



# Item No: 18

Meeting Date: Wednesday 15<sup>th</sup> March 2017

## Glasgow City Integration Joint Board

**Report By:** Susanne Millar, Chief Officer Strategy, Planning & Commissioning / Chief Social Work Officer

**Contact:** David Williams

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### QUARTERLY CLINICAL AND PROFESSIONAL ASSURANCE STATEMENT

<b>Purpose of Report:</b>	To provide the Integration Joint Board with a quarterly clinical and professional assurance statement.
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<b>Recommendations:</b>	The Integration Joint Board is asked to:  a) consider and note the report.
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#### Relevance to Integration Joint Board Strategic Plan:

Evidence of the quality assurance and professional oversight applied to health and social care services delivery and development as outlined throughout the strategic plan.

#### Implications for Health and Social Care Partnership:

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	Contributes to: <b>Outcome 7.</b> People using health and social care services are safe from harm <b>Outcome 9.</b> Resources are used effectively and efficiently in the provision of health and social care services
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<b>Personnel:</b>	None
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<b>Carers:</b>	Offers assurance to carers that quality assurance and professional and clinical oversight is being applied to the
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	people they care for when using health and social care services	
<b>Provider Organisations:</b>	No impact on purchased clinical/social care provider services.	
<b>Equalities:</b>	None	
<b>Financial:</b>	None	
<b>Legal:</b>	This report contributes to the Integration Joint Board's duty to have clinical and professional oversight for its delegated functions.	
<b>Economic Impact:</b>	None	
<b>Sustainability:</b>	None	
<b>Sustainable Procurement and Article 19:</b>	None	
<b>Risk Implications:</b>	None	
<b>Implications for Glasgow City Council:</b>	The report provides assurance on professional governance.	
<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	The report provides assurance on clinical governance.	
<b>Direction Required to Council, Health Board or Both</b>	Direction to:	
	1. No Direction Required	✓
	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	

## 1. Purpose of Report

- 1.1 To provide the Integration Joint Board with a quarterly clinical and professional assurance statement.

## 2. Background

2.1 The Integration Joint Board previously considered and approved in June 2016 a statement format for the provision of specific and routine information with which the Integration Joint Board can be assured that clinical and professional governance is being effectively overseen by the Integrated Clinical Governance Board, chaired by the Chief Officer. The report can be found at the following link:

<https://www.glasgow.gov.uk/CHttpHandler.ashx?id=33913&p=0>

2.2 Two subsequent quarterly clinical and professional assurance statements were provided to the IJB in September and December 2016; the reports can be found at the following links:

September Statement – information to August 2016

<https://www.glasgow.gov.uk/CHttpHandler.ashx?id=35341&p=0>

December Statement – information up to 30<sup>th</sup> September 2016

<https://www.glasgow.gov.uk/CHttpHandler.ashx?id=36176&p=0>

2.3 This report provides the IJB with the same information as previously agreed albeit the information is presented differently with the key information collated up to 31<sup>st</sup> December 2017 within the attached table at Appendix1, allowing for easier scrutiny of the information. This approach will allow for more qualitative discourse to be contained within the cover report, on issues related to particular incidents and cases, as appropriate.

## 3. Clinical and Professional Assurance Statement

3.1 There were a number of significant clinical incidents that concluded during the quarter. However a number of these are still going through governance processes for example to agree process of dissemination of a Significant Case Review signed off by Child Protection Committee, or are being held in abeyance due to involvement of the Procurator Fiscal. It is anticipated that the quarter 4 assurance statement to the Integration Joint Board will feature an update on one, or more, of the concluded Significant Case Reviews and/or Significant Clinical Incidents, focussing on the learning points.

### 3.2 *Workforce Registration*

In Homelessness Services it can be confirmed that all staff are either now registered or will be registered by the deadline of 30<sup>th</sup> June 2017. Within Older People Services four staff unable to undertake the full range of duties due to non-registration. One contract was terminated with HR and Service Managers monitoring the other three. No other workforce registration issues within the quarter.

### 3.3 *Purchased Clinical/Social Care Provider Services*

In Homelessness Services the timescales and routes for reporting incidents has been variable and is currently being worked on by the Commissioners, with reporting now showing an improvement.

