

# NHS Ayrshire & Arran



**Meeting:** Ayrshire and Arran NHS Board

**Meeting date:** Tuesday 21 May 2024

**Title:** Healthcare Governance Annual Report 2023-24

**Responsible Director:** Jennifer Wilson, Nurse Director

**Report Author:** Laura Parker, Nurse Directorate Business Manager  
Angela O'Mahony, Committee Secretary

## 1. Purpose

This is presented to the Board for:

- Awareness

This paper relates to:

- Government policy/directive
- Local policy

This aligns to the following NHSScotland quality ambition(s):

- Safe, Effective and Person Centred

## 2. Report summary

### 2.1 Situation

The Healthcare Governance Committee provides an assurance report annually which sets out key achievements through the year in discharging its remit.

The approved Healthcare Governance Committee report for 2023-24 is presented together with the annual self-assessment checklist for Board Members, to provide an update on the work of Committee and assurance that the Committee has delivered its remit.

Following recommendations from Internal Audit, Standing Committees of the Board are required to provide an assurance mapping report and assurance of reporting to NHS Ayrshire & Arran Board in addition to the above, and these are duly included in this report.

### 2.2 Background

Each NHS Board Governance Committee is required to provide an annual report to Committee and the Board to provide assurance that the Committee has discharged its role as set out in the agreed Terms of Reference.

The Committees' approved Terms of Reference and information on the composition and frequency of the Committees are considered to be an integral part of the Board Standing Orders.

The Governance Committee annual reports are part of the overall assurance mechanism for the NHS Board and are considered by the Audit Committee in order to provide assurance in support of the Board's annual governance statement that the committees have fulfilled their remit.

Further to recommendations by internal audit, committees are required to complete a yearly self-assessment checklist, assurance mapping and NHS Board reporting information in addition to the annual report, to further support the review of committee effectiveness.

## **2.3 Assessment**

The Healthcare Governance assurance report details the membership of the Healthcare Governance Committee and provides information on the activities of the Committee in the past year.

### **Key Messages**

- Overall, NHS Ayrshire & Arran maintains a high level of compliance in Healthcare Governance and good progress has been made in maintaining this during a period of system pressures and a challenging fiscal position. A new Director of Clinical and Care Governance was appointed during this reporting year and has begun to restructure and develop the Clinical and Care Governance Unit, with a view to creating a robust quality management system.
- There were areas of concern this year in relation to our Complaint Handling performance. The Committee recognised the extensive work being undertaken by the Complaints team and those staff engaged in complaint handling, and were assured by the focused improvement work that was undertaken which ultimately resulted in an improved position by the end of 2023/24.

### **2.3.1 Quality/patient care**

Ensuring good governance in monitoring delivery of programmes across Ayrshire and Arran supports the effective delivery of quality, patient-centred services.

### **2.3.2 Workforce**

This assurance report has no workforce implications for the organisation and enhances joint working across the NHS Board and Ayrshire Integration Joint Boards.

### **2.3.3 Financial**

There are no financial implications.

### **2.3.4 Risk assessment/management**

The annual report process ensures an assessment of committee business against the agreed Terms of Reference. This mitigates against the risk of any gaps in assurance and supports the NHS Board's annual assurance statement.

### **2.3.5 Equality and diversity, including health inequalities**

An impact assessment has not been completed because this is an assurance reporting paper.

### **2.3.6 Other impacts**

- Best value - Reporting ensures sound governance and accountability.
- Compliance with Corporate Objectives - Providing this assurance report supports compliance with objectives on quality, safety, improved patient experience and a learning organisation

### **2.3.7 Communication, involvement, engagement and consultation**

This paper requires no engagement with external stakeholders.

### **2.3.8 Route to the meeting**

The paper was presented to the Healthcare Governance Committee on 22 April 2024 and approved by members.

## **2.4 Recommendation**

For awareness. Board Members are asked to note the progress of the Healthcare Governance Committee in 2023-24 and to take assurance from this report that the Committee has delivered its remit.

