



**Meeting:** Health & Social Care Committee  
**Meeting date:** 1<sup>st</sup> November 2023  
**Title:** Social Care Governance  
**Responsible Executive/Non-Executive:** Pam Cremin, Chief Officer  
**Report Author:** Ruth MacDonald, Interim Deputy Director Adult Social Care  
 Dr Claire Copeland, Deputy Medical Director

**1 Purpose**

**This is presented to the Board for:**

- Assurance

**This report relates to a:**

- Legal requirement

**This report will align to the following NHSScotland quality ambition(s):**

Safe, Effective and Person Centred

**This report relates to the following Strategic Outcome(s)**

Start Well	Thrive Well	Stay Well	Anchor Well
Grow Well	Listen Well	Nurture Well	Plan Well
Care Well	Live Well	Respond Well	Treat Well
Journey Well	Age Well	End Well	Value Well
Perform well	Progress well		

**2 Report summary**

**2.1 Situation**

To update stakeholders on risks, actions undertaken and future planning to ensure that there are robust governance processes in place for the Partnership that can be used purposefully for audit, action and development.

## 2.2 Background

It has been recognised that governance in its broadest terms jointly across health, social work and social care can be problematic to streamline. This has been recognised by Integrated Joint Board's (IJB) across Scotland and has been an unresolved issue for the Highland Health and Social Care Partnership.

During 2023 there has been specific work undertaken to understand the extent of the issue and to work towards potential improved ways of working to have robust processes in place. This SBAR relates to the work required for the social work and social care elements of the Partnership to be aligned with other areas of service delivery.

The work has been defined as the following areas;

1. NHS Processes
2. Interface with other established processes
3. Internal and external recommendations
4. Professional Practice competence and continuous improvement
5. Workforce
6. Social Care resource availability – internal and external
7. Risk Assessment

## 2.3 Assessment

Ruth MacDonald – Interim Deputy Director Adult Social Care (ASC), Dr Claire Copeland – Deputy Medical Director and Mirian Morrison – Clinical Governance (CG) Manager, along with other team members have worked to develop an action plan in relation to the key areas with some actions well underway.

### NHS Processes

- A specific social work and social care dashboard has been created and the first report will be available at September 2023 month end.
- The Datix system is under review, with some changes already in place to ensure is relevant for social work and social care reporting. Worked examples are being added to the system to audit any changes and further adaptations are made as required.
- Monthly meetings between DD ASC & CG Team Lead to work through any live issues.

### Interface with other established processes

- Adult Protection (AP) Principal Officer is working to create processes to ensure flow between AP Committee and Clinical Governance.

### Internal and External Recommendations

- Consideration is ongoing in relation to linking action plans developed as a result of eg Care Inspectorate (CI) or SPSO (Ombudsman) recommendations are built into reporting dashboards.

Professional Practice competence and continuous improvement

- Agenda for Change for all social work team staff is now complete and there is a single management and professional structure for all staff to an 8a Team Manager level.

Workforce

- Links have been made with workforce planning and Districts in relation to clearly documenting the current establishment for social work and social care teams employed by NHS Highland.

Social Care Resource Availability

- Adult Social Work & Social Care Leadership team are working to understand data available and areas of knowledge gap before linking to build onto single dashboard.

Risk Assessment

- This has been a gap in practice for Social Workers and other integrated team professionals since the introduction of the Personal Outcome Plan. A working tool is being adapted from another authority for testing in Highland.

**2.4 Proposed level of Assurance**

Substantial	<input type="checkbox"/>	Moderate	<input checked="" type="checkbox"/>
Limited	<input type="checkbox"/>	None	<input type="checkbox"/>

**Comment on the level of assurance**

While there have been areas of progress over the past 3 months it is important to note that the level of work required to have a whole system approach that is fit for purpose in place is significant and requires dedicated time from leadership teams to develop. There is a commitment to take this forward as a priority area of work and report directly to Joint Officer Group.

A final and significant area for consideration is the requirement to work with NHS Highland and Highland Council to achieve the required culture change. Governance is still referred to as clinical in NHS Highland, references on papers, social media posting, language by execs reaffirm that this is seen as a health process. Each person working in governance has a responsibility to work to change the narrative to ensure that social work and social care are given due consideration in any agreed future processes.

**3 Impact Analysis**

**3.1 Quality/ Patient Care**

This will improve overall quality and person centredness by embedding this process into the HSCP Quality, Patient Safety framework.

**3.2 Workforce**

As commented above, there will need to be a cultural shift in how we think about Adult Social Care and Work in the context of Health.

**3.3 Financial**  
N/A

**3.4 Risk Assessment/Management**

**3.5 Data Protection**

**3.6 Equality and Diversity, including health inequalities**  
N/A

**3.7 Other impacts**

**3.8 Communication, involvement, engagement and consultation**

This work has been led by Ruth MacDonald, Claire Copeland and Mirian Morrison.  
It has been shared with a wider stakeholder group via the HSCP QPS membership and Senior Leadership Team (SLT).

**3.9 Route to the Meeting**

**4 Recommendation**

- Assurance

**4.1 List of appendices**

The following appendices are included with this report:

- Action Tracker update
- Dashboard Care Homes

**Action Tracker – Care and Practice Governance**

**Project Leads:**

**Project Sponsors:**

<u>Date of Action</u>	<u>Action Number</u>	<u>Action</u>	<u>Lead</u>	<u>Progress/Comments</u>	<u>Date Completed</u>
	1	<b>NHS Processes</b>			
	1a	Ensure that the Datix system allows for the appropriate reporting fields for social work and social care, then to ensure the correct permissions are in place for professional leadership to review.	Ruth MacD Mirian Morrison	<ul style="list-style-type: none"> <li>• Testing of adding social work adverse events to Datix w/c 18/09 – Claire Watt</li> <li>• ‘Adult Protection’ tick box added to reporting form. To include link to refer to Nominated Officer for Health/ relevant SW Team. Weekly report to be sent to Principal Officers for a 4 week cycle to build assess and agree final process.</li> </ul>	
	1b	To have compliance from social work and social care teams once the system is more intuitive for this staff group a suite of training along with instruction will be reissued.	Ruth MacD	<ul style="list-style-type: none"> <li>• Training for all social work team managers and seniors once system has been revised. – Claire Watt/ CG Team</li> <li>• Assurance that all training is up to date for all social care managers. – Jackie Hodges/ CG Team</li> </ul>	
	1c	Regular meeting between clinical governance team lead and ASW & SC to embed practice principles to team culture.	Ruth MacD Mirian Morrison	<ul style="list-style-type: none"> <li>• Monthly meeting in diary to work through live issues and to assess how these fit into processes being built.</li> </ul>	
	1d	Develop process and associated actions that relate to adverse events that happen within services that are commissioned but not delivered by NHH staff.	Ruth MacD/ Claire Copeland/ Mirian Morrison	<ul style="list-style-type: none"> <li>• To be developed through test of change by logging incidents on Datix and using worked examples.</li> <li>• To link with head of contracts and commissioning to ensure working within contract requirements.</li> </ul>	
	1e	Review current governance structure and agree what social work and social care membership is required at each point.	Fiona Duncan/ Fiona Malcolm/ Simon Steer	<ul style="list-style-type: none"> <li>• Representation for reporting, governance and decision making.</li> <li>• Representation from weekly check in to committee.</li> </ul>	
	1f	Datix Reporting for ASC and Social Work	Mirian Morrison/ Ruth MacDonald	<ul style="list-style-type: none"> <li>• Dashboard being produced from Datix. To include complaints and adverse events.</li> <li>• First report due 30<sup>th</sup> September 23</li> <li>• (to consider how this data merges to a wider ASW &amp; SC dashboard)</li> </ul>	

	1g	Culture – Work associated to the Partnership is still viewed as an addition. How is this embedded into NHS Highland through the whole system?	Board	<ul style="list-style-type: none"> <li>Ruth and Claire C to consider messaging and support for the whole service.</li> </ul>	
	2	<b>Interface with other established processes</b>			
	2a	Agreeing the junctures and the process whereby a piece of works steps out of clinical and care governance to adult protection (or child protection) committee and then feeds back when complete to ensure appropriate comms, feedback etc.	Mirian Morrison/ Molly Gilbert	<ul style="list-style-type: none"> <li>Learning Review Sub Group has set a specific action on this to work with Clinical Governance to agree process. There is one current example and two further reviews almost at completion to be used to build process.</li> </ul>	
	2b	Develop process when they are across agency eg involving MHO, CJS or children’s services and how this fits into the NHS and HC governance processes.	Ruth MacD/ Mirian Morrison/ Fiona Malcolm	<ul style="list-style-type: none"> <li>There are cases that should be fed though for escalation and governance that have direct involvement crossing NHS/HC SW staff.</li> </ul>	
	3	<b>Internal and External Recommendations</b>			
	3a	Agree as a partnership the central point plans will be held, themes across plans will be considered and reviewed	Ruth MacD	<ul style="list-style-type: none"> <li>To link with performance and planning to create single dashboard, building on the dashboard that is being built by the clinical governance team.</li> </ul>	
	3b	CI inspections and grades, vulnerable and closing services or subject to LSI		<ul style="list-style-type: none"> <li>To link with performance and planning to create single dashboard</li> </ul>	
	3c	LSI, learning reviews, data. Deaths and injuries (including suicide) that have triggered processes (links with care governance above), AWI compliance, ASP compliance (links with AP committee)		<ul style="list-style-type: none"> <li>To link with performance and planning to create single dashboard</li> </ul>	
	4.	<b>Professional practice, competence and continuous improvement</b>			
	4a	Risk assessment and risk management to be recorded, monitored and audited	Ruth MacD	<ul style="list-style-type: none"> <li>Risk assessment tool being developed (action below)</li> <li>Process to be built to link the data to reporting.</li> <li>This will assist with broadening risk from individuals to professional groups and the Partnership.</li> </ul>	
	4b	Evidence codes of practice, legislation standards and local guidance are complied with.		<ul style="list-style-type: none"> <li>To link process with 4a</li> </ul>	

