

**NHS GREATER GLASGOW AND CLYDE**

**Minutes of the Meeting of the  
Clinical and Care Governance Committee  
held on Tuesday 8 June 2021 at 1.30 pm  
via Microsoft Teams**

**PRESENT**

Ms Susan Brimelow OBE (in the Chair)

Clr Caroline Bamforth	Professor John Brown
Ms Jane Grant	Ms Amina Khan
Mr Ian Ritchie (Vice Chair)	Dr Paul Ryan
Ms Audrey Thompson	Ms Paula Speirs

**IN ATTENDANCE**

Dr Jennifer Armstrong	..	Medical Director
Ms Gail Caldwell	..	Director of Pharmacy
Ms Sandra Devine	..	Acting Infection Control Manager
Dr Chris Deighan	..	Deputy Medical Director Corporate Services
Ms Gillian Duncan	..	Secretariat
Ms Jennifer Haynes	..	Corporate Services Manager – Governance
Ms Natalia Hedo	..	Business Manager – Infection Control
Dr Margaret McGuire	..	Nurse Director
Ms Geraldine Jordan	..	Director of Clinical and Care Governance
Ms Elaine Vanhegan	..	Head of Corporate Governance and Administration
Ms Amy White	..	Secretariat (Minute)

			<b>ACTION BY</b>
<b>1.</b>	<b>APOLOGIES AND OPENING REMARKS</b>		
	Ms Susan Brimelow welcomed those present to this meeting of the Clinical and Care Governance Committee which she was chairing remotely via MS Teams. Ms Brimelow advised that there was a full agenda for the meeting today as the Committee had not met since December 2020 due to the revised governance arrangements as part of the response to the COVID-19 pandemic.		
	Ms Brimelow welcomed Dr Paul Ryan who had joined the Board of NHSGGC as a new Non Executive Member on 1 June 2021. Ms		

			<b>ACTION BY</b>
	<p>Brimelow also welcomed Ms Geraldine Jordan who had been appointed Director of Clinical and Care Governance.</p> <p>Ms Brimelow also welcomed Ms Natalia Hedo who would be observing the Committee. Ms Hedo had recently been appointed Business Manager in Infection Prevention and Control.</p> <p>Ms Brimelow advised that Professor Iain McInnes had joined the NHS Board, replacing Professor Dame Anna Domiczak, and Professor McInnes would also become a member of the Committee.</p> <p>Apologies for absence were intimated on behalf of Professor McInnes.</p> <p><b>NOTED</b></p>		
<b>2.</b>	<b>DECLARATIONS OF INTEREST</b>		
	<p>The Chair invited Committee members to declare any interests in any of the items to be discussed. No declarations were made.</p> <p><b>NOTED</b></p>		
<b>3.</b>	<b>MINUTES OF MEETING HELD ON 1 DECEMBER 2020</b>		
	<p>Ms Brimelow reminded the Committee that the minutes of the meeting held on 1 December 2020 [Paper No. CCG(M)20/04] had been approved previously by email during the revised governance period.</p> <p>The Committee were content to note the minutes.</p> <p><b>NOTED</b></p>		
<b>4.</b>	<b>MATTERS ARISING FROM THE MINUTES</b>		
<b>a)</b>	<p><b>Rolling Action List</b></p> <p>The Committee reviewed the items detailed on the Rolling Action List [Paper No. 21/01].</p> <p>The Committee were content to close the items noted on the Rolling Action List.</p>		

