

<b>NHS Greater Glasgow &amp; Clyde</b>	<b>Paper No. 23/97</b>
<b>Paper Title</b>	<b>Standing Committee Chair's Board Report</b>
<b>Meeting:</b>	<b>Board Meeting</b>
<b>Date of Meeting:</b>	<b>Tuesday, 19 December 2023</b>
<b>Purpose of Paper:</b>	<b>For Assurance</b>
<b>Classification:</b>	<b>Board Official</b>
<b>Name of Reporting Committee</b>	<b>Clinical and Care Governance Committee</b>
<b>Date of Reporting Committee</b>	<b>05 December 2023</b>
<b>Committee Chairperson</b>	<b>Dr Paul Ryan</b>

### 1. Purpose of Paper

**The purpose of this paper is to:** inform the NHS Board on key items of discussion at the NHSGGC Clinical and Care Governance Committee.

### 2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the Clinical and Care Governance Committee on 05 December 2023 as set out below and seek further assurance as required.

### 3. Key Items of Discussion

#### 3.1 Gynaecology Oncology Update

- Paper provided for awareness.
- The Committee noted the waiting list position and a summary of current actions.
- The Committee were updated with regard to NHSGGC and West of Scotland position against national ovarian cancer Quality Performance Indicators.
- The Committee noted a summary of the review of the Incident Management.
- Committee Members noted the report

#### 3.2 Best Start Maternity and Neonatal Care

- Paper provided for assurance.
- The Committee noted updates with regards to the implementation of the refreshed Best Start recommendations announced by the Scottish Government in the summer of 2022. The key areas of implementation included:
  - Continuity of care
  - Engagement with women and families
  - Person Centred Visiting
  - Multidisciplinary team training and working
  - Choice of Place of Birth
  - National Bereavement Care pathways
  - Implementation of the national SAER Framework

- Developing neonatal Services
- The Committee were assured by the report

### 3.3 Mental Health Clinical Governance Report

- Paper provided for assurance.
- The Committee noted the annual report of the Mental Health Services Clinical Governance Group.
- The Committee noted key updates in the areas of:
  - Mental Health clinical governance arrangements within the Health and Social Care Partnerships
  - The function of the Mental Health Services Clinical Governance Group (MHSCGG)
  - Arrangements to support the MHSCGG
  - Ongoing monitoring and assurance arrangements for key quality indicators
  - Board reporting and oversight of issues affecting MHS, such as cross system learning, key successes, and key risks.
  - Recent examples of MHSCGG agenda items.
- The Committee were assured by the report

### 3.4 Medicines and Pharmacy Report

- Paper provided for assurance.
- The Committee noted an update with regard to the infrastructure and ongoing work to mitigate the risk of harm from medicines.
- The Committee noted key updates in the following areas:
  - Medication systems and practice
  - Patients and the Public
  - Healthcare Professionals training and development.
  - Medicines Governance Arrangements
- Committee Members were assured by the report.

### 3.5 Infection Prevention and Control

#### a) Healthcare Associated Infection Reporting Template

- Paper provided for assurance.
- The Committee noted the update on performance against the Healthcare Associated targets for *Staphylococcus aureus* bacteraemias (SAB), *Clostridioides difficile* infections (CDI), *E. coli* bacteraemias (ECB), incidents and outbreaks and all other Healthcare Associated Infections' (HCAI) activities across NHS Greater Glasgow & Clyde (NHSGGC) in July & August 2023.
- The Committee noted the last published ARHAI report for the period April 2023 – June 2023.
- The Committee were advised the cleaning compliance and Estate compliance were above 95% for July and August 2023.
- Committee Members were assured by the report.

### **b) Board Infection Control Committee**

- The Committee noted the approved minutes of the meeting held on 24 August 2023 which were provided for assurance.

### **3.6 HSMR**

- Paper provided for assurance.
- The Committee noted the an updated position to outline the HSMR figures for NHSGGC for the periods January 2022 to December 2022, and April 2022 to March 2023.
- The Committee were advised that 2 hospitals, RAH/VoL and IRH have an HSMR above the Scottish average. The hospitals are within control limits in the funnel plot by hospitals.
- The Committee noted an update regarding an ongoing work within the Clyde Sector.
- The Committee were assured by the report.