	4c	Mechanism to routinely share practice learning		<ul style="list-style-type: none"> <li>To link process with 4a&amp; 4b</li> <li>Professional leadership to consider shared learning across teams via development sessions.</li> </ul>	
	4d	Effective supervision of staff via an effective line management system.	Ruth MacD	<ul style="list-style-type: none"> <li>Single Social Work Structure is now in place in Highland whereby there is a senior social worker and team manager within every social work team. There should be no person working for the social work service that is not within this structure.</li> <li>Supervision Policy to be revisited and implemented.</li> </ul>	
	5.	<b>Workforce</b>			
	5a	Including conduct and capability and the interface between the employer, CSWO and SSSC	Fiona D/ Pam C/ Gaye B/ Fiona M	<ul style="list-style-type: none"> <li>To agree a Partnership approach to conduct and capability processes.</li> <li>Considering HR policies for both organisations and how they can complement the Partnership.</li> <li>Clearly document areas of risk whereby policy does not support Partnership working.</li> </ul>	
	5b	Clear data in relation to workforce. Establishment, vacancies and sickness	Ruth MacD	<ul style="list-style-type: none"> <li>To link with community huddle data and workforce planning to build this reporting into one single ASW &amp;SC dashboard.</li> </ul>	
	6.	<b>Social Care Resource Availability (internal and sector)</b>			
	6a	To have up to date data in relation to resource availability across all services. To be able to be reactive to crisis areas but create the ability to be proactive as a Partnership. when risk areas are emerging	Ruth MacD	<ul style="list-style-type: none"> <li>Working with James Bain, Head of Transactions and Income to create template to build onto ASW &amp;SC dashboard.</li> <li>To include in-house data from community huddle</li> <li>To request in house and external data from LD&amp;MH</li> </ul>	
	7.	<b>Risk Assessment</b>			



		<b>Risk Assessment</b>	Claire Watt	<ul style="list-style-type: none"> <li>• There is clear guidance for workers about balancing risk, needs and human rights relevant to their roles</li> <li>• Model of tested risk assessment tool being adapted for Highland to assist social work and social care assessments.</li> <li>• Work with Claire C and Louise B to consider if this can be adopted as a partnership tool.</li> <li>• To create process for alert and reporting through governance once tool is in use.</li> <li>•</li> </ul>	
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<b>B</b>	Completed
<b>G</b>	On course for completion to timescale
<b>A</b>	Progressing but some slippage
<b>R</b>	No significant progress
	Progress not yet required

# NHSH Care Homes

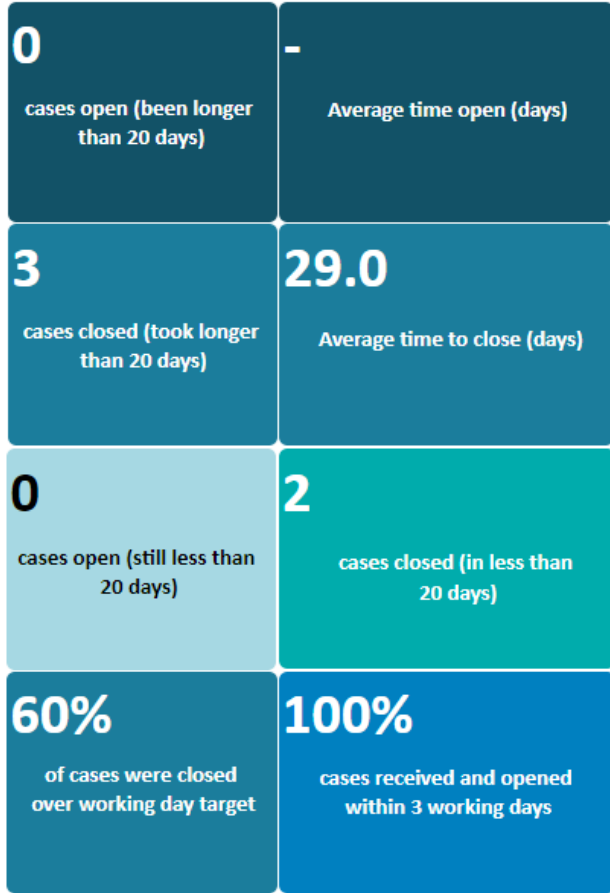
## Stage 2 Complaints | October 2023

August 2022 to August 2023 (EXTRACT 05/10/2023) \*excludes cases with stage of further correspondence and SPSO\*

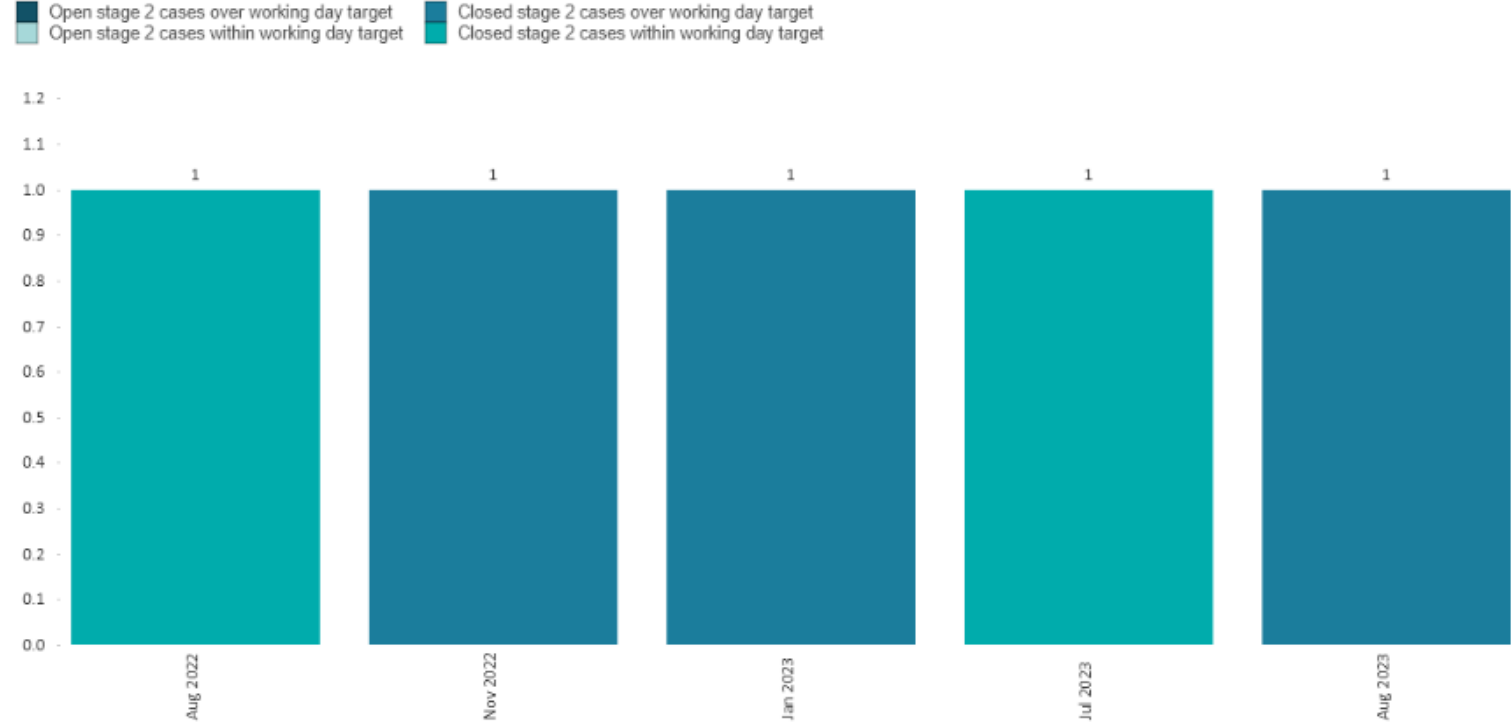


Context/narrative

### Stage 2 case overview | Last 13 months



### Working day status graph displaying number of stage 2 cases received | last 13 months



### Working day performance (closed within 20 days) for stage 2 cases | Last 13 months

	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23
Care Homes	100%	n/a	n/a	0%	n/a	0%	n/a	n/a	n/a	n/a	n/a	100%	0%
Highland	61%	53%	32%	45%	35%	43%	24%	35%	53%	47%	49%	35%	38%



