



Teitl adroddiad: <i>Report title:</i>	Health Board Response to the RCPsych Invited Services Review
Adrodd i: <i>Report to:</i>	Health Board
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Thursday, 30 January 2025
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>The Board received a report on the 25 July 2024. It set out the <u>Health Board Response to the Royal College of Psychiatrists' Invited Review Services Report</u>. The report outlined that the Board is committed to making good progress on this response at a steady pace, with clear evidence that actions are completed, and real focus on moving forward collaboratively with patients and users, and families – to deliver safe and reliable care to the people of North Wales.</p> <p>The Board report from 25 July 2024 outlined the next steps as listed below. This is the first report back to the Health Board since that meeting and an update on these elements provides the focus of this report as well as a look forward to the next six months.</p> <ul style="list-style-type: none">• To establish the recommended governance framework, which will include an 'Expert Advisory Group', independently chaired with family representatives, Llais colleagues and other stakeholders included as group members.• Continue to strengthen the patient and carer experience work and to ensure this influences future service developments.• To commence monitoring of the implementation of the RCPsych Response plan, focussing on the ten themes identified.• To provide a regular updates on progress to the Health Board of the RCPsych Response plan with regular oversight through the Quality, Safety and Experience Committee, and also to the Health Board - every six months. <p>The purpose of this report is to detail the progress on these next steps and they are reflected in the respective sections of this report. The Board is asked to note the contents of the report and to receive assurance on the progress of the Health Board response to the RCPsych Invited Services Review.</p>
Argymhellion: <i>Recommendations:</i>	<p>The Board is asked to:</p> <ul style="list-style-type: none">• NOTE the contents of the report• RECEIVE ASSURANCE on the progress of the Health Board response to the RCPsych Invited Services Review.
Arweinydd Gweithredol: <i>Executive Lead:</i>	Teresa Owen – Executive Director of Allied Health Professionals and Health Science

Awdur yr Adroddiad:	Ros Alstead – Special Advisor to the Health Board Phil Meakin – Associate Director of Governance			
Report Authors:				
Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input checked="" type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input checked="" type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	Arwyddocaol <i>Significant</i> <input type="checkbox"/> Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i>	Derbyniol <i>Acceptable</i> <input checked="" type="checkbox"/> Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	Rhannol <i>Partial</i> <input type="checkbox"/> Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>Some confidence / evidence in delivery of existing mechanisms / objectives</i>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence / evidence in delivery</i>
Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn:				
<i>Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:</i>				
Cyswllt ag Amcan/Amcanion Strategol: <i>Link to Strategic Objective(s):</i>	1: Building an effective organisation 3: Compassionate culture, leadership and engagement 4: Improving quality, outcomes and experience 5: Effective environment for learning			
Goblygiadau rheoleiddio a lleol: <i>Regulatory and legal implications:</i>	Not applicable			
Yn unol â WP7, a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal? <i>In accordance with WP7 has an EqIA been identified as necessary and undertaken?</i>	This is not applicable for this report.			
Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal?	This is not applicable for this report.			

<i>In accordance with WP68, has an SEIA identified as necessary been undertaken?</i>	
Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR) <i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i>	Strategic Priority P18: Quality, Innovation and Improvement
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith <i>Financial implications as a result of implementing the recommendations</i>	Not applicable at this stage
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith <i>Workforce implications as a result of implementing the recommendations</i>	Not applicable at this stage
Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori <i>Feedback, response, and follow up summary following consultation</i>	The paper has been prepared as per the next steps set out at the Health Board Meeting in July 2024 and following consideration at the Quality, Safety and Experience Committees that have taken place since July 2024.
Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol) <i>Links to BAF risks:</i> (or links to the Corporate Risk Register)	CRR-16 – Leadership/Special Measures
Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol) <i>Reason for submission of report to confidential board (where relevant)</i>	Not applicable
<i>Next Steps:</i> The next Quality, Safety and Experience Committee Report will be discussed at the meeting on 20 February 2025. The Committee will receive a report containing an update on the development of the Expert Advisory Group work, including an update on its work programme and confirmation of the timescales for receiving information that will enable it to assess progress of developing sustainable outcomes from the actions in the Invited Services Review. In addition it will receive an update on the Outcome Performance Measures that are being developed to support positive progress. The subsequent Quality, Safety and Experience Committee Reports from April 2025 onwards will receive reports that contain an initial assessment of sustainable outcomes against the actions in the Invited Services Review from the Health Board Evidence of Outcomes Group and the Expert Advisory Group. The Board in July 2025 will receive a report reflecting the level of assurance that Quality, Safety and Experience Committee will have received on these matters over the previous six months	

