**Approved Minutes**

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

**Date: Thursday 16 March 2023 at 10:00hrs**

**Venue: Microsoft Teams Meeting**

**Members**

Morag Brown Non-Executive Director (Chair)

Callum Blackburn Non-Executive Director

Jane Christie-Flight Employee Director

Linda Semple Non-Executive Director

**Core Attendees**

Gordon James Chief Executive

Anne Marie Cavanagh Director of Nursing and AHPs

**In attendance**

Gareth Adkins Director of Quality, Innovation and People

Katie Bryant Head of Clinical Governance and Risk

Nicki Hamer Head of Corporate Governance and Board Secretary

**Observer**

Christine Nelson Deputy Head of Corporate Governance

**Apologies**

Susan Douglas-Scott CBE Board Chair

Mark MacGregor Medical Director

**Minutes**

Denise Cameron Corporate Administrator

**1 Opening Remarks**

* 1. **Chair’s introductory Remarks**

The Chair opened the meeting and welcomed everyone. The Chair confirmed there were no Patient Stories and no Significant Adverse Events Deep Dive on the Agenda but time had been allocated to discuss Learning Summaries from the Significant Adverse Event Review. The Chair noted it was time for annual review of the Terms of Reference and Workplan.

1. **Well-being Pause**

The Committee welcomed the opportunity for the Wellbeing Pause.

1. **Apologies**

Apologies were noted as above.

**4 Declarations of interest**

There were no declarations of interest noted.

**5 Updates from Meeting 10 November 2022**

**5.1 Unapproved Minutes**

The minutes were approved as an accurate record of the meeting with the following amendment.

Mark MacGregor, Anne Marie Cavanagh and Gordon James were to be recorded as core attendees rather than members.

**5.2 Action Log**

The Committee reviewed the Action Log, noting those items that featured on the Agenda and those scheduled for future meetings of the Committee.

**5.3** **Matters Arising**

Anne Marie Cavanagh informed the Committee that additional resources had been secured for the Clinical Governance Team to support improvements within the department.

**6 Safe**

**6.1 Covid Sit Rep**

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

Anne Marie Cavanagh confirmed that a minimal number of patients were recorded as being infected with Covid-19. Cases within the community were being monitored and statistics showed infection rates averaged 2% of the population or 1 in 40/45 persons being infected at any one time.

The Committee was informed that guidance had been received on the spring Flu vaccination programme and this would be reviewed.

The Committee noted the Covid Sit Rep.

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

The Committee was provided with a Significant Adverse Events (SAEs) update report.

Katie Bryant informed the Committee of changes to the update which provided further context around how the Clinical Governance Department improved the management of adverse events.

Since the January meeting of the Committee, 6 SAEs were closed, 13 were between three and 6 months overdue and three were reported as being over 6 months overdue.

The Committee received assurance that the Clinical Governance Department were committed to closing the historic SAEs and had implemented additional training as well as focused support to achieve this.

The Committee thanked Katie Bryant and Team for the extra detail provided in the report.

The Committee noted the Significant Adverse Events Update.

**6.3 SAER Learning Summaries**

The Committee was provided with a report on SAER Learning Summaries and identified individual summaries for in depth discussion at the meeting.

A lead Board was identified when SAEs involved Joint Boards and work was undertaken collaboratively to carry out a deep dive and identify improvement actions.

The Committee raised welfare advice in the context of the booking service to address inequalities in the West of Scotland and to ensure patients and families were waiting well. The Committee was assured that NHS Golden Jubilee provided support and advice to those on the waiting list. The Local Authority and Citizens Advice Bureau had been approached in relation to the provision of in-reach services.

The Committee thanked Katie Bryant for an open and transparent report and requested an update report on concluded actions along with a more comprehensive report on TAVI.

The Committee discussed and noted the Learning Summaries Update.

**6.4 Expansion Programme Update**

The Committee was provided with an update from Anne Marie Cavanagh on the Expansion Programme.

The “stop work plan” escalation process had been implemented but following a resolution of issues, the work continued. The Committee was advised that comprehensive planning was taking place for Level Three.

The Committee noted the Expansion Programme Update.

**6.5 Board Corporate Risk Register**

The Committee reviewed the Corporate Risk Register.

The Committee was reassured that mitigations and controls remained in place with three medium risks and one high risk. NICCOR issues around data had involved a deep dive and an update would be provided at the next Committee meeting.

The Committee approved the Board Corporate Risk Register

**6.6 Resilience Update**

Katie Bryant provided an overview of the resilience update.

SAS Testing - Results evidenced a robust response to the test protocol with a further test call due in March 2023.

UCI Cycling World Championships in August 2023 - Work was being carried out at a National Level to ensure patients were informed of details affecting journeys.

Duty Manager - A group had been created to work on the role and rota of the Duty Manager with further updates to be provided.

Departmental BCPs – An Audit was carried out and work was underway to check the efficacy of this.

Resilience Planning – Resilience Planning would be demonstrated within a Workplan informed through a “self-audit” tool kit developed by Scottish Government.

