South Eastern Health and Social Care Trust

SET Trust Board

Update on the Implementation of Hyponatraemia Recommendations

Wednesday 25 August 2021

1.0 Introduction

This paper provides an update to the SET Trust Board on work being undertaken in relation to the recommendations of the Inquiry into Hyponatraemia Related Deaths (IHRD). The structures of the regional and local programmes can be found in appendices 1 and 2.

2.0 Regional Update

During the summer period Andrew Dawson, the IHRD Director, has been meeting with the Chairs of the Workstreams & sub-groups. Andrew has also met with the Service Users and Carers involved in the Programme.

Options have been considered at as to how best to progress the programme in light of the on-going Covid-19 pandemic and redeployment of Department of Health (DoH) staff**.** It is anticipated that a phased approach for the resumption of Workstreams will be taken with the following groups to be in the first tranche:

- Serious Adverse Incident (SAI) Workstream
- Paediatric Clinical Workstream
- Death Certification Implementation Working Group

2.1 Implementation of Recommendations

2.1.1 Consultation on the introduction of a Duty of Candour and Being Open Framework in Northern Ireland

Since the consultation launch by the Health Minister on the 12 April 2021 the Trust has encouraged all staff, across all professions, to engage in the consultation process and to make their views known directly to the DoH.

The Trust has engaged directly with the Duty of Candour Workstream with staff, including members of the Trust Board, and IHRD Recommendations Implementation Group, attending the online consultation engagement and feedback sessions held in the months of April and June 2021.

On 23 June 2021, the Health Minister sent a letter to Arm's Length Bodies (ALB) chairs encouraging organisations to submit a corporate response to the consultation. An extension, to 31 August 2021, to complete the organisation response was granted, and subsequently the Minister announced that the consultation will remain open for both individuals and organisations until that date.

In completing its organisational response the Trust has taken a two strand approach putting forward:

1. A corporate response in relation to the consultation proposals;

2. An organisational staff response: this provides a summary of feedback from Trust staff across a range of directorates and professions in relation to the consultation proposals.

The response is scheduled for final submission on 31 August 2021.

2.1.2 Circular IHRD 01/2021 ALB Board Member Handbook

The first circular from the Programme was received on the 24 June 2021. As this circular relates to HSC Board members, and recognising the significance of this publication, ALB Chairs have been asked to sign off on the implementation circular on this occasion.

2.2 Trust IHRD Implementation Oversight Group

With the launch of the Duty of Candour consultation and arrival of the first circular, the Group has now reconvened and resumed meeting in June 2021. The most recent meeting was held on 13 August 2021.

2.2.1 Management of Circulars

Due to the sensitivity and high profile nature of IHRD circulars these will be shared upon receipt with Executive Management Team (EMT) members and Non-Executive Directors, and discussed at the next scheduled EMT meeting. Implementation action plans will be approved by EMT as will confirmation of implementation prior to the return of Assurance Templates by the Office of the Chief Executive. Dr Bob Darling will be responsible for acknowledging initial receipt to the DoH.

2.2.2 RQIA Review of CG174 – Fluid Management

There is currently a major regional programme underway to improve IV fluid management in adults that will have significant training resource and change of practice issues for HSC Trusts. This follows a recent RQIA report which identified current regional IV Fluid management in adults as poor.

A local task and finish group has been established and is being led by Dr Damien Carson, Consultant Anaesthetist. Dr Carson will also chair one of the three task and finish sub-groups been established from the regional group.

The local group will report to the Trust IHRD Implementation Oversight Group[*].

[*] This will be reflected in Appendix 2 'SET IHRD Implementation Oversight Group Governance Framework' for the next update paper.

