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| Board Meeting: | 29 July 2021 |  |
| Subject: | Clinical Governance Committee (CGC) Update |
| Recommendation: | Board Members are asked to:  |  |  | | --- | --- | | Discuss and Note | ✓ | | Discuss and Approve |  | | Note for Information only |  | | |

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1. **Background**

The Clinical Governance Committee (CGC) was held on 7 July 2021, the following key points were noted at the meeting.

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| **Item** | **Details** |
| **Safe** | **Covid Sit Rep**  The Committee recognised the impact of self-isolation on staffing and noted that this continues to be well managed.  **Significant Adverse Events (SAEs)**  The Committee was provided with a Significant Adverse Events (SAEs) overview report. Members were updated on key actions and associated timelines. The Committee discussed the SAEs and noted the learning summaries.  The Committee reviewed the SAER Action Plans. The Team continues to review the status of open SAER actions and is progressing these in a timely manner.  The Members noted the collaboration of local Clinical Governance Forum and the Clinical Governance and Risk Management Committee to ensure the Action Plan progresses with the appropriate processes in place.  Future reports on SAER action plans progress will be presented to this Committee.  The Committee noted an additional report on radiology which highlighted actions including a short life working group to review progresses.  The Committee praised the Clinical Governance team for their remarkable contribution over the past year, despite the challenges faced during the Covid pandemic.  The Committee will receive ongoing updated reports.  **Risk Register**  The Committee reviewed the Risk Register noting the proposed changes. The Risk Register will also be submitted to the next Audit & Risk Committee meeting.  The Committee noted the proposed new risk in relation to NICOR reporting and the proposal that S20 be reduced to medium risk. |
| **Effective** | **Clinical Governance Update**  The Committee were given an overview of the number of complaintsand the timelines for completion. The Members noted the delays in concluding some responses but appreciated that the quality of responses need to provide balance between person centredness and timeliness.  A process is in place where delays are investigated and key actions set to improve coordination and timescales. An SBAR detailing further improvements will be submitted to the Executive Committee for approval.  The Committee noted that in balance, the Clinical Governance team continue to contact the complainants regularly to ensure they are fully updated on progress and advised of any potential breaches to timelines.  An update will be given at the next meeting.  **Duty of Candour Annual Report approved**  The Committee discussed the Duty of Candour Annual Report noting that there is a legislative requirement to publish this. There has not been detailed guidance from Scottish Government in relation to the template to be used and our Clinical Governance team have therefore developed one.  The Committee discussed the events that triggered legal Duty of Candour and were assured that, in terms of process, these are integrated into the Significant Adverse Events report. Regardless of legal status patients and families are informed of a review and their input sought.  The Committee approved the Duty of Candour Annual Report for sharing with the Board prior to publication via the website.  **Organ Donation Annual Report**  The Committee reviewed and approved the Organ Donation Annual Report, noting there were no missed referrals. The Members commended the teams for their ongoing dedication throughout a very challenging year during the pandemic.  **Prevention and Control of Infection (PCI) Annual Report**  The Committee were given an overview of the salient points of the Prevention and Control of Infection Report.    The Committee noted the key role the Prevention and Control of Infection Team (PCIT) have delivered through this challenging year. The team have provided robust and significant advice in response to COVID aligned to national guidance, which was subject to frequent change as more intelligence was gained on the epidemiology of the pandemic.  The Committee commended the PCIT for their hard work and collaboration in delivering new pathways and processes during this unprecedented time.  The Committee were advised that national Surgical Site Infection (SSI) surveillance was paused in March 2020 and remains the current status. Assurance was given that despite this national stand-down the NHS Golden Jubilee PCIT continue to monitor locally and remain visible to clinical colleagues.  No changes to the HEAT target are expected.  The Committee approved the annual report and supported the programme for the coming year 2021/22, noting the complexity of their work which is coherently management whilst remaining vigilant on key themes.  The ICP for 2021/22 will be submitted to Clinical Governance Committee and Board for approval.  **Clinical Department Update (General Surgery)**  The Committee acknowledged the many changes to service provision as a result of the Covid pandemic. The evolving services include cancer work, colorectal service at planning stage and new medical  leadership. Additional triumvirate multidisciplinary meetings are in place with representation from medical, nursing and AHPs teams.  One particular highlight of note was the positive feedback received from colleagues and patients, particularly during such challenging times.  The Committee extended their appreciation to all colleagues for their continued dedication in further developing services offered. |
| **Person Centred** | **Annual Feedback Report 2020/21**  The Committee reviewed the Annual Feedback Report 2020/21 noting the key highlights. During the year there were 72 complaints received (44 Stage 1 and 28 Stage 2) however this was a 4% decrease from the previous year, as expected due to the Covid pandemic.  Compliments were the highest form of feedback with 161 being received.  The Committee were assured that learning from complaints continues to result in improvements to services, training and communication with patients and families.  A final report will be submitted to the Board and Staff Governance Person Centred Committee.  The Committee approved the Annual Feedback Report 2020/21.  **Patient Story**  The Committee viewed a video of a heart transplant patient’s experience which was extremely positive in regard to the service provided and the care received. One point of note was the benefit of psychological care given during the patient’s journey and consideration will be given on how best to integrate this service to further improve the level of care provided.  The Committee noted the positive patient feedback and commended the teams involved. Patients stories will be provided at future CGC and Board meetings. |

The next meeting is scheduled for Thursday 9 September 2021.

1. **Recommendation**

Board Members are asked to note the Clinical Governance Committee update.

**Morag Brown**

**Chair, Clinical Governance Committee**

7 July 2021