



Commission for Health Improvement

Finsbury Tower
103-105 Bunhill Row
London EC1Y 8TG
Tel: 020 7448 9200
Fax: 020 7448 9238
www.chi.nhs.uk

News Release

Embargoed for Thursday, 25 March 2004

Common factors identified in high profile NHS failures

Severe and sustained staffing shortages, poor working relationships and inadequate risk management are some of the factors that regularly occur in NHS services that fail, according to a report published today by the Commission for Health Improvement.

Lessons from CHI investigations, 2000-2003 is an analysis of 11 investigations carried out by CHI in NHS organisations between 2000-2003, including investigations into allegations of abuse, clinical failure and administrative failure.

The study found that in eight out of the 11 CHI investigations considered, staffing shortages, poor team working, weak risk management and poor incident reporting were all present. Nine out of the 11 organisations weren't effectively monitoring their organisation's performance.

Inadequate leadership from the trust and management boards, a recent history of mergers or significant organisational change, and serious financial concerns were also common features in the trusts investigated by CHI.

Jocelyn Cornwell, acting chief executive of the Commission for Health Improvement said: "There is no definitive answer as to why an NHS organisation fails to deliver the service it should to patients. However, it is remarkable that across the organisations which have been investigated for service failings by CHI, so many of the same issues occur again and again.

"We cannot say that any one factor – such as staff shortages or poor team working – will necessarily lead to a situation that's dangerous for patients. But where a number of these factors exist simultaneously, loud warning bells should be ringing and the organisation concerned should be taking preventative action.

"It is my hope that by publicising these common factors found in NHS organisations which have been investigated by CHI, similar service failures can be prevented in the future."

Other findings from the study show that many of the services CHI investigated do not directly feature in the Government's target setting or performance

monitoring programme and are drawn from services that are often low on the national agenda.

The second part of the report looks at the impact the investigations have had both nationally and locally.

Locally, there was a strong perception that the patient experience had improved since the investigation and that trusts had undergone significant strategic development.

On a national level, the Government set up the National Specialist Commissioning Advisory Group in direct response to CHI's investigation into cardiothoracic transplants at St George's Hospital NHS Trust. The new body was given responsibility for commissioning and performance monitoring heart and lung transplants.

The new GP contract requiring GPs to participate in appraisal and audit was also influenced by CHI's 2001 investigation into Loughborough GP Peter Green.

Jocelyn Cornwell said: "In every case something good can come out of the disappointment and distress of failure. Our investigations have not just brought about improvements locally, but strategic changes within the health service."

Notes to editors

- The investigations which were used in the compilation of this report were as follows: CHI Investigation into Rowan ward at Manchester Mental Health and Social Care NHS Trust (September 2003); CHI investigation into Maternity Services provided by Ashford and St Peter's Hospitals NHS Trust (March 2003); CHI Investigation into Learning Disability Services provided by the Bedfordshire and Luton Community NHS Trust (April 2003); CHI Investigation at Barnet and Chase Farm Hospitals NHS Trust (November 2002); CHI Investigation at Gosport War Memorial Hospital (July 2002); CHI Investigation into the West of London Breast Screening Service (April 2002); CHI Investigation into Heart and Lung Transplantation at St George's Healthcare NHS Trust, London (September 2001); CHI investigation into Leicestershire Health Authority (August 2001); CHI Investigation into Employing Locum Consultants - matters arising from the employment of Dr Elwood (May 2001); CHI Investigation into Carmarthenshire NHS Trust (November 2000); CHI investigation into North Lakeland Healthcare NHS Trust (November 2000).
- CHI will cease to exist on March 31, 2004. It will be replaced by the new Healthcare Commission (formally the Commission for Healthcare Audit and Inspection), which will also replace aspects of the National Care Standards Commission (in respect of private and voluntary healthcare) and some functions of the Audit Commission (in respect of national studies of efficiency, effectiveness and economy of healthcare). More information is available at www.chai.org.uk
- CHI is an independent body which was set up to help the NHS monitor and improve clinical care across England and Wales. CHI's role is to undertake regular inspections (clinical governance reviews) as well as carry out investigations into serious service failures. It is also responsible for studies that monitor and review the

implementation of national service frameworks and National Institute for Clinical Excellence (NICE) guidance, as well the national staff survey and patient survey, national performance ratings of NHS organisations and national audits of child protection arrangements.

- *Lessons from CHI investigations, 2000-2003* will be available as a free download from the CHI website (www.chi.nhs.uk) on the date of publication.

For more information, contact **on** **or after hours on**