

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

Via Microsoft Office Teams

Members Present:

Rose Bugler	Non Executive Director (Vice Chair)
Georgina Marczak	Non Executive Director (Chair)

In Attendance:

Debbie Bozkurt	Director of Finance & Procurement
Chris Brown	AZETS
Stephanie Hume	AZETS
Gordon Jamieson	Chief Executive
Avril Keen	Director of Human Resources and Workforce Development
Cheryl Martin	Secretariat
Kyle McAulay	Audit Scotland
Gill McCannon	NHS Western Isles Chair
Dana Murray	Non Executive Director / Employee Director
Louise Sullivan	Head of Clinical Governance & Professional Practice
Janice MacKay	Head of Infection Prevention & Control, Decontamination & Cleaning Services

1. WELCOME

Mrs Marczak took the Chair for her first meeting of the Healthcare Governance and Audit Committee via Microsoft Office Teams as the chairperson. She welcomed those in attendance and noted that there was no question and answer sheet being presented asked that if anyone had any questions during the meeting, if they could raise their virtual hands.

Ms Marczak advised that Ms Hume was in attendance to discuss the internal audit reviews and would leave the meeting following these items. Ms Hume left the meeting at 11.15am.

2. APOLOGIES

The following apologies were noted:
Frank McAuley, Medical Director
Uisdean Robertson, Non Executive Director
Ruth Thompson, Interim Nurse Director
Maggie Watts, Director of Public Health

3. MINUTES

3.1 Healthcare Governance and Audit Committee Minutes 16th September 2020

Mr McAulay advised that he was in attendance at this meeting and the minutes will be amended to reflect this.

Decision: With the above amendment the minutes of the meeting of the 16th September 2020 were approved as an accurate record.

NHS Western Isles

Healthcare Governance & Audit Committee

Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

3.2 Matters arising

There were no matters arising from the minutes of 16th September 2020.

3.3 Action points 16th September 2020

The committee discussed the action points as follows:

04.09.2019 8.3 ~ *Adverse Events Report – Adverse Events Development Session*

Mrs Sullivan advised that the Adverse Events Reporting Framework had still to be presented to CMT for final approval. She added that once this has been done she would look to schedule this training session for all non executive directors.

Action: Remain on Action Points List.

16.09.2020 8.1 ~ *CRR Risk 044 – Dalcross Holdings Ltd*

Ms Bozkurt advised that The Department for Transport (DfT) and the Civil Aviation Authority (CAA) have granted an exemption from screening by a Regulated Agent of Shipments for Chemotherapy drugs sent by NHS Highland through Inverness Airport to vulnerable patients in the Western Isles via the daily mail plane. She added that this is subject to review by DfT and CAA at six monthly intervals however, this is working well and there are no issues expected with this service. Ms Bozkurt advised that CMT should be consulted on removing this risk from the Corporate Risk Register and de-escalating to the Pharmacy Risk Register.

Action: Remove.

16.09.2020 9.2 ~ *OPAH Action Plan – DNACPR Documentation*

Mrs Sullivan advised that the Resuscitation Officer did contact the National Team on the DNACPR documentation and they confirmed that completion of this documentation correctly is a National issue. She added that this was to be discussed at the next Health Improvement Scotland's Expert Records Group meeting.

Action: Remove.

16.09.20 9.4 ~ *PFPI Governance Arrangement – Chronic Pain Waiting Lists*

As Dr McAuley was not in attendance this item will be deferred to the February 2021 meeting.

Action: Remain on Action Point List till February 2021 meeting.

16.09.2020 10 ~ *Infection Control – HAIRT Reports*

Mrs Martin confirmed that the outstanding HAIRT reports had been circulated to the committee before the meeting.

Action: Remove.

4. DECLARATION OF INTERESTS

There were no declarations of interests made.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

5. EXTERNAL AUDIT – AUDIT SCOTLAND

5.1 Extension to Audit Appointment

Ms Bozkurt advised that due to Covid-19 the Auditor General for Scotland and the Accounts Commission for Scotland announced on 10th June 2020 an intention to extend the current audit appointments by one year. She added that this has now been confirmed and Audit Scotland will remain the external auditors for NHS Western Isles for 2021/2022.

6. INTERNAL AUDIT – AZETS

6.1 Non Current Assets

Issue: *The committee was asked to note for assurance purposes the Non Current Assets audit report presented by Ms Stephanie Hume from AZETS.*

Discussion: Ms Hume advised that this audit was done every couple of years to ensure that controls are in place and was also done as part of the annual accounts process. She added that there were five improvement actions with one classed as Grade 3, asset verification testing where the risk that the fixed asset register is not reflective of the assets held within the organisation, resulting in the potential misstatement in the accounting records or annual accounts and had recommended that a rolling programme should be created to ensure that all assets are selected over a defined period.

