lead arranged for 16th December 2021. **Update March 2022** - draft bespoke guidance developed awaiting approval at divisional meeting. **Update April 2022** - Also awaiting outcome of workforce paper (business case delayed to April 13th BCAG) as this includes evening cover to manage out of hours issue.	Deputy HON and Head of Safety.	Report findings through the Divisional Health and Safety Group.	Workforce Group
		A review of the current risk assessments used for each family to be undertaken.	**Commenced August 2021**	HB H&S lead to review the risk assessment process in February 2022. **Update March 2022** - awaiting a date to plan a review with H&S and the community service. **Update April 2022** - H&S lead planned visit w/c 10/4/2022	Dep HON	Review as part of the community assurance audits.	Workforce Group
17 (Page 41- The Service Model)	Consider scope to develop wider HB community management for out of hours and lone working services.	To review the current lone working arrangements with the Health & Safety Team and advise on the future arrangements within the organisation.	May-22	Bespoke guidance development agreed 26 January 2022. **Update 7 March 2022** - draft SOP completed awaiting approval at divisional level	Assistant Divisional Manager/H&S Team/Workforce Team	Report to CYP Division H&S Meeting and NPT &SSG (CCIG).	Workforce Group
21 (Page 51 - The Culture of Care)	Ensure that the leadership style for the CCN Service is participative, and complies with all relevant HB policies and National Guidance.	Temporary new leadership now in place – need to continue to work collaboratively with staff and service users going forward.	Commenced January 2021	New Head of Nursing commenced Jan 8 2022.	HON/Divisional Manager	Feedback from staff and families	Workforce Group
		The service needs support to strengthen the leadership structure for the future.	Mar-22	Included in the workforce paper - awaiting approval through the NPTSSG senior management team process **Update March 2022** - awaiting decision on business case at BCAG. **April 22 update** - feedback received that business case will not be going to BCAG on 30/3/22 has been delayed until 13th April 22 due to request for further information. Interim posts need to be put in place at risk until case is approved.	NPTSSG Workforce Team and HB OD Team	Staff and user feedback.	Workforce Group
24 (Page 51- The Culture of Care)	Ensure that safeguarding is managed and overseen in line with the Wales Safeguarding Procedures	Maintain and monitor safeguarding training compliance within the team.	March 31st 2022	**2021/2022 compliance:** Safeguarding child level 1 - 95.92% Safeguarding child level 2 - 83.67%	Clinical Nurse Specialist for Safeguarding Children and Young People	Training compliance data.	Workforce Group
		Ensure all staff are able to respond to safeguarding concerns by discussing at weekly huddles.	Commenced September 2021	Safeguarding concerns now documented and part of the weekly huddles with the team.	Deputy HON	Record of "huddles"	
		Ensure there is individual and group safeguarding supervision available and attendance is recorded	Commenced November 2020	Safeguarding supervision plan in place and available.	Lead Nurse for Safeguarding	Attendance records	Workforce Group
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 WG Guidance	Develop an audit plan to report compliance against the standards in the WG guidance through the existing quality assurance framework.	Jan-22	February 2020 draft in progress for ratification at divisional Q&S group March 7 2022. **Update March 2022** -Q&S meeting cancelled aiting approval at next meeting. **Update April** - assurance audit document for approval at Divisional meeting	Lead Nurse for Continuing Care	Audit plan progress to be reported to the CYP Division Q&S Group	
		Report compliance via the monthly reporting template to the Divisional Core management team meetings.	**Commenced August 2021**	Commenced August 2021	Lead Nurse for Continuing Care	Divisional Business Minutes	Data Group
		Report compliance via the multi-agency transformation programme.	Mar-22	No progress yet due to limited progress in the 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; -responses are appropriate and proportionate with nay sanctions only applied with the agreement of senior HB mangers	Training on governance requirements and concerns and Redress to be provided to the nursing team.	**Completed May 2021**	**Completed May 2021**	Service Governance Team	Attendance at session	Workforce Group
		All responses to be approved at Head of Nursing/Divisional Manager and Service Group Director Level.	**Commenced May 2020**	Awaiting a CRAG review date for March 2022. Planned for April 2022	Service Governance Team	CRAG review outcome report	
		Any disputes between families and the service must be escalated and managed by the Divisional Senior Team.	**Commenced August 2021**	Reporting via datix and to the CYP senior team	HON	Divisional Business minutes	

Ref	Recommendation	Action	Timescale	Progress Update	Lead	Evidence	Monitoring Group
		Escalation of unresolved disputes to be reported to the Service Group Directors.	**Commenced August 2021**	Completed and now included in the monitoring reports and datix incident reporting system	HON/Divisional Manager	Communication to the Senior CYP Management Team and recorded via Datix system.	
