

Thursday 27th August 2020

Clinical and Care Governance Report

Item number: 5.8

Executive summary

The purpose of this report is to provide assurance to Midlothian Integrated Joint Board as to the clinical and care governance arrangements within Midlothian. It will highlight good practice and identify any emerging issues or risks.

Additional reports will be attached as appropriate throughout the year to provide updated information from specific service areas.

Board members are asked to:

- Note and approve the content of this report
 - Note the proposed development of a clinical and care governance dashboard
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Clinical and Care Governance Report

1 Purpose

- 1.1 This is the Clinical and Care Governance report for Midlothian IJB.

2 Recommendations

- 2.1 As a result of this report Members are being asked to:
- Note and approve the content of this report
 - Note the proposed development of a clinical and care governance dashboard

3 Background and main report

- 3.1 Due to the challenges the current pandemic has presented, there was a delay in getting meetings started. Bi-monthly meetings have restarted using Microsoft Teams to comply with physical distancing recommendations.
- 3.2 Service leads and managers attended a meeting of the Midlothian Clinical and Care Governance Group on Tuesday 7th July.
- 3.3 Membership was reviewed and a gap identified. Pharmacy colleagues have been invited to attend regular meetings.
- 3.4 Service Managers are progressing the Quality Improvement Teams they lead for their areas and beginning to report on improvement work taking place.
- 3.5 Quality Improvement Teams are beginning to meet again and develop programmes of work to measure and improve standards. This includes a patient feedback audit for a number of services. Draft Tool attached.
- 3.6 Healthcare Improvement Scotland has commenced a programme of inspections across community hospitals in Scotland. These are unannounced inspections. Local HSCP inspection walk-around programmes are in place
- 3.7 A regular audit of Health Visiting Universal pathway requirements is carried out across Lothian. This information is used to target areas for local improvement which will be led by the Team Managers. Midlothian is doing very well in most areas of the pathway. Report attached (appendix 3). Plans are in place to address areas for improvement.
- 3.8 As previously reported a Clinical and Care Governance performance dashboard will be developed showing Team Managers/Senior Charge Nurses, Service Managers/Clinical Nurse Managers and Heads of Service/Professional Leads a summary/overview of agreed reports in one screen. This is being supported locally but is reliant on some similar developments for other services.

- 3.9 One area where improvement is required is the response times to review and sign off of investigations following incidents or complaints. A local process was agreed and has been reinforced with all Service Leads and Managers. Process attached for interest. A new monthly meeting has been set up to commission and review our outstanding Drug Related Deaths and Suicide Reviews in a bid to improve our response times. It is important to note that some delays are out with our control as are due to reviews by others areas or reports awaited from external organisations. (e.g. Procurator Fiscal)
- 3.10 Mechanisms have been put in place to support Midlothian care homes in response to Scottish Government legislative change holding Executive Nurse Directors responsible for standards of care. These supports provide assurance and include: Daily feedback from care homes; Weekly teleconference; Expanded Care Home Support Team (CHST); Daily contact from CHST; Weekly care reviews (CHST); Daily (Mon-Fri) Rapid run down of all care homes, with an extended care assurance meeting every Thursday.

4 Policy Implications

- 4.1 This report should provide assurance to the IJB that relevant clinical and care policies are being appropriately implemented in Midlothian.

5 Directions

- 5.1 Clinical and Care Governance is implicit in various Directions that relate to the delivery of care.

6 Equalities Implications

- 6.1 Any equalities implications will be addressed by service managers as they arise. There are no specific policy implications arising from this report.

7 Resource Implications

- 7.1 Any resource implications will be identified by managers as part of service development, and this may at times be required to ensure good clinical and care governance arrangements. There exists an expectation of staff time to attend the Clinical and Care Governance Meeting and ensure this work is embedded in local areas/teams.

8 Risk

- 8.1 This report is intended to keep the IJB informed of local governance arrangements and any related risks and to provide assurance to members around continuous improvement and monitoring.
- 8.2 All risks associated with the delivery of services are monitored by managers and where appropriate they are reflected in the risk register.

9 Involving people

- 9.1 Midlothian staff will be involved in the development and ongoing monitoring of processes related to clinical and care governance.
- 9.2 Public representatives on the IJB will have an opportunity to provide feedback and ideas.

10 Background Papers

10.1

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Appendices:

Appendix 1 – Child Health Data Quality Report June 2020