ABERDEEN, 17 June 2025. Minute of Meeting of the CLINICAL AND CARE GOVERNANCE COMMITTEE. <u>Present</u>:- Mark Burrell <u>Chairperson</u>; and David Blackbourn, Councillor Lee Fairfull and Councillor M. Tauqeer Malik.

In attendance: Caroline Howarth, Fiona Mitchelhill, Claire Wilson, Graeme Simpson, Judith Mclenan, Rachael Little, Aideen Mitchell, Kay Diack, Claire Smith, Jane Gibson, Michelle Grant, John Forsyth 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.

Apologies for absence were intimated on behalf of Lizzy Archibald. Aideen Mitchell was in attendance as her substitute.

DECLARATIONS OF INTEREST AND TRANSPARENCY STATEMENTS

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

MINUTE OF PREVIOUS MEETING OF 11 MARCH 2025, FOR APPROVAL

3. The Committee had before it the minute of its previous meeting of 11 March 2025, for approval.

The Committee resolved:-

to approve the minute.

BUSINESS PLANNER

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

The Committee resolved:-

to note the Business Planner.

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CCG GROUP MONITORING REPORT - UPDATE - HSCP.25.047

5. The Committee had before it a report by Caroline Howarth and Michelle Grant 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:-

- Staffing Pressures and Further Reduction to the Working Week;
- Integration of the hosted in-patient mental health services;
- The overall number of complaints, compliments and concerns across both Aberdeen City Council (ACC) and NHS Grampian; and
- Questions raised relating to the previous report.

Caroline Howarth provided further information regarding a new risk identified within the AHP sector report, namely experiencing significant issues with supply of feeds from Nutricia for Home and Hospital patients receiving enteral nutrition. The issue had been raised with National Procurement who intend to recommend a Clinical and Technical Advisory Group would be established to support management of a commodity concern.

In response to a questions, the following was noted:-

- that in terms of challenges of the additional scrutiny while recruiting to posts, Claire
 Wilson advised that an additional form was required to be completed and submitted
 to a member of the Leadership Team in charge of the service for approval prior to
 filling the vacancy. Statutory posts were usually signed off without delay;
- that the issue of mould being discovered within a Ward resulting in five beds being temporarily closed had now been resolved;
- that further information would be included within the next report relating to NaSH Patient Management System which had recently been taken over by a company in India;
- that a report on the impact and mitigations around the 35 hour working week would be submitted to the next meeting of the Committee;
- that a report on Rosewell House would be submitted to IJB meeting in July 2025;
- that there had been a decrease in the number of substance misuse related deaths through good communication and education to the public. There was also a reduction in non-accidental overdoses; and

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that there was high staff sickness levels in the small complex care team, noting that
a formal process to support staff had been implemented in order that staff could
return to work as timely as possible.

The Committee resolved:-

- to note that clarity on whether the TrakCare system was being used by sexual health services would be provided within the report at the next meeting;
- (ii) that in relation to sexual health services, to note that Michelle Grant would arrange to clarify the position on whether a social media/communication had been issued relating to countering the hormone hesitancy amongst young people and that would be provided within the report at the next meeting; and
- (iii) to otherwise approve the recommendations contained within the report.

LESSONS LEARNED

6. With reference to article 6 of the minute of the previous meeting, members discussed whether there were any themes or lessons learned, during which the following was raised:-

Caroline Howarth advised that the good practice initiatives introduced at Royal Cornhill Hospital to assist with helping staff to return to work following a period of ill health/sickness had been included on the ACH&SCP website.

The Chairperson advised that discussions had been held within other clinical and care governance groups across all other Health and Social Care Partnerships around the functioning of Committees, including the lines of reporting back. He indicated that this was likely due to a Partnership's Committee not functioning as well as expected and intimated that he was assured that the City Partnership had a robust governance structure. He explained that he would be leading on a report to be submitted to the Clinical Governance Committee of NHS Grampian on the functioning of the Committee in due course.

The Committee resolved:-

to note the information provided.

DISCHARGE WITHOUT DELAY - HSCP.25.048

7. With reference to article 7 of the minute of the previous meeting of 11 March 2025, the Committee had before it a joint report by Claire Smith, Lead Nurse and Kay Diack, Strategic Home Pathways Lead, which provided an update on improvement activity within Specialist Mental Health and Learning Disability services as well as General ACHSCP services in relation to the national strategic oversight of Discharge Without Delay.

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The report recommended:-

that the Committee -

- (a) note the latest data regarding the rate of delayed discharges across Specialist MHLD services and general ACHSCP services; and
- (b) agree that this report provides assurance to the Committee regarding the progress made against the improvement plans to lower the number of delayed discharges.

Kay Diack and Claire Smith provided an overview of the report.

Kay advised that as of today's date, the delayed discharge figure at Royal Cornhill Hospital and other City partnership facilities was 45, which was the benchmark figure set by the Scottish Government in May 2024. Yesterday it was 42.

Claire Smith provided information relating to the process and work undertaken if a delay was related to a Shetland, Orkney or Moray patient.

The Committee noted that the city was a top quartile performer in terms of Government statistics; and acknowledged the complex reasons which contributed to delayed discharges.

The Committee resolved:-

to approve the recommendations contained within the report.

ITEMS WHERE ESCALATION TO IJB IS REQUIRED

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

The Committee resolved:-

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

MARK BURRELL, Chairperson