		Monthly Concerns, Redress and Assurance Group meetings with HON/Deputy HON/Divisional Manager	**Commenced May 2020**	Awaiting confirmed CRAG review date for March 2022. **Planned for April 2022**	Head of Patient Experience, Risk and Legal Services/Patient Feedback Manager	CRAG review outcome report	Patient/ Parent engagement group
31 (Page 61 - The Experience of the Children and Families)	Ensure staff are fully aware of the HB Polices 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 staff which includes how to access relevant corporate policies	**Commenced June 2021**	Completed	Practice Development Lead	Training compliance data	Workforce Group
		Ensure all staff are compliant with Information Governance training.	Jan-22	Compliance for IG training February 88%. **Update April 2022** - compliance for 2021/22 - 83.67%	Assistant Divisional Manager	Training compliance data	Workforce Group
Service Development							
10 (Page 41 - The Service Model)	Identify a dataset of key management information related to the CCN Service	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.	Mar-22	Data monitoring task & Finish Group to be established by February 2022 to manage ongoing data **Update April 2022** data methods to be agreed in meeting 19th April 22	Assistant Directorate Manager/ Informatics support	Reporting as part of CYP Divisional Performance monitoring	Data Group
		To review the current datasets used in Primary and Community or Mental Health and LD services to identify agreed reporting levels.	March 31st 2022	Data monitoring task & Finish Group to be established by February 2022 to manage ongoing data	Assistant Directorate Manager (ADM)	Include as part of the CYP Divisional Performance reporting	Data Group
		Benchmark with other Childrens Community Nursing teams across Wales to establish reporting systems and compare activity.	March 31st 2022	Data monitoring task & Finish Group to be established by Febuary 2022 to manage ongoing data **Update April 22** for planning at data meeting on 19th April	Deputy HON	Include as part of the CYP Divisional Performance reporting	Data Group
		Consider options such as Patient Involvement Group, in line with families wishes following disclosure of CCN report.	Jan-21	Patient/Parent Engagement Task & Finish group being established March 2022. First task & finish group - booked for 23 March letters sent to families with update and request for involvement	HON/Head of Patient Experience, Risk and Legal Services	Report feedback from families once sessions have taken place	Patient/ Parent engagement group
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 stepping down service including 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.	Feb-22	Data monitoring task & Finish Group to be established by February 2022 to manage ongoing data - **first meeting March 24 2022.**	Deputy HON	Report back to CYP Divisional Business Meeting	Data Group
		Consider recruitment plans for the nursing team including opportunities for rotational posts into the secondary setting	May-22	To be managed via the Workforce Task & Finish Group in February 2022 meeting. **Update March 2022** - draft workforce plan in development.	HON	HON/Matron Minutes	Workforce Group
		Liaise with adult services to consider the option for some staff to transfer to adult services when the young person transitions if appropriate.	Jan-22	To be managed via the Workforce Task & Finish Group in February 2022 meeting. **Update March 2022** - workforce group agreed this would not be progressed due to ongoing staff constraints within the team and unlikely to happen routinely due to the majority of staff likely to want to remain in Childrens Services therefore action closed nfollowing discussion at divisional meeting.	HON	Report to Divisional Business meeting and NPTSSG (CCIG).	Workforce Group
		Benchmark with other Childrens Community Nursing services in wales on staffing levels.	Feb-22	**Update March 2022** - feedback requested from other HB's across Wales - limited information back to date.	Deputy HON	Report to CYP Divisional meetings	Workforce Group
18 (Page 41- The Service Model)	Explore alternative options to deliver more flexible and timely care including a review of the bank and agency processes	Work with Bank Services 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.	Apr-22	To be managed via the Workforce Task & Finish Group in February 2022 meeting. **Update March 2022** - due to significant staffing pressures this needs urgent support from Bank.	HON/Bank Manager	Report to the Divisional Business Meeting and NPT & SSG (CCIG)	Workforce Group

Ref	Recommendation	Action	Timescale	Update	Lead	Evidence	Group
19 (Page 41 - The Service Model)	Explore 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.	Apr-22	Update April 2022 - no progress yet due to limited progress in the transformation programme	HON	Transformation Monitoring meeting records	
