



**FALKIRK INTEGRATION JOINT BOARD  
Clinical and Care Governance Committee**

**Minute of the Clinical and Care Governance Committee meeting held on Thursday 7 February 2019 at 9.30am in the Boardroom, Denny Town House**

**Voting Members:**

Mrs Julia Swan (Chair)  
Cllr Fiona Collie

**Non-voting Members:**

Mr Andrew Murray, Medical Director  
Mrs Patricia Cassidy, Chief Officer

**In Attendance:**

Mrs Margo Biggs, Lay Member  
Mrs Ellen Hudson, Deputy Nurse Director  
Mrs Monica Inglis, Head of Clinical Governance  
Mr Joe McElholm, Head of Social Work Adult Services  
Dr Claire McIntosh, Consultant Psychiatrist  
Ms Freda McShane, Independent Chair of the Adult Support & Protection Committee  
Mrs Irene Graham (Notetaker)

**CCG40. APOLOGIES**

Apologies were noted on behalf of Rita Ciccu-Moore, David Herron, Sara Lacey, Bette Locke and Angela Wallace.

**CCG41. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**CCG42. DRAFT MINUTE OF THE CLINICAL & CARE GOVERNANCE COMMITTEE MEETING HELD ON 6 DECEMBER 2018**

The Committee approved the minute.

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Approved the minute of the Clinical & Care Governance Committee meeting held on 6 December 2018.**

**CCG43. ACTION LOG**

The Committee noted the update on the action log.

**Decisions:**

**The Clinical & Care Governance Committee:**

1. Noted the updated action log

**CCG44. TERMS OF REFERENCE**

The Clinical & Care Governance Committee considered the further amended terms of reference. Mr Murray agreed to check that Internal Audit were assured that governance arrangements were satisfactory.

**Decision:**

**The Clinical & Care Governance Committee:**

1. Agreed to request an update from Internal Audit that the governance arrangements with NHS are appropriate.

**CCG45. DRAFT FORWARD PLAN**

Mr Murray had populated the forward plan with regular business items which should come to this Committee for consideration and welcomed any ad hoc additions which members considered should be added.

**Decision:**

**The Clinical & Care Governance Committee:**

1. Agreed any additions and comments should be fed back to Mr Murray.

**CCG46. DRUG RELATED DEATHS AND SUICIDES PRESENTATION**

Dr Claire McIntosh, Consultant Psychiatrist gave a presentation on drug related deaths and suicides in the Falkirk area.

Dr McIntosh stated that the National Register of Scotland records statistics and it had shown that deaths in the Falkirk area due to overdose had steadily increased over the last few years. Most cases were now related to benzodiazepines which was also a recognised problem in the USA. A number of interventions had been put in place which included learning from other health boards, reports on vulnerable persons and non fatal overdoses. The chair of the Falkirk Alcohol & Drug Partnership was also looking at services in high risk areas.

We had taken learning from NHS Tayside who had an overarching group which included NHS, Procurator Fiscal, Police and GPs. At present we had a number of review groups whereby it would be of benefit to have an overarching group to prevent any gaps. Other work identified for future was review of deaths in prisons and more partnership working with local authority.

The Committee discussed the governance process and Mrs Swan agreed to raise this at the Falkirk IJB for discussion.

Mrs Swan thanked Dr McIntosh for her presentation.

**Decision:**

**The Clinical & Care Governance Committee:**

1. Agreed that Mrs Swan would raise governance at the Falkirk IJB.

The Committee agreed to take the following item next.

**CCG47. Performance relating to Adult Support & Protection**

Ms Freda McShane, Independent Chair of the Adult Support & Protection Committee gave a presentation on performance relating to adult support and protection.

She gave a recap of the duties and role of the Adult Support & Protection Committee. Links to Clinical & Care Governance Committee and other committees to ensure there are no overlaps and note any duplication.

She explained the approach taken by the APC using statistical data presented on a 6 monthly basis, benchmarking activity, practice audits and service user engagement.

Referrals are made mostly by private care homes, with police referrals relatively low. Inquiries were carried out in a timely manner and quality was evaluated by APC.

Findings from practice audits showed that referrals were of a good standard and recorded appropriately.

Challenges for the future included engagement with service users and the wider community.

Mrs Swan thanked Ms McShane for her presentation.

**Decision:**

**The Clinical and Care Governance Committee:**

1. Noted the presentation on the performance relating to Adult Support & Protection

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**EFFECTIVE OUTCOMES - ARE PEOPLE GETTING THE OUTCOMES WE EXPECT?**

**CCG48. Review of strategic outcomes from Health & Social Care Partnership**

No paper was available. The Committee agreed that this item would be included on the forward planner for discussion at a future meeting.

**Decision:**

**The Clinical & Care Governance Committee:**

1. Agreed to include the review of strategic outcomes from Health & Social Care Partnership on forward planner for future meeting

#### **CCG49. Forth Valley Alcohol & Drug Partnership governance arrangements**

Mrs Swan confirmed that this would be on the agenda for the next Falkirk IJB meeting.

##### **Decision:**

##### **The Clinical & Care Governance Committee:**

- 1. Noted this item would be discussed at the next Falkirk IJB meeting**

#### **SAFE - ARE OUR SERVICES SAFE?**

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##### **Internal**

#### **CCG50. Care at Home Action Plan**

Mr McElholm reported that following an annual inspection of the home care service in May 2018, we had been required to provide an action plan detailing how we would address the requirements and recommendations made.