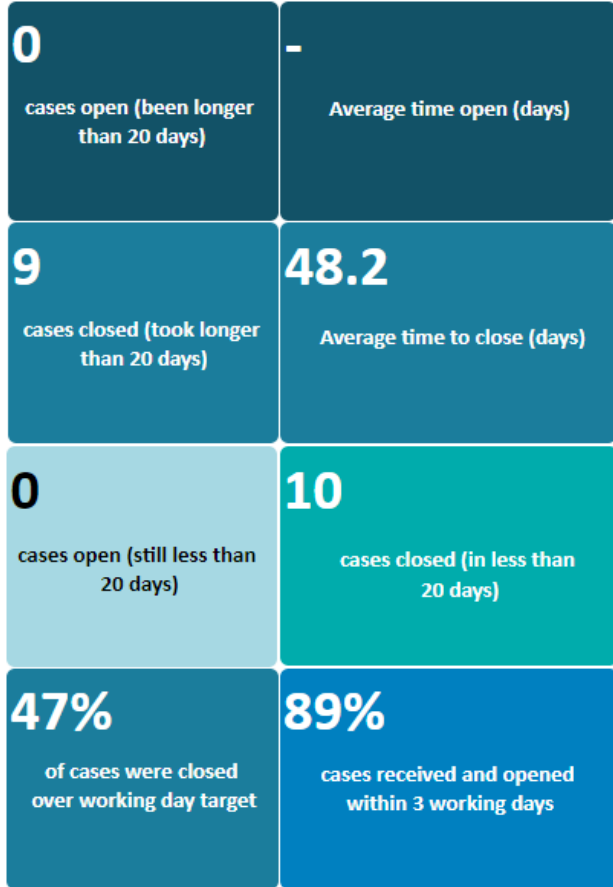
# NHSH Care At Home Stage 2 Complaints | October 2023

August 2022 to August 2023 (EXTRACT 05/10/2023) \*excludes cases with stage of further correspondence and SPSO\*

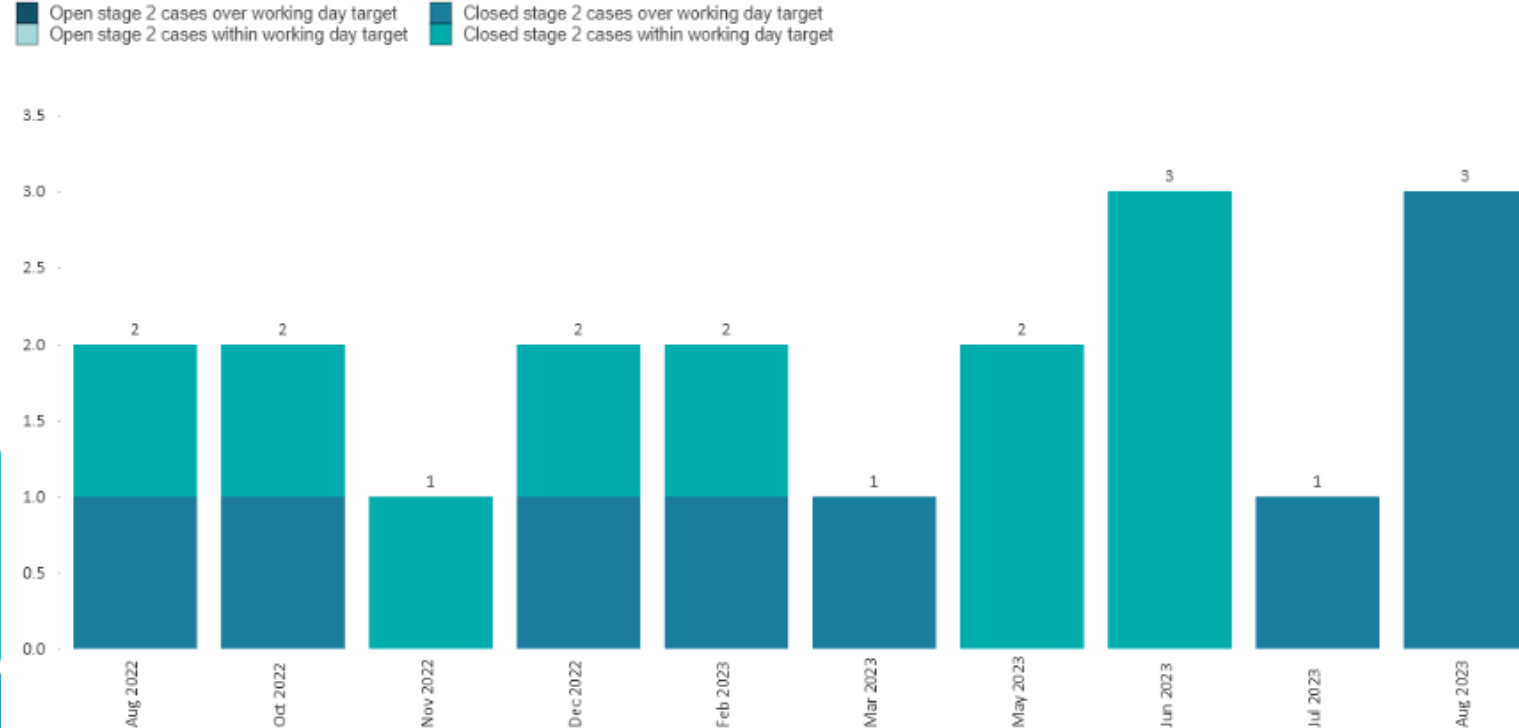


Context/narrative

## Stage 2 case overview | Last 13 months



## Working day status graph displaying number of stage 2 cases received | last 13 months



## Working day performance (closed within 20 days) for stage 2 cases | Last 13 months

	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-22	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23
Care At Home	50%	n/a	50%	100%	50%	n/a	50%	0%	n/a	100%	100%	0%	0%
Highland	61%	53%	32%	45%	35%	43%	24%	35%	53%	47%	49%	35%	38%

# NHSH Care Homes

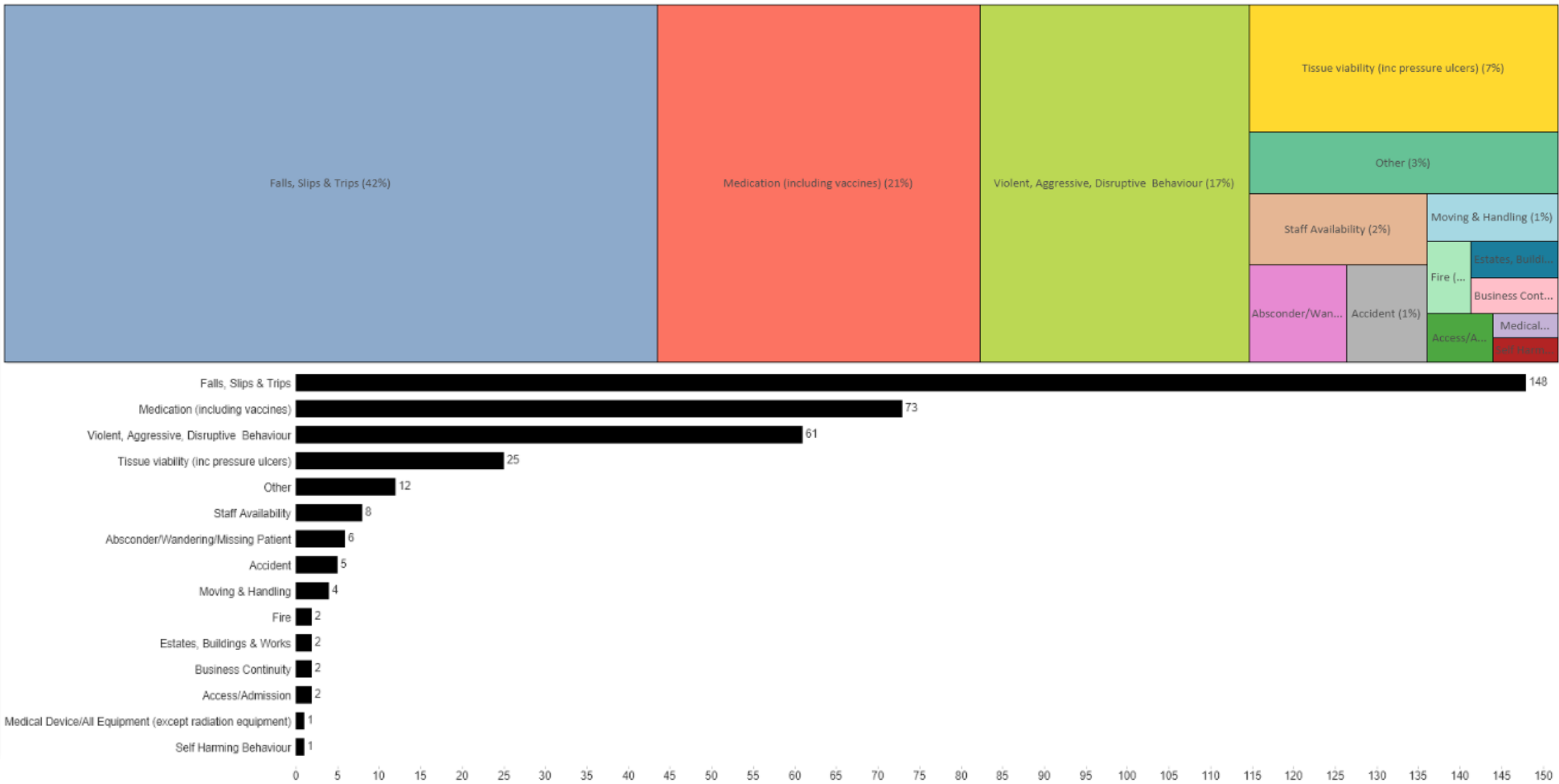
## Adverse Events | October 2023

July 2023 to September 2023 (EXTRACT 05/10/2023)



