



Joint Clinical & Care Governance Committee Chair’s Assurance Report to Board

Title of Report:	Chair’s Assurance report from the JCCGC	Date of NHSO Board Meeting: 14 December 2023
Prepared By:	Steven Johnston	Date of IJB meeting:
Approved By:		
Presented By:	Vice-Chair of JCCGC, Rona Gold	
Purpose		
The report summarises the assurances received, approvals, recommendations and decisions made by the JCCGC at its meeting on 27 November 2023 .		

Matters of Concern or Key Risks to Escalate	Major Actions Commissioned / Work Underway
<ul style="list-style-type: none"> Through a recent report on Child Health Surveillance and steps being taken to address new born and child review appointments with Health Visitors, a discussion followed around the gaps in assurance being provided to JCCGC (and therefore onto NHSO Board and the IJB), specifically, children’s services, women’s health and maternity services. For example, maternity services have internal mechanisms in place to monitor quality and safety but the route to escalate to JCCGC is not in place. This requires further consideration at the committee development session where the workplan for 2024/25 will be formulated. The issue of the Mental health transfer bed has been reported previously along with the adverse impact that the use of the facility has on routine clinics. The establishment of a nurse-led psychiatric liaison service was agreed in principle by the IJB but progress with this has been challenging and limited. Limited bed capacity within the Balfour was highlighted with particular pressure during November which has had a subsequent adverse effect on ED performance. Work was planned to work with the community to improve a prompt discharge time, early in the day, to ease pressure. Residential care capacity was highlighting as a contributing factor with 9 patients experiencing a delayed transfer of care. It was also flagged that requests for respite were having to be denied at times due to the need to offer the respite spaces to people requiring a permanent place. This subsequently places additional pressure on Carers. 	<ul style="list-style-type: none"> A focused piece of work has been carried out to address the backlog of patients awaiting Colonoscopy. Delaying these investigations carries a risk that cancer diagnosis could be delayed and therefore additional resource has been secured to firstly appoint the patients with suspicion of cancer (around half already seen and of the other half, 50% have a booking). Then the priority will be patients under surveillance with an expectation that it will take 2-3 months to address the backlog. A weekly meeting is in place to monitor progress and keep the work on track. Clinical Policies update: 7 signed off, 14 in progress and 3 to commence. JCCGC noted the positive progress in bringing our clinical policies up to date and highlighted the importance of staff being informed and effective dissemination of the key updates.

Positive Assurances to Provide	Decisions Made
<ul style="list-style-type: none"> The reformation of the Area Drugs & Therapeutics Committee has been successful with a fulsome report being presented to JCCGC. One specific aspect highlighted was the Safe Storage and Use of Medicines Policy which will be a focussed piece of work with further reporting to JCCGC in the future. Work to improve the governance around Blood Transfusion has progressed well with support from a Transfusion Practitioner from the national team. Work to adopt a national transfusion record in Orkney is underway. A written report outlining all of the new arrangements will be presented to JCCGC in due course. 	<ul style="list-style-type: none"> JCCGC agreed that a piece of work should take place to review the work of the Quality Forum (QF) and in particular, reviewing all matters escalated from QF to JCCGC since April 2023 to ensure these matters have been picked up in the absence of a Chairs Assurance Report. Members noted a disconnect between the two committees which needs to be addressed. With regards to patient experience, it was agreed to ensure that the next report to the committee would have more information on the direct experiences from patients, as agreed at August NHSO Board, whilst ensuring that the frequency of these reports was proportionate. Further discussion was held around the outstanding DATIX reports and targeted work to bring the number down, particularly those which had been open for more than one year.
Comments on Effectiveness of the Meeting	
<ul style="list-style-type: none"> A number of papers were not provided on time and some were verbal reports only, leading to difficult in the ability of the committee to gain assurance. This was down to a number of factors including capacity (Chair, executives, paper authors & support staff) and lack of awareness of the requirements and timescales. An emphasis has been placed on the importance of the agenda setting process to improve the situation for the February meeting. Presenters of papers should take the paper as read and avoid lengthy presentations, which would allow more time for questions and discussion. 	