



**Minute of Dumfries and Galloway
Integration Joint Board Clinical and Care
Governance Committee meeting held on
2nd May 2019**

For Approval

Minute of the Dumfries and Galloway Integration Joint Board Clinical & Care Governance Committee meeting held on 2nd May 2019 at 2:00pm in Seminar Room 4, Education Centre, DGRI.

Voting Members Present:

Grace Cardozo **(GC)** NHS Voting Member – **Chair**

Substitute Voting Members Present:

Andy Ferguson **(AF)** Local Authority Voting Member
(Substitute for Ian Carruthers)

Jane Maitland **(JM)** Local Authority Voting Member
(Substitute for Ros Surtees)

Non Voting Members Present:

Lillian Cringles **(LC)** Chief Social Work Officer
Eddie Docherty **(ED)** Registered Nurse Practitioner
Ken Donaldson **(KD)** Registered Medical Practitioner (not Primary
Medical Services)

Julie White **(JW)** Chief Officer

In Attendance:

Peter Bryden **(PB)** Risk and Quality Improvement Manager,
Community Health and Social Care Directorate)
Viv Gration **(VG)** Strategic Planning and Commissioning Manager
Hannah Green **(HG)** Office Administrator
Penny Halliday **(PH)** NHS Voting Member
Stephen Hare **(SH)** Employee Director NHS Dumfries and Galloway
Mhairi Hastings **(MH)** Lead Nurse – Community Health and Social Care
Stella Macpherson **(SMc)** Service User Representative
Jim Mccolm **(JMc)** Unpaid Carers Representative
Linda Owen **(LO)** Strategic Planning and Commissioning Manager
Joan Pollard **(JP)** Associate Director of Allied Health Professionals
Elaine Ross **(ER)** Infection Control Manager
Valerie White **(VW)** Consultant in Dental Public Health
Alice Wilson **(AW)** Deputy Director of Nursing - NHS

Before the meeting commenced, GC explained that a pre-meet had taken place between JW, ED, KD, LC & GC to discuss the future of IJB Clinical & Care Governance.

Discussion took place regarding the duplication of agenda items between the Clinical & Care Governance Committee of the IJB and Healthcare Governance Committee NHS Board / Social Work Committee and Council. It was agreed that the focus of Clinical and Care Governance would be on the delivery of the 9 National Health and Wellbeing Outcomes as they relate to clinical and care journey.

It was agreed that over the course of the next 12 months, each agenda would be based round the 9 National Outcomes and frequent themes and papers will come to the meeting to evidence how the Partnership are meeting these outcomes. As the meetings are quarterly, only certain outcomes will be discussed at each meeting for example, Outcomes 1 & 2 in the August meeting, Outcomes 4 & 5 in the November meeting.

It was agreed that papers would be submitted to provide assurance to IJB on delivering of these outcomes. In addition, annual reports will come to Clinical and Care Governance from Healthcare Governance Committee and Social Work Committee regarding delivery of outcomes e.g. HAI reports, Complaints reports. Exception reports will also come to Clinical and Care Governance.

HG will email out to the Committee to see if there are any other key assurances that require to be noted.

1. APOLOGIES FOR ABSENCE

Apologies were received from Ros Surtees and Ian Carruthers.

Andy Ferguson is substituting for Ian Carruthers.
Jane Maitland is substituting for Ros Surtees

2. MINUTES OF THE PREVIOUS MEETING 7th February 2019

It was decided to approve the previous notes at the next IJB, as the voting members that were at the previous meeting were not present today.

3. AGREED ACTIONS FROM THE PREVIOUS MEETING

The actions were agreed as an accurate record and will be updated accordingly.

4. COMMUNITY HEALTH AND SOCIAL CARE DIRECTORATE IMPROVING SAFETY – REDUCING HARM (ANNUAL REVIEW)

This report outlines the work of the Community Health & Social Care Directorate in respect of the patient safety & reducing harm agenda during the last 12 months. Services in scope are primarily Health though, in line with a request from the Clinical and Care Governance Committee, the Social Care & Reablement Services delivered by the Directorate are also covered.

MH advised that there are some parts of the report that require some more structure. Changes have been made so that localities are now looking at the quality of care, feedback etc and are sufficient to meeting the 9 national outcomes. This work links directly into how directorates within the organisation share learning, and are also sharing templates across the partnership to learn from other areas.

Two significant risks identified in relation to quality of care are, sustainability of Out of Hours (OOHs) and forensic medical services. A forensic suite will open in Dumfries in the summer and OOHs are making significant plans to move towards a HUB and spoke model, which will include a number of multiprofessional teams. This proposal will be taken to Unscheduled Care Programme Board later this month for approval.

