

Item No: 5

Meeting Date: Tuesday 12th December 2017

Glasgow City Integration Joint Board Performance Scrutiny Committee

Report By: Susanne Millar, Chief Officer, Strategy & Operations /

Chief Social Work Officer

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Protection (Adult Services)

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CLINICAL AND PROFESSIONAL QUARTERLY ASSURANCE STATEMENT

Purpose of Report:	To provide the IJB Performance Scrutiny Committee with a quarterly clinical and professional assurance statement.
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Background/Engagement:	The quarterly assurance statement is a summary of information that has been provided to, and subject to the scrutiny of the appropriate governance forum.
	The outcome of any learning from the issues highlighted will then be taken back into relevant staff groups.
Recommendations:	The IJB Performance Scrutiny Committee is asked to:
	a) consider and note the report.

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: Reference to National Contributes to: Health & Wellbeing Outcome 7. People using health and social care services Outcome: are safe from harm Outcome 9. Resources are used effectively and efficiently in the provision of health and social care services Personnel: None Carers: Offers assurance to carers that quality assurance and professional and clinical oversight is being applied to the people they care for when using health and social care services **Provider Organisations:** No impact on purchased clinical/social care provider services. **Equalities:** None Financial: None This report contributes to the Integration Joint Board's Legal: duty to have clinical and professional oversight of its delegated functions. **Economic Impact:** None Sustainability: None **Sustainable Procurement** None and Article 19: **Risk Implications:** None

City Council: governance.

Implications for NHS The report provides assurance on clinical governance.

The report provides assurance on professional

Implications for Glasgow

Greater Glasgow & Clyde:

1. Purpose of Report

1.1 To provide the IJB Performance Scrutiny Committee 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 and Professional Governance Board, chaired by the Chief Officer. The report can be found at the following link: https://glasgowcity.hscp.scot/publication/item-no14-clinical-professional-assurance-statement
- 2.2 Subsequent quarterly clinical and professional assurance statements were provided to the IJB in September and December 2016; March and June and September 2017.

September 2016

Statement https://glasgowcity.hscp.scot/sites/default/files/publications/IJB_Meeting_20160921_Item_20.pdf

December 2016 Statement

https://glasgowcity.hscp.scot/sites/default/files/publications/IJB 09 12 2016 Item_No 20 - Quarterly Clinical and Professional Assurance Statement.pdf

March 2017 Statement

https://glasgowcity.hscp.scot/sites/default/files/publications/IJB_Meeting_20170315_ltem_18.pdf

June 2017 Statement

https://glasgowcity.hscp.scot/sites/default/files/publications/21 June ITEM No 25 - Quarterly Clinical and Professional Governance Assurance Statement.pdf

September 2017 Statement

https://glasgowcity.hscp.scot/publication/item-no-26-quarterly-clinical-and-professional-governance-assurance-statement

2.3 This report provides the IJB Performance Scrutiny Committee with the information as agreed within the June 2016 report. Since March the statements have been presented slightly differently. The format continues to be reviewed with the key information collated up to September 2017 attached in a separate Appendix (Appendix1) to allow for easier scrutiny. This cover report provides an opportunity to offer more detail on issues related to particular incidents and cases.

3. Clinical and Professional Governance Statement

- 3.1 As previously reported, the Integrated Joint Governance Board considered a report regarding the status of reporting Critical and Significant Incidents within the HSCP. It identified that although significant progress has been made, there remain some gaps and inconsistencies in reporting. In noting that some areas of activity could be more visibly reported to the IJB e.g. the number of Adult Support and Protection Large Scale Investigations ongoing or completed, or the activity relating to deescalating incidents of aggression within residential and ward settings relevant to the IJB. It was noted that this information is reported within other Governance structures within the HSCP.
- 3.2 Further work is underway with regard to highlighting the Significant Clinical Incident (SCI)/Clinical Incident Review (CIR) processes of the HSCP and this will subsequently be reported to the Performance Scrutiny Committee. Whether further information is to be regularly provided within the quarterly Quality Assurance Statement remains under consideration.

