Recording Care Working Group Meeting

NIPEC Meeting Room, Belfast Tuesday 29th January 2019, 2-4pm

Attendance:

Linda Kelly	Assistant Director Nursing (Chairing by teleconference)	SEHSCT	LK
Penny Moore Mary McCullagh	Lead Nurse, Governance, (by teleconference) Acting Assistant Nursing Service Manager for Surgery and Anaesthetics (by teleconference)	WHSCT WHSCT	PM MM
Lynn Wightman Suzanne Pullins	Lead Nurse, Safety & Quality Assistant Director Nursing(by teleconference)	BHSCT	LW
Naomi Baldwin	Senior Nurse Nursing Governance (by teleconference)	NHSCT	NB
Deirdre Cunningham	Senior Nurse Éducator (by teleconference)	CEC	DC
Dawn Connelly	Senior Nurse Manager Nursing Governance (by teleconference)		DCo
Angela Reed	Senior Professional Officer	NIPEC	AR

Apologies:

Jane Patterson	Patient Safety Officer	SEHSCT
Liz Campbell	Safe & Effective Care Manager	SEHSCT
Karen Devenney	Senior Nurse Manager	BHSCT
Susan Carlisle	Nurse Lecturer	QUB
Ann Marie Tunney	Nurse Lecturer	Ulster
Donna Gallagher	Senior Nurse Lecturer	OU
Dawn Mackin	Nursing Governance Co-ordinator	SHSCT

Notes: Lukasz Karpinski, Programme Administrator NIPEC **LKa**

Agenda Item	Notes	Action
1	Welcome and apologies AR & LK welcomed everyone to the meeting. LK thanked Linda Woods for her support so far in the administrative support role. AR highlighted role of the new Programme Administrator (LKa) for Transforming Nursing and Midwifery Data (TNMD) project. Apologies taken as above. Round of introductions provided for those on the teleconference.	
2	Notes of the previous meeting Action Notes of 24 October 2018 were discussed. DCo has advised that	LKa to amend notes 24 th Oct 2018.

Craigavon is using ED document and notes will be updated and agreed as an accurate record of the meeting. LKa to amend notes.

3 Matters arising

Adult Record

Printing numbers of Adult Record

A discussion took place in relation to number of printed records in current supply for each Trust. The group was advised that 17 weeks of supply has been ordered. AR advised that this will take us over April and we should make a decision to enable the new document implementation process where the old version will no longer be in use following 'go live' – potential date: 1st April 2019.

SP supports order of 17 weeks of supply. AR agreed with that decision and also flagged up issues regarding governance and finance and the arrangements for another print run of the old document, given the challenges of determining the numbers of people being admitted to hospital environments.

SP out forward a proposal for smaller distinct clinical environments – such as the smaller local hospitals – to go live as a pilot test of implementation process. This was accepted and agreed as a potential way forward.

Use of PACE document only

AR advised that PACE facilitators completed an exercise as to whether or not two documents would need to be produced to enable both PACE and non-PACE environments. The Steering Group had agreed that core plans and other loose printed sheets were already in use across sites therefore from a governance perspective no further risk would be involved in adding documents to the PACE version. The decision had been taken, therefore, to print only the PACE document.

Cost savings

LK asked PM for an outline cost of the current booklets in use by comparison with the new one. PM highlighted prices as £14.30 per pack of 50 and minimum order is 400 packets equals 28p per document.. NHSCT, WHSCT and BHSCT using current assessment booklet. It was accepted that the new document may be more costly due to coloured sheets and traffic lights system – new pricing will be sought once regional procurement has been completed. DCo confirmed that she would obtain pricing for SHSCT for comparison. LK would also attempt to provide costings from SEHSCT.

Cost to be on the agenda for next meeting.

Scale and spread project

Discussion regarding the opportunity in the region to participate within the HSCQI Quality Improvement Network for 2019-2020 and beyond

Consideration of the process for implementation and inclusion of smaller hospitals as test sites to be taken forward by PACE facilitator group.

LKa to put costs for next meeting agenda

was taken forward. Unfortunately PACE was identified as a priority in the region – particularly given the uni-professional nature of the work. LK provided positive feedback from the multi-professionals in relation to PACE at the HSCQI meeting. **Feedback from Steering Group** 4 MH pathway update Briege Quinn had given an update at the Steering Group regarding the MH pathway. PACE approach approved by multidisciplinary teams for the region. Some discussion regarding electronic "You in Mind" project. Most of trusts are electronic in MH settings (PARIS platform) – Briege had advised that the MH group were mindful of the Encompass work, however were intending to progress the electronic format regardless. Encompass update Claire Buchner had given an update on the progress of the programme of work to date along with Nicki Patterson. Claire had been asked to provide a briefing paper for SG on visits relating to the procurement process of Encompass and learning from a nursing and midwifery perspective. Awaiting feedback from Claire. 5 **Encompass Update** AR mentioned Digital Care Forum was due to meet in February but there was no update. PM stated she had received no update either, also being in membership of this group. There had been limited information on Twitter recently regarding staff information days – other than this communication had been sparse from the Encompass programme. LK announced that the SEHSCT had been successful in their bid to become the first HSCT for implementation of Encompass. Following discussion it was broadly agreed that engagement with nurses and midwives needed to be continuous throughout the process of development and implementation. 6 Work streams for working group Short stay workshop AR gave an update: workshop on 17/12/2018 very good engagement with trust representatives. Key summary: 1) difficult timeframe, agreed in view of winter pressures to set up small sub group (ERG). 35 people in the room in December – agreement was for 2 representatives per trust to take forward discussions and produce an outline document. Colleagues acknowledged That the work begun by the late Laura Byrne in NHSCT was a format from which to move forward. 10 reps in total from trusts and NIPEC reps will look at this and decide what is taken forward through a further workshop on 8th February in Clotworthy House. Children's improvement work AR informed that Michelle Burke had taken this work forward and on 6th Feb 2019 another workshop was being held in Mossley Mill. AR was to attend that meeting to determine a way forward for this work.

