

Board Meeting Agenda

Date and Time of Meeting: **Wednesday 13th May 2015 @ 11.15am**

Venue DAC Beachcroft Leeds Office, 7 Park Square East, Leeds, West
Yorkshire LS1 2LW

Part 1

- 1** Conflicts of Interest of Members
- 2** Minutes of Board Meeting held on 11th March 2015
- 3** Matters arising and other matters of which notice was given
- 4** Chair's Report
- 5** Chief Executive's Report – for discussion and where indicated approval
 - Appendix 5.1 – Corporate Services Report
 - Appendix 5.2 – Claims Report
 - Appendix 5.3 – Technical Claims Unit Report
 - Appendix 5.4 – FHSAU Report
 - Appendix 5.5 – NCAS Report
 - Appendix 5.6 – Safety and Learning Report
 - Appendix 5.7 – Communications Report
- 6** Responsible Officer Report – for noting
- 7** Future Board Meetings
- 8** Any Other Business
- 9** Date and Venue for next meeting – Wednesday 8th July 2015 at 9.00am
at NHS LA Office, BR1&2



particular the assessment mix which has changed and we are moving away from a full assessment to a modularised assessment.

5.15.4 *Healthcare Professional Alert Notices (HPANs)*

Peter Dickson who is retiring at the end of April 2015, is passing on the responsibility of overseeing the day to day issuing and reviewing of HPANs to Dr David Scott, Assessment Adviser, until a replacement senior role has been recruited. In terms of risks to the organisation on HPANs, we have ensured that there is a full handover and we are looking to move the responsibility of HPANs to the assessment and intervention function which deals with more complex issues and so makes more sense in terms of governance of HPANs. It was suggested that we should make some information available as to how the NHS LA deals with HPANs and the Chief Executive will look into this.

Actions: CE

5.15.5 *Education and Learning Programme*

February and March are proving to be a busy period in terms of training courses and new dates have recently been launched for London, Northern Ireland, the North and Wales to ensure geographical coverage.

5.16 *Safety and Learning Report*

Since the closing date for Safety Improvement Plans on 16th January, we have received 126 bids from members with a number of organisations submitting more than one bid. Therefore in total the Safety and Learning Team have reviewed 243 bids. Not all organisations have submitted plans and some of those that have did not submit a request for funding. The plans have varied in size and have been loaded on to the safety and learning environment on the SharePoint system. The bids have been divided up geographically and have been scored by the Safety and Learning Team, claims and finance through Steering Group meetings, the last of which was held on 9th March. We now have a total of the funding requested from the bids.

The Director of Safety, Learning and People thanked the teams involved and the extensive work undertaken on reviewing the bids for the Sign up to Safety Campaign which the Board also acknowledged.

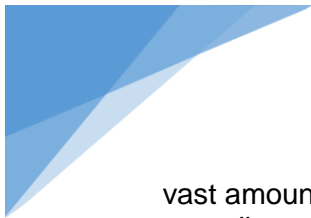
The Approvals Committee took place on 10th March. Mrs Levenson, who was invited to attend the Approvals Committee as an observer, commended the robust processes which were in place in reviewing the Safety Improvement Plans and bids.

Once we receive confirmation from DH of the funding, members will be notified by letter from the Chief Executive on the outcome of the assessment of their SIPs. The financial awards will be allocated by 1st April. We will also be asking for confirmation that the funds will be used to deliver their Safety Improvement Plans but this is not something that NHSLA is in a position to monitor. In terms of the work that we are doing to assist members in reducing their claims, we will be requesting that successful organisations commit to sharing their SIPs on their websites and working with other organisations through buddying up arrangements to share learning. We will also look at specific specialties, for example where members have identified that they are looking at fetal heart rate monitoring that these members are grouped together so they can work together.

The Board noted that the process has been successful in encouraging some members to develop clear and thoughtful plans to improve patient safety. It was suggested management could look into using the information and lessons learned by working with an independent researcher to develop a report on the findings from the Sign up to Safety Campaign.

Action: CE

Through the Sign up to Safety Campaign process, the Safety and Learning Team have gathered



vast amounts of intelligence which will be shared across the membership. The Team have been attending conferences, panel firm events raising the profile of the NHS LA, and have also undertaken a number of deep dives and have produced literature on VTE, sharps injuries and surgical burns which will be developed into publications for front line staff.

The Department of Health also thanked the NHS LA for the efforts put into this work.

The Board noted the Chief Executive's Report and appended reports.

