

HEALTHCARE GOVERNANCE COMMITTEE

Minutes of the meeting of the Healthcare Governance Committee held at 13.00 on Tuesday 28 May 2024 by video conference.

Present: Mr A. Cogan, Non Executive Board Member (chair); Mr E. Balfour, Non Executive Board Member; Mr A. Fleming, Non Executive Board Member.

In attendance: Mr F. Ahmed, Head of Service, Adult Audiology (item 5.5); Ms M. Perez-Botella, Director of Midwifery (item 3); Dr L. Bream, Associate Medical Director for Quality and Safety (item 1.2 and 6.1); Ms J. Browning, Associate Director of Pharmacy; Ms M. Carr, Chief Officer, Acute Services; Mr J. Crombie, Deputy Chief Executive; Ms J. Gillies, Associate Director of Quality; Ms T. Gillies, Medical Director; Ms S. Gossner, Chief Nurse, East Lothian Health and Social Care Partnership; Ms L. Guthrie, Associate Nurse Director, Infection Prevention and Control (item 5.6); Mr S. Malzer, Public Involvement Manager (item 4.2); Mr M. Massaro-Mallinson, Edinburgh Health and Social Care Partnership Services Director; Ms G. McAuley, Nurse Director, Acute Services; Ms A. MacDonald, Executive Nurse Director; Ms J. Mackay, Director of Communications; Ms C. Meldrum, Associate Nurse Director (item 5.5); Ms D. Milne, Director of Public Health and Health Policy; Ms J. Morrison, Head of Patient Experience; Ms B. Pillath, Committee Administrator (minutes); Mr A. Short, Director of Women's and Children's Services; Ms M. Stewart, Public Health (item 1.2); Ms F. Stratton, Chief Nurse, Midlothian Health and Social Care Partnership; Mr D. Thompson, Board Secretary; Ms A. White, Chief Officer, West Lothian Health and Social Care Partnership; Dr C. Whitworth, Medical Director, Acute Services; Mr P. Wynne, Director of Community Nursing; Ms L. Yule, Chief Nurse, West Lothian Health and Social Care Partnership.

Apologies: Mr S. Garden, Director of Pharmacy; Mr P. Knight, Non Executive Board Member; Ms L. Rumbles, Partnership Representative; Mr P. Togher, Chief Officer, Edinburgh Health and Social Care Partnership.

Chair's Welcome and Introductions

Mr Cogan welcomed members to the meeting and members introduced themselves. He welcomed Mr Balfour to the Committee as Non Executive Board Member and as Chair of the Area Clinical Forum.

Members were reminded that they should declare any financial or non-financial interests they had in the items of business for consideration, identifying the relevant agenda item and the nature of their interest. No interests were declared.

1. Patient Story

- 1.1 A video was shown of a patient giving feedback on her home birth experience and describing the person centred care she received.

2. Committee Business

- 2.1 Minutes from Previous Meeting (26 March 2024)

- 2.1.1 The minutes from the meeting held on 26 March 2024 were approved as a correct record.
- 1.1.2 The cumulative action note would be updated following discussion at the meeting and would be circulated with the papers for the next meeting.
- 1.2 Committee Assurance Framework update
- 1.2.1 Ms T. Gillies presented the previously circulated paper. The framework would be trialed with the Women's Services assurance report at this meeting and the Children's Services assurance report at the next meeting. Feedback would be sought from the Committee following these two papers, and feedback from the services completing the papers would also be gained while working on the papers. The Quality Improvement Team would work with those completing the reports to ensure the new guidance was applied.
- 1.3 Healthcare Governance Committee Annual Report and Assurance Need
- 1.3.1 Ms J. Gillies presented the previously circulated annual report, the initial draft of which had been discussed in at the meeting in May 2024.
- 1.3.2 Feedback had indicated that more development opportunities for Committee members would be welcomed. Ms T. Gillies agreed to offer an in person workshop session giving examples of how data given in assurance reporting was collected, reported and used. TG
- 1.3.2 Members accepted the recommendations laid out in the paper and approved the Annual Report for submission to the Audit and Risk Committee.
- 2. Emerging Issues**
- 2.1 Patient Safety Commissioner for Scotland Act 2023 - Circular
- 2.1.1 The Director's Letter dated 30 April 2024 had been previously circulated. Ms T. Gillies advised that the Committee would be updated as more information became available on the role of the Patient Safety Commissioner.
- 2.2 Infected Blood Inquiry
- 2.2.1 Ms T. Gillies advised that the final report from the Inquiry had been published on 20 May 2024. The Scottish Government was arranging a meeting at the end of June to discuss the NHS in Scotland's response to the recommendations in the report, and Ms T. Gillies would be the medical director representative on the group.
- 2.2.2 The Healthcare Governance Committee had received two papers in the past two years giving assurance on current standards in the Haemophilia Centre in NHS Lothian.
- 2.3 Gender Identity Services – Cass Review

