

**Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD
QUALITY, SAFETY AND EXPERIENCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 April 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	NHS Executive Report: Review of Psychology and Psychological Interventions for Children and Young People (CYP)
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mr Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Ms Angela Lodwick ,Assistant Director MH&LD Ms Lisa Humphrey , General Manager Womens & Childrens

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This SBAR is presented to Committee to outline the progress made in respect of the NHS Executives Report on the Review of Psychology and Psychological Interventions for CYP (September 2023 link below) which consisted of 9 recommendations for improvement and which are outlined in the embedded Action Plan updated to March 2024.

duhb.nhs.wales/about-us/governance-arrangements/board-committees/quality-safety-and-experience-committee-qsec/qsec-committee-meeting-7-december-2023/2-7-2-psychology-and-psychological-intervention-for-children-and-young-people/

The Committee is requested to accept the Action Plan(Appendix 1) as assurance on progress to date and compliance against agreed time frames.

Cefndir / Background

Following a range of national developments to improve access to and quality of psychological therapy delivered in Wales over the past decade, the Psychological Therapies in Wales - Policy Implementation Guidance (PIG, 2012) and the Review of Psychological Therapies, it was agreed that national standards and accompanying guidance should be developed for Wales alongside an agreed approach to national data collection.

Matrics Cymru was subsequently published in 2017, followed by Matrics Plant: Guidance on the Delivery of Psychological Interventions for Children and Young People in Wales with an accompanying Matrics Plant Implementation Plan in 2021 by the National Psychological Therapies Management Committee and Public Health Wales.

In order to gain an accurate understanding of activity and waiting lists, the Welsh Government has commissioned the NHS Wales Executive Performance and Assurance Division to undertake a review of Psychology and Psychological Interventions.

Aims

- To understand the consistency and variation in the psychology and psychological intervention offer to children and young people (under 18s) in Hywel Dda UHB
- To clarify the pathways to access and the demand, activity, capacity and waiting lists in the service and the relationship to the Mental Health Measure Part 1b (intervention) target
- To highlight and share both good practice and challenges in service delivery

The review aims to understand how services are organised including areas of consistency and variation between policy, performance, and clinical guidelines in each Health Boards service offer, waiting times, reporting arrangements, and performance management processes.

The review was published September 2023 and a subsequent Improvement Plan outlining 9 recommendations has been developed and is in the implementation stage.

Asesiad / Assessment

- Assessment of the Health Board's current position
- Organisational risks
- Evidence base to help inform decision making

1. The HB should review and update the Part 1 Scheme with partner agencies, to reflect key areas of service development and clarify how the service structure is aligned with the Measure.

Status R1.1 Amber
R1.2 Green

2. The HB should ensure that all services delivering psychology and psychological interventions to CYP have service specifications in place.

Status R2.1 Amber
R2.2 Amber

3. The HB should ensure equitable availability of appropriate psychological interventions across directorates, in line with Matrics Plant, and to eliminate gaps in service. This could be achieved by expanding the Paediatric Psychology service, improving pathways to SCAMHS interventions from Paediatric Psychology, or both.

Status R3.1 Red as breached but now Green
R3.2 Amber
R3.2 Amber
R3.4 Amber
R3.5 Amber

4. The HB should explore opportunities for improved psychological interventions and patient outcomes by sharing resources and professional expertise, to enhance joint clinical work between SCAMHS and Paediatric Psychology.

Status R4.1 Amber
R4.2 Amber
R4.3 Amber

5. The HB should ensure equity of training availability and budgets, supervision, and professional leadership between directorates to ensure all staff have equal opportunities for development and support.

Status R5.1 Amber
R5.2 Amber
R5.3 Green

R5.4 Amber

R5.5 Amber

6. The HB should ensure that staff have access to accessible, appropriate accommodation to enable staff to work efficiently and safely and to maximise capacity.

Status R6.1 Green

R6.2 Amber

R6.3 Amber

7. The HB should review how it meets the Code of Practice guidance regarding Care Coordination in line with the current service structure, to meet the needs of patients and the service.

Status R7.1 Amber

R7.2 Amber

R7.3 Amber

R7.4 Green

8. The HB should embed demand and capacity principles into the management of all services. The HB may wish to access further demand and capacity training from the NHS Wales Executive or other training providers.

Status R8.1 Amber

9. The HB should ensure that patient feedback, involvement and outcome measures are used across all directorates in service evaluation and planning

Status R9.1 Amber

The Action Plan is on track for completion by December 2024 and scrutiny of progress is monitored via individual Directorate quality, safety and experience group and reporting of Assurance and Risks through Health Board Audit Assurance and Risk Committee.

