**Approved Minutes**

**Meeting: NHS Golden Jubilee Clinical Governance Committee**

**Date: Thursday 13 January 2022 at 14:00hrs**

**Venue: Microsoft Teams Meeting**

**Members**

Morag Brown Non-Executive Director (Chair)

Callum Blackburn Non-Executive Director

Elaine Cameron Non-Executive Director

Jane Christie-Flight Employee Director

Linda Semple Non-Executive Director

**In attendance**

Anne Marie Cavanagh Director of Nursing & AHPs

Ashley Calvert Interim Head of Clinical Governance & Risk

Gerard Gardiner Head of Corporate Governance and Board Secretary

Jann Gardner Chief Executive

Mark MacGregor Medical Director

Susan Douglas-Scott CBE Board Chair

Helen Mackie Associate Medical Director - NES

**Guests**

Tony Vassalos Critical Care Consultant

Susan Montgomery Clinical Nurse Manager – Critical Care

**Apologies**

Gareth Adkins Director of Quality, Innovation & People

**Minutes**

Alison MacKay Corporate Administrator

**1 Opening Remarks**

* 1. **Chair’s introductory Remarks**

The Chair opened the meeting and thanked everyone for attending.

**2 Apologies**

Apologies were noted as above.

**3 Declarations of interest**

 None noted.

**4 Updates from Meeting 11 November 2021**

**4.1 Unapproved minutes from 11 November 2021**

The following amendment was noted under agenda item:

**6.6 Robotics Update**

“This is the highest volume undertaken in the UK (with only one other unit able to undertake these procedures)”. This should read: “This is amongst the highest volume undertaken in the UK (with only one other unit comparable).”

The Committee reviewed and approved the minutes of the last meeting.

**4.2 Action Log**

The Committee reviewed the Action Log.

Morag Brown noted an omission from the Action-Log, relating to Significant Adverse Events, as follows:

**“Action CGC111121/02: A deep dive of SAE’s will be undertaken to seek further scrutiny and assurance on the effectiveness of the process. This will include an intelligence check with other Boards to establish if they are experiencing similar increases in SAE’s and reasons for them”**

The Committee noted that the Risk Register review was ongoing, and that the update on the national consultation on Covid pathways would be discussed at Agenda Item 5.1.

**4.3** **Matters Arising**

There were no matters arising from the previous minute or action log which did not feature on the Agenda.

**5 Safe**

**5.1 Covid Sit Rep**

The Committee were provided with an update on the Covid-19 inpatient status.

Anne Marie Cavanagh noted that the volume of demand for staff testing during the festive period had proven challenging, however, this has since stabilised.

The Committee noted that there was one patient in NHSGJ who was currently positive for COVID-19.

The Committee noted the Covid Sit Rep.

**5.2 Significant Adverse Events (SAEs) Update**

The Committee were provided with a Significant Adverse Events (SAEs) update report and were updated on key actions, areas for improvement and associated timelines. The Committee discussed the SAEs and noted the learning summaries.

Since November 2021 Clinical Governance Committee meeting, 8 Significant Adverse Events reviews were commissioned.

The Committee received assurance that the Clinical Governance Department were working on processes to lower the number of actions arising from SAEs that are 6 months overdue and that appropriate learning and actions have been developed from each investigation.

The Committee were informed that a deep dive would be presented at a future meeting.

The Committee were advised that issues had been identified within Radiology and these will form part of a deep dive to come to next meeting.

The Committee discussed and noted the Significant Adverse Events Update.

**Action CGC20220113/01: Issues identified within Radiology will form part of a deep dive to come to a future meeting as part of the Workplan for 2022-2023**

**5.3 Expansion Programme Update**

 Anne Marie Cavanagh advised there were no clinical governance issues for escalation.

The Expansion Department are now focusing on the phase 2 breakthrough, which is scheduled to take place February 2022. The critical care areas and theatres will be affected. All actions will be taken to ensure minimal operational disruption.

The Committee noted the Expansion Programme update.

**5.4 Risk Register**

The Committee reviewed the Risk Register and noted there were no changes to those risks under the supervision of the Committee.

Mark MacGregor advised in relation to the risk on National Reporting of CT Clinical Data, there were ongoing discussions with Public Health Scotland to establish the Scottish Cardiac Audit Programme, and with eHealth to replace the CaTHi database.

The Committee noted the Risk Register.

**5.5 Feedback Update**

The Committee were advised that, in accordance with the reporting cycle, the Committee had been presented with the Quarter 2 report at the November 2021 meeting and that the Quarter 3 report would be presented at the next meeting.

The main focus continues to be improvement of the complaint response times and quality, with weekly meetings taking place between the Clinical Governance Department and the Executive team.

 The Committee noted the Feedback Update.

**6 Effective**

**6.1 Integrated Performance Report (IPR) December 2021**

The Committee were presented with the Integrated Performance Report for December, including the HAIRT Report (November) which highlighted the following key points of interest to the Committee:

 **HAIRT Report**

* *Staphylococcus aureus* bacteraemia – 1 case to report from November 2021.
* *Clostridioides difficile* infection – 0 cases to report.
* Gram negative/E. coli bacteraemia (ECB) – No cases to report since September 2021.
* Hand Hygiene – overall compliance of 99%. There was an increase with medical staff compliance from 95% to 97%.
* MRSA

MRSA screening compliance for patients who stayed longer than ten days has dipped in one area. The Committee received assurance that the early December data is showing improvements and that further updates will feature in future reports to the Committee.