BOARD OFFICIAL

			<b>ACTION BY</b>
	<p>Ms Brimelow said that there had been a discussion at the recent Acute Services Committee regarding the Flow Navigation Hub and asked how the quality of unscheduled care would be assessed. Dr Armstrong reported that the Flow Navigation Hub was working well. She advised that number of clinical pathways had been introduced and paediatrics had also recently come on stream. She said that this was phased approach that would develop over time and she would keep the Committee updated on arrangements for the full roll out. A national publicity campaign would also be launched.</p> <p>It was agreed that a paper on the quality and safety of unscheduled care through the Flow Navigation Hub would come to a future meeting of the Committee.</p> <p>There were no further matters arising that were not on the agenda.</p> <p><b>NOTED</b></p>		Dr Armstrong
<b>5.</b>	<b>OVERVIEW</b>		
	<p>Dr Margaret McGuire, Nurse Director, and Dr Jennifer Armstrong, Medical Director, provided an overview of the following topics not included on the agenda:</p> <ul style="list-style-type: none"> <li>- Prison healthcare.</li> <li>- Child protection referrals.</li> <li>- SPSO cases.</li> <li>- Duty of Candour process for COVID-19.</li> </ul> <p>Ms Brimelow thanked Dr McGuire and Dr Armstrong for their updates and advised that she was reassured by the work underway in these areas.</p> <p><b>NOTED</b></p>		
<b>6.</b>	<b>CARE OPINION/PATIENT EXPERIENCE</b>		
	<p>The Committee considered the Care Opinion/Patient Experience Report [Paper No. 21/02] presented by Dr Margaret McGuire, Nurse Director.</p> <p>Dr McGuire said that the paper provided an overview of the performance and activity related to patient experience for Quarter 4 of 2020/21 – 1 January to 31 March 2021. This included performance against key targets, areas of service improvement</p>		

BOARD OFFICIAL

		<b>ACTION BY</b>
	<p>and key themes. She advised that the format of the paper was still being developed and asked the Committee for their views on this. It was agreed that it would be useful for a comparison with the previous quarter to be included in the report. Dr McGuire agreed and said it would also be good to look at the trends over a longer period of times as COVID-19 would have impacted on recent data.</p> <p>Dr McGuire reported that a small group was being set up to look at how complaints were managed within primary care and how best to engage primary care teams. She advised that she had also discussed how to increase the use of Care Opinion in primary care with Dr Kerri Neylon, Deputy Medical Director for Primary Care, and Ms Lorna Kelly, Acting Director of Primary Care.</p> <p>The Committee supported the steps being made towards encouraging good patient feedback in primary care. They were keen to see the rollout of Care Opinion and welcomed assurance that funding for this was being explored to ensure that this would not be a barrier to implementation. Dr McGuire agreed that it was important to encourage and support the use of Care Opinion across all settings and confirmed that this work was looking at all independent practitioners, not just primary care.</p> <p>In response to a query about cross-system learning, Dr McGuire advised that the key messages from SPSO cases were shared with all senior groups. She also confirmed that the handling of complaints was reviewed where this had been raised as a concern by the SPSO.</p> <p>The Committee agreed that it would be helpful if the report could include more qualitative data, particularly around demonstrating improvements and learning as well as an improved Stage 2 complaints response timeline.</p> <p>Dr McGuire thanked the Committee for their comments and said these would be taken on board for the next quarter.</p> <p><b>NOTED</b></p>	Dr McGuire
<b>7.</b>	<b>CLINICAL GOVERNANCE HEALTHCARE QUALITY REPORT</b>	
	<p>The Committee considered the Clinical Governance Healthcare Quality Report [Paper 21/03] presented by Ms Geraldine Jordon, Director of Clinical and Care Governance.</p>	