## **3. List of appendices**

- Appendix 1 – Healthcare Governance Committee Annual Report 2023-24:
  - Appendix 1 – Healthcare Governance Committee self-assessment checklist and Annual Report 2023-24
  - Appendix 2 – Assurance Mapping (Review of papers submitted against the Healthcare Governance Committee Remit 2023)
  - Appendix 3 – Healthcare Governance Committee Reporting to NHS Ayrshire & Arran Board 2023

## **NHS Ayrshire & Arran Healthcare Governance Committee**

### **Annual Report for 2023/24**

#### **1. Summary**

- 1.1 The remit of the Healthcare Governance Committee is to provide assurance to the NHS Board that systems and processes are in place to monitor healthcare governance in line with the Board's statutory duty for quality of care.

The main topics covered during the 2023-24 reporting period were categorised under Patient Experience, Patient Safety, Quality Improvement, Corporate Governance, Annual Reports, Health and Social Care Partnership (HSCP)/Integrated Joint Board (IJB) Annual Clinical Care Governance Reports, Audit Reports, Scrutiny Reports, SPSO and Risk.

#### **1.2 Key Messages**

- Overall, NHS Ayrshire & Arran maintains a high level of compliance in Healthcare Governance and good progress has been made in maintaining this during a period of system pressures and a challenging fiscal position. A new Director of Clinical and Care Governance was appointed during this reporting year and has begun to restructure and develop the Clinical and Care Governance Unit, with a view to creating a robust quality management system.
- There were areas of concern this year in relation to our Complaint Handling performance. The Committee recognised the extensive work being undertaken by the Complaints team and those staff engaged in complaint handling, and were assured by the focused improvement work that was undertaken which ultimately resulted in an improved position by the end of 2023/24.

#### **2. Remit**

- 2.1 The Committee's Terms of Reference are detailed at **Appendix 1** to this report.

#### **3. Membership**

- 3.1 The Committee's membership during the reporting period was as follows:

Ms Linda Semple, Non-Executive Board Member (Chair)

Mr Adrian Carragher, Non-Executive Board Member (Vice Chair – left 17 August 2023)

Cllr Marie Burns, Non-Executive Board Member

Ms Sheila Cowan, Non-Executive Board Member (left on 1 May 2023)

Miss Christie Fisher, Non-Executive Board Member (joined 1 May 2023 and left NHSAA 29 February 2024)  
 Mrs Jean Ford, Non-Executive Board Member  
 Dr Tom Hopkins, Non-Executive Board Member (joined 18 August 2023)  
 Mr Neil McAleese, Non-Executive Board Member (joined 1 May 2023)

**Ex-officio Members/Board Advisors:**

Mrs Lesley Bowie, Board Chair  
 Ms Claire Burden, Chief Executive  
 Ms Jennifer Wilson, Nurse Director  
 Dr Crawford McGuffie, Medical Director and Deputy Chief Executive  
 Mrs Joanne Edwards, Director for Acute Services (on secondment from 20 November 2023)  
 Mrs Lynne McNiven, Director of Public Health

**4. Meeting**

4.1 The Committee met on seven occasions between 1 April 2023 and 31 March 2024.

4.2 The NHS Board has previously agreed that attendance at Committee meetings should be recorded in the relevant Annual Report. The attendance record of each member is shown below (Y indicates attended).

Member	Dates						
	24.04.23	05.06.23	31.07.23	11.09.23	06.11.23	15.01.24	04.03.24
Linda Semple	Y	Y	Y	Y		Y	Y
Adrian Carragher – left 17.08.23	Y	Y					
Cllr Marie Burns	Y	Y		Y	Y	Y	Y
Sheila Cowan – left 01.05.23	Y						
Christie Fisher – joined 01.05.23, left 29.02.24	Y	Y	Y		Y		
Jean Ford	Y	Y	Y	Y	Y	Y	
Dr Tom Hopkins – joined 18.08.23					Y	Y	Y
Neil McAleese – joined 01.05.23		Y	Y	Y	Y	Y	Y

## 5. Committee Activities

- 5.1 The Committee has ensured that the structure and format of the agenda during 2023-24 supported the key elements of healthcare governance and the efficient conduct of business.

The Committee also regularly reviewed corporate level healthcare governance risks and identified crosscutting healthcare governance issues to be tabled at the Integrated Governance Committee.

