



REPORT TO: MORAY INTEGRATION JOINT BOARD CLINICAL AND CARE GOVERNANCE COMMITTEE ON 30 NOVEMBER 2023

SUBJECT: HEALTH AND SOCIAL CARE MORAY (HSCM) CLINICAL AND CARE GOVERNANCE GROUP UPDATE

BY: CHIEF NURSE, MORAY

1. REASON FOR REPORT

1.1 To inform the Committee of progress in refreshing the Clinical and Care Governance Framework in Health and Social Care Moray.

2. RECOMMENDATION

2.1 It is recommended that the Committee:-

- i) consider and note the progress made in re-establishing the Clinical and Care Governance Group (CCGG);**
- ii) note that the CCGG and Practice Governance Board (PGB) will provide assurance reporting from CCGG to this Committee on a quarterly basis; and**
- iii) note that CCGG and PGB will escalate any issues via CCGG to Committee, including recently delegated services of Childrens and Families and Justice Services.**

3. BACKGROUND

3.1 Health and Social Care Moray (HSCM) Clinical Governance Group was established as described in a report to this Committee on 28 February 2019 (para 7 of the minute refers).

3.2 The assurance framework for clinical governance was further developed with the establishment of the Clinical Risk Management (CRM) Group as described in a report to this Committee on 30 May 2019 (para 7 of the minute refers).

3.3 As reported to this Committee on 29 October 2020 (para 5 of the minute refers) Social Care representatives attend the Clinical Governance Group so the group was renamed HSCM CCGG.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

4.1 The Terms of Reference (**APPENDIX A**) has been refreshed, incorporating the PGB and recently delegated services.



- 4.2 The reporting structure (referred to as **Appendix 2** in **Appendix A**) has been refreshed and approved by the CCGG. The tight control of the number of papers being presented will allow for greater discussion amongst group attendees.
- 4.3 A new reporting template (referred to as **Appendix 5** within **Appendix A**) will ensure that services are clear what information is being provided for either assurance or escalation. This will improve the quality and decision making of the reporting to this Committee.
- 4.4 The group will be chaired by one of three Professional Leads; Fiona Robertson, Chief Nurse (Interim) Moray, Tracy Stephen, Head of Service/Chief Social Work Officer and Audrey Steele-Chalmers, Lead Allied Health Professional Moray.

5. **SUMMARY OF IMPLICATIONS**

(a) **Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Partners in Care 2022 – 2032”**

As set out within Annex C of the Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Clinical and Care Governance Framework.

(b) **Policy and Legal**

Clinical and Care Governance requirements are set out within the Moray Health and Social Care Integration Scheme. Appropriate arrangements must be in place to ensure and evidence good governance in meeting duties under the Public Bodies (Joint Working) (Scotland) Act 2014.

(c) **Financial implications**

None directly associated with this report.

(d) **Risk Implications and Mitigation**

There are systems and processes in place across service areas to support clinical governance, providing assurance to the HSCM Senior Management Team and to this Committee. There are platforms within Health and Social Care to discuss and share good practice, learning and challenges.

Moray Integration Joint Board (MIJB), Moray Council and NHS Grampian could find themselves exposed to significant risks if good governance is not in place. The purpose of this report is to oversee the processes to ensure that appropriate action is taken in response to adverse events, scrutinise reports/action plans, safety action notices, feedback, complaints and litigation, and those examples of good practice and lessons learned are disseminated widely.

Adverse events and complaints provide significant information on trends relating to risk and an encouraging opportunity for learning across the



system. Regular monitoring of this is critical to ensure continuous improvement and the ambition of achieving excellence in our delivery of high quality care and treatment.

The local CRM group reviews all events logged on Datix, ensuring risk is identified and managed.

(e) Staffing Implications

This activity is core to all practitioners in the front line both in terms of their professional competence and assurances in care delivery.

(f) Property

None directly arising from this report.

(g) Equalities/Socio Economic Impact

There is no requirement for an equality impact assessment because there is no change to policy required as a result of this report.

(h) Climate Change and Biodiversity Impacts

None directly arising from this report.

(i) Directions

None directly arising from this report.

(j) Consultations

Consultations have been undertaken with the following staff who are in agreement with the content of this report where it relates to their area of responsibility:

- HSCM Clinical and Care Governance Group members and Chairs
- Sonya Duncan, Corporate Manager
- Caroline O'Connor, Committee Services Officer, Moray Council
- Isla Whyte, Interim Support Manager
- Liz Tait, Lead for Clinical Governance, HSCM

6. CONCLUSION

6.1 The HSCM CCGG are assured that issues and risks identified from complaints, clinical risk management, internal and external reporting, are identified and escalated appropriately. The group continues to develop lines of communication to support the dissemination of information for action and sharing of good practice throughout the whole system in Moray. This report aims to provide assurance to Committee that there are effective systems in place to reassure, challenge and share learning.

6.2 There will be continued review and development of this framework as the Portfolio vision across Grampian is realised.



Author of Report: Sonya Duncan, Corporate Manager, HSCM,
Isla Whyte, Interim Support Manager
Background Papers: with author
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