

**Minute of Dumfries and Galloway
Integration Joint Board Clinical and Care
Governance Committee meeting held on
7th February 2019**

For Approval

Minute of the Dumfries and Galloway Integration Joint Board Clinical & Care Governance Committee meeting held on 7th February 2019 at 1:00pm in Meeting Room 6, Mountainhall Treatment Centre, Dumfries, DG1 4AP.

Voting Members Present:

Grace Cardozo	(GC)	NHS Voting Member - Chair
Ian Carruthers	(IC)	Local Authority Voting Member
Ros Surtees	(RS)	Local Authority Voting Member

Non Voting Members Present:

Lillian Cringles	(LC)	Chief Social Work Officer
Eddie Docherty	(ED)	Registered Nurse Practitioner
Julie White	(JW)	Chief Officer

In Attendance:

Claudine Brindle	(CB)	Manager, Dumfries and Galloway Carers Centre
Grahame Clarke	(GC)	Alcohol and Drug Partnership Coordinator
Jackie Davies	(JD)	Alcohol and Drug Partnership Coordinator
Ann Farrell	(AF)	Staff Side Representative
Andy Ferguson	(AF)	Vice Chair of Integration Joint Board
Hannah Green	(AM)	Office Administrator
Penny Halliday	(PH)	Chair of Integration Joint Board
Jane Maitland	(JM)	Local Authority Voting Member
Jim McColm	(JMc)	Unpaid Carers Representative
Linda Owen	(LO)	Strategic Planning and Commissioning Manager
Maureen Stevenson	(MS)	Patient Safety and Improvement Manager
Alice Wilson	(AW)	Deputy Nurse Director

1. APOLOGIES FOR ABSENCE

Apologies were received from Lesley Bryce and Ken Donaldson

2. MINUTES OF THE PREVIOUS MEETING 29th November 2018

The minutes were agreed as an accurate record.

3. AGREED ACTIONS FROM THE PREVIOUS MEETING

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

4. WHAT SUPPORT MEANS TO CARERS

A Scotland wide report on Health and Care Experience (HACE) is produced every two years. As a result of deterioration in the number of carers who felt supported in their caring role, a further survey was undertaken locally to better understand needs of carers.

387 individuals participated in the Dumfries and Galloway Carers Survey 2018 which identified 3 key actions.

JW thanked LO and CB for this report as the annual review demonstrated a reduction in our performance regarding carers feeling supported, so it was positive to recognise that the figures have since risen.

LO provided an update of all the training that is available for any Carers. GC requested reassurance that Dumfries and Galloway Carers Centre are engaging with ethnic minorities regarding being Carers. LO advised that with regards to ethnic minorities, there are some languages where there is not a word for Carer.

RS stated that the Council have a policy regarding employees being carers, and LO confirmed that the NHS have a section within the special leave policy that documents rights for carers.

A report will be brought back to the next meeting in May from both the NHS and the Council detailing how each organisation has implemented carer obligations for employees that are recognised as carers. LC will provide the report from the Council & LO will liaise with Caroline Sharp to provide the NHS report.

Committee Members:

- **Noted the results of 'What supported means to Carers' (see appendix 1)**
- **Approved the three proposed 'key actions identified by the Carers Programme Board to increase the percentage of Carers who feel supported.**

5. DUMFRIES AND GALLOWAY ALCOHOL AND DRUG PARTNERSHIP REPORT 2018/19 – 4 MONTHLY UPDATE

All Alcohol and Drug Partnerships (ADP) are accountable to their local Integration Joint Board (IJB) and are required to ensure that the Integration Joint Board have oversight of the workstreams and plans being proposed.

GC and JD provided an overview of this paper. GC highlighted that there has been a challenge with Alcohol Brief Interventions (ABIs) numbers for the past 3 years, as they have been lower than the national targets. GC reflected that this is also the case nationally, not just within our region. GC provided assurance that there is a plan in place to discuss this issue with the GP sub group and Accident and Emergency to see if they can reintroduce ABI's, and to consider if Locality Managers can do the same within the community. It has also been recognised that Alcohol Liaison Nurses may be able to support delivery of this target.

PH queried whether the committee could have sight of service user feedback regarding this service. JD confirmed that service evaluations take place annually and it was agreed that this information would be shared with the committee.

GC and JD will provide a further update in 4 months time, and will aim to benchmark our figures against a similar area within Scotland.

Committee Members:

- **Noted the ongoing achievement of the LDP standard for Waiting Times for drug and alcohol recovery services**
- **Noted the ongoing challenge to meet the LDP standard for Alcohol Brief Interventions (ABI)**
- **Noted the monitoring of Injecting Equipment Provision, Drug Deaths and Naloxone provision**

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 September and October 2018.

Committee Members:

- **Discussed the NHS Board's complaints performance for September and October 2018 including key feedback themes and details of the resulting learning and improvements**
- **Noted the key messages:**
 - **The Board continue to face challenges and compliance with complaint timescales**

- **Responsible Managers, Feedback Coordinators and Patient Services are working to address compliance issues**

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 September and October 2018.

Committee Members:

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

8. MENTAL WELFARE COMMISSION REPORT AND RECOMMENDATIONS: PEOPLE WITH DEMENTIA IN COMMUNITY HOSPITALS – UPDATE

This paper presents an update for Clinical and Care Governance around the progress on the recommendations.

AW confirmed that the Mental Welfare Commission Report and Recommendations paper was published in May 2018 that Clinical and Care Governance Committee received a report in July 2018. The paper presented today provides a 6 monthly update.

