

**Recording Care: Evidencing Safe and Effective Care  
Steering Group Meeting**



Thursday 27<sup>th</sup> June 2019 2 – 4pm

NIPEC Offices Belfast – Meeting Room

**ACTION NOTES OF MEETING**

**Present:** Nicki Patterson, Executive Director of Nursing (Chair), SEHSCT NP  
 Linda Kelly, Assistant Director of Nursing SEHSCT LK  
 Lisa Houlihan, NIPEC Council Member, (teleconference) LH  
 Suzanne Pullins, Assistant Director of Nursing, NHSCT (teleconference) SP  
 Grace Hamilton, Assistant Director of Nursing, SHSCT (teleconference) GH  
 Dawn Connolly, Senior Nurse Governance Co-ordinator, SHSCT (teleconference) DC  
 Angela Reed, Senior Professional Officer, NIPEC AR

**Apologies:** Penny Moore, WHSCT  
 Claire Büchner, PHA  
 Patrick Gallagher, DoH  
 Siobhan Murphy, CEC  
 Susan Carlisle, QUB  
 Linzi McIlroy, RCN  
 Donna Keenan, WHSCT

**In Attendance:** Gillian McKee, TNMD Professional Officer, NIPEC  
 Lukasz Karpinski, TNMD Programme Administrator, NIPEC

Agenda item	Action to be taken	Action by
1	<p><b>Chair’s remarks, Apologies</b></p> <p>NP welcomed everyone to the meeting. Introductions taken for the participants by teleconference. Apologies noted as above.</p> <p>Draft Action Notes of 4<sup>th</sup> April 2019 were discussed and agreed as an accurate record.</p> <p><i>Matters Arising</i></p> <ul style="list-style-type: none"> <li>• RQIA membership</li> </ul> <p>NP and AR updated in relation to professional membership representing RQIA. No response had been received. AR suggested that an offer of open membership be made via letter from Chair to keep an open channel on both sides to raise any concerns. GMcK was asked to update members regarding the recent awareness session in RQIA offices. LK agreed this would provide an opportunity to RQIA staff to comment on work streams. AR to draft a letter to RQIA. LKa to check RQIA’s representation on NIPEC’s email distribution list.</p>	<p><b>AR to draft a letter to RQIA regarding representation at the Steering Group.</b></p> <p><b>LKa to check RQIA’s representation on NIPEC’s email distribution list.</b></p>

<p>2</p>	<p><b>Transformation Nursing and Midwifery Data (TNMD) Work Streams – Update</b></p> <p>AR updated members on the Transformation work streams. Funding letter received by all EDoN's had been welcomed. Objectives progressing well. Some issues had been raised in relation to timely communication with TNMD officers in the Trusts. In addition it was not clear what stage HSC trusts were at to recruit additional officers. LK advised that SEHSCT had a process in place for recruitment of further officers. SP advised of position for NHSCT which included the contribution that would be required in one of the District Nursing settings. GH advised staff in post from previous funding, letter of interest to staff to go in couple of weeks to have staff in post in August.</p> <p>In view of the fact that some HSC Trusts were not represented at the meeting, AR proposed to send a template for Trusts to fill in with information on staff in the region and their opportunity to work remotely, given that many of the officers were frequently moving between clinical venues geographically. LK raised a query in relation to the financing of the project - AR to check with ET and AMcL.</p> <p>Gantt chart not fully updated due to roll out of the new document.</p>	<p>AR to send a template for Trust to populate with PACE facilitators in the region.</p> <p>AR to check with Edmund Thom and Angela McLernon regarding boundaries of finances available from April 2019.</p>
<p>3</p>	<p><b>Working Group Report</b></p> <p>LK delivered the Working Group Report.</p> <p><u>Adult document</u></p> <p>An event which was categorised as a QSE incident took place following the successful release of the adult document. AR briefed Steering Group on this event and subsequent action – the PHA had been informed and a QSE template completed. The event had not been categorised as an adverse incident</p> <p>The adult document had been rolled out successfully across all adult hospital based care environments, including introduction into the edams electronic solution in SEHSCT.</p> <p>AR advised the group that an issue with the falls bundle had arisen due to the fact that repetition had been reduced in the new document which had required the falls information to be spread across a number of assessment criteria rather than repeated in one place. SP advised Northern Trust had encountered the same issue and this was being resolved. AR to take it to the Working Group for discussion.</p> <p>AR advised the group with CNO's approval to go to Cambridge to visit electronic records in practice (after Summer).</p> <p><u>Care Planning</u></p> <p>LK reported that the Recording Care TNMD stream of work had received full funding – communicated end of May 2019. All Exec. Directors of Nursing have been notified and some trusts underway with recruitment.</p> <p>AR reported on the current number of wards using PACE: 87 wards as fully implemented for last quarter, an increase of only 5 wards due to the activity relating to the adult document.</p> <p>Discussion has begun relating to how PACE would be progressed within a digital environment – PACE facilitators had visited SEHSCT in the last week</p>	<p>GMcK to take falls bundle enquiry to the Working Group for discussion and advice.</p>

