



<b>Agenda Item</b>
3.4

**Quality and Patient Safety Committee**

**Director of Commissioning for Mental Health, Learning Disabilities & Vulnerable Groups.**

Dyddiad y Cyfarfod / Date of Meeting	29/06/2026
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Pwrpas yr Adroddiad / Report Purpose	For Assurance Choose an item.
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Committee / Individuals	Group /	Date	Outcome
N/A		Click or tap to enter a date.	Choose an item.

## **1. SITUATION / BACKGROUND**

This paper provides an update on any Quality and Patient Safety (QPS) issues for services relating to the Mental Health, Learning Disabilities & Vulnerable Groups (MHLDVG) Commissioning Team portfolio. This includes patient safety risks or issues within commissioned services via the Hospital & Care Home Frameworks. Commissioned services are provided across Wales in a mixed economy of NHS units and independent sector provision and in England by NHS / (Foundation) Trusts and independent sector providers.

A full overview of Commissioned Activity is set out in **Appendix 1** for background information and to provide context to the updates and sources of assurance detailed in this report.

## **2. UPDATES TO NOTE**

The following provides a brief update on matters arising since the last meeting for information.

### **2.1 Hospital Framework Commissioned Services**

#### **2.1.1 St Andrews Healthcare – Northampton**

NWJCC continues to monitor and respond to the situation at St Andrew's Healthcare, Northampton. The service remains suspended from the National Framework Agreement and NHSE continue to coordinate centrally with commissioners' arrangements to remove remaining patients from the site.

In recent months, a revised approach has been agreed, with Wales and Isle of Man commissioners now progressing moves from the site directly; supported by weekly multi-agency oversight via NHSE, with an aim to transition all Welsh/IoM patients by the end of June. Some capacity will remain at the current site for patients from other regions.

At the outset of the issues, 22 patients had been placed via the All-Wales Framework; this has now reduced to 8 patients, all of whom remain in secure care. Of these, 5 are in medium secure services commissioned by JCC, 2 are commissioned by Manx Care (Isle of Man), and 1 is in low secure care commissioned by Betsi Cadwaladr UHB. Of the remaining 6 Welsh patients, planned admissions to alternative hospitals are progressing for 2 patients, with arrangements ongoing for the other 4 patients. This is due to the complex presentation of patients placed there, with a need for ongoing work to progress to a placement position.

The JCC is actively engaged in system-wide coordination meetings with NHS England, CQC, safeguarding partners and Integrated Care Boards to support pace and oversight of patient transfer plans. In parallel, MHLDVG clinicians have

undertaken recent visits to the site to review Welsh patients directly. The JCC has also written to families outlining the current position and available support.

### **2.1.2 Heatherwood Court**

NWJCC were notified of an unexpected death of a Mental Health patient within a commissioned Framework placement. The Health Board has indicated that there is an investigation ongoing with the provider, which will inform next steps.

### **2.1.3 Cygnet Bury**

Concerns have been raised by two patients receiving care in Cygnet Bury. NWJCC have engaged with the appropriate health boards, who are addressing the urgent and ongoing actions required to ensure their safety pending a move. Both patients are on a CAMHS discharge pathway. The local health board are closely monitoring patient safety and progress pending discharge. The Framework team have scheduled a full review of the hospital CAMHS services and are in regular engagement with the provider and health board.

## **2.2 Gender Incongruence Service – Review of Adult Welsh Gender Service**

The NWJCC is undertaking a comprehensive review of the adult gender service in NHS Wales to ensure commissioned provision is efficient, effective and delivers high-quality care aligned to current evidence and system requirements. NWJCC commissions the adult gender care pathway for Welsh patients, including assessment, referral and ongoing care via the Welsh Gender Service, and access to surgery through NHSE via cross-border arrangements, but does not directly commission or provide surgery itself. NHSE commissions all gender surgery services, including the surgical pathway and provider contracts.

The review of the Welsh Gender Service commenced in Q1 2026, with scoping, methodology and stakeholder engagement progressing through Q2 2026, followed by detailed assessment of demand, capacity, quality, cost and pathway effectiveness. This work is being undertaken in the context of increasing demand and emerging findings from the parallel NHS England national review. There is a clear opportunity to align the Welsh Gender Service review with NHSE methodologies, data frameworks and emerging service specifications to ensure consistency, comparability and futureproofing across systems. The review will focus on adult non-surgical services, with consideration of pathway interfaces, and will engage key stakeholders across health boards and partner organisations. Initial findings are expected in Q3/4 2026, with a report and recommendations to the Joint Committee thereafter.

### 3. SERVICES IN ESCALATION

#### 3.1 Caswell Clinic

Caswell Clinic remains in Level 3 escalation. NWJCC is working closely with Swansea Bay UHB (SBUHB) to support de-escalation through a structured approach aligned to the existing Improvement Plan. Following receipt of a consolidated progress report in late April 2026, NWJCC commissioning, quality, safety and medical teams undertook a detailed review to identify the remaining requirements for transition to Level 2 monitoring.

