RUH

Royal United Hospital Bath NHS
NHS Trust

Report to:	Trust Board	Agenda item:	13
Date of Meeting:	9 November 2011		

Title of Report:	Clinical Governance Committee report
Status:	Information
Sponsor:	Michael Earp, Non-Executive Director
Author:	Alexandra Lucas, Head of Risk & Assurance
Appendices	None

Purpose

To update the Trust Board on the key issues discussed at the October Clinical Governance Committee meeting.

Background

The two systems tested for assurance were:

- The Central Alerting System (CAS) alert process;
- Care Quality Commission assurance.

Business Undertaken

The Committee discussed the following subjects:

1. **Board Assurance Framework**
   An exception report of the actions to address gaps in the Board Assurance Framework was reviewed and discussed. Some slippage in the completion of actions was noted by the Committee. The Committee also considered where performance of linked Key Performance Indicators may indicate a weakness in one or more of the control and/or assurance systems.

   The testing of assurance systems was linked to the assurances provided through the Board Assurance Framework. More details of this testing is given below.

2. **Central Alerting System (CAS) alerts**
   The Committee reviewed the Trust system for receiving and responding to these alerts, which includes alerts generated by the National Patient Safety Agency (NPSA).
   Information on individual Trusts response performance is available to the public.

   The process for managing alerts has been strengthened since 2009, including:
   - a formal link to the clinical audit programme, in order to monitor on-going compliance with alerts generated by the NPSA;
   - an action plan and nominated Trust lead for alerts generated by the NPSA;
   - Divisional Clinical Group responsibility for ensuring alert compliance and response;

- OGC review of alert responses to approve closure.

Never Events are all linked to past CAS alerts and Trust groups responsible for the review of related incident trends have been identified.

The review made a suggestion as to how the organisational memory and previous alerts issued could be strengthened. The use of an alert in the current incident database (Datix) will be investigated and the possibility of purchasing the Datix CAS module will be reviewed.

The review did not provide evidence of a users perspective, therefore, the system will be reviewed further in November 2011.

3. Care Quality Commission assurance report

A CQC policy is under development, which will document key responsibilities and the Trust process for collating and assessing evidence.

The review provided moderate assurance.

4. Medicines storage

The Medicines Advisory Group (MAG) has reviewed the action plan created as a result of a review of the Trust's compliance with the Duthie report and confirmed the high level actions for urgent completion by the Divisions. The Operational Governance Committee (OGC) will review progress against the action plan at the November meeting.

5. Medical Records management audit review

The Committee reviewed progress against the PriceWaterhouseCooper audit action plan. Of the seven outstanding actions, three were identified as having an amber (high) risk status:

- Lost information making is difficult for the clinical coding team to undertake accurate coding;
- The failure to comply with legislation regarding the retention and destruction of records;
- The Trust is not securing value for money regarding medical records.

Completion of these actions is part of the Medical Records user group (MRUG) action plan. The MRUG reports to the Operational Governance Committee (OGC).

The Chair of the MRUG felt the group did not have authority to progress some areas of performance.

The audit team within the Qulturum will be approached to identify how effective audit can be achieved, to support the work of the MRUG. Clinical leadership and participation from users was identified as essential.

The audit of case note availability identified 99.9% compliance. The risk of the lack of availability of health records was identified as being far less than two years ago, due to the other electronic sources of information available, such as PACS and Millennium. The possibility of access to clinic letters through Millennium was recommended for inclusion in the wider IM&T plan.

A full review of the medical records management system is scheduled to be undertaken by the Clinical Governance Committee in January 2012. The Committee will review the MRUG attendance, to identify where improvement is required.

6. **Audit of the clinical audit process**
   The Committee reviewed progress against the PriceWaterhouseCooper audit action plan and noted that all outstanding actions had been completed and closed.

   Discussion took place regarding how clinical audit was embedded into the organisation and how assurance would be gained for clinical audit. This will be referred to the Quality Board for action. A more detailed review by the Committee was scheduled into the work plan for march 2012.

Key Risks and their impact on the Organisation

- Slippage to achieve the actions in most Board Assurance Framework risks under the remit of the Committee;
- The risk relating to medicines storage has been identified on The Risk Register (ID: 437);
- The risk relating to organisational memory of CAS alerts has been added to The Risk Register (ID: 464).

Key Decisions

The following summarises the key decisions and recommendations agreed by the group:

- Assess the possibility of purchasing the Datix CAS module;
- The possibility of accessing clinic letters through Millennium was recommended for inclusion in the wider IM&T plan;
- Clinical audit has been referred to the Quality Board for review.

Exceptions and Challenges

None identified

Governance and Other Business

While the Committee is scheduled to meet on alternate months, the recent review of the Terms of Reference and subsequent reduction in the membership has reduced the number of members required to attend and has resulted in the movement of the meeting dates to achieve a quorate meeting.

Future Business

The Committee has a plan of work that details the systems and assurance reports to be reviewed for the year. The Committee will be reviewing the following systems at the November meeting:

- Compliance with the National Health Service Litigation Authority risk management standards;
- Compliance with the Quality, Innovation, Productivity and Prevention (QIPP) programme;
- A further review of compliance with the medicines storage requirements;
- A further review of the Central Alerting System (CAS).

Recommendations

The Committee requests that the Trust Board read and note the content of this report.