Emergency Department record and improvement work

Use of 'flimsy'

A conversation regarding the use of 'flimsy' records had been started in some trusts prior to Christmas however, more work was necessary to establish current practice across these departments.

NHSCT – ED department using PACER and well received by staff. Further work to be done in this area.

BHSCT: RVH ED and Mater using document and PACE and really like it. Issue with ED copying it to move/transfer patients, hard copy goes to ward and ED keeps the copy.

SEHSCT – document not fully implemented across ED departments as yet.

WHSCT - PM both documents 6th December implemented.

SHSCT Craigavon using PACE document, everyone trained, query re audit process, photocopies probably done.

LK reviewed the process of audit in EDs – AR drew attention to the resources on the NIPEC website with the presentation of the NOAT indicators for ED areas. AR suggested review of indicators – to be taken forward.

Learning Disabilities record and improvement work

This work remained on hold until NIPEC appointed new staff.

Care Planning

AR advised regarding workshop on 18th January, went well but a need was identified for university staff to engage in the PACE process. Possible workshop in March was mentioned with PACE facilitators, universities and CEC. Workshop achieved a lot, feedback from facilitators: needs to be moving forward with new staff. PM: two areas identified – regional agreed repetitions, patients admitted with several community problems – standardised approach to it. As yet there had been no agreement for a way forward with these issues – related to ongoing nursing needs and the potential for repetitious record keeping practice. Time had been identified for the next PACE facilitator meeting to review these discussions and determine a way forward.

In addition, it had been mentioned that there was a possibility of exploring the use of the coroners' terminology for retrospective noting. This has been as a result of work with the coroner and the RCN - AR to contact Rita Devlin re coroners' advice.

NOAT

All trusts with the exception of BHSCT had moved their nursing quality

Review of indicators to be taken forward

PACE facilitators to be asked for opinions.

LKa to put repetition and retrospective records - follow up for next meeting agenda

AR to contact Rita Devlin re coroners video

	indicators inclusive of NOAT to their own systems. LW updated that this is work in progress in BHSCT.	
7	Any Other Business	
	Inclusion of handover principles	
	LK provided an update – there was an ongoing need to include a test of the handover principles in the work plan in the near future.	
	AR updated with the PID having gone to the Steering Group meeting in December 2018. Transformation funds had been provided, 10 people in trusts, 2 WTE in Belfast and 1 per other trust. LKa in post from 21 st January 2019 but not fully released as yet. LKa admin support to 2 PO's, PACE facilitators – communication, web sites etc. Gillian McKee to join NIPEC as a professional officer next week to coordinate officers in trusts.	
	Work streams included:	
	 Adult document PACE roll out Preparation for Encompass District Teams Learning Disabilities Children's service areas Testing of the handover principles Audit of ED practice Short stay document 	
	In terms of prioritisation, there was an imperative on children's relating to the hyponatraemia enquiry and on Learning Disabilities relating to recent events in BHSCT. AR to support meeting to prioritise work streams with WG, PACE facilitators and Gillian to meet (teleconf. possible).	LKa to check LK, SP, AR diaries to get date for prioritisation meeting/telecall
	PM advised that WHSCT needs to recruit new person as Marian moving posts (in negotiations when and how).	4D - CD - L K 4-
	LK advised that in relation to District Nursing – KPI's workshop on 30 th January.	AR+SP+LK to determine stockage for children's
	PM got update from Martin Chadwick re children's "Me and my family" booklet – in relation to the readmission document less usage than estimated was evident. PM asked for current stockage. SP+AR+LK will get stockage levels of paper copies, AR+SP+LK to determine how many children's colleagues need.	booklet and need for it AR to email 5 AD's with what
	AR advised the group regarding new appointments under confidence and supply invoices on cost for goods and services, will email 5 AD's with what can be claimed for.	for
8	Date and time of next meeting Friday 15 March 2019, NIPEC Meeting Room, 10-12md	

ACTION	Comment	Completed/On				
		going				
24 th Octobe	24 th October 2018					
Podcast of Recording care Story to be explored		Ongoing				
29 th Januar	ry 2019	-				
LKa to amend notes 24th Oct 2018.		Completed				
Consideration of the process for implementation and inclusion of smaller hospitals as test sites to be taken forward by PACE facilitator group.		Ongoing				
LKa to put costs for next meeting agenda		Completed				
Review of NOAT indicators to be taken forward		Completed				
PACE facilitators to be asked for opinions		Completed				
LKa to put repetition and retrospective records - follow up for next meeting agenda		Completed				
AR to contact Rita Devlin re coroners video		Ongoing				
LKa to check LK, SP, AR diaries to get date for prioritisation meeting/telecall		Completed				
AR+SP+LK to determine stockage for children's booklet and need for it		Ongoing				
AR will email 5 AD's with what can be claimed for		Completed				