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RCN Policy Unit

Policy Briefing 03/2010

Review of early warning systems in the NHS in England

April 2010

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Introduction

The National Quality Board (NQB) was tasked with undertaking a review of early warning systems in the NHS in England, across both acute and community services.[1] This briefing provides an overview of their findings.

Context

The National Quality Board is "a multi-stakeholder board established to champion quality and ensure alignment in quality throughout the NHS".[2] The aim is to ensure alignment on quality initiatives given the range of agencies who have a role to play in the Quality Agenda. The Board has members from the Department of Health (DH), Care Quality Commission (CQC), Monitor, the National Institute for Health and Clinical Excellence (NICE), the National Patient Safety Agency (NPSA) and expert and lay members.[3]

The NQB has reviewed early warning systems as part of the work to support the NHS in responding to high profile failures in the NHS. Separate inquiries into Mid-Staffordshire NHS Foundation Trust have highlighted that there was a lack of clarity in the role and accountability of different organisations and that issues 'fell between the cracks'.[4]

Findings

The NQB report is forward looking recognising that much has changed since the events at Mid Staffordshire NHS Foundation Trust took place. The NQB highlight key changes including:

- the rollout of national, regional and local quality initiatives following on from the NHS Next Stage Review
- the establishment of a new regulator that will oversee the introduction of a new system of registration for NHS providers from April 2010 (CQC)
- and the development of a new system of revalidation for healthcare professionals

[1] http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_113021.pdf
[2] http://www.dh.gov.uk/en/Healthcare/Highqualitycareforall/NationalQualityBoard/DH_095234
[3] Full list of members are available from: http://www.dh.gov.uk/en/Healthcare/Highqualitycareforall/NationalQualityBoard/DH_095234
[4] Mid Staffordshire NHS Foundation Trust: A review of lessons learnt for commissioners and performance managers following the Healthcare Commission investigation, Dr David Colin-Thomé, 29 April 2009: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_098660

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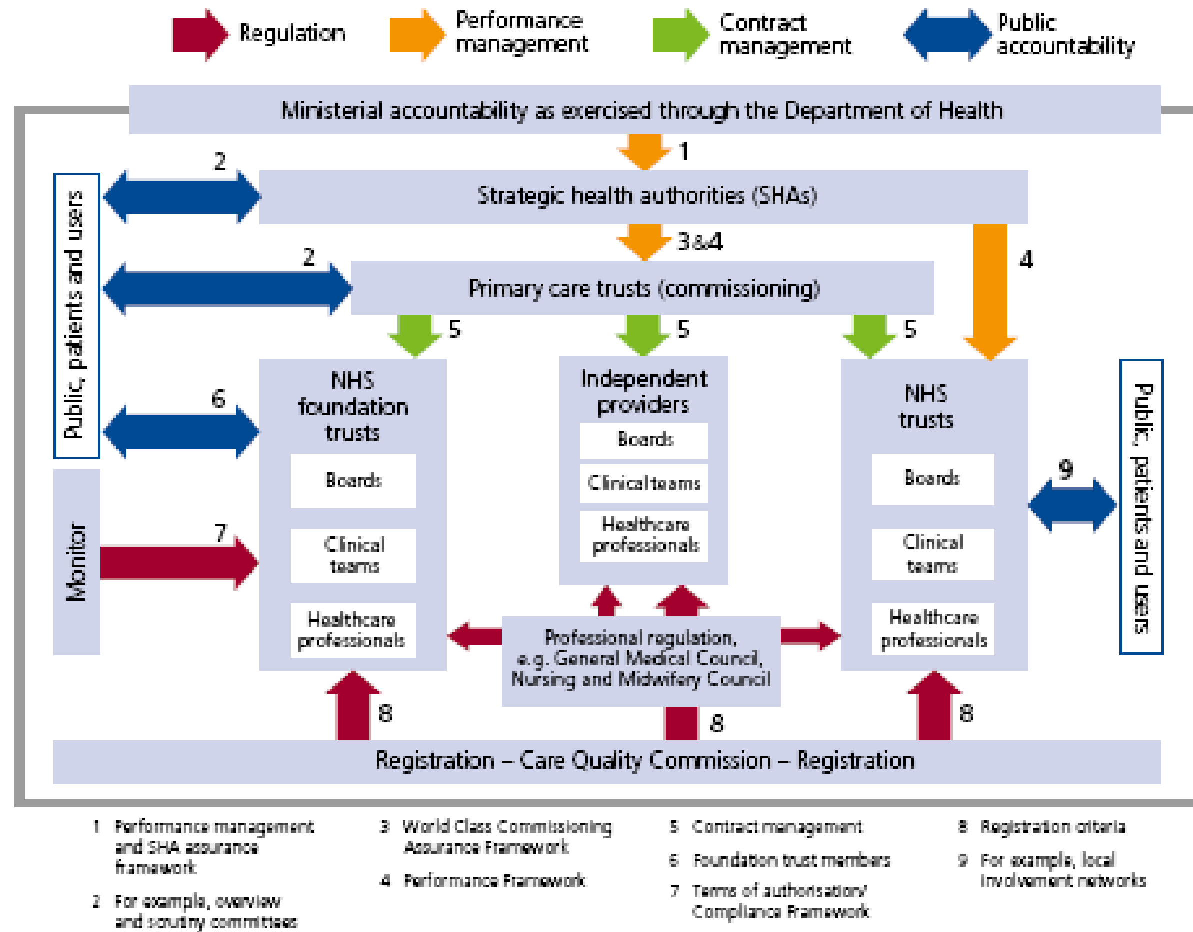
The NQB stress some key issues in pursuing quality, including:

- The complexity and fragility of ensuring delivery of high quality care
- The links between systems and processes to monitor, performance manage and regulate quality of care
- The crucial role of staff and leadership to ensure that patients are put first

The NQB highlights the importance of an open and honest culture and co operation. It also highlights the importance and relevance of listening to and engagement with patients and the public to identify issues before they become serious.

The NQB also set out the structure and processes for safeguarding quality in the NHS, summarised in figure 1.

Figure 1: Structure and processes for safeguarding quality in the NHS[5]



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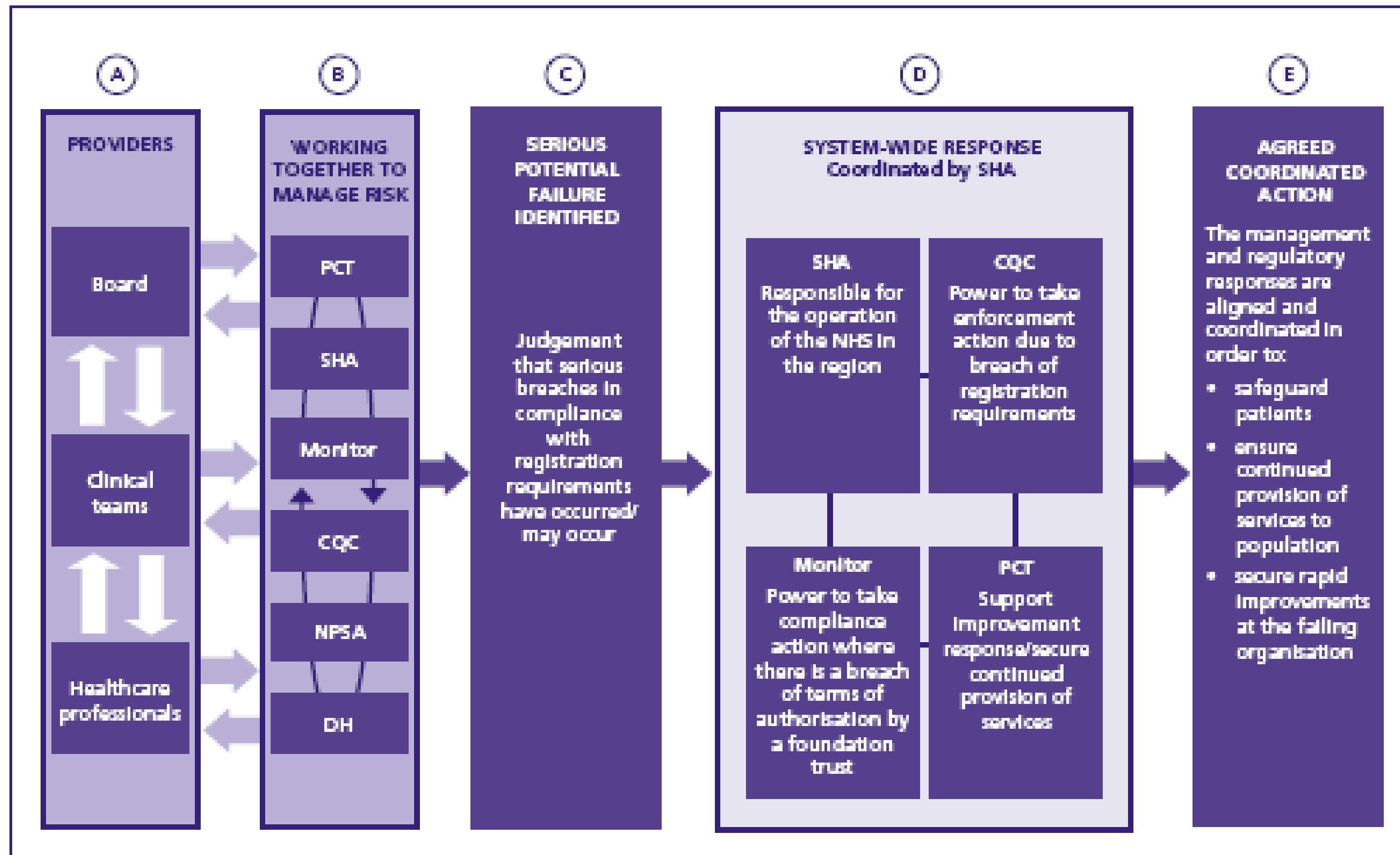
[5] Source: http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_113021.pdf p.30

The NQB also highlights that there are formal mechanisms for agencies to share information on risk, via the Quality and Risk Profile held by CQC on each provider[6], and the memorandums of understanding between agencies which set out how they will work together, risk summits and collaborative reviews (where information is exchanged on providers and where decisions are taken about which agency is best placed to respond to concerns).

The NQB summarise the NHS early warning system in the figure below, which illustrates that many agencies will need to work together to respond to issues.

[6] For more information on the content of the QRP, see http://www.cqc.org.uk/_db/_documents/QRP_Version_0_Technical_information_for_NHS_providers.pdf

Figure 2: NHS early warning system[7]



[7] Source: http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_113021.pdf p48

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Key recommendations from NQB

NQB have made 7 recommendations, set out below:

Recommendation 1: NQB recommend that trust boards be given further guidance on how best to govern for quality.

Recommendation 2: NQB recommend that the Department of Health works with the Royal Colleges, including the Academy of Medical Royal Colleges, and the Specialist Associations, to look into how professional bodies can encourage a culture of openness and transparency among all healthcare professionals, including supporting them in raising concerns early.

Recommendation 3: The Department of Health will be evaluating the impact of the first Quality Accounts in summer 2010. As part of that evaluation, NQB recommend that the Department assesses how effectively users of services and wider stakeholders have been involved in determining the priorities for improvement set out in the Quality Accounts and in decisions affecting quality of healthcare services, and how effectively organisations act upon patient feedback. Where possible, this should also include exploring the potential for providers to account for improving the patient experience through respecting and involving service users.

