

NATIONAL QUALITY BOARD

Human Factors in Healthcare

A paper from the secretariat

Purpose

1. The National Quality Board's (NQB's) Human Factors in Healthcare Concordat¹ was published on the NQB webpage on 19 November 2013, in line with the publication of the Government's response to the Francis report into failings at Mid Staffordshire NHS Foundation Trust.
2. The Concordat has been positively received, but there is now considerable interest in how the commitments set out in the Concordat will be progressed (**Annexes A and B**).
3. This paper:
 - provides the NQB with an update against progress;
 - asks the NQB whether it feels adequate progress is being made in driving forward this agenda, and whether it would like to receive regular progress updates; and
 - asks whether NICE should be commissioned to develop guidelines for the NHS on specific Human Factors topics.

Background

4. In September 2012, the NQB heard from Sir Stephen Moss, Prof. Jane Reid and Prof. Bryn Baxendale about clinical Human Factors and their potential impact on quality and efficiency in the NHS. The Board was keen to pursue this important agenda, and agreed to establish a sub-group to consider how the functions of the statutory organisations represented on the NQB could be better utilised to reflect the impact of Human Factors

¹ [National Quality Board Human Factors in Healthcare Concordat](#)

on quality; and collectively determine and co-ordinate action, agreeing a set of actions that various organisations would take to pursue this agenda.

5. The work of the sub-group culminated in the publication of the *Human Factors in Healthcare Concordat* in November (in line with, and referenced in, the Government's response to Francis). The Concordat signalled the overarching commitment of signatory organisations to support the NHS to understand and adopt Human Factors principles and practices. It also set out a number of specific commitments from the signatory organisations to build momentum for this agenda (**Annex A**) and a series of practical actions and steps, to be led by Health Education England and NHS England working with partners across the system, to ensure the progression of this agenda (**Annex B**).

Response to the Concordat and next steps

6. The Concordat has been positively received to-date, with interest expressed by other bodies to retrospectively endorse this commitment to the Human Factors agenda.
7. However, although the Concordat clearly sets out the NQB's belief in the vital contribution Human Factors principles and practices can make towards improving the quality (effectiveness, experience and safety) of care for patients, it was clear from the outset this was only the first step towards embedding Human Factors across the NHS. There is now considerable interest in how the commitments and steps set out in the Concordat are to be progressed.
8. Therefore, if the commitment the NQB has made to this agenda is to be taken seriously, and the Concordat is to have real impact, it is important that clear action is being taken.
9. The Concordat included a range of actions that individual organisations had committed to take to embed the Human Factors agenda in their work and across the system. These are listed at **Annex A**. Below are updates from several organisations on progress in taking forward those commitments. Progress updates are outstanding from a number of organisations as they are at earlier stages in their thinking, but a fuller update can be brought to the next NQB meeting.

Health Education England

HEE has established a small group to investigate its role in the introduction of Human Factors into curricula for the future and current workforce.

NHS England

NHS England is establishing a network of 15 Patient Safety Collaboratives (PSCs) across England – the largest and most comprehensive collaborative improvement initiative in the world. The PSCs will offer staff, users, carers and patients the opportunity to work together locally to tackle specific patient safety problems and build patient safety improvement capability using evidence-based improvement methodologies.

The authorisation process will include testing that each local system understands their responsibility to ensure that the programmes they put in place match the aspiration set out in the Concordat, and that they look to identify and address current capability, barriers to adoption, future requirements and best practice in Human Factors in healthcare.

Progress to date:

- Design Day held for 120 experts on 15 January, with others planned across England
- NHS England Public Board signalled support for the programme
- Funding requirement of £12m per year for a minimum of 5 years identified (and agreed in principle)
- Currently working up outputs from the Design Day for publication.
- Proposal for change package development in progress
- Initial priorities, drivers and change packages under development. These will be developed to include human factors principles in education and training curricula.

Feedback from the Design Day as well as all expert advice and research on collaborative programmes cautions us not to be too prescriptive. Each local collaborative will need to decide on its own priorities and approaches within the confines set out in the authorisation process. All collaboratives will be provided with support in the form of change packages for established workstreams which they can adapt as they see fit, though these will be supported to include promotion of human factors at the local level, consistent with the Concordat.

NICE

NICE is actively considering and exploring the best way to take the Human Factors agenda forward in its current guideline programme. Recommendations about Human Factors are most likely to be relevant to guidance on service delivery, however NICE could develop guidelines for the NHS on specific Human Factors' topics, if given a formal referral in this area. This may be an area the NQB wishes to consider.

GMC

The Shape of Training Review also recommended the implementation of general professional capabilities. The GMC is working closely with the Academy of Medical Royal Colleges and other leading experts in curricula and assessment to establish the overarching generic themes. The GMC will also be engaging with other key stakeholders in the second half of 2014.

NMC

The NMC is currently preparing a draft revised code and discussing how Human Factors may be explicitly referred to within this. In relation to the commitment on education standards, the evaluation of the current standards will commence this year but the standards will not be revised until 2016-17. The education standards are likely to be the better locus for Human Factors as the code is high level and there may be some alignment with work HEE is undertaking on patient safety in healthcare professionals' education.

The Parliamentary and Health Service Ombudsman

The PHSO is committed to exploring further the ways in which Human Factors and root cause analysis can assist in its work. It has held an initial training seminar with key staff to raise understanding and awareness of the issues. Any further work will be considered as part of the current redesign of its operational services and our development of new quality assurance frameworks.