6 Code of Conduct

Following NCAS transferring to the NHS LA in April 2013, it was noted that the NHS LA did not have a Code of Conduct in place. One of the key recommendations from the Bullying and Harassment review was to create a Code of Conduct for staff setting out the expected behaviours and standards required of all employees, potential employees, Board members, staff on secondment to the NHS LA and all those working on behalf of the NHS LA such as contractors, volunteers, those on work experience and student placements. It should be noted that failure to meet the standards and requirements of the Code of Conduct may result in disciplinary action being taken that is in line with the relevant policy. The Policy has been seen by the Joint Negotiation Committee and Staff Engagement Group, who had no comments, and has been approved by the SMT.

The Board approved the NHS LA's Code of Conduct.

7 Any Other Business

The Chair concurred with the Chief Executive's comments earlier in the meeting and on behalf of the Board thanked Professor Rory Shaw for his dedication and contribution to the work of the NHS LA during his term as Non-Executive Director.

8 Date of next meeting

The next Board meeting is scheduled for Wednesday 13th May 2015 to be held in **LEEDS** at DAC Beachcroft Leeds Office, 7 Park Square East, Leeds, West Yorkshire LS1 2LW at **11.15am**.

Signed

Date

5.6 Safety and Learning Report

The Board is asked to **note** the Safety and Learning Report

5.6.3 Introduction

This report provides the Board with:

- an update on the progress of the NHS LA support to the Sign up to Safety Campaign in relation to the incentivisation initiative for member Trusts to submit a bid to the NHS LA against specific criteria. A successful bid, which could attract an incentive payment of up to 10% of a member's contribution, would be able to evidence how its safety improvement plan could reduce its claims and harm; and
- an update on the engagement activities of the Safety and Learning team which partly overlap with the Sign up to Safety work which has been an organisational focus for the NHS LA and will shape some future workstreams for the team.

5.6.4 NHS LA support for the Sign up to Safety Campaign

Since the last Board report on Sign up to Safety, the NHS LA has completed its assessment and approvals process for the bids which were submitted to it from the Sign up to Safety Campaign team within the deadline of 16th January 2015.

A robust governance process has been followed to assess bids according to agreed criteria through a cross directorate (clinical, claims and finance membership) steering group whose recommendations were considered by the Approvals Committee (executive membership). A statistical summary of the numbers of member Trusts submitting and the outcome of the assessments is presented below:

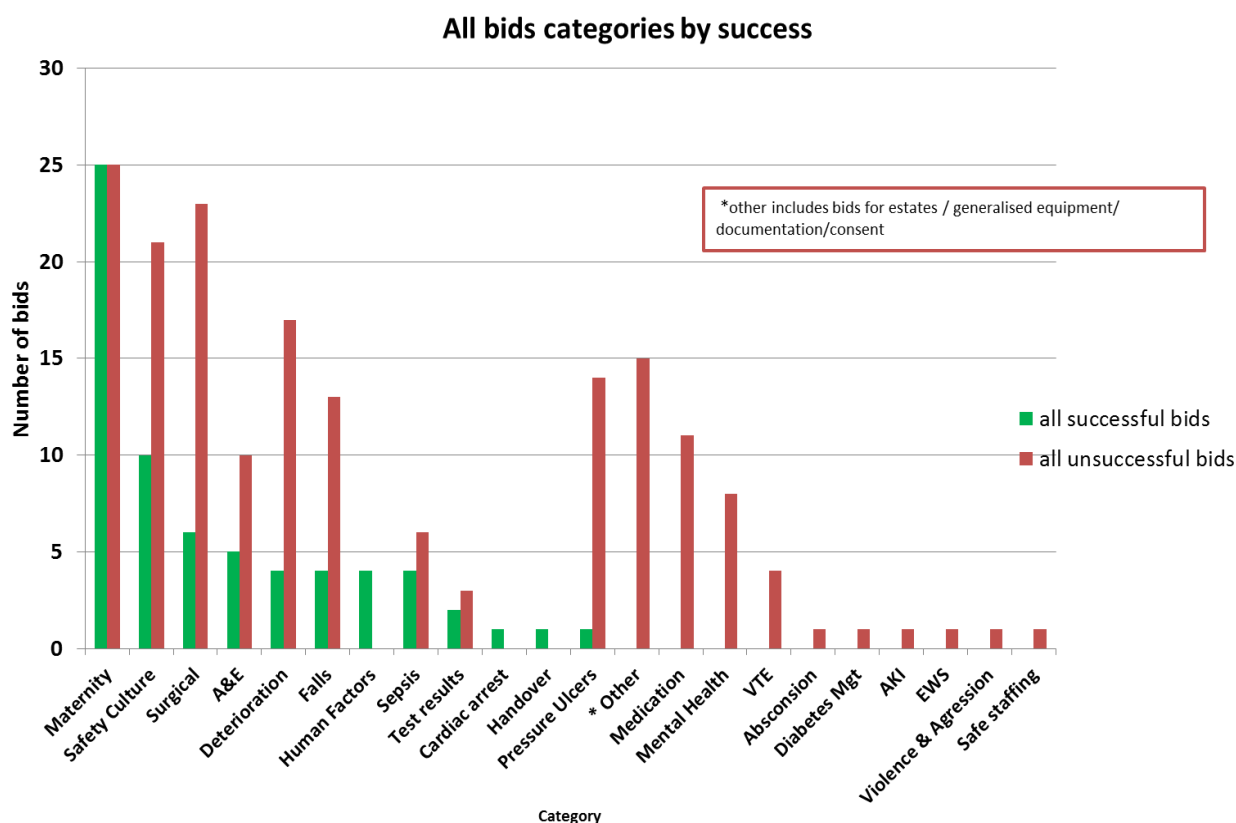
Membership participation	Volume	Comments
Member Trusts which were Signed up to Safety and submitted bids to the NHS LA	113	Bids were received from a wide range of small, medium and large acute Trusts with a broad geographical reach which is also reflected in the outcome of the bids, successful or not.
Number of bids submitted in total	243	Many members submitted multiple bids, the highest being 9 from one member.
⁴ All Members (including acute/ MH/ambulance/community) signed up to safety but did not submit bids.	70	

