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<p>NHS Orkney Board – 24 June 2021</p> <p>Report Number: OHB2122-21</p> <p>This report is for noting</p> <p>Joint Clinical and Care Governance Committee Chair’s Report</p>	
<p>Lead Director Author</p>	<p>Louise Wilson, Interim Medical Director Steven Johnston, Chair – Joint Clinical and Care Governance Committee</p>
<p>Action Required</p>	<p>The Board is asked to:</p> <ul style="list-style-type: none"> • <u>Review</u> the report and <u>note</u> the issues raised and recommendations.
<p>Key Points</p>	<p>This report highlights key agenda items that were discussed at the Joint Clinical and Care Governance Committee meeting on 27 April 2021 and 9 June 2021 and it was agreed that these should be reported to the NHS Orkney Board and Integration Joint Board:</p>
<p>Timing</p>	<p>The Clinical and Care Governance Committee highlights key issues to the NHS Orkney Board and Integration Joint Board on a quarterly basis following each meeting.</p>
<p>Link to Priority Areas</p>	<ul style="list-style-type: none"> • Covid-19 4.2&4.4 • Quality and Safety 4.1 – 4.5 • Systems and Governance 4.5 &4.6
<p>Consultation</p>	<p>Joint Clinical and Care Governance Committee 27 April 2021 9 June 2021</p>

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NHS Orkney Board – 24 June 2021

Joint Clinical and Care Governance Committee Chair's Report

Author Steven Johnston, Chair
Joint Clinical and Care Governance Committee

Section 1 Purpose

The purpose of this paper is to highlight the key items for noting from the discussions held at the meetings on the 27 April 2021 and 9 June 2021

Section 2 Recommendations

The Board is asked to:

1. Review the report and note the issues raised and recommendations.

Section 3 Background

This report highlights key agenda items that were discussed at the virtual Joint Clinical and Care Governance Committee meetings on 27 April 2021 and 9 June 2021 and it was agreed that these should be reported to the NHS Orkney Board and Integration Joint Board.

Section 4 Issues Raised

27 April 2021

4.1 Quality Forum Chairs Report

The Acting Medical Director presented the Quality Forum Chairs Report, summarising work which had taken place over recent months. There was a focus on an audit of clinical policies which would require significant work, and an audit around clinical documentation with a short life working group set up to take the latter forward.

Members noted the issues raised and agreed to highlight the work required to the Audit and Risk Committee and Board.

4.2 Infection Control Annual Report

The Director of Nursing, Midwifery and Allied Health Professionals presented the Infection Control Annual report highlighting the increased workload and significant efforts made by the Infection Control Team throughout the pandemic response.

Members noted the update, praised the work of the Infection Control Team, and all other teams involved for their hard work and efforts throughout the pandemic response and agreed this should be highlighted to board.

4.3 Paediatric Autism Diagnosis/Neurodevelopmental Pathway Report

The Interim Head of Children's Health Services presented the report, highlighting that further service funding had been secured and that a short life working group had been established to progress a six-month test of change model which had proved successful within other boards

Members agreed the progress made should be highlighted to board.

4.4 Public Health Annual Report

The Director of Public Health presented the Public Health Update and members agreed the following key points should be highlighted to the Board

- Recruitment had allowed health improvement staff to focus on their main areas of work, whilst also keeping up contact tracing services.
- The flu vaccination programme concluded at the end of March, with the Covid-19 vaccination programme continuing.
- Screening services had resumed, with the breast screening van due in Orkney in June 2021.
- Members acknowledged that it would be difficult to predict the effect of Covid long term, including the potential for "long Covid", further variants and a possible rise in cases in September-October 2021

9 June 2021

4.5 Local Child Poverty Action Report 2020-21

The Chief Officer presented the Local Child Poverty Action Report 2020-21 and following detailed discussion and debate and subject to limited amendments as agreed, recommended it for board approval. Key points of discussion included: the intention for a 3-year child poverty strategy including action plan (using *SMART* methodology) to be driven by the Child Poverty Taskforce; a desire for truly integrated services and for this to be reflected in the report; the need for a strong focus on our ferry-linked isles; and finally consideration towards methods to reduce the stigma of poverty and improve wider engagement with this work.

