

**Stephen Brown (Chief Officer)**

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Agenda Item: 9

## **Integration Joint Board**

**Date of Meeting: 4 September 2024.**

**Subject: Joint Clinical and Care Governance Committee – Workplan.**

### **1. Purpose**

1.1. To present the Joint Clinical and Care Governance Committee (JCCGC)'s Workplan for Members' approval.

### **2. Recommendations**

The Integration Joint Board is invited to note:

2.1. That the Orkney Integration Joint Board (IJB) is required to have a Clinical and Care Governance Committee which provides the Orkney IJB with assurance that robust clinical and care governance controls and management systems are in place and are effective for the functions that NHS Orkney and Orkney Islands Council have delegated to the Orkney IJB.

2.2. That, on 8 February 2024, the JCCGC approved the revised Terms of Reference subject to approval by the Orkney IJB and the Board of NHS Orkney.

2.3. That section 11 of the Terms of Reference states 'that the Joint Clinical and Care Governance Committee should annually and within three months of the start of the financial year provide a work plan detailing the work to be taken forward by the Joint Clinical and Care Governance Committee. This will be used to set agendas and monitor progress throughout the year'.

#### **It is recommended:**

2.4. That, the JCCGC Workplan for 2024/25, attached as Appendix 2 to this report, be approved.

### 3. Background

3.1. Following the establishment of Orkney’s IJB in April 2016, the Joint Clinical and Care Governance Committee was established to provide both the Orkney IJB and the Board of NHS Orkney with assurance regarding clinical and care systems of control and governance for the services for which they are responsible.

3.2. A review of the Terms of Reference of this original Clinical and Care Governance Committee took place in early 2021, taking account of the Scottish Government’s [Clinical and Care Governance Framework Guidance, 2015](#). This sets out the key elements and principles to be reflected in local clinical and care governance of integrated health and social care arrangements.

### 4. Amended Workplan

4.1. Section 7 of the Terms of Reference of the JCCGC states that ‘A rolling work plan will be developed and maintained which will be reviewed and approved annually. The approved work plan will be submitted to NHS Orkney’s Audit and Risk Committee and the Integration Joint Board’.

4.2. The Work Plan, attached as Appendix 1, to this report, details the business cycle for 2024/25.

### 5. Contribution to quality

Please indicate which of the Orkney Community Plan 2021 to 2023 visions are supported in this report adding Yes or No to the relevant area(s):

<b>Resilience:</b> To support and promote our strong communities.	Yes.
<b>Enterprise:</b> To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
<b>Equality:</b> To encourage services to provide equal opportunities for everyone.	Yes.
<b>Fairness:</b> To make sure socio-economic and social factors are balanced.	Yes.
<b>Innovation:</b> To overcome issues more effectively through partnership working.	Yes.
<b>Leadership:</b> To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	Yes.
<b>Sustainability:</b> To make sure economic and environmental factors are balanced.	Yes.

### 6. Resource and financial implications

6.1. There are no resource or financial implications arising directly from this report.

## 7. Risk and equality implications

7.1. The main risk is that failure to approve the revised Work Plan will result in less effective clinical and care governance scrutiny and assurance that robust clinical governance controls and management systems are in place.

## 8. Direction required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.

## 9. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	Yes.
Orkney Islands Council.	No.

## 10. Authors and contact information

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10.2. Rona Gold (Chair), Joint Clinical and Care Governance Committee. Email: [rona.gold@nhs.scot](mailto:rona.gold@nhs.scot), telephone: 01856888000.

