The Francis Report and implications for AHPs

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Some NHS facts and figures

• 1.3 million staff
• £109 billion annual budget
• Over 1 million patients treated every 36 hours
• 15 million hospital admissions per year
• 88 million outpatient attendances
• £12 billion spent on medicines
Context

SEARCH

80% of internet users look online for health information.

66% Diseases

Google processes over ONE BILLION search requests a day. That’s over 3 times THE POPULATION of the United States.

56% Medical treatments

85% of people use Google every month.

ECONOMY
The role of clinical leadership

- A relentless focus on quality (safety, effectiveness, experience)
- The self/us/now story – ‘When the tuning fork in clinicians hearts goes off, everyone can feel it’ Denham (2009)
- Collaboration and sharing best practice
- Productivity is clinical business
- Doing the right thing

Not to, leads to what we read in the Francis and Winterbourne View reports.
Background to the Francis Inquiry

- Damning investigation report
- Independent inquiry chaired by Robert Francis QC
- First inquiry: catalogue of failures and the impact on patients
- Recommendation for a second inquiry on the wider system
- Francis 2 launched as full Public Inquiry
‘In the next room you could hear the buzzers sounding. After about 20 minutes you could hear the men shouting for the nurse, ‘nurse, nurse’ and it just went on and on. And then very often you would hear them crying, like shouting ‘nurse’ louder, and then you would hear them crying, just sobbing, they would just sob and you presumed that they had had to wet the bed. And then after they would sob, they seemed to then shout again for the nurse, and then it would go quiet…’
Francis report – in numbers

• 3 volumes and an executive summary;
• 1782 pages
• 290 recommendations
• The recommendations have been grouped according to themes. The report allocates recommendations to organisations to take forward, with any remaining falling to DH to ensure they are taken forward.
• The report is structured around:
  • Warning signs that existed and could have revealed the issues earlier
  • Governance and culture
  • Roles of different organisations and agencies
  • Present and future
Francis report: reprise

Culture change

- An overall theme; important we don’t lose sight as we focus on the specific recommendations

Fundamental standards

- The standards themselves, and what Francis means
- Criminal sanctions
- The regulatory machinery: “a single regulator”, a new Chief Inspector of hospitals

Openness, transparency and candour

- Statutory duty of candour, backed up with criminal sanctions
- Complaints and feedback as an engine of change
- Transparency
Francis report: reprise

Leadership
- New leadership college
- Manager regulation/fit and proper person test

Compassionate care
- Nursing: entry, education and training, revalidation, RCN, “specialist older person’s nurse”
- Healthcare assistants: minimum training, mandatory register
- Professional regulators: NMC/GMC/HSE

Information
- Clear metrics on quality
- Publication of data, inc in quality accounts
PM response

• Acknowledged dreadful events

• Apologised

• Patient care
  • Single failure regime
  • Friends and family test
  • Don Berwick safety review
  • Nurses hired and promoted on the basis of compassion, and pay for quality of care
PM response

• Accountability
  • SofS written to GMC and NMC
  • Law Commission advise on NMC process
  • Consider HSE criminal prosecutions powers to CQC

• Defeating complacency
  • Chief Inspector of Hospitals
  • Quality of care inspections start in autumn
  • Bruce Keogh investigation into hospitals with high mortality rates
  • Ann Clywd complaints review
Karen Middleton,
Chief Health Professions Officer,
NHS England
6 Commonplace Characteristics of Professions

1. A Commitment to serve in the interest of clients, in particular, and the welfare of society in general

2. A body of theory or knowledge

3. A specialist set of professional skills, practices and performances that are unique to the profession

4. The capacity to make judgements with integrity under conditions of technical and / or ethical uncertainty

5. An organised approach to learning from experience and thus of growing new knowledge from the context of practice

6. The development of a professional community responsible for oversight and monitoring of quality in both practice and professional education

(Gardner, Howard and Shulma, Lee S “The Professions in America Today” Daedalus 134 (summer 2005)
The Distinctive Characteristics of Professional Services?

- Professional Services do not have a fixed specification that can be easily judged.
- Clients often do not know what they want or require, until advised by the professional.
- The professional tends to know more about the quality of the service provided than the client does.
- Those on the receiving end of professional services may be considered vulnerable as they have less information than the professional.
- Users of services cannot judge competency or whether the professional has done a good job. Tensions between the professional and the user create what is known as “Information Asymmetries.”

PARN (The Professional Associations Research Network)
Have you had the conversation yet?
Something to remember!

‘professionalism is knowing how to do it, when to do it and actually doing it’

Frank Tyger
And finally...

Watch your thoughts; they become words.
Watch your words: they become actions.
Watch your actions; they become habits.
Watch your habits; they become character.
Watch your character; it becomes your destiny.

Susie Kay
Thank you

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