The Committee noted the Resilience Update.

**7 Effective**

**7.1 Integrated Performance Report (IPR) January 2023**

The Committee was presented with the Integrated Performance Report for January 2023, including the Health Associated Infection Reporting Template (HAIRT) Report (January 2023) which highlighted the following key points of interest to the Committee:

**HAIRT Report**

* Staphylococcus Aureus Bacteraemia (SAB) – 0
* Clostridiodes Difficile infection (C.Diff) – 0
* Gram negative/E. coli bacteraemia (ECB) – 2
* Hand Hygiene – 97%
* Surgical Site Infections (SSI)

One confirmed Cardiac SSI in January 2023 – Superficial Sternal wound.

One confirmed Total Hip Replacement (THR) in January 2023 – (previous hip SSI August 2022)

Orthopaedic surgery had stabilised from the Quarter 2 reporting period.

VRE (Vancomycin Resistant Enterococcus) – Sporadic cases were detected in Intensive Treatment Unit 2 since January 2023. Environmental fogging was carried out along with early identification and patient isolation procedures.

**Clinical Governance**

The following key points from the Clinical Governance section of the report were highlighted:

Complaints

Stage 1: Three reported in December 2022, 100% were responded to within the timeline.

Stage 2: Three reported in December 2022, 66% were responded to within the timeline.

SAER

One was commissioned in December 2022.

Mortality

Twelve deaths were reported in December 2022 and all were within control limits.

Whistleblowing

There were no Whistleblowing concerns for the period.

The Committee discussed and noted the Integrated Performance Report (IPR) December 2022.

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

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

The Committee were advised of an increase in patient falls and were working with Healthcare Improvement Scotland (HIS), to share learning at a National level.

The Pressure Ulcer Improvement Group reported that preventative actions worked well. The Committee were informed that driver diagrams were reviewed monthly.

The number of patients requiring Intra-Aortic Balloon Pumps (IABP) exceeded the number of Pumps available so remained on the Risk Register for monitoring.

A Clinical Governance Lead workshop was held on 27 February 2023 and a draft paper was being prepared.

The Committee discussed and noted the CGRMG Update.

**7.3 CGC Terms of Reference Annual Review (Financial Year 2023/24)**

The Committee was provided with an overview of the amendments to the Terms of Reference and requested the following amendments:

The Chair of Strategic Portfolio and Governance Committee and the Chair of Endowments Sub Committee were to be added as members of the Clinical Governance Committee.

Callum Blackburn to be noted as the Whistleblowing Champion.

The Committee approved the Terms of Reference subject to the above amendment and agreement of the Board.

**7.4** **CGC Annual Workplan Financial Year 2023/24**

The Committee was provided with the Annual Workplan for the financial year 2023/24.

The Committee thanked Anne Marie Cavanagh and Nicki Hamer for the Workplan and noted the regular routine through the plan. The Committee noted that the Workplan would be reviewed regularly and reflect any changes throughout the year.

The Committee approved the Clinical Governance Workplan Financial Year for 2023/24.

**7.5 NHS GJ Board Workplan 23-24**

The Committee was provided with an overview of the NHS GJ Board Workplan for 2023-24.

The Workplan gave sight of the overall Board business and the links between the Committee and Board plans.

The Committee noted the NHS GJ Board Workplan 2023-24.

**8 Person Centred**

**8.1 Whistleblowing Q3 Update**

Anne Marie Cavanagh updated the Committee on the recent Whistleblowing Report for Quarter three, October to December 2022.

There were no new concerns raised for Quarter 3 and online training had been implemented to increase staff awareness.

The Committee noted the importance of raising awareness of Whistleblowing and advised the matter had been rephrased as “Speaking Up”. Speak up questions would be included in the iMatter survey this year.

The Committee thanked Anne Marie Cavanagh, Nicki Hamer and Callum Blackburn for the report

The Committee discussed and noted the Whistleblowing Q3 Update.

**8.2 Quarter Three Feedback Report**

The Committee was presented with the Quarter three Feedback Report for October to December 2022.

The Committee was informed that the report demonstrated an improvement for average response times, which were getting closer to the National Framework Guidance.

The Committee acknowledged the 62 compliments received and the importance of celebrating these. The Committee noted the work being carried out to positively frame responses and to improve the speed of response.

The Committee noted the Quarter three Feedback Report Update.

1. **Issues for Update**

**9.1 Update to the Board**

**Key Issues for Reporting to NHSGJ Board**

* 1. SAER – Update
  2. Learning Summaries Update

6.5 Risk Register Approval

7.1 HAIRT Report

7.3 Terms of Reference Approval, subject to amendment.

7.4 Workplan approval

8.1 Whistleblowing Update

8.2 Q3 Feedback Report

**10 Any Other Competent Business**

There was no other competent business raised.

**11 Date and Time of Next Meeting**

The next scheduled meeting of the Clinical Governance Committee is 11 May 2023 at 13:30hrs via MS Teams.