



30 June 2021

Report of the Review of Governance Arrangements in Independent Hospitals and Hospices in Northern Ireland

The findings of RQIA's [Review of Governance Arrangements in Independent Hospitals and Hospices in Northern Ireland](#) has been published at www.rqia.org.uk.

Commissioned by the Department of Health in response to the recall of 2,500 patients who were under the active care of a consultant neurologist in the Belfast Trust, who also practised in several independent hospitals in Northern Ireland, the Review (conducted during 2019) scrutinised:

- Governance processes for accountability and oversight
- Patient outcomes and the management of risk
- The effectiveness of partnership working and communication with GP's, the HSC Board and other HSC Organisations; and
- Arrangements to ensure effective communication with patients and their families

The Review identified issues in relation to:

- Internal leadership and accountability, enabling a comprehensive overview of the services provided;
- The need to strengthen medical governance, particularly in relation to:
 - accuracy of records;
 - scope of practice; and
 - practicing privilege arrangements.
- Improvement in information gathering and management for:
 - incidents,
 - complaints,
 - quality and patient outcomes, and
 - patient and family experiences.
- The need for a focus on communication between the independent sector and the wider HSC to ensure the delivery of effective care and continuity of treatment for patients.

The system-wide recommendations in this Report form the basis on which the independent sector can continue to strengthen and improve the key areas of governance that underpin patient safety and quality of care.

The independent sector has moved rapidly since the fieldwork was completed to develop and improve upon their governance systems, particularly in light of the pressures of the Covid-19 pandemic.

RQIA will:

- Continue to work with the independent sector to monitor progress and ensure further improvements; and
- Review its approach to registration for the independent sector, recognising the independent sector's growth, increasing diversity and the pace of innovation; and
- Advise the Department on any changes to the statutory framework which may be desirable.

NOTES TO EDITORS

1. RQIA's review programme provides independent and professional assurance to the Minister and to the public about the quality, safety and availability of health and social care (HSC) services in Northern Ireland, in both the HSC itself and the independent sector. It drives continuous improvement of those services and ensures that the rights of service users are safeguarded.
2. In recent years the level of demand on both the HSC and independent health care sector in Northern Ireland has grown as its ageing population experiences more long-term health conditions; putting pressure on services.
3. Commissioned by the Department of Health in 2018, RQIA personnel, in partnership with an Expert Review Team, comprising senior (Medical Director and Director level) individuals with experience in clinical and corporate governance and patient safety, examined governance arrangements to support the delivery of safe, high-quality services to patients at Northern Ireland's six registered independent hospitals and four hospices.
4. Although the Report is only now being published, and the independent sector organisation concerned have moved rapidly to act as the findings emerged during the Review process, the key findings and recommendations are still highly relevant.
5. The Report provides a strategic and systems-wide assessment of the governance arrangements in place, presents detailed evidence to support its findings, and makes 20 recommendations to bring about system wide improvements to governance arrangements across independent sector hospitals and hospices.
6. Full implementation of these recommendations will significantly improve the quality and safety of care provided by independent hospitals and hospices in Northern Ireland.
7. RQIA will continue, through its annual inspection programme and regulatory framework, to support and where necessary enforce improvement in governance systems.
8. In addition, RQIA is reviewing its approach to registration of establishments in the independent sector; and if changes to the statutory framework are desirable will advise the Minister and Department accordingly.

Recommendations

| Number | Recommendation | Priority |
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| 1 | All independent hospitals must ensure they have in place a well-established and well-functioning MAC, that the MAC is appropriately constituted, meets as frequently as required, provides professional and organisational leadership, and takes a visible and active role in the organisation's governance. | 1 |
| 2 | All Independent hospitals and hospices must ensure their Board of Directors/ Board of Trustees are appropriately constituted and include members with the required range of skills and expertise. This is essential to ensure Boards are fully effective and can execute their responsibilities to oversee robust governance, to lead and define the organisations vision and strategy and to provide oversight of the quality of care. | 1 |
| 3 | All independent hospitals and hospices should strengthen their arrangements for monitoring the quality of care they deliver, through the collection, analysis and dissemination of meaningful data and information relating to patient outcomes, including analysis of information in relation to complaints. | 3 |
| 4 | All independent hospitals and hospices should undertake a detailed review of their internal governance structures and capabilities. Where the required expertise to complete such an assessment is not available within the organisation, external expertise should be secured to undertake such a review. | 1 |
| 5 | <p>The Registered Persons within each independent hospital should ensure there are appropriate systems in place to enact the organisation's responsibilities relating to medical governance by:</p> <p>a) ensuring practising privileges agreements are up to date, are reviewed regularly (every two years) and provide detail of specialties, activities and procedures which the relevant doctor may undertake in the hospital/hospice.</p> <p>b) ensuring that where organisations are a designated body Responsible Officers have formal communication links in place with the corresponding persons in relevant HSC organisations.</p> | 1 |
| 6 | <p>All independent hospitals and hospices should develop and implement a robust quality improvement strategy. This strategy should have:</p> <p>a) strong leadership at organisational level and active involvement of staff, who contribute towards a learning culture in each organisation.</p> <p>b) linkages with other independent sector and HSC organisations, HSC QI leads and already established mechanisms such as HSCQI.</p> | 3 |

