

Agenda Item 8

Overview: Local Oversight Arrangements



Falkirk IJB Clinical and Care Governance Committee

21 May 2021

Overview: Local Oversight Arrangements

For Noting

1. Executive Summary

- 1.1 The purpose of this report is to provide an overview of local oversight arrangements that are relevant to the Falkirk Health and Social Care Partnership (HSCP).

2. Recommendations

The Clinical and Care Governance Committee is asked to:

- 2.1 note the contents of this report.

3. Background

- 3.1 The report presents to Committee a summary of local oversight arrangements that operate at a Forth Valley and Falkirk level. It is intended to provide assurance to the Committee members of these arrangements, as relevant to the scope of the HSCP.

4. Forth Valley Public Protection Chief Officers Meeting

- 4.1 Public Protection Chief Officers Groups (COGs) have a statutory duty to protect the most vulnerable by providing leadership, governance, and effective oversight of public protection arrangements within each local authority area. COGs are collectively accountable for public protection and have, as a minimum, Chief Officer representation from the Local Authority (Chief Executive of the Council); Police Scotland (usually the Area Commander); NHS (Chief Executive or designated Chief Officer); Health and Social Care Partnership (usually the Chief Officer/Director); and the Chief Social Work Officer for the Council.
- 4.2 Chief Officers are responsible for ensuring that constituent agencies, individually and collectively, agree and disseminate a clear vision, shared values and aims that promote work to protect children, young people, vulnerable adults, the wider community and reduce reoffending as effectively as possible. Chief Officers are expected to demonstrate effective collaborative working to discharge their responsibilities and consistently promote effective joint working within and across services.

- 4.3 In April 2020 the Falkirk COG merged with the Stirling/Clackmannanshire COG to form one overarching Forth Valley Chief Officers Public Protection Group. It is recognised that in the first months of the pandemic, having a joint Forth Valley COG was an effective approach to public protection governance and oversight. The Forth Valley COG met 6 weekly for the first few months and in the last quarter of 2020, the group met 8 weekly.
- 4.4 COG's must have adequate scrutiny and assurance of local public protection matters therefore consideration was given to whether the merged arrangement would be appropriate moving forward given the knowledge that Covid-19 is a longer-term position.
- 4.5 A survey was undertaken with the Chief Officer membership and this was used to support a facilitated discussion at the most recent COG in December 2020. After careful consideration, the decision was made to revert to local COG meeting arrangements. The local meetings support the most conducive environment for the depth and breadth of consideration of local public protection matters. Chief Social Work Officers have been charged with responsibility to arrange future Forth Valley COG meetings where there are common areas of public protection business which would benefit from a wider collective leadership approach.
- 4.6 The Falkirk COG resumed business on 10 March 2021. Chief Officers decided they would support the ongoing development of the COG Risk Register which had been developed for the Forth Valley meeting. Chief Officers will be named responsible owners of relevant parts of the register and will be responsible for updates and ensuring the risks and mitigations are proportionate and suitably responsive.
- 4.7 A forward planner will be a core aspect of the group structure in the future. This will set out areas for particular scrutiny from Chief Officers and will support the production of quality reports and presentations. The child protection and adult protection data reports will continue to be a key focus of the COG and summary briefings will be presented as standing agenda items. The agenda for the meeting in March considered written reports on:
- Child Protection
 - Adult Protection
 - Public Protection Data Briefings
 - Community Justice
 - Falkirk Alcohol and Drug Partnership
 - MAPPA
 - Gender Based Violence
 - Clinical and Care Governance.

5. Falkirk Adult Protection Committee (APC)

- 5.1 APC has a range of duties linked to what is happening locally to safeguard adults. These include reviewing adult protection practices, improving co-

operation, improving skills and knowledge, providing information and advice and promoting good communication.

- 5.2 There are 3 key subgroups of the APC - Continuous Improvement, Communication and Engagement and Learning and Development. The following is an overview of recent subgroup activity.

5.3 **Continuous Improvement Subgroup**

The Continuous Improvement Subgroup has responsibility for:

- development and implementation of inter-agency quality assurance mechanisms linked to adult support and protection (ASP) processes
- producing, presenting and analysing ASP data – thereafter planning identified improvement work.

- 5.4 There has been a significant increase in ASP referrals from 2019/20 to 2020/21. When comparing reporting periods, in 2019/20 576 referrals were received and 805 referrals were received in 2020/21.