A clear set of outstanding actions has been agreed with the Health Board, with monthly submission and review of evidence. SBUHB is required to demonstrate that all safety issues are either fully addressed or, where longer-term actions remain, are supported by robust interim mitigations.

More integrated oversight arrangements have been in place since April 2026, including monthly escalation meetings and ongoing engagement with the service. Subject to sufficient assurance, a formal review of escalation status will be undertaken, with potential de-escalation to level 2 and transition to routine monitoring of the wider Improvement Plan.

The NWJCC Head of Commissioning for MHLDVG met with clinical staff on 29 May 2026 to review progress and evidence requirements, with a particular focus on strengthening internal audit and governance processes. The next escalation meeting is scheduled for 23 June, with monthly written updates and supporting evidence required in advance.

The recent Health Inspectorate Wales review identified gaps in routine safety checks, ligature equipment management, and consistency of security and risk processes, particularly out of hours. The service has been asked to provide confirmation of mitigating actions to address these risks.

In line with JCC processes, NWJCC Quality will continue to liaise with SBUHB Quality colleagues. All submitted evidence will be reviewed to assess progress and inform the escalation status, with de-escalation dependent on assurance that safety risks are effectively managed.

### 4. RECOMMENDATIONS

The members of the Quality, Safety and Outcomes Sub-Committee are asked to:

- **Take Assurance** that patient safety risks or issues within commissioned services are being managed and monitored as set out above.

## **Appendix 1 – Overview of Commissioned activity**

### **1. Medium & High Secure Inpatient Services:**

#### **1.1 Case Management arrangements**

Placements in High & Medium secure services are overseen by clinicians within a case management team. These teams were previously commissioned by NWJCC via SBUHB & BCUHB and were hosted with commissioned services. From April 1<sup>st</sup>, 2026, the SBUHB case managers have transferred to NWJCC employment via the TUPE process.

The South Wales Case managers previously only managed patients in out of area placements. Since joining the NWJCC their caseloads now include patients within the NHS Wales commissioned services at Caswell Clinic. Case managers are focused on ensuring clear care pathways are identified for all medium secure patients. This includes actively managing potential repatriation where suitable to Caswell Clinic. Case management within North Wales continues to be provided by BCUHB. Case management of Ty Llewelyn patients and active repatriation processes were already implemented effectively.

#### **1.2 Ashworth High Secure Hospital – Male Mental Health**

Data relating to occupancy, pathway progress, incidents and restrictive practices is received monthly. Patient progress continues to be monitored by the clinical case managers, with no current issues to note.

At end of May 2026 there were 26 patients, 4 of which were on trial leave to other services.

#### **1.3 Rampton Hospital – Female Mental Health & Male and Female Learning Disabilities**

At the end of May 2026 there were 2 female Mental Health patients and 0 learning disability patients.

#### **1.4 Caswell Medium Secure Service**

Occupancy levels remain low in Caswell, with one 14 bed unit out of use for a further 18-24 months. This is whilst fire damage repairs to SBUHB Low Secure Unit is completed (scheduled by Q4 2026/27) and potentially to accommodate medium secure whilst new seclusion units are being built on other wards (requested from Q4 2026/27 to Q3/Q4 2027/28). A trajectory of available bed space planned admissions and repatriations is being monitored with the provider.

1<sup>st</sup> June 2026 - 61% occupancy (37 beds occupied from 47 available beds, 61 beds commissioned on block contract)

#### **1.5 Ty Llewelyn Medium Secure service, North Wales**

Bed occupancy (25 commissioned beds):

1<sup>st</sup> June 2026 - 84% (21 beds occupied)

### **1.6 Independent sector Medium Secure placements**

At the end of May 2026 there were 37 Welsh patients placed in independent sector Medium Secure Units, via the All-Wales Framework.

## **2. Neuropsychiatry services**

Bed occupancy (11 commissioned beds):

1<sup>st</sup> June 2026- 82% (9 beds occupied)

## **3. Vulnerable Groups: Gender Dysphoria Services**

### **3.1 CYP Gender services**

NWJCC is engaging with the National Provider Network for CYP Gender services who are devising performance Dashboard for service providers, from which the NWJCC will receive a report on Welsh patients.

### **3.2 Adult Gender Service:**

The NWJCC are engaging with Arden & GEM to support service activity analysis as part of the review of the adult Welsh Gender Service.

