

**Falkirk
Health and Social Care
Partnership**

Falkirk Health and Social Care Partnership

CLINICAL AND CARE GOVERNANCE FRAMEWORK

The Scottish Government, National Health and Wellbeing Outcomes: A framework for improving the planning and delivery of integrated health and social care services:

“Health and social care services should focus on the needs of the individual to promote their health and wellbeing, and in particular, to enable people to live healthier lives in their community. Key to this is that people’s experience of health and social care services and their impact is positive; that they are able to shape the care and support that they receive; and that people using services, whether health or social care, can expect a quality service regardless of where they live.”

Public Bodies (Joint Working) (Scotland) Act 2014

28 March 2018

1. INTRODUCTION	3
2. PURPOSE OF THE FRAMEWORK	3
3. DEFINITION OF CLINICAL AND CARE GOVERNANCE	4
4. ROLE OF A CLINICAL AND CARE GOVERNANCE COMMITTEE IN MONITORING AND ASSURING THE QUALITY AND CARE OF SERVICES	5
5. ROLES AND RESPONSIBILITIES	6
CHAIRS, COUNCIL LEADERS, NHS NON-EXECUTIVE DIRECTORS & ELECTED MEMBERS	6
CHIEF EXECUTIVES, CHIEF OFFICERS, DIRECTORS OR EQUIVALENT	7
6. PROFESSIONAL LEADERSHIP	8
NHS MEDICAL DIRECTOR	8
NHS NURSING DIRECTOR.....	8
CHIEF SOCIAL WORK OFFICER	9
ALL THOSE PROVIDING CARE & SERVICES	9
7. REPORTING ARRANGEMENTS	10
8. INFORMATION, GOVERNANCE AND SHARING	10

1. Introduction

The main purpose of the integration of health, social work and social care services in Scotland is to improve the wellbeing of people who use such services, in particular those whose needs are complex and who require services and support from both health and social care.

Falkirk Integration Scheme, drawn up for the Falkirk Integration Joint Board (IJB) is intended to arrange services that can deliver better outcomes for the people of Forth Valley. Services will be set up to deliver the national health and wellbeing outcomes that are prescribed by Scottish Ministers in Regulations under Section 5(1) of the Public Bodies (Joint Working) (Scotland) Act 2014¹.

The national health and wellbeing outcomes apply across all integrated health and social care services, and ensure that Health Boards, Local Authorities and IJBs are clear about responsibility and accountability for the delivery of shared priorities. Scottish Ministers will also bring together performance management arrangements for health and social care. National health and wellbeing outcomes, together with the integration planning and delivery principles, are grounded in a human rights based and social justice approach.

2. Purpose of the framework

The context in which the clinical and care governance framework, for the IJB will be implemented is one of a developing legislative framework with a wide range of policy drivers. Partner organisations across Falkirk and NHS Forth Valley will work to deliver services that are responsive, integrated and coordinated to meet the needs of individuals and communities in line with the strategic intentions expressed in law and policy.

Improved outcomes and effective services for service users and their unpaid carers require alignment of culture, values and language. This framework is intended to empower clinical and care staff to contribute to the improvement of quality of care. To make care safer, more effective and person centred – by making sure that there is a strong voice of the people and communities who use services.

The clinical and care governance arrangements described in this framework are designed to assure Falkirk IJB, NHS Forth Valley and the Council, that the quality and safety of services delivered by its staff, and the outcomes achieved from delivery of those services, are the best possible and make a positive difference to the lives of the people of Forth Valley. The diagram at Figure 1 illustrates lines of accountability for the Falkirk IJB, NHS Forth Valley Board and Falkirk Council.

It is acknowledged that this framework will be updated to reflect experience of joint working and as local requirements for services are better understood and evolve.

In addition the framework will evolve as service delivery models change and the workforce become more integrated and changes to regulation occur.

¹ Power to prescribe national outcomes [Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#)

3. Definition of Clinical and Care Governance

The Scottish Government's National Framework, to guide Health and Social Care Partnerships on the setting up of their clinical and care governance arrangements has served as a useful foundation document for the Falkirk IJB Framework.

