

Hampshire Partnership NHS Trust

CLINICAL GOVERNANCE AND RISK COMMITTEE

**Minutes of the meeting held on 11th March 2009
9:00 am – 12 noon Maples Meeting Room, Tatchbury Mount**

Present: Pat Shirley, Director of Nursing and Governance (PS) (Chair)
Pamela Charlwood, Non-Executive Director (PC)
Jane Elderfield, Interim Chief Operating Officer (JE)
Ruth Lord, Associate Director of Clinical Governance & Quality (RL)
Steve King, Associate Director of Risk Services (SK)
Fiona Hartfree, Associate Director of Nursing – AMH (FH)
Kevin Page, Associate Director of Nursing – OPMH (KP)
Nicola Clark, Associate Director of Nursing – LD & SC (NC)
Dr Huw Stone, Chair for Specialised Services (HS)
Debbie Sloan, Clinical Effectiveness Manager (DS)
Kath Lloyd, (KL), attended for item 39/09

Apologies: Dr Helen Matthews, Medical Director (HM)
Mandy Johnstone, Deputy Director of Governance (MJ)
Kate Meads-Jones, Chair of the Health and Social Care Reference Group (KM-J)

Part A 29/09	<p>Previous Business</p> <p>Minutes of Previous Meeting Accuracy Amend Information Governance section as requested by Catherine Watson to include all recommendations from the report.</p> <p>Minutes from 11 February 2009 agreed as accurate once the above amendment has been made.</p> <p>Matters Arising</p>	
116/08	<p>AMH Directorate Risk, Health and Safety Report (Quarter 1) The Committee agreed that this was now complete. The SS and OPMH Directorates are reviewing processes to ensure that reports are discussed within the Directorate prior to presentation at this Committee.</p>	
126/08	<p>Clinical Governance and Risk Committee TOR The Committee agreed that the review of the TORs was now complete. All TORs reference the Quality Strategy.</p>	
125/08	<p>Annual Learning from Experience – Combined Incidents, Complaints, PALS and Claims Report The 2009/10 cyclical agenda is being finalised and the Directorate leads will be advised when these reports are being presented at CG&RC to ensure that these are included in the Directorate meetings for dissemination.</p>	
14/09	<p>Mental Capacity Deprivation of Liberty Safeguards (DOLS) FH assured the Committee that the training had been evenly distributed across the AMH Directorate. HS advised that DOLS does not apply to the SS Directorate in either the forensic or children's services. NC was unsure</p>	

	of the training distribution in LD and SC Directorates. It was agreed that DS should contact David Higgenbottom to confirm that training had been evenly distributed across the Trust.	DS
	It was agreed that SK would check whether risks associated with DOLS had been considered and added to the Directorate Chapters of the Risk Register and Assurance Framework.	SK
19/09	Learning from Indifference Report The Committee were assured that NC and PS were meeting to review the action plan the following week before presentation at TMT.	
20/09	Implementation of Routine Clinical Outcome Measures Update Report DS assured the Committee that a further progress report in June had been added to the future agenda items list.	
21/09	Gosport War Memorial CHI Report DS assured the Committee that Ross Mitchell had been requested to respond to the queries raised in the next Medicines Management Report in April 2009.	
22/09	Trust Board Chapter of the Risk Register and Assurance Framework The Committee were assured that SK had discussed the wording around appraisal in risk 292 with the responsible Director and that contingency plans had been developed where there had been gaps.	
23/09	Information Governance Report The Committee were assured that the concerns around PID in the LD Directorate had been escalated to Andy Clapper and will be added to the Risk Register and Assurance Framework if a solution is not agreed. A local solution involving use of SWIFT numbers has temporarily been agreed. It was agreed that JE would liaise with Andy Clapper to resolve this concern.	JE
24/09	Mental Health Act Committee Report PS assured the Committee that Nick Yeo had emailed the Local Authority. Advocates will be in place from 1 st April 2009 including agreement on how to access this service.	
25/09	Control of Infection Committee Report Louise Earl had amended the report from the February meeting. The Committee noted that all of the Standards for Better Health criteria were now met and evidenced as being met. HS advised the Committee that a learning is being introduced for medical staff CPD training.	
133/08	CPA Self Assessment Update Report Jane Elderfield presented this report on behalf of Les Sharp. The ISAT tool (national self assessment state of readiness tool) has been completed and the Committee were assured that the Trust was green or amber in relation to all aspects. An action plan is being developed to address all amber components. A Trust Care Planning Strategy Group will replace the existing CPA Refocusing Board and will be supported by Directorate Care Planning	