### **3.3 Perinatal Inpatient services**

**Seren Lodge Perinatal Unit** at Countess of Chester Hospital

Bed occupancy (2 commissioned beds):

1<sup>st</sup> June 2026 - 50% (1 bed occupied)

#### **3.3.1 Uned Gobaith, in Tonna**

Bed occupancy (6 commissioned beds):

1<sup>st</sup> June 2026 - 83% (5 beds occupied)

Please note that at the end of May there was 1 Welsh patient placed in an out of area perinatal inpatient placement due to lack of capacity at time of admission. Another perinatal patient was placed in an out of area bed during May 2026 due to lack of capacity at time of admission but was repatriated back to Uned Gobaith within 6 days as soon as a bed became available.

Note – the decision whether to repatriate from an out of area placement or not is determined by a multidisciplinary clinical decision based upon the best interests of the patient.

### **3.4 Skin Camouflage Service**

Changing Faces have provided their Q1 report that indicates positive quality and patient safety performance.

Patient experience measures are strong, with high satisfaction (24/25 very satisfied) and perceived needs met, alongside improvements in wellbeing scores from 20.6 pre-appointment to 23.9 at 30 days, indicating a meaningful positive impact on psychological wellbeing.

Waiting times of under 8 weeks also support timely access, which is important for patient outcomes.

#### **4. Specialist CAMHS**

##### **4.1 Ty Llidiard**

Refurbishment of the extra care area to enhance facilities and create a seclusion suite is ongoing. Work is expected to conclude by July 2026. The service has maintained occupancy during this period with minimal use of out of area placements required.

Bed occupancy (15 commissioned beds):

1<sup>st</sup> June 2026 - 93% (14 beds occupied)

##### **4.2 NWAS**

Bed occupancy (12 commissioned beds):

1<sup>st</sup> June 2026 - 42% (5 beds occupied)

#### **5. Digital Online Psychological Therapies**

The budget for online digital psychological therapies transferred to NWJCC in May 2024, with work underway alongside Welsh Government to transition to new commissioning arrangements. The current service, delivered by PTHB with Silver Cloud, has been extended through to 2026–27 to maintain continuity. A new, collaboratively developed commissioning model—shaped by stakeholder engagement and focused on open access and self-referral—is now near implementation. A two-stage process will begin with an Expression of Interest from Health Boards to act as host and lead delivery through partnership arrangements, followed by formal commissioning.

## Strategic and Regulatory Assessment

Objectives / Strategy	
<b>Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)</b>	Not Applicable
<b>Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals</b> <a href="#">150623-guide-to-the-fg-act-en.pdf</a> <a href="#">(futuregenerations.wales)</a>	A Healthier Wales
	If more than one applies please list below: A more equal Wales
<b>Dolen i Hwyluswyr Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality</i> <a href="#">(Duty of Quality Statutory Guidance (gov.wales))</a>	Data to Knowledge
	If more than one applies please list below: Whole systems perspective Leadership Learning, improvement and research
<b>Dolen i Feysydd Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Domains of Quality</i> <a href="#">(Duty of Quality Statutory Guidance (gov.wales))</a>	Effective
	If more than one applies please list below: Efficient Equitable Patient centred Timely Safe
<b>Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)</b>	No - Not Applicable
	If more than one applies please list below:

Impact Assessment		
<b>Ansawdd</b> <i>Ydych chi wedi ymgymryd â Sgrinio Aseiad o'r Effaith ar Ansawdd? / Quality</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below:

<i>Have you undertaken a Quality Impact Assessment Screening?</i>		Reporting on quality matters from last JCC meeting.
<b>Cydraddoldeb</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> <b>Equality</b> <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: Reporting on performance matters and the impact on the wider health system. Quality and safety matters also considered.
<b>Cyfreithiol / Legal</b>	There are no specific legal implications related to the activity outlined in this report.	
<b>Enw da / Reputational</b>	Yes (Include further detail below)	
<b>Effaith Adnoddau</b> <i>(Pobl /Ariannol) /</i> <b>Resource Impact</b> <i>(People / Financial)</i>	There is no direct impact on resources as a result of the activity outlined in this report.	

## Acronyms

<b>Acronyms / Glossary of Terms</b>	
MHLDVG	Mental Health, Learning Disability and Vulnerable Groups
ED	Eating Disorder
PREM	Patient Reported Experience Measure
QAIS	Quality Assurance Improvement Service
MDT	Multi-Disciplinary Team
MHLDVG	Mental Health, Learning Disabilities, Vulnerable Groups.
PICU	Psychiatric Intensive Care Unit
PTHB	Powys Teaching Health Board
CAMHS	Child and Adolescent Mental Health Service
NWAS	North Wales Adolescent Service
SLA	Service Level Agreement
WGS	Welsh Gender Service
CQC	Care Quality Commission
ICB	Integrated Care Board
SBUHB	Swansea Bay University Health Board
BCUHB	Betsi Cadwaladr University Health Board
NHSE	NHS England
JCC	Joint Commissioning Committee
NWJCC	NHS Wales Joint Commissioning Committee
QPS	Quality and Patient Safety