

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






Tuesday 20th March 2018 10:30-13:30 NIPEC, Belfast





In Attendance:

Dawn Mackin	Governance Co-ordinator	SHSCT	DM
Penny Moore	Lead Nurse	WHSC	PM
Mary Campbell	Practice Educator	WHSC	MC
Margaret Kyle	Facilitator	NHSCT	MK
Jane Patterson	Facilitator	SEHSCT	JP
Audrey Dowd	Facilitator	BHSCT	AD
Lorraine Bell	Facilitator	BHSCT	LB
Julie-Anne McKeown	Nurse Development Lead	BHSCT	JMK
Fiona Kidd	Nurse Development Lead	BHSCT	FK
Sharon Moffett	Facilitator	BHSCT	SM
Michelle Burke	Professional Officer	NIPEC	MB

Apologies:
Vanessa Eastick

Agenda Item	Notes	Action
1	<p>Welcome and apologies</p> <p>MB welcomed everyone and the action notes from 22nd February 2018 will be agreed electronically.</p>	
2	<p>Matters Arising</p> <p><i>Adult record</i> MB updated the group on the progress of the final draft .Following consultation with staff it was agreed by 4 out of the 5 trusts that the booklet would work better as one and all agreed the record would flow better if the ongoing risk assessments were at the back. The final draft will be on the agenda of the next working group meeting , 29th March for agreement.</p> <p>On behalf of the group PM requested recording an acknowledgement of the extensive work that was completed by MB on the adult record especially the risk assessments.</p> <p><i>HEI evaluation</i> The proposal was tabled and circulated to the group to update but was strictly not for sharing.</p> <p><i>SQE programme</i> An update on the programme was provided, the aim had been refined several times to be very specific - to increase bedside recording. This already happens in Craig ward so the aim there will focus on increasing person involvement. Discussion followed on bedside handover and bed end charts. FK advised of the work that was going on regarding bed charts in the BHSCT with Geraldine Byers.</p> <p>MB demonstrated the share point and discussed how it would be set up for the facilitator meetings as it was easily accessible in all 5 trusts.</p> <p>Share point for facilitators accessed at: https://community.sharepoint.hscni.net/sites/pacefac/SitePages/Home.aspx</p>	<p>MB to set up</p>

	<p><i>Children's and ED facilitators</i> It was agreed that the children and ED facilitators will be invited along to the next meeting and quarterly thereafter.</p> <p><i>Recording existing needs</i> Extensive discussion was held on how existing needs are recorded to capture ongoing assessment, plan of care and evaluation. It was agreed MB would formulate a diagram to explain the process. This would be non-prescriptive and evolve in each care setting.</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  PACE recording process </div> <div style="text-align: center;">  adult recording care process 190318.docx </div> </div>	MB to send
3	<p><i>Care settings implementing PACE</i> No new care settings implementing PACE</p> <p><i>Care settings not meeting the criteria</i> Table updated , JP to submit SET</p>	JP to send
4	<p>Progress</p> <p><i>Event dates</i> Nursing language will be held on 22nd March 2018.</p> <p>Discussion was held regarding the workshop on the 28th March 2018 – review of PACE. MB to confirm final programme with Angela Reed and circulate.</p> <p>Discussion on the panel representation was held and agreed. MB will send out a template with representative names and area of focus. Each trust has nominated 2 staff either facilitator or champions that will discuss enablers/barriers to success lasting 5 minutes.</p> <p>Postcard stories for those attending that are not on the panel and are sister/charge nurse or champion of care settings that have implemented PACE and/or what worked well' , 'what did not work well' could be completed</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  postcard stories.docx </div> <div style="text-align: center;">  What worked well/NOT worked well : </div> </div> <p>MB reviewed attendance for the day and advised that needed to encourage the champions to attend. The group agreed that these are particularly challenging times affecting the ability to release frontline staff.</p> <p><i>Review spread plan</i> The updated tabled GNATT which includes implementation and re-measurement was discussed and MB would make agreed amendments and send to the group</p> <div style="text-align: center;">  REVISED IMPLEMENTATION AN </div>	<p>MB to circulate</p> <p>Mb to send</p> <p>MB to send</p>

<p>4</p>	<p>Resources and training</p> <p>The following resources were discussed</p> <ul style="list-style-type: none"> • Revised prompt <ul style="list-style-type: none"> ○ This has been updated in line with the final draft of the adult record and will be uploaded on the microsite once the record is available on wards • Guidance on needs <ul style="list-style-type: none"> ○ This was felt to be an extremely helpful resource. MB to finalise and upload to microsite  <p>V3 Guidance on NEEDS MAR 18.docx</p> <ul style="list-style-type: none"> • NEWS and PACE <ul style="list-style-type: none"> ○ As the NEWS is regional this will be finalised at the next meeting • Bed end charts <ul style="list-style-type: none"> ○ This is a general guide due to the vast variation of bed end charts in practice across the region , to be finalised at the next meeting • Skin bundle <ul style="list-style-type: none"> ○ There is great variation in the region with each trust having their own version with elements of assessment/plan of care/evaluation and recording of interventions. At this stage it is not envisaged that a regional skin bundle will be developed. Work has begun in the WHSCT with tissue viability to produce resources that would aid the recording of assessment/plan of care/evaluation and interventions for pressure ulcer management and prevention. PM will update group on this work. WHSCT tissue viability lead will update the other 4 leads with the progress of the work <p><i>Real life stories</i></p> <p>These can continue to be collected</p>  <p>postcard stories.docx</p> <p><i>Logo and Newsletter</i></p> <p>MB demonstrated sample logo and one was agreed. MB to source logo.</p>  <p>PACE logo march 18.docx</p> <p>The newsletter was demonstrated and content agreed. This would be March 2018 , MB to complete and upload to microsite.</p>	<p>MB to upload</p> <p>MB to add to the agenda</p> <p>PM to update group</p> <p>ALL continue to collect</p> <p>MB source logo</p> <p>MB to upload</p>
<p>5</p>	<p>Any Other Business</p> <p><i>NOAT</i></p> <p>The long NOAT for the following care settings has been revised and tabled</p> <ul style="list-style-type: none"> • Adult inpatient  <p>NOAT profile indicators ADULT INP</p>	

- Children's inpatient



NOAT profile
indicators CHILD INP1

- Emergency Department



NOAT profile
indicators ED march 1

- Learning Disabilities



NOAT profile
indicators LD march 1

Consultation taken through facilitators and/or expert reference groups. The children's inpatient has been tested.

Future facilitators meeting

It was agreed with AR that the meetings would continue monthly. MB to circulate future dates.

Handover project

Associate SPO Bernadette Gribben had request feedback on the handover project specifically the principles piece. JP and PM on group will feedback directly. MB will take feedback from others and forward to BG.

**MB upload
microsite**

**MB to
circulate**

**MB to
feedback**

Date and time of next meeting:

TBC