



## OVERSIGHT BOARD – NHS GREATER GLASGOW AND CLYDE

**Date and time:** 9<sup>th</sup> January 2020, 09:00 – 10:30

**Venue:** Fleming A, Atlantic Quay 5, 150 Broomielaw, Glasgow, G2 8LU

**Attendees:** see Annex A

**Meeting 5 – Minute**

	<b>Welcome, introductions and apologies</b>
1.	Chair welcomed attendees to the fifth meeting of the Oversight Board for NHS Greater Glasgow & Clyde and noted apologies (see Annex A).
2.	<b>Remarks from Cabinet Secretary</b>  The Cabinet Secretary gave an update to the Oversight Board. The Cabinet Secretary noted that escalation of Greater Glasgow and Clyde (GGC) Health Board and the consequent establishment of an Oversight Board required all parties to cooperate to explore and resolve, as quickly as possible, the issues which had given rise to the decision to escalate. The Cabinet Secretary highlighted that stage 4 of the NHS Scotland escalation process involves a leading role for the Scottish Government, through the chairing of the Oversight Board and the work of the Board's sub groups. The Cabinet Secretary further highlighted the continuing and legitimate interest of the Parliament in the issues connected to the escalation and the importance of the Government being able to highlight to the Parliament material progress on those issues. The next occasion to offer the Parliament an update will be a Statement scheduled for 28 January. Throughout her remarks the Cabinet Secretary highlighted the critical importance of developing improvements in practice through the active involvement of the widest range of NHS staff and in involving and communicating with patients and their families.
3.	<b>Update from the Chair</b>  The Chair noted that work continues to complete the team of expert advisers required to assist the review of relevant cases of possible infection connected to QEUH / RHS. The Chair will provide an update to the Board at the next meeting.  Professor Mike Stevens, Emeritus Professor of Paediatric Oncology at the University of Bristol will be in Scotland in January. He will play a critical role in validating and reviewing the case review. The Scottish Government will provide an update of the visit at the next meeting.  <b>ACTION:</b> <ul style="list-style-type: none"><li>• SG to provide update on external support at the next meeting.</li></ul>
4.	<b>Progress and next steps on key issues:</b> <b>a. Infection prevention and control and governance</b> <b>b. Communications and engagement, with a focus on family members</b> <b>c. Technical (buildings and environment) issues</b>

	<p>The <b>IPCG Group</b> met on Monday 6 January. The Sub Group agreed the overarching framework of governance that it wants to explore in detail; the sub group discussed the broad structure of governance, as related to IPC and risk, as presented by NHS GGC; and identified key areas for further exploration at forthcoming meetings. In particular, the sub group will consider the application of national guidance in particular circumstances in the context of GGC and the QEUH campus.</p> <p>The Chair of NHS GGC enquired about the methodology used to review governance and highlighted the ongoing review of the escalation review process at the Scottish Government. The IPCG will consider a work plan and the validation of any governance review progress. This work plan will be returned to the Oversight Board.</p> <p>CW updated on the <b>Communications and Engagement Sub Group</b>. The Group was to meet on the afternoon of 9 January. The Sub Group has revised membership bringing in external expertise in both Communications and Person Centred approach. The Group will undertake a review of previously used policies and procedures around communication. The Sub Group will also consider the revised GGC website content, this website will be live as soon as possible.</p> <p>AM provided an update on the establishment of the <b>Technical Sub Group</b>. AM and TS to discuss together to establish detailed outcomes of the group whilst maintaining clarity on what the manageable deliverables will be. AM to provide an update in advance of the next Oversight Board.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• IPCG Group to consider the need to ensure validation in measuring the governance around infection prevention and control.</li> <li>• AM to provide an update on the Technical Sub Group in advance of the next Oversight Board.</li> </ul>
5.	<p><b>Update from Angela O'Neill and Marion Bain</b></p> <p>MB provided an update on the role is to undertake in NHS GGC. The Chairman of NHS GGC highlighted that another strand of this work should be the work with whistle-blowers with regards to Infection Prevention and Control. MB to consider how to engage the whistle-blowers in the work with regards to Infection Prevention and Control, with the aim of facilitating the sharing of any concerns within business as usual systems in GGC.</p> <p>AO updated on the Boards infection rates including there has been no positive gram- negative bacterium for the last 55 days. This also included significant enhanced monthly testing and supervision with regards to weekly walk-around of a multidisciplinary team.</p> <p>AO highlighted the improvements made to increase the intensive person centred approach which has included the introduction of parent sessions helping families to engage further with the clinicians involved in their treatment. The Scottish Government to consider how these improvement can be highlighted in the</p>

