MINUTES of MEETING of ARGYLL AND BUTE HSCP CLINICAL AND CARE GOVERNANCE COMMITTEE held BY MICROSOFT TEAMS on TUESDAY, 12 MAY 2026

Present: Graham Bell (Chair)

Karen Leach
Evan Beswick
Rebecca Helliwell
Kevin McIntosh
Alison McGrory
Councillor Dougie McFadzean
Councillor Ross Moreland
James Mullins

Attending: Eilidh Gallagher, Head of Primary Care
Caroline Robertson, Head of Hospitals and Community Care
Nicola Gillespie, Head of Complex Care and Registered Services
Kristin Gillies, Head of Strategic Planning, Performance and Technology
Leah Smith, Clinical Governance Manager
Charlotte Craig, Business Improvement Manager
Fiona Thomson, Associate Director of Pharmacy
Linda Currie, Associate Director of AHP
Shona Williams, Senior Manager Justice Social Work/Acting Chief Social Worker
Fiona McCallum, Committee Services Officer

Having noted the additional item of business at agenda item 11 (Critical Staffing Levels in Children & Families Social Work Service), the Chair moved and the Committee agreed to vary the order of business to consider this item as agenda item 10.

1. WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting.

Apologies for absence were intimated on behalf of:-

David Gibson, Head of Children, Families and Justice/Chief Social Work Officer
Dr Duncan Scott, Secondary Care Representative
Fiona Broderick, Staffside Representative

2. MINUTES

(a) **Minute of the previous meeting of the Clinical and Care Governance Committee held on 5 February 2026**

The Minute of the previous meeting of the Clinical and Care Governance Committee, held on 5 February 2026 was approved as an accurate record.

(b) **Minute of the previous Clinical and Care Governance Group, held on 5 March 2026**

The Minute of the previous Clinical and Care Governance Group, held on 5 March 2026 was noted.

3. ACTION LOG

Having given consideration to the Action Log, the Committee noted the following updates:-

Action 1 (Overlap of inspections spreadsheet) – It was noted that this was on the agenda for discussion at item 7 (Integrated Inspections and Scrutiny Overview).

Action 2 (Deep Dive – Primary Care) – The Head of Primary Care advised that this report would be brought to the next meeting of the Committee for consideration.

Action 3 (Reporting Templates) – The Business Improvement Manager advised that this would be included in a Governance Review Paper going to the IJB.

Action 4 (Neurodiverse Pathway Update) – It was noted that this was a recurring item which would remain on the action log and that an update was on the agenda for discussion at item 9 (Neurodiverse Pathways – Governance Update) for consideration.

Action 5 – (Emerging Issues) – It was noted that this was on the agenda for consideration at item 4 (Emerging Issues).

4. EMERGING ISSUES

The Depute Medical Director and the Clinical Governance Manager outlined a number of emerging issues that may be of interest to the Committee. They included:

- Child care issues;
- Primary Care hot areas which would be a focus of the deep dive report coming to the next meeting;
- A couple of pieces of work with community engagement work;
- Health Improvement Scotland's (HIS) intention to look at the quality of dental services in Argyll; and
- The first of a series of quality improvement focus days looking at the Clinical Governance Structure to see how it was working and whether it was fit for purpose. It was hoped to bring an update in the near future regarding a framework being developed in respect of systems and processes.

Decision

The Clinical and Care Governance Committee noted the information provided.

5. HEALTH AND SOCIAL CARE PARTNERSHIP - PERFORMANCE REPORT - FQ3 2025/26 (OCTOBER - DECEMBER)

The Committee gave consideration to a report which detailed performance for the Financial Quarter (FQ) 3 2025/26 (October – December). The report also provided details on performance against each of the service areas and supporting IPMF Key Performance Indicators; the latest National Delayed Discharge Sitrep and the National Health and Wellbeing Indicators.

A discussion also took place on how information on risk was collated. The Committee noted that this was being kept under review.

Decision

The Clinical and Care Governance Committee:

1. Acknowledged performance for FQ3 2025/26 (October – December) against Key Performance Indicators within the Integrated Performance Management Framework for 2025/26.

2. Noted the latest Delayed Discharge Sitrep as of 16 February 2026, as outlined in Appendix 1 to the report.

3. Acknowledged the latest performance against the National Health and Wellbeing Outcomes and Ministerial Steering Group Integration Indicators, as outlined in Appendix 2 to the report.

4. Acknowledged the inclusion of additional A&B HSCP performance metrics aligned to national reporting across Centre for Sustainability Delivery (CfSD) Unscheduled Care and Planned Care performance focus within the Operational Improvement Plan (OIP), as outlined in Appendix 3 to the report.