to review the systems in eDams. GMcK had been supported in a separate visit facilitated by Ruth Marks and Jane Patterson in SEHSCT.

Reported pressures continued to be: movement of staff, temporary staff, and sickness absence. Leadership of ward sisters and Charge Nurses remained crucial to successful implementation. Many of the facilitators had expressed that they continued to need to revisit wards to maintain standards of practice, long after implementation was complete. PACE support resources (first drafts) had been completed and were currently being consulted on across HSC trusts via PACE facilitators.

#### Children's Short Stay Document

GMcK had attended a support session at Healthcare Library in relation to STAMP and bedrail risk assessments, with the view to assess if they should be included in the children's documents. Next meeting planned in July 2019, membership of ERG was currently being approved by HSC trusts.

NIPEC was awaiting responses across a number of organisations and AR urged members to review membership of the ERG to enable the confirmation of the next meeting.

Other risk assessments being explored with regional groups in advance of the meeting in July.

NP enquired about compliance in relation to the recommendations of the Hyponatraemia Inquiry. AR advised that relevant recommendations had been reviewed and the work within children's settings – particular the potential to roll out the PACE approach to planning nursing care would ensure alignment through an enhanced child and family centred approach.

#### Mental Health

AR updated via email from Briege Quinn following a project meeting 21st June 2019.

#### Short Stay

Adult Short Stay pilot completed. Survey monkey was due to close 28<sup>th</sup> June 2019. Thematic analysis/ common issues to be collated for next ERG meeting on 4th July 2019.

Elective Care Centres were unsuitable for piloting at this moment, however work was ongoing to understand what was currently being used and the potential for an ambulatory care document which may be suitable for these areas.

#### Learning Disabilities

LK updated Recording Care Task and Finish group met 4<sup>th</sup> June 2019. Booklet completed by MB in 2018 agreed as a suitable starting position. For use in acute & non acute care settings, with specific content/ focus in each setting. Governance arrangements to be considered in relation to how often the person's document should be reviewed. Regional Collaborative and Task and Finish groups to advise NIPEC on assessment issues and this to be tabled for Steering Group when ready.