<i>List of Appendices: Not Applicable</i>

HEALTH BOARD RESPONSE TO THE RCPSYCH INVITED SERVICES REVIEW

1. INTRODUCTION

The Board received a report on the 25 July 2024. It set out the Health Board Response to the Royal College of Psychiatrists' Invited Review Services Report. The report outlined that the Board is committed to making good progress on this response at a steady pace, with clear evidence that actions are completed, and real focus on moving forward collaboratively with patients and users, and families – to deliver safe and reliable care to the people of North Wales.

The Board report from 25 July 2024 outlined the next steps as listed below. This is the first report back to the Health Board since that meeting and an update on these elements provides the focus of this report as well as a look forward to the next six months.

- To establish the recommended governance framework, which will include an 'Expert Advisory Group', independently chaired with family representatives, Llais colleagues and other stakeholders included as group members.
- Continue to strengthen the patient and carer experience work and to ensure this influences future service developments.
- To commence monitoring of the implementation of the RCPsych Response plan, focussing on the ten themes identified.
- To provide a regular updates on progress to the Health Board of the RCPsych Response plan with regular oversight through the Quality, Safety and Experience Committee, and also to the Health Board - every six months.

The purpose of this report is to detail the progress on these next steps and they are reflected in the respective sections of this report. The Board is asked to **note** the contents of the report and to **receive assurance** on the progress of the Health Board response to the RCPsych Invited Services Review.

2. BACKGROUND

The Board, at its meeting on 25 July 2024, received and considered the Health Board response to the Royal College of Psychiatrists Invited Review Service Report. The full report can be found on the BCU website. The scope of the review covered the recommendations made in the following reports:

- Ockenden 1 (2014)
- Ockenden 2 (2018)
- HASCAS (2018)
- Holden (2013)

The Review Team grouped their findings into ten themes hoping this would be helpful to the Health Board in setting priorities for service development and quality improvement.

Listed below are the ten themes:

- ✓ Theme one: Patient and user centred care
- ✓ Theme two: Legislation and clinical guidelines
- ✓ Theme three: Governance
- ✓ Theme four: Staffing
- ✓ Theme five: Management structure
- ✓ Theme six: Clinical services organisation
- ✓ Theme seven: Training and development
- ✓ Theme eight: Leadership and staff engagement
- ✓ Theme nine: Resources
- ✓ Theme ten: Physical environment

The report to the Health Board on the 25 July 2024 included a high level description of proposed governance arrangements to oversee the response plan delivery. The Board has agreed that oversight of the response to the RCPsych Report will be through the Quality Safety and Experience Committee with six-monthly progress reports, provided to the Board. A copy of the last report to the Quality, Safety and Experience Committee on the 17 December 2024 can be accessed on the [BCU Website](#).

An integral part of this request focused on incorporating the views of families and other stakeholders, including Llais, following their feedback on the provision of care provided to their relatives, during the May 2024 meetings (both in the Health Board meeting and in the earlier families meeting).

The four key themes and actions were:

- For the Board to draw on best practice from elsewhere in the UK and internationally and to bring this to North Wales.
- For the Board to take some time to consider the Independent Review Service findings, rather than move too swiftly to an 'action plan'
- For people 'outside' the Board to help provide the Board with advice and on overview of how services are being developed and delivered
- For the Board to pull out some of the elements of the further work required within the report and progress 'as soon as possible'

3. SECTION 1 – ESTABLISH THE RECOMMENDED GOVERNANCE FRAMEWORK

The recommended governance framework has now been established and a [report to the Quality, Safety and Experience Committee on the 17 December 2024](#) contained the detail of the arrangements that have been put in place.

The governance framework now includes the following elements:

- Establishment of an Expert Advisory Group that is a Sub-Group of the Quality, Safety and Experience Committee, independently Chaired with family and user representatives, and Llais as members.
- Establishment of a Health Board RCPsych Action Delivery Group (an internal management group) that reports into the Executive Team.
- Regular monitoring and oversight of response plan progress/delivery via the Quality, Safety and Experience Committee.
- A procedure for providing progressive and sustained evidence of actions is required

The governance framework is supported by an appointment of a Special Advisor to the Health Board and Chairs the Expert Advisory Group. The Terms of Reference agreed by Quality, Safety and Experience Committee set a timescale for completion in 12 months. Ros Alstead has been appointed by the Health Board to this role by the Health Board until October 2025. The focus of the Special Advisor is to offer additional independent expertise and specialist knowledge in supporting the Health Board's response to the Royal College of Psychiatrists Invited Services Review. The approach and aim will be to support the Health Board to move beyond achieving the recommendations from the review, and towards continuously improving and sustaining improvements in services across North Wales.

