



The Royal College of
Emergency Medicine

Invited Service Reviews

A guide

Contents

1. Introduction	3
2. Types of invited reviews	3
3. Review principles	4
4. Arranging a review	5
5. The review: process and conduct	7
6. Following the review	7
7. Governance	8
8. Finance	9
9. Invited Review process chart	10

Appendix A – Terms of Reference template

Appendix B – Terms of Business

Appendix C – Self-assessment questionnaire

Appendix D – Pre-visit information checklist

Appendix E – Suggested participants

Appendix F – Invited Service Review Fees

Version:

Version 4 published: 24 January 2017

Version 3 published: 27 July 2016

Version 2 published: 19 July 2013

Authors:

David Watson and Sam McIntyre

With thanks to: Philip McMillan, Ben Walker

For enquiries please contact:

Sam McIntyre

Quality Manager

The Royal College of Emergency Medicine

7-9 Breems Buildings

London

EC4A 1DT

Tel: 020 7067 1269

email: sam.mcintyre@rcem.ac.uk

1. Introduction

1.0 The Royal College of Emergency Medicine (RCEM) is established to advance education and research in Emergency Medicine and is the leading authority in the UK and Ireland in this field. RCEM is also responsible for setting standards of training and administering examinations in Emergency Medicine for the award of Fellowship and Membership of RCEM as well as recommending trainees for CCT in Emergency Medicine. RCEM works to ensure high quality care by setting and monitoring standards of care, and providing expert guidance and advice on policy to relevant bodies on matters relating to Emergency Medicine.

1.1 In support of these objectives, RCEM has established an Emergency Care Service Review programme. RCEM service reviews offer assistance to health organisations in addressing concerns and challenges relating to care provided in Emergency Departments. The primary purpose of this work is to ensure patient safety and to improve patient care. The reviews are designed to provide an independent objective analysis with recommendations for future development of services.

1.2 This guide provides details of the types of review available to healthcare organisations, procedures for arranging and agreeing the scope of a review, how reviews are conducted, College governance of reviews and what follows a review visit.

2. Types of invited reviews

2.0 The main aim of any review is to improve the quality and safety of patient care. RCEM conducts two types of review:

- **Service Reviews**
- **Advisory visits**

2.1 A **Service Review** is conducted at the invitation of a healthcare organisation, whereby RCEM will undertake a visit to that organisation to meet with key stakeholders to evaluate and comment on agreed aspects of the Emergency Care services (current or proposed) provided by the organisation. The remit of each service review is defined and agreed in a set of terms of reference before the visit is conducted, though all service reviews will focus on the quality and safety of service. Each service review will result in a report with recommendations for future development. Usually 6 months after the initial visit a follow-up visit will be offered to assess progress against the recommendations.

2.2 An **Advisory Visit** is also conducted at the invitation of a healthcare organisation where advice on specific issues is sought. The remit is defined by an agreed terms of reference. Advisory visits are conducted similarly to service reviews but **do not include a follow-up visit.**

2.3 At present RCEM does **not** provide the following:

- Reviews of individual's clinical practice and performance
- Clinical investigations of incidents
- Medico-legal opinions
- Advice on issues relating to misconduct
- Expert witnesses for court reports

2.4 College reviews are available to NHS organisations in England, Ireland, Northern Ireland, Scotland and Wales that operate a Type 1 Emergency Department¹.

3. Review principles

3.0 RCEM's strategic aim is to ensure high quality care by providing expert guidance. College reviews are therefore intended to provide an independent and objective evaluation on the quality and safety of patient care.

3.1 Reviews are only undertaken at the request of an organisation's Chief Executive, Medical Director or appropriately authorised individual such as the commissioner of the health community under review. Senior clinicians and managers of the Emergency Department must consent to the review.

3.2 RCEM will not undertake reviews if external parties such as the regulatory bodies, the Police or litigation authorities are currently undertaking investigations. The Trust requesting a review must state if an investigation is taking place.

