



CLINICAL AND CARE GOVERNANCE COMMITTEE

ABERDEEN, 17 December 2024. Minute of Meeting of the CLINICAL AND CARE GOVERNANCE COMMITTEE. Present:- Mark Burrell Chairperson; and Professor David Blackburn, Councillor Jennifer Bonsell and Councillor Lee Fairfull.

In attendance: Caroline Howarth, Claire Wilson, Judith McLenan, Arlene Hurst, Rachael Little, Jane Gibson, Martin Allan, Elaine Morrison, Amy Richert, Claire Smith, Jess Anderson, Nicola Mclean 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 Councillor Fairfull who was attending her first meeting following her return from maternity leave. On behalf of the Committee, he wished to express his thanks to Councillor Allard for his attendance and contribution during Councillor Fairfull's leave.

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

DECLARATIONS OF INTEREST AND TRANSPARENCY STATEMENTS

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

MINUTE OF PREVIOUS MEETING OF 1 OCTOBER 2024, FOR APPROVAL

3. The Committee had before it the minute of its previous meeting of 1 October 2024, for approval.

In relation to article 8(ii), the Clerk advised that feedback from the Chief Executive Team and/or the Stakeholder Workshop event held in August 2024 regarding Abortion Care was circulated to members on 2 December 2024.

The Committee resolved:-
to approve the minute.

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BUSINESS PLANNER

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

The Committee resolved:-

- (i) to note the reason for removal of item 5 (Adult Support and Protection - Biennial Report); and
- (ii) to otherwise note the Business Planner.

CCG GROUP MONITORING REPORT - UPDATE - HSCP24.101

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 –

- (a) agree this report provides assurance to the committee that work is being undertaken to mitigate any risks; and
- (b) highlight any observations on the information contained in the report and in appendices A and B.

Caroline Howarth provided an overview of the report, specifically relating to the following:-

- Reduced Working Week Concerns;
- Integration of the Hosted In-patient Mental Health Services; and
- Complaints Reporting.

The report clarified the situation in relation to the staff absence rate in technician staffing based on the Primary Care Improvement Plan model for pharmacotherapy, advising that it did not refer to a reduction of 50% for the full team.

Elaine Morrison clarified the position in relation to discharges from hospital to care homes, specifically highlighting the complexities and issues relating to prescribed medications in this regard.

The Committee heard from Jane Gibson who emphasised the general concerns within the workforce regarding the impact of the reduced working week and regrading of Nursing Staff, following the Scottish Government's directive.

The Committee resolved:-

to approve the recommendations contained within the report.

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LESSONS LEARNED

6. The Committee heard from Martin Allan, Business Manager, Aberdeen City Health and Social Care Partnership (ACHSCP) who reminded members that the ACHSCP had a duty to publicly report complaints and lessons learned on a quarterly basis, which was done via their website.

He indicated that the current wording on the website included, the following:-

"Aberdeen City Health and Social Care Partnership are required by the Scottish Public Services Ombudsman 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 advised that during the last quarter, ACHSCP included the high level data/stats on the website, but no lessons learned, however this quarter they had an opportunity to highlight some areas as well as the data, and as outlined in the CCG Group Monitoring Summary report that the Committee had considered, there was a mixture of details about complaints.

In this regard, he intimated that it would be helpful if the Committee members could highlight areas to post onto the website, which may be themes rather than specific complaints and as a result, the wording on the website may be amended to take out any identifiable details, which could be done ahead of publishing on the website.

In terms of the complaints details in the Summary report, Mr Allan indicated that some of them had highlighted communication between the Team and the family as being a key learning action, therefore he suggested that this could be a theme that the Committee could ask for further detail on and to consider how communication could improve for families.

The Committee resolved:-

to note that the Chairperson would liaise with Martin Allan on the wording for the ACHSCP website.

GETTING IT RIGHT FOR EVERYONE AND PUTTING PEOPLE FIRST - HSCP24.083

7. The Committee had before it a report by Shona Omand-Smith, Commissioning Lead, Aberdeen City Health and Social Care Partnership, which sought to provide an update on the progress of the Getting it Right for Everyone (GIRFE) Pathfinder work and NHS Grampian's Putting People First approach which was presented to the Integration Joint Board on 19 November 2024.

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The report recommended:-

that the Committee –

- (a) agree that this report provides assurance that GIRFE and Putting People First is supporting staff and services to provide a person led approach to health and social care in Grampian; and
- (b) support the collaborative approach which will ensure the work is aligned in a whole system way of working.

Amy Richert provided an overview of the report.

The Committee resolved:-

to approve the recommendations contained within the report.

CCG CARE HOME COLLABORATIVE SPOTLIGHT REPORT UPDATE - HSCP24.102

8. With reference to article 7 of the minute of the previous meeting of 1 October 2024, the Committee had before it a report by Elaine Morrison, Lead Nurse which provided an update on the current status of the homes including mitigations put in place to deal with issues highlighted and the current status of both homes.

