

## National Bereavement Framework Implementation

<b>Organisation</b>	<b>Hywel Dda University Health Board</b>	<b>Date of Report</b>	<b>08/04/2025</b>	<b>Report Prepared By</b>	<b>Amanda Cardell/Louise O'Connor</b>
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The National Framework for the Delivery of Bereavement Care in Wales, published in October 2021 sets out how in Wales we can respond to those who are facing, or have experienced, a bereavement. The framework includes core principles, minimum bereavement care standards and a range of actions to support regional and local planning.

The Welsh Government is committed to the vision of a Compassionate Wales where everyone has equitable access to high quality bereavement care and support to meet their needs effectively when they need it. As part of its work to implement the bereavement framework, the National Bereavement Steering Group are working with health boards and partners to develop a national bereavement pathway for Wales. This consists of an overarching model pathway and a number of supporting bereavement specific modules to provide information and guidance to health boards and everyone involved in bereavement support provision, to promote a consistent approach for accessing bereavement support across Wales.

A £3m Bereavement Support Grant for third sector organisations is being provided over the three-year period 2021-24 with 21 organisations receiving funding and an additional £420k (£60k each) is also being made available to health boards in 2022-23 and 2023-24 to help with bereavement co-ordination. The health board bereavement leads meet regularly in a forum to share good practice, establish common goals and to provide a mechanism for the sharing of information concerning the bereavement workstream and implementation of the bereavement framework in their local areas.

Organisations must embed the principles of the framework and the national bereavement pathway for Wales in strategic plans, spending policies and decisions to help ensure that everyone in Wales who has been bereaved knows that help is there for them.

Completed form to be returned to: [hss.performance@gov.wales](mailto:hss.performance@gov.wales)

**Executive summary of progress to date:**

Initial Project Support has now ended to evolve into the establishment of a service model. The Steering Group has agreed a proposed organisational structure to oversee the framework. Recruitment for the position of Bereavement/Care After Death (CAD) Manager will be undertaken by end of Q3 as a priority. The role of the Steering Group will continue to oversee the development of the Strategic Framework, monitor compliance and performance with the framework and development of the integrated bereavement/CAD service. The majority of areas in relation to provision of services remain the same due to capacity within service due to unplanned absence.

	Current RAG Status	Previous RAG Status
<b>Progress RAG:</b> Provide the RAG status of delivery against framework. Please provide a copy of any supporting plans and documents.		

**Route to green including asks of WG**

A formal seamless structure for integration of Care after Death and Bereavement Services across the HB is planned, with close partnership working with Mortuary Services and Medical Examiner service team. The initial project/scoping phase has been completed. The immediate priority will be to recruit to the position of Bereavement/CAD Manager, which is currently being matched. Recruitment will commence immediately following this.

Palliative care/Bereavement engagement events to be held in 2025 to inform the development of the model.

**Update on the actions implemented during the current operational year to support the embedding of the National Framework for the Delivery of Bereavement Care in Wales and the National Bereavement Pathway.**

Area of Focus	Key Actions Taken During the Reporting Period	Risks to Delivery, Corrective Actions & By When	Outcome/What Was Achieved
<p>1. <b>Implementation of the National Bereavement Pathway for Wales – overarching pathway</b> Health Boards to outline their progress against implementation plans.</p>	<p>Head of Bereavement Services post currently vacant – to be reappointed to a joint bereavement/CAD strategic role full time.</p> <p>Band 7 role in bereavement service in recruitment process</p> <p>Band 7 role CAD – currently with job matching.</p> <p>Job Descriptions being developed for remaining posts within planned structure.</p> <p>Steering Group meetings ongoing</p> <p>Needs assessment work to be updated, with engagement events planned for 2025 (date to be confirmed).</p> <p>Specialist bereavement service in place within HB– service evaluation feedback undertaken regularly with</p>	<p>Funding of the Business Case for the remainder of the CAD service, expansion to health board wide model subject to investment/ planning decisions ongoing.</p>	