4.6 Committee Vice Chair Appointment

Joanna Kenny had been nominated to take on the role of the NHS Orkney Vice Chair of the Joint Clinical and Care Governance Committee, Joanna has accepted, and the Committee recommends that the Board approve this appointment.

Cross Committee Assurance

A Quality Forum update highlighted an audit of clinical documentation carried out in the inpatient areas at The Balfour which members wished to highlight to the Audit and Risk Committee. A short life working group had been set up to take this forward.

Appendices

- Approved minutes from the Clinical and Care Governance Committee meeting held on 27 January 2021 and 27 April 2021

Minute of a virtual meeting of the **Joint Clinical and Care Governance Committee** on
Tuesday 27 April 2021 at 13.00

- Present**
- Issy Grieve, Non-Executive Board Member (Chair)
 - Steven Johnston, Non-Executive Board Member (Vice Chair)
 - David Drever, Non-Executive Board Member
 - Joanna Kenny, Non- Executive Board Member
 - Meghan McEwen, NHS Orkney Chair
 - John Richards, Integration Joint Board Member
 - Steve Sankey, Integration Joint Board Member
 - Heather Woodbridge, Integration Joint Board Member
- In Attendance**
- Michael Dickson, Interim NHS Orkney Chief Executive
 - Lynda Bradford, Head of Health and Community Care
 - Julie Colquhoun, Head of Corporate Administration
 - Gillian Coghill, Alzheimer Scotland Clinical Nurse Specialist (*for item 58*)
 - Jim Lyon, Interim Chief Social Work Officer, Head of Children, Families and Criminal Justice (*for item 41*)
 - Mary McFarlane, Interim Director of Pharmacy
 - Gillian Morrison, Interim Chief Officer
 - Heather Tait, Public Representative
 - Wendy Lycett, Principal Pharmacist (*For item 55*)
 - David McArthur, Director of Nursing, Midwifery and Allied Health Professionals
 - Katie Spence, Orkney Alcohol & Drugs Partnership Coordinator (*For item 43*)
 - Maureen Swannie, Interim Head of Children's Health Services (*For items 41, 49 and 52*)
 - Louise Wilson Director of Public Health and Acting Medical Director
 - Jay Wragg, Clinical Dental Director (*For item 46*)
 - Christy Drever, Committee Support

36. Welcome and Apologies

Due to unforeseen technical issues, some members were unable to connect and arrived slightly late to the meeting. For this reason, S Johnston chaired the meeting until 14.00, and I Grieve joined and chaired from 14.00 onwards.

Apologies had been received from Christina Bichan, Dawn Moody, Sandy Cowie, Rachel King

37. Declarations of Interest – Agenda Items

No interests were declared in relation to agenda items.

38. Minute of meetings held 27 January 2021

The minute of the Clinical and Care Governance Committee meeting held on 27 January 2021 was accepted as an accurate record of the meeting and approved.

39. Matters Arising

There were no matters arising.

40. Action Log

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

Strategy

41. Orkney's Children Services Plan 2021-23 – JCCGC 2122-01

The Interim Chief Social Work Officer, Head of Children, Families and Criminal Justice presented the Orkney's Children Services Plan 2021-23, highlighting the following key points:

- The plan follows the 5 criteria set out by the statutory guidance.
- The plan had been taken in draft form to the Integration Joint Board and Policies and Resource Committee of Orkney Islands Council and would be taken to the Community Planning partnership.
- The accountability for the plan would sit with the Orkney Islands council and NHS Orkney.
- The plan had been submitted to Scottish Government, as a final draft, subject to internal governance structure approval. The final plan might be subject to slight amendments, however the main themes would remain unchanged.
- The plan would be dynamic and develop further over time, with potential for members to contribute to this draft.

