ABERDEEN, 1 October 2024. Minute of Meeting of the CLINICAL AND CARE GOVERNANCE COMMITTEE. <u>Present</u>:- Mark Burrell <u>Chairperson</u>; and David Blackbourn, Councillor Christian Allard and Councillor Jennifer Bonsell.

In attendance:- Caroline Howarth, Claire Wilson, Arlene Hurst, Rachael Little, Jane Gibson, Val Vertigans, Vicki Johnstone, Kylie McDonnell, Martin Allan, Elaine Morrison, Daniella Brawley, Sandy Reid and Mark Masson (Clerk).

Please note that if any changes are made to this minute at the point of approval, these will be outlined in the subsequent minute and this document will not be retrospectively altered.

WELCOME AND APOLOGIES

1. The Chairperson welcomed everyone to the meeting, particularly Professor David Blackbourn who was attending his first meeting as an NHS Grampian Board member on the Committee, replacing Professor Bhatty.

Apologies for absence were intimated on behalf of Julie Warrender, Shona Omand-Smith and Dianna Reed.

DECLARATIONS OF INTEREST AND TRANSPARENCY STATEMENTS

2. There were no declarations of interest or transparency statements intimated.

MINUTE OF PREVIOUS MEETING OF 18 JUNE 2024, FOR APPROVAL

3. The Committee had before it the minute of its previous meeting of 18 June 2024, for approval.

The Committee resolved:-

to approve the minute, subject to amending the date in the first sentence at article 3 (Minute of Previous Meeting) to read 27 February 2024.

BUSINESS PLANNER

4. The Committee had before it their Business Planner for consideration.

The Committee resolved:-

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- (i) to note the reasons for the delays contained within the planner relating to item 5 (Childhood and Adult Immunisations), item 7 (Local update on the full Mental Welfare Commission report) and item 8 (Mental Health & Learning Disability Services Sector Report Q1 2024); and
- (ii) to otherwise note the planner.

CCG GROUP MONITORING REPORT - UPDATE - HSCP.22.067

5. The Committee had before it a report by Caroline Howarth and Arlene Hurst which presented data and information to provide assurance that operational activities were being delivered and monitored effectively and that patients, staff and the public were being kept safe whilst receiving high quality service from Aberdeen City Health and Social Care Partnership (ACHSCP). The full sector reports were appended to the report.

The report recommended:-

that the Committee note the contents of the report and provide comments and observations on the information contained within the report and in appendices A, B and C.

Caroline Howarth provided an overview of the report, specifically (1) making reference to the total number of adverse events in all Partnerships services which had decreased by approximately 11% from 2667 in Quarter 4 to 2358 in Quarter 1, however noting that the inclusion of the Mental Health & Learning Disability Service adverse events had significantly increased the number of adverse events recorded (up by 71%) which had impacted on the overall data picture when included with the other services; and (2) highlighting information from each sector report where either Risks, Adverse Events, Lessons Learned, Quality Improvement, Feedback, or Duty of Candour were identified.

During discussion, the following was noted:-

- that compliments and praise for good work would be added to future reports;
- that a group based at Woodend Hospital was liaising with Police to address instances of anti-social behaviour; and
- that there was pressure on staffing in the pharmacotherapy team.

The Chairperson advised that in terms of Scottish Government guidance, report authors should refrain from 'noting' recommendations within their reports and encouraged the use of words such as 'reassurance' and/or 'be assured' in future report recommendations.

The Committee resolved:-

- (i) to approve the recommendation; and
- (ii) to note that Claire Wilson would liaise with Martin Allan in terms of the appropriate wording to use for all future report recommendations.

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LESSONS LEARNED

6. The Committee heard from Martin Allan who advised that the Partnership and the UB were audited on its complaints processes at the end of 2023 and one of the recommendations related to the following Scottish Public Services Ombudsman (SPSO) Key Performance Indicator requirement:-

Part 4 of the Model Complaints Handling Procedure requires organisations to publish on a quarterly basis information on complaints outcomes and actions taken to improve services. The focus of this should be on improving positive communication with customers on the value of complaining, on promoting good practice and lessons learned. This could take the form of case studies, examples of how complaints have helped improve services, or 'you said, we did' notifications.

Martin Allan (a) indicated that they had published quarterly statistics on complaints on the ACHSCP website and officers were working with services to start to bring the lessons learned/case studies out from the Monitoring report; (b) advised that the Committee would likely start to see this more often in the Group Monitoring report and in addition, from there, the case studies could then be published on the website; and (c) suggested that to avoid any identifiable details that a "themed" approach be taken to the lessons learned.