Mrs Marczak queried if there were any recommendations that Ms Bozkurt felt that could not be completed within the timescales. Ms Bozkurt advised that the implementation for the Grade 3 recommendation was March 2021, however, this would be dependent on Covid-19 travelling restrictions. She added that recommendation 3.1 regarding moving the fixed asset register back to the RAM system, due to the issues with the RAM system she had been advised by the External Auditors, Audit Scotland not to use the RAM system but was confident that the recommendation will be completed by the date given.

Ms Hume noted that there were a number of good practices in place and thanked Mrs MacDonald, Principal Accountant and her team who were extremely helpful throughout the review.

Decision: The committee formally noted the audit report.

6.2 OT Stock Control

Issue: *The committee was asked to note for assurance purposes the OT Stock Control audit report presented by Ms Hume.*

Discussion: Ms Hume advised that they were asked by the Nurse Director to carry out a review of the security of the Occupational Therapy departments stock. She added that there were four improvement actions with one classed as Grade 3, stock management where the risk was that stock levels were inappropriately managed as management were unaware of accurate stock levels and locations and that the Community Equipment Service Store Policy should specify the value at which items are considered high value and detail the process for tracking and identifying these assets.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

Mrs Marczak enquired if there was a high number of products that were purchased outwith the national agreement. Ms Hume advised that she did not have an exact number but from discussions with staff it appeared to be quite a large number.

Decision: The report was formally noted.

6.3 NHSWI Waiting Times

Issue: *The committee was asked to note for assurance purposes the NHSWI Waiting Times audit report presented by Ms Hume.*

Discussion: Ms Hume advised that this was a follow up review from external reviews across Scotland's territorial boards in 2011 regarding the monitoring of the twelve week Treatment Time Guarantee (TTG).

Ms Hume advised that the review identified that while, in general, the controls surrounding patient waiting times are operating, NHS Western Isles does not have an up to date approved Access Policy for the Management of Waiting Times, aligned to current legislation and supported by detailed Standard Operating Procedures for the TOPAZ system in place.

Mrs Marczak enquired as to how Covid-19 had impacted on TTG and Mr Jamieson advised that during Covid-19 patients had been classed by priority levels 1 to 4 dependent on their clinical condition rather than time waiting. He added that the number of referrals was still below what was expected but this was due to patients with symptoms not contacting their GPs.

Decision: The committee formally noted the report.

6.4 Progress Report

Issue: *The committee was asked to note for assurance purposes the Progress report presented by Mr Chris Brown, AZETS.*

Discussion: Mr Brown advised that a number of reviews that should have been presented to this meeting have been delayed due to Covid-19 and workforce pressures but they were still expecting to present these to the May 2021 meeting. He added that they were on track to present the five reviews noted in the report to the February meeting and were on track to complete the agreed reviews by the end of the financial year.

Decision: The report was formally noted.

6.5 Draft Internal Audit Plan 2021/2022

Issue: *The committee was asked to note for assurance purposes the Draft Internal Audit Plan presented by Mr Brown.*

Discussion: Mr Brown advised that the plan is presented for discussion and would like to finalise the plan at the May meeting. He added that he understood that flexibility of the plan would be required due to Covid-19 and queried if finalising the first six months would be more acceptable.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

Mr Brown noted that a three year plan had been developed and this should also be reviewed. Ms Bozkurt advised that she will present this plan to the Corporate Management Team for comments and report back to Mr Brown directly.

Ms Bozkurt noted the difficulty in completing some audits electronically and Mr Brown agreed that there were issues validation such as the validation of assets when not on site but staff involved in such audits had been extremely accommodating and helpful.

Mr Jamieson advised that at the outbreak Covid-19 the Pandemic Group made a number of decisions regarding services etc. without going through the governance structure due to the nature of the pandemic. He added that it would be helpful to have an emergency governance structure in place but felt that this was something that should be done nationally.

Decision: The report was formally noted.

Action: Ms Bozkurt to present the audit plan to CMT for their comments and report back to Mr Brown.

Deadline: 19th January 2021.

