

Minute of a virtual meeting of the **Joint Clinical and Care Governance Committee**  
on **Tuesday 24 January 2023 at 13.00**

**Present** Steven Johnston, Chair  
Meghan McEwen, Vice Chair  
Rachael King, Vice Chair  
Des Creasey, Non-Executive Board member  
Lindsay Hall, Integration Joint Board Member  
Jean Stevenson, Integration Joint Board Member

**In Attendance** Stephen Brown, Integration Joint Board Chief Officer  
Sara Lewis, Interim Director of Public Health  
Jim Lyon, Interim Chief Social Work Officer  
Anthony McDavitt, Director of Pharmacy  
Judy Sinclair, Clinical Governance and Quality Improvement Manager  
Monique Sterrenburg Interim Deputy Medical Director  
Sam Thomas, Director of Nursing, Allied Health Professions and Acute Services  
Emma West, Corporate Services Manager

**C72 Welcome and Apologies**

Apologies had been received from R Gold, M Dickson, M Henry, D Moody and I Taylor.

**C73 Declarations of Interest – Agenda Items**

No interests were declared in relation to agenda items.

**C74 Minute of meeting held on 4 October 2022**

The minute of the Joint Clinical and Care Governance Committee meeting held on 4 October 2022 was accepted as an accurate record of the meeting and approved.

**C75 Matters Arising**

Mental Health Transfer bed

Members queried if the increase in activity had been considered by the Quality Forum.

**C76 Action Log**

The Committee reviewed and updated the action log. (See action log for details)

**Governance**

**C77 Whistleblowing Quarterly report – JCCGC2223-39**

The Interim Deputy Medical Director presented the report advising that NHS Orkney were required to monitor Whistleblowing concerns and performance against the key performance indicators.

There had been two concerns raised under the Whistleblowing Standards during the third quarter of financial year 2022/2023. One was not deemed to meet the standards after initial review and the second was currently being progressed as a stage two investigation.

Members noted that the training data provided in the report was limited in the assurance it provided as there was no benchmarking or percentage details, it was requested the both were included in the annual report.

R King questioned whether comparable data was available for social care and whether the limited number of confidential contacts provided the required capacity whilst avoiding conflict of interest. Members were advised that links had been established with confidential contacts in NHS Shetland to provide resilience and reduce conflicts of interest.

### **Decision / Conclusion**

The Committee reviewed the report and took assurance from the information provided, it was requested that Jason Taylor, Whistleblowing Champion attend the meeting when the annual report was discussed.

#### **C78 Terms of Reference and Workplan – JCCGC2223-40**

The Corporate Services Manager presented the reviewed and updated Terms of Reference and workplan for committee approval.

Members were advised that the amendments had been made following discussion at the development session and subsequent comments received and the main amendments were highlighted for ease of reference.

It was noted that there could be an element of cross over with the business of the Performance and Audit Committee of the Integration Joint Board, the Chairs of the Committees would continue to communicate to ensure correct reporting routes and avoid any duplication and mitigate risk.

Discussion was held around whether additional membership was required, such as those in the role of Lead Midwife or Lead AHP but it was agreed that this would not be a standing requirement as the Terms of Reference allowed attendance for specific agenda items where required and also the ability to deputise.

Members queried whether a carer representative should be considered as an additional committee member, this was discussed further in the following agenda item.

J Lyon advised that Chief Social Work Officers report was based on a nationally prescribed Scottish Government template, but that reporting would be developed moving forward to ensure clinical and staff engagement and conferring with elected members as required.

The Chief Officer noted the need to reconsider the assurance frameworks and establishment of committee structures within social work and social care, as this work had been delayed due to the pandemic and workforce and capacity challenges.

### **Decision / Conclusion**

The Committee approved the Committee Terms of Reference and Workplan for 2023/24 which would be formally approved by the Board, subject to the strengthening of the wording around input from carers.

#### **C79 Public Representative – JCCGC2223-41**

The Corporate Services Manager presented the report which outlined the proposed role descriptor for a public representative on the committee.

The Corporate Services Manager advised that she had consulted with other Boards around current requirements for public representatives with a varied response, some Boards did have public representatives, but others had replaced this with presentations from wide ranging community groups to educate and build relationships.

Members discussed whether there should also be a carer representative, acknowledging that there were many types of carer with differing experiences and skill sets which would need to be recognised. There was a strong consensus that the views of carers and care experienced should be included but that a single representative may not be the solution to this.

There was also the challenge of ensuring that the public representative and/or carer representative was fully supported in all training and development needs and was supported in their caring duties to enable them to attend meetings.

### **Decision / Conclusion**

The Committee agreed that further work was required but were very supportive of both public and carer representation, once work had been completed to ensure that this was viable and appropriate. The Chief Officer agreed to bring this back for future discussion.

### **Strategy**

No agenda items this meeting

### **Clinical Quality and Safety**

#### **C80 Quality Forum approved minutes**

The Interim Deputy Medical Director presented a verbal update from the meetings of the Quality Forum, noting an improvement in reporting culture.

It was noted that the high numbers of DATIX were appropriate and reporting was encouraged from staff, there were capacity challenges around the investigation of incidents and teams were being supported in this area to enable learning in a timely and efficient manner.

