

D R A F T

RISK ASSESSMENT – SPERRIN LAKELAND

SUGGESTED DRAFT TERMS OF REFERENCE

Background

The implementation of the Minister's decisions on Developing Better Services has major implications for future provision of acute services and will require significant service and workforce redesign. The changes planned for the southern part of the Western Board area are particularly significant with the development of one new acute hospital and a local hospital. This major change process, coupled with recent clinical incidents and challenges in recruiting and retaining staff in some specialties, highlight the need for a robust dynamic plan which will take us from the existing service configuration to the new model.

A review of services currently provided at the Tyrone County Hospital and Erne Hospital is proposed which will assess risk, make recommendations and develop an action plan for the short, medium and long term which inter-relates with the Strategic Context set out in 'Developing Better Services' and 'Planning for Change'.

Principles

The Review will:-

- Be independently led.
- Cover all specialties.
- Look at clinical performance including adverse incidents, application of learning from adverse incidents, team working, audit, communication and integration (within specialties across the two sites and between specialties).

- Examine arrangements for clinical and social care governance including strategy, implementation of action plan, performance management and clarity of roles in clinical and social care governance, for example CEO, Director of Acute Services and Medical Director.
- Identify level of risk across specialties to inform phasing of action plan.
- Be an inclusive process which promotes open communication and nurtures leadership.
- Build on on-going work in Root Cause Analysis in Paediatrics

Structures/Proces

The Review process will be:-

- Overseen by a small Steering Group including representation from Sperrin Lakeland Trust (2), DHSSPS (2), WHSSB (2) and independent input (1) which will lead and manage performance of the process.
- An independent group of people with appropriate expertise should be appointed to carry out the Review.
- The work should include two stages:

Stage 1 Diagnostics

- 1) an intensive period of review of all specialties with links to the Root Cause Analysis work in Paediatrics (5 days);
- 2) draft report to test and clarify with Steering Group (2 days);
- 3) produce final report and action plan with timescales.

This work to be completed within 4 weeks.

Stage 2 Implementation

- The Steering Group will specify implementation and monitoring arrangements for the action plan.
- Learning from this exercise will be used to inform other organisations and practice as appropriate.