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Minutes of the Healthcare Quality Assurance and Improvement Committee held on Thursday 14<sup>th</sup> May 2020 at 2.00pm via MS Teams.

Chair:

Mrs L Thomson Non-Executive Director (Chair)

Present:

Mr A Boyle Non-Executive Director
Mrs M Lees Chair, Area Clinical Forum
Mrs L McDonald Non-Executive Director
Mrs M Morris Non-Executive Director
Dr A Osborne Non-Executive Director

In Attendance:

Dr J Burns Medical Director Mr C Campbell Chief Executive

Mrs C Coulombe Head of Infection Prevention & Control

Mrs K Cormack Director of Quality

Mrs M Cranmer Staff Partnership Representative

Mrs E Currie Quality Programme Manager, Business Support

Mr E Docherty Executive Director of Nursing, Midwifery & Allied Health Professionals

Dr L Findlay Medical Director, South Lanarkshire HSCP

Dr J Keaney Medical Director, Acute Division

Mrs N Mahal Chair, NHS Board

**Apologies:** 

Professor K Currie Professor of Nursing & Applied Healthcare Research, Glasgow

Caledonian University

Mrs C McGhee Corporate Risk Manager

### 1. WELCOME

Mrs Thomson welcomed colleagues to the meeting and apologies were noted.

### 2. <u>DECLARATION OF INTERESTS</u>

There were no declarations.

### 3. MINUTES & ACTION LOG

As the meeting scheduled of 12<sup>th</sup> March 2020 was cancelled, the minutes of the meeting held on 14<sup>th</sup> November 2019 were reviewed and approved. The Committee also reviewed the Action Log updates prepared for the cancelled 12<sup>th</sup> March 2020 meeting and noted these as complete.

#### THE COMMITTEE:

1. Noted and approved the minutes of 14<sup>th</sup> November 2019 and action log updates dated 12<sup>th</sup> March 2020.

## 4. SETTING THE CONTEXT PRESENTATION

Mrs Mahal thanked everyone for their hard work during the Covid 19 pandemic, ensuring NHS Lanarkshire continues to deliver high quality patient care in the face of unprecedented circumstances. Mrs Mahal advised that revised governance arrangements would be presented at the Board meeting in June 2020, providing further clarity regarding purpose, oversight and scrutiny and a robust audit trail.

#### **Silver Command Update**

Dr Burns delivered the presentation to the Committee outlining NHS Lanarkshire's Clinical Risk Management during the Covid 19 pandemic. The presentation provided information regarding national and local infection rates, fatalities and data regarding increased risks linked to the 60+ age group and those with underlying health conditions.

The Committee considered evidence related to "flattening the curve" i.e. how fast, intelligent action slows the pandemic effects and can prevent healthcare systems becoming overwhelmed. Planning work included public health measures, reviewing service capacity and stopping some services to release capacity where most needed. The presentation included details regarding operational strategy, i.e. best use of resources and how to mitigate risk.

The Committee also reviewed information related to Non-Covid emergency care and urgent care for the next 6 months including clinical triage pathways. To summarise, the presentation reviewed next steps for NHS Lanarkshire services, preparedness for a possible second wave, redesign and recovery.

## **Quality & Safety Dashboard – Covid Update Report**

Dr Burns provided the Committee with an overview of the Covid 19 Quality & Safety Dashboard, providing data and trend information relating to patients and staff in NHS Lanarkshire. This Dashboard was produced for Gold Command and has been reviewed weekly.

# Acute, North & South HSCP Governance Committees combined highlight report in response to Covid 19

This exception report provided an update on the changes within NHS Lanarkshire to health and care services and clinical pathways in response to the Covid 19 Pandemic. The expectation was that volume and severity of cases of Covid 19 would stretch the resources of NHS Scotland in an unprecedented way. It acknowledged that it is an evolving situation and evidence and guidance change as we progress through the pandemic. It was further acknowledged that the usual governance meetings within NHS Lanarkshire have not taken place as a consequence of staff commitments to the Covid 19 response.

The Committee discussed questions arising from the presentation, including a query from Mrs Cranmer regarding data for Covid 19 patients who are age 60 and over. Dr Osborne thanked Dr Burns for the presentation, acknowledging how helpful this was and enquiring as to how we could be

better sighted in terms of preparedness.

