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| Board Meeting: | 14 February 2019 | GJF RGB WITHOUT STRAPLINE |
| Subject: | Clinical Governance Committee update – 29 January 2019 |
| Recommendation: | Board members are asked to:  |  |  | | --- | --- | | Discuss and Note | X | | Discuss and Approve |  | | Note for Information only |  | | |

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## 1 Background

The following key points were agreed at the meeting and have been split into the three high level quality ambitions of person centred, safe, and effective.

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| **Person Centred** |
| **Mutually beneficial partnerships between patients, their families and those delivering healthcare services which respect individual needs and values and which demonstrate compassion, continuity, clear communication and shared decision-making.** |
| The Feedback Report was received and reviewed. It was noted as an area of Board good practice, that this is scrutinised by both the Clinical Governance Committee and the Person Centred Committee. |

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| **Safe** |
| **There will be no avoidable injury or harm to people from healthcare they receive, and an appropriate, clean and safe environment will be provided for the delivery of healthcare services at all times.** |
| The Surgical Services and Regional and National Medicine divisional reports were received. Learning has been gained from the reported Significant Adverse Events and these have now been closed. No significant harm has resulted from patient falls and these incidents have been investigated and closed within appropriate timescales. The occurrence of pressure ulcers continues to reduce. |

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| **Effective** |
| **The most appropriate treatments, interventions, support and services will be provided at the right time to everyone who will benefit, and wasteful or harmful variation will be eradicated.** |
| The November HAIRT was discussed. The increase in Hand Hygiene compliance for medical staff was noted. Surgical Site Infections (SSI) are within control limits and the group will liaise with other Scottish Cardiac Centres to discuss SSI rates and ensure continued learning and best practice.  Duty of Candour continues to be reviewed in line with legislation. The six-monthly monthly summary review will now be supplemented by quarterly reports to the cross-divisional teams. This will continue to list all events considered for formal reporting under the Act as well as all incidents actually reported. An Interim report was discussed and progress with implementation noted. |

The next meeting is scheduled for: Tuesday 16 April 2019.

**Mark MacGregor**

**Chair, Clinical Governance Committee**

**30 January 2019**