

<b>Report to:</b>	<b>Public Board of Directors</b>	<b>Agenda item:</b>	<b>16</b>
<b>Date of Meeting:</b>	<b>24<sup>th</sup> June 2020</b>		

<b>Title of Report:</b>	<b>Clinical Governance Committee Update Report</b>
<b>Status:</b>	<b>For Information</b>
<b>Sponsor:</b>	<b>Nigel Stevens, Non-Executive Director</b>
<b>Author:</b>	<b>Kathryn Kelly, Executive Assistant to Director of Nursing &amp; Midwifery and Director of Strategy</b>
<b>Appendices:</b>	<b>None</b>

**Purpose**  
To update the Board of Directors on the activity of the Clinical Governance Committee meetings held on 20<sup>th</sup> January 2020, 16<sup>th</sup> March 2020 and 12<sup>th</sup> May 2020

**Background**  
The Clinical Governance Committee is one of three assurance Committees supporting the Board of Directors in fulfilling its objectives. The Committee is responsible for testing the robustness and effectiveness of the clinical systems and processes operating within the Trust to provide assurance to the Board of Directors.

**Business Undertaken**

- January 2020**
1. Cardiology – Review of Improvement Plan and Follow-Up Plan
  2. Systems and processes supporting PoCT Equipment oversight and management
  3. Effectiveness of Safeguarding Adults system and processes
  4. Effectiveness of systems and processes for End of life care
  5. Effectiveness of Safeguarding Children system and processes
  6. Systems and Processes to guard against Never Event: Wrong Site Surgery
  7. Patient Safety Incidents Exception Report
  8. Serious Incidents Report from OCGC
  9. Legal Services Update Report from OCGC
  10. Board Assurance Framework
- March 2020**
1. Update on Incident Reporting
  2. Learning Disability Mortality Review update
  3. Effectiveness of systems and processes for the management of Anticoagulants including Warfarin
  4. Effectiveness of systems and processes for quality assurance in Blood Sciences (Biochemistry and Haematology)
  5. Effectiveness of systems and process for assessing Capacity and Consent
  6. Overview of Divisional Governance Committee Meetings
  7. Operational Clinical Governance Committee (OCGC) Update Report
  8. Board Assurance Framework
  9. Work Plan for CGC and NCGC, Horizon Scanning & Next Agenda Review
  10. Quality Board Update Report
  11. Minutes of OCGC Meeting
- May 2020**

1. Patient Safety and Risk Management Update
2. COVID-19 Update
3. Impact of COVID-19 on other work across the Trust
4. Board Assurance Framework
5. Work Plan for CGC, Horizon Scanning & Next Agenda Review

### **Key Risks and their impact on the Organisation**

No key risks were raised at the Committee.

### **Key Decisions**

The Clinical Governance Committee recommends that the Board of Directors note:

#### **January 2020**

- a) That Partial Assurance with improvements required was given in relation to Cardiology – Review of Improvement Plan and Follow-up Plan, and it was requested that this item should return to the committee within six months.
- b) That Significant Assurance was given in relation to Systems and processes supporting PoCT Equipment oversight and management, and it was requested that this item be presented again at the committee within three years.
- c) That Significant Assurance was given in relation to Effectiveness of Safeguarding Adults system and processes and it was requested that this item be presented again at the committee within three years.
- d) That Significant Assurance was given in relation to Effectiveness of systems and processes for End of life care and it was requested that this item be presented again to the committee within three years.
- e) That Significant Assurance was given in relation to Effectiveness of Safeguarding Children system and processes and the Committee asked that this item be presented again within three years.
- f) That Partial Assurance was given in relation to Systems and Processes to guard against Never Event: Wrong Site Surgery and the Committee asked that this item be re-presented again within one year.

#### **March 2020**

- a) That Partial Assurance was given in relation to Effectiveness of systems and processes for the management of Anticoagulants including Warfarin and asked that this item be re-presented to the committee within one year.
- b) That Partial Assurance was given in relation to Effectiveness of systems and process for assessing Capacity and Consent and asked that this item be re-presented to the committee in January 2021.

#### **May 2020**

- a) Patient Safety and Risk Management Update – In relation to the COVID-19 outbreak on Robin Smith Ward, an investigation had been opened and would be presented to CGC in July 2020.
- b) Board Assurance Framework – the Head of Corporate Governance agreed to develop a simple table, documenting all the risk for Committee by July 2020.
- c) Work Plan – the Head of Corporate Governance agreed to produce a draft 2021 work plan in advance of the next meeting in July 2020.

**Exceptions and Challenges**

None identified.

**Governance and Other Business**

The meeting was convened under its revised Terms of Reference.

**Future Business**

The Clinical Governance Committee will continue to follow the work programme as driven from the Board Assurance Framework (BAF) but with a more holistic assessment of overall clinical risks, e.g. currently post-Covid 19 recovery.

**Recommendations**

It is recommended that the Board of Directors note this report.