Dr Burns informed the Committee that NHS Lanarkshire were well prepared and are currently reviewing planning arrangements and will ensure that lessons are learned going forward, including completion of a full review at the end of the pandemic. Dr Keaney added that there had to be considerable planning arrangements in place to be prepared for a high number of staff contracting the virus therefore impacting on capacity.

Mrs Thomson advised that she understood the need to move into an emergency and rapid response phase and raised the question of what normal routes were not followed as a result and will these be identified upon review.

Dr Burns advised that there had to be some deviations from policy and other occasions when there was no policy e.g. the unexpected impact on kidney function for patients in Intensive Care.

Mr Campbell added that, while dealing with this national emergency, there also had to be some deviations in terms of standing financial instructions and staff governance e.g. changing shifts in intensive care units. Mr Campbell confirmed that a full review of the Command and control structure will be completed, including the action logs where key decisions and actions were recorded.

The Non-Executive Directors agreed to give consideration as to how they can support decision making during the ongoing situation. Mrs Mahal advised that there is Non-Executive deployment in the Audit Committee to provide appropriate oversight. She further noted that there is opportunity for exploiting lessons learned and for the Board to play a role in terms of resilience and response. Mrs Mahal advised that it was very helpful to note what services have been paused or changed in light of the pandemic and this will be discussed at the Board meeting in June 2020.

Mr A Boyle advised that he has been very impressed with how NHS Lanarkshire has responded so far and he is keen to be as supportive as possible. Mr A Boyle enquired as to cancer diagnosis and if there is an alternative route for patients other than A&E. Dr Burns responded confirming that cancer presentations have decreased which is of concern and there are some patients who are classed as urgent and are refusing to attend hospital for their treatment until the pandemic is over, therefore there is work to be done to re-establish confidence. Early discussions are taking place with the Assessment Centres who are utilising borrowed space and staff and there is a need to capture the learning from them.

Mrs M Morris enquired as to whether the soon to be established Ethics Group will be responsible for looking at retrospective as well as future decision making and evidence and Dr Burns confirmed it would.

#### THE COMMITTEE:

1. Noted the Setting the Context Presentation and associated update reports.

#### 5. QUALITY ASSURANCE & IMPROVEMENT - HIGHLIGHT REPORT

Mrs K Cormack presented the report, containing an overview of the work involving the Quality Directorate during this period of managing the Covid 19

pandemic and any other routine business items that felt appropriate for the Committee to note at this time. Key areas covered included status updates regarding Cancer Audit, Clinical Audit, Corporate Complaints, Adverse Events, Data & Measurement, Systems Development, Quality Improvement and Evidence. It was noted that the Director of Quality has provided additional support to the three Intensive Care Units (ICU) in NHS Lanarkshire by being liaison to the West of Scotland ICU Network, providing daily updates to the Network on behalf of NHS Lanarkshire ICUs.

Dr A Osborne noted a reference within the adverse events section regarding a code for recording lack of PPE related to cardiac arrest and asked how often this had been a problem. K Cormack responded that she was unaware that the code required to be used as yet but would check. John Keaney stated that as these events would be recoded as Category 1 incidents, an alerts would be issued and he had not seen any . Mrs M Lees queried the reference to adult asthma, whether this was in reference to NHS Lanarkshire or Scottish Government. Mrs K Cormack will confirm.

### THE COMMITTEE:

1. Noted the Quality Assurance & Improvement Highlight Report.

#### 6. QUALITY STRATEGY- HIGHLIGHT REPORT

Mrs K Cormack presented the Quality Strategy Highlight Report to the Committee, providing an update with regard to the Implementation Plan for the period 1<sup>st</sup> February 2019 to 31<sup>st</sup> March 2019.

It was noted that outstanding actions were being reviewed and where appropriate, will be carried forward into the 2020-2021 plan with new target completion dates. As detailed in the report, some areas of work have been deferred as a result of Covid 19. The Quality Directorate have been involved in a significant amount of new work generated from the Covid 19 pandemic which is not evident from the Implementation Plan. It was noted therefore that areas of new work requiring medium to long term support will be recorded in the new Implementation Plan for 2020-2021.

Mr A Boyle commented on the high quality of leadership evident and Mrs M Morris noted the importance of ensuring the organisation captures the leadership learning and embeds this into future ways of working.

