Review of NHS Lothian (non acute) hospital based complex clinical care arrangements

Introduction

1. Healthcare Improvement Scotland will carry out a review of (non-acute) hospital based complex clinical care arrangements within NHS Lothian.

2. When Healthcare Improvement Scotland is made aware of potential patient safety issues, we have a duty to carry out assessments that will allow us to understand any potential factors that may impact on the quality of care provided. Through this review process, we will seek assurance that potential patient safety issues have been or will be addressed, as well as identifying further learning and opportunities for improvements across the NHS board and wider NHS where applicable. For this review, we will take full account of all ongoing improvement work taking place in NHS Lothian.

3. Healthcare Improvement Scotland will be extending its programme to the inspection of the care of older people in acute hospitals into non-acute (community) facilities, including hospital based complex clinical care facilities. This work is still in its design phase and is part of the Healthcare Improvement Scotland work plan for 2015/16. It is envisaged that this review will help to inform the development of that work.

Terms of reference

4. Within the scope (see below) of this work, Healthcare Improvement Scotland will carry out a review to examine:

4.1 the factors that could impact on the quality of care offered in hospital based complex clinical care facilities, for example the approach to person-centred care, safety, resources, workforce and governance

4.2 the sustainability of the service model provided by hospital based complex clinical care arrangements in the short, and longer term

4.3 the capacity for making sustained improvements in the quality of care, and

4.4 any wider implications for policy and similar healthcare provision in Scotland.

Scope of the review

5. While this review will look at hospital based complex clinical care arrangements in NHS Lothian, we recognise that it is likely that patients within this area of care will have experiences (and be reliant on) a number of NHS and social care services.

6. We will make sure that we take account of all patient conditions/groups using hospital based complex clinical care beds, but will ensure there is a focus on the quality of care for older people including their palliative care needs.

7. The review will focus on the hospital based complex clinical care beds within Edinburgh city, with any learning points to be considered across the other facilities in NHS Lothian. This will include Astley Ainslie Hospital, Ellen’s Glen House, Ferryfield House and Findlay House.
Method

8. Healthcare Improvement Scotland will establish regular lines and methods of communication with NHS Lothian to ensure the NHS board is aware of our progress, and proposed methods in this review.

9. The review process will include a number of methodologies including a review of relevant documentation, speaking with a range of staff members and unannounced inspection. The nature of any follow-up activity will be informed and determined by the nature of the risk presented following the review process.

10. An aspect for this review will be to identify where there is good practice and opportunities for such good practice to be shared across similar units in NHS Lothian and the wider NHS in Scotland.

11. We aim to publish the outcome of the review at the end of April 2016.

Indicative key timescales

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Review team membership

12. A list of review team members will be provided alongside this Terms of Reference in due course.

Assurance group

13. The review team will produce a report of the findings of the review process. To complement the review team, Healthcare Improvement Scotland will put in place an assurance group. The remit for this group will be to provide:

- a wider pool of expert advice to complement the knowledge and skills of the enquiry visit team
- appropriate professional scrutiny of the findings, and
- an external reference function to quality control the report and any final recommendations, including potential sources of future support

14. The assurance group interface with the enquiry visit team will be advisory rather than be expected to further review the service in detail, and the group will be expected to provide constructive expertise and support to the review team.

15. A list of assurance group members will be provided alongside this Terms of Reference in due course.