

**Argyll and Bute HSCP
 Clinical and Care Governance Committee**

**10th June 2021 – 2pm
 Via TEAMS**

Minute

	Item	Action
1.0	<p>WELCOME AND APOLOGIES</p> <p>PRESENT</p> <p>Sarah Compton Bishop (SCB) – IJB Deputy Chair (Chair) Catriona Watt (CW) – Area Manager Mid Argyll Caroline Cherry (CC)– Head of Service (Older People) Carol-Anne McDade (CMcD)– Area Manager Helensburgh Charlotte Craig (CG) - Business Improvement Manager Diana Lockhart (DL) Donald Watt (DW) – Service Manager Registered Services Elizabeth Higgins (EH)– A&B Associate Nurse Director Fiona Davies (FD) – Interim Chief Officer Julie Hempleman (JH) – Lead Officer for Adult Protection (joined meeting at 15.55, left at 16.05) Julie Lusk (JL) – Head of Service Mental Health, Addictions, Learning Disability, Autism, Transitions and Physical Disability Kieron Green (KG)– IJB Chair Kate MacCallum (KMacC) – Community Team Lead, Mull Linda Currie (LC) – Associate Director of AHP Linda Skrastin – Child Health Manager Morven McPhillips (MMcP) – Area Manager OLI Community Nicola Gillespie – (NG) – Service Manager Mental Health Nicola Schinaia (NS) – Associate Director of Public Health – Pamela MacLeod (PM) – Professional Lead – Social Work (joined meeting at 15.55, left at 16.05) Paul Chapman (PC) - Physiotherapy Team Lead & Falls Lead Rebecca Helliwell (RH) - DeputyMedical Director Sandy Taylor (ST) – Non Exec Member of the Board Claire Higgins (CHg) – PA to Associate Nurse Director</p> <p>APOLOGIES</p> <p>Angus McTaggart (AMc) – Clinical Lead, Islay & Jura Patricia Renfrew (PR)– Interim Head of Children & Families (Health) Caroline Henderson (CH) – Acting Locality Manager Oban Hospital Fiona Campbell (FC)-Clinical Governance Manager</p>	

	Fiona Thomson, Lead Pharmacist Jayne Lawrence-Winch (JLW) – Area Manager Cowal	
2.0	PREVIOUS MINUTES Minutes agreed as accurate and approved.	
3.0	MATTERS ARISING Nil	
4.0	Action Log	
5.0	<p>QUALITY AND EFFECTIVENESS OF CARE</p> <p>5(a) Infection Control Report</p> <p>EH spoke to tabled paper. EH advised the committee that this was a board wide report and highlighted the Argyll & Bute issues within the paper.</p> <p>ST requested to see more live and local data, EH assured the committee that this can be provided going forward.</p> <p>EH clarified the route cause analysis purpose and any resulting actions.</p> <p>The committee noted the information contained in the report.</p>	EH
6.0	<p>SAFETY & EXPERIENCE</p> <p>6(a) HSCP Health and Safety Group Action log (for noting)</p> <p>FD spoke to tabled action log.</p> <p>The committee noted the action log and information contained within it.</p> <p>6(b) CAMHS (Child and Adolescent Mental Health Services)</p> <p>LS advised the committee that work continues in relation to the areas identified as requiring action. The CAMHS Quality Improvement Plan is still in place and progress measured against this.</p> <p>LS highlight the following points;</p> <ul style="list-style-type: none"> - Enhanced support is still in place by Scottish Government (SG) - Additional funding has been made available for recruitment to CAHMS posts. The funding has been agreed as recurring. - There are applicants for all the posts out to recruitment. <p>Discussion around areas that SG would like to see the funding targeted to.</p>	

6(c) Quality Patient Safety Report (QPS)

EH spoke to tabled paper and highlighted it is health information only but that it would be beneficial to report on information across health and social care going forward. The report is sample of charts from NHS Highland Quality and Patient Safety Dashboard, relating to Argyll and Bute HSCP quality and safety performance (health) as at 01 June 2021.

EH commented on our complaint compliance rate and highlighted the significant sustained improvement.

Report to be developed over time to give a more in-depth overview to the committee.

The committee noted the information contained in the report.

6(d) Review of Dementia Services Risks

CC spoke to tabled paper and highlighted that progress had been made in the following areas –

- The majority of the former Knapdale staff have been successfully redeployed into posts within Mid Argyll.
- The redesign group have written operational procedures which will effectively guide the delivery of the dementia service.
- Job Descriptions were developed for all new posts and these were taken through the appropriate governance frameworks. Social work posts and Health Care Support Workers have been advertised and some staff are in place in mid Argyll as a result of redeployment.
- The dementia staff in three areas (including Alzheimer Scotland staff) have been brought together and have started to communicate as a virtual service.
- Colleagues Lora White and Carrie Hill are developing performance measures for the service.
- A progress report for SLT indicated that a Team Leader was required, this was not included in the original redesign but is in effect essential in bringing this service together as one service for Argyll and Bute. Following a detailed matching process, Fiona Blair will begin in post as Team Leader on the 1st June 2021.
- Meetings have been held with Alzheimer Scotland who provide link workers within the service and a range of services to people with dementia and their unpaid carers. We are in the process of agreeing meaningful performance measures for the service. The writer and Team Leader will manage the contract.
- A Team Secretary has been appointed.
- The budget is being streamlined as one single budget.
- The training support to Managers of Care Homes is being implemented.

