



## Quality Committee Meeting

DATE:	<b>31<sup>st</sup> October 2017</b>
TIME:	<b>10:00 hours</b>
LOCATION:	<b>Board Room – Brook House IRC</b>

<b>PRESENT:</b>	<b>Initials</b>	<b>Distribution</b>
Sandra Calver – Head of Healthcare – G4S	SC	All those present and apologies
Chrissie Williams – Clinical Lead	CW	
Michael Wells – Practice Manager Brook House	MW	
Jacintha Dix – Practice Manager Tinsley House	JD	
Sarah Newlands – Head of Tinsley House	SN	
Jackie Colbran – IMB Brook House	JC	
Husein Oozeerally – Lead GP – DoctorPA	HO	
Anton Bole – Team Leader Forward Trust	AB	
Steve Skitt – Deputy Director Gatwick IRC	SS	
Jenny Keating – IMB Tinsley House	JK	
Nick Watkin – NHS England	NW	
Ian Castle – Home Office	IC	

<b>NO</b>	<b>Item</b>	<b>Action</b>
<b>1</b>	<b>Welcome and introductions</b>	
<b>2</b>	<b>Apologies</b>	
	Michelle Smith, Samina Idris, Kerry George, Steve Brookes, Debs Vidler, Lee Hanford, Rebecca Hills	
<b>3</b>	<b>Minutes of previous meeting</b>	
	Previous minutes discussed/closed/carried forward and approved.	
<b>4</b>	<b>Actions arising from the meeting held on 11 April 2017</b>	
	This is listed at the end of the minutes.	
	<b>Safe Care and Treatment</b>	
<b>5</b>	<b>Health Improvement Plan</b>	
	Previous HIP shared, it is a live document, updated on regular basis. From 9 <sup>th</sup> April 2017, 109 actions – Update staff survey has been completed as of 30/10/2017	
<b>6</b>	<b>Independent Reports</b>	
	<b>Brook – Steve Skitt</b> All going well. Good improvement since the panorama with a formal action plan in place. SS has been holding forums on the wings post	

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<p>panorama, areas that have been highlighted are Healthcare, IT, Food and detention. These are common themes and the forums are on Thursday and Friday mornings. Debbie Weston has also worked hard on detainee engagement in the centre.</p> <p>Healthcare staff induction – noted not all new staff have an awareness of C&amp;R and the role of the nurse and there is a limited amount of personal protection training for staff due to lack of trainers for this – currently speaking with Parc to utilise the trainers.</p> <p>ACTION – MW/JD to chase Personal Protection training with training Dept.</p> <p>High level of disruption in the centre at present with a spike in violence – security doing a lot of work on this.</p> <p><b>TINSLEY – Sarah Newlands</b></p> <p>No specific healthcare related concerns at present. PDA has had around 8 families to date with boarders at the lower level of a couple. Highlight was a single mum and child who received a good level of care.</p> <p>JK – more complaints at Tinsley House recently – these are not about patient care and more about general healthcare concerns, not all formal however lots of informal comments</p> <p>JD – healthcare walk around / forum might be useful – however healthcare do attend the detainee consultative meetings as well as diversity and safer community meetings</p> <p>ACTION – JD to set up a healthcare forum/walk around at Tinsley - MW to work on this at Brook</p>	<p>MW/JD</p> <p>JD/MW</p>
<p><b>7 Incidents Report (Incidents, medication incidents, serious incidents and never events)</b></p>	
<p>July - 6 positive interventions, 9 deliberate Self harm, NPS 7, 5 medical and 12 others which include fighting and verbal abuse</p> <p>Aug – 7 Positive interventions, 9 NPS, 4 Deliberate Self harm, 10 medical and 6 other.</p> <p>Sept – 4 Positive interventions, 3 Deliberate Self harm, NPS was up to 39, 16 medical or which are query NPS incidents and 8 other.</p> <p>2 respiratory arrests occurred due to NPS incidents and both were taken to hospital.</p>	

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<p>SS – Number of good finds in visits and reception recently and all detainees in possession have been referred to police – no charges yet</p> <p>Serious Incidents – 1 serious incident raised post panorama – 48 hour report has been sent – CQC notification has been submitted – RCA to be completed by Angie Hill director of nursing by 29/11/2017 and 1 RCN referral has been made.</p>	
<p><b>Experience of Care</b></p>	
<p><b>8      Complaints report</b></p>	
<p>3 Complaints in July, 7 in Aug and 7 in September, 3 due to medication, 10 due to treatment, 1 staff attitude and 3 healthcare access</p> <p>None of these complaints have been upheld</p> <p>Learning lessons have been:          Improve communication skills with detainees          Send reminders for appointments          Respect for detainees – relating to staff attitude – this is a generic corporate action          Chase outstanding medications for detainees and inform detainees of any delays on this.</p>	
<p><b>9      Patient Survey/Engagement activity reported</b></p>	
<ul style="list-style-type: none"> <li>• Patient feedback</li> </ul> <p>This is very low from both sites. Discussed maybe incentivising surveys?</p> <p>NW – numbers of feedback are low however a large majority of the feedback is negative – maybe some face to face interventions are required to help with engagement.</p> <p>Notice boards on the wings have been updated and have a feedback section.</p> <p>Healthcare compliments and complaints box needs to be replaced</p> <p>ACTION – MW to get a new complaints and compliments box</p> <p>SC – look at the NHS boards “you said we did” to show our actions on different feedback</p>	<p>MW</p>

