The Whittington Hospital NHS Trust

ITEM: 10/105 DOC: 06

Meeting:	Trust Board
Date:	September 2010

## Title:Independent Inquiry into Care provided by Mid Staffordshire NHS<br/>Foundation Trust January 2005- March 2009: The Whittington<br/>Hospital NHS Trust Position

Executive	
Summary:	In March 2009 the Health Care Commission produced a highly critical report in response to concerns about poor standards of care and mortality rates at Mid Staffordshire NHS Foundation Trust. This was followed by an Independent Inquiry in to the events in Mid Staffordshire Trust between the period January 2005- March 2009 which was published in February 2010. A number of key recommendations were made, some of which were particular to Mid Staffordshire, but many of the recommendations had wider implications and could apply to any NHS Trust.
	A review of the recommendations emanating from the Independent Inquiry into care provided by Mid Staffordshire NHS Foundation Trust and the implications for the Whittington Hospital Trust was undertaken. This involved holding focus groups with clinical staff and discussing the issues at a number of key forums, including executive committee, HMB and the Clinical Governance Committee. The issues were also discussed with NHS Haringey and with NHS Islington.
Whitt where areas • • • • • • • • • • • • • • • • • • •	<ul> <li>Agree and use a set of key nurse sensitive indicators</li> <li>Improve the handling of complaints by having better data for managers to identify trends and re-structuring the team so there is a senior, experienced day-to-day manager</li> </ul>
	As all the recommendations fit into our existing governance frameworks and work streams, it is proposed that from now onwards we subsume them into those, rather than viewing The Mid Staffordshire issues as separate to the core work of the Trust.
	<ul> <li>Key actions to be taken to ensure the learning from the Mid Staffordshire experience is embedded within the culture of the Whittington Hospital Trust include:</li> <li>Establish a Patient Experience Steering Group with representation from Managers, Directors (both Executive and Non Executive), Clinicians, Governors and patients.</li> <li>Provide reports on patient experience to the Trust Board at regular intervals – These reports must be live, meaningful, powerful and innovative in their content and delivery</li> <li>Review the complaints process in the Trust with regular reports on emerging themes and trends and actions to the Trust Board.</li> <li>Develop a Nursing Strategy</li> </ul>
	Develop a Nursing Strategy



Continue to embed visible leadership in the organisation

Action:	For information	
Report from:	Veronica Shaw Assistant Director of Nursing and Clinical Development	
Sponsor:	Bronagh Scott Director of Nursing and Clinical Development	
Financial V	/alidation	Name of finance officer
Lead: Director of Finance		
Compliance with statute, directions, policy, guidance		Reference:
Lead: All directors		
Compliance with Care Quality Commission Regulations / Outcomes		Reference:
Lead: Director of Nursing & Clinical Development		Regulation 9 / Outcome 4: "Care and welfare of people who use our services", and Regulation 22 / Outcome 13: "Staffing"
Compliance with Auditors' Local Evaluation standards (ALE)		Reference:
Lead: Director of Finance		
Evidence for self-certification under the Monitor compliance regime		Compliance framework reference:
Lead: All directors		