Organisational risks

Shortfall in required financial resources to put into place policies/pathways/solutions identified by the T&F groups as part of the Action Plan. This will be somewhat mitigated by ensuring processes are developed and available resource used efficiently to ensure the best service possible is given.

Two recommendations in the NHS Executive report potentially carry resource implications beyond the capacity of the service budgets to resolve, namely “The HB should ensure equitable availability of appropriate psychological interventions across directorates, in line with Matrics Plant, and to eliminate gaps in service” and “The HB should ensure that staff have access to accessible, appropriate accommodation to enable staff to work efficiently and safely and to maximise capacity”. Given the resource implications, there is a risk that these recommendations will not be fully met as worded in the NHS Executive report.

There is a risk that unforeseen operational pressures will impact the timescales of the actions agreed in the report.

Argymhelliad / Recommendation

This SBAR is provided to provide assurance on progress to date in respect of the implementation of the recommendations as outlined in the Action Plan.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.3 Provide assurance that the Board has an effective strategy and delivery plan(s) for improving the quality and safety of care patients receive, commissioning quality and safety impact assessments where considered appropriate
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	6. Person-Centred Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	4c Mental Health Recovery Plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	8. Transform our communities through collaboration with people, communities and partners 4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Matix Cymru 2017 Matrics Plant 2021 Policy Implementation Plan (PIG) 2021
Rhestr Termiau: Glossary of Terms:	
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Phrofiod: Parties / Committees consulted prior to Quality, Safety and Experience Committee:	Nil

Effaith: (rhaid cwblhau)
Impact: (must be completed)

Ariannol / Gwerth am Arian: Financial / Service:	Nil
Ansawdd / Gofal Claf: Quality / Patient Care:	Nil
Gweithlu: Workforce:	Nil
Risg: Risk:	Nil
Cyfreithiol: Legal:	Nil
Enw Da: Reputational:	Nil
Gyfrinachedd: Privacy:	Nil
Cydraddoldeb: Equality:	Nil

ACTION PLAN TEMPLATE

ACTION PLAN- Review of Psychology & Psychological Interventions for Children and Young People

LEAD ED –

Date of Progress Update – *January 2024*

STATUS	
	RED - Implementation of action behind schedule
	AMBER - Action on schedule for completion by agreed date
	GREEN - Action complete

REF (See Note1)	RECOMMENDATION (See note 2)	MANAGEMENT ACTION (See Note 3)	RESPONSIBLE OFFICER (Note 4)	AGREED TIMESCALE (See Note 5)	STATUS (Note 6)	UPDATES ON PROGRESS – AS AT ENTER DATE (See Note 7)
R1	The HB should review and update the Part 1 Scheme with partner agencies, to reflect key areas of service development and clarify how the service structure is aligned with the Measure.	1. HDUHB will undertake a review of the Health Board Part 1 Scheme in collaboration with partner agencies (LA) and commissioned services to ensure the service is aligned to the MH Measure.	Angela Lodwick/ Alastair Wakely/	March 2024		Awaiting sign off for Part 1 - 26 th March by Mental Health Act Legislation Committee
		2. S-CAMHS will contribute to the update ensuring all the new service developments are aligned to the Measure, including the new SiR Service.	Angela Lodwick/Alastair Wakely	March 2024	G	Email trails available by AW
R2	The HB should ensure that all services delivering psychology and psychological interventions to CYP have	1. Paediatric Psychology will review/update Service Specification	Tracey Humble/Julian Jeremy	June 2024		Draft Service Spec developed by TH. Passed to JJ/NWD for comment Feedback in next meeting.

	service specifications in place.	2. Review/update S-CAMHS Service Specification	Angela Lodwick/Alastair Wakely	June 2024		Teams Channel set up and re-formatting underway. Aileen Flynn has been linked in.
R3	The HB should ensure equitable availability of appropriate psychological interventions across directorates, in line with Matrics Plant, and to eliminate gaps in service. This could be achieved by expanding the Paediatric Psychology service, improving pathways to SCAMHS interventions from Paediatric Psychology, or both.	Task & Finish Group to be established with clear Terms of Reference.	Alastair Wakely/Tracey Humble	January 2024 March 2024		Task & Finish Group membership agreed. AW/TH drafted TOR. Discussed. Circulate to group, comments by 12 th March
		Benchmark Paediatric Psychology in line with other Health Boards in Wales	Julian Jeremy/Tracey Humble	November 2024		On target
		Identify gaps in availability of psychological interventions in HDUHB in line with Matrics Plant	Andrea Mowthorpe/Katie O'Shea & Julian Jeremy	October 24		On target
		Undertake and prepare an options appraisal paper based on the above actions (1,2,3)	Alastair Wakely/Tracey Humble	December 24		On target
		Identify current pathways to S-CAMHS from Paediatric Psychology and initiate improvements where possible.	Julian Jeremy/Andrea Mowthorpe	April 24		JJ/AM have met to identify training, consultation and Benchmarking Psychology across HB's in Wales. JJ/AM to meet further to complete
R4	The HB should explore opportunities for improved psychological interventions	1. Explore within Task & Finishing Group established for R3.	Tracey Humble/Alastair Wakely	January 24		As R3. 1

