



DRAFT PRESS STATEMENT

The Chairman of Sperrin Lakeland Trust, Mr Harry Mullan, has confirmed plans to commission an analysis of aspects of the Trust's handling of the Lucy Crawford case. Currently, the Trust is co-operating with the General Medical Councils examination of the clinical aspects of Lucy's case.

Commenting, Mr Mullan said "Immediately following the Inquest into Lucy's death, we stated we would be reflecting on the Coroner's conclusions. In the course of this reflection on how we, as an organisation, handled this tragic case, we recognised some flaws in systems and processes. At our Clinical and Social care Governance Committee meeting, on Thursday the 20th May, I proposed plans to establish a steering group to oversee a process, used in healthcare, known as 'root cause analysis'. These proposals were endorsed by the Committee. I have since written to Lucy's parents to share our plans with them, and remain hopeful that they may feel able to contribute to this process."

Setting out the terms of reference of the 'root cause analysis', Mr Mullan emphasised the commitment of the Trust and its officers to reflect on how improvements could be made. "Our primary goal is to learn lessons and improve our practice. Additionally, where we identify process issues which have wider implications, we will want to inform the appropriate authorities," said Mr Mullan.

Mrs Jenny Irvine, Non-executive director for the Trust, will be chairing the steering group. She will be joined by Dr Diana Cody, the Trust's medical director; Mrs

Margaret Kelly, Chief Nurse for the Western Health and Social Services Board; and
Mrs Maggie Reilly, Chief Officer of the Western Health and Social Services Council.

The analysis will examine a range of systems including the Trust's arrangements, at that time, for adverse incident investigation and the complaints process and will take account of more recent changes and improvements. The steering group will be supported by a representative of the NHS Modernisation Agency Clinical Governance Support Team. A specialist independent consultancy firm will co-ordinate the use of the 'root cause analysis' approach.

It is anticipated that the exercise will take 4-6 months to complete, culminating in a report and recommendations to the Trust's Clinical and Social Care Governance Committee for approval.

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NOTE TO EDITOR

1. The Coroner's inquest into Lucy Crawford's death, concluded its findings on 20 February 2004.
2. The Coroner referred aspects of Lucy's clinical care to the General Medical Council for examination.
3. 'Root Cause Analysis' is increasingly used in the health care setting, to examine events/processes/systems surrounding adverse incidents and "near misses." It originates from the aviation industry, where it is used to determine causation factors in aviation incidents.
4. The NHS Modernisation Agency Clinical Governance Support Team is a GB based organisation. It has a particular responsibility in supporting health care providers implement governance arrangements under the Quality legislation.
5. Mr Harry Mullan is the recently appointed Chairman of Sperrin Lakeland Trust.

Mrs Jenny Irvine is a non-executive director, and has a background in nursing.



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 reflection.

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

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.

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

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.