# Agenda Item 3 Minute



Minute of meeting of the Integration Joint Board Clinical and Care Governance Committee held within the Boardroom, Denny Town House on Thursday 22 August 2019 at 9.30 a.m.

**<u>Voting Members</u>**: Fiona Collie (Vice-Chair)

Julia Swan (Chair)

**Non –voting** Margo Biggs, Service User Representative

Members: Rodger Ridley, Staff Representative, Falkirk Council

Patricia Cassidy, Chief Officer, Integration Joint Board

Also Attending: Jack Frawley, Committee Services Officer, Falkirk Council

Ellen Hudson, Deputy Nurse Director Sara Lacey, Chief Social Work Officer

Bette Locke, Associate Director of Allied Health Professionals

Patricia Miller, Lead Nurse Infection Control

Colin Moodie, Chief Governance Officer, Falkirk Council

Andrew Murray, Medical Director Lorraine Patterson, Head of Integration Martin Thom, Head of Integration Angela Wallace, Nurse Director

# CCG12. Apologies

There were no apologies.

# CCG13. Declarations of Interest

There were no declarations of interest.

#### CCG14. Minute

Decision

Minute of the Meeting of the Integration Joint Board Clinical and Care Governance Committee held on 20 June 2019 was approved.

# CCG15. Action Log

An action log detailing ongoing and closed actions following the previous meeting on 20 June 2019 was provided.

#### Decision

The IJB Clinical and Care Governance Committee noted the action log.



# CCG16. Presentation on Public Health Profile of Falkirk IJB Population

#### Decision

The Clinical and Care Governance Committee agreed to continue this item to the next meeting.

#### CCG17. Terms of Reference

The committee considered a report by the Chief Governance Officer, Falkirk Council which provided the committee with a revised Terms of Reference (ToR).

At its meeting of 6 April 2018 the Integration Joint Board (IJB) established the Clinical and Care Governance Committee and set the ToR. The committee had most recently considered revised ToR at its meeting on 20 June 2019. The committee agreed that they be further revised to include information submitted to the NHS Forth Valley Clinical Governance Working Group. A revised ToR was provided as an appendix to the report.

Following suggestions from the Medical Director the committee supported amending section 9.4 to make it clear that there was a reciprocal information sharing relationship between the committee and the NHS Forth Valley Clinical Governance Working Group. The committee also agreed that appended to the ToR should be a document setting out the relationship between the committee and the NHS Forth Valley Clinical Governance Working Group.

The Chief Officer highlighted previous consideration by the committee regarding expansion of its membership to include a representative of the third sector. The committee was minded to make that recommendation to the IJB and any consequential changes to the ToR.

#### Decision

The Clinical and Care Governance Committee agreed to recommend to the Integration Joint Board:-

- (1) the revised Terms of Reference, and
- (2) that the committee's membership be expanded to include a third sector representative.

# CCG18. Governance and Management Arrangements for Falkirk Community Hospital

The committee considered a report by the Deputy Nurse Director, NHS Forth Valley providing an update of the current governance and management arrangements for Falkirk Community Hospital (FCH).

Clinical and care governance arrangements for the site were through reporting to the Directorate Clinical Governance Group which in turn reported to the NHS Forth Valley Clinical Care Governance Working Group. The arrangements ensured there was appropriate monitoring, scrutiny and reporting systems and processes in place to provide assurance on the quality and safety of care being provided. These arrangements applied across all the community hospitals.

NHS Forth Valley continued to provide NHS HIS with regular updates on progress with implementation of the actions and improvements in relation to Unit 1, FCH and across the hospital more generally. The most recent update was submitted on the 9th August 2019.

The Medical Director confirmed that he was the Executive Lead for Clinical Governance and was very assured by the quality of care now in place at the site. He highlighted the importance of knowing the context in which complaints were made. The complaints regarding FCH were relatively historical. The Service was keen to learn from feedback. He stated that the improvements that had been required had been at the edge of care and that there were no fundamental issues.

Members discussed how the committee could receive sufficient assurance that changes had been made where needed. The Nurse Director stated that clinical and care governance in its widest context was important. She stated that the committee may benefit from a report providing assurance across all services. She advised that reports could be dedicated to any nursing or professional care area with information provided from intelligence held by the parties. A report with more detail could be submitted to the next meeting. The committee stated that having had information on the system in place it now needed more detailed information which should include Bo'ness Community Hospital.

The Medical Director referred to the Assurance at a Glance proposal which was used by the Stirling and Clackmannanshire Partnership which covered all major areas. He gave an undertaking to recirculate the proposal to members.

# **Decision**

The Clinical and Care Governance Committee:-

- 1) noted the contents of the report, and
- 2) requested a report on the standard and quality of care at Falkirk Community Hospital.

#### CCG19. National Health and Social Care Standards

The committee considered a report by the Head of Integration providing an update on the implementation of the National Health and Social Care Standards for inspection, registration and quality assurance of health and social care services. The Standards were adopted 1 April 2018 and replaced the National Care Standards which had been in place since 2002.

The committee discussed the differences and improvements in the new standards compared with the previous ones, the aspiration to include service users' voice, how the standards would be implemented and the role of volunteers.

#### Decision

#### The Clinical and Care Governance Committee noted the:

- 1) development since the adoption of the new Standards from April 2018 as set out in paragraphs 4.1 to 4.17;
- next stage in embedding the Standards will be to ensure all relevant policies and procedures are reviewed and updated to link more directly to the Standards, and
- 3) opportunities for shared learning when the Scottish Government published a short summary report late 2019 to demonstrate how the Standards are making a real difference to people experiencing care and support from across Scotland.

# CCG20. Healthcare Associated Infection Quarterly Report, April - June 2019

The committee considered a report by the Area Infection Control Manager on healthcare associated infections for the quarter April to June 2019. It was a reporting tool which allowed the committee to have oversight of the national Healthcare Associated Infections (HAI) targets in regard to - Staph aureus bacteraemias (SABs), Clostridioides difficile infections (CDIs), device associated bacteraemias (DABs), incidents and outbreaks and all HAI other activities across NHS Forth Valley.

Healthcare Associated Infection was NHS Forth Valley's priority to minimise the risk of acquiring an infection during the patients healthcare journey. The Infection Prevention & Control of Infection Team (IPCT) provided advice and guidance to staff, patients and their relatives on all matters relating to infection prevention. Effective and appropriate infection and environmental surveillance was critical to ensure infections were kept to a minimum.

- Staphylococcus aureus (SABs) remained within normal control limits.
- Device associated bacteraemias (DABs) remained within normal control limits.
- Clostridioides difficile infection (CDIs) slightly exceeded control limits.
- There had been no deaths with MRSA or C.difficile reported on the death certificate this quarter.
- There were 4 surgical site infections this quarter (two C-section, one large bowel and one breast infection)
- There were no outbreaks reported this quarter.

### **Decision**

The Clinical and Care Governance Committee noted the assurance provided by the Healthcare Associated Infection Quarterly Report, April - June 2019.