Members acknowledged the work which had gone into the plan; however, concerns were raised surrounding the process for informal and formal consultation and scrutiny prior to attending governance committees for approval. It was felt that plans should be taken through the Executive Management Team and appropriate supporting committees for engagement and consultation, before a final draft was taken through the governance structure for recommendation or approval by NHS Orkney Board and submission to Scottish Government.

Members emphasised the need for clarity that services had the ability to deliver the plan once it has been committed to. Assurance was needed that the plan would strengthen and safeguard services for vulnerable young people in our community, with further engagement with the youth forum and other young people. It was agreed that outcomes should be measurable to ensure that the plan was being delivered and provide assurances to the Board and Scottish Government.

Decision / Conclusion

The Committee was unable to recommend the plan for NHSO Board approval in its current version and agreed that further work would take place to address concerns, with a final draft to be circulated to the committee virtually for approval.

Post meeting note 21/05/2021: Additional JCCGC meeting arranged for 9 June 2021 with the item tabled for further discussion having been to EMT for consideration.

42. **Clinical Strategy Situation Report and Plan – JCCGC 2122-02**

The Director of Nursing, Midwifery and Allied Health Professionals presented the Clinical Strategy Situation Report and Plan, highlighting the following key points:

- Work had initially begun in 2018, with further refining of the plan and significant work undertaken in late 2019 and early 2020.
- The Covid-19 pandemic had halted progress; however, work had begun to reinstate this project.
- Before the pandemic, engagement had taken place, with a large amount of information having been obtained. This information would now be updated as appropriate to allow the plan to move ahead, with further cycles of engagement planned to take place within NHS Orkney, the public, third sector and Integration Joint Board.
- Following discussions held at the Executive Management Team Meeting, it had been agreed to continue with a similar process to that used by NHS Shetland, with a vision for the next 3-5 years.
- There would be a whole system approach to provide a continuity of care, determined by the individual patient or service user, across the whole spectrum of services provided.
- It was acknowledged that after a tough year, staff might feel fatigued, and might have been undertaking different roles throughout the pandemic response.
- External support had been approved by the Executive Management Team as an additional resource.
- The Director of Public Health, who was also the Acting Medical Director had been heavily involved in the clinical strategy and would ensure it was heavily centred around public health, with links to North of Scotland strategies.

Decision / Conclusion

The Committee noted the update and were assured of progress.

43. **Alcohol and Drugs Partnership Strategy – JCCGC 2122-03**

The Orkney Alcohol & Drugs Partnership Co-ordinator presented the Alcohol and Drugs Partnership Strategy, highlighting that the strategy had been to the Integration Joint Board and the Alcohol & Drugs Partnership Strategic Group. Following consultation and direct engagement with younger people, the timescale had been shortened to 5 years. Members welcomed the level of consultation which had taken place, as detailed in the appendices.

Decision / Conclusion

The Committee noted the comprehensive report and were assured of progress.

Operational Planning

44. Planning and Delivery Update – JCCGC 2122-04

Members received the planning and delivery update from the Acting Medical Director.

Decision / Conclusion

The Committee noted the update and were assured of progress.

45. Regional Clinical Services Updates – JCCGC 2122-05

Members received the update report from the Acting Medical Director, outlining the ongoing North of Scotland work.

Decision / Conclusion

The Committee noted the update and were assured of progress.

Governance

46. Governance around repatriation of low-level concerns in dentistry SBAR – JCCGC 2122-06

The Clinical Dental Director attended to present the report highlighting the following key points:

- From 1st January NHS Orkney had been given responsibility by Scottish Government and the General Dental Council (GDC) to handle low level concerns returned from the GDC.
- An island approach to this had been proposed, due to the small constituency of dentists in each Board. This would allow for any tribunals held or decisions made to be independent.
- Full details were still being established, however it was hoped to have had the Screening Group set up quickly, to support remobilisation where required.

Members were supportive of the group, however felt that an alternative name would be helpful as Screening Group might cause confusion. They also felt that the group should report into the governance structure, at least in the form of an annual report and by exception where appropriate.

