

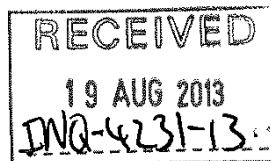
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Your Ref:  
AD-0613-13

Our Ref:  
HYP W50/03

Date:  
19<sup>th</sup> August 2013

Ms Anne Dillon  
Solicitor to the Inquiry  
Inquiry into Hyponatraemia-related Deaths  
Arthur House  
41 Arthur Street  
Belfast  
BT1 4GB



Dear Ms Dillon

**RE: INQUIRY INTO HYPONATRAEMIA RELATED DEATHS – RAYCHEL FERGUSON GOVERNANCE**

I refer to the above and to your letter of 30<sup>th</sup> July 2013 (reference as quoted above). I also refer to your letter of 2<sup>nd</sup> August 2013 (BC-0210-13) and our letter of 15<sup>th</sup> August 2013 under cover of which we enclosed the Altnagelvin Area Hospital Documentation Audit 1999/2001.

In your letter of 30<sup>th</sup> July you ask whether a summary of the Documentation Audit was sent to the WHSSSB. The Trust is unable to confirm that a summary was sent to the WHSSSB as there is no record of this on the Trust file (file entitled 'Papers for meeting Clinical Audit'). However, I enclose a copy of the minutes of the Clinical Audit Committee meeting of 11<sup>th</sup> January 2001. At paragraph 4.1 reference is made to agreement by the WHSSB that the Committee (WHSSB Committee) proceed with the board-wide Documentation Audit. This would suggest the WHSSB did receive information on the Documentation Audit although it is unclear if this was the full audit or a summarised version. The Trust has been unable to locate a draft or final summary of the Documentation Audit.

Yours sincerely

  
John Johnston  
Solicitor

*Providing Support to Health and Social Care*



**ALTNAGELVIN HOSPITALS HEALTH AND SOCIAL SERVICES TRUST  
ALTNAGELVIN AREA HOSPITAL**

**CLINICAL AUDIT COMMITTEE**

Minutes of the Clinical Audit Committee meeting held on Thursday 11<sup>th</sup> January 2001, commencing at 1.00pm in the Seminar Room, Trust Headquarters, Altnagelvin Hospital.

**Present:** Dr M. Parker, Clinical Audit Co-ordinator  
Mrs T. Brown, Risk Management Co-ordinator  
Mr R. Kennedy, Audit Assistant  
Miss [REDACTED] Chief Dietician  
Mrs A. Witherow, Clinical Effectiveness Co-ordinator

**Apologies:** Mrs A. Cole, Audit Assistant  
Dr G. Furness, Consultant Anaesthetist  
Mrs J. Johns, Head of Physiotherapy

**In Attendance:** Miss [REDACTED] Personal Secretary

**1.0 WELCOME**

Dr Parker welcomed everyone to the meeting, thanked them for their attendance and wished everyone a Happy New Year.

**2.0 APOLOGIES**

Apologies were noted.

**3.0 MINUTES OF THE PREVIOUS MEETING**

The minutes of the previous meeting were agreed.

**4.0 MATTERS ARISING**

**4.1 Admissions Audit**

Dr Parker informed the meeting that it would be necessary to keep track of the level of emergency admissions, however, he added that this work would be carried out by the Winter

Pressures Group. He added that the WHSSB were happy with the work carried out on the Admissions Audit and have agreed that the Committee proceed with the board-wide Documentation Audit. Dr Parker informed the meeting that he has received a letter from Sperrin Lakeland Trust regarding obtaining a copy of the Summary of the Documentation Audit. Mr Kennedy said that Foyle Trust have also requested details on the background to the audit and why it was carried out. Dr Parker replied that the audit had been requested by Hospital Management Team and agreed that they could receive a copy of the Summary report. Mrs Witherow informed the meeting that both Dr Fulton and Miss Duddy have written to the members of Hospital Management Team asking them for details on progress within their Directorate since the last meeting. She added that she has attended the Ward Sisters meetings and met with some individuals to progress the issue.

Miss [redacted] asked about the other disciplines involved in documentation of patient care. Dr Parker said that Mr Melaugh would have received a copy of the report and should highlight any areas of concern within his Directorate. Discussion then followed on the audit and the recommendations contained and how these should be carried out. Dr Parker said that a re-audit would be carried out in April. He said that this would consist of taking each specialty and looking at a selection and going back to the relevant people with the results. The group agreed that this approach would make it easier to carry out.

