



**Inquiry into Hyponatraemia Related Deaths (IHRD) Recommendations  
Update to Trust Board 13<sup>th</sup> June 2019**

Topic	Briefing
<b>Update on Hyponatraemia</b>	<p><b>IHRD Stocktake Event</b></p> <p>A regional IHRD stocktake event was held on 28<sup>th</sup> May 2019 which was attended by members of IHRD workstreams and sub-groups and Trust representatives. The purpose of the event was to:</p> <ul style="list-style-type: none"><li>• Build connections and ownership across the Workstreams and the system;</li><li>• Share the progress and learning from each of the Workstreams;</li><li>• Test out directions of travel with respect to “being open”;</li><li>• Clarify roles as we shift from designing and planning towards implementation;</li><li>• Explore how Trusts can be supported to implement.</li></ul> <p>The programme provided the opportunity for attendees to hear feedback from a number of workstreams on their work and progress to date and to participate in group sessions in relation to being open and leadership. There was also a session on readiness for implementation and the Trust’s Medical Director provided a WHSCT perspective on the opportunities and challenges in making the recommendations a reality.</p> <p><b>Duty of Candour</b></p> <p>One of the main recommendations arising from the Inquiry into Hyponatraemia Related Deaths (IHRD) was in relation to the need for a statutory Duty of Candour, which will apply both to healthcare organisations and the individuals who work in them. Alongside this, a number of recommendations also relate to a culture of openness and transparency in Health and Social Care. The Department of Health has established a Duty of Candour Workstream and a Being Open Sub-Group to take forward these recommendations. The DoH is clear that involvement of HSC staff is central to this work and a series of staff engagement workshops are planned in June</p>

2019 for each Trust to help shape and inform the thinking of the Workstream (see Appendix 2). Two sessions will be held in the Western Health and Social Care Trust area as follows:

- Thursday 13 June from 2.00pm–4.30pm at the Lecture Theatre, South West Acute Hospital, Enniskillen.
- Monday 24 June from 2.00pm-4.30pm at the Waterfoot Hotel, Caw Roundabout, L'Derry.

The Trust has been asked to nominate up to 100 members of staff (50 per session) from across all disciplines and grades to attend this initial event.

**Update on Trust IHRD Dashboard / Action Plan**

The Trust continues to work to progress actions against the recommendations of the Inquiry Report in line with the regional workstreams. Progress is regularly reviewed via the Trust's project structure arrangements and the action plan is updated to reflect the updated position. The action plan was last reviewed and updated on 23<sup>rd</sup> May 2019 and the summary dashboard is attached at Appendix 1.

## Appendix 1

<b>Hyponatraemia Inquiry Report Recommendations</b> (Date of last update: <u>23rd May 2019</u> )														
Recommendation Reference Number	RECOMMENDATION CATEGORY	TRUST RESPONSIBILITY						REQUIRES DOH DIRECTION	REQUIRES REGIONAL WORK TO IMPLEMENT	TOTAL RECOMMENDATIONS	TOTAL RECOMMENDATIONS TO BE IMPLEMENTED BY TRUST	% Compliant Trust Responsibility (Trust Assessment)	Lead Director	Updates
		NOT COMPLIANT		PARTIALLY COMPLIANT		COMPLIANT								
		Easily Achievable	Requires significant work	Easily Achievable	Requires significant work									
1-8	Candour								4	8	4		HR	Recommendations have been reviewed and an action plan developed to review and update Trust policies, induction and employment documents to reflect duty of candour at local level. Recommendations to be progressed via regional Duty of Candour Workstream and Being Open Sub-Group. SAI engagement training now developed and sessions have been delivered as part of SAFEtember. SAI engagement performance reporting is now reported at Trust Governance Committee. Your Right to Raise a Concern Awareness week held in 29 April - 3 May with a series of awareness sessions across the Trust. DoH staff engagement events for WHSCT staff scheduled 13 and 24 June.
9	Leadership					1				1	1	100%	CE	Assessed as compliant in view of ongoing programmes of work aimed at developing and improving leadership skills at all levels. Currently consultation on core values being undertaken.
10-30	Paediatric Clinical	0	1	5	2	6	2	5		21	19	32%	WCS	Benchmark assessment completed and submitted to DOH 28.2.18 - Action plan updated in line with assessment. Action plan and compliance status reviewed and updated at fortnightly Project Board meetings. Regional Paediatric Clinical Collaborative established by DOH - first meeting 21/6/18. Children up to their 16th birthday are only admitted to adult wards by exception and where clinically appropriate, however they do attend emergency and outpatient departments with adults. A group has been established to look at Age Appropriate Care and work is continuing to develop a local protocol. Transformation proposal developed to enable age appropriate care arrangements to be enhanced.

31-32	Serious Adverse Clinical Incident Reporting	0	0	0	0	2	0	1	3	3	67%	DH	Benchmark assessment was completed for selected recommendations relating to SAIs and submitted to DoH by 27.4.18. SAI Process and Engagement training has now been developed. Training programme being rolled out to Directorate and medical staff.
33-42	Serious Adverse Clinical Incident Investigation	0	0	0	0	5	2	2	9	5	100%	DH	Benchmark assessment completed and submitted to DOH 27.4.18. Trust invited to participate in RQIA review of SAs across the 6 Trusts - Trust representatives identified. Rapid Review Group established to monitor, review and quickly identify learning from SAs etc. for sharing across appropriate forums. % compliance increased to 100% for recommendations within Trust responsibility.
43-54	In the Event of a Death Related to an Serious Adverse Clinical Incident	1	1	0	2	5	1	2	12	9	56%	DH	Recommendation 47 has 5 separate sub-actions, 3 of which have been assessed as compliant, 1 partially compliant and 1 not Trust responsibility and has been given an overall rating of Partially Compliant. Trust Board are now briefed on all upcoming inquests.
55-68	Training and Learning	0	0	0	0	1	0	2	14	12		HR	Recommendation 66 assessed as compliant as part of DOH SAI related recommendations assessment. 22-08-18 Updated following completion of Quality workstream baseline assessment (rec 67,68 partly compliant). Recommendations 59 and 60 have now been assessed (59 is compliant; against 60 Coroner training for medical staff took place in Oct 18. 4 recs in this section remain to be assessed. Others assessed are rec 64 Non-compliant and recs 63 & 65 partially compliant. The first meeting of the IHRD Training Workstream took place in January 2019.
69-84	Trust Governance	0	0	3	4	3	1	5	16	11	27%	DH	Governance workshop took place 29 March 2018 to begin to consider a restructure of governance arrangements agreed which will also support implementation of recommendations. Assessment of compliance completed 13.6.18 and discussed at Project Board 18.6.18. Further clarification required in relation to recommendations 73, 74 and 75 in order to complete assessment.
85-93	Department							9	9	0			The DOH has established a Department-HSC Liaison Group. Trust representatives on group - Medical Director, Dir of Nursing, Director of W&CS, AD Children's Healthcare. First meeting 21/6/18. 9 Workstreams and 7 Sub-Groups also established by DoH which have been allocated recommendations and actions to progress.
94-96	Culture and Litigation							3	3	0			
<b>TOTALS</b>		<b>1</b>	<b>2</b>	<b>8</b>	<b>8</b>	<b>23</b>	<b>6</b>	<b>33</b>	<b>96</b>	<b>64</b>			