The support from Llais has been of significant value in the establishment of the governance framework and their involvement in the development of the Expert Advisory Group has enabled the views and experiences of current service users and carers to be effectively and appropriately represented. In addition, the support of an Independent Member to work with the Special Advisor and Associate Director of Governance has given additional assurance to the Quality, Safety and Experience Committee relating to the effective engagement with stakeholders.

The governance framework has now been established and the details of the arrangements can be evidenced in the Quality, Safety and Experience Committee papers that were received at the Committee on the 17 December 2024. Since the 24 July 2024 Board meeting there have been three reports to the Quality, Safety and Experience Committee, three rounds of meetings with Expert Advisory Group members, four meetings of the Health Board RCPsych Action Delivery Group and four meetings of the Evidence of Outcomes Group.

4. SECTION 2 – STRENGTHEN THE PATIENT AND CARER EXPERIENCE WORK

4.1 MEANINGFUL ENGAGEMENT WITH PATIENTS AND FAMILY MEMBERS OF TAWEL FAN

There has been a significant focus since the 24 July 2024 Health Board meeting on the development of an Expert Advisory Group that includes two active service users and four Tawel Fan family members with lived experience.

Llais are also members of the group and have supported the development and engagement of the Group members. The Special Advisor and Health Board colleagues greatly value the ability of Llais to support current service users and family members from Tawel Fan to have the fullest opportunity to comment on the report and help Health Board colleagues to understand the impact of the original failings in care and also the struggle they had to be heard.

Due to the nature of the issues that the Invited Service Review addresses it has been challenging to develop the Expert Advisory Group at pace. The time that has been spent engaging and supporting members has resulted in positive relationships and a developing level of trust with Group members and the Health Board Special Advisor and programme team members. There have been three rounds of meetings with Group members. (October 2024, December 2024 and January 2024) and meetings scheduled monthly until October 2025.

At the first round of engagement meetings in October and November 2024, the Special Advisor and Llais were able to introduce the role of the Group and the Special Advisor and enter into dialogue with individual group members to identify particular areas of focus and interest (related to the scope of RCPsych Invited Services Review).

In the second round of meetings (December 2024) members of the Group were presented with an approach by which they can review the progress against their particular areas of focus by alignment with the actions of the RCPsych Invited Services Review. This included the receipt of a proposal cross referencing their areas of interest against the relevant actions in the Invited Services Review and support from the Special Advisor to the Health Board in defining what the sustainable improvement in outcomes could be. The Group members were asked to review this proposal ahead of a third round of meetings commencing 17 January 2025.

The third round of meetings with the Group members were taking place as this report was being written so had not yet been reported to the Quality, Safety and Experience Committee. The members of the Group have continued their engagement and commitment and the outcome of the January 2024 Group meeting will be to gain feedback from group members on the approach proposal. This will enable the formation of an Expert Advisory Group Work Programme. Assurance on this will be provided to the Quality, Safety and Experience Committee in February 2025.

A Consultant Nurse for Dementia joined the membership of the Expert Advisory Group from 17 January 2025. This reflects the need for further improvement in Older Persons and Dementia care. This was a consistent theme throughout the RCPsych report.

4.2 AREAS OF FOCUS FOR PATIENTS AND FAMILY MEMBERS OF TAWEL FAN

Patient and Family Centred Care is the main focus from Group members, learning from past experiences and looking forward to improving the experience of patients' service users and families now and in the future.

The service users and families specifically wish to focus on: older persons mental health wards (main priority for Tawel Fan Families) and adult mental health wards and community team (main priority for current service users). It was also significant that in relation to older persons mental health the Group members wish to focus on the actions in the response plan in relation to Dementia. These points fit with the RCPsych invited review recommendation about the need to drive up standards in core mental health services. It will be a Health Board's Nurse for Dementia as a member of the Expert Advisory Group and will be able to provide expertise in older people's care, public engagement and detailed knowledge of services.