R King noted that a comparative report providing assurances on the Social Care aspect would be welcomed. She also questioned whether data was captured from

care in people's own homes or the community and was advised that this was, but there were additional challenges, work would continue with primary and community care colleagues to promote and encourage reporting.

An update was provided on the High Dependency Unit, staff did not have high exposure which could lead to loss of competences and there was a need to rebuild this and ensure that staffing levels were appropriate. There had been recruitment of new staff along with further training for existing staff members to enable them to work across services, with education planning in the short, medium, and long term. Robust conversations continued with the critical care team in Aberdeen Royal Infirmary to ensure that there was no detriment to patients, along with a weekly HDU huddle at the Balfour.

The requirement for a multi-agency approach to suicide reviews was stressed and it was advised that there was involvement from Orkney Health and Care Staff at the weekly incident review group, and a multi-agency task force had been established.

### **Decision / Conclusion**

The Committee noted the verbal update provided and took assurance from the information contained within the meeting notes.

#### **C81 Biennial Report on Adult Support and Protection - JCCGC2223–43**

The Chief Social Work Officer presented the report for awareness, discussion, and reflection.

Members were advised that the Public Protection Committee combined adult and child protection, and work had been undertaken to increase the resource available, including the formalised appointment of lead officer and learning and development officer.

It was noted that the workforce was adapting to needs and there was reasonable confidence in future assessments following the improvement plan, but it was acknowledged that there was still work required, and the journey was continuing.

A staff survey had been undertaken with a positive response rate, all evidence had been requested in a timely manner and a case file audit was currently taking place. There had been work completed around policy, procedure and training over the last few years and a degree of honesty was required on the current status and future aspirations.

### **Decision / Conclusion**

The Committee noted the report and welcomed the further assurance strengthening this area brought, and the outcomes of the review in due course.

#### **C82 Orkney Cancer Care Delivery Group - JCCGC2223-44**

The Interim Deputy Medical Director presented the minutes for information and assurance informing the Committee that these would be included as a standing agenda item at future meetings.

### **Decision / Conclusion**

The Committee noted the minutes provided and welcomed the inclusion as a standing agenda item going forward.

### **Policy**

There were no policies for approval this meeting.

### **Medicines Management**

There were no agenda items submitted for the meeting.

### **Population Health**

#### **C83 Public Health Update - JCCGC2223-45**

The Consultant in Public Health presented the update highlighting the following:

- There had been a significant increase in influenza and group A Streptococcus nationally and locally, Orkney were slightly behind the trend nationally and data would continue to be provided
- Influenza testing was mainly within a hospital setting and although concerning was now decreasing across Scotland, there was a need to remain vigilant
- The Ebola outbreak had been declared over, work on disease management would continue.
- Vaccination rates across all programmes remained high, but there had been challenges of delivery in some areas and cohorts

M McEwen noted the lower rate of vaccination uptake in social care workers and sought to further understand the barriers and how this figure could be increased to ensure protection of those delivering key services.

S Lewis advised that delivery had been offered in care homes and staff questioned on their preferences, there was some vaccine hesitancy in the younger age groups which many carers fell into. This was being addressed by a multi service approach and wide promotion at all opportunities. It was noted that some staff in this cohort could have been captured in other areas of the data if they fell into risk groups.

The Director of Pharmacy acknowledged the efforts of the small pharmacy team in providing services around supply, distribution, and procurement and also community pharmacists in the work around strep A in collaboration with GP practices.

### **Decision / Conclusion**

The committee noted the information contained with the Public Health update and gave thanks to the staff involved and the public for the high vaccination uptake locally.

## **Risk and Assurance**

### **C84 Corporate Risks aligned to the Clinical and Care Governance Committee – JCCGC2223-46**

The Interim Deputy Medical Director presented the paper which provided an update and overview of the management of risks related to the business of the Joint Clinical and Care Governance Committee.

The committee welcomed the report and suggested that a deep dive into specific risk areas would be beneficial.

#### **Decision / Conclusion**

The committee welcomed the update provided.

### **C85 Cross Committee Assurance Reports**

No issues had been raised from other Governance Committees

### **C86 Emerging Issues**

#### **Press report - Children and Families service**

Members were advised that there would be further coverage around this matter in the local press, work continued with managers around culture and there was a need to ensure an impact on public confidence was mitigated by providing assurance and maintaining a culture of openness and transparency.

### **C87 Any other Competent Business**

#### **Fostering and Adoption inspection**

Members were advised that the formal reporting route from the outcomes of the inspection would be the Performance and Audit Committee of the IJB and the Orkney Islands Council Policy and Resources Committee.

It was noted that some actions from previous reports had not been addressed fully and there was a need to ensure visibility, clear reporting and details of support provided. The reports would be shared with committee members if requested.

### **C88 Items to be brought to the attention of the IJB, Board or other Governance Committees**

It was agreed that the following items would be highlighted to the NHS Orkney Board and Integration Joint Board:

- Approval of the Terms of Reference and Workplan
- The current work around the High Dependency Unit

**Items for Information and noting**

**C89      Schedule of meetings 2023/24**

Members noted the schedule of future meetings.

**C90      Record of attendance**

Members noted the record of attendance