⁴ Figures based on membership list as of March 2015 - mergers taken into account wherever possible

Acute Trust members (including MH) Signed up to Safety within the deadline but did not submit a bid.	59	It is important to bear in mind here that the incentive related to the clinical scheme. As a result, mental health trusts, community trusts and most ambulance trusts which mainly have non clinical claims were under represented. Trusts signed up by the deadline in this position number 11.
Trust members signed up to safety after the deadline and therefore could not submit a bid.	9	
Trusts still not signed up to safety	Approx. 50 (as at 20 April)	
Outcome of assessment	Successful Bids	Non Successful Bids
Approvals Committee recommendation submitted to the DH having achieved an assessment of over 55%.	67	176

Graph 1

The graph below illustrates the themes of all the bid submissions and where bids in these areas were successful or non-successful.



Examples of successful bids:

Orthopaedics

One trust undertook a detailed review of the orthopaedic data in partnership with their legal team identified this as a high volume claims area. Contributory factors were analysed which resulted in a project plan to optimise technology to improve patient handover and critical triggers for care review and ultimately improving the pathway for care.

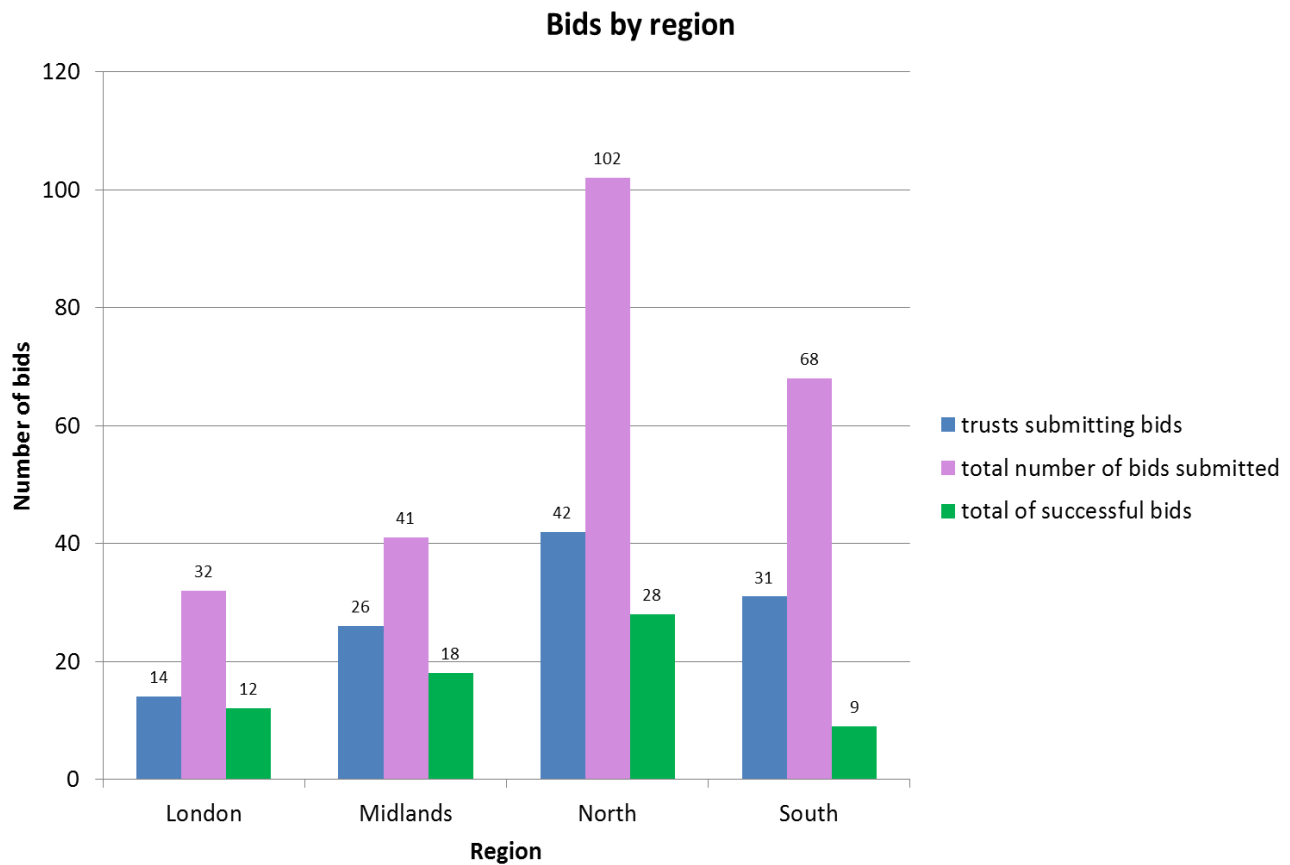
Human Factors Education

Through root cause analysis the Trust identified Human Factors (HF) as contributory factors in three of the high volume/high value claims specialities (Trauma & Orthopaedics, Emergency Department & Theatres). The project outlines the introduction of an audio surgical safety checklist for use in operating theatres and the establishment of 'risk facilitators' to implement a systematic programme of Human Factors training and awareness, leading to a cohort of HF experts and trainers in the three selected specialties.