No other issues identified within purchased services within the quarter.

### 3.4 *Healthcare Associated Infection*

There have been no significant healthcare associated infection (HAI) issues within the reporting time frame. The new system to monitor Standard Infection & Prevention Standards (SIPS) compliance has been implemented. This updated system complements the cleaning and environmental standard audits that are part of the suite of assurance measures in place. The 2016 National HAI Point Prevalence Survey has been concluded with a 0% Healthcare Associated Infection rate for Glasgow City HSCP in-patient services.

3.5 The agenda for the HSCP Integrated Clinical and Professional Governance Group, held on 6<sup>th</sup> December 2016 is attached at Appendix 2. The group provided further scrutiny to the minutes/reports from the:

- Social Work Professional Governance Sub Group
- Children & Families / Criminal Justice Clinical and Care Governance Leadership Group
- Older People & Primary Care Clinical and care Governance Leadership Group
- Mental Health Quality & Clinical Governance Committee
- Police Custody Healthcare Clinical Governance Committee
- Prison Healthcare Clinical Governance Committee
- Homelessness Care Governance Group
- Sandyford Governance Group

3.6 Work is ongoing to review the various reports and reporting processes in respect of Significant Case Reviews and Significant Clinical Incidents, with a bespoke clinical report being developed and provided to the HSCP on a quarterly basis from NHSGGC that will further inform the detail provided in future within this assurance statement to the Integration Joint Board.

#### **4. Recommendations**

4.1 The Integration Joint Board is asked to:

- a) consider and note the report.

<b>Adult Services</b>	
<b>Homelessness</b>	
Number of Significant Case Reviews currently ongoing	3
Number of Significant Clinical Incidents currently ongoing	0
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	0
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	0
Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Not applicable
Workforce registration issues identified during the quarter	All staff either registered or will be registered by 30th June 2017.
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response	<p>Ensuring temporary furnished accommodation is occupied ensuring welfare checks are completed regularly, review of Housing Support is ongoing, improving communication between other care groups and homelessness re service user welfare and health and safety, improving the quality of case note recording.</p> <p>As part of the winter initiative for vulnerable homeless people flats where checked for occupation and welfare, the Review of Commissioned Housing Support has been completed by the HSCP and a new proactive outreach model has been adopted under direct management of HSCP localities.</p>
Issues highlighted in purchased clinical/social care provider services and HSCP response	Variable timescales in reporting serious incidents; routes for reporting also vary and is being worked on with Commissioners, with reporting beginning to improve.
<b>Disability</b>	
No activity to report	
<b>Addictions</b>	
Number of Significant Care Reviews currently ongoing	0
Number of Significant Clinical Incidents currently ongoing	6
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	1
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	0

Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Not applicable
Workforce registration issues identified during the quarter	None
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response	<b>Kershaw Unit</b> Squirrel infestation (eating wires in roof) Flooding issues Vinyl issues All issues being addressed by senior management.
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None

Older People Services	
Number of Significant Clinical Incidents	2
Number of Significant Clinical Incidents currently ongoing	1
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	1
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	0
Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Not applicable
Workforce registration issues identified during the quarter	Four staff unable to undertake full range of duties due to non-registration. One contract terminated; HR and Service Managers monitoring other three.
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response	None
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None

Children and Families Services	
Number of Significant Case Reviews currently ongoing	1 Significant Case Review concluded but not officially signed off by Child Protection Committee due to Procurator Fiscal involvement
Number of Significant Clinical Incidents/Significant Case Reviews commenced during the quarter	1 Significant Clinical Incident
Number of Significant Case Reviews concluded during the quarter	1 Significant Case Review officially signed off by Child Protection Committee on 12 December 2016

Summary of learning points from concluded Significant Case Reviews and cascade routes	Confirmation of learning points and clarification of process of dissemination of Significant Case Review learning currently with the Child Protection Committee and the Quality Assurance Sub Group for sign off.
Workforce registration issues identified during the quarter	None
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None