- 5.5 This significant increase has impact in terms of multiagency capacity and resources. The level of need is being met and quality assurance mechanisms continue to monitor the delivery of our key ASP processes, support and protection. The difficulties in recruiting qualified workers last year is acknowledged in addition to the challenges due to a decrease in face to face contact due to the restrictions and front line practitioners shielding. The subgroup continue to monitor our data, emerging themes and taking forward work to support the ASP workforce and adults at risk of harm.

- 5.6 The subgroup undertook work to look at the number of Initial Case Conferences taking place. This was an area of improvement prior to the pandemic as our analysis was that too few were taking place. Despite the workload pressure challenges highlighted above, there has been a substantial increase since the beginning of 2020. This has been a positive improvement as it demonstrates a commitment towards shared responsibility and multiagency collaborative working in the support and protection of adults.

- 5.7 Going forward the subgroup plan to carry out focussed qualitative data collection from adults at risk of harm and where applicable their carers who have been involved in these ASP journeys. The case conference attendance data demonstrated a reduction in attendance from adults, carers and families and we need to understand more about this. It is thought that participation has continued to be of central importance during a period of virtual meetings however other creative approaches have been utilised. The subgroup anticipate that the qualitative exercise planned will highlight this and also identify where improvement is needed.

5.8 **Communication and Engagement Subgroup**

The Communication and Engagement Subgroup has responsibility for ensuring the promotion of good communication and engagement with 3 key

groups:

- Adults at risk of harm and where applicable their carers/representatives
- Adult Support and Protection workforce
- general public.

5.9 The group have been working with the Scottish Chamber Orchestra on their Re-connect resource to enable 500 DVD's to be distributed to Falkirk care homes and informal carers. This is part of APC's ongoing COVID Action Plan aimed at focussing our efforts on the impact of the pandemic on particular groups.

5.10 Re-Connect is a music-making project for people living with dementia and their carers. It aims to bring people together through music to improve wellbeing and quality of life, whatever a person's age or stage. The work will ensure that this valuable resource can be accessible to all by offering this in DVD format.

5.11 In response to ASP referral data demonstrating that minority ethnic groups are under-represented, the subgroup have completed initial engagement work to understand more about this. The subgroup invited local organisations that represent and work with minority groups to their last meeting. The additional barriers that may be impacting on this under-representation were discussed. It was agreed to explore this further and carry out a larger piece of work including reviewing literature and research in this area. We know that faith-based communities and places of worship have a huge part to play in keeping people of all ages protected and safe therefore we want to strengthen our links and keep these strong. An update on this work will be presented in future reports.

5.12 [Learning and Development Subgroup](#)

The Learning and Development Subgroup has a remit to oversee the learning and development needs of 3 key groups:

- Intensive Workforce - Council Officers and other tripartite specialists carrying out ASP key processes on a regular basis
- Specific Workforce - practitioners who carry out direct work with adults, and specifically adults at risk and their families and carers; and /or form more in-depth relationships with them; and/or provide specific services to the
- General Workforce - practitioners who, as part of their job are likely to come into contact with adults including adults at risk and other family members and carers.

5.13 Our focus has been on ensuring the ASP workforce at all levels have knowledge of, and access to, training on digital platforms. We have developed the Practitioner Pages which are multiagency and by sector, a new ASP training plan has been launched and courses have been revised for digital delivery and new courses have been developed.

- 5.14 The ASP Practitioner Forum now meets monthly in 2021 from bimonthly. This is in recognition of the need to support the ASP workforce where there is less opportunity for face to face peer support and discussion. Recent topics have included input on/from – Domestic Violence and Abuse in Later Life, NHS Gender Based Violence Lead, DWP Safeguarding Lead, Falkirk Council Trading Standards Officer and Change, Grow, Live. Forum attendance has improved and a range of partners from different agencies and sectors are using them. Flyers for all forthcoming practitioner forums are available for all agencies to view on the practitioner pages.
- 5.15 The subgroup organised and hosted a Forth Valley wide practitioner workshop on Self-Neglect and Hoarding on 20 April 2021. Training was delivered to 50 multiagency practitioners by guest trainer Paul Comely, National ASP Coordinator. This included facilitated breakout room workshops where practitioners reflected on the input and shared where they felt review and development of practice need to be. The APC have agreed to establish a short life working group who will take this work forward. It will be evidence based, multiagency and it is anticipated that a self-neglect and hoarding policy will be developed to support this area of work.

