

## **Agenda Item 10**

### **Overview: Local Oversight Arrangements**



## **Falkirk IJB Clinical and Care Governance Committee**

**27 August 2021**

**Overview: Local Oversight Arrangements**

**For Consideration and Comment**

### **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 consider and comment on 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. 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.
- 4.2 The most recent meeting of the COG was 16th June 2021. Chief Officers considered the latest developments of the COG Risk Register provided

views about how it should progress. Chief Officers are named owners for relevant parts of the register and are responsible for updates and ensuring the risks are appropriate and mitigations are proportionate and suitably responsive. Pre-agenda meetings and an action register are to become standard practice to support the work of COG; these additional tools, alongside the Risk Register, will ensure the meetings focus on the right areas of work.

- 4.3 Consideration is to be given at the next meeting about the use of data at the COG. In order to facilitate the discussion and support the decisions required, a full year data report is being prepared for both child and adult protection (based on the weekly reporting to Scottish Government) and will be presented at the next COG in September. Chief Officers received a presentation by the Falkirk Alcohol and Drug Partnership on the main findings from the national report on Drug Related Deaths in Scotland 2019 (published by National Records of Scotland (NRS) - published on the 15th December 2020. In addition, the meeting in June considered written reports on:

- Child protection
- Adult protection
- Public protection data briefings
- Community Justice
- MAPPA
- Gender Based Violence
- Clinical and Care Governance

## **5. Falkirk Adult Protection Committee (APC)**

- 5.1 Falkirk APC is reporting on Large Scale Investigations as a separate agenda item.
- 5.2 On 24th May 2021 notification was received from the Care Inspectorate that the Falkirk Partnership would be subject to inspection within the following 6 months. In advance of the inspection commencement a case file sample is to be submitted and an Inspection Single Point of contact to be identified who will coordinate activities and engagement with NHS Forth Valley, Police Scotland and Falkirk Council. The inspection will be undertaken across all of Forth Valley but Falkirk will have its own particular focus and will receive a dedicated report .
- 5.3 The Adult Protection Committee has formed a multi-agency inspection group with a remit to ensure inspection activities are well prepared and responses to the Care Inspectorate are provided timeously. The group will support the production of communication to the workforce to ensure there are strong connections with the front line and senior leadership regarding inspection activities . The group has commenced meetings and will report routinely to the Falkirk HSCP Leadership Group and the Public Protection Chief Officers Group.

## 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 met in June 2021 and received and considered information and documents under the relevant agenda headings which were adapted from the Vincent Framework.
- 6.4 Table 1 details the reports, updates and presentations and discussions given under each headings, which gives assurance of safe, effective, person-centred care.

Table 1: CGC Agenda and Updates received

CGC Agenda Item	CGC Reports and Updates received
In Our Services: Is Care Safe Today?	A draft paper was shared with the committee which highlighted the clinical governance meetings, and directorate escalation and assurance structures in NHS FV.
Was Care Safe in the Past?	The agenda items under this heading are reports and presentations which are standard items on the CGC agenda. These reports contain key safety metrics and narrative which provides assurance of overall safety in our services. The reports presented at this meeting were: <ul style="list-style-type: none"><li>▪ Safety and Assurance report</li><li>▪ Scottish Patient Safety Programme (SPSP) Falls update</li><li>▪ Healthcare Acquired Infection (HAI) Annual Report April 2020-March 2021</li><li>▪ Standards and Reviews Report</li></ul>
Will Care be Safe in the Future?	A risk management update was provided to the committee
Is Our Care Person-Centred?	The NHS FV Complaints and Feedback Performance Report was presented to the committee
Are We Learning and Improving?	<ul style="list-style-type: none"><li>▪ A presentation highlighting the activities of the FV Quality team and the FV Quality portfolio was shared with the committee</li><li>▪ The Significant Adverse Event Reviews (SAER) report was presented to the committee</li><li>▪ The Ethical Advisory Group (EAG) final report was presented to the committee</li><li>▪ Feedback on the Clinical Governance event undertaken in April 2021 was shared with the committee</li></ul>

## 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 in May and July followed the same agenda headings as NHS FV CGC. Table 2 details the reports and updates:

