To consider

Patient Safety Intelligence Forum

Issue

1 The new Patient Safety Intelligence Forum will provide an opportunity to consider information from across directorates, actions taken and implications for patient safety.

Recommendations

2 The Strategy and Policy Board is asked to:

a Consider the outline for the development of the Patient Safety Intelligence Forum described in paragraphs 3-20.

b Agree the Terms of Reference at Annex A.
Patient Safety Intelligence Forum

Issue

3 The Chief Executive has agreed to establish a Forum to coordinate information that may demonstrate concerns about patient safety or medical practise and ensure the appropriate operational and policy response.

4 This new Forum will share directorate, country and regional information. It will consider broadly three questions: What do we know? What does it mean? And, what are we doing about it?

5 The establishment of the Forum reflects major changes in our operation and responsibilities, including the fact that teams across the GMC are analysing and comparing data and linking up with other organisations doing the same. As we develop our data strategy this should enhance our capability for this type of analysis.

6 There is a growing expectation that we will play a role in promoting patient safety, sharing information and improving consistency to inform evidenced-based regulation.

7 As the quality and sources of data improves the Forum will develop its work. The following outlines an initial view of the phases of development for the Forum.

8 As the Forum develops, decision making policies will be developed, reviewed and updated. This will likely include a definition of thresholds and protocols for specific actions to ensure consistency of response over time.

Phase 1 – Reviewing action for scope and consistency

9 Initially the Forum will consider data and intelligence by geography, organisation or subject matter.

10 The Forum will consider if the response of the GMC is satisfactory and whether there is further action that could be taken.

11 This Forum will also clarify the relationship between its deliberations and other GMC meetings that discuss similar data.

Phase 2 – Refining the inputs, outputs and ways of working

12 During this phase the Forum will identify the most relevant data from each directorate. The Forum will:

   a Consider the various potential data sources and assess their comparative strengths and weaknesses.
b Provide clear feedback on how these data sources might be developed and refined for the Forum’s consideration and what practical support should be provided to enable this.

c Identify where there are possible gaps in the knowledge and information being presented to the Forum and agree the necessary actions to ensure that gaps are addressed in the future, remaining mindful of the development of the larger piece of work under the data strategy.

13 With advice from those overseeing the Data Strategy the Forum will agree ways in which data and information is collated and analysed and how this can be improved. The Forum will agree the way the information is summarised. The initial proposal is that it should be presented by country, region and topic trend.

14 The Forum will also identify ways in which data and information collected could be improved, analysed and used. In some cases, new policies may be needed to define thresholds and protocols for actions.

15 It is anticipated that Phases 1 and 2 together will last approximately 12 months, however this will be related to the development of the data strategy.

Phase 3 – Using tested and reliable data to more proactively task responses

16 Depending on the development of the data strategy the Forum may have access to enhanced analysis of data and information.

17 At this stage, the Forum may be able to become more proactive in identifying and addressing patient safety issues, including the identification of patterns and trends in the information considered.

18 Over time the membership of the Forum should consider whether it would be better to form two groups, separating the strategic and operational responses.

Terms of reference and governance

19 Draft Terms of Reference of the Forum are at Annex A.

20 Included in the Terms of Reference is the proposal that the Forum will report on its work to the Strategy and Policy Board twice a year, providing specific comment on any amendments to the terms of reference and any decision making policies that have been developed by the Forum.
Supporting information

How this issue relates to the corporate strategy and business plan


What engagement approach has been used to inform the work (and what further communication and engagement is needed)

22. Plans for the development of the Forum have been discussed extensively with internal stakeholders, particularly operational and data leads. At various points of development, proposals have been presented to Directors and to the Leadership Team. An initial meeting of the membership of the Forum to discuss a first draft of the terms of reference took place on 4 December 2013.

How the issues differ across the four UK countries

23. The scope for cooperation and information sharing with systems regulators in each of the four countries is at different phases of development and maturity, which may lead to differing ranges of possible or reasonable action in each country.

What equality and diversity considerations relate to this issue

24. We are aware that there are groups of vulnerable patients, some of whom have protected characteristics that are at increased risk of poor treatment from health professionals. Additionally, there are certain characteristics that increase the risk of doctors being involved in our fitness to practise procedures and some groups of doctors may need more support in delivering the best care to patients. The work of the Forum is likely to highlight these groups and we expect that they will often be the subject of discussion. The Forum will keep these issues under review and include comment in its reports to the Strategy and Policy Board.

If you have any questions about this paper please contact: Kristen Veblen McArthur, Strategic Regulatory Policy Manager, kvmcarthur@gmc-uk.org, 020 7189 5389.
Patient Safety Intelligence Forum Terms of Reference

Purpose

1. The Forum provides an opportunity to coordinate and consider information from across the GMC directorates and the implications of this information for patient safety and medical practice.

2. The Patient Safety Intelligence Forum advises the Chief Executive. In practice it reviews and directs regulatory intervention and prompts the improvement and development of operational regulatory activities and policies.

Duties and activities

3. The Forum reviews and directs regulatory intervention and prompts the improvement and development of operational regulatory activities and policies.

4. The Forum will:

   a. Review internal and external information from across the organisation to identify trends, issues and areas relevant to patient safety and medical practice that may require further investigation, information-gathering, tactical, operational or policy intervention.

   b. As appropriate contribute to the improvement of cross-organisational information and data analysis, which could lead to intelligence on specific issues, individuals or geographies. This includes supporting the long term development of the data strategy activity.

   c. Consider and make recommendations on strategic or operational policy relevant to intelligence received, and task the appropriate team to develop proposals for the Strategy and Policy Board.

5. The Forum fulfills its duties by:

   a. Reviewing any actions already taken and deciding if any additional immediate and/or long-term operational action or improvements are needed.
Considering the implications of operational actions and policy recommendations and make recommendations to the Strategy and Policy Board as needed.

Considering the operational performance and resource implications of its recommendations and decisions to ensure that any related policy development or operational interventions can be delivered, and task the appropriate team to make recommendations for the consideration of the Performance and Resources Board as needed.

Working arrangements

6 The Patient Safety Intelligence Forum will meet every six weeks for two hours. The executive leads for the forum are the Chief Executive and Chief Operating Officer.

7 The Forum is chaired by the Chief Executive and attended by the Chief Operating officer, all Directors and the Senior Medical Advisor. Members may invite other staff, with relevant operational or policy responsibilities, to attend as required for the discussion of agenda items.

8 The Chief Executive agrees the agenda and papers are agreed by the Chief Operating Officer.

9 Secretariat duties are undertaken by the Strategic Regulatory Policy Team. The Forum Secretary records actions and minutes each meeting.

a Any decisions requiring immediate action will be agreed at the end of the meeting between the Chair and relevant Director(s) and the Secretary will confirm in writing to the relevant Director(s).

b The Secretary will additionally circulate a log of agreed actions, as cleared by the Chair.

c The Secretary will circulate minutes, as cleared by the Chair, to members for comment.

d The Forum will be asked to approve the minutes and receive an update on actions relevant to its decisions at the subsequent meeting.

10 As the Forum may be required to make decisions outside of its scheduled meetings, it can also make decisions on circulation of recommendations between meetings. Decisions made in this way will be brought to the Forum at its next meeting and included in the minutes.

Accountability

11 The Forum will report on its work to the Strategy and Policy Board twice a year.
This will include any refinement to governance arrangements and, at the appropriate time, evaluation of the Forum’s effectiveness, including the way in which information is considered and the relative effectiveness of the review of action and any actions that have been tasked.