CC and EH to meeting to discuss the role of a Dementia Nurse Consultant for A&B and Dementia Champions.

CC/EH

A Service Improvement Officer has been providing support in establishing a Dementia plan.

The Committee noted and discussed the current risks posed for the Dementia Service and progress on redesign and implementation.

The Committee discussed mitigating factors to manage risks.

The Committee discussed further development on governance around Dementia Services is required.

The Committee noted that there is discussion required on the Dementia Nurse Consultant role (required by every NHS Board) and this needs escalated to NHS Highland.

6(e) Falls (6 month report)

PC spoke to tabled paper and highlighted the following areas.

Overall, the average number of falls for those over 65 (per 1000/>65) is reducing, bringing the partnership closer to achieving the national care measure target.

Inpatient falls continue to reduce in a steady trend.

Work is ongoing to address areas of priorities and risk

- Response to non injured fallers,
- Post lockdown physical activity,
- Single dashboard/report cover all elements of falls pathway in A+B,
- Board wide falls focused meetings,
- Resource available to coordinate prevention agenda.

Discussion around 24 Falls response - Is a mixed model required?

6(f) Maternity

CD spoke to tabled reports. These reports have been submitted to A&B Senior Leadership and NHS Clinical Governance Committee.

CD updated that A&B had met 6 of the 7 essential actions from Ockenden report, 1 partially met and that there is ongoing work to support working with families, supported by Maternity Survey and establishment of Maternity Voices service user group. Development of Participation and Engagement officer role and designated recurring Practise Development hours will support ongoing improvement.

Maternity Survey has been discussed with participants who gave contact details and action plan is being progressed. Actions will be shared through social media channels and Maternity App. Maternal and Neonatal Governance and Improvement group will have oversight of this and report on progress

Action has been benchmarked and six of the actions have been met by Argyll & Bute. Work in ongoing to meet the others.

	<p>6(g)SWES Update JL updated on current situation and discussions that have taken place with Unions. A short life working has been established and will have service improvement officer support. JL to bring a paper to future committee.</p> <p>6(h) Violence & Aggression Training Compliance in MH Inpatient Setting JL gave verbal update on current training compliance and the steps that are being taken to improve this. Committee content that this issue is being dealt with at the operational level.</p> <p>6(i) ASP Inspection Update PMacL and JH joined the meeting at 15.55 and updated the committee on current ongoing Joint Inspection of Adult Support and Protection in Argyll and Bute Health and Social Care Partnership area. PMacL and JH informed the committee of the requirements of the inspection.</p> <p>SCB asked about key dates and these were given as</p> <ul style="list-style-type: none"> - CI issue draft report for factual accuracy - Monday 6 September 2021 - Professional Discussion 2 (feedback) - Tuesday 7 September 2021 - Embargoed Report - Tuesday 21 September 2021 - Report Published - Tuesday 28 September 2021 - Improvement Plan issued - Wednesday 29 September 2021 <p>Joint Inspection of Adult Support and Protection, Quality Indicator Framework was tabled for information and noting.</p>	JL
7.	SCHEDULED REPORTS FOR NOTING	
	<p>(a) Cowal & Bute Tabled report circulated, review and noted.</p>	
	<p>(b) Helensburgh and Lomond Tabled report circulated, review and noted. SCB highlighted the areas of good practice and feedback.</p>	
	<p>(c) Mid Argyll, Kintyre & Islay Tabled report circulated, review and noted. CW highlighted that she had noted the lack of old age psychiatry within the report but acknowledged that this may not be the most appropriate place for it to sit.</p>	
	<p>(d) Oban, Lorn & Isles Tabled report circulated, review and noted. DW highlighted that there has been issues over the last couple of weeks in Oban in relation to carers. A large piece of work was undertaken to help resolve the situation. LC picked up on the short staffed physio team detailed within the report and</p>	

	offered to bring a more detailed report for A&B to a future committee. SCB highlighted the areas of good practice and feedback	LC
	<p>(e) Mental Health Tabled report circulated, review and noted. NG asked where recommendation from a SUI relating to a young persons admission to Succoth should go. EH advised that this should go through the Quality Patient Safety (QPS) process.</p>	
	<p>(f) Maternal & Newborn Tabled report circulated, review and noted.</p>	
	<p>(g) LD, PD and Autism Tabled report circulated, review and noted.</p>	
	<p>(h) Children & Families Tabled report circulated, review and noted.</p>	
8	<p>FOR NOTING</p> <p>Papers and link shared for information and noting.</p> <p>(a) Joint Inspection of Adult Support and Protection in the Argyll and Bute Partnership Area Tabled report circulated, review and noted.</p> <p>(b) Mental Welfare Commission Authority to Discharge Report Tabled report circulated, review and noted. JL to bring a report to a future committee relating to challenges of accuracy within the report.</p> <p>(c) Independent Review of Adult Social Care Tabled report circulated, review and noted.</p>	
9	<p>AOCB Nil</p>	
10	<p>FUTURE MEETINGS</p> <p><u>2021 dates via Teams starting at 2pm</u></p> <ul style="list-style-type: none"> • Sept 9th • Nov 11th 	