

## CARE UK (CUK) – SI

### 1. Background

On the 14/03/12 the local medical director (LMD) Care UK noticed that “sitting” on the IT system was 5978 radiology results that hadn’t been electronically released by the referring Care UK GP and therefore discharge summaries had not been forwarded to the patients respective GP practices.

This report focuses primarily on the impact on children and the findings and actions in respect of safeguarding children. A full action plan arising out of the investigation is attached in Appendix A.

Of the 5978 results 1564 of them related to children.

- 1.1 A RAG (Red; Amber; Green) rating methodology was used to review the missed cases

#### 1.12.2. RAG

Category	Description
Red	Confirmed fracture/ other pathology which may have altered the course of treatment given.
Amber	An abnormality identified but on review of patient consultation notes, appropriate care was provided.
Green	No fracture or abnormality identified and treated appropriately at time of consultation.

### 2. Timeline of events

- 14/03/12 – CUK personnel noticed 5978 radiology reports “sitting on “ the IT system waiting to be released
- 30/03/12 - CUK advised NHS Brent officers about these 5978 cases
- 04/04/12 – SI logged on STEIS by CUK
- 05/04/12 - A joint letter (NHS Brent and CUK) was sent to all NHS Brent GP Practices informing them about the SI and how this was going to be managed in terms of the impact on their patients; a RAG rating system was agreed with a clear plan of how to manage patient from each group
- 18/04/12 – First meeting of the SI review panel, and every week thereafter
- 06/06/12 – Final report and action plan sent to NHS London by CUK
- 13/03/12 – “Mop up” meeting to confirm agreed actions and timelines in relation to monitoring of the action plan

### 3. Key actions taken

- 3.1 Setting up of the SI panel - ToR agreed
- 3.2 1st meeting of the panel held on 18/04/12
- 3.3 During the SI Care UK provide weekly written updates to NHS Brent; updates included specifics in term of the Safeguarding issues relevant to the SI
- 3.4 Child Protection (CP) and Children in Need (CIN) - NHS Brent working with Designated Professionals (DP) to manage all children identified within the 5978 reviews, and to take appropriate action(s) as necessary

- 3.5 DP provided support to the SI panel
- 3.6 One of meeting held with key CUK personnel, DPs and senior NHS Brent officers to discuss, address, and agree safeguarding going forward.

#### **4. CUK Safeguarding Review Process**

A separate review of all child attendees from start of service on 28<sup>th</sup> March 2011 till March 14<sup>th</sup> 2012 who underwent an x-ray was reviewed and checked against the Child Protection Registers from the following Social Services Boroughs: Brent, Ealing and Hounslow boroughs.

##### **4.1 Child Protection Plan List - CPPL**

Brent Urgent Care Centre (UCC) at The Central Middlesex Hospital (CMH) receives CPPLs from the following Social Services Departments:

- Brent
- Ealing
- Hounslow

The review and final report from CUK established that the agreed Child Protection Policy (Safeguarding Children – Brent Urgent Care Centre (April 2011) was not adhered to by the service provider.

- A number of issues were identified as part of the SI investigation in particular
- The identification, logging, and onward referral processes required tighter and more robust management and auditing by Care UK.

##### **4.1.1 Identifying CPPL patients included in the review (including out of area)**

CUK only has access to the three local lists (4.1); in order to identify patients identified as being in area and on any of the three lists identified above CUK built a temporary electronic database. This temporary database was developed from entering information from the three 13<sup>th</sup> April 2012 CPPLs enabling an effective way of cross-matching the lists of patients from this date (only), because CUK was instructed by Brent LA not to retain CPPL lists, therefore, cross matching could only be based on this list.

Because CUK is aware that the CPPLs frequently changes, the identified children were matched against the list in force (13/04/12) rather than the list in force at the time of the child's initial presentation.

##### **4.2 Number of children who attended Brent UCC CMH**

Within the overall cohort of 5,978 **attendances**, children (under the age of 18) accounted for 1564 of this total. All of these attendances were reviewed and graded (see section 1.2.2).

##### **4.3 Review process – CPPL**

A process was put in place for the 1564 x-ray reports to be clinically reviewed by a competent team of radiographers and doctors. The cases were then categorised using the RAG rating.

