

## NHS Greater Glasgow & Clyde Emergency Department Review

### Terms of Reference

#### Aim

This review has been initiated in response to concerns about the Emergency Department at the Queen Elizabeth University Hospital but, in carrying out the review, will take account of relevant considerations in relation to safety and quality of care across the other main receiving Emergency Departments in NHS Greater Glasgow and Clyde.

The aim of the review is to:

1. Provide an informed, balanced, objective and proportionate analysis of the key challenges facing the Emergency Department at the Queen Elizabeth University Hospital.
2. Consider any wider implications for the Emergency Departments at the Royal Alexandra Hospital and Glasgow Royal Infirmary.
3. Offer support to NHS Greater Glasgow & Clyde to identify practical, evidence-based and sustainable actions that may be required to improve quality and safety in Emergency Departments in NHS Greater Glasgow & Clyde.
4. Consider any wider learning for Emergency Departments across NHS Scotland.

#### Scope

The review will be undertaken by Healthcare Improvement Scotland (HIS) in the context of its existing legal powers and statutory duties.

The review will adopt appropriate elements of the HIS [Quality Assurance System Framework](#) and the HIS [Essentials of Safe Care](#). It will draw on strengths and learning identified in each of the Emergency Departments, and will share understanding of good practice, along with potential improvements in:

- **Safety:** the extent to which patients are treated in a safe environment and are protected from avoidable harm.
- **Leadership and Culture:** the extent to which the service is well led, supported by robust governance arrangements, effective working relationships and team working, and a supportive culture both within and beyond the Emergency Department.
- **Patient Experience and Responsiveness:** the extent to which individuals receive timely, person-centred care; and the extent to which patient feedback and wider community engagement informs the planning and delivery of services.

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The review will be focused on:

- The three identified Emergency Departments in NHS Greater Glasgow & Clyde.
- The current issues and strengths in each department, within the context of the scope.
- The overall experience of patient care in the three Emergency Departments.

## Approach

The review will draw on:

- Insight from a range of sources of information including patient safety data, safe delivery of care inspection reports, patient experience data, and workforce data such as iMatter.
- Evidence from proportionate engagement with a range of staff groups individually and collectively to obtain their views and perspectives on the safety and quality of care, culture and experience of raising concerns, and areas for improvement. This will include Partnership groups and whistleblowing champions.

The review will comprise:

- An initial scoping phase to identify the key lines of enquiry.
- A discovery phase to collect data from information systems, and engagement with staff and patients. Emerging themes will be considered to shape the ongoing lines of enquiry.
- An analysis phase to synthesise the data gathered and produce a report.

## Structure to Support Review

The Executive Sponsor of the review will be Robbie Pearson, Chief Executive of HIS. The Senior Responsible Owner (SRO) will be Lynsey Cleland, Director of Quality Assurance & Regulation at HIS, who is accountable for the overall delivery of this work. Jane Byrne, Head of Multiagency Inspections (Quality Assurance & Regulation at HIS) will be the Programme Director responsible for operational delivery within HIS.

The review will have the following structural support:

- **Core Review Team**

The review will be conducted by a Core Review Team comprised of external and internal representatives. The Core Review Team will be responsible for the effective and efficient conduct of the review and the achievement of its aims within the agreed scope of the review. The Core Review Team will be supported by a dedicated HIS Programme Director and programme management staff. HIS members of the Core Review Team will mobilise staff within their Directorates to carry out the work of the review. The Core Review Team will also include appropriate subject matter experts.

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- **Reference Group**

To provide advice, appropriate scrutiny, and validation of the work of the Core Review Team. This will consist of external experts and will be independently chaired.

The Core Review Team will report monthly to the HIS Executive Team.

## **Timescale**

The review will be concluded by Autumn 2024.

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