#### **4.2 Discharge Letter Audit**

Dr Parker informed the meeting that following discussions with Dr Farrelly the content of what should be in a discharge letter has now been agreed. He added that when they looked at the discharge summaries it was discovered that these were not acceptable. He said that within the Medical Directorate they were good but within Surgery they were not. Dr Parker said that the drug kardex was not transcribed onto the summary or the letter. He added that he had attended the Area Board ICT meeting where discussions took place regarding electronic prescribing. He informed the meeting that there is currently someone on a two year secondment looking at this proposal and would attend the next Area Audit meeting. Dr Parker said that he would report back to the next meeting progress made in relation to the discharge letters. He added that they are currently looking at the charts, and once the results have been obtained they will see how they compare to what was expected.

**Action: Dr Parker**

#### **4.3 Annual Audit Symposium**

Dr Parker confirmed that both lecture theatres in the Clinical Education Centre have now been booked for the Annual Audit Symposium to be held on Thursday 17<sup>th</sup> May 2001. Mrs Witherow informed the meeting that Miss Duddy has suggested holding a full-day Symposium with both Clinical Audit and HOSQIP presentations. She then asked the group for their opinions on this and asked how this could be organised. It was suggested that the day would commence at 11.00am and run to 12.30pm which would consist of the HOSQIP presentations and then re-commence at 2.00pm and run to 4.30pm with the Clinical Audit

presentations. It was agreed that further discussions would be required at the next meeting. Dr Parker said that it would be necessary to invite representatives from WHSSB, Foyle and Sperrin Lakeland Trusts. It was agreed to send out letters informing them of the Symposium and that further details would be sent once the content of the day has been finalised.

**Action: Miss Quinn**

#### **4.4 Junior Doctors**

Dr Parker said that the audit meetings for Junior Doctors were put on hold due to the very poor attendances. He informed the group that letters have been received from the Royal College of Physicians and the Royal College of Surgeons in Ireland by Dr Fulton stating that when they are re-assessing hospitals for recognition they will be looking for evidence of audit being carried out and evidence of assistance being provided. Dr Parker said that there is therefore a need to re-look at the situation of the audit meetings for Junior Doctors. It was suggested that meetings take place for a three-month period from February to April and the attendance monitored.

#### **4.5 Clinical Audit Department Staffing**

Mrs Witherow informed the meeting that the issue of staffing within the Clinical Audit Department has been raised with Miss Duddy. It was agreed that Dr Parker and Mrs Witherow should meet with Miss Duddy and Dr Fulton to discuss this issue. Miss [REDACTED] agreed to arrange this meeting. Mrs Brown asked how the Research Nurse would fit into the Audit Committee to which Mrs Witherow replied that the Research Nurse would report to the relevant line manager on issues that she was working on.

**Action: Miss Quinn**

Mrs Witherow said that in relation to the Transfer Audit the group have met and a report on Gregory's results were presented. She added that a small sub-group has now been set up to look at the issues of documentation and equipment.

#### **5.0 REGIONAL AUDIT GROUP**

Dr Parker informed the meeting that the Regional Audit Group would meet later in the month and added that he would report back on proceedings at the next Clinical Audit Committee meeting.

**Action: Dr Parker**

## **6.0 ANNUAL AUDIT REPORT**

Dr Parker said that he has issued a reminder to the Audit Co-ordinators seeking their specialties audit reports. Mrs Witherow informed the meeting that she too has requested audit reports from the Nurse Specialists. Dr Parker said that to date he has received reports from Ms Brennan, Mrs Doherty, Mrs Hutchinson, Sister Burke, Mrs Johns and Miss Patton. He added that A&E, Anaesthetics and Obstetrics & Gynaecology have replied as have Oral Surgery. Mrs Witherow suggested that the group write to the individuals who have sought audit assistance and ask them for their reports. Dr Parker said that there have been audits carried out that have not been approved by the Committee. He agreed to write out again to the Audit Co-ordinators giving them a deadline of two weeks.

**Action: Dr Parker  
& Miss Quinn**

Mrs Witherow said that if the Audit Department have provided support to staff then the Committee should list that support was given, however, no feedback or report has been received. Dr Parker said that a list of the work done should be included. Mrs Witherow said that there is a clear record of the workload of the department.