To support ongoing scrutiny, the Committee received the minutes of the following governance groups on a recurring basis:

- Acute Services Clinical Governance Group
- Area Drug and Therapeutics Committee
- Paediatric Clinical Governance Group
- Prevention and Control of Infection Committee
- Primary and Urgent Care Clinical Governance Group
- Research, Development and Innovation Committee

- 5.2 The main purpose of the July meeting was focussed on scrutiny of the Annual Reports for:

- Older People in Acute Hospital Annual Report
- Accountable Officer for Controlled Drugs Annual Report
- Area Drug and Therapeutics Committee Annual Report
- Duty of Candour Annual Report
- Gender Based Violence Annual Report
- Hospital Standardised Morality Ratio Annual Report
- Infection Prevention and Control Team Annual Report
- Prevention and Control of Infection Committee Annual Report
- Libraries Annual Report
- Mental Welfare Commission Annual Assurance Report
- Organ Donation Annual Report
- Patient Experience Annual Report
- Patient Experience - Complainant Satisfaction Annual Report
- Patient Stories Annual Report
- Public Protection Annual Report
- Scottish National Blood Transfusion Service Transfusion Team Annual Report
- Unplanned Activity (UNPAC) Acute and Mental Health Services Annual Report
- Abdominal Aortic Aneurysm Screening Annual Report
- Bowel Screening Annual Report
- Breast Screening Annual Report
- Cervical Screening Annual Report
- Diabetic Eye Screening Annual Report

Additionally, the following Annual Reports came to the Committee out with the July meeting:

- Scottish Public Services Ombudsman (SPSO) Annual Assurance Report

- Ethics Advice and Support Group Annual Update
- Acute Clinical Governance Annual Report
- Area Nutritional Steering Group Annual Report
- East Ayrshire Health and Social Care Partnership Clinical Governance Annual Report
- South Ayrshire Health and Social Care Partnership (SA HSCP) Annual Clinical Care Governance Report
- Pregnancy and New-born Screening Annual Report
- North Ayrshire Health and Social Care Partnership Clinical Governance Annual Report
- Adverse Event Review Group (AERG) Annual Assurance Report
- Child Death Overview Process (CDOP) Annual Report
- Screening for Prison Population Annual Report
- Scottish Public Services Ombudsman (SPSO) Closure Report
- Mental Welfare Commission Young People Monitoring Report

5.3 Meetings have considered a wide range of information in respect of Healthcare Associated Infection and the Committee were provided with regular reports on the trends, themes and quality improvements arising from feedback, complaints, adverse events and litigation, and recommendations from the Scottish Public Services Ombudsman.

5.4 The Committee has been receiving regular Quality and Safety updates during 2023-24, including in relation to Excellence in Care and SPSP programmes. This included the improvement work being taken forward in acute, maternity, neonatal, paediatric and mental health services.

5.6 The committee receives assurance on progress against recommended actions following inspections/visits and/or from various external reports/reviews, or from Scottish Government Directives.

During the course of 2023-24, the committee received bi-annual assurance reports on progress against the Health and Safety Executive recommendations in relation to Food, Fluid and Nutrition, updates on progress against the implementation of the improvement action plans following the Healthcare Improvement Scotland visits to University Hospital Crosshouse in May 2022 and July 2023, an update on progress against actions from the Dementia Standards Improvement Action Plan, bi-annual assurance reports on benchmarking against the National Public Protection accountability and assurance framework, and updates against the action plan in response to recommendations from the SCR following the tragic death of an infant, Child P, in 2017, including assurance that the Short Life Working Group has monitored progress of the action plan to completion in 2023-24.

## 6. **Priorities for 2024/25**

6.1 Priorities for 2024/25 remain in line with those from 2023/24.

A key priority for the Committee through 2024-25 will be to support ongoing governance requirements in the context of continued system pressures and a challenging fiscal position.