- Staff had been transferred to new working patterns which would improve continuity of care.
- A three locality framework had been established to deliver services more responsively and flexibly.
- Staff had been supported to move to Extended Personal Carer grade which brings carers together under one single grade.
- Staff had been issued with smart phones which gave access to care plans in real time.
- Communications had improved with both service users and staff.

We were being provided with support from the Care Inspectorate and a re-inspection was expected in the near future.

##### **Decision:**

##### **The Clinical & Care Governance Committee:**

- 1. Noted the ongoing work to take forward the action plan**
- 2. Noted that the Care Inspectorate would carry out a further inspection and a report on this would come to this Committee**

##### **External Reviews & Standards**

#### **CCG51. Healthcare Improvement Scotland (HIS) update on Falkirk Community Hospital**

Mr Murray updated that following the concerns raised regarding the quality of care in Falkirk Community Hospital, a number of reviews of individual patients had been carried out and we had produced improvement action plans which had been shared with HIS. HIS had also recently met with the Executive Team and Service Team and a short life working group had been established to manage and monitor the action plans. HIS responded to us that they were reassured by the actions taken to date and a copy of the HIS response would be shared electronically with members of the Committee.

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Agreed to circulate HIS feedback letter in confidence to members - not for wider circulation**

**CCG52. Adult Support & Protection Investigation Report - Falkirk Community Hospital**

Mrs Hudson reported that this investigation had been commissioned following two complaints regarding the quality of care of patients in Unit 1 and 2, Falkirk Community Hospital. Ian Kinsley, Lead Officer for Adult Support and Protection in Falkirk Council had led an inquiry process and produced a confidential report. The findings in his report stated that there was no risk to the patients and no need to progress this inquiry into an adult support and protection investigation.

Mr Kinsley's report included the following recommendations for improvement and NHS Forth Valley had identified appropriate actions for improvement in relations to these recommendations:

- |                   |   |
|-------------------|---|
| Recommendation 1: | Independent review of Better Care Scorecard to evidence improvement                 |
| Recommendation 2: | Review of improvement in relation to the main themes identified across Unit 1 and 2 |
| Recommendation 3: | Provision of Adult Support and Protection training for acute staff                  |
| Recommendation 4: | Re-launch of NHS Adult Support and Protection sub group                             |
| Recommendation 5: | Staff members' ability to raise concerns about care/systems                         |
| Recommendation 6: | Investigation into unresolved matters in the case of Mrs X                          |

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Noted the recommendations in the report**
2. **Noted that NHS Forth Valley had taken appropriate actions to address these recommendations**

**CCG53. Mental Welfare Commission Reports**

The weblinks provided were for noting and information.

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Noted the information provided in the weblinks.**

**CCG54. Care Inspectorate Report - Summerford House**

Mr McElholm reported on the action plan for Summerford House following concerns raised by the Care Inspectorate. These included the appointment of a Service Manager, the relocation of the provision of respite care to other settings, training programmes for health and social work staff, a meeting with senior staff and service

users to enable relatives to voice concerns, improving the existing approach to reablement and intermediate care, The deadline for improvement work is March 2019 and following a visit from a Care Inspector in January, they were pleased with the progress to date.

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Noted the actions taken to deliver immediate improvement in standards at Summerford Care Home**
2. **Requested a report on progress following a re-inspection by the Care Inspectorate**
3. **Requested a future report on activity around improvement to resources and capabilities for quality assurance and control across Social Work Adult Services**
4. **Requested a report on activity around improvement and innovation across the Partnership's reablement and intermediate care services**

## **PERSON CENTRED**

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### **CGC55. Complaints report from Health & Social Care**

The Committee considered the papers which gave details of complaints within health and social work. Mr McElholm highlighted that social work did not have a performance system that provided a quality assurance function and Mr Murray offered to provide NHS support for social work.

Mrs Swan stated that she was linking with Stirling & Clacks regarding a joint way of working.

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Noted the complaints reports from health and social work**
2. **Noted that Mr Murray would clarify routes to support social work with a performance system**

## **RISK**

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### **CCG56. Risk Register**

Mr Murray stated that health generates a risk register and he would bring NHS corporate risks to this Committee when we have information. Social Work was also looking at producing a risk register.

**Decision:**

**The Clinical & Care Governance Committee:**

1. **Noted that Mr Murray would bring corporate risks to this Committee when information was available**
2. **Noted that Social Work were working to produce a risk register**

#### **CCG57. Significant Adverse Events Report**

Mr Murray presented a paper which gave an update on the review of current SAE reviews. He stated that he would collaborate with Ms Sara Lacey to compare the NHS Management of Adverse and Significant Adverse Events policy and the Social Work policy.

He also stated that health produces SAE learning summaries which are uploaded onto the internet in an easy read version.

##### **Decision:**

##### **The Clinical & Care Governance Committee:**

- 1. Noted that Mr Murray and Ms Lacey would compare NHS and Social work policies**

#### **CCG58. ANY OTHER COMPETENT BUSINESS**

Mrs Swan stated that the administrative service for this Committee would pass to Falkirk Council on 1 May 2019 and Mr Murray and Ms Lacey would consider how this would be taken forward. She also expressed her thanks to Mrs Irene Graham for her administrative services to the Committee.

##### **Decision:**

##### **The Clinical & Care Governance Committee:**

- 1. Agreed that Mr Murray and Ms Lacey would consider the establishment of administrative services by Falkirk Council**

#### **CCG59. DATE OF NEXT MEETING**

1 May 2019 in Room 1, Learning Centre, Forth Valley Royal Hospital

Agreed dates for 2019:

|            |               |
|------------|---------------|
| 22 August  | Council venue |
| 7 November | NHS venue     |