6. NHS FV Clinical Governance Arrangements

- 6.1 NHS Forth Valley is accountable for the quality of care delivered by its staff and received by its patients. It receives assurance that the Clinical Governance processes are working as intended through the activities of the Clinical Governance Committee.
- 6.2 **NHS FV Clinical Governance Committee (CGC)**
The Clinical Governance Committee meets quarterly and follows a structured agenda and forward planner to ensure the delivery of effective Clinical Governance.
- 6.3 The Clinical Governance Committee is due to meet in June 2021 and will receive and consider information and documents under the relevant headings in the agenda. These agenda headings are adapted from the Vincent Framework which is a framework for measuring and monitoring safety in the NHS.
- In Our Services: Is Care Safe Today?
 - Was Care Safe in the Past?
 - Will Care be Safe in the Future?
 - Is Our Care Person-Centred?
 - Are We Learning and Improving?
 - Are our Systems Reliable?
- 6.4 Considered under each agenda item are reports, verbal updates, presentations and discussion to provide assurance of safe, effective, person-centred care.

6.5 **Clinical Governance Working Group**

The Clinical Governance Working Group (CGWG) is a whole system governance group chaired by the Medical Director, with senior colleagues from Medicine, Nursing, Public Health and Infection Control alongside Service Leaders. It is responsible for providing assurance that all NHS Forth Valley services have a focus on quality and safety.

6.6 Since the last report the CGWG has met once where the standard agenda items included:

- Safety and Assurance Report including Directorate Assurance Statements
- Standards and Reviews Report
- Healthcare Associated Infection Reporting Template (HAIRT)
- Person Centred Complaints, Feedback Performance Report
- Significant Adverse Events Review Report.

6.7 Additional updates and papers presented at the meeting for information and assurance were:

- The Unannounced Inspection Report; Acute Hospital COVID-19 focussed inspection which was undertaken in Forth Valley Royal Hospital, NHS Forth Valley on 2 February 2021
- A report from the Forth Valley Clinical Outcomes Group which is a group that provides strategic oversight of actions being taken and developed to reduce Hospital Standardised Mortality Ratio (HSMR) and improve clinical outcomes. HSMR is a key indicator of the quality and safety of our care in the acute hospital. HSMR is published to allow comparisons to be made between each hospital and the average for Scotland for a particular period. The Clinical Outcomes Group also utilises safety data to direct quality improvement and support the development of a fair and just culture.
- The CGWG forward planner was tabled for discussion. The forward planner identifies key information and documents that will be tabled throughout the year at the CGWG meetings. This forward planner will inform the meeting agendas to ensure that assurance of safe systems of care is demonstrated at the CGWG meetings.
- There was a verbal update on the national Whistleblowing Standards, which came into effect on 1 April 2021
- A Forth Valley Quality Highlight report was presented to the group. This highlight report gave an overview of the FV Quality vision, proposed developments, new achievements, key highlights, current work streams and next steps.
- A draft Clinical Governance Structure paper was presented which

demonstrated the assurance and escalation flow through the Clinical Governance groups in NHS Forth Valley. The Clinical Governance Structure mapping is continuing with collaboration between NHS FV and Health and Social Care partners and will be presented at a future meeting when completed.

- 6.8 The Committee are asked to note that a report on the national Whistleblowing Standards and implications for the HSCP will be presented to the September meeting.

7. Care Home Assurance

- 7.1 The Committee received a detailed report in February on Care Home Assurance work. Since May 2020 the HSCPs and NHS Forth Valley have been working with care homes and care home staff during the Covid-19 pandemic to support and assure infection prevention and control measures, support outbreak management and to ensure that fundamental care needs of residents are being met.
- 7.2 This section of the report provides an update on work since then, as well as providing assurance to the Committee members of these arrangements.
- 7.3 **Social Care CHART team**
The social care CHART team was established as a test of change to respond to the pandemic and support residents and staff working within care homes. The permanency of this team is now going through due process. As part of the work, the structure of the team is being reviewed and considered.
- 7.4 The CHART team, working collaboratively with other clinical health teams considers the following priorities and deliverables to ensure a robust, comprehensive and efficient response to supporting care homes, residents and staff during this period.
- 7.5 **Care Home Reviews**
The Scottish Government shared communications around support for care homes on 15 January 2021, where it requested that “Local Authorities should review care plans for all residents commencing in the first quarter of 2021 if that has not happened in the past 6 months”. As a result, the CHART team increased staffing to support this by 3 agency social workers on a temporary basis.
- 7.6 The current care home resident reviews to be completed are as follows:
- Central Locality 185
 - East Locality 205
 - West Locality 210.
- 7.7 This is a total of 600 resident reviews within care homes to complete. This will ensure a robust review of resident views, outcomes, care needs, environment, family views, as well as assessing the impact of Covid-19.