3.1. Annex C of the National Clinical and Care Governance Framework sets out in some detail the working definition to be applied to Integrated Health and Social Care Services in Scotland. This working definition is as follows:

- a) Clinical and care governance is the process by which accountability for the quality of health and social care is monitored and assured. It should create a culture where delivery of the highest quality of care and support is understood to be the responsibility of everyone working in the organisation – built upon partnership and collaboration within teams and between health and social care professionals and managers.
- b) It is the way by which structures and processes assure Integration Joint Boards, Health Boards and Local Authorities that this is happening – whilst at the same time empowering clinical and care staff to contribute to the improvement of quality – making sure that there is a strong voice of the people and communities who use services, their unpaid carers and their families.
- c) Clinical and Care Governance should have a high profile, to ensure that quality of care is given the highest priority at every level within integrated services. Effective clinical and care governance will provide assurance to patients, service users, unpaid carers, clinical and care staff, managers, and members of the Integration Joint Boards.
 - Quality of care, safety of service users, effectiveness and efficiency drive decision making about the planning, provision, organisation and management of services.
 - The planning and delivery of services take full account of the perspective of patients, service users, unpaid carers, and their families.
 - Unacceptable clinical and care practice will be detected and addressed.
- d) Effective Clinical and Care Governance is not the sum of all these activities; rather it is the means by which these activities are brought together into this structured framework and linked to the corporate agenda of Integration Authorities, NHS Boards and Local Authorities.
- e) An important element of clinical and care governance is to support staff in continuously improving the quality and safety of care. However, it will also ensure that wherever possible poor performance is identified and addressed.
- f) Clinical and care governance issues may relate to the organisation and management of services rather than to individual decisions. All aspects of the work of Integration Authorities, Health Boards and Local Authorities should be driven by and designed to support efforts to deliver the best possible quality of health and social care. Clinical and care governance is principally concerned with those activities which directly affect the care, treatment, protection and support people receive whether delivered by individuals or teams.

4. Role of a Clinical and Care Governance Committee in monitoring and assuring the quality of care and services

The work of the IJB will be outlined in the Strategic Plan. This will link closely with Falkirk's Strategic Outcome Local Delivery Plan (SOLD) developed by the Community Planning Partnership. Successful strategic planning will result in partnership working to deliver and plan services that focus on people and their outcomes. Each IJB will have a plan that sets out its arrangements for integrated health and social care and how those arrangements will lead to the improvement of the outcomes for the communities it serves.

The quality of care provided within Falkirk Council and Forth Valley NHS partnership will be overseen by a Clinical and Care Governance Committee (CCGC) reporting to the IJB. This will provide assurance to the IJB, NHS Forth Valley and Falkirk Council that clinical and care governance as part of the planning and delivery of services, is being delivered effectively.

To maintain their independence as required by statute, the quality of decision making by Mental Health Officer's with regard to practice (including Adults with Incapacity and Guardianship responsibilities) will remain the responsibility of Falkirk Council.

The members of the Clinical Care Governance Committee will include:-

Members of the Committee:

- 4 members of the IJB to include 2 voting members, a third sector or public representative and a staff representative

In attendance as professional advisors:

- Chief Social Work Officer
- Chief Officer
- Professional Lead – GP*
- Professional Lead – Nurse/AHP*
- Head of Social Work Adult Services
- Head of Clinical Governance

* The Medical Director and Director of Nursing will provide support and advice to the Professional leads

The role of the CCGC will be to ensure that there is effective clinical and care governance within the Partnership that provides assurance to patients, service users, unpaid carers and their families, clinical and care staff, managers, and members of the IJB.

The CCGC will be responsible for ensuring that the five key principles outlined in the National Framework of clinical and care governance is delivered by the IJB:

1. The partnership has clearly defined governance functions and roles are performed effectively.
2. Values of openness and accountability are promoted and demonstrated through actions.
3. Informed and transparent decisions are taken to ensure continuous quality improvement.

4. Staff are supported and developed.
5. All actions are focused on the provision of high quality, safe, effective and person-centred services underpinned by a human rights based ethos.

The basis for the work of each CCGC is set out as five process steps in the National Framework:

1. Information on the safety and quality of care is received
2. Information is scrutinised to identify areas for action
3. Actions arising from scrutiny and review of information are documented
4. The impact of actions is monitored, measured and reported
5. Information on impact is reported against agreed principles.

This will include review and scrutiny as appropriate of key information including that relating to:

- The National Health and Wellbeing outcomes
- National Care Standards
- The quality and safety of integrated health and social care services, including health and safety issues
- Service user and carer engagement
- Thematic analysis of adverse event data including complaints
- Significant adverse events including significant case reviews
- Impact assessment and learning from external publications (including policies, guidelines, inquiries, monitoring and standards)
- Professional regulation and fitness to practice
- Responses to external scrutiny and internal investigation
- The quality of decision making by Mental Health Officers
- The quality of practice in relation to Adults with Incapacity, Adult Support & Protection and Mental Health Care and Treatment statutory framework
- Clear delineation of responsibility/accountability around the roles and interdependencies of the Chief Officer and the Chief Social Work Officer.

