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**REPORT TO: MORAY INTEGRATION JOINT BOARD ON 28 MAY 2020**

**SUBJECT: CLINICAL AND CARE GOVERNANCE – ASSURANCE REPORT**

**BY: CHAIR OF CLINICAL AND CARE GOVERNANCE COMMITTEE**

**1. REASON FOR REPORT**

- 1.1. This report summarises the key matters considered by the Committee under the revised governance arrangements, approved by the Chair and Chief Officer, implemented during the period of response to COVID-19.

**2. RECOMMENDATION**

- 2.1. It is recommended that the Board considers and notes the key points and assurances from the Committee outlined in section 4.

**3. BACKGROUND**

- 3.1. As a result of the response to COVID-19 the normal cycle of committee meetings was suspended in March 2020 to allow staff resources to be focussed on mobilisation of the response.
- 3.2. To ensure that there was appropriate oversight of key issues during this period the Chief Officer and Chair of Clinical Care and Governance Committee agreed that there would be regular, short meetings with a minimum of one committee member as quorate.
- 3.3. The first meeting was scheduled for 29 April but due to technical difficulties it was rescheduled and held on 6 May 2020.

**4. KEY MATTERS RELEVANT TO RECOMMENDATION**

- 4.1. At the meeting held on 6 May 2020 the Committee received updates on the following areas:-
- 4.1.1 Child and Adult Protection – an update on the revised meeting arrangements locally and across Grampian for both Child Protection and Adult Protection was

provided, along with the current position of referrals, which has reduced. Domestic violence is a key focus for adult support protection at this time. Work is also ongoing in relation to the returns to Scottish Government and the associated developments of Datasheets for Child Protection figures.

- 4.1.2 Out of Hours Service (GMED) and Covid Assessment Hubs – an overview of the establishment of the hubs and the resources involved was provided along with an assessment of current activity. The new processes are being reviewed and challenged on an ongoing basis to ensure that they minimise face to face meetings and associated risks, but that they maintain a focus on what is right for the patient. The pathway for caring for the more “frail” patients receiving palliative care that are confirmed COVID-19 positive is an area that was being reviewed and considered by NHS Grampian Board. An update will be provided to the next meeting of Clinical and Care Governance Committee.
- 4.1.3 New Models of Care – as a response to COVID-19 two new teams have been established. The Enhanced Discharge Hub was established to focus on reducing delays in discharges and the Community Response Team was established to support people at home with palliative care or to provide support for them to recuperate at home.
- 4.1.4 Use of Spynie Care Home, Duffus Wing – to support the discharge from hospital and the anticipated surge in demand, a short term wing of 17 beds was commissioned, for a period of six months, at Spynie.
- 4.1.5 Care Homes – enhanced system of assurance – an update on the status of care homes was provided and it was noted that Spynie had been re-assessed by the Care Inspectorate, where they stated they were impressed by the improvements. The committee requested that assurance be provided that Care Homes are safe in light of recent news reporting on deaths in care homes elsewhere and the Health and Social Care Moray approach was outlined, including the alignment to the Grampian Public Health Red/Amber/Green (RAG) status which is then reported to Scottish Government. An update on the current position will be provided to the next committee.
- 4.2 The Chair was assured of the arrangements that had been established as discussed and congratulated the teams involved. The Interim Chief Officer advised that work was underway to capture the learning so that it could be mainstreamed for the changes that need to remain.

## **5. SUMMARY OF IMPLICATIONS**

### **(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Commissioning Plan “partners in care” 2019-2029**

Governance arrangements are integral for the assurance of the delivery of safe and effective services that underpin the implementation of the strategic plan.

**(b) Policy and Legal**

The Public Bodies (Joint Working) (Scotland) Act 2014 requires Health Boards and Local Authorities integrate adult health and social care services. This paper outlines the work being undertaken to ensure that the clinical and care governance framework for Health and Social Care Moray and partners, during COVID-19, provides assurance of a safe and effective system.

**(c) Financial implications**

There are no financial implications arising as a direct result of this report.

**(d) Risk Implications and Mitigation**

This report outlines the governance arrangements in place during the COVID-19 period for and the mitigation that is being undertaken to minimise risks to people.

**(e) Staffing Implications**

There are no staff implications arising as a direct result of this report.

**(f) Property**

There are no property implications.

**(g) Equalities/Socio Economic Impact**

An Equality Impact Assessment is not needed because there are no changes to policy as a result of this report.

**(h) Consultations**

Consultations have taken place with the Chair of Clinical and Care Governance Committee, Interim Chief Officer and Lissa Rowan, Committee Services Officer, and their comments have been incorporated in the content of this report.

**6. CONCLUSION**

**6.1. This report provides assurance of the arrangements in place during the period of COVID-19 in relation to governance overseen by Clinical Care and Governance Committee of Moray Integration Joint Board.**

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Background papers: with author  
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