



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 22 SEPTEMBER 2020

REPORT ON: ANNUAL REPORT OF THE DUNDEE HEALTH AND SOCIAL CARE PARTNERSHIP CLINICAL, CARE & PROFESSIONAL GOVERNANCE GROUP

REPORT BY: CLINICAL DIRECTOR

REPORT NO: PAC30-2020

1.0 PURPOSE OF REPORT

1.1 This annual report is to provide assurance to the Clinical Quality Forum regarding matters of Clinical, Care and Professional Governance. In addition, the report provides information on the business of the Dundee Health & Social Care Partnership Clinical, Care and Professional Governance Group (“the Group”, DHSCP CCPG Group), and to outline the ongoing planned developments to enhance the effectiveness of the group.

2.0 RECOMMENDATIONS

It is recommended that the Clinical Quality Forum:

- 2.1 Notes the content of this report.
- 2.2 Notes the work undertaken by the Dundee Health & Social Care Partnership Clinical, Care and Professional Governance Group from April 2019–March 2020 to seek assurance regarding matters of Clinical, Care and Professional Governance.

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

4.1 Objectives and Responsibilities

- 4.1.1 Review and enquiry about risks being managed across the Dundee Health & Social Care Partnership (DHSCP) and action progressed to mitigate risk.
- 4.1.2 Review and enquiry to demonstrate there are systems to embed clinical, care and professional governance at all levels from front line staff to the IJB and to drive a culture of continuous improvement.
- 4.1.3 Sharing and learning from best practice and innovative ways of working in relation to clinical, care and professional governance across DHSCP.

4.2 Dundee Health & Social Care Partnership Clinical, Care and Professional Governance Group

4.2.1 The Business considered by the DHSCP CCPG Group during 2019/20 has addressed the function and remit of the Group; profiling national policy and local application of policy and guidance that affects practice. Key themes considered are outlined below:

- Service Area Reports / Service Area Updates.
- The Risk Register.
- Outcome of Inspection Reports.
- Updates on Clinical Governance and Risk Management Local Adverse Event Reviews / Significant Case Adverse Event Reviews / Significant Case Reviews.
- Exception reports relevant to the Clinical, Care and Professional Governance Domains.
- Processes for the introduction of new clinical, care and professional policies and procedures.

4.2.2 Action notes of the meetings in the Group have been timeously submitted to the Dundee Executive Management Team and to the NHS Tayside Clinical Quality Forum for review and discussion.

4.2.3 The Group met on six occasions during the period 1 April 2019 to 31 March 2020 on the following dates:

- 10 April 2019
- 26 June 2019
- 28 August 2019
- 30 October 2019
- 4 December 2019
- 6 February 2020

4.2.4 During the financial year ending 31 March 2020 membership of the Group comprised:

Clinical Director (Chair)
Head of Health and Community Care Services (Vice Chair)
Associate Nurse Director
Associate Medical Director
Locality Manager (4)
Lead Allied Health Professional (DHSCP)
Lead Nurse (DHSCP)
Lead Pharmacist (DHSCP)
Clinical Governance Lead (DHSCP)
Senior Officer – Business Planning and Information Governance (DHSCP)
NHS Business Support Representative
Third Sector representative

4.3 Schedule of Business Considered During the Period 1 April 2019 to 31 March 2020

4.3.1 10 April 2019

Clinical, Care and Professional Governance Exception Reporting

- Noted Mental Health Services Report and Presentation
- Noted Integrated Substance Misuse Service Report

Review of General Data Protection Regulations

- Action requested to ensure local compliance across HSCP

Internal Audit – Focus on Information Governance

TrakCare Update – Delayed Discharges

Review of Recruitment Processes

Noted report on mandatory training compliance

Review of number of DATIX submissions across HSCP

Review of HSCP Service Risks

- Agreed all service risks to be recorded through DATIX system
- Self assessment template to be completed by all teams

Noted current Large Scale Investigation within Dundee Care Home and support required from DHSCP

Infection Control Update

Legionella Testing

Paper presented in relation to Non Medical Prescribing in Nursing Homes

Inspection Reports

- Care Inspectorate Report for Menzieshill House presented.

