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Date: 20th May 2004

Ms Margaret Kelly Ms Maggie Reilly

Dear Marigret,

Re: Proposed Root Cause Analysis Exercise : LC Case

I understand that Mr Mills has had the opportunity to speak to you regarding our intention to undertake a 'root cause analysis' of aspects of the Crawford case. I am grateful to you for your initial indication that you would be prepared to participate in the steering group which I am bringing together under the chairmanship of Ms Jenny Irvine, one of our Non Executive Directors.

In writing to you formally I wanted to stress our commitment to a robust and candid process, which we trust will inform future practice, processes and

I am enclosing a draft TOR for your initial consideration. This will be agreed formally by the steering group once convened.

Our Corporate Affairs team will be providing administrative support in the form of the Clinical & Social Care Governance Project Officer - Mrs Rebecca McLean. She will be in touch to test your availability etc in due course.

In the meantime if you wish to discuss or clarify any matters might I suggest you contact either Dr Cody or Bridget O'Rawe.

I should be grateful if you would formally confirm your agreement to be a

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HEALTH AND SOCIAL CARE TRUST ROOT CAUSE ANALYSIS EXERCISE : LC Case

TERMS OF REFERENCE

Background:

On 20/02/04 the Coroners Inquest concluded its findings on the circumstances nature and cause of the tragic death of Lucy Crawford. Aspects of the clinical care are currently subject to consideration by the GMC, after referral by the Coroner. The Trust is co-operating fully with the GMC in this regard.

It has been acknowledged, in the course of the management of this case, that a number of process and systems issues warrant examination and

This proposed Root Cause Analysis (RCA) exercise is being commissioned for this purpose. : 1

Principles:

This exercise will be:

- overseen by a Steering group established by the Trust Chairman (membership set out below)
- undertaken in a manner to provide independent analysis
- focused on the Trust's process and systems, as per the agreed scope set out below "
- used to inform regional authorities, as appropriate, of any relevant/pertinent lessons for wider dissemination
- undertaken in a way to ensure early transference of lessons emerging from the analysis rather than await final report production.

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Scope:

The root cause analysis will examine:

- adverse incident investigation process
- complaints handling process
- litigation process (including preparation for Inquest)
- media/public relations processes and
- related cpd/cme processes regarding updating of professional standards
- Key staff involved in the processes set out above will be invited to participate and contribute to the RCA exercise
- Currently the Trust is approaching the family to assess their preparedness to engage with this process
- Findings for the RCA will be presented to the Steering group along with any recommended remedial actions.
- A final report will be provided to the Trust Chair and Chief Executive and the CSCG committee for adoption.

Membership of Steering Group:

The group will be chaired by a Non Executive Director of the Trust. The following additional members have been identified to secure independent views, a consumer perspective and professional overview:

- Trust Medical Director
- ♦ Chief Nurse, WHSSB
- ♦ Chief Officer, WHSSC
- Representative of the CSCG Support team

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Process & Resources:

- External expertise on RCA methodology will be sourced via the NI CSCG support team. The Trust will meet costs in this respect.
- Guidance and support will be provided by the CSCG support team representative – costs for this will be met by the Director of the NI CSCG support team.
- Limited administrative support will be provided by the Corporate Affairs directorate through the CSCG Project Officer.
- A workplan will be agreed with the RCA Consultant(s) at an early stage. This will include:
 - Core groups for engagement/participation
 - Timescales/key timelines
 - Reporting arrangements

Timescales:

• The exercise should be completed within 4-6 months of initiation.

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