Table 2: CGWG Agenda and Updates received

CGWG Agenda Item	CGWG Reports / Updates etc
In Our Services: Is Care Safe Today?	<ul style="list-style-type: none"> <li>Updates on the latest HSMR publication</li> <li>The FV Quality Strategy</li> <li>Updates on relevant local and National safety information</li> </ul>
Was Care Safe in the Past?	<p>The agenda items under this heading are reports and presentations which are standard items on the CGWG agenda. These reports contain key safety metrics and narrative which provides assurance of overall safety in our services. The reports presented at this meeting were:</p> <ul style="list-style-type: none"> <li>Safety and Assurance Report including Directorate Assurance Statements</li> <li>Standards and Reviews Report</li> <li>Healthcare Associated Infection Reporting Template (HAIRT)</li> <li>Update on the Scottish Patient Safety Programme (SPSO) workstreams on 'falls' and 'Maternity and Children Quality Improvement Collaborative (MCQIC)'</li> </ul>
Will Care be Safe in the Future?	A risk management update was provided to the group.
Is Our Care Person-Centred?	The NHS FV Complaints and Feedback Performance Report was presented to the group
Are We Learning and Improving?	<ul style="list-style-type: none"> <li>The Significant Adverse Event Reviews (SAER) report was presented to the group</li> <li>Feedback on the Clinical Governance event undertaken in April 2021 was shared with the group</li> </ul>
Are Our Systems Reliable?	<ul style="list-style-type: none"> <li>A Child Protection Update (CPAG) was presented to the group</li> <li>A Cardiac Arrest report was presented to the group</li> <li>An essential safety training update was shared with the group</li> <li>Other reports to provide assurance were shared to ensure triangulation</li> </ul>

## 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. The Care Home Oversight group Chaired by the Director of Nursing continues to meet weekly to oversee care assurance and safety of care homes supported by the regular care home strategy group meetings.

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.

Current completed review information –

April 2021	37
May 21	43
June 21	60

7.6 The current care home resident reviews to be completed are as follows:

- East 84 still to be completed across 5 homes
- West 42 still to be completed across 2 homes
- Central 117 still to be completed across 7 homes and 12 being reviewed to ensure review action plan complete.

7.7 These reviews are ensuring 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 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 \(May, June and July 2021\)](#)  
From May 2021 until 21 July 2021, the Chart team have completed 42 care assurance visits completed, with a further 7 planned till end of July 2021.
- 7.12 Housing with care facilities have not required any additional visits, and have been supported by telephone calls when required. To acknowledge the changing situation regarding covid-19 transmission in the community, the Chart team has completed 2 calls/meetings to care at home providers in June/July 2021.
- 7.13 In addition, auditing work of care plans has taken place. There has been 9 resident files and particular aspects of care reviewed at a care home requiring additional support, as well as 1 day care covid risk assessment reviewed and completed in anticipation of reopening
- 7.14 The above data shows a total since November 2020 of 286 CHART assurance visits
- 7.15 Following an approved SBAR by the Care Home Strategy Group, the CHART team complete check in phone calls twice weekly 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. Care Homes have contact details for the Chart team, and the decision to step down calls was completed in partnership with care home managers, the chart team and Scottish Care.
- 7.16 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.

#### 7.17 **TURAS data & identifying / gathering anticipatory information**

The CHART team continue to support and prompt care homes to submit accurate information on time through the national Turas Care Management system.

Completion rates are detailed below:

##### **June 2021**

Staff screening average 97% completion

Huddle average 87% completion

##### **1<sup>st</sup> July 2021 to 16<sup>th</sup> July 2021**

Staff screening average 95% completion

Huddle average 97% completion

#### 7.18 **Care Home Visiting Risk Assessments**

The CHART team continue to be 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.

#### 7.19 **Open with Care:**

The new Scottish Govt guidance on Care Home visiting requires the Chart team to monitor the visiting arrangements and 'challenge' care homes to improve visiting. The chart team keeps data on what care homes visiting arrangements are, and why (if relevant) these change. As part of this work and support, the team have been gathering data on what care homes different arrangements are which has shown some different and diverse responses. The focus of Open with Care is to ensure visiting and contact is a quality experience for wellbeing.

7.20 Following further guidance from the Scottish Government in July 2021, a short life working group has been developed jointly with Falkirk HSCP, Clacks/Stirling HSCP and health colleagues to support a consistent approach to communication and support in this area across Forth Valley.

## **8. Alcohol and Drug Partnership (ADP)**

8.1 The CCGC received a presentation provided on Medication Assisted Treatment Standards for Scotland. The standards can be found [here](#)

## **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**

Suzanne Thomson, Senior Service Manager

### **11. List of Background Papers**

Meeting agendas as noted in the report.

### **12. Appendices**

n/a