**NHSGGC Bereavement Steering Group **

**7th February 2017**

**1.30pm**

**Eastwood Health and Care Centre**

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| **Chair:** | Professor Bridget Johnston: Florence Nightingale Professor Clinical Research – University of Glasgow/NHSGGC |
| **Minutes** | Elaine O’ Donnell: Palliative Care PD Facilitator |
| **Present:** | Susan Jackson: ACCORD Hospice Representative |
|  | Trish Elrick: Regional Officer, CRUSE |
|  | Shirley Byron: Macmillan Nurse Facilitator |
|  | Carol Campbell: Head of Spiritual Care & Chaplaincy |
|  | Paul Corrigan: NHSGGC Information Officer |
|  | Sharon Lambie: Palliative Care Nurse Specialist, GRI |
|  | Margaret Fitzpatrick: Inpatient Management Team Support, Mental Health Services |
|  | Cheryl Glancy: Health Improvement Representative |
|  | Mairi Armstrong: Macmillan Nurse Facilitator |
|  | Laura Cunningham: MND Specialist Nurse – Regional Services – Acute |
|  | Josephine Wight: Community Care Service Manager/ Senior Nurse – E Ren HSCP |
|  | Claire O’ Neill: Lead Nurse, Palliative Care Services |

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| **Apologies:** | Michelle Magennis: Business and Programme Manager (Corporate) |
|  | Flora Muir: Patient Experience Public Involvement & Quality |
|  | Lisa King: Palliative Care Sister – W Dun HSCP |
|  | Helen Morrison: Consultant – Palliative Care |
|  | George Duncan: Consultant – Rehabilitation – South Sector Rep |
|  | Larry Callary: Senior L&E Advisor |
|  | Coral Brady: Family Bereavement Service – Paediatrics - Acute |
|  | Evelyn Frame: Chief Midwife |
|  | Jane Miller: |
|  | Dougie Fraser: CSM Specialist Children’s Services (psychological  services) |
|  | Les Mc Queen: Senior L&E Advisor - Acute |

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| **1.** | **Welcome/Apologies**B Johnston welcomed all to meeting and thanked JW for her hospitality in terms of offering the venue and for catering arrangements! (tea/coffee and scones) Apologies made in terms of postcode sent out with minutes, this was incorrect.Apologies read out and acknowledged. | **Action** |
| **2.** | **Minutes of Previous Meeting – 6th October 2016**Minutes were reviewed, time given for reflection then any requests for amendments taken. Actions revisited.New Actions required: * SB surname be changed from Ryan to Byron (p.1)
* CON job title be changed to Lead Nurse Palliative Care (p.1)
* SJ -Entry on minutes regarding Accord Hospice update be deleted (p.5)
* JW- Entry re: Hubs to include that they are currently under development /work toward this ongoing in East Renfrewshire HSCP ( p.9)