<b>Criminal Justice Services</b>	
Number of MAPPA Significant Case Reviews currently ongoing	0
Number of MAPPA Significant Case Reviews commenced during the quarter	0
Number of MAPPA Significant Case Reviews concluded during the quarter	0
Summary of learning points from concluded Significant Case Reviews and cascade routes	Not applicable
Number of Initial Report Forms received and decision of Significant Oversight Group chair not to proceed to a Significant Case Review	5 notifiable incidents were reported through the Initial Case Report process during this quarter. 4 related to reoffending by Registered Sex Offenders but where no multi-agency learning was identified, and the 4th was the sudden death of a restricted patient.
Workforce registration issues identified during the quarter	None
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None

<b>Mental Health Services</b>	
Number of Significant Case Reviews currently ongoing	0
Number of Significant Clinical Incidents currently ongoing	30
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	8 Significant Clinical Incidents
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	12 Significant Clinical Incidents

Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Recommendations and arrangements for shared learning are produced following each Significant Clinical Incident. All recommendations and actions are logged and are followed up by the Clinical Risk team with the appropriate service at 3 months and 6 months to ensure progress has been made. If after this timescale the recommendation is still outstanding, the issue will be highlighted to the appropriate Directorate management structure.
Workforce registration issues identified during the quarter	None
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response and learning from this	None
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None

<b>Hosted Services</b>	
<b>Prison Healthcare</b>	
Number of Significant Case Reviews currently ongoing	0
Number of Significant Clinical Incidents currently ongoing	4
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	4
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	1
Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Prescription Kardexs from other Health Boards require to be reviewed and re written when patients are transferred. GPs & Health Care Managers informed.
Workforce registration issues identified during the quarter	None
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response and learning from this	None
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None
<b>Police Custody Healthcare Service</b>	
No activity to report	
<b>Sandyford Services</b>	
No activity to report	



**2.30pm on Tuesday, 6<sup>th</sup> December 2016 in the  
Triathlon Room, Commonwealth House,  
32 Albion Street, Glasgow G1 1LH**

**AGENDA**

	<b>Enclosure</b>
<b>1. Apologies for Absence</b> Pauline McGough and Annie Hair	
<b>2. Minutes of the Previous Meeting</b>  To approve the minutes of the meeting held on 6 <sup>th</sup> September 2016.	03 GHSCP IGG(M) 06/09/16
<b>3. Governance Group Minutes/Reports</b>	
(a) Social Work Professional Governance Sub Group	Paper 2016/037
(b) Children & Families / Criminal Justice Clinical & Care Governance Leadership Group	Paper 2016/038
(c) Older People & Primary Care Clinical & Care Governance Leadership Group	Paper 2016/039
(d) Mental Health Quality & Clinical Governance Committee	Paper 2016/040
(e) Police Custody Healthcare Clinical Governance Committee	Paper 2016/041
(f) Prison Healthcare Clinical Governance Committee	Paper 2016/042
(g) Homelessness Care Governance Group	Paper 2016/043
(h) Sandyford Governance Group	Paper 2016/044
<b>4. Scrutiny / Assurance Statement</b>  To review the assurance statement for the IJB	Paper 2016/045
<b>5. SCR and Critical Incident Reporting</b>	
a) Update on HSCP Review ( S Morrison)	Verbal
b) NHS GG&C Review of the Management of Significant Clinical Incidents Policy	Paper 2016/046
<b>6. Adults with Incapacity Supervisory Body (NHS GG&amp;C) - Report</b>  To note the Annual Report produced by the Adults with Incapacity (AWI) Supervisory Body (NHS GG&C) covering the discharge of its obligations under Part 4 of the AWI (Scotland) Act 2000 (2000 Act). (M Smith)	Paper 2016/047

**7. Mental Welfare Commission (MWC) – End of Year Meeting with NHS GG&C and Partner HSCPs**

Feedback from End of Year Meeting with MWC (M Smith)

Paper 2016/048

**8. Next Meeting**

**Schedule of Meeting Dates 2017**

Tuesday 21<sup>st</sup> February 2017

Tuesday 16<sup>th</sup> May 2017

Tuesday 15<sup>th</sup> August 2017

Tuesday 21<sup>st</sup> November 2017

**All Meetings 2.30 p.m. – 4.30 p.m. in the Triathlon Room,  
Commonwealth House**