Graph 2

The graph below demonstrates the wide geographical reach of bid submissions.



The table below provides an analysis of the category of Trusts nationally which did or did not submit bids

Region	Trust Type	Eligible Members	Number Submitting SIP	% of eligible members submitting a bid	Individual Bids	Successful Bids	Percentage Successful Bids
London	Community	2	0	0%	0	0	0%
London	NHS Trust	13	8	61.50%	21	8	38%
London	NHS Trust - Ambulance	1	0	0%	0	0	0%
London	NHS Trust - Foundation	18	6	33.33%	11	4	36%
London	NHS Trust - Foundation Mental Health	1	0	0%	0	0	0%
London	NHS Trust - Mental Health	3	0	0%	0	0	0%
Midlands and East of England	Community	6	1	16.66%	1	0	0%
Midlands and East of England	NHS Trust	26	12	46%	23	11	48%
Midlands and East of England	NHS Trust - Ambulance	2	1	50%	1	0	0%
Midlands and East of England	NHS Trust - Foundation	35	11	31%	15	7	47%
Midlands and East of England	NHS Trust - Foundation Ambulance	1	0	0%	0	0	0%
Midlands and East of England	NHS Trust - Foundation Mental Health	1	1	100%	1	0	0%
Midlands and East of England	NHS Trust - Mental Health	1	0	0%	0	0	0%
North of England	Community	4	0	0%	0	0	0%
North of England	NHS Trust	12	6	50%	22	2	9%
North of England	NHS Trust - Ambulance	2	2	100%	5	1	20%
North of England	NHS Trust - Foundation	52	34	65%	75	25	33%
North of England	NHS Trust - Foundation Ambulance	1	0	0%	0	0	0%
North of England	NHS Trust - Foundation Mental Health	2	0	0%	0	0	0%
North of England	NHS Trust - Mental Health	1	0	0%	0	0	0%
South of England	Community	3	0	0%	0	0	0%
South of England	NHS Trust	18	10	55.55%	27	4	15%
South of England	NHS Trust - Foundation	32	20	62.50%	40	5	13%
South of England	NHS Trust - Foundation Ambulance	3	1	33.33%	1	0	0%
South of England	NHS Trust - Mental Health	1	0	0%	0	0	0%
		241	113		243	67	259%

