**Approved Minutes**

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

**Date: Thursday 3 March 2022 at 13:30hrs**

**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

Mark MacGregor Medical Director

Susan Douglas-Scott CBE Board Chair

Theresa Williamson Associate Nurse Director

**Guests**

Alan Kirk Consultant Thoracic Surgeon and Clinical Director

Craig Kingstree Head of Nursing - HLD

**Apologies**

Helen Mackie Associate Medical Director - NES

Jann Gardner Chief Executive

**Minutes**

Alison MacKay Corporate Administrator

**1 Opening Remarks**

* 1. **Chair’s introductory Remarks**

The Chair opened the meeting and thanked everyone for attending.

The Chair noted 2 years have passed since the start of the pandemic and took opportunity to commend and thank staff for their contribution to patient care and to thank colleagues for their support to territorial Boards throughout this extremely challenging time.

**2 Apologies**

Apologies were noted as above.

**3 Declarations of interest**

None noted.

**4 Updates from Meeting 13 January 2022**

**4.1 Unapproved minutes from 13 January 2022**

The minutes were read as an accurate account of the meeting and were approved.

**4.2 Action Log**

The Committee reviewed the Action Log.

**4.3** **Matters Arising**

There were no matters arising from the previous minute or action log.

**5 Safe**

**5.1 Covid Sit Rep**

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

A new respiratory pathway was implemented at the beginning of February 2022 with positive feedback received from staff. Patients numbers with Covid 19 are going down, however, staff absence levels relating to Covid had increased across clinical and corporate areas. The guidance on self-isolation has changed and the situation is now settling with January 2022 seeing a peak in numbers.

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.

Four SAE were commissioned since the Clinical Governance Committee meeting in January 2022.

Clinical Governance Department acknowledge high volume of SAER and are working on processes to progress, however, this is a significant piece of work with the focus on closing the cluster of SAEs older than 6 months. The Committee acknowledged Heart, Lung and Diagnostics Division SAEs is a complex group to review. National Elective Service procedures are usually associated with low risk procedures, however, there is an increased risk associated with colorectal surgery.

Learning Summary DW-7456

The Committee noted the background of this SAE and were advised improvements could be made as part of the discharge process in relation to documentation. The division noted that they were well supported by the Clinical Governance Department in reviewing the case.

The Committee will receive a Deep Dive on the SAEs at the meeting in May 2022 as noted on the action tracker.

The Committee discussed and noted the Significant Adverse Events Update.

**5.3 Expansion Programme Update**

Anne Marie Cavanagh advised there were no Clinical Governance issues for escalation.

The Expansion Team are now focusing on the Phase 2 breakthrough which will have a major impact on Theatres. Committee members received an update on the Phase 2 Assurance Review process at the Board Seminar on 24 February 2022.

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 provided update on the National Reporting of CT Clinical Data. Most recent data published by Public Health Scotland is 2019/2020. Data for 2020/2021 has been submitted although will not be published.

Clinical Governance department are working on a paper addressing Risk Register improvements which will be reported to the CGRMG meeting April 2022 and CGC in May 2022. There are many disparities of users of the Risk Register with some departments being regular users while others are less so.

The Committee asked that the Audit and Risk Committee give consideration to adding to the Risk Register the date of addition of risks to the Board Risk Register and the date of any assurance review of that risk.

The Committee noted that the Radiology department was on the action tracker for discussion at the Committee meeting in May 2022.

**Action 20220303/01: Audit and Risk Committee to be requested to confirm on Risk Register the date of addition of risks to the Board Risk Register and the date of any assurance review of that risk.**

The Committee noted the Risk Register.

**5.5 Feedback Update**

The Committee were presented with October – December 2021 data.

Challenges with complying with feedback timescales are being explored and addressed by the Clinical Governance department. The main cause of delays were identified as; staffing issues within the CG department, response times within the Division and at Executive Director sign off.

The Committee were assured improvements have been made and AM Cavanagh was optimistic these would be captured in the next reporting cycle.

AM Cavanagh highlighted patient compliments which had been received and reviewed at Staff Governance and Person Centred Committee.

