**Approved Minutes**

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

**Date: Thursday 8 May 2025, 14:00 – 16:00**

**Venue: Microsoft Teams Meeting**

**Members**

Morag Brown Non-Executive Director (Chair)

Callum Blackburn Non-Executive Director

Rebecca Maxwell Non-Executive Director

**Core Attendees**

Carolynne O’Connor Director of Operations/Deputy Chief Executive

Mark MacGregor Medical Director

Anne Marie Cavanagh Director of Nursing

**In Attendance**

Catherine Sinclair Head of Research and Development

Kevin McMahon Head of Risk and Clinical Governance

Susan Douglas Scott Board Chair

**Apologies**

Gordon James Chief Executive

Jane Christie-FlightEmployee Director

Linda Semple Non-Executive Director

Rob Moore Non-Executive Director

**Minutes**

Kirsteen Hendren Senior Corporate Administrator

**1 Opening Remarks**

* 1. **Chair’s Introductory Remarks and Wellbeing Pause**

Morag Brown opened the Committee meeting by welcoming everyone and all participated in a short wellbeing pause.

Morag Brown advised that the Annual Claims and Duty of Candour Reports had not been able to be finalised for approval at the meeting therefore to comply with governance requirements, an Extraordinary Meeting would be arranged. Susan Douglas-Scott noted her concern that the Reports had not been completed in time and that an Extraordinary meeting would be called and hoped that going forward that this would be rectified. Morag Brown advised that various issues had contributed to this, including a change in the Programme and provided assurance that this would be rectified going forward.

Morag Brown thanked Rebecca Maxwell for joining the meeting to ensure the meeting was quorate, due to the number of apologies received from members of the Committee.

* 1. **Apologies**

Apologies were noted as above.

* 1. **Declarations of Interest**

There were no declarations of interest noted.

1. **Consent Agenda Items**

**2.1 CGC Annual Governance Report**

The Committee approved the Annual Clinical Governance Report.

**3 Updates from last meeting 7 November 2024**

**3.1.1 Unapproved Minutes**

Callum Blackburn advised that he had raised an issue with regard to Freedom of Information (FOI) requests at the previous meeting and asked for it to be noted that he felt that the reports needed more detail. Kevin McMahon advised that after the previous meeting, he had taken this up with his team. Christine Nelson was asked to add this to the previous minutes under item 2.3.

The Minutes of the meeting held on 6 March 2025 were approved as an accurate record, subject to the amendment noted above.

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| **Action No.** | **Action** | **Lead**  | **Deadline** |
| 2504208/3.1.1 | Amend the minutes from 6 March 2025, item 2.3 to reflect that future FOI Reports to include more detail on the nature/theme of FOI requests. | Nicki Hamer | 15 May 2025 |

**3.1.2** **Action Log**

The Committee approved the Action Log.

* + 1. **Matters Arising**

There were no matters arising.

* 1. **Safe**

**3.2.1 Adverse Events/Significant Adverse Event Review (SAER) update**

 Kevin McMahon provided an overview of the report and highlighted the following:

* + There were 7 ongoing SAERs at various stages of the process.
	+ There were four events undergoing assessment for SAER.
	+ There were 115 open SAER and Keven McMahon advised that he was confident that many of the SAERs would be closed off prior to the next Committee meeting.

Susan Douglas-Scott highlighted the potential impact on staff wellbeing if a SAER was not dealt with timeously.

There was discussion around the improvement plan and Morag Brown asked that an update was presented at the next meeting in August 2025.

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| **Action No.** | **Action** | **Lead**  | **Deadline** |
| 2505208/3.2.1 | SAER Improvement Plan to be presented at CGC meeting in August 2025 | Kevin McMahon | 14 August 2025 |

The Committee noted the Adverse Events/Significant Adverse Event Review Update.

**3.2.2 Strategic Risk Register**

The Committee approved the Strategic Risk Register.

**3.3 Effective**

**3.3.1 Performance Report**

Anne Marie Cavanagh reported that within the Clinical Governance Key Performance Indicators (KPI’s) there were no Stage Two complaints responded to and that the response time had been approximately 26 days for Stage Two responses.

Callum Blackburn queried an item on page six of the report which reported a spike in MRSA and bacteria and then on the following page it was reported as zero. Anne Marie Cavanagh explained that this was due to the statistics being calculated on a quarterly basis and agreed that a footnote would be added to future reports.

The Committee approved the Performance Report.

**3.3.2 End of Year Overview for Health Associated Infection Reporting Template (HAIRT) 2024/25**

 Morag Brown invited Anne Marie Cavanagh to present the HAIRT Report for 2024/25.

Anne Marie Cavanagh provided an overview of the report and highlighted the trajectories for Staphylococcus Aureus Bacteraemia (SAB) and Clostridioides Difficile Infection (CDiff) on page five. It was also highlighted that Escherichia Coli Bacteraemia (E.coli) was sitting below the national trajectory.