Outcome Process

All members have now received outcome letters. Unsuccessful member trusts have been invited to seek feedback from the safety and learning team and seven trusts have so far taken up this offer and appreciated the constructive feedback. Outcome letters to successful member trusts asked all Trust CEOs to commit to a series of requests below in order to receive funding:

1. The Chief Executive is asked to provide confirmation that the funds allocated will be used only in relation to the submitted bid;
2. The Trust is asked to publish a summary of their successful bid, including details of the anticipated outcomes, on their public website;
3. The Trust will provide details of their successful bid(s) to their Trust Board and their local commissioners and provide regular updates on the monitoring of their progress;
4. The Trust will provide feedback and share safety and learning themes with external partners and directly with the Safety and Learning team at the NHS LA;
5. The Trust will agree to collaborate with the NHS LA and Royal Colleges in the progress of implementation of the bid and in particular for all maternity bids with relevant Royal Colleges as regards maternity claims and outcomes from the bid. More details will follow.
6. The Trust will agree to 'buddy' with an unsuccessful bidder in terms of sharing best practice to support quality improvements to those requiring additional support;
7. The Trust will agree to coordinate with Trusts requesting the same specific equipment or training to ensure procurement benefits from economies of scale and value for money – NHS LA will be in contact to provide details of those Trusts with shared purposes, equipment and training.

At the time of writing (20 April) 30 successful trusts have confirmed their commitment to the conditions for funding and the rest of the Trusts are being reminded to do this.

Funding

The NHS LA received Directions to disburse funds to successful trusts at the end of March 2015 once CEOs had committed to the conditions it set out. The total of the funds agreed by the Department of Health (DH) was £20m on the basis of successful bids. After allocating the funds to Trusts an amount of less than £1m will be held at DH discretion as a contingency and for the NHS LA to evaluate the scheme and outcomes from the bids.

Follow up and Sharing Learning

To ensure learning and outcomes from successful bids are shared with the wider NHS and that collaboration with stakeholders and experts secures an optimum delivery of the plans, Trusts have been requested to share their bids publically including on their public websites.

The NHS LA will facilitate “buddy up” arrangements between unsuccessful Trusts and successful to share best practice. Some of the generic areas of successful safety improvement plans can be applied to trusts such as community and mental health trusts which were unable to make a bid. Other workstreams will include further analysis, facilitating the achievement of economies of scale where trusts have bid for the same equipment, tracking of progress on websites and engagement with the Trusts and the Sign up to Safety Campaign.

The maternity bids represent a particular opportunity to put in place measures to reduce claims in this specialty. Trusts with successful bids are being asked to collaborate with the NHS LA and relevant Royal Colleges in the progress of the implementation of the bids as regards claims and outcomes. Immediate steps to build on the maternity workstreams include a focus event to bring together bidders for maternity improvement plans and facilitate how they can shape outcome measures.

Lessons Learnt

There are several lessons learnt from the NHS LA support to the Sign up to Safety Campaign Team. Positive ones include the opportunity for the organisation as a whole to engage in a time limited cultural change movement from a whole systems approach. Engagement with Trusts was incremental and began with rolling out clinical scorecards to member trusts which signed up to safety and then to all members. Feedback has been extremely positive from members on the use of scorecards and their visuality. The Safety and Learning Team has been able to facilitate ensuring the links between safety and claims are established from ward to Board.

Some lessons learnt from Sign up to Safety generally in relation to Trusts include:

- The need to have a communication strategy early for the NHS LA and for this to read across to the communications of Sign up to Safety
- Establish a timeline early on which does not disadvantage Trusts as the need for Trusts to complete their Safety Improvement Plan and bid over a period of winter pressures leading up to the Christmas holiday period added an additional pressure which deterred some Trusts from applying. Their internal sign off processes had to be factored in and this also represented a challenge, sometimes insurmountable, for complying with the deadline. The NHS LA was not able to influence the timeline planning in relation to bids at an early stage.