BOARD OFFICIAL

		<b>ACTION BY</b>
	<p>Ms Jordan advised that this was the second report that integrated healthcare quality and clinical governance and she highlighted the key updates and successes outlined in the report.</p> <p>Ms Brimelow thanked Ms Jordan for the comprehensive update and asked the Committee to provide feedback on the report.</p> <p>In response to a query about the governance around the Queen Elizabeth University Hospital (QEUH)/Royal Hospital for Children (RHC) Oversight Board and Case Note Review papers that had been published on 22<sup>nd</sup> March 2021, Mrs Jane Grant, Chief Executive, advised the Committee that the Scottish Government had established the Advice, Assurance and Review (AARG) Group which replaced the Oversight Board Structure. The first meeting had taken place on 7 June 2021 chaired by Professor Amanda Croft, Chief Nurse, Scottish Government, and had received the Board's detailed Action Plan. She advised that the AARG had provided positive feedback on the Action Plan and the work that was underway. This would be presented to the Finance, Planning and Performance Committee on 15 June 2021 as the overarching governance Committee for this work.</p> <p>There was a question about the increase in Child Protection and Adult Support and Protection referrals due to the COVID-19 pandemic. Dr McGuire acknowledged that there was an increase in referrals as we came out of the pandemic and acknowledged that this was a significant amount of work. She said that health was working closely with the HSCP Chief Officers on this.</p> <p>In response to a comment, Dr Armstrong agreed that it would be helpful to include more information in the report on risks and clinical guidelines and Ms Jordan advised that she would review the balance of risk against key successes for future reports. Ms Jordan would also look at any areas where further explanation of the terms and acronyms used would be beneficial.</p> <p>There was a query about Significant Adverse Case Reviews (SAERs) and whether it would be helpful to provide a trend analysis of the percentage completed. Dr Armstrong acknowledged that completing SAERs had been challenging during COVID-19, however, she reassured the Committee that new processes had been introduced to strengthen this.</p> <p>In response to a query about new initiatives that had been introduced due to COVID-19, Dr McGuire said that virtual visiting had been very successful as had Near Me and virtual consultations. She said that work was underway to evaluate and continue these initiatives post COVID-19.</p>	<p>Ms Jordan</p>

		ACTION BY
	<p>In response to a query about the supply of medicines, Dr Armstrong said that there had been some challenges in critical care at the beginning of the second wave but initiatives had been put in place that had helped to mitigate this, such as arrangements to contact other Boards and increasing storage capacity.</p> <p>In response to a query about risk, the Committee noted that Azets were working on this and the Committee would receive a clearer focus on what risks were the responsibility of the Committee at its next meeting.</p> <p>The Committee were assured that there was a considerable amount of work ongoing on at all levels and were content that the report format was improving. It was noted that future reports would take on board the points made. The Committee also noted that the Duty of Candour and Consent policies were in the process of being reviewed.</p> <p>Ms Brimelow thanked the Committee for their helpful feedback.</p> <p><b>NOTED</b></p>	
	<p><b>8. THROMBOLYSIS AND THROMBECTOMY SERVICES</b></p>	
	<p>The Committee considered the paper Thrombolysis and Thrombectomy Services [Paper No. 21/04] presented by Dr Jennifer Armstrong, Medical Director, and Dr Chris Deighan, Deputy Medical Director.</p> <p>Dr Armstrong and Dr Deighan asked the Committee to note the update on the work of the Board's Stroke Improvement Programme to improve performance in NHSGGC.</p> <p>Dr Deighan briefly highlighted the main areas in the paper and provided an update on the current status. He advised that the paper would be discussed by the Stroke Improvement Group by the end of June 2021.</p> <p>Dr Deighan advised that an extensive communications plan for thrombolysis had been developed and agreed with the Scottish Government and wide engagement would take pace. Dr Armstrong provided reassurance that the Scottish Government had been fully updated on stroke pathways in NHSGGC.</p> <p>In response to a query about telemedicine, Dr Deighan advised that the telemedicine model was the standard used nationally and</p>	