Context/narrative

Top 15 adverse event categories recorded last 3 months | % Share and count | July 2023 to August 2023



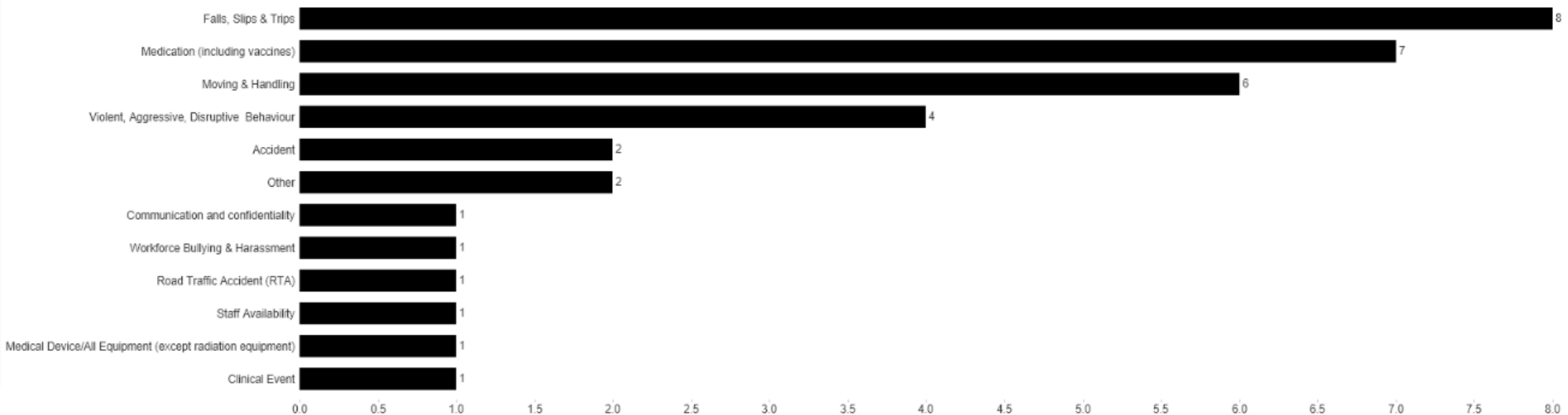
# NHSH Care At Home Adverse Events | October 2023

July 2023 to September 2023 (EXTRACT 05/10/2023)



Context/narrative

Top 15 adverse event categories recorded last 3 months | % Share and count | July 2023 to August 2023



# NHSH Care Homes

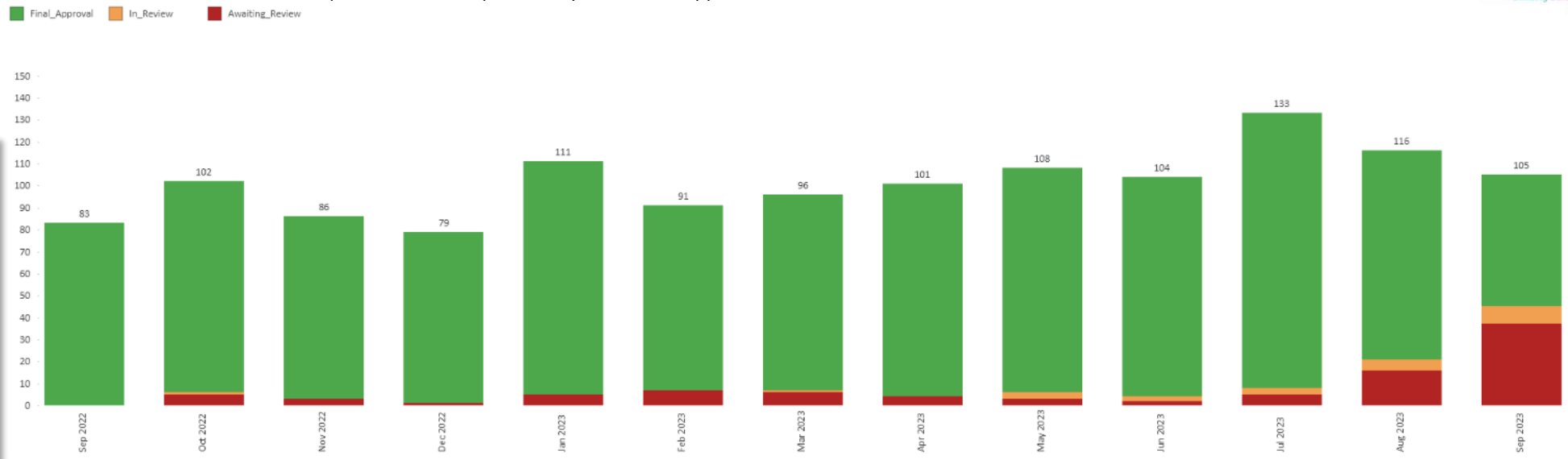
## Adverse Events | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)



Context/narrative

Total number of incidents recorded | Last 13 months | Shown by month and approval status



Total number of incidents recorded by Top 15 sites | Last 13 months | Shown by approval status (descending order of 'awaiting review')

Site	Count	Awaiting_Review	In_Review	Final_Approval
<b>Care Home (NHS) - Fort Augustus - Telford Centre</b>	<b>1315</b>	<b>94</b>	<b>23</b>	<b>1198</b>
Care Home (NHS) - Fort Augustus - Telford Centre	186	2	2	182
Care Home (NHS) - Mallaig - MacKintosh Centre	106	0	0	106
Private Care Home	104	10	10	84
Care Home (NHS) - Fort William - Invernevis House	104	3	0	101
Care Home (NHS) - Newtonmore - Main's House Ltd	81	14	1	66
Care Home (NHS) - Thurso - Bayview House	81	1	1	79
Care Home (NHS) - Golspie - Seaforth House	79	3	1	75
Care Home (NHS) - Kingussie - Wade Centre	77	32	0	45
Care Home (NHS) - Gairloch - Strathburn House	73	0	1	72
Care Home (NHS) - Portree - Home Farm Care Home	72	4	3	65
Care Home (NHS) - Melvich - Melvich Community Care Unit	66	15	1	50
Care Home (NHS) - Ullapool - Lochbroom House	60	0	1	59
Care Home (NHS) - Wick - Pulteney House	56	0	1	55
Care Home (NHS) - Inverness - Ach an Eas	40	6	0	34
Care Home (NHS) - Broadford - An Acarsaid	36	0	0	36

# NHSH Care At Home

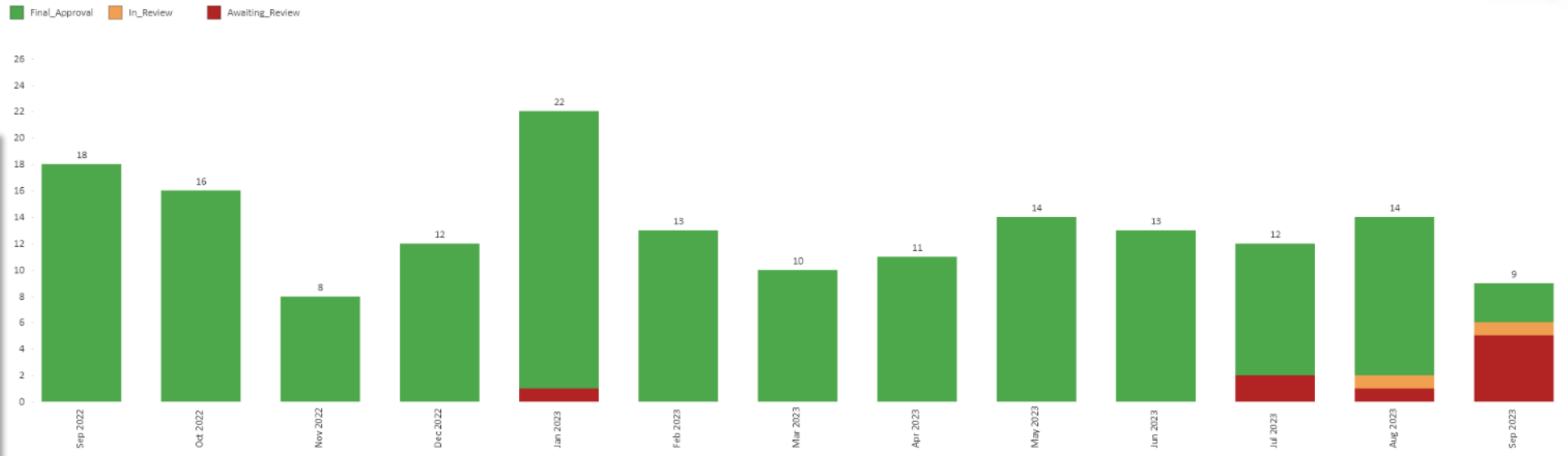
## Adverse Events | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)



