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| Board Meeting: | 27 May 2021 |  |
| Subject: | Clinical Governance Committee 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) Committee was held on 13 May 2021, the following key points were noted at the meeting.

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| **Item** | **Details** |
| **Safe** | **Significant Adverse Events (SAEs)**  The Committee was provided with a SAE progress report. Members were given an update on key actions and associated timelines. The Committee discussed the SAEs and noted the 5 learning summaries for review that have concluded. Laura Langan outlined the details of SAEs being reported on and those under assessment.  The Committee discussed and supported the key learnings noted within the report, including:   * The Consultant on Call operational change. * Further work is ongoing to develop a standard approach to ensure a level of consistency for reviewing, and acting upon radiology reports. The Committee will welcome a further update on this work as it progresses.   The new Director of e-Health has recently been appointed and will be invited to attend the Committee to update on reporting issues and potential solutions.   * Work is being progressed to improve cognitive status assessments. In situations where further investigation of a patient’s cognitive state is required, more in-depth cognitive tests will be used. This work will be carried out with the involvement of the Dementia Nurse. * Committee Members were assured that learning outcomes from SAEs were being cascaded to ensure improvement across the organisation. Members noted positives of team work and being able to offer assurance to staff when things did not work out as wished, despite the best efforts of the team.   A full report on lessons learned will be included in the Annual Learning Summary Report. |
| **Effective** | **Healthcare Associated Infection Report (HAIRT)**  **April 2020 – March 2021**  Members 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 19 aligned to national guidance, which was subject to frequent change as more intelligence was gained on the epidemiology of the pandemic.  The Committee members 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.  **Patient Pathways Audit Report**  Members welcomed the Internal Audit Patient Pathways Audit report. The positive outcomes of this report were commended and Members noted the excellent work that has been undertaken on patient pathways throughout the pandemic.  **SBAR NICOR**  The Committee were advised that the NHSGJ Interventional Cardiology, Cardiac Surgery and SACCS services input data into a national UK audit programme. Members received a report on anticipated changes to this which have been discussed with Scottish Government. Given issues raised, this matter will be put on the risk register.  A further update on the status of this process will be discussed at the May 2021 Board/Private Board meeting.  **Clinical Department Update (Cardiology)**  The Committee Members welcomed a presentation on the work and achievements of the Cardiology Department over the past year. Members were assured that the team continued to implement a robust approach to clinical governance throughout the challenging pandemic situation. The highlights included development of:   * robust approach to clinical governance * quality improvement * new interventional procedures and clinical guidelines * enhanced roles around discharge * triumvirate approach * human factors; staff support, staff survey, STOP, and need for breakout space   Members commended the Team for the positive work carried out and noted their collaborative and positive approach to overcoming challenges and seeking service improvement. |
| **Person Centred** | **Patient Visiting**  The Committee were advised of positive feedback from patients, visitors and staff regarding patient visiting. The process is being managed using an appointment system. Members were assured that careful consideration is given, on a case by case basis, where visiting could pose a significant patient risk. Alternative methods of patient contact continue to be utilised and promoted including the use of mobile devices to connect with visitors. |

The next meeting is scheduled for 7 July 2021.

1. **Recommendation**

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

**Morag Brown**

**Chair, Clinical Governance Committee**

13 May 2021