## **7.0 LETTER FROM DR A. McNEILL**

Dr Parker informed the meeting that Dr McNeill has sent him a letter regarding a regional Thrombolysis Audit. He added that Dr McNeill has attended meetings in Belfast regarding this audit and reported that it is unlikely that it would be centrally funded and that individual hospitals will have to take it onboard. Dr Parker then proceeded to read the letter to the group as well as a letter to Mrs Burnside from Dr McNeill regarding the audit. Dr Parker agreed to make an appointment with Mrs Burnside to discuss the issue and reply back to Dr McNeill informing him of this.

**Action: Dr Parker**

Mrs Witherow said that such assistance would not be available with the current resources. Discussion then followed on the need to carry out this audit and where funding could be obtained. Mrs Witherow said that 500 charts to be pulled is a lot of work. Dr Parker added that it would be 500 charts over 6 months, therefore, the charts could be pulled over and over again. Discussion then followed on the problems, which could be encountered if regional audits are carried out, and the implications on other audit work which has been requested.

## **8.0 BLOOD TRANSFUSION AUDIT**

Mrs Witherow said Miss Quinn had distributed correspondence at the beginning of the meeting in relation to Blood Transfusions. She then proceeded to take the group through this correspondence. Discussion then followed on how to take this audit forward. It was suggested that assistance be provided by each Directorate to carry out the audit in the form

of a representative from each Directorate being seconded to take part in this work. Dr Parker and Mrs Witherow agreed to raise this issue with Miss Duddy and Dr Fulton at their meeting.

**Action: Dr Parker  
& Mrs Witherow**

## **9.0 CURRENT AUDIT PROJECTS**

Mr Kennedy distributed an update on the current audit projects. Discussion then followed on the current and proposed audit projects.

### **Current Audit Projects:**

2. Dr Parker agreed to check whether this audit has previously been carried out.
10. It was agreed that clarification was required on why x-rays were being pulled.
11. It was agreed that ethical approval would be required to carry out this audit.

### **Proposals Received Since Last Meeting:**

1. Dr Parker agreed to speak to Mr Gilliland regarding this audit.
2. It was agreed that there was a need to re-look at the form to be used in this audit, and that it should only proceed if approval has been given by the Clinical Director or Clinical Services Manager. The group reviewed the form to be used by A&E and it was agreed that there was a need to control the information being gathered on patients. Dr Parker said that the audit proposal form should be returned to A&E for completion in order to make it compatible with the Formic system. Mrs Witherow said that she feels this is a survey rather than an audit. Dr Parker said that he was unaware that the work had been done until the information had been gathered and the Audit Department asked for assistance in analysing it. It was noted that the information had been gathered without approval by either the Audit Committee or the Ethics Committee and that the audit proposal form had been received after the information had already been gathered. Dr Parker agreed to write to Ms Brennan to express the concerns of the group in relation to this audit.
3. Approval was given for this audit to proceed.
4. Approval was given for this audit to proceed.

Mrs Witherow said that a decision would be needed on which audit gets priority. Following discussion it was agreed that audit number 4 would be given first priority and then audit number three. Dr Parker agreed to write to Mr Gilliland and Ms Brennan regarding the above audits.

**Action: Dr Parker**

## **10.0 ANY OTHER BUSINESS**

### **10.1 Conferences**

Mrs Witherow said that information had been distributed regarding Conferences and Calls for Abstracts for Conferences. She asked if Miss Duddy and Dr Fulton should be asked to fund a member of the Committee to attend any of these conferences. It was agreed that all submissions for the Calls for Abstracts should go through the Committee and it was also agreed that the Documentation Audit should be submitted. Dr Parker asked if the Trust are any closer to getting the Clinical Governance Committee up and running. Mrs Brown said that some of the Committees, which will report to the Clinical Governance Committee, are up and running, however, the actual Clinical Governance Committee has yet to be established. Mrs Witherow said that a proposal has been tabled at Trust Board for approval and added that Mrs Burnside has received a copy of the Clinical Governance Report.

## **11.0 DATE, TIME AND VENUE OF THE NEXT MEETING**

The next meeting will take place on Thursday 8<sup>th</sup> March 2001, commencing at 1.00pm in the Seminar Room, Trust Headquarters, Altnagelvin Hospital.

There being no further business the meeting concluded at 3.00pm.