Context/narrative

Total number of incidents recorded | Last 13 months | Shown by month and approval status



Total number of incidents recorded by District/Division | Last 13 months | Shown by approval status (descending order of 'awaiting review')

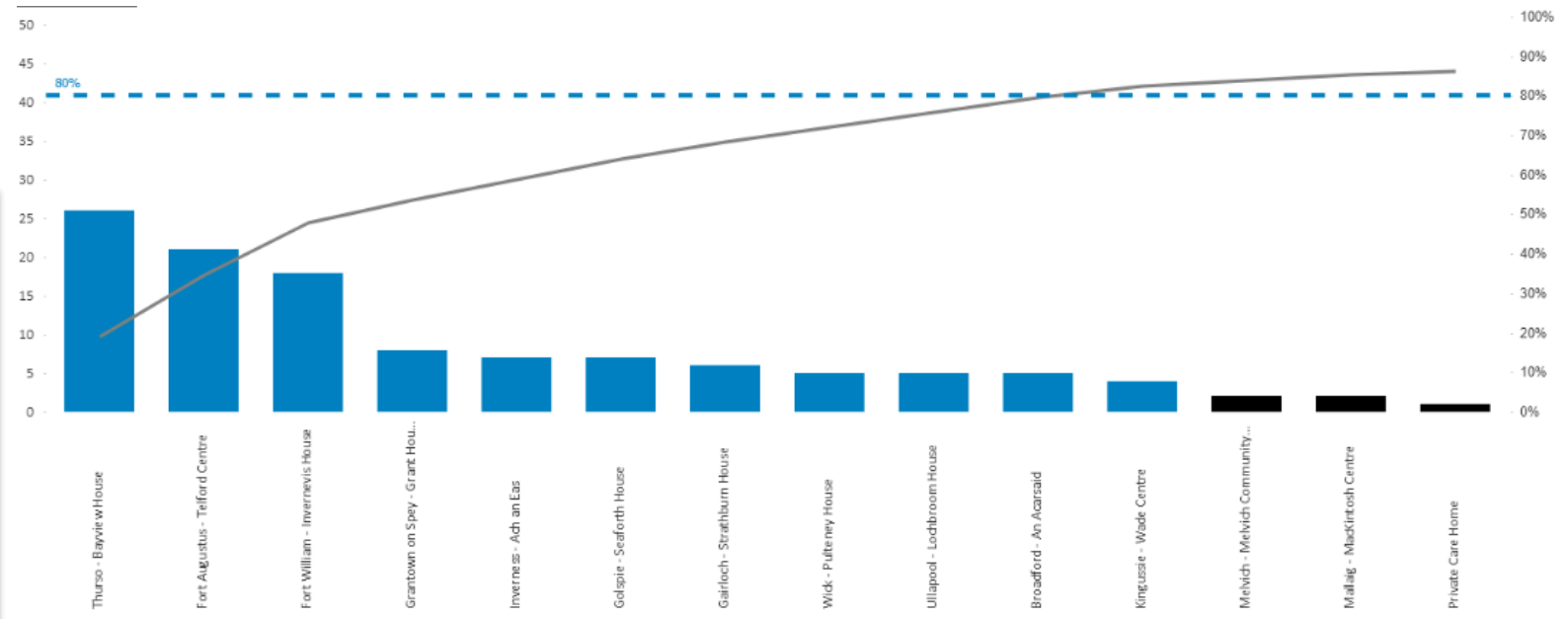
District Division	Count	Awaiting_Review	In_Review	Final_Approval
	<b>172</b>	<b>9</b>	<b>2</b>	<b>161</b>
Skye, Lochalsh and W Ross	51	3	0	48
Badenoch and Strathspey, Ardersier and Nairn	26	1	0	25
Inverness East	20	0	0	20
Caithness	17	0	0	17
Sutherland	16	0	0	16
Lochaber	11	3	0	8
East Ross	11	0	1	10
Mid Ross	10	0	0	10
Helensburgh	4	1	0	3
Inverness West	4	0	0	4
Medical Division (Raigmore)	1	1	0	0
Cowal and Bute	1	0	1	0

# NHSH Care Homes Falls | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)

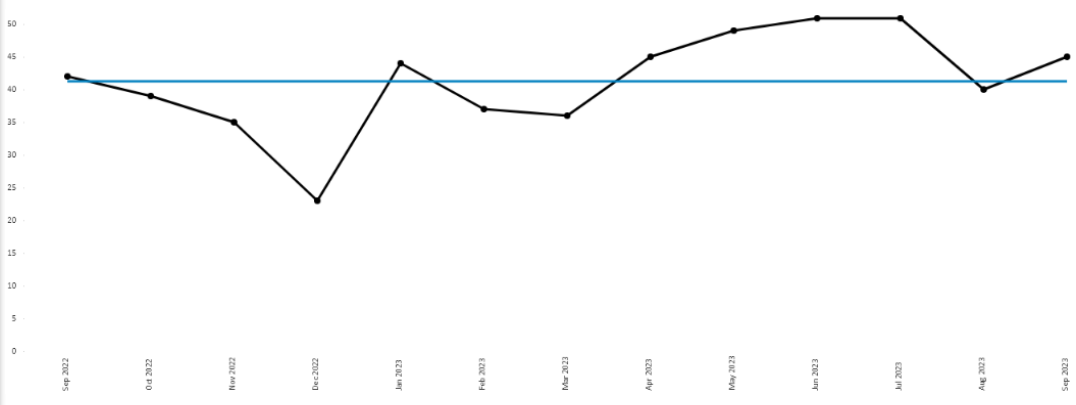


Pareto graph count of patient falls by site | last 3 months (July 2023 to September 2023)

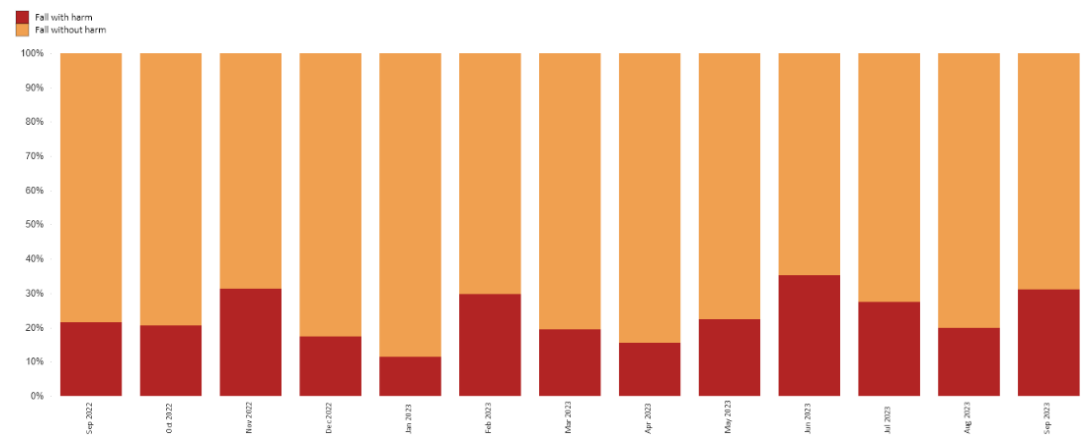


Context/narrative

Run chart of falls | last 13 Months



Falls | Harm and No Harm (% share) | last 13 month







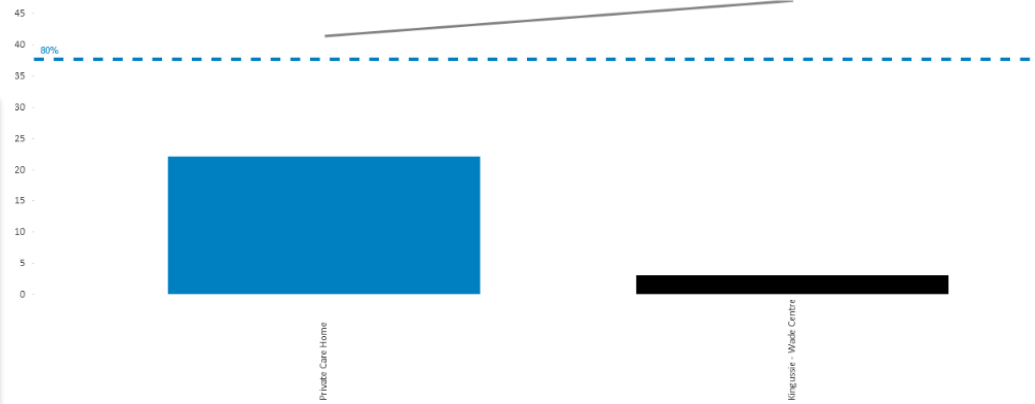
# NHSH Care Homes Tissue Viability | October 2023