| Number | Recommendation | Priority |
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| 7 | Independent hospitals and hospices should implement effective systems for risk management and develop a comprehensive approach to the oversight of risk management. This should include ensuring that all identified risks are appropriately captured and documented on risk registers, that specific actions to reduce the risks are identified, and that appropriate systems of assurance are put in place. | 2 |
| 8 | Independent hospitals and hospices should implement effective systems for the identification of incidents, appropriate grading of incidents, recording of incidents, identification of learning and implementation of any required actions to improve the safety and quality of services. | 3 |
| 9 | The Executive management teams and boards within independent hospitals and hospices must ensure they have in place a culture of safeguarding and implement effective operational safeguarding arrangements to include providing assurances to their Boards. | 2 |
| 10 | Independent hospitals and hospices should develop and promote clear guidance and specific contact points within each organisation. They should enable GPs and other healthcare professionals to raise a concern about the care which has been provided in an independent hospital or hospice and/or concerns relating to the performance of a healthcare professional involved in the care of their patient(s). | 1 |
| 11 | Independent hospitals must ensure they have a robust system in place to retain and enable access to comprehensive medical records for all patients receiving or who have received care and treatment in the hospital, regardless of whether the patient is seen as an inpatient, outpatient or day case patient, in accordance with the 'Independent Health Care Regulations (Northern Ireland) 2005', Regulation 21 (Records). | 1 |
| 12 | Independent hospitals and hospices should continue to engage with the Electronic Health programme in HSC Board and the BSO to secure appropriate access to NIECR and support provision of safe care and sharing of patient information across both sectors. | 1 |
| 13 | Independent hospitals should collectively engage with PHIN representatives to develop Northern Ireland reports which contain comparative information with other UK independent hospitals that can be used to drive improvement initiative and improve the quality of services. | 2 |
| 14 | HSC Trusts and all independent hospitals should develop clear mechanisms to enable a HSC professional to advise when a patient presents to an HSC facility with known adverse outcomes or incorrect diagnoses following treatment. This will support the organisation to clearly understand its care outcomes and performance in relation to quality and safety. | 2 |

| Number | Recommendation | Priority |
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| 15 | <p>All independent hospitals and hospices should develop effective systems to gather, analyse and communicate information about the quality of care they deliver to inform quality assurance systems/processes and drive continuous improvement in services.</p> <p>This information should be reported through the appropriate governance structures to the Medical Advisory Committee and the Board of Trustees/Directors to enable effective and comprehensive oversight of the quality of care delivered.</p> | 2 |
| 16 | <p>All independent hospitals and hospices should ensure that:</p> <p>a) robust systems are in place to appropriately investigate and manage complaints received in relation to staff employed or providing services through practicing privileges arrangements.</p> <p>b) Information and intelligence relating to complaints received must be appropriately triangulated with other available information and used to drive improvements in the safety and quality of care delivered.</p> | 1 |
| 17 | <p>All independent hospitals and hospices must ensure detailed analysis of trends and patterns relating to complaints, with detailed reports being shared with the Medical Advisory Committee or other relevant governance committees. Information should be shared across all staff groups.</p> | 1 |
| 18 | <p>The Trusts and commissioners should establish formal systems for information sharing in respect of issues of the quality of work undertaken in independent sector for HSC patients for whom care has been commissioned by Trusts.</p> <p>a) This information should be fully considered and inform future decisions relating to procurement of HSC work.</p> <p>b) It should also ensure any issues relating to the performance of individuals or organisations are considered appropriately, any immediate actions taken and, if required, are reported to the appropriate organisations (Regulation and Quality Improvement Authority, General Medical Council, Health and Social Care Trust and other relevant professional bodies).</p> | 2 |
| 19 | <p>The commissioners should strengthen its arrangements for monitoring the quality of care it commissions. This should include:</p> <p>a) review of data relating to incidents and complaints</p> <p>b) review of data relating to quality, patient outcomes and patient experience</p> | 2 |
| 20 | <p>All independent hospitals and hospices should develop and implement a system to use patient feedback in a considered and systematic way to inform ongoing service development and improvement and provide assurance to their respective Boards.</p> | 2 |