4. Significant Case Reviews

- 4.1 As noted previously a Child Protection Significant Case Review (SCR) previously signed off by the Child Protection Committee (CPC) was made public in June by placing an Executive Summary Report on the CPC website. No press or media interest has so far followed. The learning from this case has been disseminated via the agreed Child Protection SCR dissemination process, specifically through standard presentations at locality Local Management Reviews (LMRs) in September/October 2017.
- 4.2 Further work has been initiated with regard to a Child Protection SCR undertaken in 2015/16. The learning from this case cannot yet be shared due to the ongoing criminal case. Significant concern has been raised by the Chief Social Work Officer in relation to the delay in this case.
- 4.3 It has been agreed that the child fatality highlighted in the September Quarterly Assurance Report will be subject to an SCR. Lead investigators have been identified and the scoping of the SCR will be completed within the next two months. This investigation cannot proceed until further negotiation with the Procurator Fiscal has concluded.
- 4.4. An Adult Support and Protection case has been considered through the Independent Case Review (ICR) process. This will also proceed to an SCR. The scoping and investigation process has still to be finalised.

5. Assurance Areas

5.1 Workforce Registration

Workforce registration issues, including conduct and fitness to practice information are reported to the relevant Governance groups. Where necessary detail is also

provided to the Integrated Clinical and Professional Governance Board. There are currently no outstanding workforce registration issues.

5.2 Purchased Clinical/Social Care Provider Services

As noted above, some gaps in reporting have been identified, and the visibility of the number and nature of CIRs and/or SCIs within purchased clinical and social care providers for the HSCP is one of these areas. Further work is being undertaken following an audit of contract management arrangements and further detail on the outcome of this work will be reported to the relevant IJB committee in due course.

5.3 Healthcare Associated Infection

There have been no significant healthcare associated infection (HAI) issues within the reporting time frame.

5.4 Integrated Clinical and Professional Governance Board

The agenda for the HSCP Integrated Clinical and Professional Governance Group, held on 21st November 2017 is attached (Appendix 2). The group provided further scrutiny of the minutes from:

- 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
- 5.5 The HSCP, through the Integrated Clinical and Professional Governance Board, and the other Governance forums, continues to emphasise the need to embed a reflective, quality assurance expectation within all sections of the HSCP.

6. Recommendations

- 6.1 The IJB Performance and Scrutiny Committee is asked to:
 - a) consider and note the report.

Adult Services				
Homelessness				
Number of Significant Case Reviews currently ongoing	0			
Number of Significant Clinical Incidents currently ongoing	2 (1 lead by MH & 1 by Addictions)			
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	There is significant work ongoing in this area. The Homelessness governance group is concerned by the number of SCIs and the nature of them and is undertaking more work to analyse and assess			
Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Learning events have been held across the city for relevant staff during July. Follow up audit work is under consideration.			
Workforce registration issues identified during the quarter	All staff are registered			
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response	None identified.			
Issues highlighted in purchased clinical/social care provider services and HSCP response	Under continued consideration.			
Disabili	ty			
No repo	ort			
Addictio	ns			
Number of Significant Case Reviews currently ongoing	0			
Number of Significant Clinical Incidents currently ongoing	6			
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter				
The results of the control of the co	3			
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	Learning points are highlighted through the appropriate Governance grouping.			
Workforce registration issues identified during the quarter	None reported			
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response	None reported			
Issues highlighted in purchased clinical/social care				
provider services and HSCP response to this				

Older People Services		
Number of Significant Case Reviews Currently Ongoing	1 AS&P ICR has been agreed to progress to SCR.	
Number of Significant Clinical Incidents currently		
ongoing	5	
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	2	
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	2	
Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	CIR's investigated at locality and in city wide services are reported into the Older People Primary Care Governance Group. Action Plans are presented and reviewed there.	
Workforce registration issues identified during the quarter	None reported	
Any patient safety/ infection control issues identified in the quarter. If yes note HSCP response	None reported	
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	No specific issues highlighted	