3.3 When approached for a review RCEM may consider that another body is more suited to assist and will advise on this accordingly.

3.4 RCEM's expertise is in Emergency Medicine. Where reviews are requested to explore how emergency care services connect with primary care, ambulance services and other hospital services RCEM will advise on what aspects it can comment on and whether a joint visit with another College may be more suitable.

3.5 If a review should be requested which covers cross specialties and therefore involves more than one College, it is important that there is one College taking a clear lead role and this should be reflected in the terms of reference and planning for how the review will work.

3.6 Members of visiting teams are selected from a panel of approved Fellows of RCEM. There are always a minimum of two members of a visiting team plus a lay representative where possible and secretarial support. RCEM's visiting team report directly to RCEM Council and Executive. Visitors must not be employed by the organisation under review and are asked to declare any conflicts of interest.

3.7 Reviews will be conducted against specific terms of reference agreed by RCEM and organisation. The terms of reference must outline specific questions to be considered and the parameters of the review.

¹ A consultant led, 24 hour service with full resuscitation facilities and designated accommodation for the reception of emergency department patients.

3.8 An invited review will only take place if the healthcare organisation commissioning the review has confirmed that it will provide an indemnity to the Royal College of Emergency Medicine and its reviewers.

3.9 Should the review identify **serious and urgent concerns** about a service, particularly with regard to patient safety, RCEM will expect the organisation to notify the regulatory and commissioning authorities of the review and concerns raised. If the organisation does not do so, RCEM reserves the right to notify regulatory and commissioning authorities directly.

4. Arranging a review

4.0 **Initial request** - Organisations should initially contact RCEM's Clinical and Professional Standards team. Reviews are only undertaken at the request of an organisation's Chief Executive, Medical Director or appropriately authorised individual. Any Emergency Medicine physician requesting a review can only do so by approaching their employer to request one. All review requests are confidential and handled in accordance with the Data Protection Act 1998.

The initial request should state:

- the name of the organisation requesting the review and location of the services to be reviewed
- a brief description of why a review is being requested
- a named contact for initial discussions

Contact:

Sam McIntyre

Quality Manager

The Royal College of Emergency Medicine

7-9 Breems Buildings

London

EC4A 1DT

Tel: 020 7067 1269

email: sam.mcintyre@rcem.ac.uk

4.1 **Initial discussions** – upon receipt of a request the organisation's named contact will be contacted by RCEM lead for service reviews in order to discuss:

- the reasons for the review and the desired outcomes
- background and contextual factors
- the type of review to be conducted
- whether a review or direction to a relevant authority is appropriate
- what the review process involves, likely timescales and expectations
- scope of the review
- terms of reference.

Following this discussion RCEM lead will make a recommendation on what type of review should occur; including whether the organisation should be directed to another relevant authority. As necessary, RCEM lead will consult confidentially with relevant College personnel before making a recommendation.

4.2 **Agreement to proceed** – If RCEM lead recommends an RCEM service review or advisory visit, the organisation should confirm they are willing to proceed. RCEM will then ask the organisation to provide the following:

- **Review point of contact** – the organisation will be asked for a point of contact responsible for co-ordinating the arrangements for the visit.
- **Terms of reference** – RCEM will forward a draft terms of reference (see Appendix A). Both RCEM and organisation must sign the ToR before the visit takes place.
- **Terms of business** – the organisation must sign and return RCEM's terms of business (see appendix B). The terms of business include agreeing RCEM's fees and providing indemnity for College reviewers.
- **Self-assessment questionnaire** – in order to inform the review, the organisation will be sent a self-assessment form (see appendix C). The form will be sent as an online survey to allow review participants to anonymously and confidentially rate their service across several domains.
- **Information to support review** – documentation relevant to informing the review will be requested. The information requested may vary according to the terms of reference but you can see a standard list in Appendix D.

