

National Quality and Patient Safety Directorate

Office of the Chief Clinical Officer

Procedure for requesting external specialist support from The Forum of **Irish Postgraduate Training Bodies** (FPGTB) for HSE Systems Analysis and **Look-back Reviews**

Revision 5 November 2022







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1.0 Introduction

In the context of the HSE's Incident Management Framework (IMF) 2020 there are a number of instances when external specialist input into Reviews may be sought through the Forum of Irish Postgraduate Medical Training Bodies ('the Forum').

See Table 1 below:

Table1: Specialist inputs required to support the HSE's Incident Management Framework (IMF)

Phase	Type of support required	Rationale	Time Commitment
Pre- Review	Healthcare Record Review	Whilst a case may have resulted in a poor outcome it does not always follow that this was as a result of an incident occurring in the course of the delivery of that care. Such a review will clarify whether the standard of care provided to the service user was appropriate and timely or whether there was an issue requiring review.	This is dependent on the nature of the incident and the scope of the review.
Review	Healthcare Record Review	In some circumstances a review team may require an expert opinion to support the conduct of a review which has been identified as required.	This will depend on the nature of the case.
Review	Team Member	The IMF describes the approach to be taken to a Comprehensive Review. The role of the Team Member would be to receive the case file (medical record, chronology of care, staff recollection of events etc.), to review the case file and be involved in the review process depending on the requirements (for example meet with staff/service user). The Team member will contribute to the discussion of the case and the identification of contributory factors and findings and the recommendations arising from these. The Team member will review and comment on the draft report. The Team will be facilitated by a person trained in systems analysis.	This will depend on the nature of the case.

2.0 Circumstance for making an application to the Forum

As the HSE IMF places emphasis on reviews taking place within the context of the relevant Hospital Group/CHO/NAS/NSS area etc. applications to the Forum should only be required in a limited number of circumstances i.e.:

- **1.** Where there is a limited number of clinicians of a particular specialty available and conflicts may exist
- 2. Where trust or confidence in the review process requires that a clinician be nominated independent of the Hospital Group/CHO area.

3.0 Process for making an application to the Forum

3.1 Scope of the arrangement

The role of clinical expert(s) nominated by the Forum is limited to the circumstances outlined in Table 1 i.e., to provide various levels of clinical or technical assistance to the Review Team.

The arrangements in place with the Forum are not intended or designed to serve as a means to providing a general pool of clinical experts for reviews. This expertise should generally be sought from within or across HSE services.

NOTE: Clinicians who provide specialist input to reviews, as outlined in Table 1 are eligible to earn internal credits for Professional Competence calculated on an hourly basis.

3.2 Initial requests

- 1. Requests for support for an external expert to participate in an incident review should be made by the Hospital CEO/Manager, CHO Head of Service, NAS, and NSS Head of Service and signed off by the Hospital Group CEO/CHO CO etc. as Commissioners of the review
- 2. Requesting organisations must complete the Request Template in full (Appendix 1).
- 3. A completed Request Template and an appropriate Terms of Reference should be submitted to The National Quality and Patient Safety Directorate at QRS.tullamore@hse.ie who act as the point of contact with the Forum of Irish Postgraduate Medical Training Bodies. The National Quality and Patient Safety Directorate will forward the request to the nominated person within the forum (or in their absence to Forum@rcpi.ie). On receipt of a request by the Forum it will be logged and forwarded to the appropriate training body/ies for response.

3.3 Response to requests

- 1. When the nominee has been identified, the Forum / relevant training body will notify the National Quality and Patient Safety Directorate.
- 2. The National Quality and Patient Safety Directorate will notify the requesting organisation of the nominee. From this point the requesting organisation and nominee will communicate directly with each other.
- **3.** A teleconference is arranged by the requesting service with the nominee, other members of the Review Team and the Commissioner of the review to clarify any issues related to the nominee's role in the review.

4.0 Requirements of the Forum

- **1.** The Forum requires all applications to be coordinated through a central point in the HSE. The HSE has nominated the National Quality and Patient Safety Directorate as this point of contact.
- 2. On completion of the review, the Forum requires that it is provided with an update by the requesting organisation via the National Quality and Patient Safety Directorate with regard to the following:
 - If the report was accepted by the Commissioner
 - If the report was presented to and accepted by those harmed (patient/family/staff)
 - If there were any issues/feedback related to the nominee's input to the review report.
- **3.** Legal review of review reports, where the Forum has nominated a clinical expert to participate in the review, <u>is only required</u> where there is a specific legal question/legal issue requiring advice.

4.1 Provision of healthcare records for review

In order to ensure that the person nominated by the Forum can review the records efficiently, the following must be considered in submitting the healthcare record/other records to them.

