

**NHS 24
BOARD MEETING**
**22 JUNE 2023
ITEM 12.1
FOR ASSURANCE**
**APPROVED Minutes of the Clinical Governance Committee Meeting held on
Thursday 16 February 2023
in Boardroom, Lumina / via MS Teams**
Members:

Mr Martin Togneri	Non-Executive and Committee Chair
Ms Anne Gibson	Non-Executive
Ms Marieke Dwarshuis	Non-Executive
Ms Liz Mallinson	Non-Executive
Dr Martin Cheyne	Chair, NHS 24
Dr John McAnaw	Associate Clinical Director

In Attendance:

Mr Jim Miller	Chief Executive, NHS 24
Mrs Maria Docherty	Executive Director of Nursing & Care
Dr Laura Ryan	Executive Medical Director
Mr John Gebbie	Director of Finance
Ms Stephanie Phillips	Director of Transformation, Strategy, Planning and Performance
Ms Pauline Howie	Director of Service Delivery
Mr Andrew Moore	Deputy Director of Nursing & Care
Mr Martin MacGregor	Partnership Forum Nominated Staff Representative
Mrs Laura Neil	Lead AHP / Interim Head of Clinical Governance & Quality Improvement
Mr Kevin McMahon	Head of Risk Management & Resilience
Ms Gail Macgregor	Associate Director of Nursing and Operations
Mr David Morrison	Engagement and Inequalities Manager
Ms Geraldine Matthews	Board Secretary
Ms Katherine Robertson	Senior Nurse Mental Health
Ms Amanda McKay	Clinical Service Manager
Ms Lisa MacDonald	Operational Manger for Breathing Space

Apologies:

Ms Jennifer Rodgers	Head of Dentistry
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1. Welcome and Apologies

Mr Togneri welcomed everyone to the meeting. Apologies were noted as above.

2. Declarations of Interest

There were no declarations of interest.

3 Minutes of Previous Meeting

The minutes of the previous meetings held on 24th November 2022 were approved as an accurate record.

4. REPORT OF CLINICAL DIRECTORS

Mrs Docherty presented the report of the Clinical Directors, noting the main areas:

- **Vaccination Programme** for staff has now ended, with 49.78% of staff have received the COVID-19 booster vaccination and 50.22% of staff have received the flu vaccination. This does not include staff who have received their vaccinations out with NHS 24, which will increase that overall percentage. These figures are in line with the national position across Boards.
- **Public Protection** a paper on the Key Information Summary (KIS) is being shared externally with a view to placing a greater emphasis on the use of KIS around public protection matters.
- **Redesigning Urgent Care MSK (RUC MSK) workstream** an analysis of NHS 24 musculoskeletal (MSK) data has been carried out as part of the Redesigning Urgent Care MSK (RUC MSK) workstream. Currently working with Scottish Government to finalise and publish the report, it has been agreed that this will be completed by 31st March 2023. Following this thorough review, NHS 24 has concluded that MATs (Musculoskeletal Advice and Triage Service) will not be restarted in its previous form Scoping and discussion with the Scottish Government is underway to discuss potential alternative pathways and digital solutions that might better meet the current challenges within MSK pathways of care. Discussions with Scottish Government are ongoing and are included in the recommendations.

Dr Ryan highlighted the following key points:

- An action from the **Redesign of Urgent Care Community Pharmacy workstream**, Associate Clinical Director discussed the sharing of the NHS 24 contact record with community pharmacy with NHS 24 Clinical Development Team, and work to enable this development has started with expected implementation by beginning of March 2023. The sharing of the 'contact record to community pharmacy' work was discussed with NHS Directors of Scotland Chair, Primary Care and Community Pharmacy NHS Leads Group Chair and Vice-Chair, and Community Pharmacy Scotland Executive (contractor body). All were supportive of the development and sharing NHS 24 clinical assessment information on referral to the community pharmacy and will support activity to raise awareness across the community pharmacy network ahead of implementation.

The Committee noted the content of the paper for assurance.

5. CLINICAL RISK MANAGEMENT

5.1 Review of Clinical Risk Register

Mr McMahon presented the Clinical Risk Register which provided an update on all primary and secondary category clinical risks to the organisation as of 24th November 2022.

The key points of note were:

- The overall risk profile has reduced slightly
- 3 risks have been closed
- 1 risk has increased in score
- 1 new risk has been identified (scoring less than 10)

Ms Gibson sought further detail around the new risk which had been added in relation to the COVID-19 Inquiry. Dr Ryan highlighted she is the SRO for this piece of work and provided assurance that the organisation are progressing with preparation of the relevant documentation.

The Committee discussed the risk relating to NHS 24 not being able to sustain a safe and effective response to significant additional pressure/demand on services due to current system and resourcing capacity limitations. This had also been raised at the Staff Governance Committee and Planning & Performance Committee; however, it was felt this was reflective of the demand at festive.

The Committee noted the content of the paper.

5.2 Organisational Resilience Update

Mr McMahon presented a paper to the Committee and provided an update on current issues and management relating to NHS 24 organisational resilience.

The main points highlighted were:

- COVID Public Inquiry
- Winter Resilience
- Investment in incident management, log keeping and media training

The Committee noted the report.

