QUALITY OVERSIGHT GROUP MEETING – Notes

DECEMBER 14th 2017

1. **Review of deaths of patients.** A detail analysis of deaths will be carried out by the LAS, and the model used in Wales will be tested for effectiveness.
2. **Never Events –** these are currently being reviewed by NHS Improvement and a revised list published.
3. **Emergency Operations Centre** – a detailed plan is being formulated for the upgrade of EOC. 7% increase in activity, higher acuity of calls,but 22 staff short on December 14th. Some specialist desks are closing down to release staff for other activities, .e.g. call handling. Wage levels are too low.
4. **Call handling problems and staff shortages-** an urgent meeting was held on December 14th to find a solution to the problem of capacity to respond adequately to all emergency calls.
5. **Safeguarding training –** significant progress has been made but this still needs to be enhanced.
6. **Northwick Park maternity services –** problems identified there will be discussed in a meeting between Amanda Mansfield, the LAS Midwife and the Northwick Park maternity team.
7. **ARP (Ambulance Response Programme) –** this has resulted in much longer waits for some patients or as described by one QOG member as: “patients’ perception of delays”
8. **Serious Incident Investigations –** requires more time spent on the investigations, but currently a great deal of Medical Directorate time is spent on Quality Audit.
9. **Quality Account –** the annual statutory QA process has started. The Forum submits a detailed report each year. Time to review progress since last year.
10. **Datix is used for front line staff to report incidents –** the system keeps going down. The system has been transferred to a new ‘platform’ and Ross Fullerton, the Chief Information Officer has assured the Forum that the problem has now been solved.
11. **Mock Inspections of the LAS** – Every issue raised is now in the process of being dealt with.
12. **Safety of Medicines in Ambulance Stations** – close circuit TV monitors are being installed in drug rooms. There are no regular checks at ambulance stations. Security of medical gases needs to be improved and a BOC cabinet is being trialled. Shortage of diazepam because only one specific variety can be used by paramedics.
13. **111 Need for increase in staffing.** A new version of the algorithm is being tested.
14. **Forum section on agenda –** I presented a report on our meeting with the Mayor’s health team and a second on the Mock CQC visits by our members.
15. **Patient Specific Protocols (PSP) –** LAS thinks there are too many; poor governance; may not be actioned; 17,000 CmC and 225 PSP; patients tend not to retain a copy of their PSP; time taken to obtain PSP can delay treatment; PSP may be address based rather than patient based??? (need to check this); some PSPs have expired or have not been updated, e.g. with medication; some boroughs do not use CmC causing much greater problems due to non interoperability; CmC is not mandated. IPADS going to front line staff should resolve some of these problems. Could take 18 months to resolve the inter-operability problems.
16. **Inquests and Preventing Further Deaths Notices –** Ahmed – diabetes and Edwards – Mental Health. Seek evidence of actions follow PFD notice.

**End**

**Malcolm Alexander**