Additional assessment tools have been created to ensure a robust scrutiny of Covid-19 visiting plans, as well as isolation support plans as part of the pandemic impact.

- 7.8 Falkirk residents who live out of area (within other local authority areas, but funded by Falkirk HSCP) is currently 201 people. Negotiations with local authorities are required to ensure the review processes progress for all residents within care homes.
- 7.9 At the time of preparing the report, completed care home reviews from February to April are at 95, across 6 care homes. There is a clear, robust and flexible plan for review completion. This has allowed the team to respond to external factors (such as a large scale investigation process within a central care home) and ensure reviews are actioned if risk levels increase, or early indicators of concern are identified.
- 7.10 Throughout the waves of the pandemic, regular care home reviews have not been sustained by the social care CHART team to date. Locality work has been prioritised on a day to day basis, ensuring critical service delivery. This is due to the impact of the pandemic and the need to be responsive to the emerging needs of care homes – particularly those who have an outbreak.
- 7.11 [CHART visiting data](#)
The CHART team completed 97 assurance visits to care homes in the Falkirk area between January and April 2021. In addition, 2 visits were made to Housing with Care who experienced Covid-19 cases. The support provided to Housing with Care was an important aspect of the CHART teams resilience and flexibility, acknowledging that resources similar to care homes required the transferrable support, skills and advice when faced with Covid-19 outbreaks. The team also contacted 8 care at home providers to offer back to basic support if they were supporting service users or staff who had Covid-19.
- 7.12 There have been 65 joint visits with the Care Assurance team, which includes colleagues from the Infection Prevention and Control Team between January 2021 and April 2021.
- 7.13 The above data shows a total since November 2020 of 244 CHART assurance visits, and 144 joint visits with health colleagues to date.
- 7.14 On a daily basis, the CHART team complete check in phone calls to all 32 care homes within the Falkirk area. These discussions include vacancy information, TURAS completion, staffing levels and dependency and recently, updates and information sharing regarding the Covid-19 vaccine and staff lateral flow testing. New visiting guidance is also incorporated into daily discussions, and there is work being considered as to how to measure meaningful contacts for residents in light of new guidance.

7.15 **TURAS data & identifying / gathering anticipatory information**

The CHART team aim to support and prompt care homes to submit accurate information on time through the national Turas Care Management system. Completion rates are an average of 84% on a daily basis since the reporting system was introduced. This trend is continuing, and weekly analysis by the oversight group continues. This is demonstrated in the table below.

Date	W/B 15/03/2021	W/B 22/03/2021	W/B 29/03/2021	W/B 12/04/2021
Overall staff screening tool compliance	83%	85.7%	83%	74%
Overall safety huddle tool compliance	86%	86.6%	90%	84%
% of homes undertaking indoor visiting	78%	85%	84.3%	94%

7.16 **Care Home Visiting Risk Assessments**

The CHART team have been involved at a strategic and operational level in supporting care homes to risk assess their visiting arrangements and planning for future visiting. This is crucial aspect of residents social lives, and safe visiting and assessing the risks around this. The care home visiting task group is considering how to gather qualitative data in relation to visiting for residents, (such as feedback mechanisms and views) in order to support and influence further Government policy, information and advice moving forward.

7.17 **Covid-19: Staff Vaccination**

The CHART team, along with the independent sector are working in partnership with care homes to support the uptake of Covid-19 vaccinations and sharing information within an operational and strategic level to influence vaccine delivery. Information from this area has influenced approach to vaccines, such as holding “mythbuster” sessions or working with specific staff groups within care homes to support and encourage uptake.

7.18 The Covid-19 vaccination task group took forward targeted work with care homes where there was a below average uptake of staff vaccination. This has seen positive changes in uptake. A roving vaccination team has supported this uptake, as well as additional information and support being provided to the care home manager and staff group.

7.19 The Scottish Government has advised that current oversight and monitoring arrangements to support care homes will continue for at least the next 12 months (until at least March 2022). The pandemic has likely changed the way we support and monitor care homes moving forward, and the social care CHART team has the ability to be resilient and flexible when considering this.

8. Alcohol and Drug Partnership (ADP)

8.1 Alcohol and Drug Partnerships (ADPs) were established in 2009 and are responsible for:

- strategic planning and commissioning, contract monitoring of drug and alcohol treatment and support services in each local authority area
- developing strategies for tackling reducing and preventing problem drug and alcohol use across the whole population
- applying a whole systems approach to deliver sustainable change for the health and well-being of the population.

