Recording Care: Evidencing Safe and Effective Care Working Group Meeting

NIPEC Offices, Belfast Thursday 29th March, 2018

	<u>In Attendance</u> :		
Linda Kelly	Assistant Director Nursing	SEHSCT	LK
Suzanne Pullins	Assistant Director Nursing	NHSCT	SP
Jane Patterson	Patient Safety Officer	SEHSCT	JP
Naomi Baldwin	·	NHSCT	NB
Elish Boyle	OBO Deirdre Cunningham	CEC	EB
Paula Fearon	Governance Lead	SHSCT	PF
Michelle Burke	Professional Officer	NIPEC	MB
Apologies:	Liz Campbell		
Ruth Bailie	Penny Moore		
Donna Gallagher			
Susan Carlisle			
Dawn Connolly			

Agenda Item	Notes	Action
1	Welcome and apologies	
	LK welcomed everyone to the meeting. Apologies noted.	
2	Matters Arising	
	Action notes of 10 th January were agreed as an accurate record of the meeting.	
	Adult record review	
	The record has been through significant consultation, attached timeline of process:	
	Timeline of the cons process 2017.docx	
	The majority of the agenda time was given over to agreeing the implementation plan of the adult record.	
	1. Feedback from December's testing resulted in minimal changes	
	Summary log of feedback:	
	Adult record review 10th jan 18.docx	
	 Feedback from the 4 week testing phase in December 2017 and from PACE facilitators in all 5 HSC Trusts indicated that it would flow better as one booklet but two sections – initial and ongoing. The PACE facilitators also highlighted the requirement to evidence if identified needs were acute or existing. As agreed at the last meeting, MB had contacted the following individuals/groups involved in the risk assessments etc and sourced the up to date versions of the resources, assigning a QR code aiding ease of access. 	

	 IPC IPC forum Naomi Baldwin 	
	 IPC forum Naomi Baldwin Delirium 	
	 PHA Nicola Cullen – the delirium tool has only just been implemented , the ADN's have advised that to remove from record 	
	 Moving & Handling Ergonomics NI Back Exchange Maria Rush 	
	 Falls/Bedrails Falls Nurse Sharon Love NHSCT 	
	 MUST Dietitian Paul Mullholland SEHSCT SPO Cathy McCusker PGN strategy group 	
	 SPO Cathy McCusker PGN strategy group Braden/Skin check TVN leads NI 	
	 Authors of Braden Scale , America Audit-C 	
	 Dr Keith Kerrigan Consultant Clinical Psychologist NHSCT Critical medications 	
	 Critical medications Governance Pharmacist Jilly Redpath SHSCT 	
	1, 2, 3 and 4 informed version FEB18 one booklet with 2 sections.	
	The record will be formatted by medical illustration adhering to the national standards. The estimated timeframe for completion is mid -April.	
	Next steps:	
	 Convene meeting with ADN, WG and PACE facilitators to: 	
	 agree the changes, principally 2 and 3 agree an implementation plan 	
	AR to discuss guidance with LK.	AR to discuss
	Update on MH pathway	with LK
	MB updated on this work stream – AR will replace MB.	
	MB updated a second meeting with Briege Quinn and Martina Mc Cafferty (leads on MH Pathway) regarding PACE. BQ and MM will review how this could be implemented and link back with AR.	
	Bed end charts	
	Discussion was held and it was agreed that this would be a very significant piece of work. LK to raise at SG.	LK to raise at SG
	Regionally agreed standards	
	MB advised that the process for RCN endorsement was complete and that HCSW reference needed to be replaced by Nursing Assistant.	AR to Update standards
3	Feedback from Steering Group	
	Updated at last WG meeting	
	Shared Learning from Improvement and HSC Trust	
	Updated at last WG meeting	
4	E-record No further updates	

5	SQE	
5	LK provided an update. MB demonstrated share point that was sent up to facilitate communication, this can be access across HSC. One has also been set up for PACE facilitators group.	
7	Work streams for WG	
-	Nurse specialist care settings – principles for practice	
	MB provided an update – principles for practice have been drafted, this work will be handed over to AR.	
	Children's Record	
	MB advised that there had been significant desire from children's inpatient to produce a record for short stay areas. It had been previously agreed that improvement work and sustaining implemented work would take priority over development work. LK to raise again at SG.	LK to raise at SG
	Emergency Department Record	
	MB provided an update – the record has been implemented in 8 out of the 9 ED's and will be implemented in the remaining 1, April 18. There was variation in the implementation of PACE due to unprecedented winter pressures.	
	Learning Disabilities (LD) Record	
	MB provided an update –the assessment record has now been updated. The group has access to NOAT and improvement resources.	
	Care Planning	
	Care settings – implemented PACE Care settings that have implemented PACE are now available on the record keeping microsite: <u>http://www.nipec.hscni.net/resource-section/improve-record- keeping/pace/</u>	
	Implementation plan Increased implementation plan to 20 weeks discussed. SP emphasised the importance of holding gains.	GANTT to be agreed and spread plan updated
	This would be agreed at the next PACE facilitators meeting and the spread plan would be updated <i>Recent events</i> The 2 events nursing language symposium PACE implementation/embedment 	AR put on agenda next PACE facilitators meeting
	Were discussed and feedback will be given at the next meeting	AR to provide report
	NOAT	
	Through the expert reference groups and PACE facilitators the NOAT indicators have been aligned with the following care settings: o Adult in-patient	

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	 Children's inpatient 	
	 Emergency Department 	
	 Learning Disability 	
	These indicators are available on the record keeping microsite and will be put on the NOAT online system in due course. Currently BT and NT are the only trust utilising the online system. Discussion followed regarding the process for using the short NOAT and long NOAT. Having 2 audit tools for record keeping may lead to inability to use data efficiently. It was also agreed that now these resources and tools are available an implementation plan would be required. LK to raise both issues at SG.	LK to raise at SG
8	Any Other Business	
	 Future meetings AR will be responsible for the WG meetings. Reporting on work streams Discussion was held around reporting on the progress of implemented work streams. It was agreed that it would be the responsibility of the trust representatives to report at meeting progress of work streams. LK and SP acknowledged and thanked MB for managing the working group. 	To be placed on the agenda MB to send out template
9	Date and time of next meeting: Wednesday 6 th June , 2018 14:00-16:00 , NIPEC Building , Belfast	