

Minute of a virtual meeting of the **Joint Clinical and Care Governance Committee**
on **Tuesday 3 October 2023 at 14.00**

Present Steven Johnston, Chair
David Campbell, Non-Executive Board Member
Rona Gold, Vice Chair (Health), Non-Executive Board Member
Jean Stevenson, Vice Chair (Care), Integration Joint Board Member
Ivan Taylor, Integration Joint Board Member

In Attendance Malcom Metcalfe, Interim Medical Director
Sara Lewis, Acting Director of Public Health
Anthony McDavitt, Director of Pharmacy
Sharon Ann Paget, Interim Chief Social Work Officer
Laura Skaife-Knight, Chief Executive
Sam Thomas Director of Nursing, Midwifery, AHPs and Acute
Lynda Bradford, Head of Health and Community Care (item 8.3)
Monique Sterrenburg, Deputy Interim Medical Director
Juie Colquhoun (Minute taker)

C46 **Welcome and Apologies**

Apologies had been received from S Brown, M Swannie, L Wilson and H Woodbridge

C47 **Declarations of Interest – Agenda Items**

No interests were declared in relation to agenda items.

C48 **Minute of meeting held on 23 July 2023**

The minute of the Joint Clinical and Care Governance Committee meeting held on 23 July 2023 was accepted as an accurate record of the meeting and approved with the following additions:

Post meeting note: The Annual Duty of Candour report 2022/23 remains extant; accurate at the time the report was written. Work is in progress to strengthen processes to confirm learning has been shared and implemented. Clarity will be sought on the outcome of the 3 outstanding cases from 2022/23 and information fed back to the committee in due course.

C49 **Matters Arising**

Learning from Clinical Incidents Annual Report

Further to the appointment of two nurse managers, the Chair requested an update around the audit paperwork in clinical record keeping. The Director of Nursing, Midwifery, AHPs and Acute confirmed discussions had taken place around the audit paperwork and an update would be provided to the Quality Forum.

Duty of Candour Annual Report

It was agreed that an update on the three outstanding SAER would be provided.

Speech and Language Pressures Report

The Chair asked when the report would return to the Committee as previously agreed and suggested wider Health Board services could be included, addressing performance pressures. The Chief Executive requested an update at the next JCCGC meeting given the significance of areas that have been raised.

C50 Action Log

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

Governance

C51 Whistleblowing Quarterly report - JCCGC 2324-21

The Chief Executive presented the quarterly whistleblowing update which was a mandatory report as required by the Independent National Whistleblowing Office and highlighted that she was the Executive Lead for Whistleblowing and continued to work closely with the Whistleblowing Champion.

The risk in relation to NHS Orkney's access to confidential contacts had been mitigated through the recruitment of two new confidential contacts, taking the number from two to four.

No whistleblowing concerns had been raised during the reporting period April to June 2023.

The Chief Executive attended the first national Whistleblowing Conference in September 2023 to ensure NHS Orkney remained in touch with latest developments and learning on a national level.

Decision / Conclusion

The Committee reviewed the report and took assurance.

C52 Increased frequency of JCCGC meetings - JCCGC 2324-22

The Chair presented the report outlining the proposal that the committee change to bimonthly meetings moving forward.

Members discussed the timeliness of the meetings and raised concern that six, three-hour meetings would impact resources. The Chair highlighted that there would likely be an increase in the business covered therefore, would be tentative to reduce meetings to a two-hour period. Fewer agenda setting meetings were anticipated which would balance some of the additional resource required.

The Director of Nursing, Midwifery, AHPs and Acute agreed that an increase in meetings was essential to ensure all items were given due diligence and noted the possibility of the duration of meetings decreasing following a review of governance pathways.

The Chief Executive informed members that Board Secretary support and an operational governance review had commenced and would include committees and sub committees.

Decision / Conclusion

Members agreed to increase the meeting frequency from quarterly to bimonthly for a trial period with a view to bring the meeting time down to two hours. The refreshed Quality Forum would be key.

C53 Social Work and Social Care Governance Board Terms of Reference - JCCGC 2324-23

The Acting Chief Social Work Officer presented the report informing members that a new Social Work and Social Care Governance Board had been set up with the first meeting in mid-November. This group would feed into JCCGC and from there, provide assurance to the Board and IJB.

The meetings would be held monthly and report to the JCCGC with an update provided at the next meeting on 27 November 2023.

D Campbell queried the absence of Chief Officer within the membership of the Social Work and Social Care Governance Board Terms of Reference.

R Gold queried the measurement of success of the Framework. The Acting Chief Social Work Officer assured members that as this was the first of its kind and measurement would be an on-going process.

The Director of Nursing, Midwifery, AHPs and Acute thanked the team for producing the report however, raised concern that there were no clinical professional leadership detailed within the terms of reference in relation to nurses, midwifery, AHPs or Pharmacy and General Practice.

The Director of Pharmacy suggested that the Medicines Incidents Framework would be beneficial within the Social Work and Social Care Governance Board.

Decision / Conclusion

The Committee noted the Terms of Reference.

Strategy

C54 Clinical Strategy Progress update

The Interim Deputy Medical Director provided a verbal update around the Clinical Strategy process and highlighted the following:

- Training had been completed for a smoking cessation specialist to support women through pregnancy
- There was a target to assess the need for training in other high risk areas
- Communication planning for smoking communications had been completed with a full plan of communication due for the end of the year

- There had been improvement within the Psychiatric Liaison Service model which was developed with IJB approval
- There was a new strategy for 2025-30 being planned
- The Children's Service plan 2023-2026 had been developed and would be published online
- Work had started with island communities to co-design models of care and services which would be tailored, effective and sustainable. The first three islands were Papa Westray, Eday and North Ronaldsay, with plans actioned by March 2024
- Trauma informed care was accessible for all, and NHS Orkney had been selected as a pilot for Trauma based care

Decision / Conclusion

The Committee noted the update.