- 6.2 The Committee will continue to focus on receiving evidence of organisational learning and demonstrable improvements in respect of themes and issues that have featured across the various reports presented in 2023-24. This will include a focus on assurance from Directorates and Partnerships in respect of the effective implementation of learning within services and across teams.
- 6.3 There is a requirement to ensure that systems are in place to understand the key contributory factors of key quality challenges arising from assurance processes and the Committee ensures plans are developed and implemented to address key strategic contributory factors.
- 6.4 There is a requirement to ensure that national improvement priorities/programmes are delivered locally, providing the Committee with assurance of sustainable improvement at scale.
- 6.5 There continues to be a requirement for the Committee to drive the reform of services to achieve high quality integrated health and social care services that are sustainable for the future and in line with our Caring for Ayrshire ambition.
- 6.6 In line with the Ayrshire and Arran Health and Care Governance Framework, the Committee will receive an annual report and minutes from the three IJB Health and Care Governance Committees for governance and assurance purposes. Of note, the 2023/24 reporting period saw a review of the Annual Report format to provide consistency of reporting across the three Health and Social Care Partnerships.
- 6.7 In 2024-25, the committee will oversee the establishment of the new Clinical and Care Governance Unit and Clinical and Care Governance Framework, with the development of a robust Quality Management System, under the leadership of the new Clinical and Care Governance Director.

## **7. Chair's Comments**

- 7.1 As in previous iterations of this report, I would like to offer my thanks to members, the secretariat and those staff members who have worked on the Committee's behalf, for their continued commitment to the work of the Committee. In particular, the unsung work of those who organise, plan and report on the Committee's meetings as well as those staff who author papers is invaluable.

I would like to thank Non-Executive Directors Sheila Cowan and Christie Fisher, standing down from the committee, for their contribution, and Adrian Carragher for his contribution both as member and Vice Chair of Healthcare Governance Committee in 2023-24.

I am pleased to extend a welcome to Mr Neil McAleese and Dr Tom Hopkins who joined the Committee as Non-Executive members on 1<sup>st</sup> May and 18<sup>th</sup> August 2023 respectively.

- 7.2 The Committee has continued to review the systems in place to monitor all aspects of healthcare governance and quality of care and to be assured that issues are acted upon and escalated appropriately. The Committee has continued to be reassured by reports that showed the robustness of the organisation's



process from identifying an issue, instituting improvements, monitoring impact and the flows through governance processes via the HGC to the NHS Board, ensuring that the latter can provide appropriate, timely and comprehensive assurance as required. The Committee was provided with robust evidence of this process by receiving 'deep dives' into our Complaints Handling Processes and noting their improvement. In addition, it heard further information about improvements to the management of Mental Health Services' Serious Adverse Event Reporting. The committee has taken a particular interest in the health inequalities evident in areas of our system and therefore also received requested reports into prisoner healthcare, vaccinations and screening services.

- 7.3 The Committee was again keen to see that its activities aligned with external and internal drivers. In particular, the committee ensured it was compliant with the 'Framework for Good Governance' while also having a view to all other relevant policy drivers.
- 7.4 I should like to express the Committee's thanks once again to operational staff. In the midst of some of the most challenging times that the NHS and our partners have faced in relation to staffing, resources, and demand, they have been unstinting in their commitment to providing the highest quality, safest and most effective care for those we serve and, even under these conditions, to providing the evidence of these efforts, which is as important as it allows the NHS Board to see robust governance.

Given that the pressures on our staff and services are unlikely to abate any time soon, yet the requirement for scrutiny of quality and safety will be as important as ever, the Committee will strive to function in as timely and effective a way as possible, working with our Executive Leads and their teams during the next year.

Linda Semple  
Chair – Healthcare Governance Committee  
10/04/2024

# Assurance Mapping (Review of papers submitted against the Healthcare Governance Committee Remit 2023)

Remit:

To provide assurance to the NHS Board that systems and procedures are in place to monitor healthcare governance in line with the Board's statutory duty for quality of care.