	<p>Statement to Parliament on the 28 January, with the benefit of information and further updates from GGC.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• MB to consider how to engage the whistle-blowers in the work with regards to Infection Prevention and Control.</li> <li>• The Scottish Government to consider how the methods of improvement can be highlighted in the Statement to Parliament on the 28 January.</li> </ul>
	<p><b>Case Review</b></p> <p>MB took the Oversight Board through the Paper. The primary scope of the case review should be:</p> <ul style="list-style-type: none"> <li>• haemato-oncology paediatric patients who had a gram negative blood stream infection, in Wards 2A/2B in the Royal Hospital for Children; and,</li> <li>• haemato-oncology paediatric patients who had a gram negative blood stream infection, in Wards 6A/4C in the Queen Elizabeth University Hospital since the hospital opened in 2015.</li> </ul> <p>The review will consider ‘triggers’ that appear before harm occurs, so that the focus is not simply on where infection has already been identified as the only critical relevant factor.</p>
6.	<p>The Oversight Board agreed with the methodology for the Case Review. The Chief Executive and Marion Bain will engage with clinicians to provide necessary assurance and seek their views as to what could form the basis of the case review. The Communications and Engagement sub-group will consider how the proposed approach to case review would be effectively communicated with the families. The Oversight Board also agreed that external validation of the process will be sought throughout the methodology and reporting.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• JG and MB to engage with clinicians to provide reassurances around the Case Review</li> <li>• The Communications and Engagement sub-group will consider how the case review would be effectively communicated with the families.</li> <li>• The Scottish Government to consider the means for external validation and will update the Oversight Board at the next meeting.</li> </ul>
7.	<p><b>Minutes</b></p> <p>CW queried the minute on the point around information governance and Scottish Government liaising with HIS. The Scottish Government to provide an update in advance of the next Oversight Board.</p> <p>CW informed the action around staff communications was now complete. The Secretariat will close this action on the action tracker.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• The Scottish Government to update on the point raised by CW on information governance in advance of the next Oversight Board.</li> </ul>

	<ul style="list-style-type: none"> <li>• Secretariat to close action on staff communications</li> </ul>
8.	<p><b>Matters Arising</b></p> <p>NHS GGC raised concerns around the process of press lines clearance and the reputational impact this has on the Board. The Scottish Government to consider reviewing this process and will feedback to the Health Board.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• The Scottish Government to consider the process around media line clearance.</li> </ul>
9.	<p><b>Terms of Reference</b></p> <p>The Oversight Board confirmed they were content with the Terms of Reference subject to the secretariat updating the date of which NHS GGC received the letter of escalation, adding the amendment to attendance from DM, including that JB and JG to receive a copy of minutes; and an addition to the purpose around the learning for Health Boards across NHS Scotland.</p> <p>The Terms of Reference will be signed off by the Director General for Health and Social Care. The secretariat to share Terms of Reference with JB to allow for circulation to the wider Board of NHS GGC.</p> <p>The Scottish Government to consider the publication of minutes.</p> <p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• Terms of Reference to be submitted to DG for final sign off</li> <li>• The Scottish Government to share Terms of Reference to allow circulation with Board of NHS GGC</li> <li>• The Scottish Government to consider publication of minutes of Oversight Board.</li> </ul>
10.	<p><b>AOB</b></p> <p>The Oversight Board will next meet on 23 January 2020.</p>

## Annex A: List of Attendees

Fiona McQueen	Chief Nursing Officer, CNOD, Scottish Government
Hazel Borland	Executive Director of Nursing, Midwifery and Allied Health Professionals & Healthcare Associated Infection Executive Lead, NHS Ayrshire and Arran
Marion Bain	Director of Infection Prevention and Control, NHS GGC
Laura Imrie	Lead Consultant for Healthcare Associated Infection (HAI), Antimicrobial Resistance and Infection Prevention and Control, HPS
Sandra Aitkenhead	CNOD, Scottish Government (secondee)
Craig White	Divisional Clinical Lead, Healthcare Quality and Improvement Directorate
Lesley Shepherd	Professional Advisor, CNOD, Scottish Government
Andrew Murray	Medical Director, NHS Forth Valley
Alan Morrison	DFCGV, Scottish Government
Greig Chalmers	Interim Deputy Director, CNOD, Scottish Government
Calum Henderson (secretariat)	CNOD, Scottish Government
<b>In attendance</b>	
John Brown	Chairman, NHS GGC
Jane Grant	Chief Executive, NHS GGC
Tom Steele	Director of Estates and Facilities, NHS GGC
Dorothy McErlean	APF Chair Employee Director, NHS GGC
Audrey Thompson	ACF Chair Lead Pharmacist Prescribing Services, NHS GGC
Mags McGuire	Executive Nurse Director, NHS GGC
Jonathon Best	Chief Operating Officer, NHS GGC
Angela O'Neill	Deputy Nurse Director, NHS GGC

### Apologies:

Keith Morris - HAI/AMR Professional Medical Advisor, CNOD, Scottish Government

John Cuddihy – Family Representative

Irene Barkby - Executive Director of Nurses, Midwives and Allied Health Professionals & HAI Exec Lead, NHS Lanarkshire