	and patient outcomes by sharing resources and professional expertise, to enhance joint clinical work between SCAMHS and Paediatric Psychology.	2. Identify and implement opportunities for improved psychological interventions & patient outcomes across Paediatrics and S-CAMHS	Tracey Humble/Alastair Wakely	July 24		On target
		3. Identify further resource required to further enhance interventions and outcomes to inform option appraisal from Action 4 of R3	Tracey Humble/Alastair Wakely	July 24		On target
R5	The HB should ensure equity of training availability and budgets, supervision, and professional leadership between directorates to ensure all staff have equal opportunities for development and support.	1. Benchmark Paediatric Psychology with that in other Health Boards in Wales	Mark Smith/Tracey Humble /Julian Jeremy	November 2024		Key Members in discussions JJ/AM/KOS
		2. Internal review within paediatrics to identify appropriate development of psychological provision within paediatrics, leadership structures and pathways in line with governance arrangements of the wider health board	Mark Smith/Tracey Humble /Julian Jeremy	November 2024		On target
		3. PTMG to be re-established	Mark Smith	March 2024		Date established for March 24
		4. Paediatric Service to co-produce an annual training plan to include advice and direction from Professional lead and shared training opportunities with S-CAMHS.	Paediatric Service/S-CAMHS /Therapies	May 2024		CAMHS to initiate Training Steering Group – invite JJ agree ToR On target to produce training plan
		5. Identifying gaps in funding and provision for development in paediatric psychology	Julian Jeremy/Tracey Humble	July 24		On target

R6	The HB should ensure that staff have access to accessible, appropriate accommodation to enable staff to work efficiently and safely and to maximise capacity.	1. Exploring and contribute to new projects opportunities for new accommodation, eg, Hwb (Debenhams)	Tracey Humble/Alastair Wakely	March 24		After discussion, guidance. Evidence to be provided Insert into Teams
		2. Review of Agile Working arrangements to increase efficiency of current accommodation – SCAMHS	Alastair Wakely	April 24		AW tasked team leads to discuss in team meeting. AW will attend team meetings
		3. Undertake a service review of current estates of both services and develop an option proposal/SBAR	Tracey Humble/Alastair Wakely	November 2024		On target
R7	The HB should review how it meets the Code of Practice guidance regarding Care Coordination in line with the current service structure, to meet the needs of patients and the service.	1. Review CoP to identify any areas for improvement of compliance and report into CTP monitoring group	Laura Davies	July 2024		On target.
		2. Complete remaining CTP training sessions for S-CAMHS workforce	Laura Davies	April 2024		AW to escalate to AL/LH On track
		3. Initiate a rolling quality review process for CTPs	Laura Davies	April 2024		Escalate to AL/LH On track
		4. CTP monitoring group to continue - bimonthly basis to ensure continued compliance & quality	Laura Davies	April 2024		Next meeting 11 th April 2024 – minutes available

R8	The HB should embed demand and capacity principles into the management of all services. The HB may wish to access further demand and capacity training from the NHS Wales Executive or other training providers.	1. Both services will undertake demand and capacity training provided by the NHS Executive	Tracey Humble /Alastair Wakely	March 2024		Contact NHS Executive for dates TH/AW to action
R9	The HB should ensure that patient feedback, involvement and outcome measures are used across all directorates in service evaluation and planning.	1. Paediatric Link with VBHC team to develop both a PREM/PROM informed by national outcome measures in order to utilise patient feedback and outcomes to inform future development of the services. .	Julian Jeremy/Value Based Health Care/ Tracey Humble	June 2024		On target

Notes

1 – Enter recommendation reference from report – e.g. R1, R1.1

2 – Enter recommendation (this can be found in the final report)

3 – Enter action required to address the recommendation (consideration must be given to capacity, costs to deliver the action & any associated risks)

4 – Enter name of officer responsible for implementing the action

5 – Enter the planned realistic date for completing the action (changes to these dates must be entered in red and agreed by the lead Executive/Director)

6 – Enter the current status of action as per RAG rating above

7 – Enter date of update at top of column and enter progress against each action. Terms such as 'on-going', 'in progress', etc. should be avoided and used by exception