25 (Page 51 - The Culture of Care)	Ensure the skill mix model of 24-hour service delivery is reviewed with benchmarking models across other HB's in Wales	Review the current staffing rosters and establishments - with particularly attention to registered nurse availability out of hours.	Apr-22	**Update March 2022** - draft workforce plan developed. Awaiting outcome at BCAG for staffing resource business case on March 31st.	HON/Service Group Director	Report to CYP Divisional Business Meeting and NPT & SSG	Workforce Group
		Benchmark existing community nursing staffing models in other HB's across Wales.	Apr-22		Support from Workforce Business Partner/Rostering Team	Divisional Business Meeting and NPT &SSG	Workforce Group
30 (Page 61 - The Experience of the Children and Families)	Ensure the leadership of the CCN Service is one which is participative and continues to engage with families	Establish formal and informal mechanisms for user engagement and actively encourage participation. - 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. - Provide opportunities for regular formal and informal feedback on the services their children receive.	Commenced January 2022	January 26th meeting held with a Patient Engagement Specialist to advise on developing an engagement strategy. Patient/Parent Engagement Task & Finish Group being established March 2022.	HON/Patient Experience Manager	Report to CYP Divisional Business Meeting and NPT & SSG Children's Community Improvement Group	Patient/ Parent engagement group
32 (Page 66 - The View of the CCN Team)	Ensure a more streamlined process in place to link the CCN's with their team of HCSWs to ensure appropriate delegation, competence and assurance mechanisms are in place	Ensure each HCSW has a registered nurse identified as their line manager to support development and manage performance.	Jan-22	**Completed**	HON	Copy of communication sent to each HCSW confirming line manager.	Workforce Group
		Ensure the record keeping audits include monitoring the documented care against the individual care plans.	Jan-22	Audits completed by community registered nursing team.	HON	Audit Reports	
		Identify a process for registered staff to undertake regular reviews of the care provided by the HCSW including observational visits at night.	Feb-22	Workforce paper awaiting approval includes a Band 6 post to support this action. **April 22 update** - feedback received that business case will not be going to BCAG on 30/3/22 has been delayed until 13th April 22 due to request for further information. Interim posts need to be put in place at risk until case is approved.	HON	Observational record sheets	Workforce Group
33 (Page 66 - The Views of the CCN Team)	Review the roles undertaken by the various band of staff and ensure that staff skills and abilities are utilised to their full potential	Undertaken a review of the roles and responsibilities of the Band 3 and Band 4 staff to ensure staff are working at their banding.	Apr-22	To be managed via the Workforce Task & Finish Group in February 2022 meeting. **Update March 2022** - new Band 4 JD developed which reflects the role differences between the Band 3's.	HON/Group Nurse Director/Workforce Business Partner	Report to CYP Divisional Business meeting	Workforce Group
		Benchmark with other HB's to establish the role descriptors for each of the Band's.	Feb-22	To be managed via the Workforce Task & Finish Group in February 2022 meeting.	HON	Report to CYP Divisional Business meeting	Workforce Group
			Partnership and Engagement				
12 (Page 41 - The Service Model)	Ensure that working in partnership with parents becomes a fundamental principle applied by the CCN Service	Continue to embed this into the culture by establishing ways to gain the views of the families	Jan-22	January 26th meeting held with a Patient Engagement Specialist to advise on developing an engagement strategy.	HON & Patient Experience Manager	Division patient experience reports	Patient/ Parent engagement group
		Ensure any views and issues which the HCSW's feedback are acted upon by the named CCN via the weekly huddles	Dec-21	Patient/Parent Engagement Task & Finish group being established March 2022.	HON	Monitoring the huddle record sheets	Patient/ Parent engagement group
		Plan future assurance monitoring process to incorporate peer review (which could be external to the division)	Jan-22	Delayed until an all Wales agreement can be planned. **Update March 2022** - All Wales Peer review is being piloted	HON	Report to NPT & SSG (CCIG)	

Rec	Recommendation	Action	Date	Progress	Responsible	Monitoring	Group
13 (Page 41 - The Service Model)	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.	**Completed first draft Nov 21** NEXT STEP - parental involvement	Letters being sent to families by March2022. Awaiting feedback from the families before re-issuing a new parental agreement.	Lead Nurse for Continuing Care	Monitor feedback from families	Patient/ Parent engagement group