6. NHSS QUALITY STRATEGY

6.1 National Quarterly Healthcare Quality Report

Mr Moore presented the National Quarterly Healthcare Quality Report for Q3 October to December 2022. The Report was approved by the National Clinical Governance Group on 2 February 2023. The following points of interest were highlighted:

- NHS inform experienced its second busiest month in December 2022 with over 12 million visits (sessions) to the site, this follows December 2021 with 15 million visits.
NHS Inform has seen a significant upward trend in usage since September 2022, as a result of combined Autumn/Winter vaccinations, launch of the NHS 24 online app and new content around Strep A, Scarlet Fever, winter health and winter illnesses.
- Breathing Space Webchat remains a positive choice for many people in distress who contact the service. November and December 2022 were the busiest months that the service has recorded for Webchat engagement since it began.
- Of the eight Stage 2 complaints received, all were acknowledged within three working days and six responded to within 20 working days. Stage 1

complaints remain extended from five to ten working days to support frontline pressures.

- Calls offered to all NHS 24 services in 2022-23 Q3 was 579,914

Mr Togneri welcomed members to highlight any key areas in the report for further discussion. There was discussion around the reporting of Legal Claims, and it was agreed Mrs Docherty and Mr Gebbie would have a discussion around the presentation of the information and reporting to Committees.

In relation to Call Reviews it was noted the performance for Breathing Space, however, assurance was provided to the Committee these should improve as the detail had not been recorded in time for inclusion in the report.

The Committee requested an update on the QI Projects at a future meeting. Mrs Neil agreed to prepare a paper in relation to this.

Mrs Neil provided an update on the information relating to Care Opinion and agreed to bring a paper back to the next Committee.

The Committee noted the report and assurance provided.

7 **SAFE**

7.1 Infection Prevention and Control (IPC)

Mr Moore presented a paper to the Committee providing an update in relation to IPC, the main point highlighted were in relation to:

- Audits
- IPC Standards
- Food in Centres
- eLearning

Mrs Docherty assured the Committee in relation to the eLearning modules it had been agreed these would not be reported during the first year of implementations, however, there should be improvements as these will be part of core induction across the organisation.

The Committee noted the content of the paper.

7.2 Leadership Walkrounds

The Committee were provided an update with the programme which has been put in place for the year ahead to undertake the Leadership Walkround and Engagement Sessions. There will be one session per month along with a session for HQ staff.

The Committee noted the content of the paper.

8. EFFECTIVE

8.1 NHS 24 App

Mr Moore presented a paper to the Committee providing assurance related to the governance undertaken prior to launch of the NHS 24 app.

The NHS 24 app replicates self help guide content which is currently live on NHS Inform. This content has previously had clinical and organisational sign off.

The Committee noted the content of the paper.

8.2 Access Outliers

Mr Moore presented a paper to the Committee providing an update on the access outlier audits which had been presented at a previous meeting in November 2021. This resulted in an inbound KPI being identified which was the 90th Percentile Time to Answer equals 30 minutes and was added to the NHS 24 Performance Framework in December 2021.

The Clinical Governance Team having reviewed the call data for those with highest acuity endpoints as a percentage of Access Outliers, concluded that a quarterly audit is carried out in which the 30 calls that have the highest time to answer are clinically reviewed.

The Committee noted the content of the paper.

9. PERSON-CENTRED

9.1 Equalities Mainstream Report

Mr Morrison presented the draft NHS 24 Equality Mainstreaming Report 2023 and Workforce Data Report 2023 to the Committee, which included information on:

- Mainstreaming progress and examples in action
- Equality Outcomes mid-term update 2021-2025
- Equal Pay Statement 2021, and
- Gender Pay Gap

The Committee expressed their thanks for the comprehensive report.

9.2 Whistleblowing Update

Mr Moore provided an update on recent activity during Quarter 3 (October to December 2022) highlighting one concern had been reported however it did not meet the standards, work is also underway to recruit additional confidential contacts for the organisation.

The Committee noted the update provided by the report.

10. ITEMS FOR ASSURANCE

10.1 National Clinical Governance

The Committee noted the minutes of the last National Clinical Governance Group.

10.2 Terms of Reference

The Committee reviewed the proposed revision to its Terms of Reference:

- Section 1 – Purpose of the Committee – Paragraph 1.3 – Amended to:

“To provide assurance to the Board that appropriate structures and processes are in place to address issues of diversity and equality, human rights, and the **principles of patient focus and public involvement** (PFPI)”.

- Section 2 – Composition of the Committee – Attendance – Paragraph 2.2.5 – Amended to:
“One member of the **Public Participation Forum** shall normally attend Committee meetings”.

The Committee approved the revised Terms of Reference.

10.3 Committee Workplan

The Committee discussed and noted the Workplan.

11 AOB

11.1 Reflection on Committee Papers/ Key Points relevant to Governance Committee / Agreed Committee Update to Board

The Committee welcomed the detailed papers which had been presented and agreed the update to the Board would include NHS 24 App and Access Outliers.

12 IMPROVEMENT UPDATES & DISCUSSION

12.1 Deep Dive - Mental Health

The Committee received a presentation by Katherine Robertson, Senior Nurse Mental Health; Amanda McKay, Clinical Service Manager and Lisa MacDonald, Operational Manager for Breathing Space.

The presentation provided an overview of the range of Mental Health services across NHS 24.

The Committee welcomed the presentation, which was very informative and were appreciative of the opportunity to understand more around the mental health services within NHS 24.

13. DATE OF NEXT MEETING

The next meeting will take place on Thursday 1st June 2023 at 10am to 12noon in Boardroom, Lumina / via MS Teams.

The meeting ended at 12.55pm