		<b>ACTION BY</b>
	<p>that there had been discussions with other Boards to learn from their experience of using telemedicine.</p> <p>Dr Armstrong advised that there were now three Interventional Neuroradiologists in NHSGGC and it was planned to look at attracting trainees to grow the talent and ensure we were in good stead going forward.</p> <p>The Committee were content to note the update on thrombolysis and thrombectomy and further updates would come to a future meeting of the Committee.</p> <p><b>NOTED</b></p>	Dr Armstrong
<b>9.</b>	<b>HEALTHCARE ASSOCIATED INFECTION</b>	
a)	<p><b>Healthcare Associated Infection Reporting Template (HAIRT)</b></p> <p>The Committee considered the paper Healthcare Associated Infection Reporting Template [Paper No. 21/05] presented by Ms Sandra Devine, Interim Executive Director of Infection Prevention and Control.</p> <p>Ms Devine presented the HAIRTs for March and April 2021 and asked the Committee to note the progress made against the Annual Operating Plan (AOP) targets for Staphylococcus aureus bacteraemias (SAB), Clostridioides difficile infections (CDI), E. coli bacteraemias (ECB) and other Key Performance Indicators for Infection Prevention and Control.</p> <p>Ms Devine reported performance against the three targets and advised that further improvement work was underway to reduce the number of ECBs. She noted that all CDIs were antibiotic related and no clusters had been identified during March or April.</p> <p>Ms Devine advised that the Infection Control Improvement Collaborative was working well in providing support and looking at different approaches.</p> <p>Ms Devine advised that the hand hygiene compliance rate had exceeded 97% over the two months.</p> <p>She advised that Surgical Site Infection (SSI) rates were within normal control. She advised that national reporting had not recommenced but NHSGGC had continued to report.</p>	

BOARD OFFICIAL

		<b>ACTION BY</b>
	<p>In response to a query about two specific areas in the reports, Ms Devine provided assurance that all incidents were analysed to look for any areas of concern and potential clusters. The Committee were reassured by Ms Devine's clarification of the action taken in response to these.</p> <p>Ms Devine confirmed that a summary version of the HAIRT was being finalised to go to the NHS Board Meeting on 29<sup>th</sup> June 2021 and this would make it clear that the full HAIRT had been considered by the Committee.</p> <p>The Committee noted the progress and the good work around the Infection Control Collaborative.</p> <p>The Committee were assured by the improved position and the response to any incidents.</p> <p><b>NOTED</b></p>	Ms Devine
b)	<p><b>SBAR Action Plan</b></p> <p>The Committee considered the paper SBAR Action Plan [Paper No. 21/06] presented by Ms Sandra Devine, Interim Executive Director of Infection Prevention and Control.</p> <p>Ms Devine advised that the Action Plan had initially been presented to the Committee at the end of 2017 and had been continuously updated since then. The QEUH/RHC Oversight Board report had recommended that a further update of the Action Plan be reviewed and approved by the Clinical and Care Governance.</p> <p>Ms Devine highlighted the key points from the Action Plan and advised that all actions had been completed apart from one that was not technically possible. It was agreed that some additional wording would be included in three sections of the action plan to provide further assurance and clarity and Dr Armstrong and Ms Devine would work with Mr Tom Steele, Director of Estates and Facilities, to update these sections. This would then be reviewed by the Chair and Vice Chair who would provide assurance on behalf of the Committee.</p> <p>Following approval, Mrs Grant would discuss this with Ms Amanda Croft, Chief Nursing Officer, at the Scottish Government to ensure that the Scottish Government had oversight this.</p>	Dr Armstrong/ Ms Devine

BOARD OFFICIAL

			<b>ACTION BY</b>
	<p>The Committee recognised that this was the culmination of an immense amount of work in difficult circumstances and thanked everyone involved for their work on this.</p> <p>The Committee noted that work was ongoing with the Health and Safety Executive regarding the notice of contravention.</p> <p><b>APPROVED</b></p>		
<b>10.</b>	<b>BOARD SUPPORT FOR CARE HOMES</b>		
	<p>The Committee considered the paper Board Support for Care Homes [Paper 21/07] presented by Dr Margaret McGuire, Nurse Director.</p> <p>Dr McGuire advised that the paper provided an update to the Committee in relation to Care Home Activity. She said that moving forward, the Board would continue to have responsibility for Care Homes. She said that there this was a positive report as there had been a considerable amount of improvements undertaken but accepted that there was still a great deal of work to be done. Dr McGuire also advised that the Care Home Hub model was being developed to provide a cohesive safe and high quality approach to supporting Care Homes proactively and responding to issues as they arose.</p> <p>Ms Brimelow thanked Dr McGuire for the update. She said that there was a lot of helpful information in the report and noted the continued support being provided to Care Homes.</p> <p>The Committee was content to note the report and the continued support of the Nurse Director and colleagues to Care Homes.</p> <p><b>NOTED</b></p>		
<b>11.</b>	<b>CORPORATE RISK REGISTER</b>		
	<p>Dr Armstrong provided a verbal update on the work that was currently underway to refresh the Board's Corporate Risk Register.</p> <p>Professor Brown advised that Azets were reviewing the Corporate Risk Register and this would be approved by the NHS Board in June. Following this, each Committee would be given their individual risks for scrutiny before going to the NHS Board in October.</p>		

