

ACF (M) 20/01
 Minutes: 01 - 15

NHS GREATER GLASGOW AND CLYDE

**Minutes of the Meeting of the
 Area Clinical Forum
 held in Meeting Room B, JB Russell House, Gatnavel Royal Hospital,
 on Thursday 13th February 2020**

PRESENT

Mrs Audrey Thompson (in the Chair)

Dr Gayle Cooney	Vice Chair of APsychC
Dr Cerys MacGillivray	Vice Chair of ACF
Dr Lesley Rousselet	Vice Chair of AOC
Mr Iain Miller	Chair of APC
Ms Gail Caldwell	Vice Chair of APC
Ms Julie Tomlinson	Chair of ANMC
Ms Kathy Kenmuir	Vice Chair of ANMC
Dr Ruth Hamilton	Chair of AAHP&HSC

IN ATTENDANCE

Mr Z Barlow	..	Secretariat
Dr C Deighan	..	Deputy Medical Director
Mr G Forrester	..	Deputy Head of Board Administration (for item 6)
Dr M McGuire	..	Nurse Director
Ms A McLinton	..	PCHC Programme Manager
Ms E Paton	..	Senior Prescribing Adviser
Ms C Sinclair	..	Interim Chief Officer, East Dunbartonshire

		ACTION BY
1.	WELCOME AND APOLOGIES	
	Apologies for absence were intimated on behalf of Dr Yas Aljubouri, Dr Jennifer Armstrong, Mr Jonathan Best, Ms Jane Grant, Ms Claire Ritchie, Ms Julie Murray, Dr Alastair Taylor, and Ms Pamela Joannidis.	
	NOTED	
2.	DECLARATIONS OF INTEREST	
	The Chair invited members to declare any interests in any of the items being discussed. There were no declarations made.	
	NOTED	

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<p>3.</p>	<p>MINUTES OF THE PREVIOUS MEETING OF THURSDAY 3rd OCTOBER 2019</p>	
	<p>The Forum considered the minute of the Area Clinical Forum Meeting of Thursday 12th December 2019 [Paper No. ACF(M)19/06] and were content to approve these as an accurate record.</p> <p><u>APPROVED</u></p>	
<p>4.</p>	<p>MATTERS ARISING</p>	
	<p>The committee noted the emergency care summary, regulation and expansion access update.</p> <p><u>NOTED</u></p>	
<p>5.</p>	<p>ROLL OUT OF CLINICAL PORTAL TO COMMUNITY PHARMACY</p>	
	<p>The Chair welcomed Ms Elaine Paton, Senior Prescribing Advisor, to the meeting. Ms Paton provided a verbal update on the roll out of Clinical Portal to Community Pharmacy.</p> <p>Ms Paton advised that Clinical Portal was now in use by Community Pharmacists and was having a very positive impact. The Scottish Safety Programme initiative had helped test Clinical Portal within Community Pharmacy by giving direct access.</p> <p>The roll out of portal went live in October 2019. 63% of Community Pharmacies have at least one account for registered pharmacists or pharmacy technicians live within their practice. Work was ongoing with the remaining 37%, there were small issues relating to corporate networks with some of the contractors however this was close to being resolved.</p> <p>Feedback from Pharmacists had been very positive. Cases of patients prescribed the wrong drug had been intercepted which otherwise the pharmacist would not have had sufficient information to intervene.</p> <p>There had been close work with eHealth colleagues to address governance concerns. Pharmacists when accessing records must select an option from a drop down audit menu as to why they are accessing the patient's record. There is a role based access model in place which limits the available information to that which is relevant for medication issues.</p> <p>Dr Rousselet advised that this was a significant area of interest for Optometry and would look to liaise with Ms Paton following the meeting.</p> <p>Following questioned regarding the feedback procedure for the completion of a non-appropriate prescription, it was advised that the Community Pharmacist would liaise back with the practice to highlight the issue. Community Pharmacy, like other contractors, does not have access to the Datix system although incidents should be recorded locally along with actions. Members felt that not recording this data on Datix was resulting in missed learning opportunities for all colleagues involved in the incident.</p>	