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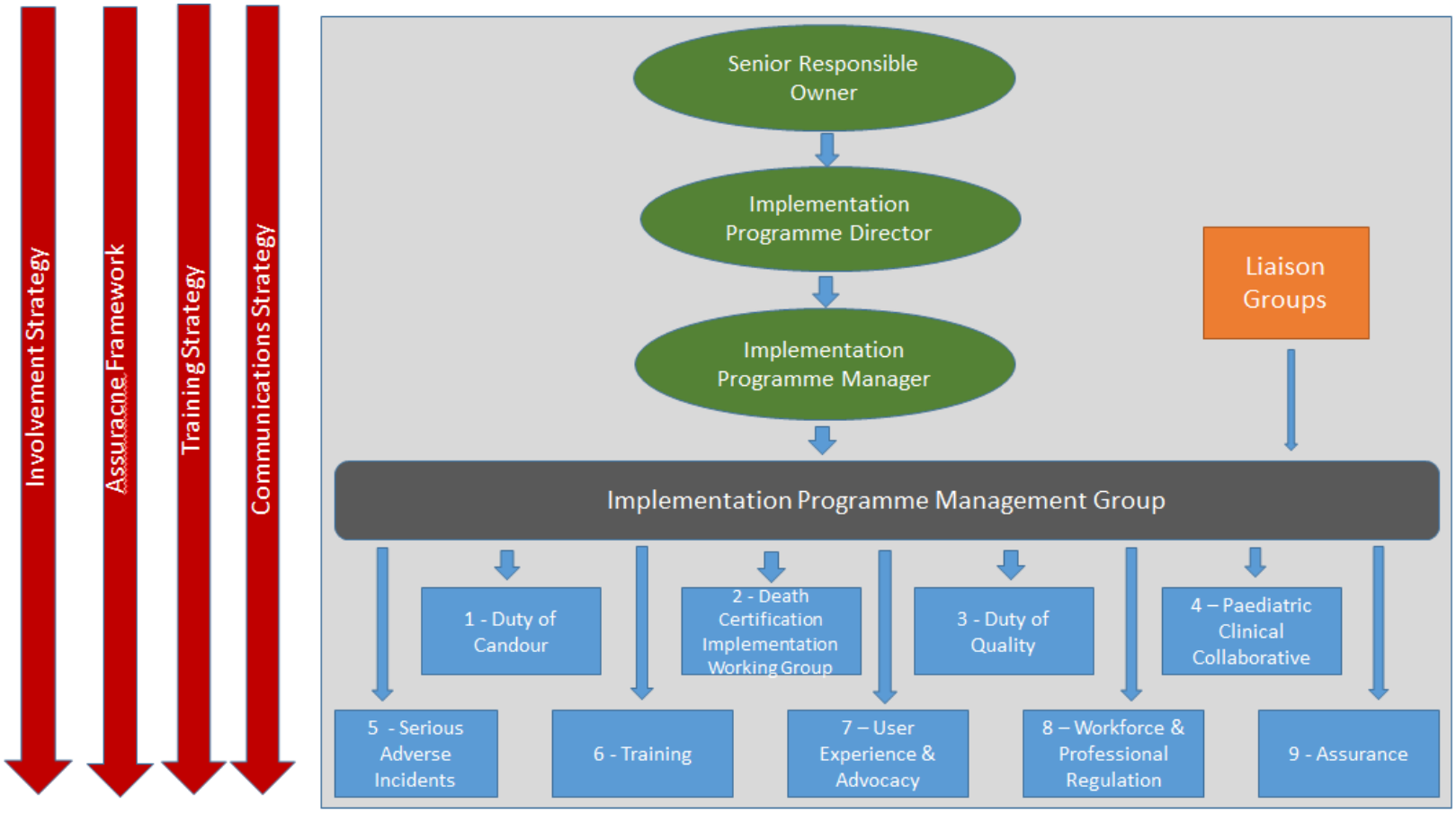
Appendix 1

IHRD Programme Structure



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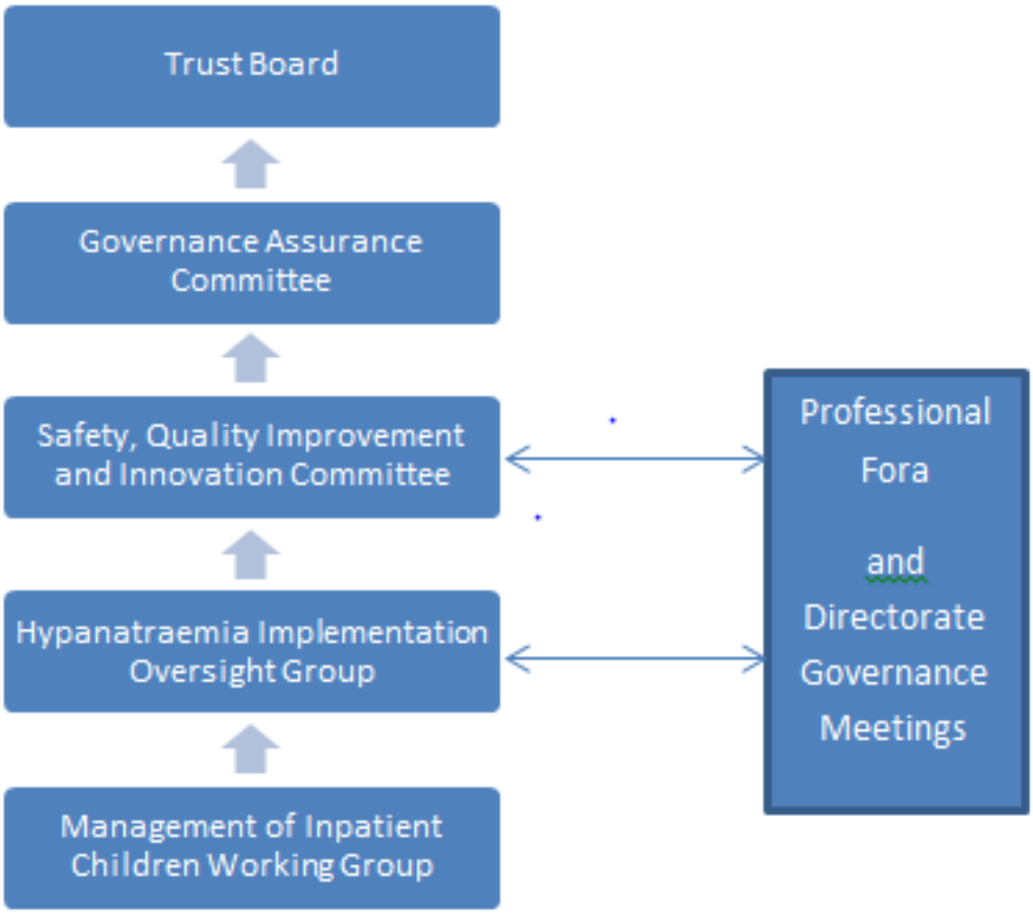
Appendix 2