* SSI

SSI surveillance data has been paused nationally since mid-2020, however, Infection Control have continued to monitor as part of the annual work plan.

The Committee discussed the HAIRT report and commended staff for the continued compliance levels and ongoing improvements.

 The Committee noted the Integrated Performance Report (IPR) December 2021.

**6.2 Clinical Governance & Risk Management Group (CGRMG) Update**

The Committee reviewed the Clinical Governance & Risk Management Group (CGRMG) update and noted 3 meetings had taken place since the last Committee in November that include an agile meeting in December to discuss 2 urgent agenda items from the November 2021 meeting. Six SAERs were approved by CGRMG.

The Committee noted the following key updates:

1. Remifentanil Shortage SBAR

Contingency plan in force with Pharmacy providing regular monitoring.

1. Interim Radiology SLWG feedback and update

The Committee received assurance that the radiology work is progressing appropriately. This work is progressing and will form part of future discussions.

1. Pressure Ulcer Improvement Group (PUIG)

Craig Kingstree, Head of Nursing, Heart, Lung and Diagnostics Division, provided an update at the CGRMG meeting 20 December 2021 and the Committee agreed to receive an update at the March 2022 meeting.

**Action CGC20220113/02: Craig Kingstree to be invited to the March 2022 meeting for Pressure Ulcer Improvement Group**

The CGRMG received service updates from SACCS, SNAHFS, Interventional Cardiology and Critical Care. Interventional Cardiology and Critical Care are undertaking a test of change based on the Health Foundation’s “5 dimensions of safety” that reports on patient safety in a more rounded way, rather than just focussing on incidents and complaints.

The Committee noted the CGRMG Update and thanked the group for the important work being progressed.

**6.3 Critical Care Department Update**

The Committee welcomed Tony Vassalos, Critical Care Consultant and Susan Montgomery, Clinical Nurse Manager – Critical Care to the meeting to present the Critical Care Department update.

The department provides support to the Heart, Lung and Diagnostic services along with providing expanding support to NES throughout the year and also supported Critical Care departments in other Health Boards as part of the Covid response.

The department holds monthly multi-disciplinary Clinical Governance meetings that review each Significant Adverse Event. Since its launch in December 2020 every meeting has been quorate. Anne Marie Cavanagh noted meeting attendance can be challenging and praised the leadership of the team.

The work the department has undertaken within the Pressure Ulcer Improvement work was highlighted.

Transplants over the last 2 years have doubled in volume, resulting in the department becoming the highest volume transplant unit in the UK. Mark MacGregor reiterated the achievement of the department in conducting transplants throughout the pandemic for complex patients.

The challenges of the department were recognised and the Committee noted the additional pressures they had overcome, especially during the pandemic. The Committee was impressed by the huge contribution the department has made and commended staff.

The Committee noted the Critical Care Department Update.

**7 Person Centred**

**7.1 Whistleblowing Q2 Update**

The Committee received a verbal update on the Whistleblowing Q2 Update and noted there were no incidents to report.

The Board’s whistleblowing champion has received a recent request from the Cabinet Secretary to update him on activity aimed at increasing the prominence of whistleblowing within NHS Golden Jubilee. Callum Blackburn has drafted a response letter. The letter will be returned to the Scottish Government on Friday 14 January 2022. The Committee requested the letter is shared once sent to the Scottish Government.

**Action CGC20220113/03: Board Secretary to circulate a copy of the letter sent by the whistleblowing champion to the Cabinet Secretary subsequent to its issue.**

**7.2 Patient Story (Endoscopy)**

The Committee was presented with a video of a patient’s experience documenting their recent Endoscopic procedure.

The Committee discussed the following key points:

* A successful clinical outcome had been achieved for the patient, with a short length of stay given the condition.
* Staff were very attentive across all disciplines. The patient paid specific compliments to the catering, nursing, medical and AHP staff who had cared for her during her stay.
* The patient identified a couple of maintenance issues in her room. The Committee received assurance that the Estates team are addressing those.
* The patient experienced a longer wait for discharge medication, than would normally be expected. This is a common theme in Boards throughout the country. It is a whole pathway issue which requires multidisciplinary input. The implementation of electronic prescribing and the contribution of robotics in the dispensary will contribute to improvements in timing of medication supply at discharge. The Committee agreed once improvements had been demonstrated it would be a good opportunity for the Board to share this best practice with other Health Boards.

Mark MacGregor noted the success of conducting robotic surgery during the pandemic.

The robotic assisted surgery service was implemented in July 2021 and is already achieving positive results.

The video also showcased positive collaboration between NHS Golden Jubilee and NHS Lanarkshire.

Overall the Committee noted the patient story as a positive one whilst raising important issues for improvement.

The Board Chair expressed her personal thanks to the patient for highlighting their experience.

The Committee noted the Patient Story (Endoscopy).

**7 Issues for Update**

**7.1 Update to the Board**

 **Key Issues for Reporting to NHSGJ Board**

The Committee agreed to include the following items within the Board update report:

* Covid Sit Rep
* Significant Adverse Events Update (SAE)
* Integrated Performance Report (IPR) December 2021 including Clinical Governance Update and HAIRT Report
* Clinical Department Update (Critical Care)
* Whistleblowing Q2 Update
* Patient Story (Endoscopy)

**8 Any Other Competent Business**

None noted.

**9 Date and Time of Next Meeting**

The next scheduled meeting of the Clinical Governance Committee is Thursday 3 March 2022 at 14:00 hrs via MS Teams