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	<p>Mr Miller commented positively on the introduction of the system, explaining the benefits in terms of clinical safety and the time in which it saves both practitioners and general practice.</p> <p>The ACF also noted the expansion of access to the Emergency Care Summary for primary care contractor groups under an agreed data sharing protocol and welcomed this development.</p> <p>It was noted that this development has the potential to be expanded to allow greater use of the Community Pharmacy network in delivering care in different ways, eg to dispense medication for patients discharged from hospital.</p> <p>The Committee welcomed this development and noted the positive impact on patient care from appropriate expansion of access to records.</p> <p><u>NOTED</u></p>	
6.	REVIEW OF AREA CLINICAL FORUM TERMS OF REFERENCE	
	<p>The Chair welcomed Mr G Forrester, Deputy Head of Board Administration, to the meeting. Mr Forrester provided an update on the terms of reference for the Area Clinical Forum.</p> <p>Mr Forrester explained that the terms of reference would be going to the Board in April for review.</p> <p>Mr Forrester advised that there had been no significant changes to the terms. The main change would be in reporting mechanism for the Area Clinical Forum reports to the Board. It was expected that a national blueprint for health boards across Scotland would be submitted in 6 months which the ACF would need to consider.</p> <p>Dr Hamilton advised Mr Forrester of a minor amendment within the terms to change 'Allied Professionals' to 'Allied Health Professionals'.</p> <p>The Forum were happy to approve the terms of reference and would review them again following the national decision.</p> <p><u>NOTED</u></p>	Mr Forrester
7.	UPDATE FROM THE CHIEF EXECUTIVE ON ONGOING BOARD BUSINESS	
	<p>Ms Grant was not present at the meeting however Dr McGuire updated on Board business on her behalf.</p> <p>Dr McGuire advised that the Board had received a second escalation to level 4 for performance. A letter from Jeane Freeman advised that improvements must be made to the treatment time guarantees, waiting times, out of hour's service, and leadership and culture.</p>	

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	<p>Performance meeting were taking place on a regular basis every week. Callum Campbell, Chief Executive of NHS Lanarkshire was appointed as the turnaround Director, working alongside the Chief Executive and the Senior Management Team. It was agreed that Mr Jonathan best should be invited to a future meeting to provide details of the turnaround plan.</p> <p><u>NOTED</u></p>	<p>Secretary</p>
<p>8.</p>	<p>NHS SCOTLAND ESCALATION UPDATE – OVERSIGHT BOARD TERMS OF REFERENCE</p>	
	<p>On 22nd November 2019, NHSGGC were escalated to Level 4 of the NHS Board Performance Framework, in respect of two areas, those being infection prevention and control; and communications and engagement.</p> <p>Dr McGuire provided an update on the Oversight Board.</p> <p>Dr McGuire advised that an Oversight Board had been established, and Prof Fiona McQueen, Chief Nursing Officer, Scottish Government, had been appointed by the Cabinet Secretary for Health and Sport, Ms Jeane Freeman, to chair the Oversight Board. Two Sub Groups of the Oversight Board had been established to consider infection prevention and control; and communications and engagement.</p> <p>Work continued with a particular focus on risk assessments. Dr McGuire thanked committee members and all members of staff for their efforts during these challenging times.</p> <p>The forum had expected to receive the Oversight Boards terms of reference for noting. There was question and concern as to why the terms of reference had not yet been shared on the website particularly with the challenges currently faced. Mrs Thompson would ask again at the Oversight Board if the terms of reference could be shared. It was noted that the Cabinet Secretary had particularly asked the ACF at the last Annual Review about their involvement and sight of materials in relation to infection control.</p> <p>Dr Maguire noted work was ongoing to consider the capacity of the executive team and what requirements were for additional staff to support the programme management office set up to furnish the oversight boards with all relevant information in a timely manner. A paper would be submitted to the Board in February around building capacity within the corporate management team.</p> <p>Dr McGuire advised that permission had been granted to advertise for a Deputy Nurse Director for Corporate & Quality. The post would also link with all 6 partnerships.</p> <p><u>NOTED</u></p>	<p>Mrs Thompson</p>
<p>9.</p>	<p>NHSGGC MID-YEAR REVIEW: 24th OCTOBER 2019</p>	
	<p>The Forum received a summarised letter containing key points of discussion for the Mid-Year Review from the Cabinet Secretary.</p>	

