



**MINUTE OF MEETING OF THE INTEGRATION JOINT BOARD  
CLINICAL AND CARE GOVERNANCE COMMITTEE**

**Thursday, 27 August 2020**

**remote locations via video conference**

**PRESENT**

Mr Sandy Riddell, Cllr Tim Eagle, Mr Ivan Augustus, Mr Simon Bokor-Ingram, Ms Karen Donaldson, Mrs Jane Mackie, Dr Malcolm Metcalfe, Dr Graham Taylor, Mr Sean Coady, Mrs Jeanette Netherwood, Mrs Liz Tait and Ms Sam Thomas

**APOLOGIES**

Mrs Val Thatcher, Dr Ann Hodges, Ms Pauline Merchant and Dr June Brown

**IN ATTENDANCE**

Also in attendance at the above meeting was Ms Joyce Johnston, Interim Head of Children and Families and Justice Social Work; Cllr Shona Morrison, Moray Council; and Mrs Isla Whyte, Interim Support Manager, as clerk to the Board.

**1. Chair of Meeting**

The meeting was chaired by Mr Riddell.

**2. Welcome and Apologies**

The Chair welcomed everyone to the meeting and apologies were noted.

**3. Declaration of Member's Interests**

The Chair declared his role of Chair of Mental Welfare Commission in respect of Item 11 on the agenda. Mrs Tait also advised she has close links with the Infected Blood Inquiry.

There were no other declarations of Members' Interest in respect of any item on the agenda.

**4. Minute of Board Meeting dated 27 February 2020**

The Minute of the meeting dated 27 February 2020 was submitted for approval.

The Board agreed to approve the minute as submitted.

## **5. Action Log of Board Meeting dated 25 June 2020**

The Action Log of the meeting dated 25 June 2020 was discussed and updated accordingly at the meeting.

## **6. Clinical Governance Group Escalation Report**

A report by Dr Graham Taylor, Clinical Lead, informs the Committee of progress and exceptions report to the Clinical Governance Group during Quarter 1 of 2020/21.

Dr Taylor confirmed the Health and Social Care Moray (HSCM) Clinical Governance Group continue to develop lines of communication to support the dissemination of information for sharing and action throughout the whole clinical system in Moray. Any issues that require to be escalated will be taken to this Committee.

After discussion the group felt there may be benefit in a joint Clinical Risk Management (CRM) group meeting with acute sector and x3 partnerships across Grampian.

Cllr Eagle requested further information around 4.8 of the report. Mr Coady responded to advise following the clinical governance workshop held in January 2020 he took the opportunity to seek assurance from NHS Grampian that Senior Charge Nurses (SCNs) would have the capacity to complete these audits. The Director of Nursing investigated the situation and put appropriate support in place for SCNs and formally wrote the Clinical Governance Group to say issue resolved.

Mr Augustus sought clarification on current processes with regards to timescales for responding to complaints as 4.4 of the report highlights a delay in responses to complainants. Mr Coady will seek an update on this from Dr June Brown and offered to prepare a report for the next Committee setting out the process and performance against timescales.

The Committee noted the contents of the report.

## **7. Clinical Governance Group Annual Report 2019-20**

A report by Dr Graham Taylor, Clinical Lead, informs the Committee of the Annual Report from the Clinical Governance Group.

Dr Taylor highlighted section 1.1 of the annual report which outlines the aims of the Clinical Governance Group. Dr Taylor advised independent contractor services are obligated to report through national processes and as such means Moray Integration Joint Board (MIJB) may not be completely sighted on everything.

In terms of adverse events (particularly abuse, violence, disruptive behaviour and accidents) Mr Metcalf asked for more details i.e. benchmarking / more information so learning can be applied to improve situation. Dr Taylor responded this is something the Clinical Risk Management group will look more closely at. Cllr Eagle suggested comparing the figures with previous years, perhaps it shows a downward trend for instance.

