

<b>NHS 24 BOARD</b>	<b>27 AUGUST 2020 ITEM NO 6.2.3 FOR APPROVAL</b>
<b>CLINICAL GOVERNANCE COMMITTEE ANNUAL REPORT TO THE BOARD – 2019/20</b>	
<b>Executive Sponsor:</b>	Clinical Governance Committee Chair
<b>Lead Officer/Author:</b>	Director of Nursing & Care
<b>Action Required</b>	The Board is asked to approve the report.
<b>Key Points</b>	The report is prepared and presented as part of the Statutory Annual Accounts process to provide assurance to the Board that the Committee has fulfilled its duties as set out in the Terms of Reference.
<b>Financial Implications</b>	There are no financial implications contained within this paper.
<b>Timing</b>	The paper is presented to the Board on 27 August 2020.
<b>Contribution to NHS 24 strategy</b>	The Clinical Governance Committee reviews the performance of the organisation against the NHS 24 Strategy on an ongoing basis. Good governance is essential to ensure appropriate decision making to support the strategy.
<b>Contribution to the 2020 Vision and National Health and Social Care Delivery Plan (Dec 2016)</b>	The Clinical Governance Committee reviews the organisation's contribution against the 2020 Vision and National Health and Social Care Delivery Plan (Dec 2016) on an ongoing basis.
<b>Equality and Diversity Impact Assessment (EQIA)</b>	The Clinical Governance Committee ensures that all activities have been impact assessed and supports NHS 24 to meet its duties with regard to equality and patient engagement. The Committee also takes lead responsibility on Equality & Diversity issues, patient and public involvement and Public Partnership Forum activities.

## 1. RECOMMENDATION

- 1.1 The Annual Report to the Board 2019/20 is presented to the Board for approval.

## 2. INTRODUCTION

- 2.1 This report sets out the activities of the Clinical Governance Committee during 2019/20 and details how it has fulfilled its governance remit.

## 3. REMIT

- 3.1 The Clinical Governance Committee is a statutory Committee responsible for providing assurance to the Board that appropriate clinical governance systems and processes are in place and effective throughout the organisation. It seeks to provide the Board with a view from the Committee on the overall effectiveness of the system of internal control related to its remit during financial year 2019/20.

## 4. MEMBERSHIP/ATTENDANCE

- 4.1 The members and attendees of the Committee are listed below:

### Members

Ms Madeline Smith	Non Executive & Committee Chair
Dr Juliana Butler	Non Executive Member
Mr John Glennie	Non Executive Member
Dr John McAnaw	Member & Clinical Advisory Group Representative
Mr Albert Tait	Non-Executive (Chair for November meeting only)

### Attendees

Dr Martin Cheyne	Chair NHS 24 (from 01.01.20)
Mr Eddie Docherty	Director of Nursing & Care (from 01.08.18 to 31.01.20)
Ms Angiolina Foster	Chief Executive
Mrs Lynn Huckerby	Director of Service Development
Mr Mark Kelly	Head of Clinical Governance & Quality Improvement
Dr Anna Lamont	Associate Medical Director
Mr Martin MacGregor	Partnership Forum Nominated Staff Representative
Mrs Margo McGurk	Director of Finance & Performance
Mr Kevin McMahan	Head of Risk Management & Resilience
Ms Stephanie Phillips	Director of Service Delivery
Ms Esther Robertson	Chair NHS 24 (until 30.09.19)
Ms Jennifer Rodgers	Clinical Lead for Dentistry
Dr Laura Ryan	Medical Director
Ms Eileen Wallace	Public Partnership Forum
Ms Brenda Wilson	Deputy Director of Nursing & Care

	<b>10 May 2019</b>	<b>19 August 2019</b>	<b>11 November 2019</b>	<b>11 February 2020</b>
<b>Madeline Smith</b>	Yes	Yes	Yes	Yes
<b>John Glennie</b>	Yes	No	No	Yes
<b>Albert Tait</b>	Yes	Yes	Yes	Yes
<b>Jay Butler</b>	Yes	Yes	Yes	Yes

## 5. MEETINGS

- 5.1 The Committee met on four occasions during the year between 1 April 2019 and 31 March 2020. All four meetings were quorate.
- 5.2 It was felt beneficial for additional scrutiny and assurance that an Extraordinary Clinical Governance Committee Meeting be scheduled and a meeting is planned for early April 2020 to cover the additional responses we have had to put in place for Covid-19.

## 6. COMMITTEE ACTIVITIES

- 6.1 The Committee routinely considered the following during 2019/20:

- Report of Clinical Directors
- National Quarterly Healthcare Quality Report
- Review of Clinical Risk Register
- Organisational Resilience Update
- Service & Quality Improvement Update
- Service Model Implementation
- National Clinical Governance Group Minutes
- Dental Advisory Group Minutes
- Committee Workplan

- 6.2 During the year, the Committee considered the following:

- British Sign Language National Action Plan
- Public Protection Annual Report
- Public Protection Policy
- Patient Experience Survey Results
- Patient Affairs Annual Report
- Software as Medical Devices – MHRA Legislation
- Realistic Medicine Framework
- The Health & Care (Staffing) (Scotland) Act 2019
- Muscle & Bond Strengthening & Balance Activities in the Workplace
- Accreditation of NHS 24 Core Induction by Glasgow Caledonian University
- SPRA 2019/20
- EU Exit Preparedness
- Advanced Nurse Practitioners
- Programme Connect
- Public Partnership Forum Annual Report
- Health Inequalities

- Excellence in Care
- Trainee Advanced Nurse Practitioners
- Mental Health Redesign Development Report
- Breathing Space Webchat Evaluation Report
- NHS 24 Prescribing Policy
- Clinical Governance Committee Terms of Reference

6.3 Formal Minutes of each meeting were taken and once approved were placed on the next available Board agenda. In addition, any significant matters arising from discussions at meetings were highlighted to the Board by the Committee Chair at the next available Board Meeting.

6.4 The Committee considered clinical risks pertinent to the organisational performance, on a quarterly basis and was assured that risks are actively managed by the organisation.

A detailed review of all risks would be undertaken on an annual basis and incorporated into the workplan even if the risk did not score sufficiently highly to require escalation to the committee.

6.5 During 2019/20 the following in-depth reviews were scheduled into the CGC meetings (two per meeting).

- Digital Service
- Excellent in Care
- Mental Health Hub
- Process for Capturing Risks & Clinical Governance assurance with regard to new programmes of work
- Scottish Emergency Dental Service Presentation
- Patient Safety Leadership Walkround Presentation
- Public Protection
- Mental Health & Learning Disabilities

## **7. EXTERNAL GUIDANCE, STANDARDS AND LEGISLATION**

7.1 During the year the Clinical Governance Committee received regular reports on the activities and developments in the Nursing & Care, Medical, and Dental Directorates. In addition, the Committee considered all national strategies and external standards and legislation as they applied to NHS 24.

## **8. PRIORITIES**

8.1 The following activities will be part of the 2020/21 priorities:

- Mental Health
- Scottish Ambulance Service Collaboration
- Governance relevant to Respond, Recover, Review
- Governance relevant to digital expansion

## **9. CONCLUSION**

- 9.1 The Clinical Governance Committee is the mechanism through which patient safety, quality improvement and high standards of care are ensured across NHS 24. Through its work and focus this year the committee has fulfilled this responsibility and will continue to ensure that the CGC is an effective and evolving Committee to the Board to deliver this remit

**Madeline Smith**  
**Chair, NHS 24 Clinical Governance Committee**