

Agenda Item 3

Minute



Draft

**Minute of meeting of the Integration Joint Board Clinical and Care Governance
Committee held remotely, on Friday 27 August 2021 at 9.30 a.m.**

Voting Members: Fiona Collie (Chair)
Stephen McAllister (Vice-Chair)

**Non –voting
Members:** Margo Biggs, Service User Representative
Roger Ridley, Staff Representative

Also Attending: Lynda Bennie, Head of Clinical Governance.
Patricia Cassidy, Chief Officer, Integration Joint Board
Claire Chapman, Locality Manager, Social Work
Ross Cheape, Service Development Manager
Amanda Crawford, Patient Relations Lead
Jonathan Horwood, Area Infection Control Manager
Ellen Hudson, Deputy Nurse Director
Elaine Kettings, Head of Person Centred Care
Sara Lacey, Chief Social Work Officer
Elaine Lawlor, Forth Valley Alcohol and Drug Partnership Co-ordinator
Gordon Mackenzie, Locality Manager, East
Tricia Miller, Lead Nurse Infection Control
Andrew Murray, Medical Director
Brian Pirie, Democratic Services Manager
Gemma Ritchie, Adult Support and Pro Lead Officer/Co-ordinator
Lorraine Scott, Health and Social Care Partnership Support Officer
Antonia Sobieraj, Committee Services Officer
Martin Thom, Head of Integration
Angela Wallace, Nursing Director
Gail Woodstock, Head of Integration

CCG14. Apologies

Apologies were intimated on behalf of Suzanne Thomson, Senior Service Manager.

CCG15. Declarations of Interest

There were no declarations of interest.

CCG16. Minute

Decision

The minute of meeting of the Clinical and Care Governance Committee held on 21 May 2021 was approved.

CCG17. Action Log

An action log detailing ongoing and closed actions following the previous meeting on 21 May 2021 was provided.

Decision

The committee noted the action log.

CCG18. Presentation: Medicated Assisted Treatment Standards

The committee received a presentation by the Service Development Manager and Forth Valley Alcohol and Drug Partnership Co-ordinator on Medicated Assisted Treatment Standards (MAT) relating to access, choice and support.

The presentation detailed MAT standards 1 to 10 including local assessment and information relating to the drug related deaths as well as the Forth Valley position, plan and associated challenges comprising standards related to the undernoted:-

- Standard 1 - accessing services with option to start MAT from the same day of person's presentation to the service;
- Standard 2 - supporting to make an informed choice on what medication to use for MAT and the most appropriate dose;
- Standard 3 - those at high risk of drug related harm being proactively identified and offered support to commence or continue MAT;
- Standard 4 - offering evidence based harm reduction at the point of MAT delivery;
- Standard 5 - supporting to remain in treatment for as long as requested;
- Standard 6 - the MAT system having psychological information, routinely delivering evidence based low intensity psychosocial interventions and support to grow social networks;
- Standard 7 - the option of MAT shared with primary care;
- Standard 8 - accessing independent advocacy and support for housing, welfare and income needs;
- Standard 9 - co-occurring drug use and mental health issues together with mental health care; and
- Standard 10 - trauma informed care.

The committee:-

- (1) noted the presentation; and**
- (2) agreed that the details of the work being undertaken should be submitted to the Senior Leadership Team in order to pull together the different strands of this work for a 'joined up' approach, thus meeting users various multifaceted and interconnected needs.**

CCG19. Whistleblowing Standards and Activity Report

The committee considered a report by the Executive Nurse Director providing an update on the implementation of the Whistleblowing Standards and the related activity within NHS Forth Valley for the period, Quarter 1, April to June 2021.

The report referred to the launch of the national Whistleblowing Standards and the Whistleblowing Activity on 1 April 2021 and the work underway for the implementation together with key performance indicators. The key elements within the implementation and associated delivery plans included:-

- System Implementation;
- Communication Plan;
- Training and Development Plan;
- Process in Stages;
- Speak up Model;
- Evaluation of the Standards Impact; and
- Recording, Reporting, Governance and the Annual Report.

General discussion included the importance of staff being confident of the mechanisms in place in terms of communication, training and information for whistleblowing and associated complaints.

Decision

The committee noted the report.

CCG20. Hospital Acquired Infection Performance Report

The committee considered a report by the Area Infection Control Manager providing an oversight of all Hospital Acquired Infection (HAI) related activity across Falkirk Community Hospital and Bo'ness Community Hospitals from April to June 2021.

The report included details of all Staph aureus bacteraemias (SABs), Clostridioides difficile Infections (CDIs), Escherichia coli Bacteraemia (ECBs) and Device Associated Bacteraemias (DABs) for these areas with a brief summary of the investigations which had been carried out. The report also provided details of Covid 19 related work during this period.

General discussion included the importance of including comprehensive information on infections within care home settings, for comprehensive monitoring purposes, as well as within hospital settings.

Decision

The committee noted the report.