Decision / Conclusion

The Committee approved the proposal and looked forward to an update on progress in future through the appropriate Governance Committee.

Safe and Effective Care

47. Quality Forum Chairs Report and minutes from meetings held 16 December 2020, 27 January 2021 & 23 February 2021 – JCCGC 2122-07

The Acting Medical Director presented the Quality Forum Chairs Report, summarising work which had taken place over recent months. There was a focus on an audit of clinical policies which would require significant work, and an audit around clinical documentation with a short life working group set up to take the latter forward.

Decision / Conclusion

The Committee noted the update, and significant work to be done and looked forward to future updates on progress.

48. Performance Report – JCCGC 2122-08

Members received the Performance Report.

Decision / Conclusion

The Committee noted the update and were assured of progress.

49. Paediatric Autism/Neurodevelopmental Pathway Report – JCCGC 2122-09

The Interim Head of Children's Health Services presented the report, highlighting that:

- Further funding had been secured at the start of April 2021 for services.
- The current pathway was found to create a bottle neck in the system.
- A short life working group had been set up, proposing an initial 6-month test of change model, which had proven successful within other boards.

Members were pleased to see progress made and keen to see clarity on pathways for clinicians in future. It was questioned whether six months was long enough for the test of change and an extension might be considered.

Decision / Conclusion

The Committee noted the update and were assured of progress.

50. Integrated Staffing Programme Update – JCCGC 2122-10

The Director of Nursing, Midwifery and Allied Health Professionals presented the update on progress, noting that all historical elements had been captured, and the review had now expanded to cover the full workforce, meaning wider engagement work would be required.

Members noted that work was ongoing, and updates on progress would be brought to the committee in future.

Decision / Conclusion

The Committee noted the update and were assured of progress.

51. Joint Inspection of Services for Children and Young People in Need of Care & Protection Update – JCCGC 2122-11

The Interim Chief Social Work Officer, Head of Children, Families and Criminal Justice presented the update, noting that progress had been made, and it was hoped to be completed by July this year. Members highlighted that significant work had gone into the inspection so far, and a further update would come to the committee later in the year. The commitment towards sustained improvement was welcomed by the committee.

Decision / Conclusion

The Committee noted the update and were assured of progress.

52. NHS Orkney Children’s Services Improvements Update – JCCGC 2122-12

The Interim Head of Children’s Health Services presented the update, highlighting that work was ongoing across main improvement areas. It was highlighted that this improvement work should be prioritised, in order to make positive changes to service provision. Further to a considerable amount of improvement, the following remaining key challenges were highlighted:

- The lack of an Electronic Patient Record (EPR) system for all of Children’s Health Services
- Capacity within the team to drive the improvement work forward.
- Challenges around providing forensic medical examinations for children and young people.

Members agreed that with regards to the latter, there was a regional challenge associated with our location, however, it was important to still strive to provide the best possible service for patients.

Decision / Conclusion

The Committee noted the update and were assured of progress.

53. Infection Control Annual Report – JCCGC 2122-13

The Director of Nursing, Midwifery and Allied Health Professionals presented the report highlighting the increased workload and significant efforts made by the Infection Control Team throughout the pandemic response. The team had provided support to local authority care homes, whilst working with NHS Orkney teams and staff to ensure compliance throughout and sharing lessons learnt across all areas.

Members agreed that the hard work of the Infection Control Team throughout the pandemic response should be highlighted and communicated to the public, via the next Public Board meeting.

The Antimicrobial Point Prevalence Audits for The Balfour were noted and it was clarified that Antibiotic prescribing in the community setting was also monitored.

Decision / Conclusion

The Committee noted the update and praised the work of the Infection Control Team, and all other teams throughout the Biard for their hard work and efforts throughout the pandemic response.

Policies for Approval

54. Complaints Handling Policy and Procedure – JCCGC 2122-14

The Head of Corporate Administration presented the Complaints Handling Policy and Procedure, highlighting that some amendments had been made, and references to the whistleblowing policy had been added.