**Relevant SG members to review Children's ERG membership and advise NIPEC.**

	<p><u>ED</u></p> <p>Audit was being progressed by TNMD Professional Officer NIPEC with a view to commencing quarterly audits from September 2019. This work had included a review of the indicators for the ED setting.</p> <p><u>District Nursing</u></p> <p>Two meetings, one in April and one in June, had taken place to commence this work. A further meeting was being arranged for July that would enable thinking around the assessment process which provides the information for the PACE process. District nursing colleagues were keen to progress this area of work, in conjunction with the KPI processes.</p> <p><u>Audit</u></p> <p>AR advised that the old NOAT tool had been archived. Some correspondence had been received from HSC Trusts relating to the number of indicators to be reviewed in each audit. LK advised possibility to capture all indicators but the Steering Group to decide which ones are of a priority in the next quarter. AR suggested to do all indicators in this quarter and then look at systems to filter scores.</p> <p><u>Draft Handover Principles</u></p> <p>PACE facilitators were currently identifying wards (one PACE ward in each HSC Trust) that would test the principles. A process was being described that would be communicated through the facilitators. It was likely that feedback would be collected via a survey monkey type approach. Non PACE wards could be included – for discussion with Trust ADNs.</p> <p><u>Newsletter</u></p> <p>Newsletter being contributed to for June 2019 outlining current achievements. LKa to send electronic version of Newsletter for approval.</p>	<p>AR to advise full audit on notes for this quarter and seek feedback relating to the ability of HSC Trust systems to filter/prioritise indicators.</p> <p>AR to determine potential for HSC Trusts piloting handover principles in non-PACE wards.</p> <p>LKa to create and collate Recording Care Newsletter and send electronic version for approval</p>
4	<p><b>Shared Learning from Improvement and HSC Trust Record Keeping Scores</b></p> <p>It had been agreed by Steering Group members that in view of the release of the new adult document and significant challenge for clinical areas, no audit would be presented this quarter.</p>	
5	<p><b>Encompass Update</b></p> <p>NP updated regarding CNMAC meeting with positive conversations with Encompass representatives, with recognition of the importance of nursing and midwifery. NP to forward presentation from that meeting to the group.</p>	<p>NP to forward presentation from CNMAC meeting in relation to Encompass.</p>
6	<p><b>HSC Trust Record Keeping Projects</b></p> <p><u>Record Keeping elements of transformation projects HSC organisations</u></p> <p>SP advised the bedrail policy in Northern Trust different to one in the adult document and work now carried to map the two together. Following debate all members were asked to check their local policies to ensure alignment.</p>	<p>All HSC Trusts to review local bed rails policies for consistency with revised adult document.</p>
7	<p><b>Next Steps</b></p>	

	Actions noted below.	
<b>8</b>	<p><b>Any Other Business</b></p> <p><u>Evaluation of PACE Implementation</u></p> <p>AR updated members of receiving confirmation from the R&amp;D Office regarding PACE implementation evaluation funding. Possible start of evaluation in January 2020 for a full year.</p> <p>AR raised the issue regarding TNMD officers not having remote access hence delayed communication with other officers and NIPEC. AR suggested that the potential for remote access and flexibility of working for the TNMD trusts officers would greatly enhance efficiency. Following debate it was agreed that the template being sent to HSC Trusts relating to the numbers of staff in post would also request information relating to the potential for remote working. NP advised that the Steering Group was supportive to this request.</p> <p>LK raised an issue with nursing languages and coding in relation to Encompass. NP advised that Epic system is using SNOMED CT and this to be discussed at a future meeting in DoH. AR advised regarding the five country nursing and midwifery digital Leadership Group who had been commissioned to look at standardised nursing terminologies by the five country CNOs. AR in the group to provide feedback to the Steering Group. AR advised this issue would also be considered during the planned visit to Cambridge UHT.</p>	
<b>9</b>	<p><b>Date and time of next meetings:</b></p> <p>Thursday 26<sup>th</sup> September 2019, at 10–12md NIPEC Offices, Meeting Room.</p>	

Action	Comment	Completed/On-going
<b>Wednesday 4<sup>th</sup> April 2019</b>		
ED audit to begin reporting to SG in September 2019.		Ongoing
Peer review process for quarter 3 to be set up.		Ongoing
<b>Thursday 27<sup>th</sup> June 2019</b>		
AR to draft a letter to RQIA regarding representation at the Steering Group and to give an opportunity to comment on work streams.		Completed
LKa to check RQIA's representation on NIPEC's email distribution list		Completed
AR to send a template for Trust to populate with information relating to PACE facilitators in the region, including opportunities to work remotely.		Completed
AR to check with Edmund Thom and Angela McLernon regarding boundaries of finances available from April 2019.		Completed
AR / Gillian McKee to take falls bundle enquiry to the Working Group for discussion and advice.		Completed
Relevant members of Steering Group to review Children's ERG membership and advise NIPEC.		Completed

<b>AR to advise full audit on notes for this quarter and seek feedback relating to the ability of HSC Trust systems to filter/prioritise indicators.</b>		<b>Completed</b>
<b>AR to determine potential for HSC Trusts piloting handover principles in non-PACE wards.</b>		<b>Completed</b>
<b>LKa to create and collate Recording Care Newsletter and send electronic version for approval</b>		<b>Completed</b>
<b>NP to forward presentation from CNMAC meeting in relation to Encompass.</b>		<b>Completed</b>
<b>All HSC Trusts to review local bed rails policies for consistency with revised adult document.</b>		<b>Ongoing</b>