NHS Employers

NHS Employers commitment is predicated on having a published evidence base and practical applications that can be referenced and signposted on its website in the first instance. Its new website goes live at the end of February, which will mean there will be further capacity to support the Concordat.

The NHS Litigation Authority

The NHS LA continues to provide human factors information and resources for its members via its Safety and Learning Library in the Extranet. Individuals with Human Factors expertise have also been recruited in order raise awareness of Human Factors and use this knowledge to help the NHS LA and the NHS to:

- understand why errors are made;
- understand 'systems factors' behind litigation claims;
- improve the safety culture of teams and organisations;
- reiterated the principles of saying sorry and explaining what went wrong;
- enhance teamwork and improve communication between staff and organisations;
- and
- analyse the claims and practitioner cases to identify what went wrong and predict risks in the future.

Conclusion

10. Although progress is being made in taking forward the NQB's commitments to the Human Factors agenda, there is a need for the NQB to maintain oversight of this important agenda if the momentum required to support the NHS to embed Human Factors principles and practices across the NHS is to be sustained.

NQB members are asked to consider whether:

- ***progress in driving forward the spirit and commitment of the Concordat is adequate, both collectively and individually.***
- ***regular progress updates should be brought to the NQB.***
- ***NICE should be commissioned to develop guidelines for the NHS on specific Human Factors topics.***

David Haslam
Chair, NQB Secretariat

Annex A

Organisational commitments from the NQB Human Factors in Healthcare Concordat (November 2012)

Organisation	Commitments
NHS England	NHS England is harnessing Professor Don Berwick's call for the NHS to nurture and embrace a culture of learning and continual improvement by supporting a nationwide programme of safety improvement collaboratives. These collaborative groups will be supported nationally to harness improvement science and other techniques to deliver locally owned and led programmes that deliver safer care. Existing examples already successfully utilise Human Factors approaches and NHS England will ensure the use of Human Factors science is applied, where appropriate, through the safety collaborative programme
Health Education England (HEE)	HEE is exploring how Human Factors practices and principles can be included in the curricula and training frameworks for health professionals.
Care Quality Commission (CQC)	CQC is radically changing its assessment of quality in NHS organisations, and in doing so is embedding Human Factors principles within its assessment of how safe, effective, caring, responsive and well-led organisations are; with a particular focus on developing just and open cultures, that encourage learning from mistakes and consider how alert staff are to emerging risk.
National Institute for Health and Care Excellence (NICE)	To improve recommendations on patient safety, NICE is considering how evidence on Human Factors can be taken into account in the development of clinical guidelines.
Public Health England (PHE)	Human Factors are of undoubted importance in public health work, for instance around the management of outbreaks of communicable diseases and in the management of serious incidents. PHE is working with partners to identify how Human Factors principles can support the delivery of high quality, safe public and population health services that contribute to improving and protecting the public's health.
NHS Trust Development Authority (NHS TDA)	NHS TDA is considering how it can best reflect Human Factors principles as part of its oversight, support and development of NHS trusts.
General Medical Council (GMC)	The General Medical Council has reflected the importance of recognising Human Factors in the development of generic professional capabilities for post graduate medical curricula. The context for this is the GMC's core guidance for all doctors, Good medical practice, which sets out what is expected of doctors, including communication and partnership working with patients.
Nursing and Midwifery Council (NMC)	The Nursing and Midwifery Council (NMC) is interested in the impact of Human Factors on the practice of nurses and midwives. Human Factors will inform the review of their code of conduct and practice for nurses and midwives in 2014 and education standards in due course.

NHS Employers	NHS Employers will use its extensive communication and engagement channels with NHS employer organisations to ensure that the evidence base for Human Factors and its practical application is made readily available. Through its work with employers on organisational development, cultural change and supporting values driven behaviour, it will ensure that this evidence base is incorporated into our programmes and resources
Parliamentary and Health Service Ombudsman (PHSO)	The PHSO is developing expertise in Human Factors science and root cause analysis to help providers learn from complaints through better understanding of why mistakes happen.
NHS Leadership Academy	The NHS Leadership Academy is working to promote, educate and share the Human Factors principles throughout its professional leadership programmes and health system development work. In particular, it is ensuring Human Factors approaches are embedded in all of its programmes are integral to its online materials and included in conversations with partners, participants and patients.
NHS Litigation Authority (NHS LA)	NHS LA is developing a Safety and Learning Service for the NHS to help learning from claims. In particular, the service is providing, through a Safety and Learning Library, resources on all aspects of safety including that of Human Factors so that organisations can truly get to the heart of why claims occur and what can be done to prevent them in the future.

Human Factors Concordat – steps to increase awareness and understanding

Health Education England and NHS England have committed to taking forward the following steps, along with signatory organisations, to increase awareness and understanding of Human Factors principles and practices across the system:

- **Step 1:** Communicate with commissioners and providers to increase their awareness and understanding of the concept of Human Factors, highlighting how the approach can be used to drive improvement in quality and safety
- **Step 2:** Scope current capacity and capability in Human Factors and identify what support and development the NHS requires to fully harness the benefits of Human Factors approaches throughout the system.
- **Step 3:** Develop programmes of work, based on Step 2, to be taken forward by organisations nationally, regionally and locally to enable the NHS to embed Human Factors principles and practices in its culture, systems and processes.