The Unacceptable Actions Policy was pulled after meeting papers had been distributed, due to a notification from the SPSO of future changes to be made to the policy. The current version would still be in place until these changes were made.

Members suggested the addition of a section on use of video calls, after increased use of this facility in recent months and were advised this was already being considered.

Decision / Conclusion

The Committee noted the update.

Medicines Management

55. Area Drugs Therapeutic Committee (ADTC) Chair's report and minutes – JCCGC 2122-15

The Principal Pharmacist presented the report, highlighting the following key points:

- The committee welcomed Mary McFarlane as Interim Director of pharmacy for both NHS Orkney and Shetland, following the retirement of Christopher Nicolson. The committee was advised that Christopher would continue in his role as Controlled Drugs Accountable Officer for both boards.
- Indicative allocations for NHS Orkney were adequate to meet the proposed Covid-19 vaccine administration schedule.
- The need for an over-arching Safe and Secure use of Medicines Policy (SSMP) was approved.
- A paper detailing recent changes to the supply of medicines to support the prescribing and dispensing of medicines in acute and urgent circumstances in Isles with non dispensing GPs was discussed and approved. The pharmacy Department at the Balfour would issue stock for use by NHS Orkney employed Advanced Nurse Practitioners (ANPs). All repeat and non-urgent acute prescriptions would be processed via the Isles Dispensing Scheme, which improves patient safety, and the governance associated with ANPs working in isolation.

- The nationally approved off-licence use of Tocilizumab for patients with Covid-19 pneumonia was approved for use within NHS Orkney
- The committee approved a proposal to introduce local adaptations / updates to Scriptswitch the prescribing support tool used by GP's. This would allow adaptation of the NHS Grampian advice to reflect agreed local prescribing practices which should improve the uptake rate of advice and associated savings. Previously, NHS Orkney adopted the NHS Grampian advice in its entirety, however, this did not always reflect clinical practice and was sighted as one of the reasons for not always accepting the suggested changes to prescribing.

Decision/Conclusion

Members noted the update and looked forward to seeing the Safe and Secure use of Medicines Policy (SSMP) for approval in future.

Person Centred Care

56. Health Complaints Performance Report Quarter 3 – JCCGC 2122-16

The Head of Corporate Administration presented the report, highlighting the following key points:

- There had been an improvement in the complaints able to be resolved at stage 1.
- There had been a small reduction in the number of complaints received during the quarter.
- Training had been held for the Community Mental Health Team which had been well attended.
- Since the writing of the report, the SPSO had confirmed they would provide virtual training, and a bid had been submitted for funding to support this training.
- A gap had been recognised in the ability to undertake good quality investigations.
- There had been several enquiries during the period from the Local MSP surrounding waiting times, as well as outpatient clinics and Loganair patient travel.

Members queried whether issues raised via the local MSP were converted to a formal complaint, the Head of Corporate Administration agreed to check the process with the Patient Experience Officer.

Decision/Conclusion

The Committee noted the report and were assured of progress.

57. Social Care and Social Work Complaints Report – JCCGC 2122-17

The Interim Chief Officer presented the Social Care and Social Work Complaints Report, highlighting that 15 complaints had been received within the period and had been closed off, with actions taken and lessons learnt. Members welcomed the additional narrative to support the data.

Decision/Conclusion

The Committee noted the report and were assured of progress.

58. Dementia Diagnosis Rates Annual Report – JCCGC 2122-18

The Alzheimer Scotland Clinical Nurse Specialist presented the annual report, highlighting the following key points:

- Between 2011 and 2019, diagnosis rates had increased from 71 to 169 patients.
- Due to the Covid-19 response, patients had been unable to access diagnostic services. The pandemic had had an indirect impact on patients with dementia in Orkney.
- The Orkney Dementia Strategy had been adopted in 2020, and a steering group had recently been formed to drive forward improvements, with initial commitments to improve diagnosis rates and expertise.
- Waiting lists were significant, even prior to the pandemic.
- A review of the service would take place to assess needs, provide a joined-up approach and proactive focus going forward.