Challenges within the Clinical Governance Department are being addressed with a restructuring of the department with a second Legal Feedback Co-ordinator band 6 now appointed.

Feedback is a standing agenda item at CME sessions.

The Committee noted the Feedback Update.

**6 Effective**

**6.1 Integrated Performance Report (IPR) January 2022**

The Committee were presented with the Integrated Performance Report for January 2022, including the HAIRT Report (December 2021) which highlighted the following key points of interest to the Committee:

**HAIRT Report**

* *Staphylococcus aureus* bacteraemia – 0 cases to report.
* *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%.
* SSI

SSI surveillance data has stepped up with impressive performance over 6-8 month period.

Heart and Lung Diagnostics division mortality rates are expected to be high during the winter period. Assurances were made to the Committee regarding the December 2021 mortality figure at 17 and therefore breaching upper control limits. Discussions have taken place with the Deputy Head of Clinical Governance and AMD HLD where it was noted 13 of the cases were complex patients and have went through M&M process with no concerns.

The impact of Covid-19 in relation to delays and referrals of complex patients was noted by the Committee. Each case is discussed as part of Cardiology M&M process. The Committee requested a review of M&M documentation led by the Deputy Head of Clinical Governance who will link with Paul Rocchiccioli, Consultant Cardiologist.

**Action CGC20220302: M&M documentation review to be undertaken, led by Deputy Head of Clinical Governance who will link with Paul Rocchiccioli, Consultant Cardiologist.**

The Committee noted the Integrated Performance Report (IPR) January 2022.

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

The Committee reviewed the Clinical Governance & Risk Management Group (CGRMG) update.

The Committee noted the following key updates:

1. Mr Curry, Cardiac Surgeon attended the CGRMG to present the High Risk MDT process for Cardiac Surgery
2. CGRMG received a verbal update on the major incident relating to power outage. Anne Marie Cavanagh is leading on the investigation report.
3. CGRMG received a verbal update on the Cardiac Surgery pathway deep dive

The Committee noted the CGRMG Update.

**6.3 Thoracic Surgery Department Update**

The Committee welcomed Mr Alan Kirk to present the Thoracic Surgery Department update.

The team have a robust Clinical Governance process with Mr Kirk chairing monthly meetings since 2020. Good engagement and representation from MDT and Allied Health Professionals has been a feature of the Group’s work, with every meeting to date being fully quorate. The team report any adverse events on DATIX and review all patient adverse events each month. Crude Thoracic mortality is a key KPI and is consistently within control limits.

Mr Kirk noted the importance of early detection of lung cancer and the advancements made over 5 years from 10% to 30% detection. The Committee were advised of the success of the screening programme already embedded in Manchester and noted the learning opportunities for the West of Scotland screening programme. Mr Kirk advised that this topic features in discussions at the Scottish Screening Committee, whose Chair is Jann Gardner.

Assurances were made there has been good outcome measures with the Robotic programme which has contributed to patient safety in the Thoracic service for 4 years and colorectal service for 1 year.

The Committee thanked Mr Kirk and the Thoracic Team for their continued dedication to this important service.

The Committee noted the Thoracic Surgery Department Update.

**6.4 CGC Terms of Reference**

The Committee were presented with the Terms of Reference for 2022-2023.

The Committee agreed Whistleblowing Champion should be incorporated as part of the Membership of the Committee and included as part of the remit of the Framework.

**Action CGC20220303/03: Role of Whistleblowing Champion to be included as part of the Membership and Framework remit.**

The Committee approved the Terms of Reference for 2022-2023 subject to the addition referred to above.

**6.5 Pressure Ulcer Group Update**

The Committee welcomed Craig Kingstree, Head of Nursing for Heart, Lung and Diagnostics Division to provide update on the Pressure Ulcer Improvement Group.

The group was put on hold during the pandemic and reconvened spring 2021. Craig Kingstree noted the following key issues:

1. Work undertaken 2021

* Terms of Reference reviewed with good representation from clinical areas.
* Monthly review is conducted for all grade 2 Pressure Ulcers.
* Mini RCA process is embedded for all grade 2 Pressure Ulcers with themes monitored.
* Trialled mattress in ICU2, this is still under evaluation.