- **1.** That consent for provision of the healthcare records to the reviewer has been received from the service user/nominated relevant person
- **2.** The requesting organisation is responsible for the provision of medical and other records to the reviewer and their subsequent handling/disposal.
- 3. The photocopies have been proofed to ensure that each page is clear and readable.
- **4.** The copy of the record is in the correct order i.e., admission sheet, medical notes, lab reports etc.
- **5.** As the healthcare record may contain detail of previous admissions, the copy should be indexed so as:
 - **a.** The pages pertinent to the admission/event to be reviewed can be easily accessed.
 - **b.** A contents page to the indexed and paginated pages is provided i.e., Tab 1: Admission form, Tab 2: Medical Notes, Tab 3: Nursing Notes, Tab 4: Radiology Reports etc.
- **6.** The request for the review of the Healthcare Record must be made in line with the template provided in Section 9 of the Incident Management Framework Guidance (**Appendix 2**)
- 7. The records will be provided to the reviewer nominated by way of tracked courier. It is the responsibility of the reviewer nominated to ensure that the documents provided for review are maintained in a confidential and secure manner in line with Data Protection Legislation and in line with their professional obligations in relation to confidentiality.

5.0 Indemnity

- 1. In the event that a Training Body nominates, through the Forum, an individual specialist as an expert to participate in a review, in response to a request from the HSE and that nominee is already an employee of the HSE, they will be covered by the existing HSE policy for professional indemnity i.e., additional indemnity is not required.
- 2. Non-HSE employees for example specialists working in voluntary hospitals who are nominated by the Forum will have their indemnity provided in accordance with the arrangement with the Department of Public Expenditure and Reform ("DPER"). DPER have provided the HSE with sanction to issue letters of indemnity to persons participating on reviews.

3. The National Quality and Patient Safety Directorate will put in place the indemnity arrangements, where necessary i.e., issue letters of indemnity for the nominee(s) once instructed to do so by the requesting organisation in advance of the commencement of the review.

6.0 Forum Remuneration Policy

- 1. There will be expenses incurred over the course of a review.
- 2. The requesting organisation must agree to remunerate the reviewer at the rate of €150 per hour or €1250 per dieum and cover relevant expenses (**Appendix 3**).

7.0 Closing out a review request

The Forum secretariat will log a review as closed on advice from the requesting organisation and as set out in s. 4.02. The Training Body who secured the nomination will be advised of completion of review through the Forum.

8.0 Claims

If at any stage it becomes likely that a claim might be made in relation to the person nominated or the investigation/review process as a whole, the National Finance Division of the HSE must be advised so that they can inform DPER who hold the indemnity.

9.0 References

■ HSE Incident Management Framework (2020)

10.0 Revision

This procedure will be reviewed October 2024 or sooner if changes are indicated.

11.0 Procedure Revision History (electronic or hardcopy)

Document reference number	QPSIM 014	Document developed by	National Quality and Patient Safety Directorate
Revision number	5.0	Document approved by	Dr Orla Healy National Quality and Patient Safety Directorate
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Revision date	October 2024	Responsibility for review and	National Quality and Patient Safety Directorate

Appendix 1: Request Form

Request for Specialist Support for Reviews from the Forum of Irish Postgraduate Medical Training Bodies

	Section 1: Request Details
Date of Request	
Request from	Specify name of the requesting organisation.
Type of Requesting Agency	Private, Voluntary, HSE hospital
Request to	Name of training body or bodies from who support is being requested.
Request for	Specialty consultant in xx specialty
Commissioner	This person acts as the main point of contact for the nominated specialist(s) regarding the submission of the report, access to medical and other records, arranging meetings and clarifying the terms of reference of the review and arranging the appropriate administrative support throughout the review.
	This person will have ultimate responsibility for the management and oversight of the review team and acts closely with the chair of a review team, when appointed.
Chairperson	Name of chairperson.
NIMS Number	

Section 2: Review Details	
Type of Review	
Place an X beside the type of review to be ur	ndertaken
Healthcare Record Review	
Systems Analysis Review of a single incident	
Look Back Review	
Indicate how many cases will be under review	
Has a review/ look back review commenced prior to this request?	Yes/No
If yes, please clarify who carried out this review	Yes/No
If yes, has the review been completed?	Yes/No
Type of Assistance Required	
Place an X beside the type of assistance required from	om the Specialist
Provision of a Healthcare Record Review Report	
For the completion of a review of this type please complete the form in Appendix 3 and submit with this application	
Membership of a Review Team	
Provision of Expert Advice i.e., to answer a specific clinical or technical question for the purpose of a review.	

Incident Re	eview/Look Back Review Team
List the other members of the Incident R responsibility:	Review/Look Back Review Team and their areas of
Name	Job Title
Systems Analysis/Look	kback Review - Case Background & Goals¹
	RDack Review - Case Background & Goals
Outline the general background and brief chronology of the case	
Purpose of systems analysis/look back review	As per terms of reference
Provide a concise statement as to the	Information must be provided on:
goals of the review and its expected scope.	What is the ultimate goal(s) of this review e.g. establish the facts, identify any findings, specific issues related to care to be included in the overall review; expected output of incident review/look back review as per terms of reference
Terms of Reference must be attached (draft or finalised)	
Availabilit	y of Records and Information
Outline the range of material to be made available to the clinician(s) providing the specialist support during the review:	
Has consent in relation to the provision of the healthcare record to the nominee been received from the service user/nominated relevant person ²	Yes/No (if No it should be stated that this will be obtained prior to provision of the healthcare record to the nominee)
Outline <u>how</u> the nominated clinician(s) providing the specialist support will be able to access this information:	Review files on site, files to be couriered to clinical expert etc.

