Chief Executive's Office

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Date of Issue: 23 June 2022

NHS BOARD CLINICAL GOVERNANCE COMMITTEE AGENDA

30 June 2022 at 9.00am Microsoft Teams

9.00 1 Welcome / Apologies

1.1 Declarations of Conflict of Interest – Members are asked to consider whether they have a conflict of interest to declare in relation to any item on the agenda for this meeting. Any Member making a declaration of a conflict of interest should indicate whether it is a financial or non-financial conflict and include some information on the nature of the conflict. Advice may be sought from the Board Secretary's Office prior to the meeting taking place.

9.05 2 Minute of Meeting on 28 April, Associated Action Plan and Committee Work Plan (PP 1-17)

The Committee is asked to:

- Approve the minute.
- Consider actions arising therefrom.

9.10 2.1 Matters Arising

- Internal Audit Review (Significant Adverse Events) Update Update by Boyd Peters/Heidi May/Mirian Morrison
- Grade 2-4 Pressure Ulcers Update by Heidi May

The Committee is asked to Note the update(s) provided.

9.15 3 Patient Experience and Feedback Report by Leah Smith

(PP 18-21)

The Committee is asked to Consider the issues identified and receive assurance that appropriate action is being taken / planned.

9.20 4 Adverse Event Reporting Process (PP 22-27) Report by Mirian Morrison, Clinical Governance Development Manager

Assurance Level Proposed - Moderate

The Committee is asked to Consider the issues identified and receive assurance that appropriate action is being taken / planned.

9.35 5 Clinical Governance Quality and Performance Data (To follow) Report by Mirian Morrison on behalf of Boyd Peters, Board Medical Director

Assurance Level Proposed -

The Committee will be asked to Review and Discuss relevant performance outcomes and future reporting requirements.

9.50 6 Operational Unit Reports by Exception and Emerging Issues with Minutes from Patient Quality and Safety Groups/Argyll and Bute Clinical and Care Governance Group

6.1 Argyll and Bute HHSCP

(PP 28-32)

Assurance Level Proposed -

6.2 Highland HSCP

(PP 33-35)

Assurance Level Proposed -

6.3 Acute Services

(PP 36-42)

(PP 43-64)

Assurance Level Proposed -

6.4 Infants Children and Young People's Clinical Governance Group

Assurance Level Proposed -

The Committee is asked to Consider the issues identified and receive assurance that appropriate action is being taken / planned.

10.10 7 Infection Prevention and Control

Report by Vanda Plecko and Catherine Stokoe on behalf of Heidi May, Board Nurse Director (PP 65-104)

Assurance Level Proposed - Substantial

The Committee is asked to Consider the issues identified and receive assurance that appropriate action is being taken / planned.

10.20 8 Emerging Issues/Executive and Professional Leads Reports by Exception

Officers are requested to consider any matters requiring to be brought to the attention of Committee members or to be escalated from this Committee to NHS Board level.

8.1 Childrens Services Inspection Report by Sally Amor on behalf of the Nurse Director

(PP 105-106)

Recommendations

- 1. The Child Protection (Health) Group will have oversight of the inspection process to provide system leadership with related consideration of risks and mitigation.
- 2. A Gant Chart with identified leads will inform support the preparation for the Inspection Process with associated BRAG coding to understand and escalate risks as required.

8.2 National Quality Measures Report by Dr Boyd Peters, Medical Director

(PP 107-123)

Assurance Level Proposed – Not yet assessed.

Recommendation: State the action being requested. Use one of the directions for the meeting. No other terminology should be used.

• Discussion – Examine and consider the implications of a matter.

The Committee is asked to Consider the issues identified and receive assurance that appropriate action is being taken / planned.

10.30 9 NHS Board Risk Assurance Framework

- 9.1 Strategic Risk 662 Clinical Strategy and Redesign Progress Update

 Report by Lorraine Cowie, Head of Strategy and Transformation (To follow)
- 9.2.1 Strategic Risk 715 Public Health (Covid-19 and Influenza)
 Update by Dr T Allison, Director of Public Health (PP 124-126)

Assurance Level Proposed - Moderate

9.2.2 Strategic Risk 959 – Public Health (Vaccination Programmes) Update by Dr T Allison, Director of Public Health

Assurance Level Proposed – Moderate

9.3.1 Strategic Risk 927 – Public Health (Vaccination Programmes) (PP 127-130)

Update by Dr T Allison, Director of Public Health (+ spreadsheet)

Assurance Level Proposed - Substantial

9.3.2 Strategic Risk 928 – Public Health (Vaccination Programmes)
Update by Dr T Allison, Director of Public Health

Assurance Level Proposed – Substantial

9.4 Updated Clinical Governance Committee Risk Register Report by Mirian Morrison, Clinical Governance Manager

(See spreadsheet)

The Committee is asked to:

- Note the progress made with Risk Management throughout NHS Highland.
- Consider the Strategic Risk Updates received and the assurance arising therefrom.

10.50 10 Public Health Update Report by Tim Allison, Director of Public Health

(PP 131-140)

Assurance Level Proposed – Substantial.

The Committee is asked to Consider the content of the circulated report and take appropriate assurance.

11.00 11 SIX MONTHLY EXCEPTION REPORTS

11.1 Area Drugs and Therapeutics Committee Report by Ian Rudd, Director of Pharmacy

(PP 141-146)

Assurance Level Proposed - Moderate

The Committee is asked to Consider the content of the circulated report and take appropriate assurance of compliance with legislation, policy and Board objectives.

11.10 11.2 Transfusion Committee Report by Chic Lee, Consultant Anaesthetist

(See separate paper)

The Committee is asked to

11.20 11.3 Information Assurance Group Report by Iain Ross on behalf of David Park, Deputy Chief Executive (PP147-151)

The Committee is asked to Consider the content of the circulated report.

11.30 12 Research, Development, and Innovation Annual Report Report by Frances Hines/Beth Sage

(PP 152-159)

(PP 160-183)

The Committee is asked to Consider the content of the circulated report.

11.40 13 Any Other Competent Business

13.1 Internal Audit Review (Statutory and Mandatory Training)

The Committee is asked to Consider the issues identified and receive assurance that appropriate action is being taken / planned.

11.50 14 Reporting to the NHS Board

The Committee is asked to Consider and Identify any matters requiring escalation to the NHS Board for consideration.

11.55 15 Remaining 2022 Meeting Schedule

The Committee is asked to note the meeting schedule for 2022 as follows:

- 1 September
- 3 November

12.00 Close of Meeting

For Information Only