- Consideration needed of the equity in relation to Trusts which mainly had non clinical claims (Mental Health Trusts, Community Trusts and some ambulance Trusts) and could not therefore bid for funding from the clinical scheme contributions and evidence how high value/volume claims could be reduced.
- More clarity on the demarcation of roles between Sign up to Safety campaign and the NHS LA support of the campaign would have reduced some confusion on the part of Trusts.
- Internally to the NHS LA, a more realistic assessment of the organisational capacity needed to run the exercise would have been helpful and its timing within the fiscal year.
- The opportunity to be more directional with Trusts on the criteria template requirements is another factor which should be addressed if a similar initiative were to be considered again.

5.6.5 Safety and Learning General Update

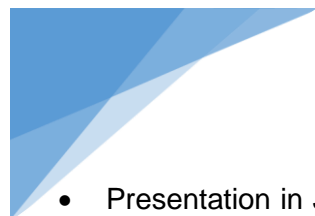
Engagement Activities

The NHS LA support for the Sign up to Safety Campaign has been an overriding focus for the safety and learning team in a condensed timeframe since the last Board. From March-end of April, engagement with members in different regions has included, but not been limited to, enabling members to understand their claims profile in relation to scorecards.

In order to present at the following events and produce data for these and other requests, the Safety and Learning team has undertaken the relevant deep dives into claims data so that headline information is as meaningful as possible and sets out what the financial impact of claims represents for the NHS economy.

a) Clinical engagement

- Presentation of Maternity Claims data to the Association of Anaesthetists of Great Britain and Ireland. Participants were particularly interested in data on maternity pressure ulcers and causes of unnecessary pain.
- The Whittington Hospital NHS Trust held a series of seminars (March) as part of their patient safety week. The Safety & Learning lead and the Trust Legal Services Manager presented jointly to an audience including the Chief Executive Officer. The Trust demonstrated how they had used their clinical claims scorecard to inform the priority areas of focus for their safety improvement initiatives.
- The NHS LA Safety and Learning Team has secured a seat on the Royal College of Anaesthetists on the Safer Anaesthesia Liaison Group (SALG). This will forge a closer relationship with this body and support it with data as requested and regular presentation on safety issues in anaesthesia from practice and the NRLS and now claims to drive improvement and reduction.
- Participation has continued in the NHS England Patient Safety Expert Groups and networks. Links have been developed further with Regional and Sub-Regional teams of NHS England in the North.
- Presentation at the national Elderly Care Conference Manchester 'Creating a Safer NHS' organised by Browne Jacobson.
- The NHS LA Member Discussion Forum arranged by Clyde & Co London, in March was attended by approx. 30 member Trusts. Joint Safety and Learning Lead and Claims presentations resulted in good engagement and discussions with members on current developments in the NHS LA including Sign up to Safety support and claims scorecards.



- Presentation in Jersey re maternity claims, with Baby Life line training, on work NHS LA is undertaking to help reduce claims through its 'Safety and Learning' function.

b) Non Clinical Engagement

- The non clinical forum in Liverpool (March) organised by Hill Dickinson panel, was attended by around 50 claims managers, patient safety leads and clinicians. As a joint collaboration with NHS LA Claims team and City of Sunderland Hospitals NHS. This Trust dispelled the "myth" that non clinical claims were not costly or open to challenge. Feedback was very positive and suggestions were made coding quality and parameters for non clinical scorecards when they are released so that Boards are able to focus on red zone non clinical claims. The impact of peer influence from members in this presentation will inform future models of presentations.
- Safer Needles Network (March) – this presentation included a focus on the occupation of needlestick injury claimants and collaboration with the NHS Supply Chain on the Trusts' procurement and use of safer needles (as per the EU Directive) is being followed up.
- NHS LA presented at the NHS England Temporary Staff Conference and exhibited its stand which attracted considerable interest.

Future plans 2015/16

The team are working across the NHS LA and with external stake holder scoping a project specific to maternity, to improve coding for the purpose of further developing a safety and learning data base, publications and learning materials to be shared.

The NHS LA are presenting, participating and exhibiting in a number of forthcoming conferences over the next three months. Feedback and evaluation from these will be provided for the next Board meeting.

The team will be working within the 4 geographical regions of England, in particular engaging with member organisations in feeding back and supporting Trusts from the Sign up to Safety bid process. They will also be working with those that did not submit bids, to support them with embedding learning from their score cards at executive, departmental and front line levels across the organisations.

Further work is planned with a focus on supporting learning to help reduce non clinical claims following the distribution of the non-clinical score cards.