August 2022 to August 2023 (EXTRACT 05/10/2023)

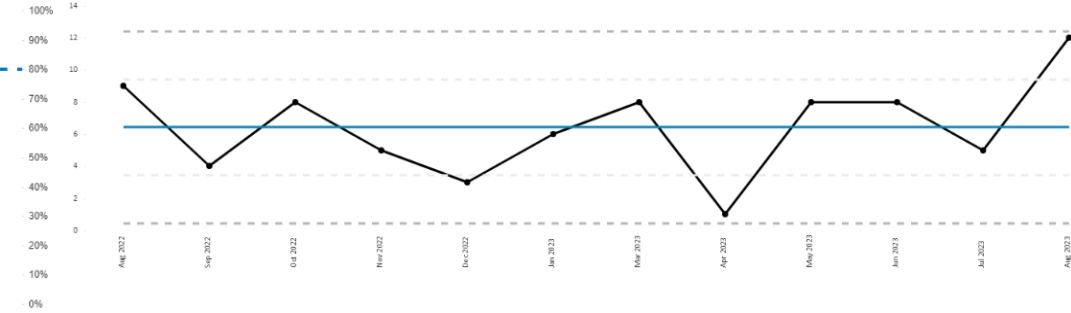


Context / narrative

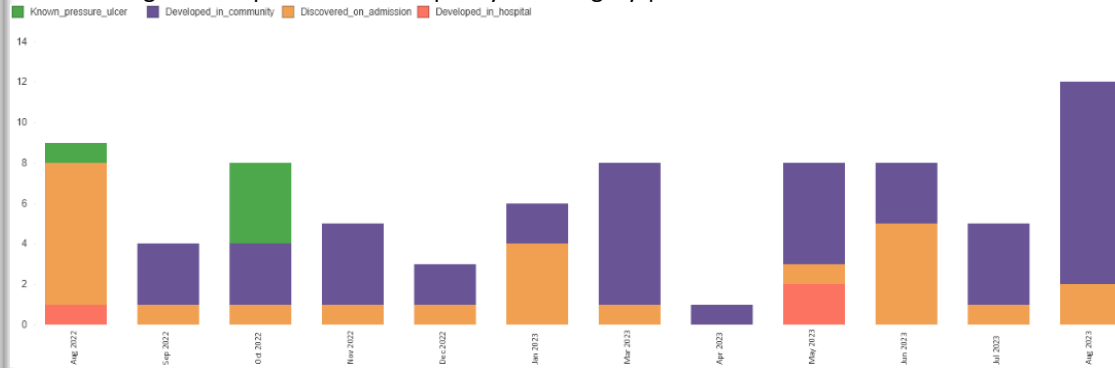
Pareto graph count of grade 2-4 pressure ulcers by site | Last 3 months (June to August 2023)



Run chart of grade 2-4 pressure ulcers | Last 13 months

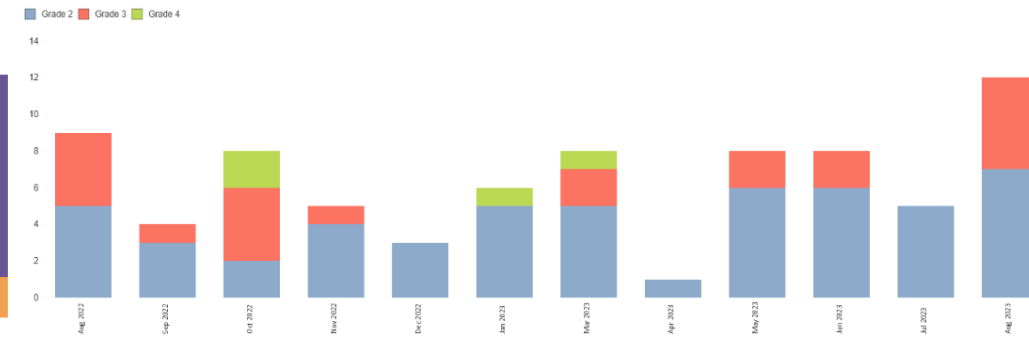


Number of grade 2-4 pressure ulcers split by subcategory | Last 13 months



Developed in hospital	3
Discovered on admission	25
Developed in community	44
Known pressure ulcer	5

Number of grade 2-4 pressure ulcers split by injury grade | Last 13 months



Grade 2	52
Grade 3	21
Grade 4	4

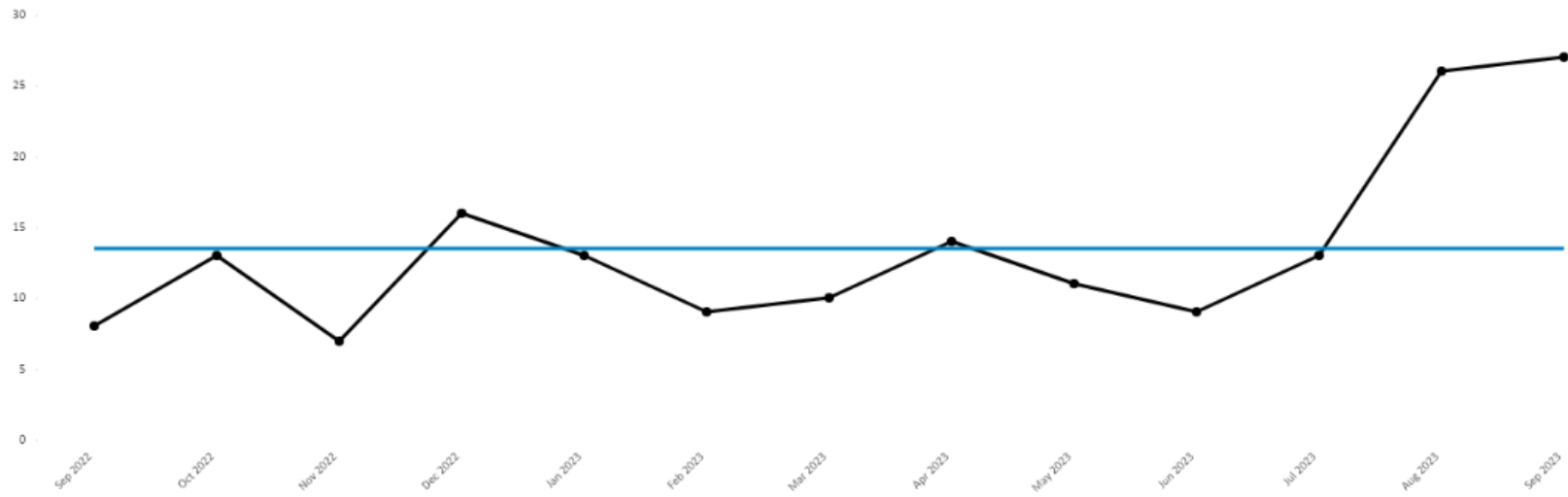
# NHSH Care Homes Medication Errors | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)

