

MINUTES OF ROOT CAUSE ANALYSIS STEERING GROUP
MEETINGS
Held on Monday 2nd and Tuesday 3rd August 2004 in the Board Room, Erne Hospital.

Present:

Jenny Irvine (Chair) – Trust Non-Executive Director
Dr Diana Cody, Trust Medical Director (Acting)
Margaret Kelly, Chief Nurse, WHSSB
Jayne Fox, N.I. CSCG Support Team
Sue Norwood, Global Air

In Attendance:

Rebecca McLean, Group Administrator

Apologies

Howard Arthur, G.B. Clinical Governance Support Team

MONDAY 2ND AUGUST 2004 (2pm – 5pm)

1. Agreeing Terms of Reference

In advance of the meeting the group (through correspondence) had made several amendments to the draft terms of reference.

1.1 In addition a number of other amendments, it was decided to delete the Trust's logo from the Terms of reference, indicating that that the group was independent. Final amendments were made to the document and agreed by the group.

1.2 It was agreed that the final terms of reference should be distributed to other organisations; i.e. WHSSB (Chief Executive and Chairwoman), WHSSC and DHSSPSNI (Chief Medical Officer and Chief Nursing Officer) in addition to the Trust's Chief Executive and Chairman. This was carried out accordingly on the 3rd August.

2. Letter sent to Crawford Family

2.1 It was agreed that the Mrs Irvine (chair), on behalf of the steering group, would write to the Crawford family informing them of the intentions of the steering group and advise them of the agreed terms of reference, providing the opportunity for them to meet with Mrs Irvine.

2.2 Careful consideration was paid to the use of language when drafting the letter, ensuring that it would be fully understood. The final letter was then signed by Mrs Irvine and sent to the family on Tuesday 3rd August.

3. Group Introductions and agreeing 'ground rules'

Each member present gave brief introductions, providing details on their career history until the present. Ms Norwood, who would be facilitating the RCA, explained that she had previously worked as a registered nurse/health visitor. She has also experience as a qualified teacher. Ms Norwood also acknowledged that she has substantial experience in reviewing health care, given one of her previous roles as a Commission for Health Improvement (CHI) reviewer.

**ROOT CAUSE ANALYSIS
STEERING GROUP MEETING**

To take place on Wednesday 6th October, in the Conference Room,
Cedar Villa, Tyrone & Fermanagh Hospital, Omagh

AGENDA

1. Apologies
2. Minutes from meeting held on 2nd and 3rd August 2004
3. Matters Arising
4. Development Programme Update
5. Any Other Business

Executive Directors of Trust Board - not sure
why LC case
would be used
in RCA.

DL Donahue - OK to RCA - needed
to get legal advice.

It was agreed that all members would be free to speak their mind, in order to ensure that the group had the same common goal.

Mrs Irvine acknowledged that she had some concerns regarding the ability of the proposed training programme to meet the terms of reference, ie the group had been tasked with completing a review and it appeared that what was proposed was a training programme. Mrs Irvine had raised these matters with Ms Norwood in a telephone conversation prior to the meeting and had been reassured by Ms Norwood's response.

4. Safer Systems and Processes Development Programme

The safer systems and processes paper, which outlined the training programme, and was developed by Global Air, was tabled and presented by Ms Norwood.

4.1 The paper was summarised with the group agreeing that the training programme would involve the following:

- Participants taking 2 full days out of work.
- 3 case studies would be used (one of which would be from the aviation industry, one from health care and the 3rd case study being the case of Lucy Crawford.)
- Lucy Crawford's case being used as an anonymous case study, given that this case still had a huge impact on many members of staff.
- The case study would be written on the facts of the case, but not the full facts.
- Participants (staff) developing the skills in order to draw up an action plan.
- Groups of approx 20 participants, across a wide range of levels within the Trust.
- The training programme would involve a human factors approach to analysing incidents.
- The programme venue would be off site.
- The programme could be accredited by a Royal College.

4.2 Mrs Irvine and Dr Cody asked that Ms Norwood would consider using a similar case study in order to make members of staff feel at ease and encourage them to relate to how the influencing factors are real and could happen within Sperrin Lakeland Trust.