Members noted that some patients had been disadvantaged by the limited use of digital consultation in recent months, however this might present an opportunity going forward to provide improved services to patients in remote isles.

Decision/Conclusion

The Committee noted the report and were assured of progress.

Population Health

59. Public Health Update Report – JCCGC 2122-19

The Director of Public Health presented the Public Health Update, highlighting the following key points:

- Recruitment had allowed health improvement staff to focus on their main areas of work, whilst also keeping up contact tracing services.
- The flu vaccination programme ended at the end of March, with the Covid-19 vaccination programme continuing.
- Screening services had resumed, with the breast screening van due in Orkney in June 2021.

Members acknowledged that it would be difficult to predict the effect of Covid long term, including the potential for “long Covid”, further variants and a possible rise in cases in September-October 2021.

Decision/Conclusion

The Committee noted the report and were assured of progress.

Social Work and Social Care

60. Derek Feeley's Review update – Verbal Update

Members were advised that the review had been discussed at the Integration Joint Board Development Session. Views were being sought from service users and carers, in order to update all assessment and care management procedures in a person-centred way. Further guidance from Scottish Government would be awaited.

Decision/Conclusion

The Committee noted the update and were assured of progress.

Chairs reports from Governance Committees

61. No items this meeting

Risk

62. Corporate Risks aligned to the Clinical and Care Governance Committee – Verbal Update

The Head of Assurance and Improvement was unable to attend. This item would be carried forward to the following meeting.

D Drever gave an update following the previous meeting, where the reporting route for Scottish Public Services Ombudsman (SPSO) reports and recommendations alongside a requirement for additional assurance on the communication of learning from Significant Adverse Events (SAEs) was escalated to the Audit and Risk Committee. It was advised that the Joint Clinical and Care Governance Committee should highlight this risk on their risk register. This would be reported officially by the Head of Assurance and Improvement to the next meeting.

63. Agree any risks to be escalated to Audit and Risk Committee

- Audit of Clinical Documentation

64. Emerging Issues

No issues raised.

Committee Annual Review

65. Committee Self Evaluation Questionnaire – JCCGC 2122-20

Members received the results of the Committee Self Evaluation Questionnaire, noting that only two responses had been received.

The Board Chair advised that response levels were low across all governance committees and this would be reviewed in future. Members felt that the questions should be adapted to reflect the exceptional challenges of 2020/21 faced by NHS Orkney.

66. Draft Terms of Reference and Business Cycle 2021-2022 – JCCGC 2122-21

Members received the Draft Terms of Reference and Business Cycle for 2021-2022, noting that a great deal of work had gone into producing the documents.

Following an ongoing review by the Head of Corporate Administration, it had been raised that there were some gaps within the documentation, however it was felt that the current versions should be approved for use throughout 2021-22, with a plan to further review the documentation through coming months.

Decision/Conclusion

The Committee approved the Terms of Reference and Business Cycle for 2021/2022, on the understanding that a further review of the documentation would be led by the Head of Corporate Administration, in conjunction with members of the Integration Joint Board going forward.

67. Draft Clinical and Care Governance Committee Annual Report – JCCGC 2122-22

Members received the Draft Clinical and Care Governance Committee Annual Report.

Decision / Conclusion

The Committee approved the annual report.

68. Any other competent business

The Board Chair thanked I Grieve for her competent chairing of the Committee and welcomed S Johnston as the new Chair of the Committee.

69. Agree items to be brought to Board or Governance Committees attention

- Audit of Clinical Documentation
- Infection Control Annual Report
- Paediatric Autism Diagnosis/Neurodevelopmental Pathway Report
- Public Health Annual Report

Items for Information and Noting only

70. Schedule of Meetings 2021/22

Members noted that the next meeting would be held virtually at 13:00 on Tuesday, 13 July 2021.

71. Record of Attendance

Members noted the record of attendance.