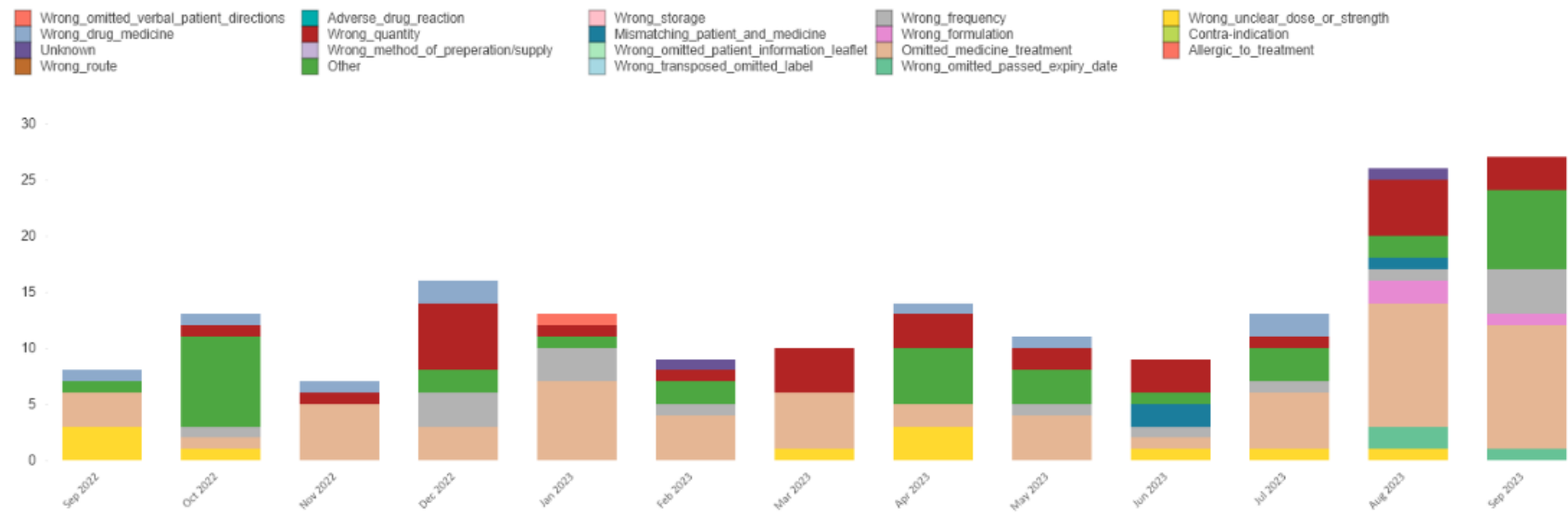


Context / narrative

Run chart of medication errors (clinical only) | last 13 Months



Volume bar chart of medication error type (clinical only) | last 13 Months



Omitted_medicine_treatment	62
Other	35
Wrong_quantity	31
Wrong_frequency	16
Wrong_unclear_dose_or_strength	11
Wrong_drug_medicine	9
Wrong_omitted_passed_expiry_date	3
Wrong_formulation	3
Mismatching_patient_and_medicine	3
Unknown	2
Wrong_omitted_verbal_patient_directions	1
Allergic_to_treatment	0
Contra-indication	0
Wrong_transposed_omitted_label	0
Wrong_omitted_patient_information_leaflet	0
Wrong_storage	0
Wrong_method_of_preparation/supply	0
Adverse_drug_reaction	0
Wrong_route	0

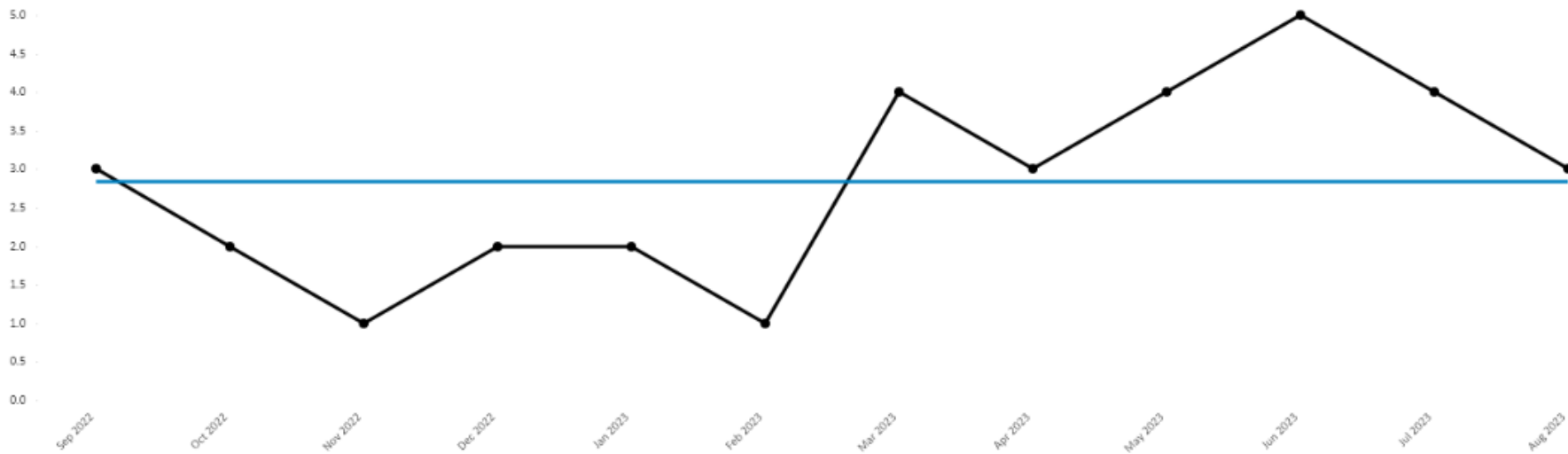
# NHSH Care At Home Medication Errors | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)

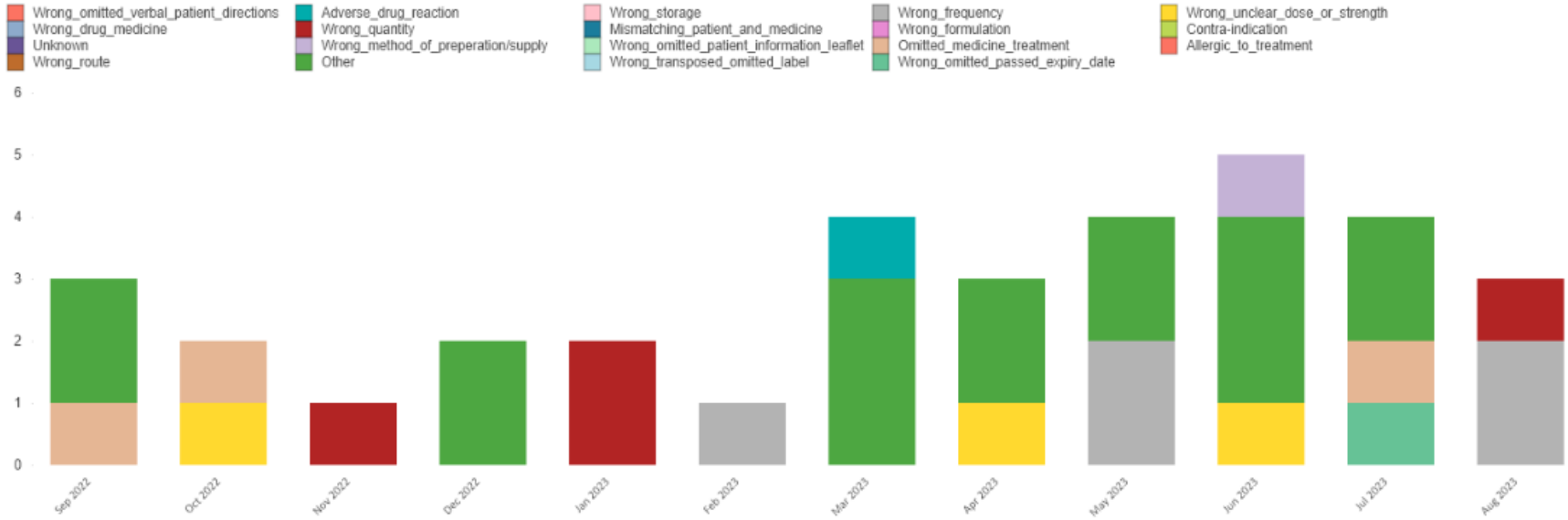


Context / narrative

Run chart of medication errors (clinical only) | last 13 Months



Volume bar chart of medication error type (clinical only) | last 13 Months



Other	16
Wrong_frequency	5
Wrong_quantity	4
Wrong_unclear_dose_or_strength	3
Omitted_medicine_treatment	3
Wrong_omitted_passed_expiry_date	1
Wrong_method_of_preparation/supply	1
Adverse_drug_reaction	1
Allergic_to_treatment	0
Contra-indication	0
Wrong_formulation	0
Wrong_transposed_omitted_label	0
Wrong_omitted_patient_information_leaflet	0
Mismatching_patient_and_medicine	0
Wrong_storage	0
Wrong_route	0
Unknown	0
Wrong_drug_medicine	0
Wrong_omitted_verbal_patient_directions	0