ACTIONS: -

- Ms Norwood to source similar case study.
- Dr Cody and Mrs McLean to liaise with Mrs Esther Millar and Mr Eugene Fee to gather relevant information for Sue to write the case study regarding Lucy's death.
- Ms Norwood to enquire and apply for programme accreditation.

4.3 It was acknowledged that there might be some reservations by members of the public. For example, it might be perceived that the Trust was using the death and case of Lucy Crawford as a 'genie pig'. However the group agreed that the RCA training programme would involve analysis before and following the incident.

4.4 It was recognised that the method in which the programme was promoted would be crucial to it's success.

ACTION: Senior Management Team, Clinical & Social Care Governance Committee and staff involved in case to be briefed about the training programme.

4.5 It was also acknowledged that some members of staff that were specifically involved in the particular case were still on sick leave.

4.6 Mrs Irvine expressed her concern of the exposure that the steering group may experience given the media interest surrounding the case. It was agreed that the advantage of Ms Norwood's role in the steering group was that she was an unbiased member of the group. Ms Norwood suggested that Mrs Irvine or Dr Cody should speak to other Trust managers that have used the Gat (Global Air Training) methodology, for reassurance and support.

ACTION: Ms Norwood to source contact details of other Trust's that have used the training programme methodology in the past and forward these to Dr Cody and Mrs Irvine.

The meeting closed at approx 5pm.

TUESDAY 3RD AUGUST 2004 (9.30am – 1pm)

The group summarised the discussions from the previous day and agreed that Lucy Crawford's case would be used as the main case study during the training programme. The group discussed how the culture of reporting incidents was now changing. It was acknowledged that there were difficulties in apologising in regards to litigation.

Sue reflected on her experience and advised that the health service needed to start analysing incidents using techniques from the police service. For example, preserving the site of the incident in order to find data and interviewing within 24 hours. This would then ensure that relevant data is obtained in order to carry out a RCA.

5. Identifying Members of Staff to be Invited to Training Programme

5.1 The group undertook a brain storming session in order to identify individuals to be invited to participate in the programme.

5.2 It was recognised that a key spin off of the programme would be to include a core group of competent people who following the programme, would be sufficiently skilled to carry out a RCA in the future.

5.3 It was agreed that the Chief Executive – Mr Hugh Mills should not be included as an active participant of the programme, but should drop in to various parts of the training. This will assist with encouraging participants to speak freely and to be more open and frank, all of which is essential in ensuring the success of the programme.

5.4 It was agreed that Ms Fox would assist Ms Norwood with facilitation.

5.5 The programme participants should be multi-disciplinary.

5.6 Participants should commit to two consecutive days, and not mix and match days.

ACTION: Mrs Irvine and Dr Cody to liaise with Mrs McLean to finalise names etc and agree on members of staff to be invited.

6. Invitation letter

6.1 The group amended a template invite letter that would be sent to the invited members of staff. Staff would be asked to provide their response by 30th September.

ACTION: Following agreement on the list of staff to be invited Mrs McLean to distribute the invite letter with a reply slip.

7. Dates for Development Programme

7.1 It was agreed that the programme dates would include 3 slots of 2 day programmes in November 2004. The agreed dates are as follows:
November: Tuesday 9th and Wednesday 10th
Thursday 12th and Friday 12th
Monday 15th and Tuesday 16th.

7.2 A feedback session with participants would then take place on 15th December and a special CSCG Committee meeting was agreed to be arranged on 16th December in order to present the action plans to Trust Board.

8. Attitudes to Safety Questionnaire

8.1 It was agreed that a questionnaire should be distributed to participants in advance of the development programme. This would assist in monitoring how participant's attitudes have / have not changed following the programme.

ACTION: Ms Fox and Mrs Irvine to link together and lead on this piece of work.

9. Other Actions and Date of Next Meeting

9.1 Mrs McLean to arrange an action plan paper to be distributed to all steering group members.

9.2 An additional meeting between Mrs Irvine, Dr Cody, Mrs Kelly and Ms Fox to be arranged before the end of September in order to ensure action plan is adhered to and address concerns, issues that may arise in the meantime.

9.3 Ongoing support would be sought from Ms Norwood during decision making.

The meeting closed at approximately 1pm.