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	<p>families / individuals accessing the service.</p> <p>Memory box training and implementation ongoing.</p> <p>Formal Grief Confidence Training workshops ongoing and evaluated. Currently held monthly.</p> <p>Specialist training for baby loss and other specialist areas available on an ad hoc basis currently.</p> <p>Development of Specialist baby loss counselling service to create a seamless pathway with bereavement midwives/EPAU.</p> <p>Significant rise in staff self-referring for counselling/ specialist clinical supervision</p>	<p>Monitoring attendance and use/feedback</p> <p>Capacity remains challenging to roll out fully.</p> <p>Discussions are currently ongoing; funding &amp; capacity remains a risk.</p> <p>No availability to be able to provide specialist support to staff in a timely manner. Risk identified – not being able to offer support to staff - which impacts their resilience to be able to engage in their work. In addition to those staff who currently are on sick leave</p>	<p>Training fully evaluated and now absorbed fully within the Bereavement Support Service.</p>

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	<p>for both personal and professional loss.</p> <p>Pilot currently in process including Intensive Care and specialist palliative care, preceptorship, community &amp; Paeds.</p> <p>Pilot CYP Bereavement Grief and Loss Workshops being rolled out and evaluated.</p>	<p>and may result in longer sickness absence therefore a delay in their return to work.</p>	<p>Pilot was evaluated and successful. Training and support is now embedded into the service delivery.</p> <p>Still in its infancy stage and will continue to be assessed.</p>
<p>2. <b>Implementation of the Immediate Support Pathway for Sudden and Unexpected Death in Children and Young People up to 25 years of age</b> Health Boards to outline their progress against this Pathway.</p>	<p>Bereavement Lead (PRUDIC) in place.</p> <p>Contact and immediate support co-ordination arrangements in place.</p> <p>Specialised parental weekends are being considered; but no firm plans are in place as yet for implementation.</p>	<p>Development of relationship with new co-ordination service across Wales – Risk increase of referrals for specialist counselling.</p>	<p>Regular attendance/training at PRUDIC meetings HB wide</p> <p>Co-ordination in place in partnership with 3<sup>rd</sup> sector organization.</p> <p>Initial support groups running by third sector. Groups to be run within Bereavement Service with signposting appropriately.</p>

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	<p>Specialist bereavement team within the Bereavement Support Service to enable immediate support alongside third sector.</p> <p>Rapid response involvement being developed for 25 and under death from suicide</p>	<p>Proposal in development.</p>	<p>Regular attendance at Rapid response meetings. Work ongoing with third sector parties. Regular attendance in Rapid Response steering group.</p>
<p>3. <b>Health Board support offer to bereaved patients and families, including those identified through investigations following patient safety incidents of nosocomial COVID-19 (Covid response)</b></p> <p>Health Boards to report progress on the establishment of their Care After Death / Bereavement service and their offer to bereaved people.</p>	<p>Professional Bereavement Counselling Service including Neonatal, Maternity and Bereaved parents. Service is still supporting individuals who were impacted by COVID-19.</p>	<p>Funding to expand to all counties to ensure equity of provision.</p> <p>Permanent funding for Specialist Palliative care Paediatric Family Counsellor.</p>	<p>Meetings held with bereaved families, support continues in conjunction with PALS/Complaints Team.</p>

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	<p>Secondments in place to support mortuary &amp; bereavement service, pending implementation of new structure.</p> <p>Persons raising concerns through PTR or through feedback from bereavement officers supported with meetings with relevant clinicians and bereavement support/ PALS to address concerns.</p>	<p>Offered ongoing bereavement support/counselling in tandem with PALS</p>	
<p>4. <b>Provision of support to people with Protected Characteristics</b> Health Boards to report progress on improving provision to those people who may find it difficult to access bereavement support.</p>	<p>Inclusion &amp; diversity training in place.</p> <p>CAD policy incorporates good practice guides for different religions and belief. This is being further reviewed</p>		<p>Completed.</p>

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	Work with diversity and inclusion team planned as part of the engagement conversations planned.		In progress
5. <b>Qualitative feedback on the impact of bereavement support received</b> Health Boards to survey bereaved people to obtain their feedback on the quality of support received.	In place for specialist Bereavement.  Patient Experience Team to consider use of Civica for this – remains under review.	Feedback in the last year has highlighted the length on which bereaved people have had to wait for service.	Specialist Bereavement Support Service - questionnaire is sent to each service user for feedback. 4-5 star rating has consistently been achieved for past 5 years.