AW advised that 4 cottage hospitals have achieved their bronze status in Care Assurance and that Newton Stewart hospital have achieved their silver award.

The Dementia Nurse Consultant has been working alongside current Dementia Champions to help them deliver training in their places of work to other members of staff.

AW notified the committee that it costs approximately £12,000 for an external 2 yearly dementia design audit to take place. It is unlikely that there is anyone internal to the Partnership who could undertake this audit.

It was agreed that after scrutiny from the committee, that the recommendation to retain 2 yearly external design audits will need to be considered by the IJB.

Committee Members:

- **Discussed the feasibility and likely outcome of 2 yearly dementia design audits and agreed that this decision should be remitted to the IJB.**

9. PROGRESS UPDATE – CARERS ELIGIBILITY FRAMEWORK

The IJB requested that a six month update on progress on implementation of the Carers Eligibility Framework be provided to the Clinical and Care Governance Committee

LO and CB advised that this paper has been prepared to provide assurance to the Committee that the Framework is operating in accordance with the agreed plan.

Committee Members:

- **Noted the progress made in implementing the Carers Eligibility Framework**
- **Noted the impact of the Carers Eligibility to date**

10. DUTY OF CANDOUR

Duty of Candour provisions will apply when there has been an unexpected or unintended event or incident that has resulted in death or harm that is not related to the course of the condition for which the person is receiving care.

MS provided an up to date summary of within the NHS where the current position is with the implementation of Duty of Candour. Provisions are in place around Duty of Candour, as a result of care and treatment received.

Appendix 1 has been sent to the Performance Committee twice and Area Clinical Forum.

Appendix 2 is a paper that has been sent to Social Work Services Committee which outlines the current position within the Local Authority.

The Board require assurance that the work around Duty of Candour will be aligned across both parties.

At the next meeting, Heather Collington and Maureen Stevenson will bring back a paper each regarding Duty of Candour progress / update within their individual organisations.

Committee Members:

- **Discussed and noted the Duty of Candour Implementation plans for health and social care.**
- **Considered Governance Arrangements for the Partnership.**
- **Agreed that Future paper to come to Clinical and Care Governance Committee regarding progress in implementing Duty of Candour to across the Partnership.**

11. HEALTHCARE ASSOCIATE INFECTION

This Healthcare Associate Infection surveillance and harm reduction activity report supports the implementation of the Healthcare Quality Strategy.

Committee Members:

- **Received the Healthcare Associated Infection report and noted in particular the position of NHS Dumfries and Galloway with regard to the Staphylococcus aureus bacteraemia (SAB) and Clostridium Difficile infection (CDI) Local Delivery Plan targets in relation to other NHS Boards.**

12. REVIEW OF DAY SERVICES FOR OLDER PEOPLE

LO provided a verbal update. As part of the Healthy Ageing Programme Board, LO is converting a group to look at visioning and will be looking at all day care and day centre providers within the region. This is alongside work that is required to support the current organisations to have up to date contracts. The intention is that same outcomes apply to all 9 day centres within Dumfries and Galloway. The recommendation is that the Committee support this progress regarding day centres.

JW advised that a paper was produced in November 2018 highlighting the day centre resources that are currently available. How are day centres commissioned for them to deliver what is required? What do we think the model should look like in 5 year to support individuals in the community that require support though out the day?

The long term strategy for Day Services will be presented to Clinical and Care Governance Committee in autumn 2019.

13. MINISTERIAL STRATEGIC GROUP – REVIEW OF INTEGRATION

The role of the Workshop is to provide members with clarity on the purpose of this committee and relate this to the recommendation of the MSG.

Lillian's presentation (attached)

The Chief Social Worker role is required to be managed within the Council. A diagram is illustrated in the presentation of the agreed partnership. JW advised that she is now invited to Social Work Committee meetings 3 times per year to provide feedback from the C&CG Committee as they require assurance regarding the quality and the safety of Social Work Services across the region.

Eddie's presentation (attached)

ED's responsibilities are to scrutinise the safe and effective person centred care within the Board and to report this through appropriate channels. ED will provide assurance to the committee that suitable scrutiny is taking place, delivered and that clear rigour is applied to the quality and safety of NHS Services.

As professional leads, what level of assurance is required to come back to this committee? HG to arrange a meeting involving Ken, Lillian, Eddie, Julie, Grace and Ros to look at the rolling agenda matrix etc.

HG to circulate document from Lillian – C&CG in Integrated Health and Social Care Services Appreciative Inquiring Output.

It was agreed to start reflecting at the end of each committee meeting whether the agenda has been appropriate. The following topics have been deemed as appropriate:

- Realistic medicine
- Infection Control
- Patient Safety
- Community Engagement
- Health and Inequalities – to be discussed further

HG to liaise with Margaret to obtain the matrix from Healthcare Governance which could be adapted for this Committee. ED and LC will develop an SBAR.

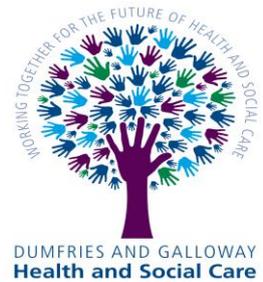
Terms of Reference will be discussed at the next meeting.

14. AOCB

- Palliative End of Life Care – PH has requested the IJB to have a workshop as a priority.
To be discussed at a later date.

15. Date of next meeting

The next meeting will be held on the 2nd May 2019 at 2:00pm, Venue TBC



**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