

Appendix 2

Organisational response

[Exhibit 3 will be completed once the report and organisational response have been considered by the relevant committee.]

Exhibit 3: organisational response.

Recommendation	Management response	Completion date	Responsible officer
<p>R1 Business Planning and Performance Group</p> <p>The Business Planning and Performance Group (BPPAG), although operating well, has a very full agenda. In addition, there is a lack of clarity around how information from this group is escalated to the Board. The Health Board and Directorate should:</p> <ul style="list-style-type: none">a) Critically review the contents of the BPPAG agenda to ensure it is manageable within the time; andb) Clarify the route of escalation of information from the BPPAG to the Board and its committees, ensuring that reporting requirements are streamlined and reduce duplication.	<ul style="list-style-type: none">a) To undertake a review of the BPPAG Terms of Reference (TOR), and establish sub-groups where appropriate, who will provide Exception Reports to BPPAG, ensuring the relevant escalation of key operational matters to be discussed within the forum. <p>To undertake annual reviews of the planned BPPAG agendas, ensuring that strategic and operational plans are discussed and monitored at the appropriate time</p>	<p>September 2023</p> <p>September 2023</p>	<p>Director of Mental Health and Learning Disabilities</p> <p>Director of Mental Health and Learning Disabilities</p>

	<p>To ensure that updates to the Table of Actions (TOAs) arising from previous BPPAG meetings are provided in writing in advance of the meeting to ensure appropriate time management of meetings.</p> <p>b) Matters of concern raised in BPPAG are escalated to the Director of Operations' Senior Operational Business (SOB) meetings, which are held monthly. Matters requiring the attention of Board or its committees can be discussed in this forum, and advised on the appropriate escalation route required.</p> <p>Matters of concern are also discussed via the recently implemented Improving Together sessions, which are attended by Executives and Directorate Senior Management.</p>	September 2023	Director of Mental Health and Learning Disabilities
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Review of Mental Health and Learning Disabilities Directorate Governance Arrangements

Recommendation	Management response	Completion date	Responsible officer
<p>Understanding of escalation and de-escalation of risks</p> <p>R2 There is uncertainty within the Directorate of the thresholds for escalation of risks and issues, which could affect the ability of the Board to be assured. The Health Board should work with the Directorate to improve its understanding of the escalation and deescalation of risks.</p>	<p>The Directorate is supported by the Assurance and Risk Team in the formal processes and procedures in terms of the escalation and de-escalation of risks by providing training to relevant staff within the Directorate, and providing regular risk updates to both BPPAG and QSE meetings.</p>		

	<p>Directorate to define thresholds and/or performance metrics in order to assist in the escalation and de-escalation of risks</p> <p>Directorate to implement the defined thresholds and/or performance metrics in order to assist in the escalation and de-escalation of risks, with training to be provided to relevant staff, supported by the Assurance and Risk Team.</p>	<p>September 2023</p> <p>December 2023</p>	<p>Triumvirate Management / MHLD Assistant Directors</p> <p>Triumvirate Management / MHLD Assistant Directors</p>
<p>Operational risk management arrangements</p> <p>R3 The Directorate has acted upon previous reviews and made progress in improving its risk management arrangements, however, the quality of information contained on the risk register needs improving. The Directorate should ensure the Directorate risk register contains clear mitigating actions, milestones and expected outcomes.</p>	<p>Risks are reviewed monthly by Heads of Service within the Directorate, supported by their Business Managers, and are reported at every BPPAG and QSE meeting within the Directorate. Risks are also discussed and challenged by the recently-implemented Improving Together sessions, which are attended by Executives and Directorate Senior Management.</p> <p>Directorate to hold a “risk workshop” in order to review and challenge where necessary the existing risks on the risk register to ensure mitigating actions, milestones and expected outcomes are clearly articulated.</p>	<p>July 2023</p>	<p>Triumvirate Management / MHLD Assistant Directors</p>
<p>Clinical audit activity</p>			

Recommendation	Management response	Completion date	Responsible officer
<p>R4 The clinical audit programme has been impacted by the pandemic and changes in leadership. The Directorate should ensure that a full clinical audit programme is reinstated and operational.</p>	<p>Develop a Directorate audit framework and plan, with the support of the Clinical Audit Team, that reflects local ward/team based audits and wider Health Board requirements</p> <p>Training of relevant staff to be provided in order to utilise Audit and Management and Tracking (AMaT) once clinical audit programme has been agreed.</p> <p>Develop a plan to engage frontline staff on the delivery and contribution of the clinical audit programme.</p> <p>Update reports on progress of the clinical audit programme to be provided to MHL D QSE in order to provide oversight on outcomes.</p>	<p>December 2023</p> <p>December 2023</p> <p>December 2023</p> <p>March 2024</p>	<p>Associate Medical Director, Mental Health and Learning Disabilities</p> <p>Consultant Nurse, MHL D</p> <p>Consultant Nurse, MHL D</p> <p>Consultant Nurse, MHL D</p>

Staff engagement			
<p>R5 Staff feel that there are poor relationships with senior management (both within the Directorate and at an Executive level), with a perception that mental health and learning disabilities are not a priority, and a sense of staff not being listened to or valued. The Health Board should work with the Directorate to:</p> <ul style="list-style-type: none"> a) ensure mechanisms to listen to staff and encourage dialogue are strengthened, and having the desired effect on improving staff engagement; b) increase senior management visibility across the Directorate; and c) include engagement and culture change as part of the Directorate's organisational development work. 	<ul style="list-style-type: none"> a) The Health Board routinely conducts staff surveys. The Directorate to undertake Directorate-specific surveys in order to inform future staff engagement plans, and to highlight any concerns which staff may have requiring the attention of Directorate senior management. <p>Develop a Directorate Staff Engagement and Organisational and Development Plan, supported by colleagues from Workforce to identify effective communication mechanisms</p> <ul style="list-style-type: none"> b) Continue to promote on a regular basis a regular approach to leadership visibility and engagement visits across clinical areas as early as possible c) Engagement and culture change to be included while developing the Directorate Staff Engagement and Organisational and Development Plan 	<p>Triumvirate Management / MHLD Assistant Directors</p> <p>Triumvirate Management</p> <p>Triumvirate Management</p> <p>Triumvirate Management</p>	<p>December 2023</p> <p>March 2024</p> <p>June 2023</p> <p>March 2024</p>
<p>Recruitment</p>			

Review of Mental Health and Learning Disabilities Directorate Governance Arrangements

Recommendation	Management response	Completion date	Responsible officer
<p>R6 There are significant vacancies within the Directorate which are affecting the ability of the service to meet demand in a timely fashion. Although the Directorate has developed an embryonic workforce management group, there needs to be a more formal approach. The Directorate should develop a formal and targeted approach to address recruitment hotspots and ensure sustainability.</p>	<p>Work has been undertaken by each service within the Directorate to identify significant vacancies. These findings are to inform the development of an overarching Directorate Recruitment and Retention Plan, which will be aligned to wider Health Board strategic objectives and wider national priorities.</p> <p>The development of the Recruitment and Retention Plan will be completed and overseen by the MHL D Workforce Group, which is attended by Heads of Service and Professional Leads monthly</p>	<p>December 2023</p>	<p>Assistant Director of Nursing, MHL D</p>