- 2.3.1 Ms T. Gillies advised that following the Cass Review it had been agreed across Scotland that prescription of puberty blocking hormones for children under the age of 16 years had been paused. The Chief Medical Officer and Deputy Chief Medical Officer would speak in front of a parliamentary committee on 18 June on their decision. The Healthcare Governance Committee would be kept informed of any actions needed.

3. Women's Services Assurance Report

- 3.1 A paper had been previously circulated. The chair welcomed the Director of Women's and Children's Services to the meeting and he gave a presentation. Ms Perez-Botella, Director of Midwifery, was also in attendance. The paper was based on the new assurance framework but this time the presentation followed the previous narrative based template. The new process would focus on data and this would become clear in the next few meetings.
- 3.2 Key assurance came from national indicators for example the MBRACE report, which allowed focus on recommendations from reports and bench marking against other health boards. In addition to this, the number of significant adverse event reports and the level of harm reported were used to investigate themes which would inform improvement actions.
- 3.3 There had been an increase in complaints relating to waiting times and the treatment time guarantee for gynaecology procedures and this was related to a deterioration in waiting time. Ms Morrison advised that work had been done to improve appointment letters sent from TRAK and review of letters sent to patients on the waiting list. Clinicians were also being encouraged to be open with patients about the waiting time when adding them to the list for a procedure. Presentation of waiting times information online was also being considered.
- 3.4 It was known that the experience in maternity services was poorer for women of black ethnicity and work was being done with a third sector organisation which supported women of African descent. This included monitoring experiences and providing additional antenatal support including longer or more appointments provided closer to home. There was also support for staff on providing appropriate care.
- 3.5 Members requested more information about Gynaecology consultant cover. Mr Short advised that this would depend on complexity of cases, for example between the St John's and Royal Infirmary units.
- 3.6 Members accepted the recommendations laid out in the paper and accepted moderate assurance.
- 3.7 Women's Health Plan
- 3.7.1 Ms Milne presented the previously circulated paper. Members agreed to change the limited assurance offered in the paper and accepted moderate assurance on the delivery of the plan. Good work was in progress on implementation of the plan and some of the outcomes were not directly within NHS Lothian's remit.

4. Person Centred Care

4.1 Spiritual Care and Bereavement Services – update on action plan

4.1.1 Ms McAuley presented the previously circulated paper. Currently the out of hours on call services could not be provided, and this would not be possible until the new posts had been recruited to and staff had been trained, likely in 6 months' time. The day service was prioritising patient support was being prioritised over staff support, as there was a range of other types of support available for staff. There was also access to local religious leaders who provided some support to patients. There had been no complaints or significant adverse events related to the reduced service.

4.1.2 Members accepted the recommendations laid out in the paper and accepted limited assurance.

4.2 Involving People Update

4.2.1 Ms Mackay presented the previously circulated paper. There was an awareness among service managers of the need to engage with patients when making services changes, but it was not always clear what processes were available and what level of patient engagement should be sought in different situations. This was where guidance would be provided.

4.2.2 Members accepted the recommendations laid out in the paper and accepted moderate assurance.

4.3 NHS Lothian British Sign Language Action Plan

4.3.1 Ms Milne presented the previously circulated paper. Members accepted the recommendations laid out and accepted significant assurance on the delivery of the plan.

5. Safe Care

5.1 Royal Edinburgh Hospital and Associated Services Accommodation Risk Mitigation Plan

5.1.1 The chair welcomed Ms McKigen to the meeting and she presented the previously circulated paper. During discussion at the Strategic Planning and Performance Committee it had been suggested that a national solution was required for female high secure provision. Mr Crombie advised that a decision was awaited from the Scottish Government on the capital programme and that if this was not available then NHS Lothian would be unable to provide this service. If this was the case, then this item should be removed from the Corporate Risk Register as it would no longer be the Board's responsibility.

5.1.2 A further update would be brought to the next meeting outlining what aspects of the risk were within NHS Lothian's remit and which aspects which were not under NHS Lothian's control and had been escalated to the Scottish Government. **TMCK**

5.2 Access to Treatment Risk Mitigation Plan

5.2.1 Ms Carr presented the previously circulated paper. Members noted the amount of work in progress in different areas to mitigate this risk. It was suggested that it would be helpful to define the highest risk areas and associated measurements for improvement. Some areas were monitored at service level and other needed governance oversight.