SIGN 156: Children and Young People exposed prenatally to alcohol

- Guideline noted by the group

4.3.2 26 June 2019

Clinical, Care and Professional Governance Exception Reporting

- Noted Learning Disability Service Report
- Noted Health Inequalities Service Report

Clinical Quality Forum Reporting

- Feedback from CQF on content and style of reporting for future reports

Recruitment Processes

- Agreement reached to support critical posts escalation through recruitment process

Infection Control Review

Integrated Substance Misuse Service Update

- Increased risk in service – already on risk register

CCPG Group Annual Report

- Report reviewed and content noted by Group.

Noted Drugs Commission Report due for publication

Annual Work Plan Noted by the Group

Review of HSCP Governance Structure discussed in relation to development of Primary Governance Groups reporting directly into the CCPG Group

Noted General Data Protection Regulation Report

- Noted improvement required for training

Review and Implementation of the Risk Management Self Assessment Template

- Noted that no responses received and further work required to progress
- Agreed further work required to align service and corporate risks within CCPG Group

Service Risk Report presented and noted in the Group

Complaint Report

- Noted that no report was provided for the Group
- Customer Care and Governance Officer has been appointed

No new Inspection Report during reporting period

Transcribing Medication

- Longstanding issue currently being explored with colleagues across Tayside
- Robust Guidance and Governance to be brought to the group for noting
- Guidance relates to District Nursing only

2C Practices

- Noted risks associated with 2C practices and actions to mitigate

4.3.3 28 August 2019

Clinical, Care and Professional Governance Exception Reporting

- Noted update service report for Integrated Substance Misuse Service
- Noted update service report for Mental Health services
- Noted update report from Legionella outbreak demonstrating improvement

Infection Control Update

- Feedback received from the Infection Prevention and Control Committee
- DHSCP concerns escalated through the Committee

Dundee Drug Commission Report

- The report was noted. It was recognised that a significant amount of work is required across services and regular updates will be sought via the Group.
- Staff wellbeing was noted as being key at this time

Getting it Right for Everyone (GIRFE) Framework Review

- Noted the work of the group

General Data Protection Regulation Report

- Report noted
- Chair requested broader, more comprehensive report to ensure capture of all potential GDPR breaches

Safe Staffing Bill

- Noted that guidance for the Safe Staffing Bill due to be published

Adverse Event Report

- Report noted. No queries raised.

Service Risk Report

- Report noted
- Identified further work required to enhance links between operational risks and higher level risks

Complaints Report

- Noted a new style of reporting that better reports on overdue complaints, which were significant across the Partnership
- Managers tasked with taking work forwards to address
- Care Inspectorate Complaint discussed regarding home care service
- Learning shared via SPSO report from Glasgow City Partnership

Inspection Reports

- Mackinnon Centre has been inspected – final report is awaited
- Mental Welfare Commission Visit to Kingsway Care Centre. Very positive feedback.
- Care Inspectorate Gradings – Registered Care Homes Report presented with continuous improvement activities across the year noted

4.3.4 30 October 2019

Clinical, Care and Professional Governance Exception Reporting

- No new service reports presented
- Noted update report from Integrated Substance Misuse Service
- Noted Update report from Mental Health Services
- Noted update report from Community Nursing Service

GIRFE Update

- Working Group reviewing framework – those present agreed to provide feedback to take into the group. Noted a workshop is planned for wider consultation.

Primary Governance Group Development

- Terms of Reference presented, feedback requested from group

Duty of Candour Report

- The submitted report was noted and it was agreed further work was required to ensure a fully integrated report across the full remit of the Partnership.

Mandatory Training

- Noted some teams were finding maintenance of mandatory training a challenge. Group agreed for this to be monitored through the Forum, with exceptions reported back to the group as required.

Adverse Events, Duty of Candour and LAERs Report

- Report noted and work highlighted to manage number of overdue red events
- Learning shared with the group from adverse events

Service Risks Report

- Report noted. No questions raised.
- Work continues to progress risk management on a single platform

Complaints Report

- Noted increase in complaints received.
- Noted further work required to manage complaints within required timeframe.
- Noted SPSO report within complaints report.