#### THE COMMITTEE:

1. Noted that Quality Strategy highlight report.

### 7. RESEARCH & DEVELOPMENT UPDATE

The Committee considered an update presented by Dr J Burns on behalf of Mr R Hamill from Research & Development. It was noted that the majority of the report pertained to the period since the end of January 2020 when the first coronavirus specific research activities began in the UK until 1<sup>st</sup> May 2020. During the reporting period, international research activities focussed on understanding how the SARS-CoV-2 virus affects people and finding treatments that may lessen the impact of Covid-19. The research effort in the UK has emerged as one of the most coordinated and focussed; it includes the world's largest randomised clinical trial of potential coronavirus treatments – the OXFORD RECOVERY Trial. All three of NHS Lanarkshire's hospitals are contributing to RECOVERY.

Mrs L Thomson praised the work undertaken and how well connected the Research & Development Team are, thanking them for the work they are doing.

Dr J Burns advised that funding has been received to support the study. Mrs N Mahal commended the report and questioned the absence of references to the Strathclyde University and Glasgow Caledonian University research partnerships. Dr J Burns confirmed that this work is proceeding in partnership with Strathclyde University.

## **THE COMMITTEE:**

1. Noted the Research & Development report.

# 8. <u>LANARKSHIRE INFECTION PREVENTION & CONTROL COMMITTEE –</u> COVID 19 HIGHLIGHT REPORT

Mrs C Coulombe presented the Lanarkshire Infection Prevention & Control Committee Covid 19 highlight report to the Committee, highlighting that during the period January 2020 to March 2020, the Infection Prevention and Control service has made significant changes to their work programme to enable the service to step up to the demands of Covid 19 preparedness and management. The report provided details of what services have stopped, reduced or changed and the challenges and opportunities staff have faced. Some challenges include the quick pace of change regarding national guidance as more becomes known about the virus and learning in relation to working with Care Homes to best support staff and patients in the future.

Mrs L Thomson enquired regarding the risks and issues section of the report. Mrs C Coulombe advised of the risks associated with the areas that have been stepped down to allow Covid 19 work to step up, such as surveillance systems. In terms of Clinical Practice & Audit, the team will respond to outbreaks and manage risks as appropriate.

Mr E Docherty advised the Committee that the Infection Control Committee has reconvened with a different format, emphasising the work of local teams. Lead staff will focus on underpinning issues supported by data.

Mrs M Lees enquired as to whether the Covid 19 work will help regarding other infections in acute settings. Mrs C Coulombe confirmed that a lot of learning will be captured and there has been great staff engagement that supports compliance. The Committee discussed the work to support Care Homes and the links established with North & South HSCPs and Public Health, reviewing the data for improvement. Mr E Docherty advised that in terms of governance, links are being established with key staff however NHS Lanarkshire are not accountable for Care Homes.

Dr A Osborne advised the Committee that she welcomed the new work mentioned in the report and noted the hand hygiene compliance data suggesting that this was 81% in the period October to December 2019 and not recorded for the period of January to March 2020 therefore requested a refocusing on this fundamental work. Mr E Docherty agreed and assured the Committee that there would be a focus on improving hand hygiene compliance as the recent figures recorded were unacceptable.

#### THE COMMITTEE:

1. Noted the Infection Prevention & Control Covid 19 Highlight Report.

9.

## **ADVERSE EVENTS – HIGHLIGHT REPORT**

## **Duty of Candour & Adverse Events Procedure**

Mrs K Cormack presented the Highlight Report to the Committee providing an update regarding Duty of Candour and Significant Adverse Event Reviews. The Committee noted that from April 1st 2019 until April 21st 2020, there were 59 Significant Adverse Events Reviews (SAERs) commissioned. 32 investigations have been completed and are closed with 27 remaining open. As a result of the Covid 19 situation, some of the SAER timelines have been put on hold. Arrangements have been agreed and communication shared to ensure there are no Category 1 or Duty of Candour incidents being missed during this time. Of the Duty of Candour investigations that are currently closed, all elements of the legislation have been complied with. Mrs K Cormack advised that an Annual Report will be available in July 2020.