Recommendation 4: NQB recommend that they [Monitor's Compliance Framework for NHS foundation trusts and the NHS Performance Framework for NHS trusts] should continue to be moved into closer alignment as set out in the NHS Operating Framework. However, NQB recommend that they are revised in order to make them more sensitive to quality issues so that under performance in quality can be spotted and tackled through performance management before it becomes a serious failure and requires a regulatory response.

Recommendation 5: NQB welcome the extension of the NHS Performance Framework to PCT commissioners from April 2010 and recommend that its future development ensures that the responsibility of PCTs for commissioning high quality services is adequately covered.

Recommendation 6: NQB recommend that the NQB, conduct a review of patient engagement and feedback mechanisms with a view to understanding where they are working well, where more may need to be done and how their outputs are connecting with trust boards and the decision making process.

Recommendation 7: There needs to be a single organisation responsible for making sure that all the action being taken, whether regulatory or management, is aligned and coordinated, and achieves the three objectives listed above. NQB recommend that the SHA takes on this role.

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RCN view

The RCN believes that this report is a very useful summary of the way that the system *should* work. That said, there remain some very real challenges to the components required within the system for example; commissioning is not yet world class, the CQC has not yet set out fully how it will work, the Constitution has not yet bedded down as just a few examples. There remain key issues about the interaction of CQC with professional regulators, staffing, leadership, cultures and engagement with the public and patients that are still very much work in progress.

There are also a myriad number of other agencies which have a role to play in the safety and quality agenda who are not included in the overview from the NQB. That may be for pragmatic reasons, the landscape is crowded.[8] These agencies have a range of ongoing work which will also contribute to delivery of safe and high quality care including the RCNs Raising Concerns, Raising Standards hotline for members of the RCN to raise concerns in addition to the local policies and procedures of their employer.[9] Others, such as the NMC are embarking on work to prevent systematic failings by identifying triggers for action, and who might be best placed to take that action.[10]

It is also important to note that the vision set out by the NQB faces some real constraints if it is to be delivered. The NHS is entering into a period of considerable financial challenge and this will make delivering on this vision even more of a challenge than before. The CQC for example, must deliver with around 25 per cent less resource than it had as three separate commissions.[11]

It is also hard to fault the vision set out by the NQB, but there is a need to consider the incentives for delivery. Not just the enforcement powers of CQC, but more widely for how the ensure that behaviours are incentivised which deliver safe, high quality care across all the work of the NHS.

Finally, the Francis Inquiry recommended that a further inquiry should be undertaken into the commissioning, supervisory and regulatory bodies in relation to Mid-Staffordshire NHS Foundation Trust.[12] This may suggest further refinements to the early warning system and the RCN looks forward to contributing to this work.

[8] See RCN, The regulatory landscape in health and social care in England in 2009: http://www.rcn.org.uk/__data/assets/pdf_file/0005/287780/09.09_The_Regulatory_Landscape_in_Health_and_Social_Care_in_England_in_2009_UPDATED_130709.pdf
[9] See http://www.rcn.org.uk/support/raising_concerns_raising_standards
[10] See Series of triggers could enable NMC to pre-empt lapses in case, Nursing Standard March 31st 2010 Vol 24 No 30 p5
[11] See RCN, Consultation on Care Quality Commission Regulatory Fees, January 2010 http://www.rcn.org.uk/support/consultations/responses/interim_nhs_registration_fees
[12] http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_113030

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Tell us what you think

This briefing is intended to provide a brief review of the NQB report on early warning systems in the NHS, and the Policy Unit would like to receive comments/feedback from as many members as possible on this important issue - policycontacts@rcn.org.uk.

April 2010

Additional resources

The NQB report touches on a range of issues. You can find out more about the work of the RCN on our work on safety, quality and system regulation from: http://www.rcn.org.uk/development/practice/patient_safety

RCN Safety Climate Assessment Tool (SCAT):

http://www.rcn.org.uk/development/practice/patient_safety/climate_safety_tool

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