Recording Care Working Group Meeting

NIPEC Offices, Belfast Thursday 16th August 2018, 10:00 – 12:00hrs

<u>Attendance</u> :			
Suzanne Pullins	Assistant Director Nursing (teleconference)	NHSCT	SP
Linda Kelly	Assistant Director Nursing (Chairing)	SEHSCT	LK
Jane Patterson	Patient Safety Officer,	SEHSCT	JР
Liz Campbell	Safe &Effective Care Manager,	SEHSCT	LC
Penny Moore	Lead Nurse, Governance,	WHSCT	PM
Mary McCullagh	Acting Assistant Nursing Service Manager	WHSCT	MM
Susan Carlisle	Nurse Lecturer,	QUB	SC
Paula Fearon	Nursing Governance	SHSCT	PF
Angela Reed	Senior Professional Officer	NIPEC	AR

Apologies:

Dawn Connolly Naomi Baldwin Deirdre Cunningham

Note Taker

Angela Reed, NIPEC

Agenda Item	Notes	Action	
1	Welcome and apologies		
	LK welcomed everyone to the meeting. Apologies taken as above. Round of introductions provided for those on the teleconference		
2	Notes of the previous meeting		
	Action Notes of 6 June 2018 were agreed as an accurate record of the meeting with no amendments.		
3	Matters arising		
	Adult Record	Adult record to	
	AR provided an update as to the progress of the document. AR to send final document to members of the Working Group for approval when completed by Adrian Knipe BHSCT medical illustrations. Document to then go to the SG meeting in September 2018.	be sent to WG members following completion by MI BHSCT	
	Printing numbers of adult record		
	PM has confirmed as of 15/08/18 there were 3 weeks – 12 weeks reordered.		
	Discussion regarding regional procurement and need to potentially retender if other trusts are joining. PM to provide contact details to AR –	enable discussion with HSCTs regarding procurement.	

arrange meeting with SP and LK and AR. Procurement individuals from SHSCT and SEHSCT to join meeting – PF and LK to organise Trust representatives.

Update on MH pathway

AR to send email to Briege Quinn for update as there have been no further meetings since MB left NIPEC.

AR to email BQ regarding update on MH pathway.

Newsletter production

SG had asked that the WG expedite this matter for the autumn. Facilitators group has also agreed to help. Due for facilitators meeting next week. AR to coordinate.

AR to coordinate newsletter contributions.

Feedback from meeting with workforce ADNs

Potential actions had been identified and were detailed to the group. Members reflected that some work in this area was already underway in some trusts: PM — refresher sessions for PACE in WHSCT had identified that many temporary staff are on wards. PM meeting with bank coordinator — learning is that staff need to be steeped in using PACE to be able to switch between approaches.

LK to explore scale and spread sessions with Pedro Delgado

Use of practice educators was also mentioned and the need for implementation science to be at the heart of implementing PACE. LK mentioned that some sessions were going to be provided by HSCNI with Pedro Delgado to support scale and spread of regional priorities – LK to explore opportunity to consider PACE as a priority and potentially offer these sessions to staff involved with rolling out PACE. Members also expressed the view that the proposed evaluation should be expedited.

AR to request an update from the office of CNO again in relation to R&D office evaluation.

Discussion around the need for identifying what shouldn't be recorded.

Audit sample size

Process of audits to be defined –recognition of time constraints for staff – to be taken to facilitators meeting.

Process of audits to be defined - to be taken to facilitators meeting.

New tool 5 per month reporting 15 per quarter per clinical environment. Take to facilitators group

4 Feedback from Steering Group

- Celebration Newsletter
 Covered under matters arising.
- PACE spread plan review
 Update on confidence and supply funding given members to discuss where application process is in each trust. Refresh with facilitators group next week and report directly to SG in September.

PACE spread plan to be reviewed at facilitators meeting

Audit numbers (5 or 10 record)
 Covered under matters arising.