7. AUDIT RECOMMENDATIONS TRACKER

7.1 Audit Recommendations Tracker Report

7.1.1 Audit Recommendations Tracker

Issue: *The committee was asked to note for assurance purposes the Audit Recommendations Tracker report presented by Ms Debbie Bozkurt, Director of Finance & Procurement.*

Discussion: Ms Bozkurt advised that she had reviewed the current tracker and recognised those recommendations that would not be completed due to the emergency footing measures and have included these in a new Covid-19 section. She added that updates for these recommendations would still be requested but deadline dates would no longer be applicable.

Ms Bozkurt noted that ten of the current recommendations have been classed as Covid-19 with the remaining eight recommendations overdue. She added that there have been issues with the recording of TOIL (73.1.2 & 73.2.1) since this review had been completed and would be looking for further assistance from the internal auditors on this and would discuss this with Ms Hume outwith the meeting and report back to the next meeting.

Decision: The committee formally noted the report.

Action: Ms Bozkurt to discuss the audit requirements with Ms Hume outwith the meeting and report back to the next meeting.

Deadline: 17th February 2021.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

8. INTERNAL REPORTS

8.1 Director of Finance Report on the Financial Position Month 6

Issue: *The committee was asked to note for assurance purposes the Month 6 Financial report presented by Ms Bozkurt.*

Discussion: Ms Bozkurt advised that the presented report was the summary that was sent to the Scottish Government on a monthly basis and would be producing a full Month 7 report and a 3 year budget plan for presentation to the next Board meeting. She added that she would answer any questions, there were no questions raised.

Decision: The committee formally noted the report.

8.2 Fraud Liaison Officer's Report

8.2.1 Counter Fraud Action Plan

8.2.2 Fraud Risk Register 2020

8.2.3 Intelligence Alerts

8.2.3.1 06-2020/2021 ~ Attempt Bank Mandate (Account Takeover) Fraud

8.2.3.2 07-2020/2021 ~ Attempt Utilities Account Diversion

8.2.3.3 08-2020/2021 ~ Chief Executive Email Spoofing Scam

8.2.3.4 09-2020/2021 ~ Laptop Theft – Insider Threat

8.2.3.5 Rolling Covid-19 Intelligence Alert No 29

Issue: *The committee was asked to note for assurance purposes the Fraud Liaison Officer's report presented by Ms Bozkurt.*

Discussion: Ms Bozkurt advised that this report was usually presented for information but was presented to discuss the fraud risk register in greater detail. She added that Counter Fraud Services had discontinued their training programme during the first lockdown but were now holding web based training sessions and she would be looking for relevant training sessions for the organisation.

Ms Bozkurt noted that the fraud risk register was similar to the previous year with two Covid-19 risks added. She advised that she was confident that the IT equipment risk was not an issue in the Western Isles, similarly she was confident that her accountancy staff would pick up on any bank mandate fraud.

Decision: The report was formally noted by the committee.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

9. ADVERSE EVENTS / RISK

9.1 Corporate Risk Register (CRR)

9.1.1 CRR Detailed Report

9.1.2 CRR Dashboard

Issue: *The committee was asked to note for assurance purposes the Corporate Risk Register report presented by Mrs Louise Sullivan, Head of Clinical Governance & Professional Practice.*

Discussion: Mrs Sullivan advised that the most recent risk updates were included in the executive summary. She added that the recommendation to separate the risk for the delivery of clinical services, public health services and support services would be presented to the next CMT for approval.

The committee queried if there was an update to the security risk and Mr Jamieson advised that all ligature risk areas had been identified and issues addressed however, the hospitals could never be completely risk free regarding this issue and would look to review this risk.

Mrs McCannon queried if the GP issues in Barra should be considered as a risk and added to the register. Mr Jamieson advised that there was a number of options being considered regarding this issue and if for some reason none of these options are suitable, he may then look to add this as a risk. Mrs McCannon queried if it is worth considering the risk that the delay in the St Brendan's project would affect the deteriorating condition of the existing St Brendan's building and Mr Jamieson advised that this would be a question to ask the Scottish Government at the review meeting the next day.

Decision: The Corporate Risk Register was formally noted.

9.2 Emerging Risks / Significant Issues

There were no significant issues or emerging risks noted.

9.3 Adverse Event Report

Issue: *The committee was asked to note for assurance purposes the Adverse Events report presented by Mrs Sullivan.*

Discussion: Mrs Sullivan advised that during the period 18th August to 31st October 2020 there were one hundred and sixty five adverse events reported and of these eighty three have been investigated and approved, eighteen of these risks were rated as negligible, twenty three rated as minor, thirty five rated as moderate and seven rated as major. She added that during this period there were three SBAR forms completed and one Significant Adverse Event commissioned, two RIDDOR reportable adverse events were reported to the Health and Safety Executive and one adverse event record that was a possible Duty of Candour event.