The Committee discussed the new digital culture health and social care services now find themselves in and how to measure the quality of care that is given. It was noted that remote areas of Scotland have been doing this for a long time, showing really good outcomes. The Clinical Risk Management group will continue to monitor situation i.e. adverse events / complaints. Mr Metcalfe offered to discuss with NHSG Health Intelligence team to ascertain measures in place.

The Committee noted the Annual Report from HSCM Clinical Governance Group.

## **8. Deaths Involving Coronavirus (COVID-19) up to 28 June 2020**

A report by the Interim Chief Officer informs the Committee of key findings with regards to deaths involving coronavirus in Moray during the period of 16 March 2020 to 28 June 2020.

Mr Bokor-Ingram confirmed this information can be taken regularly to this Committee.

Overall the number of cases in Moray continues to be low compared to the rest of Scotland. Mr Bokor-Ingram credited the community of Moray in terms of compliance and the incredible response from independent care home providers in Moray. Acknowledgement was also given to the HSCM team in Moray who have been working directly with care homes throughout the pandemic and continue to do so on a daily basis.

Dr Taylor added practitioners have to continue to work as is COVID-19 is prevalent which presents some challenges from members of public who feel COVID-19 is no longer a threat. Need to continue local messaging around the facts. It was also noted that Moray is beginning to see a rise in excess deaths; above 5 year average.

The Committee noted the information provided within the report and at Appendix 1 and 2.

## **9. Child Protection Assurance Report**

A report by the Interim Chief Officer informs the Committee of Child Protection activity in Moray during COVID-19 pandemic.

Moray Child Protection Committee retains the overview of Child Protection activity across Moray, assuring appropriate governance, and reports to the Public Protection Chief Officer's Group. Weekly submissions to Scottish Government on a broad dataset focussing on child protection and vulnerable families and also adult protection and homelessness were put in place.

Child Protection has remained a key focus throughout the pandemic, with a weekly standard set for seeing every child on the register – this is higher than the national standard. There has been a decline in child protection activity from Easter; now seeing that level increasing.

In Moray there are around 30 children on Child Protection Register – that is from 17 families. To put into context there are approx. 20,000 under 18s in Moray. There has been an increase in referrals from anonymous sources over last few months, which

could be due to increased adverts / social media campaigns for friends, family and neighbours to be alert and raise concerns. There has been an increase in re-registration of children to the register. Those on the register through lockdown were already known to social work. Neglect and parental drug use is still highest reasons for children to be put on the register.

Ms Johnston added it is not possible to give a guarantee that every child is absolutely safe from harm but can assure the Committee that when concerns are raised they are dealt with appropriately.

Cllr Eagle referred to point 7.4 of the report where it states the reasons for children being placed on the register since March 2020, highlighting that 45% were due to concerns of parental drug misuse and 41% due to concerns of neglect. Cllr Eagle stressed the need to have a strong and sustained approach to drug and alcohol misuse in Moray. Ms Johnston agreed, adding need to understand the wider poverty and deprivation issues around that and mental health issues, noting parents have often experienced similar issues themselves as children.

In terms of concluding the report to give an assurance it was noted that child protection is a multifactorial / multiagency system and there would need to be a qualitative dive into that to give that level of assurance. There is a high level of scrutiny in place around child protection and even more so during this pandemic. The Chair confirmed the report provided him with assurance that local arrangements are providing children on the register with the best support.

The Committee noted the contents of the report.

## **10. Care Homes Update**

A report by the Chief Social Work Officer provides the Committee with an update regarding the current status of the Care Homes in Moray whilst delivering services during the COVID-19 pandemic.

Mrs Mackie highlighted to the Committee that although Moray may not have experienced COVID-19 to a high degree there are ongoing impacts of dealing with the pandemic. Regulations imposed have put pressure on Care Home staff i.e. weekly testing for all staff, different visiting arrangements, expectation of families, PPE requirements etc. It is also worth noting today there are the beginnings of research emerging showing impact of living in an environment where relationships have been disrupted and the negative impact this may have.

Test and Protect could mean large groups of staff may have to be off work. Dr Taylor added living with the long term effect of staff and residents in Care Homes is still to be realised.