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	 RQIA representation During a recent meeting with the CE of RQIA, NP had raised the professional membership of a range of regional groups. Olive MacLeod had advised that she would be soon appointing professional leads within the organisation and that individual would then be fielded to a range of meetings to represent the organisation. 	
5	Encompass Update	
	NP had reported at SG that the programme board meeting for June 2018 had been cancelled, therefore there was little further to report from the last SG meeting. CB had provided an update in relation to the approval of the Outline Business Case and appointment of technical staff for the programme of work at the last SG meeting. AR also added that a number of people had updated CNMAC at the end of the month in relation to information standards, Encompass and Nursing languages. LK raised awareness that staff within trusts had been asked to look at scenarios for Encompass during a week-long evaluative process. Discussion ensued regarding appropriate membership of the evaluative groups from a nursing perspective – to seek clarification.	Clarification to be sought in relation to nursing representation at evaluation week for encompass.
6	SQE project	Remove SQE
	Future date for presentation had been arranged – this item could be removed from agenda.	from future agendas.
7	 Specialist Nurse principles for practice AR had met with specialist nurses to define work that needed to be done for the future. The membership of the original group had shifted and the new membership felt that wider issues needed to be taken care of included uni-professional records that were not made in patient records or stored in medical records. Work is progressing slowly due to lack of central resource in NIPEC currently. Children's improvement work Work being taken forward as part of PACE implementation. Emergency Department record and improvement work Each trust representative to explore what is happening with the nursing ED records in their organisation. Different processes of retaining records for people transferred out of ED appeared to be in place - copies often scanned and kept on symphony system. Query regarding the bed rails assessment format from WHSCT Learning Disabilities record and improvement work Update in relation to collaborative provided and future work. Again capacity in NIPEC was slowing opportunity down to further 	
	progress work. • Care Planning	

Reports from HSC Trusts – spread plan to be updated at next facilitators meeting. Reported pressures were movement of staff, sickness absence, and leadership of Ward Sisters and Charge Nurses. LK stated that she had been asked to chair DN framework KPI group – where it was suggested in scoping that record keeping would be an inclusion. NOAT NOAT has not yet been stood down due to a confirmation being required from BHSCT that they have a system in pace to replace NOAT. 7 **Any Other Business** LK reported that Handover principles being finalised with BG – suggestion in NIPEC business plan was that they would be tested in one PACE ward in each trust. Student engagement – QUB using PACE in year 1. Following discussion members agreed that the issue was whether or not the opportunity to practice PACE was out there for students when out in clinical practice. Areas not using PACE – newsletter to be used to inform staff that they **Newsletter to** should not 'have a go' from reviewing records made in PACE wards of inform staff to patients who are transferred internally. not to introduce **PACE** without Implementation of new adult document: Following discussion there was appropriate training. an agreement that the document should be implemented across organisations in one rollout plan due to the movement of people around Facilitators to the system, preloaded with training on individual sites. Sample identify potential dates documents would be needed in advance. Facilitators to put dates around for roll out of implementation. For some small sites there would be the opportunity to adult document. small scale test and then regionally feedback learning. PM – recording care at the bedside – issue about where records are kept. Also dialogue at patient side amongst other patients – short discussion took place which reflected on the fact that this practice was happening elsewhere across the region successfully. Shared learning to be offered at facilitators meetings. AR to send ED quidance to Guidance around use of ED record and onward travel to other clinical members of areas requested – guidance to be sent to WG members. group. SP – surgical elective short stay patients NHSCT have several iterations Raise short of a 24 hour record. Issue to be raised at SG and then organise stay pathway workshop for autumn to use adult document and review for applicability. at SG. Date and time of next meeting 8 24th October 2018, NIPEC Offices, 9 – 11am.

ACTION	Comment	Completed/O ngoing
Adult record to be sent to WG members following completion by MI BHSCT.		Completed
Meeting to be arranged to enable discussion with HSCTs regarding procurement.		Completed – no longer required
AR to email BQ regarding update on MH pathway.		Completed
AR to coordinate newsletter contributions.		Ongoing
LK to explore scale and spread sessions with HSCNI potential of learning from Pedro Delgado planned session		Ongoing
AR to request an update from the office of CNO again in relation to R&D office evaluation.		Completed
Process of audits to be defined - to be taken to facilitators meeting.		Completed
PACE spread plan to be reviewed at facilitators meeting		Ongoing
Clarification to be sought in relation to nursing representation at evaluation week for encompass.		Completed
Remove SQE from future agendas.		Completed
Newsletter to inform staff to not to introduce PACE without appropriate training.		Ongoing
Facilitators to identify potential dates for roll out of adult document.		Ongoing
AR to send ED guidance to members of group.		Completed
Raise short stay pathway at SG.		Completed