Quality and Safety

C55 Quality Forum Chair's Update

The Interim Deputy Medical Director provided a verbal update to members around the work of the Quality Forum and presented the minutes from the meeting held on the 14 June 2023.

S Stockan, Physiotherapist had delivered a presentation to the Scottish Patient Safety Program which highlighted that the local aim was to reduce falls by 15% and reduce falls with harm by 20% by the end of August 2023.

The Theatre Improvement Group had commenced following an audit which demonstrated areas of improvement. The improvement cycle would continue on a monthly basis.

Decision / Conclusion

The Committee reviewed the minutes and took assurance from the updates provided.

C56 Mental Welfare Commission Report and Action Plan - JCCGC 2324-24

The Head of Health and Community Care presented the report, updating members of the findings and recommended actions following the first Mental Welfare Commission visit.

The Mental Welfare Commission recently conducted an inspection and an action plan to address the recommendations was due on 2 November 2023.

Decision / Conclusion

The Committee noted the report and it was agreed that the Mental Welfare Commission Report action plan would be presented to SLT for approval on ahead of Board on 26 October 2023.

C57 Chief Social Work Officer Annual Report JCCGC2324-25

The Committee had received the Chief Social Work Officers Annual Report 2022/23, providing assurance that social work and social care services were being delivered to an acceptable standard. The following matters were raised:

- The Joint Inspection of Children and Young People in Need of Care and Protection - The findings of the Care Inspectorate's first and second Progress Reviews were covered in previous CSWO Annual Reports, and acknowledged that progress had been made but there was still work to do. Consequently, the Partnership was advised that there were no plans for a further Progress Review and the Care Inspectorate required only a further Position Statement at the end of March 2023
- The Joint Inspection of Adult Support and Protection (ASP) - The inspection did not reveal areas for improvement that the partnership was not already aware of, and considerable work has been supported by external Social Work Consultants and the Independent Chair of the Orkney Public Protection Committee

Decision / Conclusion

The Committee reviewed the report, took assurance from the content, and agreed to retain the focus on learning from Significant Adverse events and other similar areas which align to the Terms of Reference of JCCGC in future reporting.

C58 Care at Home Assurance Report JCCGC2324-26

Members welcomed the first six monthly assurance report covering OHAC's Care at Home services which provided an overview of progress and performance within the reporting period January 2022 to August 2023.

Despite significant staffing pressures, the number of hours of unmet need had reduced dramatically in recent months and the service manager and their team should be commended. There were fantastic examples of person-centred care with staff going above and beyond.

The first unannounced visit since October 2019 from the Care Inspectorate was carried out between 31 July and 10 August 2023. A final report would be published on 28 October 2023.

It was agreed that waiting times data would be included in future reporting to capture the length of time someone on the list receives treatment.

Decision / Conclusion

The Committee reviewed the report and took assurance.

Policies for Approval

C59 Clinical Policy Development Update JCCGC-2324-27

The Director of Nursing, Midwifery, AHP and Acute provided an update on the policy review process.

A review had commenced to ensure all clinical policy documents within the remit of the Director of Nursing, Midwifery, AHP and Chief Officer for Acute Services were updated, in terms of layout, and in line with current clinical practice and guidelines.

Decision / Conclusion

The Committee noted the update and it was agreed that an updated RAG status would be shared to members.

Population Health

C60 Child Health Surveillance Programme (pre -school) Performance and delivery 2021/2022 JCCGC2324-29

The Interim Director of Public Health provided an update on the delivery of the National Child Health Surveillance Programme across Orkney. Whilst there were areas to celebrate, the proportion of children having Child Health reviews carried out had dropped significantly following the outbreak of the Pandemic, with Health Visitor staffing cited as a key reason. Members raised concern around the potential for missed diagnoses or opportunities to intervene in a timely manner.

The Chief Executive praised the excellent report and how it set out where there was assurance, limited and no assurance to the committee and requested clarity on the direction of the work moving forward given the risks identified within the report.

Decision / Conclusion

The committee noted the report.

Risk and Assurance

C61 Corporate Risks aligned to the Joint Clinical and Care Governance Committee JCCGC2324-30

The Planning, Performance and Risk Manager presented the report which provided an update and overview of the management of risks related to this committee.

It was noted that no new or escalated risks had been added to the Corporate Risk Register during the reporting period and 1 risk had closed.

There were 3 Corporate risks and 13 Operational risks aligned to the Joint Clinical Care and Governance Committee.

A review and refresh of the Risk Register was in progress with the Chief Executive and the Planning, Performance and Risk Manager.

Members welcomed the conversations around risk and the importance of placing it further up the agenda and agreed to further discuss risk at the committee development session.

Whilst appreciating risks can be stagnant, R Gold emphasised the importance of risks being presented as current as possible in future reports.

Decision / Conclusion

The committee noted the report.

C62 Emerging Issues

none

C63 Any other Competent Business

There was no other competent business.

C64 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:

Board

Change in frequency of committee meetings
Social Work and Social Care Governance Board
Mental Welfare commission report
Care at Home Assurance report
Child Health Surveillance
Review of Clinical Policies
Risk Register update

Items for Information and noting

C65 Schedule of meetings 2023/24

Members noted the schedule of future meetings.

C66 Record of attendance

Members noted the record of attendance.

The meeting closed at 17.14