

## **5 CLINICAL, CARE & PROFESSIONAL GOVERNANCE EXCEPTION REPORT (PAC18-2017)**

The Dundee Health and Social Care Partnership Clinical, Care and Professional Governance Forum (R2) reported to the Dundee Health and Social Care Partnership Integration Joint Board (IJB) in February 2017 (DIJB8 – 2017). This report provided the IJB with an update on the progress made in implementing the Clinical, Care and Professional Governance Framework. The report recommended that exception reporting be provided to every Performance and Audit Committee (PAC) and six monthly reports be provided to the IJB. At the request of the IJB an earlier progress report was submitted to the IJB in June which provided members with a further update on the progress made and summarised the work undertaken in the financial year April 2016 – March 2017. The IJB members made helpful suggestions as to how this reporting framework might be improved and this will be incorporated into the future reports to both the IJB and the Performance and Audit Committee.

The information for period April 2017 – June 2017 will be considered by the R2 Forum in July 2017 and as such is not available for the PAC meeting. The timing of meetings will be reviewed in line with the PAC arrangements to ensure reports are available for future meetings. The PAC is therefore asked to note the following information:

1. There is a robust, single reporting arrangement in place to support consideration of health governance matters. This was previously established within Dundee CHP. The framework is being mapped against social care governance arrangements to align systems and further develop integrated performance reporting. A development day is being held on 17 July 2017 to support this.
2. The annual summary report to the IJB identified the areas considered by R2 during the period April 2016 – March 2017. There were no significant outstanding governance issues identified as part of this process.
3. The R2 has considered both governance and risk issues for three service areas, Palliative Care Services, Mental Health Officer Service and Tayside Substance Misuse Service. The following was reported within in the yearly summary presented to the IJB:

### **Palliative Care Services**

- The Managed Clinical Network will support the wider community based aspects of Palliative and End of Life Care (PEOLC) across all of Tayside, with potential for the development of a standardised approach.
- Processes are being developed collaboratively to ensure that staff, within specialist palliative care, not only deliver specific care directly, but support others to deliver palliative care through support, education and resources.
- Clear clinical and management leadership structures in place which will support the development of standards and outcomes and feed into the Corporate, Clinical and Financial Governance across the three partnership areas.
- There will be a challenge in maintaining the benefits of a Tayside model while developing locality based approaches.
- Governance data reporting to be further developed for next reporting period.

### **Mental Health Officer Service**

- High level of engagement in taking forward the development of the service.
- Additional posts established through new monies to support capacity issues but current vacancies within the service impacting on capacity.
- Procedures are being finalised for Adults with Incapacity (Scotland) Act 2000 (AWI) and Mental Health (Care and Treatment) (Scotland) Act 2003 (MHA) to meet national standards.
- Service review in place and initial report produced – recommendations to be agreed and fully implemented.
- Capacity issues continue to arise and further discussion required around approaches and processes.

- Risks identified included difficulties in supporting out of hours responses and any potential impact from the NHS Tayside Mental Health services review.

#### Tayside Substance Misuse Services

- Noted that this is an early report as service recently moved to partnership and data reporting systems still being explored.
- High level of reported risks and incidents (Local Adverse Event Reviews; Significant Case Adverse Events; DATIX reports).
- Clinical risk improvement actions being worked through.
- Particular issues identified around prescribing which will be further explored through the Medicine Management Group.
- Service is currently meeting the HEAT targets, however there are high levels of demand throughout the service which impacts on the capacity of the service.
- Management team is currently reviewing the key strengths and risks of the service to inform service redesign and are progressing arrangements to strengthened clinical, care and professional governance arrangements at a Dundee level which in turn will also inform the Tayside Mental Health Clinical, Care and Professional Governance Speciality Group.