## Evidence Checklist: National Bereavement Framework Implementation

<p><b>General:</b> The health board leads the development and monitoring of the implementation of the National Bereavement Framework in their area to best meet the needs of the population.</p>	
	<p><b>Questions to consider when completing the reporting template</b></p>
<p><b>Implementation of the National Bereavement Pathway for Wales – overarching pathway (Model Specification)</b></p>	<ul style="list-style-type: none"> <li>• Describe progress achieved against the principles contained in the overarching pathway</li> <li>• Have the needs of the population been fully assessed, and the service planned accordingly?</li> <li>• Does the health board hold forums to bring together all partner agencies involved in the planning, commissioning and delivery of bereavement services?</li> <li>• Are there processes in place for joint working within the health board and partner agencies including information sharing protocols, performance management systems including quality checks, workforce development, and protocols for accountability and responsibility?</li> <li>• How are bereavement standards contained in the National Framework monitored?</li> <li>• Are there sufficiently skilled staff to plan and deliver the services?</li> </ul>
<p><b>Implementation of the National Bereavement Pathway for Wales – bereavement specific modules</b></p>	<ul style="list-style-type: none"> <li>• Describe progress achieved in the establishment of the bereavement specific pathways in the health board</li> <li>• How are response times monitored against each stage of the support pathways For Children and Young people pathway, in line with prudic process</li> <li>• What qualitative data has been collected by health boards and partner agencies to ensure adherence to the pathway contact requirements, including specific measures to ensure immediate support, initial calls within a specified period, referral / follow up calls</li> </ul>
<p><b>Health Board support offer to bereaved patients and families, including those identified through investigations following patient safety incidents of</b></p>	<ul style="list-style-type: none"> <li>• Does the health board have an executive lead (as well as a bereavement lead) with responsibility for the strategic direction and service planning?</li> <li>• Are the necessary commitments and agreements in place at executive levels within the health board?</li> <li>• What is the support offer for all bereaved people in the health board (including deaths which occur in the community)?</li> </ul>

<b>nosocomial COVID-19 (Covid response)</b>	<ul style="list-style-type: none"> <li>• What progress has been made with the establishment of the Care After Death / Bereavement service in the health board and what plans are in place to monitor progress in provision?</li> </ul>
<b>Provision of support to people with Protected Characteristics</b>	<ul style="list-style-type: none"> <li>• What provision is in place by the health board for bereaved people with Protected Characteristics, (e.g. because of disability including people who are sight-impaired and/or hearing impaired, or who are in groups who have historically been underrepresented (e.g. LGBTQ+), members of Black Asian and Minority Ethnic Communities, etc.</li> <li>• Has a needs assessment of the population been undertaken/is planned?</li> <li>• What engagement has taken place by the health board to engage with these communities and groups to ensure that the bereavement support available meets their requirements?</li> <li>• Is there a plan with timeline in place for the establishment of a bereavement support service for these populations, including evidence of the policies and processes which need to be introduced/amended to embed the service in the organisation?</li> <li>• Are there plans in place to ensure that the services and information is accessible, including differing language, culture, and communication needs?</li> </ul>
<b>Qualitative feedback on the impact of support received</b>	<ul style="list-style-type: none"> <li>• Ongoing feedback questionnaire send from SBBS has regular by collecting feedback both quantitate and qualitative, all issues and trends addressed 25% return (see attached) in order to ascertain patients experience and service satisfaction.</li> </ul>

**Relevant strategies, guidance and data**

Bereavement Framework [National framework for the delivery of bereavement care | gov.wales](https://gov.wales/national-bereavement-care-pathway)

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