8.2 The transfer of the ADP to the HSCP has strengthened partnership working across all multi-agency partnerships in the area and has increased opportunities for joint planning and improved integrated working practice. Strengthened governance arrangements and aligned performance reporting via the Integration Joint Board and the Clinical and Care Governance Committee will ensure best use of the collective resource.

8.3 The ADP has met 4 times since the transfer took place on October 2019.

8.4 Key ADP achievements and deliverables for the reporting period:

- ADP continues to work with the third and independent sector, to maximise their impact and support for remobilisation post Covid19. This recognises the vital role they play in supporting people affected by drug and alcohol issues, their families and carers.
- work is underway to refresh the ADP Needs Assessment to determine population need relating to substance use.
- ADP has contributed to the compilation of the Community Planning Partnership revised plans and strategic needs assessment.
- links maintained with Child and Adult Protection Committees and Chief Officers Group through reports and meeting attendance.
- ADP has continued to support the work of Falkirk Council Licensing Board and Licensing Forum.
- Workforce development activity included a whole staff session on Substance Use for Social Work staff. The session was supported by the Chief Social Work Officer (CSWO) and ADP Chair/Head of Integration, and 75 staff engaged in the session. The ADP portfolio of training has been widely circulated and the uptake of the on-line sessions has been excellent.
- Naloxone (Opioid Reversal Drug) distribution is still a key priority for the partnership. Work to support a whole system approach to substance use has been delayed within the Acute Hospital, due to capacity issues relating to Covid-19. A session was held for staff within

Acute Mental Health and the national trainer fed back that they were impressed by the teams caring and compassionate approach to those who use drugs. A session has also been arranged for family members in the community to receive naloxone training.

- all commissioned ADP services have continued to be monitored and all are achieving the set key performance indicators.
- the national Drug Taskforce expectations are that every ADP facilitates the delivery of the Medicine Assisted Treatment Standards. Locally work is underway to benchmark practice against the standards across Forth Valley.
- the new national Drug and Alcohol Information System (DAISy) went live in local services on 1 April. All Forth Valley staff are trained in its use, and early indications are that staff feedback is positive on its functionality.
- a survey was undertaken to seek the views of families affected by substance use, this attracted approximately 200 responses. Work is planned to examine the detail of the responses and take appropriate action where any improvements are required.
- ADP is taking the lead for the referral process that each Health Board has to undertake to facilitate referral for those who experience a non-fatal overdose (NFO). This work will build on the success of the FV NFO Referral process which has led the way in Scotland for many years, as a process has been in place here since 2007.
- a number of additional posts have been recruited that will further support harm reduction and prevention work. This includes an extension to the Hospital Addiction Team and a Young Persons Nurse. Two new posts will be put in place in the coming weeks, a Drug Death / Suicide Review post and a Strategic Coordinator for Drug Deaths and Suicide.
- Prevention and Education work is a key area and recent engagement with Education Services has indicated their readiness to refresh delivery of the programme in schools.
- ADP contributed to the national conversation relating to devolved drug law with a view to influencing change.
- the review meeting for drug related deaths has been meeting during the pandemic, in order to ensure that we are alert to any trends.
- approval was granted to formally contract with Forth Valley Recovery Community for three years; this work is being led by the Clackmannanshire and Stirling HSCP on our behalf and is being led by the ADP Coordinator.

- 8.5 The FADP Lead Officer post is currently vacant and work is underway with the recruitment process.
- 8.6 The Committee is asked to note that a further progress report on the FADP Delivery Plan will be presented to the Integration Joint Board meeting in September 2021.

9. Conclusions

- 9.1 This report provides a summary of the relevant oversight arrangements and meetings for the CCGC.

Resource Implications

There are no resource implications arising from this report.

Impact on IJB Outcomes and Priorities

The meetings represented in the report will ensure oversight of key areas and provide assurance to the IJB on the delivery of services in line with the Strategic Plan.

Directions

A new Direction or amendment to an existing Direction is not required as a result of the recommendations of this report.

Legal & Risk Implications

There are no legal and risk implications arising from this report.

Consultation

There are no consultation implications arising from this report.

Equalities Assessment

There are no equality implications arising from this report.

10. Author Signature

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11. List of Background Papers

Meeting agendas as noted in the report.

12. Appendices

n/a