The theme of adverse events in medicines is proven to be the administration of medicines, which relates to HEPMA (prescribing to be administered electronically). MH is looking into this issue with IT.

Excellence in Care and Care Assurance are providing assurances regarding quality of care. Every cottage hospital within the region has achieved a Bronze status, and two have achieved Silver status.

JM queried the suitability of family members being able to obtain information regarding relatives that are receiving care at home. MH advised that they are moving towards nurses and carers attending visits together and the likelihood that all specialities will use the same documentation.

Committee Members:

- **Noted the work of the Directorate in respect of safety, risk mitigation & harm reduction**
- **Discussed and agreed that the actions proposed to address safety and or mitigate risk will ultimately reduce harm are sufficient.**

5. HEALTHCARE ASSOCIATED INFECTION REPORT

This Healthcare Associated Infection (HAI) surveillance and harm reduction activity report supports the implementation of the Healthcare Quality Strategy.

ER advised that this is an assurance paper; there are some operational matters listed within the paper that this Committee do not need to be aware of. It was queried if ER liaises with Care Homes etc to discuss Infection Control? ER confirmed that education would need to be through Public Health regarding this.

Committee Members:

- **Received the Healthcare Associated Report and noted in particular the position of NHS Dumfries and Galloway with regard to the Staphylococcus Aureus bacteraemia (SAB) and Clostridium Difficile (CDI) Local Delivery Plan targets**

6. PATIENT SERVICES REPORT – COMPLAINTS AND FEEDBACK

This paper provides an overview of feedback and complaints submitted to NHS Dumfries and Galloway and outlines complaints performance for January and February 2019.

JP advised that the main themes in relation to complaints and feedback, were regarding clinical treatment, and staff attitude which equates to communication overall. The Committee are happy and content with the processes that are being put in place.

Committee Members:

Discussed the NHS Board's complaints performance for January and February 2019 including key feedback themes and details of the resulting learning and improvements

- The Board continues to face challenges in meeting compliance with complaint timescales as set by the Scottish Public Services Ombudsman (SPSO).
- Patient Services are continuing to work with responsible Managers and Feedback Coordinators to address compliance issues.
- Actions to address areas of under capacity within feedback and complaints handling are underway.
- Dialogue has been initiated with the Scottish Public Services Ombudsman to explore what improvement support they may be able to offer.

7. PATIENT SERVICES REPORT – SPIRITUAL CARE, VOLUNTEERING AND PATIENT CARER INFORMATION

This paper provides an update on the progress and activities of the Patient Services team related to Spiritual Care, Volunteering and Patient and Carer information for the period of January and February 2019.

Following earlier discussions, it was noted that this matter, and item 6 will be more Partnership focussed from now on, rather than NHS based. CBUK are planning to work in partnership with stakeholders in supporting child bereavement within Dumfries and Galloway.

Committee Members:

- **Discussed the report**
- **Noted the progress within Spiritual Care and Volunteering**

8. ANNUAL ORAL HEALTH MONITORING UPDATE REPORT

This paper presents the 2nd annual oral health monitoring report for Dumfries and Galloway.

VW advised that Primary 1 figures have had significant improvements but there are still some inequalities, and there have been no changes for Primary 7 children figures. There is an ongoing challenge with 0-2 year olds not being registered at a dental practice; however VW advised that this is not consistent with other parts of Scotland.

North West Dumfries Oral Health action plan is ongoing and continued engagement is proving to be slightly difficult. A local community group have applied for funding bid to support this.

A question was raised to query if there was a way of knowing what percentage of the population within the region are registered with a non NHS dentist. VW confirmed that there is no way of knowing this information as we only have access to NHS patients and not private ones.

Committee Members:

- **Noted the annual oral health report**

9. DAY SERVICES REVIEW

This report provides an update to the Clinical and Care Governance Committee on the implementation of the Day Services Review.

LO advised that there are 9 Day Centres in the region, not one is the same which makes it difficult when planning ahead to determine the future of Day Centres. A co-productive approach is being taken with current providers in developing a draft service specification and identifying a fair and transparent approach to reallocate existing funding.

This issue will be taken back to Social Work Committee and perhaps Full Council before any decisions are made. It has been agreed that the Council will be fully consulted on proposals. The final decision will be made by the IJB.

Committee Members:

- **Noted the progress made to towards the Integration Joint Board (IJB) direction, issued on 29 November 2018, to implement the actions of the day services review.**

10. PUBLIC PROTECTION

Minutes aren't published from PPC yet.

11. DAY OF CARE

This was deferred to a future meeting.

12. AOCB

- Carer Positive
Caroline Sharp to share Carer Positive progress with JMc.
- Palliative Care to be added

13. Date of next meeting

The next meeting will be held on the 15th August 2019 at 2:00pm, Venue TBC