Children and Families Services		
Number of Significant Case Reviews currently ongoing	2	
Number of Significant Clinical Incidents/Significant Case Reviews commenced during the quarter	1 (as previously reported. An SCR has now been initiated)	
Number of Significant Case Reviews concluded during the quarter	0	
Summary of learning points from concluded Significant Case Reviews and cascade routes	SCR dissemination of learning protocol is agreed and cascade routes identified.	
Workforce registration issues identified during the quarter	None reported	
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	Information format in development	

Criminal Justice Services		
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	MAPPA Strategic Oversight Group considers potential for learning and identifies cascade routes.	

Number of Initial Report Forms received and decision of	
Significant Oversight Group chair not to proceed to a	
Significant Case Review	7
Workforce registration issues identified during the	
quarter	0
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	Information format for this detail under review.

Mental Health Services		
Number of Significant Case Reviews currently ongoing	0	
Number of Significant Clinical Incidents currently ongoing	19	
Number of Significant Clinical Incidents / Significant Case Reviews commenced during the quarter	5	
Number of Significant Clinical Incidents / Significant Case Reviews concluded during the quarter	7	
Summary of learning points from concluded Significant Clinical Incidents / Significant Case Reviews and cascade routes	Learning points highlighted in appropriate governance forum	
Workforce registration issues identified during the quarter	None reported	
Any patient safety/infection control issues identified in the quarter. If yes note HSCP response and learning from this	None reported	
Issues highlighted in purchased clinical/social care provider services and HSCP response to this	None reported	

GLASGOW CITY HEALTH & SOCIAL CARE PARTNERSHIP Integrated Clinical and Professional Governance Group

2.00pm on Tuesday, 21st November 2017 in the Triathlon Room, Commonwealth House, 32 Albion Street, Glasgow G1 1LH

AGENDA

		Enclosure
1.	Apologies for Absence M Smith, G Agnew, S Millar, P McGough, R Groden and E Love	
2.	Minutes of the Previous Meeting	
	To approve the minutes of the meeting held on 15 th August 2017.	03 GHSCP IGG(M) 15/08/17
3.	Matters Arising	
4.	Governance Group Minutes/Reports	
	(a) Social Work Professional Governance Sub Group	Paper
	(b) Children & Families / Criminal Justice Clinical & Care Governance Leadership Group	Paper
	(c) Older People & Primary Care Clinical & Care Governance Leadership Group	Paper
	(d) Mental Health Quality & Clinical Governance Committee	Paper
	(e) Police Custody Healthcare Clinical Governance Committee	Paper
	(f) Prison Healthcare Clinical Governance Committee	Verbal
	(g) Homelessness Care Governance Group	Verbal
	(h) Sandyford Governance Group	Paper
5.	Quarterly Clinical & Professional Assurance Statement	Paper
6.	SCR and Critical Incident Reporting	
	Update on HSCP Review (S Morrison)	Verbal
7.	Review of Stair climber provision	Paper
8.	Scottish Government's Health and Sport Committee Inquiry into NHS Governance – Invitation to Give Evidence	Paper

9. Mental Welfare Commission - Reports & Responses

(a) National Themed Visit - Adult Acute Wards

Paper

(b) Themed Visit – Homeless People with Mental III Health

Paper

(c) Local Visit Reports

Paper

10. Next Meeting

Schedule of Meeting Dates 2018

All Meetings 2.00 p.m. – 4.00 p.m. in Commonwealth House

Tuesday 20th February (Triathlon Room)

Tuesday 15th May (Triathlon Room)

Tuesday 14th August (Boardroom) Tuesday 20th November 2017 (Triathlon Room)