The Group members also expressed interest in cross-cutting matters such as clinical records and mortality reviews including learning and safeguarding.

The third round of meetings focussed on how the Group will work and challenge on the Response Action Plan. During January 2025, the Special Advisor and Executive Director of Allied Health Professionals and Health Science commenced a multi-disciplinary team approach on developing a smaller number of measurable real time outcomes of good mental healthcare which will help to demonstrate sustainability. It is particularly important that this work is able to illustrate in real time where care is good today.

5. SECTION 3 - COMMENCE MONITORING OF THE IMPLEMENTATION OF THE RCPsych RESPONSE PLAN

The ability for the Health Board Action Delivery Group and Expert Advisory Group to assess and validate progress against the RCPsych Invited Service Review report will determine how effectively progress against the recommendations can be tested by the Quality, Safety and Experience Committee and the Board in due course.

The work to progress improvements and reporting to the Health Board RCPsych Action Delivery Group will continue whilst the development of the Expert Advisory Group continues. This principle has been agreed with the Executive Directors, Chair of the Expert Advisory Group and discussed at a Board Development session in November 2024.

There is a desire to assess, validate and update progress on actions (and the sustained improvement in outcomes) and this report highlights that real and effective engagement is required in order to create the foundations upon which the assessment of improvement can be made. This engagement has been the focus of the first six months. The focus of the next six months will be to support the Expert Advisory Group and the Evidence of Outcome Group to assess and validate evidence of sustained improvement against the actions of the Invited Services Review.

The Quality, Safety and Experience Committee is receiving updates on progress against improvement actions from the Health Board RCPsych Action Delivery Group and this is being reported through the Committee. The Committee reviewed this on the 17 December 2024. The detail of actions progressed is available on the publicly available report and can be [viewed here](#).

6. SECTION 4 – TO PROVIDE REGULAR UPDATES ON PROGRESS TO THE QUALITY, SAFETY AND EXPERIENCE COMMITTEE AND BOARD – THE NEXT SIX MONTHS

Reporting arrangements will continue through the regular report to Quality, Safety and Experience Committee. The next report to the Board will be in July 2025.

The focus of the next report to the Quality Safety and Experience Committee on the 20 February 2025 will be the update on the development of the Expert Advisory Group work programme and plan for the Expert Advisory Group receiving information that will enable it to assess progress the actions in the Invited Services Review. In addition it will receive an update on the Outcome Measures that are being developed to report progress against the actions and demonstrate sustained improvement in outcomes.

The subsequent Quality, Safety and Experience Committee Reports from April 2025 onwards will receive reports that contain assessment of progress against the actions in the Invited Services Review from the Health Board Evidence of Outcomes Group and the Expert Advisory Group.

The Board Report in July 2025 will receive a report reflecting the level of assurance that Committee will have received on these matters over the previous six months.

It is also important to recognise the support that current service users and family members of the Expert Advisory Group will need to continue to carry out this role. The Health Board has committed to continue providing this support.

7. PROGRESSING THE ACTIONS IN THE INVITED SERVICES REVIEW REPORT

This report highlights that over the last six months the focus has been on meaningful engagement with stakeholders, including clarity on how an assessment of progress of improvements will be made and the Quality, Safety and Experience Committee has been clear that there will not be validation of progress made until the Expert Advisory Group has reported this assurance to the Committee. As reported in Section 5, it is important that the Health Board continues to progress improvements and the following section gives a brief summary of matters reported to the Quality, Safety and Experience Committee on 17 December 2024. Noted below are some examples of progress that has been accomplished aligned to improvement activity;