The report recommended:-

that the Committee –

- (a) agree this report provides assurance to the committee that work is being undertaken to mitigate any risks; and
- (b) highlight any observations on the information contained in the report.

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

The Chairperson, on behalf of the Committee wished to express thanks to the Team involved for their support and the work involved to address the issues highlighted within the report.

The Committee resolved:-

- (i) to note that an update prepared by Claire Wilson, on one of the care homes would be circulated to members by way of a Briefing Note following the meeting today;
- (ii) that a further Briefing Note on the position would be circulated prior to the next Committee meeting;
- (iii) that an update report would be presented to the Committee at their next meeting on 11 March 2025; and
- (iv) to otherwise approve the recommendations contained within the report.

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DISCHARGE WITHOUT DELAY - HSCP24.109

9. The Committee had before it a report by Kay Diack, Strategic Home Pathways Lead, which provided an update on improvement activity in relation to the national oversight of Discharge Without Delay.

The report recommended:-

that the Committee agrees that the report provides assurance that the Action Plan detailed, confirms that the Aberdeen City Health and Social Care Partnership approach to addressing delayed discharges.

Nicola McLean provided an overview of the report, highlighting the key information, and advising that an Aberdeen Delayed Discharge Improvement Group had been established and an Action Plan had been created which identified several workstreams for improvement actions. These would be phased into short-term (to rapidly address the national target) and longer-term strategic work to achieve sustainable change.

The report outlined activity identified and undertaken to date including:-

- Three areas had been identified for targeted resourcing by Social Work. Care Management would be involved with Multi Professional Team from patient admission in terms of discharge planning;
- Areas where Planned Date of Discharge (PDD) performance was lower and had been targeted via construction of a Short Life Working Group;
- A Proposal was submitted to NHSG Chief Executive's Team regarding development of a Discharge to Assess model. Consideration was given, but was declined due to NHSG's financial position and the pace at which it could be implemented;
- A Daily Screening Panel was in place for all care requests, which was focussed on looking at alternatives to Care at Home via use of Technology Enabled Care;
- Criteria led discharge was being robustly implemented via construction of a Short Life Working Group; and
- Pop up demonstrations regarding Technology Enabled Care were planned for clinicians and general public in mid-November.

Nicola McLean responded to questions regarding the digital technology in place to support those being discharged and the early intervention measures in place to prevent them from being readmitted to hospital.

The Committee resolved:-

to approve the recommendation contained within the report.

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SPECIALIST MENTAL HEALTH AND LEARNING DISABILITY SERVICES (HOSTED SERVICES) Q1 SECTOR REPORT - HSCP24.110

10. The Committee had before it a report by Kerry Cairns, Service Manager, MHLDS Inpatient & Specialist Services which provided oversight and assurance through the hosted Mental Health and Learning Disability service Q1 sector report.

The report recommended:-

that the Committee note the hosted MH&LD service Q1 sector report as reported previously to the Clinical and Care Governance Group.

The Committee heard Judith McLenan provide a summary of the report, making reference to operational risks held by the service on the risk register; the quality and safety risks held by the service and mitigations for these risks; an overview of adverse events and incidents and lessons learnt as well as any identifiable themes; and current service quality improvement/areas of achievement and good practice during the reporting period.

The Committee resolved:-

to approve the recommendation.

LOCAL UPDATE ON THE SPECIALIST MENTAL HEALTH AND LEARNING DISABILITY SERVICES (HOSTED SERVICES) MENTAL WELFARE COMMISSION REPORTS - HSCP24.111

11. The Committee had before it a report by Kerry Cairns, Service Manager, MHLDS Inpatient & Specialist Services which provide assurance around Mental Welfare Commission visits to the Mental Health and Learning Disability, inpatient and specialist services.

The report recommended:-

that the Committee note the update on Mental Welfare Commission (MWC) visits to the hosted Mental Health and Learning Disability service.

The Committee heard from Judith McLenan who highlighted the key information from the report and advised that the incorrect appendices had been submitted for circulation. She intimated that the Clerk would circulate the correct versions following the meeting.

Ms McLenan made reference to the MWC's planned and unplanned inspections across Mental Health and Learning Disability inpatient settings across Grampian; and the positive feedback received on various aspects including Care Plans and Staff Good Practice.

The Committee resolved:-

(i) to approve the recommendation contained within the report; and

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- (ii) to agree that an annual report be submitted to the Committee for consideration following the Mental Welfare Commission's assessment.

ITEMS WHERE ESCALATION TO IJB IS REQUIRED

12. The Committee considered whether any items required escalation to the IJB.

The Committee resolved:-

that no items be escalated to the IJB at this time.

- **MARK BURRELL, Chairperson**