5.2.2 Members accepted the recommendations laid out in the paper and accepted limited assurance.

5.3 Edinburgh Health and Social Care Partnership Bed Occupancy / Delayed Discharge Risk Mitigation Plan

5.3.1 The chair welcomed Mr Massaro-Mallinson to the meeting and he presented the previously circulated paper. This risk had also been discussed at the Strategic Planning and Performance Committee. There was a focus on stabilisation of bed occupancy, but there was a risk of deterioration due to financial challenges.

5.3.2 Members accepted the recommendations laid out in the paper and accepted limited assurance. Mr Cogan would discuss with Ms T. Gillies on when an update should be brought back.

AC / TG

5.4 Independent Report on Audiology Services in Scotland

5.4.1 Ms T. Gillies presented the previously circulated paper. The Scottish Government were in the process of deciding a set of audiology standards. Work was in progress against the 55 recommendations from the report, most of which were with the Scottish Government.

5.4.2 Members accepted the recommendations laid out in the paper.

5.5 NHS Lothian Review of Physiology Services

5.5.1 The chair welcomed Ms Meldrum and Mr Ahmed to the meeting. A service review was being carried out by the team to develop specific standard operating procedures and pathways with measurements to ensure the recommendations were met.

5.5.2 A further update would be part of the Acute Services Annual Assurance Report in November 2024.

5.5.3 Members accepted the recommendations laid out in the paper.

5.6 Healthcare Associated Infection update

5.6.1 The chair welcomed the Associate Nurse Director for Infection Prevention and Control to the meeting and she presented the previously circulated paper and talked through the data provided. The paper asked for limited assurance as more work was required to improve delivery of the service including definition of the corporate risk and measures for reporting mitigation plans. However, members agreed to accept moderate assurance that a safe infection control service was being delivered and that there was a plan in place to make improvements. The Committee had previously

accepted moderate assurance, and there had been no change to the risk to patient safety since that time.

- 5.6.2 Members accepted the recommendations laid out in the paper and accepted moderate assurance for the reasons described.

5.7 Management and Learning from Significant Adverse Events

- 5.7.1 Ms T. Gillies presented the previously circulated paper. Members accepted the recommendations laid out.

5.8 Health and Safety Clinical Governance and Performance Annual Report

- 5.8.1 Ms T. Gillies presented the previously circulated paper and members accepted the recommendations laid out. There had been improvement in compliance with reporting from each area.

6. **Effective Care**

6.1 Hospital Standardised Mortality Reporting – data analysis

- 6.1.1 Ms T. Gillies presented the previously circulated paper. The analysis was not yet complete, but the final part of the work around stroke would be reported as part of the stroke services annual report in November 2024. There was currently no evidence of avoidable mortality in patients receiving care in the stroke unit.
- 6.1.2 Members accepted the recommendations laid out in the report and accepted moderate assurance. It was noted that the robust analysis provided assurance that NHS Lothian was not an outlier in terms of hospital mortality rate.

6.2 Medicines Management Annual Report

- 6.2.1 Ms T. Gillies presented the previously circulated paper and members accepted the recommendations laid out.

7. **Exception Reporting Only – reports provided**

Members noted the following previously circulated reports:

- 7.1 Research and Development Annual Report;
- 7.2 Palliative Care Managed Clinical Network Annual Report.

8. **Other Minutes: Exception Reporting Only**

Members noted the following previously circulated minutes:

- 8.1 Area Drug and Therapeutics Committee, 2 February 2024;
- 8.2 Organ Donation Sub Group, 7 March 2024;
- 8.3 Health and Safety Committee, 21 February 2024;
- 8.4 Clinical Management Group, 13 February 2024, 12 March 2024;

9. Corporate Risk Register

- 9.1 Ms T. Gillies presented the previously circulated paper and members accepted the recommendations laid out.

10. Reflection on the Meeting

- 10.1 It was agreed that the outcome of the Cass report and any actions for NHS Lothian would be highlighted in the Board Committee Chairs' updates at the Board meeting following update from the Scottish Government. **AC**

11. Date of Next Meeting

- 11.1 The next meeting of the Healthcare Governance Committee would take place at **1.00pm on Tuesday 23 July 2024** by video conference.

12. Further Meeting Dates

- 12.1 Meetings would take place on the following dates in 2024:
- 17 September 2024;
 - 22 October 2024;
 - 19 November 2024.