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<p><b>Forward Trust update: Anton Bole</b></p> <p>Several 1:1 sessions are been held which include to name but a few brief intervention programmes, introduction to twelve step, continuing the steps after treatment, building family ties, stop supply, sleep problems, smoking cessation.</p> <p>Group workshops are being held on: Alcohol, cannabis, NPS, Heroin, Crack-Cocaine, Anger Management, stress and anxiety, Management and relapse prevention.</p> <p>Staff training is now also being given at the ITC and staff refreshers around substance misuse.</p> <p>AB – not sure if all detainees are being referred by healthcare and operational staff</p> <p>CW – healthcare referral all patients however a large number of these are repeat offenders/users so we are not always duplicating referrals.</p> <p>ACTION – Pathway for referrals as at present potential for referrals to be missed – AB to look into pathway</p>	<p>AB</p>
<p><b>Effective Treatment and Care</b></p>	
<p><b>10 Audit Reports or Protocol Refreshes</b></p>	
<p><b>Policies:</b></p> <p>Several policies are being reviewed following the Panorama programme and are incorporatated into the health action plan</p> <p>Local SOPS also being reviewed.</p> <p>NW – can we have feedback on the action plan in the next meeting as will be useful to know what this is</p> <p>SC – Angie Hill is the owner and will seek approval for the sharing of this</p> <p>ACTION – SC to speak with Angie Hill to share action plan</p> <p><b>PPO reports</b></p> <p>No new reports that we are aware of. Update on the DIC in Yarl's Wood – the site were encouraged to use the Red and Blue codes.</p>	<p>SC</p>

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<p><b>Audits in progress:</b></p> <ul style="list-style-type: none"> <li>- NHS safeguarding assurance visit was completed in September by Debs Vidler NHS</li> <li>- Care Plan Audit</li> </ul> <p>SC – Planned KLOE report Audit in November from Helen Robinson.</p> <p>ACTION – SC to send KLOE to Debs Vidler</p>	SC
<p><b>Quality Committee Subgroup Reports</b></p>	
<p><b>Medication update:</b></p> <p>Top 3 medicines are</p> <ul style="list-style-type: none"> <li>- Omeprazole</li> <li>- Mirtazapine</li> <li>- Ibuprofen</li> </ul> <p>This is the same as the previous 3 months</p> <p>Amitriptyline and Kalms use has decreased</p> <p><b>Risks and Issues to escalate to Partnership Board</b></p> <p>NA</p> <p><b>Quality Risk Register</b></p> <p>Recently reviewed the Risk Register and now have 14 highlighted risks.</p> <p>Staff Training compliance, BH waiting area are our high level risks along with Pharmacy and staffing levels.</p> <p>Staff training – MW has request a healthcare shut down afternoon x1 per month. This to ensure that training is being completed and to have external providers come in and deliver training.</p> <p>ACTION – MW to send NW a plan of training for next year with breakdown of activity in closure afternoons.</p> <p><b>Recruitment</b></p> <p>6 Vacant posts, which include 4 RGN/Paramedic, 2 RMN and 1 RGN Twilight (3 x shifts)</p> <p>Interviews taking place regularly</p>	MW





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ACTION - JD to give DNA rate for interview		JD
<b>11</b>	<b>Any Other Business</b>	
DATES OF NEXT MEETING		
TBC		

## Outstanding Actions

Action	Person responsible	Progress/comment
MW & JD awaiting update on what the sites require data on monthly reports	SN & SS	Outstanding
New Camera outside Tinsley Healthcare has a blind spot. JD to chase facilities to check this.	JD	Carry forward
First Response protocol to be signed off. SC to organize meeting to discuss this and the red/blue codes	SC, CW, MW & SS	Outstanding, work in progress
Chase Personal Protection training with training Dept.	MW/JD	
Set up a healthcare forum/walk around	JD/MW	
New complaints and compliments box – Brook House	MW	
Pathway for referrals as at present potential for referrals to be missed – AB to look into pathway	AB	
Speak with Angie Hill to share action plan	SC	
Send NW a plan of training for next year with breakdown of activity in closure afternoons.	MW	
Give DNA rate for interview	JD	