Morag Brown asked that thanks be passed on to the Prevention and Control of Infection Team.

 The Committee approved the End of year Overview for Health Associated Infection Reporting Template (HAIRT) Update

**3.3.3 Clinical Governance Risk Management Group Update**

 The Clinical Governance Risk Management Group Update was presented for Awareness and there were no questions from the Committee.

 The Committee noted the Clinical Governance Risk Management Group update.

**3.3.4 Clinical Department Update**

 It was agreed that the Clinical Department Update for General Surgery would be carried over to the next meeting.

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| **Action No.** | **Action** | **Lead**  | **Deadline** |
| 2504208/3.3.4 | It was agreed that the Clinical Department Update would be carried over to the next meeting. | Mark MacGregor | 14 August 2025 |

**3.3.5 Golden Jubilee Research Institute Annual Performance Report 2024/25**

Morag Brown welcomed Catherine Sinclair, Head of Research to the meeting to present the Golden Jubilee Research Institute Annual Performance Report for 2024/25 with Mark MacGregor.

Catherine Sinclair provided an overview of the report and highlighted that there had been an increase of 20 projects.

Morag Brown commented on the very strong performance and Susan Douglas-Scott asked if there was a timeline for the Bio-Repository work. Catherine Sinclair advised that this was unique to NHS Golden Jubilee and that it had been included on the workplan. Susan Douglas-Scott asked that the Bio-Repository Work was kept on the Agenda and for the workplan to be shared.

Morag Brown asked for thanks to be passed to all involved.

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| **Action No.** | **Action** | **Lead**  | **Deadline** |
| 2504208/3.3.5 | Bio-Repository work to be kept on the Agenda and GJ Research Institute workplan to be shared with CGC. | Mark MacGregor | 14 August 2025 |

The Committee approved the Golden Jubilee Research Institute Annual Performance Report 2024/25.

**3.4.1 Whistleblowing Annual Report for 2024/25 including Quarter Four**

Anne Marie Cavanagh reported that no whistleblowing concerns had been raised and that staff continued to be encouraged to complete the Whistleblowing Training modules. It was noted that Whistleblowing aligned well with the Kindness Matters Programme.

Callum Blackburn advised that a meeting was being held later in the day with the Cabinet Secretary and other Whistleblowing Champions.

Rebecca Maxwell asked what assurance there was that there were no concerns raised. The Committee discussed that unfortunately there was no way to know if there were any concerns which had not been raised through the Whistleblowing process and that issues may be communicated in other ways. Rebecca asked for some form of narrative to be included in the next Annual Report to reflect this.

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| **Action No.** | **Action** | **Lead**  | **Deadline** |
| 2504208/3.4.1 | Narrative to be added to future Whistleblowing Reports to explain the difficulties of how concerns could be communicated through other routes within the organisation | Anne Marie Cavanagh/Nicki Hamer | August 2025 |

The Committee approved the Whistleblowing Annual Report for 2024/25 including Quarter Four.

**3.4.2 Patient Story**

Clinical Governance Committee welcomed the Patient Story. This was a positive patient experience with the patient receiving open heart surgery.

The Committee agreed the video provided a thorough example of good feedback.

The Committee noted the Patient Story.

**4. Consent Agenda Items**

The Committee noted the following Consent Agenda items:

**4.1 Organ Donation Committee Minutes – December 2024**

**4.2 Drugs and Therapeutics Committee Minutes – December 2024**

**4.3 Research and Development Steering Group Minutes – December 2024**

**5. Update to the Board**

The Committee confirmed they had no issues for escalation to the Board.

* The Committee noted the Adverse Events/Significant Adverse Event Review (SAER) update. The two main themes identified were around improving the process and on how quickly SAERs were completed and the impact on staff and patient care.
* The Committee approved the overview for Health Associated Infection Annual Report 2024/25. The Committee commended the work of the Teams who support this work.
* The Committee approved the Golden Jubilee Research Institute Annual Performance Report 2024/25**.** The Committee commended the 38 new research projects and commented that this was welcome news for both patients and staff.
* The Committee approved the Whistleblowing Annual Report 2024/25 and noted that the Speaking Up module was now available for staff to complete on TURAS. Assurance was sought about the absence of whistleblowing episodes. It was acknowledged that it was difficult to clarify this but that issues were raised via other non-whistleblowing routes which was reassuring.

**6. Any Other Competent Business**

No other competent business was discussed.

**7. Date and Time of Next Meeting**

The next Clinical Governance Committee meeting would take place on Thursday 14 August 2025, 10:00.

An extraordinary Clinical Governance Committee meeting was to be scheduled to approve the Duty of Candour Report and Annual Claims Report.