1. Workplan 2022

* All mini RCA are discussed with the Senior Charge Nurse.
* ICU2 patients most vulnerable patients and are in Theatre for considerable time. This then bring significant challenges in moving patients when chest is open following surgery and becomes difficult in applying traditional methods.
* Monitor data trends 4 months consistent and below meridian lines.
* eLearning module developed.

The Committee suggested learning is rolled out via the NHS Scotland Academy and CfSD. The Academy can assist in creating a traditional classroom setting for this important learning activity.

The Committee thanked Craig Kingstree for developing eLearning module and for continued improvements.

**7 Person Centred**

**7.1 Whistleblowing Q3 Update**

The Committee received a verbal update on the Whistleblowing Q3 Update and noted there were no incidents to report.

As noted at the January 2022 meeting the Board’s whistleblowing champion received a request from the Cabinet Secretary to update him on activity aimed at ensuring the prominence of whistleblowing within NHS Golden Jubilee. This letter was returned to the Scottish Government and was circulated to Non-Executive Directors on 27 January 2022.

Callum Blackburn is attending a national meeting on 15 March 2022 with all Whistle Blowing Champions. Susan Douglas-Scott confirmed she would also be in attendance at this meeting.

The Committee noted the Whistleblowing Q3 Update.

**8 Issues for Update**

**8.1 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)
* Board Risk Register
* Integrated Performance Report (IPR) January 2022 including Clinical Governance Update and HAIRT Report
* Clinical Department Update (Thoracic Surgery)
* Pressure Ulcer Group Update
* Clinical Governance Committee Terms of Reference
* Whistleblowing Q3 Update

**9 Any Other Competent Business**

**9.1 Feedback on Blue Print for Good Corporate Governance self-Assessment**

Gerard Gardiner presented the Feedback on Blue Print for Good Corporate Governance Self-Assessment to the Committee.

In February 2019, the Scottish Government published the NHS Blueprint for Good Governance, which provides a Once for Scotland approach to NHS board governance. In February 2019, NHS Golden Jubilee conducted a self-assessment against the Blueprint. This identified areas of improvement and informed the action plan for Corporate Services.

It had been anticipated that a refreshed suite of national self-assessment materials would be available in time of the February 2022 SGPCC to consider, however this work has not been prioritised by relevant national groups in the intervening period.

The report summarised Board Development Activities carried out during 2021/2022, including as part of the Board Seminar programme. The report also anticipated future NHSGJ activities in this area, and anticipated review by the Scottish Government Corporate Governance Steering Group of the Blueprint.

The Committee noted the Board Seminar Programme for 2021/2022 and Board Skills Matrix 2021, the latter of which identified areas of development for Non-Executives. Additionally, the Committee noted the completion by the Board Chair of a NES Questionnaire on Local NHSGJ induction arrangements, and updates received relating to ethical standards, particularly the emerging Model Code of Conduct for devolved Public Bodies. The Committee also noted that a Seminar on Active Governance will be delivered as part of the Board Seminar Programme in 2022/23.

The Committee discussed NHSGJ’s strategic partnership with Strathclyde University in the context of Board development, particularly possible opportunities to work with the business school. G Adkins advised this would be will assess further, following executive appraisals to confirm value from Strathclyde University.

C Blackburn asked whether feedback had been provided to Non-Executive Directors following the skills matrix exercise. The Board Chair reminded those present of the appraisal exercise conducted with NEDs in Autumn 2021. The Board Chair also reminded those present of the NHSGJ Board meeting on 25 November at which the need to consider the experience of Non-Executives in capital project delivery had been accepted by the Board of NHSGJ as part of a suite of recommendations flowing form the Montgomery/Fraser Review .

The Committee noted the report.

**9 Date and Time of Next Meeting**

The next scheduled meeting of the Clinical Governance Committee is Thursday 12 May 2022 at 13:30 hrs via MS Teams