

## Recording Care: Evidencing Safe and Effective Care Facilitators Meeting

**20<sup>th</sup> June 2018 10:30-12:30 NIPEC, Belfast**

### In Attendance:

Penny Moore	Chairperson, Lead Nurse	WHSCT	PM
Angela Reid	Senior Professional Officer	NIPEC	AR
Dawn Mackin	Governance Co-ordinator	SHSCT	DM
Margaret Kyle	Facilitator	NHSCT	MK
Michelle Burke	Governance Facilitator	SEHSCT	MB
Jane Patterson	Facilitator	SEHSCT	JP
Audrey Dowd	Facilitator	BHSCT	AD
Lorraine Bell	Facilitator	BHSCT	LB
Julie-Anne McKeown	Nurse Development Lead	BHSCT	JM
Sharon Moffett	Facilitator	BHSCT	SM
Helen McClurg	Facilitator	NHSCT	HM

### Apologies:

Vanessa Eastwick  
Vi Gray

Agenda Item	Notes	Action
<b>1</b>	<p><b>Welcome and apologies</b></p> <p>PM welcomed everyone and the action notes from 9<sup>th</sup> May 2018 2018 were agreed. It was noted that Sharon Holmes will not be in attendance until further notice</p>	
<b>2</b>	<p><b>Matters Arising:</b></p> <p><b>Feedback from regional Steering Group – AR</b></p> <p>It was agreed that a PACE newsletter would be introduced – with contributions from each Trust on PACE progress in their areas: audits, staff/patient quotes, experiences etc. <b>AR</b> will ‘front end’ the newsletter. <b>All</b> to prepare to contribute by August. First newsletter planned for September 2018</p> <p><b>NOAT</b></p> <p><b>AR</b> awaiting feedback from BHSCT re: electronic system available there. No developments anticipated meantime – indicators to be agreed regionally then each Trust to determine which systems they will use to upload and capture data (i.e. Qlikview)</p> <p>BHSCT are currently experiencing IT problems with accessing the NIPEC online system – currently blocked following data protection changes. Hopeful that situation will be resolved soon.</p> <p><b>PM</b> feedback on short, long NOAT – very effective. Others agreed.</p> <p>Updates section C not available on NIPEC site so not being used by some</p> <p><b>Transformation money for NIPEC</b></p> <p><b>AR</b> advised that NIPECs informatics workforce bid has been agreed for funding for the next 18 months. This includes:</p> <ul style="list-style-type: none"> <li>• Funding for the implementation of the Adult record</li> <li>• Funding for the regional Encompass development – this will have huge implications for PALS and will be carefully staged. Hopeful that as replaces existing document, tendering will not be required.</li> </ul>	<p style="text-align: center;"><b>All</b></p> <p style="text-align: center;"><b>AR</b></p>

	<ul style="list-style-type: none"> <li>• Funding for PACE rollout (1 WTE for each Trust (with the exception of the BHSCT which will be allocated 2 WTE) for first 6 months increasing in April 2019 to 3 WTE in Belfast and 2 WTE to the other Trusts, 2 8A post based in NIPEC (Recording care/General) for 18 months.</li> <li>• Posts will be available shortly with potential providers (Phase 1), then tender specification documents will be drawn up (Phase 2)</li> </ul> <p><b>Regional Children’s Facilitators group</b></p> <p><b>MB</b> is in the process of setting this up. Agreements will be reached on whether to use Royal Marsden or Great Ormond Street procedures guidance</p> <p><b>Adult record</b></p> <p><b>PM</b> thanked everyone for their assistance in testing the final record in preparation for feedback at the regional feedback meeting following today’s meeting.</p> <p><b>HEI evaluation</b></p> <p><b>AR</b> advised that no update as yet as she is awaiting feedback</p> <p><b>SQE programme</b></p> <p><b>MB</b> feedback: Everyone successfully completed the course. Certificates were awarded on 12 June 2018 in SEHSCT. MD has been invited to present the outcomes at SEHSCT Quality Improvement day in November 2018. Very positive feedback to date, great example of regional working. Those who attended the course found it to be very good, enabled QI skill developments and transferable knowledge. <b>PM</b> feedback on her project of recording care at the bedside: compliance increased from 50-100%, recording care on all A/C’s were completed by 10am! <b>MB</b> work focused on the person <b>P</b>: the practice is now to write the child’s name in the notes- she notes that there was a very positive change in staff attitude <b>JP</b> looked at the role of the Champions– focusing on developing their strengths <b>PM</b> thanked Jane/Linda for their support and Angela/NIPEC for the opportunity to attend this.</p> <p>A poster and the presentations will be will be available on SharePoint</p> <p>Currently SQE is on a separate share point to PACE - <b>AR</b> to amalgamate into one</p> <p><b>Learning Disability development</b></p> <p><b>AR</b> - No further development as yet Children’s/ED – <b>MB</b> to set up when funding is released <b>AR</b> also advises that in the future District nursing and the Independent sector will develop PACE</p> <p><b>Recording Existing needs</b> Extensive discussions regarding this – All agreed no change at present</p>	<p><b>MB</b></p> <p><b>AR</b></p> <p><b>AR</b></p> <p><b>AR</b></p> <p><b>MB</b></p>
3/4	<p><b>Care settings Implementing PACE/Progress</b></p> <p><b>AR</b> feedback on the PACE workshop(What works to implement and embed in Practice? 28</p>	

	<p>March 2018) recommendations:</p> <p>Bank/Agency. AR met with nursing workforce representatives – good participation. 7 points:</p> <ol style="list-style-type: none"> <li>1. Explore the opportunity to offer training in PACE through Trust SLAs with CEC for Agency staff as a one off set of sessions. This would be best offered when there is a substantial number of wards using the PACE format.</li> <li>2. Along with training should be a 'PACE Passport' – project group to consider how learning outcomes might be evidenced through a short portfolio practice.</li> <li>3. Contracting arrangements should be considered – to liaise with PaLS and ask that training in PACE be a mandatory requirement for all individuals working with agency organisations. [contact Gerry Gormley]</li> <li>4. Publish which wards are using PACE currently within HSC trusts to bank and agency managers and keep the list updated. Request that bank and agency staff being used regularly in those wards are trained, if not already.</li> <li>5. Identify the roll out plan in advance and keep this live in each Trust.</li> <li>6. Provide learning through a video/ e-learning that can be completed online and then used in conjunction with the PACE Passport.</li> <li>7. Use the Allocate e-roster to identify who has the PACE 'skill' and who does not. Use the e-roster to request that skill when asking for staff.</li> </ol> <p>AR updated the PACE spread plan and will circulate for to group to check and confirm</p>	<b>All</b>
<b>5</b>	<p><b>Resource pack and Training</b> – due to time restrictions not discussed. To be included as agenda item onto next month's meeting.</p>	<b>PM</b>
<b>6</b>	<p><b>Any Other Business</b></p> <p><b>MB</b> RCN abstract due in for Friday 22 June 2018 – SQE presentation to be submitted by Michelle</p> <p><b>JP</b> now undertaking an SQI fellowship in her Trust – will enable allocated PACE time</p> <p><b>PM</b> WHSCT is currently piloting a Tissue viability prevention plan in 2 wards which will be monitored for 20 weeks. Currently each Trust has their own prevention plan – apart from the Western.</p> <p>All agree that Care bundles etc. should be standardised regionally</p> <p><b>AR</b> To meet with a group of Nurse Specialists during July 2018.</p>	<b>MB</b>
<b>Date and time of next meeting: 18 July 10:30-12:30 2018.</b>		