¹ This section (Case Background and Goals) only does not require to be competed in the case of a request for a Healthcare Record Review where the purpose of the Healthcare Record Review is to support decision making as to whether a review is required i.e., please complete for all other requests including Healthcare Records Review requests being sought in the context of a review that has already been commissioned

² "Relevant person", in relation to a patient, means a person— (a) who is— (i) a parent, guardian, son or daughter, (ii) a spouse, or (iii) a civil partner of the patient, (b) who is cohabiting with the patient or (c) whom the patient has nominated in writing to the health services provider as a person to whom clinical information in relation to the patient may be disclosed.

Time	escale for External Input
Expected start date on External Input	Social for External input
Expected end date on External Input	
Expected time commitment required of clinical expert	
Co	mmunication Strategy
Is the clinician(s) providing the specialist support expected to meet with either the Service User/Nominated Relevant Person or other parties	Yes/No
If yes outline the interaction which will be	e required:
Is the clinician(s) providing the specialist support expected to meet with other health care professionals and staff as part of the review?	Yes/No
If yes outline the interaction with other health care professionals and staff which will be required	
Is the clinician(s) providing the specialist support expected to participate in the communication process during the review or in reporting its outcomes to either member of the public, to officials at the requesting agency?	Yes / No
If yes outline the interaction with members of the public, officials at the requesting agency which will be required.	
Inc	demnity/Remuneration
Indemnity will be provided by the requesting organisation to the nominated specialist and the training body	Yes/No Expert must not proceed until indemnity has been provided.
The requesting organisation agrees to comply with the Forum of Irish Postgraduate Medical Training Bodies Policy on Remuneration (see Note 1. below)	Yes/No
Name and contact details of whom the clinician(s) providing the specialist support to submit invoice:	Name: Address: Email address:
Administration support will be provided to the clinician(s) providing the specialist support	Yes/No
Details of the administration support which will be available for the nominated clinician(s) providing the specialist support	Contact Name: Contact Details:

Form Completed by:	
Date:	
Application approved and signed by Hospital Group CEO/ CHO Chief Officer	
Organisation name:	
Date:	

Completed forms together with the TOR are to be submitted by the Commissioner of review to National Quality and Patient Safety Directorate at QRS.Tullamore@hse.ie (and copy the relevant CHO/Hospital Group/NAS/NSS Lead for Quality and Patient Safety.

Appendix 2: Healthcare Record Review³

Request for the provision of a Healthcare Record Review
NIMS Number:
Requestor details:
Background to Request

Brief description of the case and the concerns which prompted this request. Be clear here about the purpose and scope of the request (see note below)

Scope of the Request

- 1. To receive and consider the following documentation relating to the care of a Service User from her/his admission on [dd/mm/yy]-to her/his death/discharge on [dd/mm/yy] (list the documentation provided below)
 - [Name of Document 1]
 - [Name of Document 2] etc
- 2. To consider the following (you need to consider the specific areas that you want answered by the review e.g.)
 - a. to provide an opinion based on their review of the relevant records as to whether the aspects of care delivered that relate to their area of subject expertise were appropriate and/or reasonable in the circumstances,
 - b. The questions/concerns raised by the service user/relevant person(s) with the hospital/service and to what extent the care documented in the healthcare record can provide answers in relation to these.
- 3. To provide a report to the requestor which sets out (suggested format below)
 - a. The qualifications, experience and expertise of the reviewer.
 - b. The documentation that was made available.
 - c. The facts of the case upon which the opinion is given or any assumptions that were made.
 - d. The specific questions being asked in 2 above
 - e. The answers to each of those questions.
 - The reasoning that led to those answers. f.
 - g. Any further comments that occur to the reviewer (whether asked or otherwise).
 - h. References for other documentation referred to (for example, clinical guidelines, research publications or other documents that support the opinion being tendered which must be produced where it is practicable to do so and where the article is being relied upon by the reviewer).

Date: (dd/mm/yyyy)

³ Note: This request is being made in the context of the HSE's Incident Management Framework The purpose of a review conducted in line with the IMF is to understand what happened, why it happened and what learning can be gained in order to minimise the risk of a similar incident occurring in the future. For the purpose of these reviews the actions of individual staff are examined within the context of the overall system.

Appendix 3: Remuneration

The reviewer(s) nominated by the training body is acting as an advisor to the requesting organisation and must be compensated for his/her time.

The daily rate to be paid to the reviewers by the requesting organisation is €150 per hour or €1250 per diem.

The requesting organisation must agree to cover the following expenses:

- Travel taxi, public transportation, private vehicle
- Parking and Tolls
- Accommodation
- Meals
- Telephone calls
- Meeting expenses

Receipts must be submitted for all expenses. Only original receipts will be accepted.

All expenses must be reimbursed by the requesting organisation within 4 weeks of submission.