He concluded by intimating that a prompt after the Group Monitoring report item on each agenda would help remind the Committee about considering the themed lessons learned.

The Committee resolved:-

to note the information provided and to add 'Lessons Learned' as a standing item on future agendas after consideration of the Clinical and Care Governance Group Monitoring report.

CARE HOME COLLABORATIVE SPOTLIGHT REPORT - HSCP.24.068

7. The Committee had before it a Spotlight report by Elaine Morrison, Lead Nurse which provided an overview of the challenges faced in two care homes and the mitigations put in place to deal with these.

The report recommended:-

that the Committee -

- (a) note the contents of the report and provide comments and observations on the information contained within it; and
- (b) confirm they are assured the mitigations put in place ensure clinical and staff governance.

Elaine Morrison provided a summary of the report and she and Claire Wilson responded to questions from members.

The Committee resolved:-

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- (i) to approve the recommendations contained within the report; and
- (ii) to note that a further update in relation to the two care homes would be provided at the next meeting of the Committee.

ABORTION CARE SPOTLIGHT REPORT - HSCP.24.069

8. With reference to article 6 of the minute of meeting of 31 October 2023, the Committee had before it a Spotlight report by Dr Daniela Brawley (on behalf of Dr Di anna Reed) Consultant in Sexual Health, which provided an overview of the risks to abortion care and aligned services and actions required to mitigate these risks.

The report recommended:-

that the Committee -

- (a) note the contents of this report and provide comments and observations on the information contained within it; and
- (b) assist in joint working with stakeholders solution to reduce these risks and to assist in establishing clear governance processes for this service.

Dr Daniella Brawley provided a summary of the report and responded to questions from members regarding the sustained and significant increase in abortion care demand, the demographics of service users and recent staff shortages.

The Committee resolved:-

- (i) to note that the Chairperson would again write to his counterpart in Moray JB to seek a response to an earlier letter which sought assurances that a clear governance process would be established for abortion care services across Grampian;
- to note that Dr Daniella Brawley would endeavour to circulate any feedback from the Chief Executive Team and/or the Stakeholder Workshop event held in August 2024 regarding Abortion Care;
- (iii) to consider at item 5.1 whether the Spotlight report on Abortion Care should be escalated to the JB for their consideration (article 11 of this minute refers); and
- (iii) to otherwise approve the recommendations.

ADULT SUPPORT & PROTECTION: LEARNING REVIEWS UPDATE - HSCP.24.070

9. With reference to article 5 of the minute of meeting of 18 June 2024, the Committee had before it a report by Val Vertigans, Lead Strategic Officer Adult Public Protection, ACHSCP which provided assurance regarding how learning was identified, disseminated and embedded, in order to improve practice, via the Adult Protection Learning Review process.

The report recommended:-

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that the Committee note the contents of the report.

The Committee heard from Val, who provided a summary of the report and she and Claire Wilson responded to questions from members regarding 'Getting it Right for Everyone' and the draft national toolkit, which had been shared and tested locally.

The Committee resolved:-

- (i) to note that a report in relation to the work around 'Getting it Right for Everyone' including framework timescales would be submitted to the next meeting; and
- (ii) to otherwise approve the recommendation.

ABERDEEN CITY HEALTH AND SOCIAL CARE OPERATIONAL RISKS - HSCP.24.073

10. The Committee had before it a report by Martin Allan, Business, Resilience and Communications Lead which outlined the governance arrangements around the reporting of operational clinical risks through the Clinical Care and Governance Committee and Clinical Care and Governance Group and the links to the Board Assurance and Escalation Framework.

The report recommended:-

that the Committee -

- (a) note the governance arrangements around the reporting of operational clinical risks in the Partnership as detailed in the report; and
- (b) consider whether to receive the full Operational Risk Register (comprising clinical risks) on an annual basis (as detailed at section 4.9 to the report).

Martin Allan provided a summary of the report.

The Committee resolved:-

- (i) to approve recommendation (a); and
- (ii) to agree to receive the full Operational Risk Register (comprising clinical risks) on an annual basis.

ITEMS WHERE ESCALATION TO IJB IS REQUIRED

11. The Committee considered whether any items required escalation to the JB.

The Committee resolved:-

that the Spotlight report in relation to Abortion Care be escalated to the IJB for its consideration (article 8 of this minute refers).

- MARK BURRELL, Chairperson