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10th October 2014

Dr Andrew Harris
Assistant Deputy Coroner
London South Inner
The Coroners Court
1 Tennis Street
Southwark
SE1 1YD

Dear Dr Harris

REGULATION 28 REPORT TO PREVENT FUTURE DEATHS

Re Master Thomas Warren

I am writing in response to your report dated 19th August 2014 and referenced above. The report raised four matters of concerns and my understanding is that the only the first matter raised is for the Trust to address.

The matter raised is that:

There does not appear to be clarity as to who or which organisation should enquire into previous fitness to practice concerns and referrals to NCAS which have not led to restrictions or conditions of registration by the GMC when locum doctors are being recruited by an Agency at short notice by prospective NHS Trusts. In this case it appears that neither that Recruitment Agency nor Trust nor consultant asked the doctor before his employment began.

NHS providers are required to provide evidence of compliance with the NHS Employment Check Standards as part of the CQC's annual regulatory framework. The CQC's Essential Standards of Quality and Safety outline 16 core standards which must be met, including having robust recruitment practices in place (Outcome 12 Requirements relating to workers, specifically refers). The Employment Check Standards are also embedded in the Crown Commercial Service (formerly known as the Government Procurement Service) National Agency Framework Agreement and annual audit checks of agencies, to assure compliance with the standards is met in relation to contracted and sub-contracted staff.

All staff recruitment at the Trust including engagement of agency medical staff is completed in line with these requirements. The six checks required are:

1. Identity checks
2. Right to work checks
3. Professional registration and qualification checks
4. Employment history and reference checks

5. Criminal record and barring checks
6. Occupational health checks

As part of the professional registration and qualification check, the Trust verifies on line with the Registered Body , in this case the GMC, whether the candidate:

- is registered to carry out the proposed role
- is subject to any current restrictions
- has investigations against them about their fitness to practise.

As confirmed in your report, the Trust completed these checks with the GMC and did not find any conditions, restrictions, or information about investigations into fitness to practice. The doctor himself was not asked about any previous fitness to practice concerns by the Trust, or the recruitment agency concerned, but there is no specific requirement to do so and given that no concerns had arisen through other aspects of the checking processes, there would be no apparent reason to enquire further.

In addition, we have considered the recommendations to undertake action to consider changes to recruitment policy or practice. Our arrangements for revalidation support this. Under the requirements of revalidation, the Trust as a designated body, has to review its system and processes against core standards, return a compliance statement to the NHS England Responsible Officer and present an annual report to the Trust Board. This requirement includes the need to:

- Ensure that appropriate pre-employment background checks (including pre-engagement for Locums) are carried out to ensure that medical practitioners have qualifications and experience appropriate to the work performed

This process provides a very useful summary at Board level of any gaps in processes and will develop further as medical revalidation becomes embedded over time.

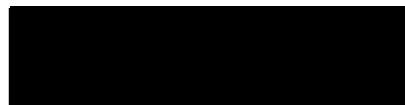
We also review both policy and practice in relation to employment checks on a regular basis and as changes to the national requirements are introduced. Our internal audit team will be reviewing the processes for temporary staff, including medical agency staff, in January 2015, and any recommendations from this audit will of course will implemented.

Finally, the Trust only uses medical agency staff supplied by agencies that are approved under the National Agency Framework Agreement, and uses one main agency provider for the vast majority of bookings. This provides additional assurance in relations to checking processes.

I wish to assure you that my team and I take these concerns very seriously and remain open to any suggestions about how we could further improve current checking processes. The changes to the health care professional reporting requirements made in 2013, which have become the responsibility of NCAS, may help to improve the accessibility of information about such concerns about an individual in the future.

Should you have any questions in regard to any of the information in this letter or require any further information please do not hesitate to contact me.

Yours sincerely



Tim Higginson
Chief Executive