##### **4.3.1 RAG rated actions**

Children identified as “red” patients’; parent/guardian/carers were written to requesting that they contact Care UK to arrange a telephone appointment.

“Amber” rated children’s parent/guardian/carers were written to inviting them to contact Care UK if required.

“Green” rated children – no contact was made with the parent/guardian/carers

#### 4.3.2 Outcome of the Review process

In response to the 1,564 attendances and review, two areas were identified as follows:

	Red	Amber	Green
Number of <b>children</b> with frequent attendances (more than 6 times a year)	0	0	0
Number of <b>children</b> x-rayed more than once in year (based upon their highest RAG grading)	7	9	68

It should be noted that the children who attended on a number of occasions, was graded to the highest category, therefore a child with two attendances one of green and one red; was shown in the red category.

#### 4.3.3 From this reporting, CUK confirmed the following patients attended the Brent CMH UCC:

	Brent CPPL	Out of Area (Ealing CPPL)
Exact Match - Name and date of birth matched	2	2
Near Match - date of birth mis match	0	1
Patient who attended more than once	0	0
“Fuzzy Search” - Name but no date of birth on Non LAC Legal Status List.	1	0

#### 4.3.4 Brent CPPL patients

As shown above, Brent CPPL matched two patients with an "exact match" and one patient through a "fuzzy search" as this child was entered on the "Non LAC Legal Status List" where date of birth is not recorded, therefore, an exact match couldn't be made, the search indicated that they may be on the list; on further investigation it was found that Brent LA had no record of this child, therefore, CUK have not been able to onward refer this patient to the LA.

#### 4.4 Immediate actions taken

CUK took immediate action on 1<sup>st</sup> April 2012, implementing Safeguarding Alert Features on the IT system e.g. specific reference to high levels of attendance (more than three) has been included as part of CUK’s local Safeguarding Children – Brent Urgent Care Centre April 2012 policy. This is being underpinned by an appropriate protocol which is being developed as part of the CUK’s Brent UCC CMH action plan.

#### **4.4.1 Identifying patients at point of presentation**

CUK receptionists must check all children at the time of presenting in accordance with the Safeguarding Children – Brent Urgent Care Centre CMH April 2011; and with effect from January 2012, CUK processes were made more robust regarding the identification of patients at the point of presentation.

4.4.1.1 The receptionist manually checks all the CPPL; to confirm this action has taken place a note of “CPPL list checked” is entered within a generic field on the clinical IT system; where a note is not entered on an appropriate patient’s record, it will be assumed that the check was not performed in accordance with the agreed procedure. Prior to this process being implemented CUK was not able to confirm that the CPPL check was performed at all prospective attendances e.g. when the child/young person **first presented** during the SI period of 28/03/11 to 28/03/12.

4.4.2 On the 17<sup>th</sup> May 2012, the requirement for checking the CPPL registers were further reinforced e.g. the importance of consistent checking in a discreet but effective manner.

4.4.3 CUK is creating an electronic solution that will enable the receptionist to check the CPPL register through the use of automated rather than manual search.

4.4.4 CUK is also investigating the potential to import data from the CPPL and Attendance Lists from the clinical system to enable systematic CPPL audits to be carried out to ensure that at risk patients have been appropriately identified.

A “CPPL Flag” will be used rather than a generic entry; to enable improved monitoring both from an identification and onward referral monitoring perspective.

It is expected that these actions ensures the systematic identification of the relevant children at the point of presentation; this is being bolstered by regular and appropriate auditing to ensure any issues of non compliance are identified, appropriately managed and resolved.

## **5. Conclusion**

The CUK SI highlighted:

- Concerns about the robustness of CUK’s safeguarding procedures
- Concerns about staff’s understanding and implementation of the safeguarding process and procedures
- The need to undertake regular audits to validate staffs compliance with their duty of care in terms of safeguarding.

### **5.1 Post SI investigation**

Following the end of the SI and the output associated with this, NHS Brent is confident that the provider has improved its management and operations in relation to safeguarding.

The actions contained in the (attached) plan, plus the monitoring of this by NHS Brent officers, will further serve to provide assurance to the Trust that



**Brent**

CUK is working and adhering to the agreed safeguarding policy and procedures.