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	<p>The summary covered points including: Board escalation to level 4, finance and performance issues including elective waiting times, mental health waiting times, unscheduled care and cancer.</p> <p>Dr McGuire agreed to keep the Forum up to date. It was agreed that ‘Risk Governance’ would be added to all area committee agendas for discussion. The Forum would look to invite Marion Bain to the April meeting to update on the infection control case review and findings to date.</p> <p>Following from a previous discussion, the Forum had a discussion which highlighted the recent appointment of a new whistleblowing champion and the anticipated publication of new standards for all healthcare settings. Members were asked to add whistleblowing as an agenda item at each of their area committees. Any concerns raised at the advisory committees would be fed through the Area Clinical Forum. The Forum also acknowledge the need to support staff involved in cases. It was agreed that Rona Sweeney, Non-Executive Board Member would be invited to discuss the governance of investigations.</p> <p><u>NOTED</u></p>	<p>Area Chairs Secretary</p> <p>Area Chairs Secretary</p>
<p>10.</p>	<p>AREA CLINICAL FORUM PRIORITIES 2020</p>	
	<p>The Chair asked all area committee chairs to consider suggesting priorities for the Area Clinical Forum for 2020.</p> <p><u>NOTED</u></p>	
<p>11.</p>	<p>THE PURSUIT OF HEALTHCARE EXCELLENCE – HEALTHCARE QUALITY STRATEGY UPDATE</p>	
	<p>The Forum received a paper and verbal update from Dr McGuire which summarised progress in implementation of the Healthcare Quality Strategy. Members particularly noted the links with work around developing a positive culture and the need to support and value staff at all levels in the organisation.</p> <p>The Forum would look to invite Anne MacPherson to discuss the culture and leadership work in June.</p> <p>The Forum had a discussion following concern raised from Dr Hamilton regarding the medical devices regulation and the changes in EU law which governs the devices provided by NHSGGC. There was concerns from Allied Health Professionals that there could be patients using devices that are not compliant under the new law. The concern would be taken to the Informal Directors meeting and would be further discussed at the next Area Clinical Forum. It was agreed that the AHPs concerns would be further discussed at the next meeting under the new Risk Governance agenda item.</p> <p><u>NOTED</u></p>	<p>Secretary</p> <p>Dr Maguire Secretary</p>

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12.	PERSON CENTRED VISITING UPDATE		
	<p>The Forum received a report on person centred visiting from Ms Ann McLinton, Programme Manager.</p> <p>The report provided a summary of progress achieved to further develop and enhance the person centred approach to visiting in NHSGGC. It was expected that a full implementation of core principles for person centred visiting across all inpatient bed holding areas would be achieved by May 2020. Engagement and testing phases of the programme of work were largely complete in the acute sectors/directorates.</p> <p>Work was ongoing with the communications department to help promote person centred visiting. A website had been created and a patient information leaflet was being established.</p> <p>The Forum were advised that a learning event took place in November which highlighted unexpected benefits found from person centred visiting. The Forum made positive comment about the approach, highlighting that it was a good example of developments in NHSGGC.</p> <p><u>NOTED</u></p>		
13.	BRIEF UPDATE FROM EACH ADVISORY COMMITTEE ON SALIENT BUSINESS POINTS AND MINUTES TO NOTE		
	<p>Members reviewed a brief update from Advisory Committees and the topics discussed at their most recent meetings.</p> <p><u>NOTED</u></p>		
14.	CLOSING REMARKS AND KEY MESSAGES FOR THE BOARD		
	<p>The Forum agreed the key messages for the Board would include; Clinical Portal to Community Pharmacy, NHS Scotland Escalation Update, Whistleblowing, Person Centred Visiting, Healthcare Quality Strategy Update, Medical Devices and Updates from Advisory Committees.</p> <p><u>NOTED</u></p>		
15.	DATE OF NEXT MEETING		
	Thursday 9 th April 2020, 2.00pm, Boardroom, JB Russell House		