SET IHRD Implementation Oversight Group Governance Framework



SET IHRD Implementation Oversight Group Membership

Mr Charlie Martyn (Chair)	**Medical Director**
Dr Bob Darling (Deputy Chair)	**Associate Medical Director**
Jonathan Patton	**Interim Chairman**
Helen Minford	**Non-Executive Director**
Joan O'Hagan	**Non-Executive Director**
David Robinson	**Interim Director of Hospital Services**
Nicki Patterson	**Director of Nursing, Older People and Primary Care**
Claire Smyth	**Interim Director of Human Resources & Corporate Affairs**
Mr Joe Toner	**Clinical Risk Director**
Dr Tim Harding	**Clinical Director Medicine**
Brendan Mullen	**Associate Risk Director**
Dr Nuala Flanagan	**Associate Clinical Director Paediatrics**
Mr Robert Kennedy	**Clinical Director Surgery**
Dr Roland McKane	**Associate Clinical Director Medicine**
Dr Moulod El-Agnaf	**Clinical Director Labs**
Dr Damien Carson	**Consultant Anaesthetist**
Mr Alister McIlwee	**Consultant Emergency Medicine**
Dr Claire McHenry	**Consultant Medicine**
Lisa Dullaghan	**Assistant Director Nursing**
Maggie Parks	**Assistant Director Surgery**
Mary Jo Thompson	**Interim Assistant Director Medicine**
Kieran Quinn	**Interim Assistant Director Women & Acute Child Health**
Marc Neil	**Assistant Director Unscheduled Care**
Martine McNally	**Assistant Director Risk Management**
Jill Macintyre	**Head of Pharmacy & Medicines Management**
Eunice Strahan	**Safe & Effective Care Manager**
Teresa Mungur	**Clinical Manager Paediatrics and Neonatology**
Paul McCloskey	**Bereavement Coordinator**
Scott Hyvart	**Clinical Governance & QI Officer**
TBC	**Patient Client Council Representative**

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Appendix 4

IHRD Workstreams and Delegated tasks from IHRD Report Recommendations

Workstream Number	Workstream Name	Actions	Recommendations for implementation Category and Number
1	Duty of Candour	11 Actions from 5 Recommendations	Candour: 1 (i), 1 (ii), 1 (iii), 1 (iv), 1 (v), 1 (vi), 1 (vii), 2,3,4,6,
2	Death Certification Implementation Working Group	22 Actions from 18 Recommendations	SAI Investigation: 36, SAI Death: 43, 44, 45, 46, 47 (i), 47 (ii), 47 (iii), 47 (iv), 47 (v), 48, 49, 50, 51, 52, 53, 54, Training: 59,60, Department: 87, Culture and Litigation: 95, 96
3	Duty of Quality	28 Actions from 23 Recommendations	Candour: 8 Leadership: 9, SAI Investigation: 34, 40, 41, Training: 55, 56, 67, 68, Trust Governance: 69 (i), 69 (ii), 69 (iii), 70, 71, 72, 76, 77, 78, 79, 80, 81, 84, Department: 86 (i), 86 (ii), 86 (ii), 90 (i), 90 (ii), 92
4	Paediatric – Clinical	21 Actions from 21 Recommendations	Paediatric – Clinical: 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30
5	Serious Adverse Incidents	18 Actions from 10 Recommendations	SAI Reporting: 31,33 SAI Investigation 37 (i), 37 (ii), 37 (iii), 37 (v), 37 (vi), 37 (vii), 37 (viii), 37 (ix), 37 (x), 38, 39, 42, Training: 66

			Trust Governance: 82, 83, Department: 91,
6	Training	6 Actions from 6 Recommendations	Training: 57, 58, 61, 62, 64, 65,
7	User Experience and Advocacy	3 Actions from 3 Recommendations	SAI Investigation: 37 (iv), Training: 63, Department: 89
8	Workforce and Professional Regulation	7 Actions from 7 Recommendations	Candour: 5, 7, SAI Reporting: 32, SAI Investigation: 35, Trust Governance: 73, 74, 75,
9	Assurance	1 Actions from 1 Recommendations	Department: 93