

SQS CIRCULARS: ASSURANCE TEMPLATE FOR HSC BOARD AND TRUSTS

Circular number: HSC (SQSD) 17/10 Preventing fatalities from medication loading doses

For Implementation by: 22 June 2011

(Section 1 is to be completed by HSCT and forwarded to HSCB for consideration. Section 2 should then be

completed by HSCB and forwarded to DHSSPS)

SECTION 1:

To: Chief Executive, HSC Board

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I can confirm that the required actions set out in the above circular have been implemented in full by the due date.

X

I can confirm that the actions in the above correspondence have been partially implemented by the due date. The issues impacting on full implementation along with the timescales for resolving these issues are set out in the box below:

This has been reviewed by the Trust Drugs & Therapeutics Committee which is overseeing work to identify a list of high risk drugs – this list is to be reviewed (September 2011 and any agreed actions taken forward).

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I can confirm that the organisation has been unable to implement any actions of the above circular for the reasons set out in the box below. (The actions being taken/required to resolve or clarify the issues preventing implementation and the timescales for this should be outlined):

I confirm that the HSC Trust's Chief Executive and designated senior manager have been advised of this response and are content that it should be submitted to the HSC Board.

Response submitted by: Christine Murphy

on behalf of: Dr Tony Stevens HSC Trust. Date: 14 July 2011

SECTION 2:

To: Director, Safety, Quality & Standards Directorate, DHSSPS

I note the response from the Trust and –

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I can confirm that the HSC Board is content the action(s) taken, referred to in Section 1, complies with the requirements of the above circular.

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I can confirm that further action, as outlined in the box below, is needed to ensure compliance with the requirements of the above circular

I confirm that the HSC Board's Chief Executive and designated senior manager have been advised of this response and are content that it should be submitted to the Department.

Response submitted by: _____ (Name & contact details of person submitting response) on behalf of HSC Board. Date: _____