Prior to continuing agenda a welcoming of C Glancy took place as she shared with group that she is now the Health Improvement Senior link/ ambassador (Child & Youth Mental Health) on the group.B Johnston briefly mentioned reporting mechanisms in terms of the group’s undertakings, and shared that she thought it to be via Elaine Love. Acknowledgement of changes ongoing with this was given (addition of HSCPs & ceasing of MCN).  | **MM** |
| **3.** | **Matters Arising**NHS Scotland DNACPR Policy 2016It was agreed by the group that DNACPR should be an ongoing part of the steering group’s agenda. CO’ Neill shared that there has been a colleague assigned as the lead, although at present we await further details and instruction on this matter. Following liaison between CO’Neill & P Corrigan previously, P Corrigan shared that he has now updated the PC intranet with the latest link to the updated policy, the NES Star Module video and booklet ordering codes. He noted updating work requiring to be done/ ongoing on GP DNACPR section on WebPages. He also noted that the NHSGGC website in relation to DNACPR has as yet has to be updated.**Bereavement Bags/ Patients property bags within the acute setting**S Lambie gave a brief overview of the work she has been leading piloting the bereavement bags across the acute sector. She stated that a report on the same will follow. The results to date have been positive, with staff welcoming them and expressing the need for the same, although feedback has shown the piloted bags to be smallish in size and not very sturdy. The small organza bags ( for jewellery) have evaluated well, although some thoughts as to using additional sizes/ adopting a larger size bag were given as they are not able to safely fit a person/ loved one’s watch. S Lambie & C O’ Neill shared with the group that on taking this forward, C O’ Neill has requested a costing on another bag used at the BOC which helps address the pilot bags potential shortcomings. It was agreed that costing of a plain bag with no embellishment or logo would be best in terms of preserving dignity and the environment (usable). S Lambie also shared that the accompanying cards seem to have evaluated well. Paediatrics did not choose to use the same bag.C O’ Neill shared that she is still awaiting costings. B Johnston then shared that a business case will require being taken to the Nurse Director and the NHS Board.B Johnston also shared Michelle’s scoping work regarding other Health Board’s use or otherwise of Bereavement/ Patient belongings bags. **Bereavement Booklets/ Supporting Bereavement**Regarding the Bereavement Booklet and the possibility of NHSGGC adopting the National Bereavement booklet E O’ Donnell shared figures ( liaison with Flora Muir) of the current numbers of Bereavement Booklets (approx 5000) and ‘What Can Happen’ (approx 8000) booklets in stock - many thanks to colleagues in publications & Resources/ information management for this. EO’ Donnell also shared that the review date on these publications is March 2017, and suggested that perhaps a short life working group would be a useful way in which to take this forward to determine which booklet best meets NHSGGC needs in supporting people with bereavement. EO’ Donnell also shared that there is now a 11th ed. on-line version of the ‘What to do after a Death in Scotland’ available – inclusive of MCCD update, and that further scoping on the same would be required in terms of re-introducing the same to all areas. B Johnston agreed that a SLWG would be the best way to move things forward and proposed that EO’ Donnell sits on this group. EO’ Donnell was in agreement with this proposal. Membership was then opened to the group, with M Fitzpatrick, S Lambie and M Armstrong agreeing to join in the first instance. EO’ Donnell also suggested that colleague Flora Muir would also make a very important contribution to the work of the group and offered to discuss this with her. A plan was agreed that an initial scoping exercise in relation to all of the above would take place by the group, and there was some discussion surrounding costing, languages available (we require more in Glasgow) and previous reasoning behind why we chose not to adopt National Booklet previously. B Johnston suggested that perhaps in terms of the forthcoming work on the bereavement literature and bereavement bags project – they both could be promoted/ rolled out together thus raising the profile of Death, Dying & Bereavement. This was met by much positivity & agreement by the group.It was noted that we require most up to date mortality/ patient death numbers across NHSGGC – Acute PCPD Team have requested and await same. |  |
| **4.** | **Training Scope**BJ opened this up to the group as to share current training practice.C Campbell shared her up to date figures, and that within Healthcare Chaplaincy involvement ranges from 1:1 support to large Annual Remembrance services.C Campbell also shared her involvement in a funding proposal regarding chaplaincy / supporting work within the community /GP clusters. C Campbell asked the group if this was something that the group would support in terms of group endorsement in presenting the business case. Further chat around the same with agreement that this would present no problems, and that prior to this C Campbell would share proposal with group.B Johnston then read through M Magennis’s scoping work in terms of training updates within all areas. It was noted that there was no update from Ardgowan Hospice, possibly due to colleague sickness.S Byron shared that within community PCPD, the addition to the team of M Armstrong has allowed for some review on educational modules and new formal education and training surrounding death/dying/bereavement is now offered- M Armstrong is leading on this. S Byron also shared with the group that following the changes to the nurse liaison service there may be a widening gap within access to support/ education/ training within Care Homes.P Corrigan shared that he has updated the Professional & Public sections of our Websites. S Lambie shared that the GRI has been successful in its funding towards a new Bereavement Hub, and she shared that it is very early days in the development of the same. CO’ Neill then shared with the group that the Beatson is also awaiting a decision regarding a funding bid/ business case for a Bereavement Hub. |  |
| **5.** | **Management of Patient Property**B Johnston commented that this item on the agenda has already been addressed. |  |
| **6.** | **CRUSE**T Elrick provided an overview of the service, and the partnership they have with NHSGGC. She shared that Glasgow & Hamilton are the two office sites, and that support is available in different ways (the national helpline, face to face, drop in sessions, telephone consultations) T Elrick also shared that the client base in terms of support offered can range from people experiencing trauma/ bereavement and loss greater than 6 months past to services for newly bereaved.  |  |
| **7.** | **AOCB**B Johnston shared that group had been identified by Chief Nurses/ Leads as the appropriate colleagues to review the NHSGGC Deaths In Hospital Policy.Some group members suggested that a SLWG may be the best way to take this forward. M Fitzpatrick suggested in the first instance that she would look at the policy in terms of its content and consider the ownership/ update. CO’ Neill agreed to work with M Fitzpatrick on this.B Johnston then closed the meeting after asking the group if there was any other business that they wanted to share – none raised. |  |
|  | **Summary of Actions**1. M Magennis to amend minutes of 6th October 16.
2. S Lambie to present a report on the Bereavement Bags Pilot.
3. C O’ Neill to obtain costings for Bereavement Bags.
4. C Campbell to share her Bereavement Funding Proposal.
5. E O’ Donnell and C O’ Neill to present current figures on patient deaths across NHSGGC.
6. E O’ Donnell to invite F Muir to join SLWG.
7. E O’ Donnell to coordinate SLWG to look at Bereavement Booklets.

 **8.** B Johnston, E O’ Donnell and C O’ Neill to review Death in Hospital Policy (2014). **9.** B Johnston to take business case to Board Nurse Director once costings have been established. **10.** B Johnston to confirm that E Love is the group’s lead in terms of reporting and governance.  | **MM****SL****CON****CC****EOD****EOD****EOD****BJ/EOD****BJ****BJ** |
|  | **Time and date of next meeting****Tuesday 6th June 2017, 1.30pm, Eastwood Health and Care Centre, Drumby Crescent, Clarkston, G78 7HN (Hoskins Room).** |  |