BOARD OFFICIAL

			<b>ACTION BY</b>
	<p>Ms Brimelow said that she welcomed the review of the Corporate Risk Register and the next meeting would spend some time reviewing this.</p> <p>The Committee was content to note the review of the Corporate Risk Register.</p> <p><b>NOTED</b></p>		
<b>12.</b>	<b>BOARD CLINICAL GOVERNANCE FORUM - MINUTES OF MEETINGS</b>		
a)	<p><b>Approved minute of Board Clinical Governance Forum Meeting of 14 December 2020</b></p> <p>The Committee considered the approved minute of the Board Clinical Governance Forum that was held on 14 December 2020 [Paper No. BCGF(M)20/09].</p> <p><b>NOTED</b></p>		
b)	<p><b>Approved minute of Board Clinical Governance Forum Meeting of 1 February 2021</b></p> <p>The Committee considered the approved minute of the Board Clinical Governance Forum that was held on 1 February 2021 [Paper No. BCGF(M)21/01].</p> <p><b>NOTED</b></p>		
c)	<p><b>Approved minute of Board Clinical Governance Forum Meeting of 12 April 2021</b></p> <p>The Committee considered the approved minute of the Board Clinical Governance Forum that was held on 12 April 2021 [Paper No. BCGF(M)21/02].</p> <p><b>NOTED</b></p>		
<b>13.</b>	<b>CLOSING REMARKS AND KEY MESSAGES FOR BOARD</b>		
	<p>Ms Brimelow thanked Committee members and those who had presented papers for the constructive discussion and she provided a brief overview of the key messages that would be reflected in the minute which were:</p>		

BOARD OFFICIAL

		<b>ACTION BY</b>
	<ul style="list-style-type: none"> <li>- The Flow Navigation Hub at the QEUH had been discussed and a paper on the quality of care and Out of Hours would come to a future meeting.</li> <li>- The Committee were content to note the Care Opinion/Patient Experience Report and were assured that this would include more qualitative detail in future as well as cross-system learning and the impact of this. The Committee recorded that it would be helpful to see further information on improvements and learning, as well as an improved Stage 2 complaints response timeline. The Committee also noted that work was underway to encourage improved patient feedback in primary care.</li> <li>- The Committee noted the Clinical Governance Healthcare Quality Report and were assured that there was a considerable amount of work ongoing on at all levels and were content that the report format was improving. It was noted that future reports would further balance the risks and successes. The Committee also noted that the Duty of Candour and Consent policies were in the process of being reviewed.</li> <li>- The Committee noted the update on thrombolysis and thrombectomy and the work that was ongoing to improve performance. Further updates would come to a future meeting of the Committee.</li> <li>- The Committee noted the HAIRT and the good progress made against HCAI targets and other Key Performance Indicators for Infection Prevention and Control. The Committee were assured by the improved position and the response to any incidents. The Committee also noted the progress and the good work around the Infection Control Collaborative.</li> <li>- The Committee approved the closure of the SBAR Action Plan subject to some further narrative on three actions which the Chair and Vice Chair would sign off for assurance.</li> <li>- The Committee was content to note the report and the continued support of the Nurse Director and colleagues to Care Homes.</li> <li>- The Committee was content to note the review of the Corporate Risk Register.</li> </ul> <p>Ms Brimelow asked the Board Members present to stay behind to discuss their feedback of the meeting.</p> <p><b>NOTED</b></p>	
<b>14.</b>	<b>DATE OF NEXT MEETING</b>	
	The next meeting would take place on Tuesday 14 September 2021 at 1.30 pm, via MS Teams.	