The CCGC will establish an information sharing and strategic relationship with the Chief Officers Public Protection Group.

5. Roles and Responsibilities

The National Framework identifies clear roles for members of the IJB and how they fulfil these.

Chairs, Council Leaders, NHS Non-Executive Directors & Elected Members will:-

- Create an organisational culture that promotes human rights and social justice, values partnership working through example; affirms the contribution of staff through the application of best practice including learning and development; is transparent and open to innovation, continues learning and improvement.
- Establish that integrated clinical and care governance policies are developed and regularly monitor their effective implementation.

- Seek reassurance that practice and standards related to public protection are robust.
- Require that rights, experience, expertise, interests and concerns of service users, unpaid carers and communities inform and are central to the planning, governance and decision-making that informs quality of care.
- Ensure that transparency and candour are demonstrated in policy, procedure and practice.
- Seek assurance that effective arrangements are in place to enable relevant Health and Social Care professionals to be accountable for standards of care including services provided by the third and independent sector.
- Require that there is effective engagement with all communities and partners to ensure that local needs and expectations for health and care services and improved health and wellbeing outcomes are being met.
- Ensure that clear robust, accurate and timely information on the quality of service performance is effectively scrutinised and that this informs improvement priorities. This should include consideration of how partnership with the third and independent sector supports continuous improvement in the quality of health and social care service planning and delivery.
- Seek assurance on effective systems that demonstrate clear learning and improvements in care processes and outcomes.
- Seek assurance that staff are supported when they raise concerns in relation to practice that endangers the safety of service users and other wrong doing in line with local policies for whistleblowing and regulatory requirements.

Chief Executives, Chief Officers, Directors or Equivalent will:-

- Embed a positive, sharing and open organisational culture that creates an environment where partnership working, openness and communication is valued, staff supported and innovation promoted.
- Provide a clear link between the organisational and operational priorities of NHS Forth Valley and Falkirk Council served by the IJB; objectives and personal learning and development plans, ensuring staff have access to necessary support and education.
- Implement quality monitoring and governance arrangements that include compliance with professional codes, legislation, standards, guidance and that these are regularly open to scrutiny. This must include details of how the needs of the most vulnerable people in communities are being met.
- Implement systems and processes to ensure a workforce with the appropriate knowledge and skills to meet the needs of the local population.
- Implement effective internal systems that provide and publish clear, robust, accurate and timely information on the quality of service performance.

- Develop systems to support the structured, systematic monitoring, assessment and management of risk.
- Implement a coordinated risk management, complaints, feedback and adverse events/incident system, ensuring that this focuses on learning, assurance and improvement.
- Lead improvement and learning in areas of challenge or risk that are identified through local governance mechanisms and external scrutiny.
- Develop mechanisms that encourage effective and open engagement with staff on the design, delivery, monitoring and improvement of the quality of care and services.
- Promote planned and strategic approaches to learning, improvement, innovation and development, supporting an effective organisational learning culture.
- Ensure compliance with professional standards, codes of practice and performance requirements and alignment of activities with organisational objectives and service user outcomes.
- Promote learning from good practice, adverse incidents, complaints and risks.
- Create an environment that supports the contribution of staff, their safety and professional development as well as supporting and enabling innovation.
- Establish clear lines of communication and professional accountability from point of care to Executive Directors and Chief Professional Officers accountable for clinical and care governance:
- This will include a relationship of accountability between the Adult Support and Protection Committee, the Child Protection Committee, the Strategic Oversight Group, MAPPA, the Alcohol and Drugs Partnership and Gender Based Violence. It is expected that the Public Protection Chief Officers Group would undertake this function.
- It is expected that this will include articulation of the mechanisms for taking account of the training environment for all health and social care professionals training (in order to be compliant with all professionals' regulatory requirements).

6. Professional Leadership

The Chief Social Work Officer, the NHS Medical Director and the NHS Nursing Director (together, "the CCG Leads") will take the lead role in relation to Clinical and Care Governance. The NHS Medical and Nursing Directors will have arrangements in place for co-ordinating these functions across clinical groups. The Chief Social Work Officer will have arrangements in place for co-ordinating these functions across social care groups.

NHS Medical Director

The NHS Medical Director is the individual appointed by NHS Forth Valley to provide the professional leadership for medical services and appointed by the Scottish Ministers as an Executive Board Member of NHS Forth Valley.

NHS Nursing Director

The NHS Nursing Director is the individual appointed by NHS Forth Valley to provide the professional leadership for nursing and midwifery services and appointed by the Scottish Ministers as an Executive Board Member of NHS Forth Valley.