CCG21. HSCP Complaints and Feedback Performance Report: Quarter 1, 2021-22

The committee considered a report by the Patient Relations Lead and Locality Manager providing an overview of complaints activity across the Falkirk Health and Social Care Partnership (HSCP) during Quarter 1, April to June 2021.

The report took into account the number of complaints received, local resolution, and compliance including the 20 day national target and Scottish Public Services Ombudsman (SPSO) referrals.

The report also provided an update on feedback received through Care Opinion and other mechanisms about Health and Social Care Partnership services. It also detailed a reduction in the number of complaints received via the NHS Complaints Handling Procedure (CHP) and an increase in those received via the Social Work Adult Services Complaints Handling Procedures (SWAS CHP).

During the reporting period of Quarter 1 (April to June 2021), there were 20 complaints received relating to Social Work Adult Services. A number of actions were initiated in Q3 in 2020 - 21 aimed at improving performance in relation to compliance with response timescale requirements. Whilst there was an overall improvement in the subsequent two Quarters, the numbers were too small to confirm evidence of an improving trend but did offer some encouragement in this regard.

In relation to NHS Forth Valley, during Quarter 1 (April to June 2021), 7 complaints were received by the Patient Relations Team relating to the delegated functions for the HSCP. This excluded complaints transferred, withdrawn or where consent was not received. The overall year end performance for responding to complaints within Stages 1 and 2 was 71.4%. On analysis of Stage 1 complaints, the HSCP received three Stage 1 complaints during the period and achieved a 100% performance and for the same period four Stage 2 complaints were received and a 50% performance target was achieved in responding to complaints within 20 working days. Worthy of note

was that due to the low number of complaints, a single breach of the 20 day target would cause performance to drop significantly.

Decision

The committee-

- (1) noted the report and actions being taken; and**
- (2) agreed, that feedback be sought from the Scottish Public Services Ombudsman (SPSO) on the current open case relating to Falkirk Community Hospital as detailed in Table 4 of the report.**

CCG22. Overview Inspection Reports and National Publications

The committee considered a report by the Senior Service Manager providing an overview of the inspection and national reports published since the previous meeting.

The Mental Welfare Commission (MWC) published no reports on local services since the previous update. The MWC had published a themed visit report in April 2020 on older people admitted to hospital with functional mental illness during 2019 with associated recommendations. Other work of the MWC included writing to Chief Officers in March 2021 advising of themed visits between March and May 2021 to those diagnosed with alcohol related brain damage and subject to welfare guardianship orders. The report and associated findings was still to be published.

The Care Inspectorate (CI) had completed the 'follow up' inspection of Burnbrae Care Home on 17 June 2021 and assessed the required actions identified previously. The service within the home had positively improved and the CI's report in the main highlighted extremely good progress or positive change. Although many areas were described as very good, the care home was still evaluated as 'adequate (3)' in all areas.

In the period 9 national reports had been published. The Independent Review of Adult Social Care was published in February 2021. This report highlighted several high level areas of focus including the establishment of a National Care Service (NCS). Here Scottish Ministers would be accountable for Adult Social Care support. The Scottish Government had launched a public consultation to seek views on the scope of the National Care Service for Scotland. This proposed that the NCS would define the future strategic direction and quality standards for community health and social care for adults and children and to be operational by 2026. Local Delivery Boards would be established for local delivery based on need and with wideranging participation.

Decision

The committee noted the report.

CCG23. Overview: Local Oversight Arrangements

The committee considered a report by the Senior Service Manager providing an overview of local oversight arrangements which were relevant to the Falkirk Health and Social Care Partnership (HSCP).

Updates were provided on:-

- Forth Valley Public Protection Chief Officers Meeting;
- Falkirk Adult Protection Committee (APC);
- NHS FV Clinical Governance Arrangements;
- Care Home Assurance; and
- Alcohol and Drug Partnership (ADP).

Decision

The committee noted the report.

CCG24. Falkirk Adult Protection Committee Large Scale Investigation

The committee considered a report by the Health and Social Care Partnership Adult Support and Protection Lead Officer on the work of the Falkirk Adult Protection Committee (APC) and Large Scale Investigation (LSI).

The report highlighted the work of the Falkirk Adult Protection Committee (APC) included local duties for the safeguarding of adults at risk from harm. These comprised reviewing adult protection practices, improving co-operation between agencies, improving skills and knowledge, providing information and advice and promoting good communication. Included in this work was the responsibility for reviewing Large Scale Investigation (LSI) and the Care Inspectorate had specific quality indicators to assist this process.

General discussion noted the overlap with the Whistleblowing Policy and importance of identifying early indicators of concern.

Decision

The committee:-

(1) noted the report; and

(2) agreed:-

- (i) to support the continuous improvement of Large Scale Investigation (LSI) practice within operational teams including training, application of procedures and associated frameworks, participation and resource towards LSI proceedings and actions on findings; and**
- (ii) to ensure that staff were made aware of the different the pathways available to raise areas of concern and for whistleblowing through appropriate communication, coordination and signposting, and for improvement and monitoring implementation of actions.**