## 11. Supporting documents

11.1. Appendix 1: Workplan 2024/25.

## Joint Clinical and Care Governance Committee

### 1 Business Cycle for 2024/25

Meeting	Items of Business	Lead Officer
April 2024	Committee Annual Report	Chair
	Mental Health Assurance Report – 6 monthly	Chief Officer
	Whistleblowing – Performance against Key Performance Indicators (Q4)	Chief Executive
	Healthcare Assurance and Governance Quality Improvement Framework (HAGQIF)	Medical Director
	Audiology Action Plan Report	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
	Surveillance – Colonoscopy Report	Medical Director
June 2024	Duty of Candour Annual Report	Medical Director
	Infection Control Annual Report	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
	Urgent and Unscheduled Care Improvement Plan (relates to risk on system capacity) (annually)	Director of Nursing, Midwifery, AHPs and Chief Officer Acute / Chief Officer
	Inpatients Improvement Plan	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
	Health Complaints Performance Annual Report	Medical Director
	UNICEF Baby Friendly Standards – Gold Accreditation (annual)	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
	Social Work and Social Care Service Annual User Experience Report	Chief Officer
	Whistleblowing – Performance against Key Performance Indicators (Q1)	Chief Executive

## Joint Clinical and Care Governance Committee

	Report on Allied Health Professional/non-consultant services	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
	The Best Start – 5 Year Plan (annual)	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
October 2024	Mental Health Assurance Report – 6 monthly	Chief Officer
	Inpatients Improvement Plan - 6 monthly	Director of Nursing, Midwifery, AHPs and Chief Officer Acute
	Winter Planning	Planning Performance and Risk Manager
	Whistleblowing – Performance against Key Performance Indicators (Q2)	Chief Executive
	Chief Social Work Officer Annual Report	Chief Social Work Officer
December 2024	Approval of Core documentation amendments: <ul style="list-style-type: none"> <li>• Terms of Reference</li> <li>• Business Cycle / Work Plan</li> </ul>	Chair
	Annual Report on Learning from Suicide Reviews	Chief Officer
	Children's Services Assurance Report	Chief Officer / Medical Director
	Primary Care Improvement Plan Annual Report	Chief Officer
	Glaucoma update report	Chief Officer
February 2025	Whistleblowing – Performance against Key Performance Indicators (Q3)	Chief Executive

## 2 Work Plan for 2024/25

### 2.1 Every Meeting

At each meeting of the Committee, the following business shall be transacted (agenda headings in bold):

# Joint Clinical and Care Governance Committee

- Apologies for Absence
- Declarations of Interest
- Minutes of the previous meeting for approval
- Matters Arising
- Action Log

## **Risk and Assurance**

- Corporate Risks Aligned to the Clinical and Care Governance Committee

## **Clinical Quality and Safety**

- Regional Clinical Services Update Report
- Clinical Governance Chairs Assurance Report and minutes from meetings
- Clinical Strategy delivery update
- Patient Experience, Quality and Safety report
- Learning from Adverse Events
- Infection Prevention and Control Committee Chairs Assurance Report and minutes from meetings
- Social Work and Social Care Governance Board Chairs Assurance Report and minutes from meetings

## **Medicines Management**

- Area Drugs and Therapeutics Committee Chair's Assurance report and minutes from meetings

## **Person Centre Care**

- Health Complaints Performance Report
- Social Work and Social Care Service Users Experience Report

## **Population Health**

- Health inequalities updates

## **Organisational Performance**

- Integrated Performance Report (Safety and Quality)
- IJB Commissioned Services – update report

## **AOCB**

**Agree items to be included in the Chairs Assurance report brought to board or Governance Committees Attention**

## **2.2 Ad Hoc Business**

- Governance of Service Level Agreements
- Reviewing Healthcare Improvement Scotland reports
- Reviewing significant reports and reviews from external bodies
- High level reporting on significant service changes which have patient, service user implications

## Joint Clinical and Care Governance Committee

- Approving changes to the operational arrangements for sub groups that feed into the committee

### 2.3 Annual Development Sessions

#### October

- Review of Terms of Reference
- Review the business cycle
- Review the nature, format and frequency of reporting to ensure it is effective

#### March

- Review the effectiveness of committee process (including Action Plan, self-assessment process, minutes and administration arrangements)
- Consider the successes of the Committee and any concerns as part of the annual assurance report
- Agree development plan for future

*Updated  
Annual Development Session Review  
Committee Approved  
NHS Orkney Board Approved  
IJB Board Approved  
Next Formal Review*