Decision: The committee formally noted the report.

NHS Western Isles

Healthcare Governance & Audit Committee

Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

9.4 Use of Non-invasive Ventilation – Confidential

Issue: *The committee was asked to note for assurance purposes the Use of Non-invasive Ventilation report presented by Mr Gordon Jamieson, Chief Executive in the absence of Dr Frank McAuley.*

Discussion: Mr Jamieson advised that this paper was presented on request of CMT regarding the use of non-invasive modes of ventilator support as a potential treatment for Covid-19 related respiratory failure and although this is routinely employed in the Western Isles Hospital its used for patients with airborne respiratory disease presents challenges in its delivery. Mr Jamieson noted that there is an ongoing debate on the issues regarding the amount of oxygen with the hospital dependant on cylinder oxygen. He added that the Medical Director and his team have reviewed the use of this system and the issues regarding the limited number of pressure beds, limited air circulation and risk of fire and noted that at present the Board would look to transfer patients requiring ventilation off island.

Mr Jamieson advised that there was a level of concern regarding this issue and a requirement for further discussion but it was uncharted territory and he was confident that the Medical Director had control of the situation.

It was noted that the members of the committee would like to meet with the Medical Director to discuss in greater detail and Mrs Martin will look to organise a meeting in the New Year.

Decision: The verbal updated was formally noted.

Action: Mrs Martin to organise a meeting for the members and the Medical Director to discuss this report in greater detail.

Deadline: 31st January 2021

10. QUALITY / SAFETY

10.1 Mortality Review Report

10.1.1 SBAR WIH Mortality Case Notes Review

Issue: *The committee was asked to note for assurance purposes the Mortality Review report presented by Mrs Sullivan.*

Discussion: Mrs Sullivan reported that the number of in hospital deaths in the Western Isles Hospital for the period 1st July to 30th September 2020 was 15. All case notes were reviewed including one outstanding from December 2019 and classification of these case notes were as follows:

Type	Definition	No	Comments
1	No adverse events identified	13	No further action.
2	Adverse event and/or issue of care has been identified but not thought to credibly contribute to the patient death.	2	2 nd review actioned.
3	Adverse event and/or issue of care have been identified and may have credibly contributed to the patient's death.	1	Ongoing SAER.

Decision: The committee formally noted the report.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

10.2 OPAH Action Plan Update

10.2.1 OPAH Action Plan

10.2.2 Embedded Documents Appendix 1 to 11

Issue: *The committee was asked to note for assurance purposes the OPAH Action Plan update presented by Mrs Sullivan.*

Discussion: Mrs Sullivan advised that sixteen of the twenty two actions have now been completed. She added that updates received in November 2020 on the six overdue actions were as follows:

Action 3 Frailty Screening to be Implemented ~ The draft admission document which includes frailty testing score was presented for discussion at the Acute Care Forum in November 2020. PDSA testing of this document will begin in December 2020.

Action 7 Update Oral Health Assessment ~ A new working group has been established to review admission record and risk assessments. Nutritional assessment will be included in the draft document. PDSA testing will begin in December 2020.

Action 8 Review bedrails policy ~ Will follow up the status of this policy with the Senior Nurse on their return from annual leave.

Action 15 Review and update Care Plans ~ The documentation working group has been re-established and will be focusing on person centred care planning. Mapping exercise previously planned for March 2020 will be rearranged virtually.

Action 16 Delirium ~ Draft admission document includes the importance of completing 4AT assessment. PDSA testing will begin in December 2020.

Action 18 Pressure Area and Wound Care Documentation ~ Wound care documentation project had been paused during Covid-19. New project milestones have been agreed for March 2021.

Mrs Sullivan noted that the QI Coordinator would be presenting the completed action plan to the Senior Charge Nurses to ensure that all actions are still relevant.

Decision: The report was formally noted.

11. INFECTION CONTROL

11.1 HAIRT Report

11.1.1 HAIRT August – September 2020

11.1.2 Executive Summary CDI ECB SAB SSI Report

11.1.2.1 CDI ECB SAB SSI Full Report

Issue: *The committee was asked to note for assurance purposes the HAIRT report for August to September 2020 presented by Mrs Janice MacKay, Head of Infection Prevention & Control, Decontamination & Cleaning Services.*

Discussion: Mrs MacKay advised that the two Staphylococcus Aureus (SAB) infections reported in the period 1st August to 30th September 2020, both were hospital acquired infections, one was in the Western Isles Hospital and one in Uist and Barra Hospital.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

She added that there were no Clostridioides Difficile Infections (CDI) reported and although there were challenges with hand hygiene compliance this was mainly due to the new cohort of Junior Doctors and Locum Consultants.

