Borders NHS Board



Meeting Date: 3 October 2019

Approved by:	Dr Stephen Mather, Chair Clinical Governance Committee
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CLINICAL GOVERNANCE COMMITTEE

Purpose of Report:

The purpose of this report is to brief the Board on any areas of concern within the Committee's remit, in order to provide assurance to the Board that those matters have been identified and are being addressed.

Recommendations:

The Board is asked to note the update from Clinical Governance

Approval Pathways:

This report has been prepared for the Board.

Executive Summary:

The Clinical Governance Committee would like to highlight the following to the Board:-The latest CGC meeting was held on 4.9.19. This report is a summary of that meeting.

 The committee members resolved that, in the future, they would not receive any papers which had not been submitted in reasonable time

Infection control:

Discussed Vale of Leven and QEUH reports. NHS Borders compliant with all bar two recommendations which relate to ventilation and maintenance backlog. There is a need to update the infection control programme because of this. Update from Scottish Arthroplasty project shows NHS Borders to be within the national funnel plot for wound infections.

Adverse events:

Falls and aggression & violence are the top two events. There is a reduction in falls with harm reported in the acute services division. There is to be a 'deep dive' to investigate PMAV.

SPSO:

There has been a sustained increase in referrals to the SPSO which, it is believed, results from the changes in NHS Borders complaints procedure.

• Healthcare Environment Inspection:

This inspection reported on 31st July. The results were largely positive with problems identified being related to the fabric of BGH.

Primary & community divisional report:

There was one SAER which had yet to conclude and which there is now a full

investigative report. This relates to a matter of food, fluids and nutrition and which will be the subject of a patient story in the future.

• Mental Health divisional report:

When benchmarked against similar areas, NHS Borders has the second highest incidence of drug-related deaths (2018 – 22 deaths from 510 drug users). All deaths are scrutinised rigorously and are overseen by the ADP. Whilst several action points for future implementation have been identified, there had been no missed opportunities.

• Medical appraisals:

All medical appraisals are up to date and no problems have been reported.

Import of item/iceuse on			
Impact of item/issues on:			
Strategic Context	Not Applicable		
Patient Safety/Clinical Impact	As set out above		
Staffing/Workforce	As set out above		
Finance/Resources	As set out above		
Risk Implications	As set out above		
Equality and Diversity	Complaint		
Consultation	Not Applicable		
Glossary	Not Applicable		