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	Ensure there is a service wide approach to gaining views and encouraging engagement which needs to be promoted to all staff.	Jan-22	OD planned sessions for January for the registered and non-registered workforce **Update - April 2022** limited progress made due to staff shortages and demands on service	HON & Patient Experience Manager	Reporting to CYP Q&S Group and NPT & SSG (CCIG)	Patient/ Parent engagement group
		Training to be provided to all staff on engagement and the benefits of feedback.	Jan-22	Awaiting confirmation from the patient feedback team.	Patient Experience Manager	Staff training attendance. Monitoring of parent feedback levels following training.	Patient/ Parent engagement group
IG28 (Page 51 - The Culture of Care)	When addressing concerns and complaints from a family perspective, ensure: -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.	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 and Redress Regulations. Monitoring of compliance to these standards to be reported vi the CRAG reviews.	Mar-22	Awaiting a date for a CRAG review to be undertaken. **Update April 2022 - CRAG review planned for April 6 with CYP division.**	Redress Teams and Concerns Assurance Manager	CRAG review outcome reports	Patient/ Parent engagement group
		Patient Experience Team and C&YP Service Directors to develop relevant and appropriate feedback questions to monitor and improve services provided.	Dec-21	Meeting with Patient Feedback team in December in order to share with parents and staff for their views before commencement of surveys in February 2022.	HON/Patient feedback manager	Sample questions to HON/Deputy HON 8/11	Patient/ Parent engagement group
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.	Feb-22	**Update April 2022** - meeting held with corporate strategy team to discuss engagement plan for the service.	HON/Patient Feedback manager	Reporting plan at NPT&SSG (CCIG)	Patient/ Parent engagement group
				Strategic Planning			
3 (Page 24 - Governance & Assurance)	Consider the most appropriate position for the CCN Service within the HB structure	The Division to work in partnership with the corporate team to agree the future structure of the CCN Service.	Jan-22	The action to be delayed until wider discussions and consultation has been planned.	Service Group Director/Service Nurse Director/Executive Director of Nursing/Chief Operating Officer	Provide recommendations to the CYP Divisional Business meeting & NPT&SSG (CCIG)	
4 (Page 24 Governance & Assurance)	Develop clear and effective governance arrangements for the CCN Service that includes adequate resource allocation from the governance team	Review the current governance arrangements to ensure there is adequate resources and develop a business case of need if required.	Feb-22	Division has developed a Clinical Governance Nurse for CYP to support the Quality & Safety agenda - require 0.4 wte additional Band 7 to have a 1.0wte post - part of the business case.	Service Group Director/Service Nurse Director	Report findings of review to service Group Directors.	
		Communicate reporting arrangements to ensure staff notify the governance team of any governance matters relating to the Children's Community Service	Dec-21	Meeting with Women and Children Governance Lead - May 2021. Email to remind staff sent on 15th December 2021.	W&CH Governance Team	Evidence of communication and Datix reports.	
20 (Page 41- The Service Model)	Continue to build upon regional work including multi-agency service planning to address consistent and recruiting gaps in universal and specialist services. To support this the HB should consider sharing the recommendations with LA Partners.	Undertake a review of the service provision across the region and benchmark with other Health Boards in how they support families.	Mar-22	Limited progress to date due to lack key appointments into the Community Matron or Deputy Head Head of Nursing post (this post is part of the workforce business case)	HON	Report to CYP Divisional Business Meeting.	Data Group
		The HB to share the recommendations and Executive Summary of the report with the LA partners.	**Completed November 2021**	Completed	Head of Patient Experience, Risk and Legal Services	To be added to agenda of Directors of Social Services meeting w/c 15/11/21.	
				* structure for monitoring arrangements *the timescales for actions may change dependent on impact of Covid			

Update to improvement Plan

1st Update	December 15th 2021
2nd Update	January 18th 2022
3rd Update	February 2nd 2022
4th Update	February 7th 2022
5th Update	March 23rd 2022
6th Update	April 6th 2022

Progress
completed