Mrs MacKay advised that there was a number of vacancies for domestic staff which she was having difficulty in recruiting to. Ms Keen advised that there are issues with the national Jobtrain system but she would discuss recruitment with Mrs MacKay out with the meeting.

Mrs McCannon queried if the contingency beds are still being used as per the executive summary sheet. Mrs MacKay advised that contingency beds are not being used due to Covid-19, she added that no bay in the Western Isles Hospital has more than four beds per bay and this will be the new normal for some time. Mrs Martin apologised that she had omitted to remove the contingency bed paragraph from the executive summary sheet in error.

Mrs MacKay noted that the national reports were presented for information and would answer any questions. There were no questions raised.

Decision: The Committee formally noted the report.

12. COMPLAINTS

12.1 Complaints & Feedback Annual Report 2019/2020

Issue: *The committee was asked to note for assurance purposes the Complaints & Feedback Annual Report for 2019/2020 presented by Ms Bozkurt.*

Discussion: Ms Bozkurt advised that Boards are required to produce an annual report on the use of feedback, comments, concerns and complaints and would be presented to the next Board meeting.

Ms Bozkurt added that she would answer any questions. There were no questions raised.

Decision: The Annual Report was formally noted.

12.2 Complaints Summary Report Q2 July to September 2020

12.2.1 Complaints Summary Q2 Full Report

Issue: *The committee was asked to note for assurance purposes the Complaints Summary report presented by Ms Bozkurt.*

Discussion: Ms Bozkurt advised that she had taken over the responsibility for Complaints during the Pandemic and noted that the number of complaints received in this quarter had increased slightly as the number of services being offered had increased. She added that there were thirteen complaints received in the three month period from 1st July to 30th September 2020, four of these were not upheld, two were fully upheld, four were partially upheld and two were ongoing. Ms Bozkurt noted that there was a 30% response rate for stage 2 complaints within the twenty days but again this was due to the high demands on staff time due to Covid-19.

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
 Agenda Item: 10.1.3
 Purpose: For Information

Minutes of Meeting
 2nd December 2020

There was a query raised regarding case number 201903690 of the Scottish Public Services Ombudsman update regarding failure to report and act upon blood results and the recommendation to develop a policy. Mr Jamieson advised that he remembered this case and the patient did have a rare condition but this did not excuse the failure to review blood results on two occasions. He added that the development of a policy in this case was not required but a lesson learnt review had been held. He added reassurances have been sent to the SPSO but they will not close a case until they are completely satisfied that their recommendations have been appropriately dealt with.

Decision: The committee formally noted the report.

13. ANY OTHER COMPETENT BUSINESS

There was no other competent business raised for discussion.

14. EVALUATION

	YES	NO	COMMENTS
I was satisfied that the agenda items presented covered the current significant areas in Health.	✓		
There was sufficient time to review the papers between receipt and the meeting date.	✓		
There was sufficient time allocated to all agenda items.	✓		
The Executive Summaries were an accurate reflection of the full report.	✓		
Were you satisfied with the Q&A paper	✓		Due to the small agenda there was no Q&A paper presented to this meeting.
I was able to reach a satisfactory conclusion from the information presented on each item.	✓		
I was able to contribute to the discussions and had my views considered. .	✓		
The HGAC discharged its duty in respect of: • Proper Scrutiny • Relevant Questioning • Constructive Challenging	✓ ✓ ✓		
Significant Issues to be raised with the Board		✓	

NHS Western Isles

Healthcare Governance & Audit Committee



Board Meeting 31.03.21
Agenda Item: 10.1.3
Putpose: For Information

Minutes of Meeting
2nd December 2020

15. DATE, TIME OF THE 2021 MEETINGS

All meetings to be held via Microsoft Office Teams

Date	Time
17 th February 2021	10.00am (members meeting 9.30am)
19 th May 2021	10.00am (members meeting 9.00am, members & auditors meeting 9.30am)
23 rd June 2021	9.00am (Annual Accounts Approval Meeting)
15 th September 2021	10.00am (members meeting 9.30am)
1 st December 2021	10.00am (members meeting 9.00am, members & auditors meeting 9.30am)

The Chair concluded the meeting at 12.40pm, thanking everyone for their attendance and contribution.