### **3.7 Clinical Risk Report**

- Paper provided for assurance
- The Committee noted the updates on key clinical risk activity between January 2023 and June 2023, which included:
  - Progress made in reducing delays in significant adverse event reviews (SAERs) predating January 2022.
  - Additional 265 staff who completed SAER investigator training bringing the total of staff who completed the training since June 2021 to 692.
  - Progress made in reducing the number of events awaiting a decision on whether to progress to SAER which pre date January 2022.
  - 74 SAERs closed between January and June 2023 which were recorded as Duty of Candour, with good compliance with Duty of Candour requirements.
  - The commencement of the work to standardise the coding of adverse events reported by all Scottish NHS Boards.
- The Committee were assured by the report

### **3.8 SNAP Report**

- Paper provided for assurance.
- The Committee noted a summary position for NHSGGC in relation to the 2023 Scottish National Audit Programme (SNAP) annual governance process (the 2023 annual reports are based on 2022 data)
- The Committee noted that each outlier has been reviewed and responded to as required and NHSGGC had a robust processes in place for responding to SNAP and the annual SNAP governance process.
- The Committee were advised that there was an excellent clinical engagement with the audit process in NHSGGC, including data collection, ongoing data review, oversight of audit results, review of any outliers, and ongoing work to deliver high quality evidence based care to patients.
- Committee Members were assured by the report.

### **3.9 Patient Experience, Complaints, Ombudsman, Person Centred Improvement Programme Report**

- Paper provided for assurance.
- The Committee noted an overview of complaints performance, wider patient, and family feedback mechanisms and how these translated into improvement for Quarter 2 (1 July – 30 September 2023).
- The Committee noted an update with regard to person-centred improvement work undertaken across NHS GGC.
- Committee Members were assured by the paper.

### **3.10 Research Ethics Committee Annual Report**

- Paper provided for assurance.
- The Committee noted a summary of the activities of the four ethics committees during the previous reporting year
- The Committee noted key updates which included:
  - Role and workload of volunteers who make up the 4 committees
  - Face to face training day on the 28th September 2022 at the University of Strathclyde with over 60 attendees
  - Study numbers were comparable to previous years for WoSRES
  - Increase in the percentage of applications receiving a provisional opinion at the first meeting. WoSRES was slightly better than the UK average
  - 100% of the applications were reviewed within the target of 60 days
  - Three of the four WoSRES committees underwent audit inspection in 2023 based on their activity over the previous year and received full accreditation.
  - The expected combined review time for Clinical Trials involving investigational medicinal compounds of 60 days was not being met due to some current issues with the regulator, the MHRA.
  - Scotland plans to adopt a combined governance and ethical review for all clinical research studies which would require organisational change.
- The Committee were assured by the report.

### **3.11 West of Scotland Cancer Network QPI Report**

- Paper provided for assurance.
- The Committee noted an annual update on NHS GGC Cancer Quality Performance Indicator Action Plans
- The Committee noted a summary of the established governance structures the QPI Reports and Action Plans, as well as, the key reporting figures from the QPI reports for period September 2022 to August 2023, and an update on a progress with regard to actions.
- The Committee were assured by the report.

### **3.12 Duty of Candour Annual Report Addendum**

- Paper provided for assurance.

- The Committee noted the NHSGGC Duty of Candour Annual Report 2022/2023 addendum update, as agreed, which included detail of any additional duty of candour adverse events, as well as those which were not yet concluded.
- The Committee were advised that at November 2023 the figures increased from the 35 reported to a total of 76 Duty of Candour incidents between 1st April 2022 and 31st March 2023.
- The Committee were assured by the report.

### **3.13 Extract from Corporate Risk Register**

- Paper provided for approval.
- The Committee noted that all the risks aligned to the Clinical and Care Governance Committee had been reviewed and there were no proposed changes at this time.
- Committee Members approved the report.

### **4. Issues for referral to other Standing Committees or escalation to the NHS Board**

There were no issues for referral to other Standing Committees or escalation to the NHS Board.

### **5. Date of the Next Meeting**

The next meeting of the Clinical and Care Governance Committee will take place on Tuesday, 05 March 2024.