Duties as noted in the Terms of Reference	24 April 2023	5 June 2023	31 July 2023	11 September 2023	6 November 2023	15 January 2024	4 March 2024
<p>The specific responsibilities of Healthcare Governance Committee are to:</p> <p>Consider and scrutinise the health and care system's performance in relation to its statutory duty for quality of care, screening and immunisation programmes, as well as ensure appropriate remedial action takes place where required:</p>							
Infection control (inc Healthcare Associated Infection reports)	✓ <ul style="list-style-type: none"> <li>• IPC assurance + accountability framework</li> </ul>	✓ <ul style="list-style-type: none"> <li>• IPC improvement plan</li> <li>• IPCT work programme</li> </ul>	✓	✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>• IPCT</li> <li>• PCOIC</li> </ul>	✓	✓ <ul style="list-style-type: none"> <li>• Non-respiratory outbreaks and incidents</li> <li>• Technical Services incident report</li> <li>• Infection Prevention and Control risk assessment</li> <li>• ToR-Respiratory Virus Outbreak Oversight Group</li> </ul>	✓
Blood transfusion/organ transplant				✓			
Patient experience inc complaints + themed reports	✓ <ul style="list-style-type: none"> <li>• themed report</li> </ul>	✓ <ul style="list-style-type: none"> <li>• Q4 report</li> </ul>	✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>• Patient Experience</li> <li>• Complainant satisfaction</li> <li>• Patient Stories</li> <li>• Acute services complaint handling improvement plan</li> </ul>	✓ <ul style="list-style-type: none"> <li>• Q1 report</li> </ul>	✓ <ul style="list-style-type: none"> <li>• themed report</li> </ul>	✓ <ul style="list-style-type: none"> <li>• Q2 report</li> <li>• Acute services complaint handling improvement plan update</li> </ul>	✓ <ul style="list-style-type: none"> <li>• Q3 report</li> <li>• themed report</li> </ul>
Adverse Events		✓		✓	✓		✓ <ul style="list-style-type: none"> <li>• SAER report Q3</li> </ul>

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Duties as noted in the Terms of Reference	24 April 2023	5 June 2023	31 July 2023	11 September 2023	6 November 2023	15 January 2024	4 March 2024
		<ul style="list-style-type: none"> <li>SAER report Q4</li> </ul>		<ul style="list-style-type: none"> <li>SAER report Q1</li> <li>SAER Mental Health</li> <li>UNPAC policy review</li> </ul>	<ul style="list-style-type: none"> <li>SAER report Q2</li> </ul> <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>AERG</li> </ul>		<ul style="list-style-type: none"> <li>Management of adverse event policy review</li> </ul>
Quality and Safety report (combining SPSP+Excellence in Care (EiC))	✓ <ul style="list-style-type: none"> <li>Acute</li> </ul>	✓ <ul style="list-style-type: none"> <li>Paediatrics</li> </ul>		✓ <ul style="list-style-type: none"> <li>Mental Health</li> </ul>	✓ <ul style="list-style-type: none"> <li>Neonatal</li> </ul>	✓ <ul style="list-style-type: none"> <li>Acute</li> </ul>	
Care home governance (added due to Covid19 – moved to six monthly reporting 09/01/2023)		✓				✓	
Quality Improvement	✓ <ul style="list-style-type: none"> <li>Food, fluid and nutrition HSE action plan update</li> </ul>	✓ <ul style="list-style-type: none"> <li>Quality Strategy</li> <li>Quality and Safety walkrounds</li> </ul>		✓ <ul style="list-style-type: none"> <li>Food, fluid and nutrition HSE action plan update</li> </ul>	✓ <ul style="list-style-type: none"> <li>Acute services quality and safety framework</li> </ul>	✓ <ul style="list-style-type: none"> <li>Maternity strategy</li> <li>Quality strategy</li> <li>Quality and safety walkrounds</li> </ul>	✓ <ul style="list-style-type: none"> <li>Food, fluid and nutrition HSE action plan update</li> </ul>
Public Protection (PP) (from 01.04.23 - includes Child Protection, Adult Support and Protection + MARAC)		✓ <ul style="list-style-type: none"> <li>PP Accountability and Assurance Framework update</li> </ul>	✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>pp</li> </ul>			✓ <ul style="list-style-type: none"> <li>PP Accountability and Assurance Framework final</li> </ul>	
Gender based violence (GBV)			✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>GBV</li> </ul>				
MWC reports/performance			✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>MWC visits</li> </ul>				✓ <b>Programme/assurance Annual Report:</b>

# Assurance Mapping (Review of papers submitted against the Healthcare Governance Committee Remit 2023)

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To provide assurance to the NHS Board that systems and procedures are in place to monitor healthcare governance in line with the Board's statutory duty for quality of care.