Mrs L Thomson enquired as to how outstanding reviews will be prioritised. Dr J Burns confirmed that Mr E Docherty, Mrs K Cormack and herself will meet to review all outstanding SAERs and agree a tolerance level to help conclude these and capture the valuable learning. It was noted that never events have been re-categorised and Mrs K Cormack advised that the national categories for never events are currently being reviewed within the Quality Directorate with plans to raise staff awareness and consider how to ensure these events are captured.

#### THE COMMITTEE:

1. Noted the Adverse Event Highlight Report.

## 10. COMPLAINTS - HIGHLIGHT REPORT

The Committee considered the Complaints Highlight report presented by Mrs K Cormack and noted the Quarter 3 Complaints Report (deferred from the postponed March 2020 meeting), the Covid 19 Patient Affairs Activity and decisions issued by the Scottish Public Services Ombudsman (SPSO). Work is underway to review the complaints and identify trends to improve understanding and feed into recovery work.

#### **THE COMMITTEE:**

1. Noted the Complaints Highlight Report and the SPSO Report.

# 11. <u>EXTRACT OF CORPORATE RISK REGISTER (CLINICAL) AND HIGH VALUE CLAIMS</u>

The Committee noted that the Corporate Risk Register is normally considered monthly by the Corporate Management Team, who discuss emerging and new risks; very high graded risks across the organisation; mitigating controls and risks that exceed the corporate risk appetite. However, effective from 18th March 2020, NHS Lanarkshire has been on emergency footing in response to the Covid 19 pandemic, and the nature of review of the corporate risk register has a focus on very high and high graded risks only at this time. As part of the overall governance arrangements, all corporate risks have an

identified assurance committee that will receive for oversight at every meeting, the relevant risks with mitigating controls.

#### **THE COMMITTEE:**

1. Noted the Extract of Corporate Risk Register (Clinical) and High Value Claims.

## 12. <u>HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT COMMITTEE – ANNUAL REPORT 2019-2020</u>

The Committee noted the Annual Report 2019-2020, terms of reference and work-plan. It was acknowledged that the terms of reference were due for review in March 2020, however the meeting was cancelled in light of the escalating Covid 19 situation. The terms of reference were therefore noted and approved by the Committee at today's meeting.

Mrs Cormack mentioned that it was noted that the Information Governance Annual Report was outstanding but had been highlighted to the responsible staff. Mr C Campbell advised that he would link with the appropriate staff regarding the report to ensure this is received before the next meeting of this Committee.

## **THE COMMITTEE:**

 Noted the Healthcare Quality Assurance & Improvement Committee Annual Report 2019-2020 and approved the Terms of Reference. Mr C Campbell will liaise with Mr G Docherty regarding the overdue Information Governance Annual Report.

#### 13. NHS LANARKSHIRE CONSENT POLICY

Mrs K Cormack presented the NHS Lanarkshire Consent Policy including an updated patient consent form and additional guidance for different patient groups, e.g. children and young people, adults with incapacity. Dr J Keaney advised that an additional Consent Form has been developed for patients having elective surgery to enable discussion regarding the risk of contracting Corona Virus in Acute Hospitals. This will be presented to the meeting in July 2020.

### THE COMMITTEE:

1. Noted the Consent Policy.

### 14. SAFETY PLAN STEERING GROUP - PAPERS

The Committee noted that the Safety Plan Steering Group meeting scheduled for February 2020 was cancelled, however an agenda was shared with group members inviting comments and is included for information in today's agenda.

### **THE COMMITTEE:**

1. Noted the Safety Plan Steering Group agenda and papers.

## 15. QUALITY PLANNING AND PROFESSIONAL GOVERNANCE GROUP - PAPERS

The Committee noted that the Quality Planning & Professional Governance Group meeting scheduled for February 2020 was cancelled, however an agenda was shared with group members inviting comments and is included for information in today's agenda. Mrs K Cormack advised that some items due to come to this Committee meeting were moved to the Quality Planning & Professional Governance Group agenda.

## THE COMMITTEE:

1. Noted the Quality Planning & Professional Governance Group agenda and papers.

## 16. DATES OF MEETINGS DURING 2020 / 2021 AT 14:00 HOURS

- a) Wednesday 22<sup>nd</sup> July 2020 via MS Teams
- b) Thursday 10th September 2020
- c) Thursday 12th November 2020
- d) Thursday 11th March 2021
- e) Thursday 13th May 2021