- The Electronic Patient records business case has been approved by Welsh Government and pre-procurement processes are underway to enable a digital patient solution.
- The Patient and Carer Experience Team's introduced a new telephony system in July 2024 to give customers an improved caller experience. The successful relaunch of the Health Board's Patient Advice and Liaison Service (PALS) online platforms in October 2024, through the new "Report it" page, has led to the number of visitors to the new PALS and Complaints webpage increasing to 1559 (an average of 390 page visits per week). In October 2024, 5095 All Wales Real-Time Patient and Carer Feedback Survey responses were received via CIVICA, with 80.94% of respondents 'very satisfied' with their overall experience of accessing Health Board services.
- Health Board wide Implementation of the five step approach to the management of Complaints, Incidents and Mortality Reviews, has led to the total number of open complaints across the Health Board falling from 672 to 195 (70.98% decrease) and the total overdue complaints have fallen from 428 to 42 (90.18% decrease). As a Health Board, we are addressing complaints quicker and as at 15th January 2025, the Health Board compliance for addressing complaints was 80.23%, with Mental Health & Learning Disabilities achieving 100% compliance during this period.
- Improved Mental Capacity Act (MCA) Training has led to an increase in Deprivation of Liberty (DoLS) applications. This has demonstrated an improvement in MCA/DoLS awareness by the Health Board thus ensuring that patients are better protected by respective legislative frameworks.
- A Peer Review Environmental Ligature Risk Assessment Audit has been completed across all inpatient units across the MH&LD Division. The Audit demonstrates that ward areas have ligature assessments in place with a compliance of annual assessment at 93.1%. A re-audit will be completed on a six-monthly basis with a focus on bedrooms and bathrooms. In addition, the Health Board has trained 457 staff in ligature awareness training which has led to increased awareness by staff of ligature risks.
- The MH&LD Anti-psychotic Audit Task and Finish group, (established to ensure Audits are received and completed by the Multidisciplinary Teams), produced their

first update in November 2024. A monthly update is reported into the group, to ensure implementation and embedded process for these Audits.

- A MH&LD Falls Audit was completed during August 2024 which has led to improvements in the quality of record-keeping and staff awareness and the development of Falls Champions, Falls workshop and a Falls Bulletin developed and progress shared with all staff across the Division.
- The Divisional Recruitment & Retention Group have focused their activity on 'grow your own' nursing, with a number of Health Care Support Workers (HCSW's) supported to enter into a Registered Nurse training programme. This activity supports HCSW retention, career progression and skill development which will have a positive impact on our workforce.
- The development and implementation of a clear and comprehensive framework for senior leadership connectedness to the wards has progressed with the development a MH&LD Senior Leadership Walkabout Schedule. The Walkabouts commenced in April 2024, which includes "Ask DSLT (Divisional Senior Leadership Team) virtual staff engagement sessions and "Drop in Sessions" for patients, families and carers to improve engagement with external partners and stakeholders.
- The "iCAN" Dashboard has been strengthened to give an overview of community support activity and performance with outcomes measures achieved during the reporting period. Several Workshops were held during September 2024 with Primary Care, Mental Health, Local Authority, Allied Health Professionals and Third Sector Partners to help inform the approach to Tier 0/1 service strategy and development and the approach to commissioning services going forward. This has led to an increase in external partner and stakeholder engagement.

The governance arrangements that have been established allow early identification of actions where additional support or focus is needed. The Health Board Action Delivery Group received an escalation in regards to Action 9.3 which relates to "Development of Business Cases related to Therapeutic provision in inpatient settings." This escalation was reported to Quality, Safety and Experience Committee on 24 October 2024. The matter was also escalated to Executive Team and work has commenced by the Therapies Senior Managers and MH&LD Senior Managers working together to establish proposals to address the action. An update on this position will be reported to Quality, Safety and Experience Committee in February 2024.

The last report to Board identified the requirement to identify best practice in Mental Health and Learning Disabilities. Since the last report the Health Board has joined the Mental Health Network which is an NHS Confederation members network. The Network seeks to champion good practice and innovation in the mental health sector, influence policy and legislation and interpret the broader political and policy environment.

The Quality, Safety and Experience Committee received the report on progress against the actions from the Delivery Group (of 25 November 2024). At this reporting point the Committee noted good progress has been made overall and that there was an acceptable level of assurance of progress against the actions that have been taken up to 15 November 2024, as set out in the detailed response plan. The work of the Evidence of Outcome Group (Pilot phase) is supporting the provision of information that evidences actions taken and sustained improvement.

8. RECOMMENDATIONS

The Board is asked to:

- **NOTE AND CONSIDER** the contents of the report
- **RECEIVE ASSURANCE** on the action that has been taken to progress the Health Board response to the RCPsych Invited Service Review

Closing Statement

The Health Board's sincere thanks are again extended to the families and current service users who have supported this work since July 2024 and also for the support that Llais has provided over the last six months to formulate the approach reflected in this report and the opportunity it has given to fully understand the concerns of families and current service users.

The report clearly illustrates the importance of meaningful engagement with patients and users, and families – to deliver safe and reliable care to the people of North Wales.

This report also highlights the Health Board's continued commitment and efforts to making effective and sustained progress within the next six months focussing on providing clear evidence to enable a fair assessment of the levels of improvement made.