Duties as noted in the Terms of Reference	24 April 2023	5 June 2023	31 July 2023	11 September 2023	6 November 2023	15 January 2024	4 March 2024
							<ul style="list-style-type: none"> <li>• Young people monitoring report 2022-23</li> </ul>
Health and care in HSCPs		✓ <ul style="list-style-type: none"> <li>• South Ayrshire – Adult Joint Inspection report</li> </ul>		✓ <ul style="list-style-type: none"> <li>• East Ayrshire</li> <li>• South Ayrshire</li> </ul>	✓ <ul style="list-style-type: none"> <li>• North Ayrshire</li> </ul>		
Public Health (inc annual screening programmes)		✓ <ul style="list-style-type: none"> <li>• Cancer prevention in NHSAA</li> <li>• National Cervical Exclusion audit</li> <li>• DES Screening key performance indicators</li> </ul>	✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>• AAA screening</li> <li>• Bowel screening</li> <li>• Breast screening</li> <li>• Cervical screening</li> <li>• Diabetic eye screening</li> </ul>	✓ <ul style="list-style-type: none"> <li>• COVID and Flu vaccination programme</li> </ul>	✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>• Winter Vaccinations programme 2023-24</li> <li>• Pregnancy and newborn screening</li> </ul>	✓ <ul style="list-style-type: none"> <li>• Child Death Overview Process (CDOP) annual report 2021-22</li> <li>• Screening for Prison population</li> </ul>	✓ <ul style="list-style-type: none"> <li>• Winter Vaccinations programme 2023-24 update</li> <li>• National Cervical Exclusion audit</li> </ul>
Duty of Candour (DoC)			✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>• DoC</li> </ul>				
(Unplanned Activity (UNPAC))			✓ <b>Programme/assurance Annual Report:</b> <ul style="list-style-type: none"> <li>• Acute and Mental Health UNPAC</li> </ul>				
Hold the relevant staff of NHSAA to account in respect of their performance in relation to the system's duty for quality of care.	✓	✓	✓	✓	✓	✓	✓
Review action taken by lead directors on recommendations made by the Committee or the	✓	✓	✓	✓	✓	✓	✓

# Assurance Mapping (Review of papers submitted against the Healthcare Governance Committee Remit 2023)

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Duties as noted in the Terms of Reference	24 April 2023	5 June 2023	31 July 2023	11 September 2023	6 November 2023	15 January 2024	4 March 2024
NHS Ayrshire & Arran Board on healthcare governance matters.							
Provide assurance to NHSAA Arran Board on the operation of healthcare governance within the health and care system in compliance with relevant national standards, highlighting problems and action being taken where appropriate.	<ul style="list-style-type: none"> <li>Adoption of Recommended Emergency Summary Plan for Emergency Care + Treatment (ReSPECT)</li> <li>Health and Care Governance Framework</li> <li>SIGN guidelines</li> <li>HIS UHC visit May 2022 improvement plan</li> <li>Microbiology Point of Care Testing internal audit report</li> </ul>	<ul style="list-style-type: none"> <li>Review of Standards-dementia care</li> <li>Rape and Sexual Assault (RSA) CMO Taskforce update</li> <li>Child P SCR update</li> <li>SAHSCP adult joint inspection report</li> </ul> <p><b>Programme/assurance Annual Report:</b></p> <ul style="list-style-type: none"> <li>SPSO annual report</li> </ul>	<p><b>Programme/assurance Annual Report:</b></p> <ul style="list-style-type: none"> <li>Accountable Officer for Controlled Drugs</li> <li>ADTC</li> <li>Blood Transfusion</li> <li>Older People in Acute Hospital</li> <li>HSMR</li> <li>Libraries</li> <li>Organ Donation</li> <li>RDI</li> </ul>	<p><b>Programme/assurance Annual Report:</b></p> <ul style="list-style-type: none"> <li>Acute CG</li> <li>Area Nutrition Steering Group</li> </ul>	<ul style="list-style-type: none"> <li>Ayrshire MH Conversation update</li> <li>Community Nursing review</li> <li>Cancer quality performance indicators governance</li> <li>Litigation report</li> <li>SIGN guidelines</li> </ul>	<ul style="list-style-type: none"> <li>Update on adoption of ReSPECT</li> <li>HGC ToR</li> <li>HIS UHA+UHC visit July 2023 improvement plan</li> <li>OPAH assurance report</li> </ul>	<ul style="list-style-type: none"> <li>System pressures update</li> <li>Public protection health service</li> <li>Internal audit – Pharmacy operational performance</li> <li>Internal audit – medical education</li> <li>Strategic Risk Register</li> <li>Microbiology POCT internal audit update on action plan</li> <li>IPC internal audit</li> </ul>
Receive minutes and annual reports from sub-committees established by the HGC in order to provide assurance and accountability.	√	√	√	√	√	√	√
Monitor and review risks falling within its remit.	√	√	√	√	√	√	√