Chief Social Work Officer

The role of the Chief Social Work Officer (CSWO) is to provide professional advice on the provision of social work services which assists authorities in understanding many of the complexities which are inherent across social work services. The principal functions relate to governance, management of risk, protection and the deprivation of liberty. The CSWO is a 'proper officer' in relation to the social work function: an officer given particular responsibility on behalf of a local authority, where the law requires the function to be discharged by a specified post holder. The CSWO has responsibility to advise on the specification, quality and standards of services commissioned.

The Medical Director and the Chief Social Work Officer will be responsible for providing professional advice to the IJB and the Chief Officer including any risks inherent in relation to any proposed actions.

All those providing care & services

Each individual professional is expected to ensure that their professional practice and continuing educational development is evidence based with a focus on regulatory and continuous professional development requirements and standards therefore they will:-

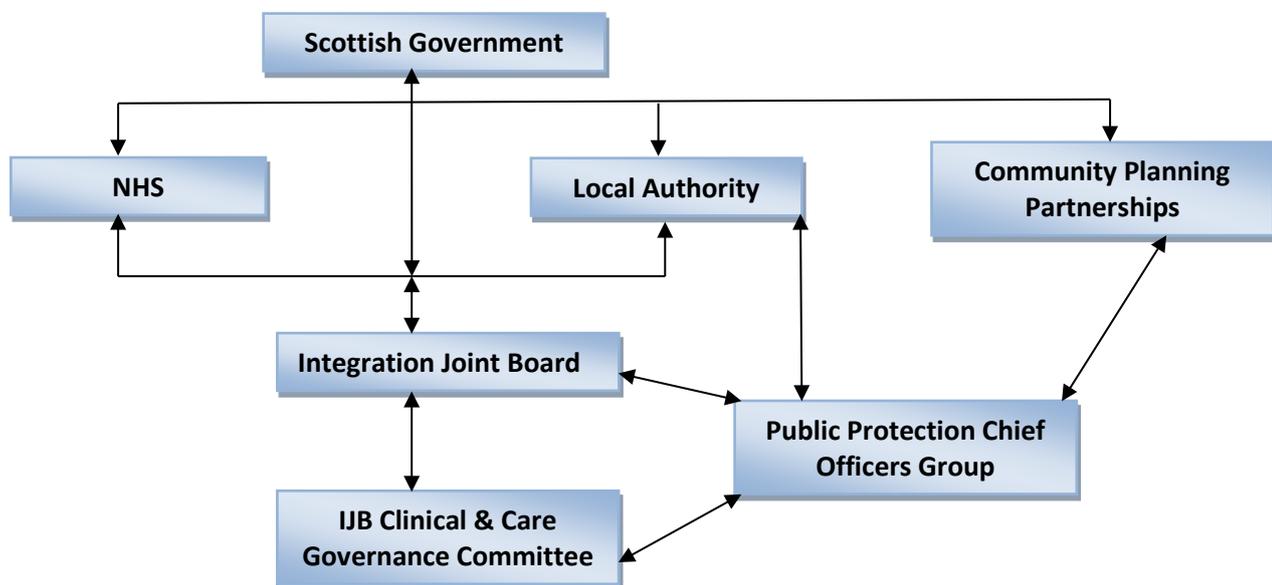
- Practice in accordance with their professional standards, codes of conduct and organisational values.
- Be responsible for upholding professional and ethical standards in their practice and for continuous development and learning that should be applied to the benefit of the public.
- Understand their responsibilities relating to Public Protection.
- Have the necessary policies and procedures in place to report and manage incidents of suspected, witnessed or actual harm.
- Ensure the best possible care and treatment experience for service users and families.
- Provide accurate information on quality of care and highlight areas of concern and risk as required.
- Work in partnership with management, service users, unpaid carers and other key stakeholders in the designing, monitoring and improvement of the quality of care and services.

- Speak up when they see practice that compromises the safety of patients or service users in line with local whistleblowing policy and regulatory requirements.
- Engage with colleagues, patients, service users, communities and partners to ensure that local needs and expectations for safe and high quality health and care services, improved wellbeing and wider outcomes are being met.

7. Reporting Arrangements

**Note - the governance diagram will be developed in the first development session of the new CCGC members, in advance of the inaugural committee.

The diagram below illustrates lines of accountability and reporting. They will send reports directly to the NHS Forth Valley Clinical and Care Governance Group and to the Falkirk Scrutiny Committee responsible for overseeing the quality of social work and social care services.



8. Information, Governance and Sharing

Existing information management and data sharing protocols will continue to be applied, and the standing principles that pertain to information governance will remain.