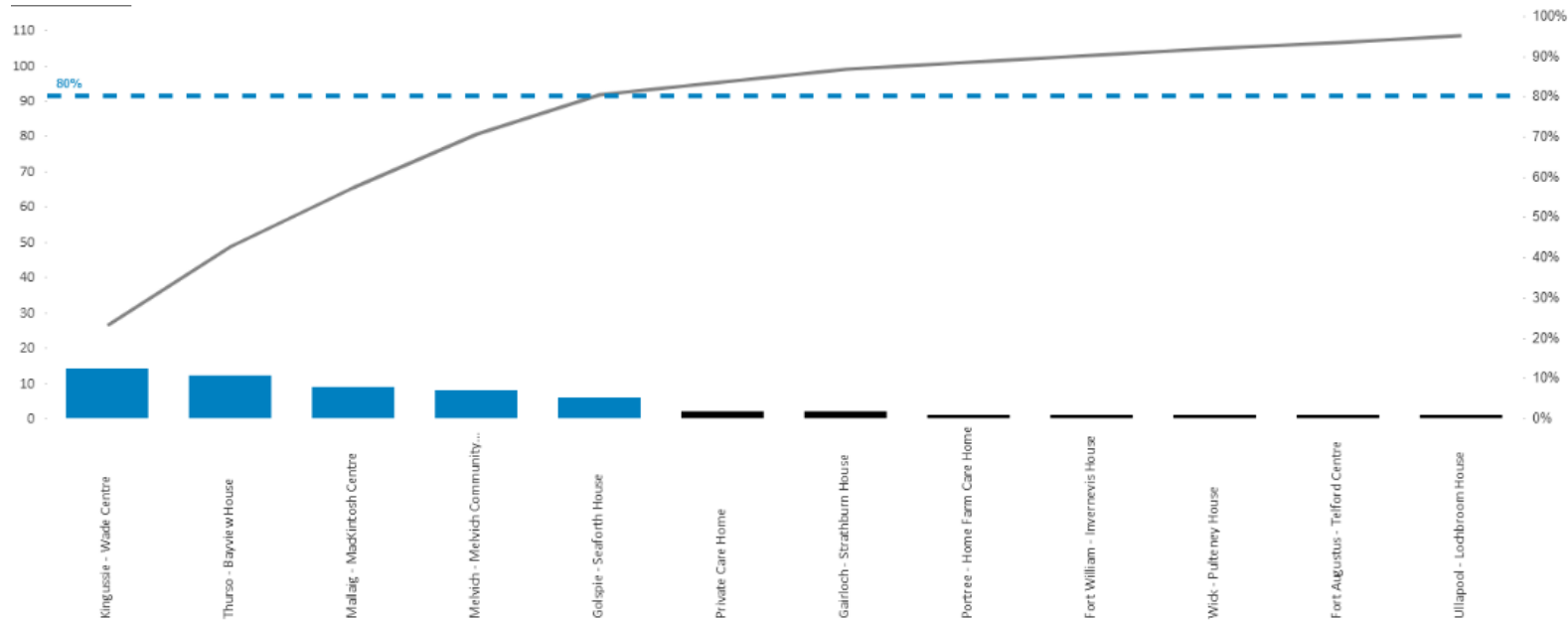
# NHSH Care Homes Violence and Aggression | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)

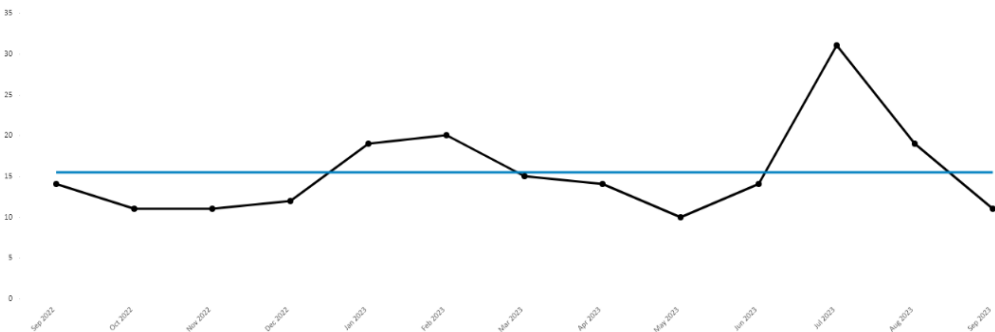


Context / narrative

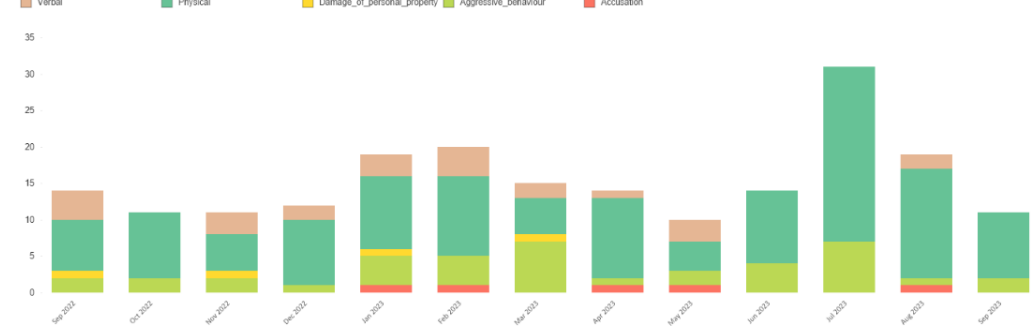
Pareto graph count of V&A incidents by site | last 3 months (July 2023 to September 2023)



Run chart of V&A incidents | last 13 Months



Volume bar chart of V&A incidents | Sub-category | last 13 months



Accusation	5
Aggressive behaviour	39
Damage personal property	4
Physical	129
Verbal	24

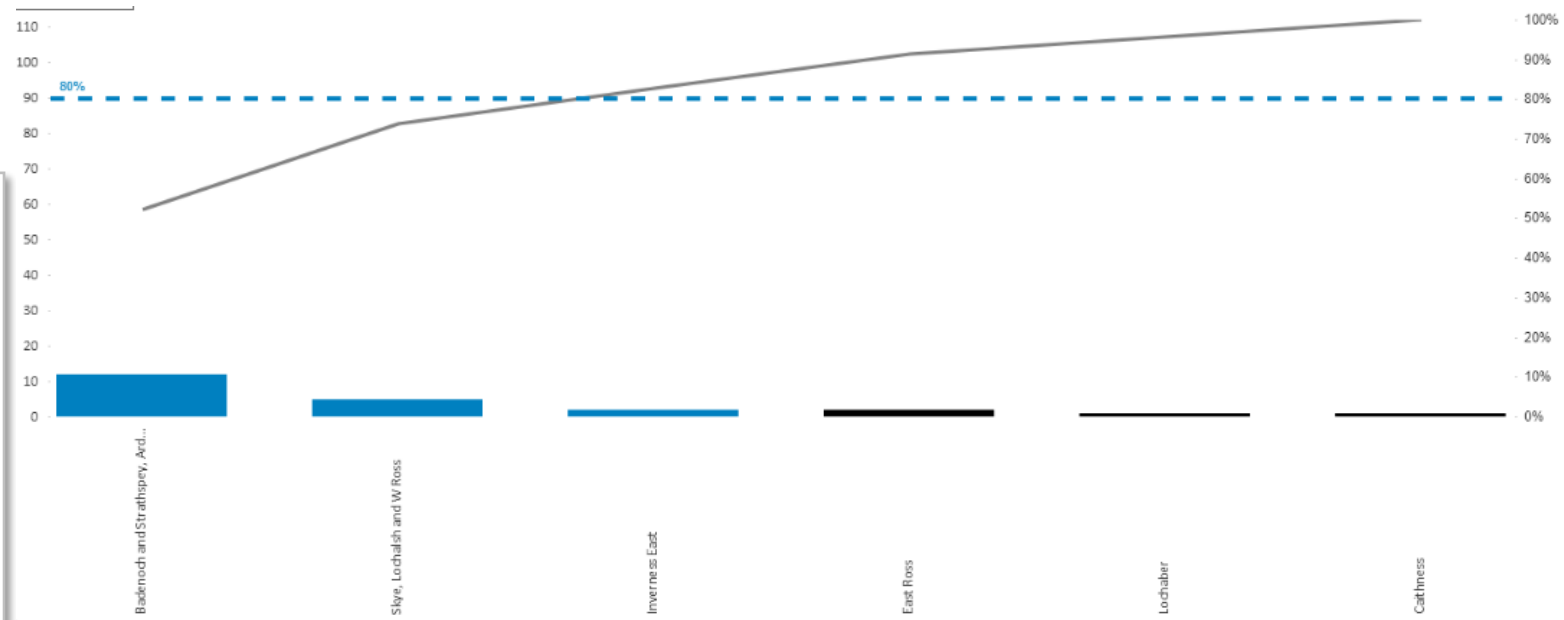
# NHSH Care At Home Violence and Aggression | October 2023

September 2022 to September 2023 (EXTRACT 05/10/2023)

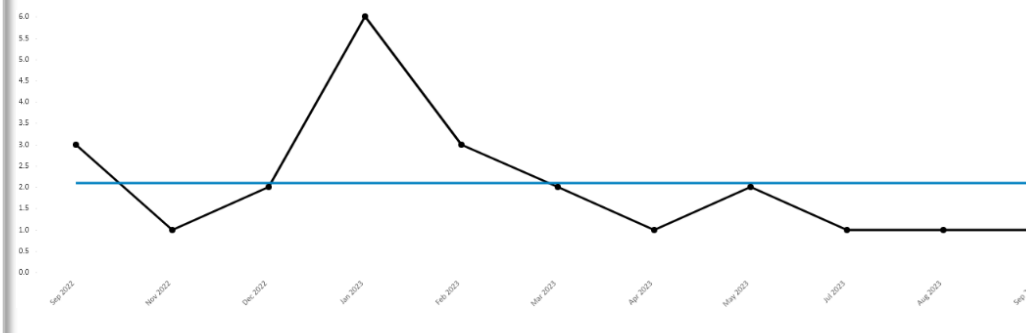


Context / narrative

Pareto graph count of V&A incidents by district | last 13 months



Run chart of V&A incidents | last 13 Months



Volume bar chart of V&A incidents | Sub-category | last 13 months



Accusation	1
Aggressive behaviour	6
Damage personal property	0
Physical	12
Verbal	4