Inspection Report – Mackinnon Centre

- Report noted. Clarification about levels of supervision sought.

Primary Governance Groups Exception Report

- Noted exceptions from each service

Noted NHS Tayside Infection Prevention and Control Committee Minute

4.3.5 4 December 2019

Clinical, Care and Professional Governance Exception Reporting

- Noted report from Integrated substance misuse service
- Noted report from Menzieshill House Care Home

Hosting Arrangements

- Requirement for comprehensive reporting for Hosted services noted across three HSCP areas

Standards on Healthcare Associated Infections on Antibiotic Use

- Presented to the group
- Agreed further clarification with infection control required

Risk Register Review

- Number of risks agreed to be archived

iMatter Report

- Report reviewed across HSCP. Actions noted for managers.

Presentation of Impact of Oral Nutritional Support Redesign, NHS Tayside

- Hugely positive outcomes noted by the group
- Discussion within Group regarding enhanced methods to support this domain
- Senior Officer, Health Improvement Commissioning to be invited to future meeting to support further discussion

4.3.6 6 February 2020

Clinical, Care and Professional Governance Exception Reporting

- Health and Work Support Presentation noted
- Reviewed reporting schedule to ensure all Primary Governance Groups report exceptions at each CCPG Group
- High Risk Concern Services to provide comprehensive update report:
 - Integrated Substance Misuse Service
 - Mental Health Services
 - Psychology Service
- Emerging issues:
 - 24 Hour cover at RVH
 - RVH Environment
 - Delay of Reshaping Non-Acute Care

GIRFE Workshop Feedback

- Noted output from this excellent session with particular reference to Chief Auditor T Gaskin's very positive contribution
- Ongoing support for Framework review agreed

Perth & Kinross HSCP Inspection Report

- Group noted this report and ensured system-wide learning and developments pertinent to the DHSCP

General Data Protection Regulation Report

- No report provided due to long term sickness absence

Safe Staffing Bill

- Presentation provided

Red Datix Events and Local Adverse Event Review Report

- Noted changes to Datix reporting nationally
- Managers requested to focus on overdue events

Service Risk Report

- Report noted and discussed
- Concerns raised in relation to recording of mitigation of risks, managers to address

Large Scale Investigation Report

- Report noted following closure of Home with learning shared with colleagues

Listening Service Annual Report

- Group noted good example of integrated working and reporting

Care Home Inspection Reports

- Group noted new framework implemented over past year
- Group noted very positive outcomes for Dundee Care Homes

Infection Control Report

- Report and action plan for next 12 months noted

4.4 Assurance Statement

4.4.1 As Chair of the Dundee HSCP Clinical, Care and Professional Governance Group during the financial year 2019-2020, I am satisfied that the integrated approach, the frequency of meetings, the breadth of the business undertaken and the range of attendees at meetings has supported the fulfilment of the Group's objectives and responsibilities.

4.4.2 I would like to offer my thanks to the commitment and dedication of fellow members of the Group. Significant work goes into the preparation of the written reports and I am grateful to all those who have attended and contributed to each of the meetings.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

6.0 RISK ASSESSMENT

Risk 1 Description	The risk of not providing sufficient assurance through governance assurance routes will reduce confidence in the ability of the HSCP to deliver safe, quality care.
Risk Category	Governance
Inherent Risk Level	Likelihood (2) x Impact (4) = Risk Scoring (8)
Mitigating Actions (including timescales and resources)	Systems in place for all operational teams to provide exception reports to the clinical, care and professional governance group. 'Getting It Right' Group established to support development of reporting framework for HSCP.
Residual Risk Level	Likelihood (2) x Impact (4) = Risk Scoring (8)
Planned Risk Level	Likelihood (1) x Impact (3) = Risk Scoring (3)
Approval recommendation	The risk level should be accepted with the expectation that the mitigating actions are taken forward.

7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Finance Officer, Clerk and the Lead Nurse were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

8.1 None.

David Shaw
Clinical Director

DATE: 11.09.2020

Diane McCulloch
Chief Social Work Officer/Head of Health and Community Care

Matthew Kendall
Lead AHP