## Healthcare Governance Committee Reporting to NHS A&amp;A Board 2023

Reporting duties	24 April 2023	5 June 2023	31 July 2023 – annual report meeting	11 September 2023	6 November 2023	15 January 2024	4 March 2024
Reporting action to the NHSAA Board	<ul style="list-style-type: none"> <li>To note second Patient experience themed report on Communication.</li> <li>To note Quality and safety report for Acute in context of system challenges and pressures in Acute.</li> <li>HIS visit to UHC in May 2022 and progress with action plan.</li> <li>To approve proposal to adopt ReSPECT</li> <li>To approve HGC annual report 2022-2023.</li> <li>To approve Health and Care Gov Fwork</li> </ul>	<ul style="list-style-type: none"> <li>No report required</li> </ul>	<ul style="list-style-type: none"> <li>To note the breadth of annual reports received and progress made.</li> <li>To note suite of Patient Experience reports.</li> <li>To note detailed report on complaint handling in Acute.</li> <li>To note positive feedback following MWC visits to Ayrshire and Aran.</li> <li>To note Public Health screening reports.</li> <li>To note work to scrutinise HGC strategic risk register resulting in 3 strategic risks being moved to the operational register.</li> </ul>	<ul style="list-style-type: none"> <li>To note antimicrobial prescribing improvement work taking place.</li> <li>FFN HSE visit action plan – to note progress.</li> <li>MH SAER – to receive assurance on progress with these reports</li> <li>Acute CG annual report and EA and SA HSCP annual clinical and care governance reports – to note progress.</li> </ul>	<ul style="list-style-type: none"> <li>To note Ayrshire MH Conversation + new MH strategy update report.</li> <li>To note Quality and Safety report for Neonatal and Pregnancy and Newborn screening annual report.</li> <li>To note update on Winter Vaccinations programme, with further update requested for March 2024.</li> <li>To note update on Community Nursing review progress, key themes identified and improvements put in place.</li> <li>To note Cancer quality performance indicators + exception report for Acute Leukaemia.</li> <li>To note themed report on Patient Experience re waiting times and</li> </ul>	<ul style="list-style-type: none"> <li>To note Patient Experience themed report on Patient Journey.</li> <li>To note update on Maternity Strategy/Best Start</li> <li>To note Acute complaint handling improvement plan and progress made</li> <li>To note work being done to improve update of screen in prison population</li> <li>To note progress in adopting ReSPECT plans.</li> <li>HGC ToR review</li> </ul>	<ul style="list-style-type: none"> <li>To note Patient Experience complaint handling improvement work.</li> <li>IPC internal audit report</li> <li>To note update on Cervical Screening Exclusion audit</li> <li>To note progress with FFN HSE visit action plan</li> <li>To note MWC young people monitoring report</li> <li>To note Winter Vaccinations programme update report</li> <li>To note Patient Experience themed report and improvements made.</li> </ul>

# Healthcare Governance Committee Reporting to NHS A&A Board 2023

					appointments, as well as HCAI report, SIGN guidelines report, Litigation report, NAHSCP clinical and care governance report + suite of risk reports.		
Confirmed that these were brought to the NHSAA Board	Y / <del>N</del>	Not required	Y / <del>N</del>	Y / <del>N</del>	Y / <del>N</del>	Y / <del>N</del>	Y / <del>N</del>