In response to a question from the Chair, Mrs Mackie advised plans for implementation of indoor visiting have been submitted to Public Health team for ratification. The daily oversight groups has this item on their agenda.

Staff that have been redeployed to Duffus Wing, Spynie Hospital, are going back to their substantive posts during September. SSSC arrangement in place where social care staff can be deployed through register set up but Moray hasn't required use of that. There is also a mechanism in place via NHS Grampian where staff can be deployed to care homes should there be a need.

The Committee noted the continued work that is being undertaken to support the Care Homes in Moray and the positive results of working in partnership with them.

### **11. Adult Protection Inspection Preparation**

A report by Jane Mackie, Head of Service, informs the Committee of work underway with regards to a review of Adult Support and Protection processes in Moray.

Awaiting confirmation of resumption of inspections of adult services, as yet no timescales or methodology have been received. Review and redesign of adult support and protection processes in Moray will now recommence with COVID-19 in mind.

The Chair confirmed he now attends the Adult Protection Committee.

The Committee agreed to note the contents of this report.

### **12. Lessons Learned from Reducing Delayed Discharges and Hospital Admissions, Health and Social Care Scotland**

A report by Sean Coady, Head of Service, informs the Committee of the report findings from Health and Social Care Scotland in relation to lessons learned from reducing delayed discharges and hospital admissions during the initial period of the COVID-19 outbreak in March and April 2020.

The report has been shared with the Home First Delivery Group (HFDG). This group is working on several work streams that link to managing delayed discharges. The HFDG reports through Moray Transformation Board.

Cllr Eagle asked what performance measures are in place to keep people safe and what resources are available to implement these measures. Mr Coady advised there is a pan Grampian approach to this and locally performance teams have pulled together a dashboard.

Mr Bokor-Ingram stated this will be a whole system shift, a different way of working. Resource is a particular challenge here but focus needs to be on what needs to be prioritised to support people to get them home. Need to invest to stop spending on other areas. A measure of success will be having far fewer people delayed.

Ms Donaldson asked that more communications with regards to Home First are shared with unions. Mr Coady confirmed unions have a seat on delivery group and additional reps are welcome. There is also a weekly briefing in place.

The Committee felt the wording in the Health and Social Care Scotland report around Adults with Incapacity legislative framework being a major barrier wasn't reflective of the situation. Teams certainly don't see this safeguarding as a barrier.

The Committee agreed to note the findings of the report and the lessons identified and the intention to incorporate this learning into the development of the Home First strategic theme.

### **13. COVID-19 and Impact on Governance System – Discussion regarding email from MIJB Chair 06.08.20**

Mr Bokor-Ingram is of the view that the Committee is sighted on the right issues, the Chair agreed stating reports are informative and the Committee has good, helpful discussions. The Committee agreed there is a good level of oversight and scrutiny in place. Committee meetings are timetabled for the remainder of this financial year and the formal Committee meetings have now resumed.

It was agreed a report will be submitted to September's MIJB meeting highlighting the state of play and the processes in place to provide assurance to the MIJB Chair.

### **14. Confidential Item – Health and Social Care Moray Complaints for Quarter 1 2020-2021**

A report by the Chief Nurse informed the Committee of the complaints and the work is ongoing with teams to ensure consistency and quality of responses. Sharing learning across the whole system, including independent contractors. As previously discussed the CRM meeting has oversight of all complaints, lessons learned and actions taken.

Going forward it was acknowledged there needs to be more focus on the 'so what?' for example have the numbers of that type of complaint fallen since actions/measures put in place. This will provide the Committee with more assurance that changes across the system are having a positive impact.

Mr Metcalfe advised he would like to see more detail around the complaints i.e. how long have they been in the system and reason for not meeting timescales and who decides if complaints are upheld or not.

The Committee agreed to consider and note the totals, lessons learned and action taken for complaints submitted and completed within the last quarter and requested more information about lessons learned, patterns and actions undertaken in future reports.