(Reference: Report by Head of Strategic Planning, Performance and Technology, dated 12 May 2026, submitted)

6. DASHBOARD REPORT

Consideration was given to the dashboard report, which provided information on continuous improvement measures across the A&B HSCP; stage 2 complaints; Social Work and Care complaints; adverse events; inpatient falls; tissue viability incidents; violence and aggression incidents and medication errors over the last 13 months.

Decision

The Clinical and Care Governance Committee considered and noted the information contained within the dashboard report.

(Reference: Report by Clinical Governance Manager, submitted)

7. INTEGRATED INSPECTIONS AND SCRUTINY OVERVIEW

The Committee gave consideration to a report which provided an overview of external inspections, investigations and scrutiny activity across Argyll and Bute HSCP over a 12-month period (March 2025 to March 2026) for the purpose of providing assurance that learning is being identified, acted upon and embedded to support continuous improvement in patient care, staff practice and governance.

Decision

The Clinical and Care Governance Committee:

1. Reviewed for transparency and assurance regarding continuous improvement arising from external body investigations across Argyll and Bute HSCP.

2. Noted that all the items within the report are available in the public domain and that people who make complaints to the SPSO are made aware that their outcome reports are made public and published on their website for learning purposes.

(Reference: Report by Clinical Governance Manager, dated 12 May 2026, submitted)

8. SOCIAL WORK GOVERNANCE AND LEADERSHIP

Consideration was given to a report which provided a consolidated assurance update on Social Work and Social Care governance, performance and risk, with it being noted that overall assurance across the system is partially assured with variations of assurance levels across the Services.

Decision

The Clinical and Care Governance Committee:

1. Noted the assurance position and key risk areas across Social Work and Social Care services arising from the Social Work Governance and Leadership Group meetings held in November 2025, January 2026, February 2026 and March 2026.

2. Noted continued focused oversight of workforce sustainability, particularly within statutory services.

3. Endorsed further development of performance reporting, data quality and quality assurance arrangements.

(Reference: Report by Senior Manager Justice Social Work/Acting Chief Social Work Officer, dated 12 May 2026, submitted)

9. NEURODIVERSE PATHWAYS - GOVERNANCE UPDATE

Having noted that demand for neurodevelopmental assessment and support across Argyll and Bute continues to exceed current service capacity, the Committee gave consideration to a report which provided an update on interim risk-mitigating actions

that have been implemented to address immediate risks. The report further noted that underlying system capacity constraints remain and require further strategic consideration.

Decision

The Clinical and Care Governance Committee:

1. Noted the current update and progress in relation to ASD and ADHD pathways.

2. Noted the identified clinical, operational and governance risks.

3. Noted the interim mitigation actions in place to protect patient safety and service sustainability.

(Reference: Report by Head of Complex Care and Registered Services, dated 12 May 2026, submitted)

Evan Beswick, Chief Officer, left to attend another meeting during consideration of the foregoing item.

10. CRITICAL STAFFING LEVELS IN CHILDREN & FAMILIES SOCIAL WORK SERVICE

The Committee gave consideration to a report which provided an update on the current critical staffing position within Children and Families Social Work Service.

The Committee acknowledged that this needed to be escalated to the IJB and that an Action Plan was necessary. It was noted that the Chair and Vice Chair of this Committee would meet with the Chief Officer to discuss this further.

Decision

The Clinical and Care Governance Committee:

1. Noted the critical and escalating statutory and governance risks within Children and Families Social Work, particularly Child Protection.

2. Noted the severe operational and senior leadership capacity pressures currently affecting assurance.

3. Supported the continued prioritisation of statutory Child Protection and statutory work above all other activity and noted the impact of this prioritisation on non-statutory delivery.

4. Endorsed the implementation of a time-limited enhanced risk control and assurance framework (including daily operational triage, and targeted management oversight of the highest-risk cases) until capacity stabilises.

5. Supported urgent workforce actions to protect statutory Child Protection delivery in high-risk localities.

6. Noted a time-limited operational recovery plan (as outlined at Appendix 1 of the report) and agreed that progress updates will be provided to the Committee at each meeting until risk is reduced.

7. Noted that external transparency actions are in progress with the Care Inspectorate Link Inspector and National Social Work Agency.

(Reference: Report by Senior Manager Children, Families and Justice Services/Acting Chief Social work Officer, dated 12 May 2026, submitted)

11. DATE OF NEXT MEETING - 13 AUGUST 2026

It was noted that the next meeting of the Clinical and Care Governance Committee was scheduled to take place on Thursday, 13 August 2026.