4.3 The documentation listed above should be returned to RCEM as soon as possible and **no later than 4 weeks prior to the visit** taking place. RCEM reserves the right to postpone a visit if it is not in receipt of any documentation 4 weeks prior to the visit. All documentation received will be treated confidentially and only shared with authorised College personnel.

4.4 **Review dates and timetable** - RCEM will arrange a date for the review to suit the organisation. The duration of both service reviews and advisory reviews is one day (equivalent to 8 hours and 2 programmed activities sessions). Follow-up visits for service reviews take half a day. A **minimum of 4 weeks' notice** is required for arranging the date of the visit. Organisations will be asked to provide a detailed timetable for the day describing who the team will meet with and details of locations. A list of personnel RCEM would expect to meet with during a visit is outlined in Appendix E.

4.5 **Visiting teams** – RCEM will provide the organisation to be reviewed with details of the visiting team. The team will comprise of at least 2 members of RCEM reviews panel and a lay member wherever possible. Visitors will be asked to declare any conflicts of interest. Organisations will be asked to confirm they are happy to be visited by the designated team. Organisations can request different team members. Visitors must not be employed by the organisation under review. Visitors will have received full equality and diversity training.

4.6 **Media enquiries** – Should at any point RCEM be contacted by media organisations or other parties regarding a review, RCEM will only provide confirmation that a review has taken or is taking place, but would not normally disclose any details regarding details of the review without written approval from the organisation's Chief Executive, Medical Director or contacts authorised on their behalf.

4.7 Finance – RCEM must be in receipt of a purchase order for the relevant amount at least two weeks prior to the review visit. For further information about fees please see Appendix F.

5. The review: process and conduct

5.0 Facilities – Appropriate meeting areas should be provided for the visit team to allow meetings to take place in private.

5.1 Meetings – The visiting team will meet with the review participants in accordance with the agreed timetable. Discussions will be conducted in an objective and non-judgemental manner and will seek to obtain evidence relating to the terms of reference.

5.2 Visit notes – The visiting team will take notes of all meetings and discussions held throughout the day. All notes will be held in strict confidence and retained for 5 years.

5.3 End of visit – The visiting team may provide preliminary feedback on the day of the visit, as time is required to reflect on the findings and prepare the report.

6. Following the review

6.0 Review findings – The visiting team will draft a report outlining their findings and making recommendations. Once drafted, the report will be shared internally with members of the College review panel for quality assurance purposes. The draft report will then be shared with the Chief Executive and Medical Director to allow verification of factual statements and to comment on the findings before publication.

Comments received will be again discussed with the College review panel before finalising the report. RCEM aims to complete the reports within 6 weeks of the review visit. The final report will be released once full payment for the review has been received.

6.1 Report recommendations – Any recommendations within the report will strive to be specific, measurable, achievable, realistic and time-related (SMART). Where possible, recommendations will be based on national guidelines and standards. Any recommendations will be given a priority level (i.e. for immediate action, medium term goals and long-term goals). RCEM is not a statutory body and has no authority to require that the organisation takes action regarding report recommendations.

6.2 Serious and urgent concerns - Should the review identify serious and urgent concerns about a service, particularly with regard to patient safety, RCEM will expect the organisation to notify the regulatory and commissioning authorities of the review and concerns raised. If the organisation does not do so, RCEM reserves the right to notify regulatory and commissioning authorities directly.

6.3 **Report circulation** – The final report will be sent to the Chief Executive and Medical Director. RCEM strongly recommends that the report is circulated to all participants in the review. RCEM will not share the report with any third party without the written consent of the Chief Executive or Medical Director.

6.4 **Follow-up** – Depending on the type of review, RCEM will follow-up after the review as follows:

Timescale	Advisory Visit	Service Review
3 months post visit	Teleconference with key participants to discuss progress against recommendations	Teleconference with key participants to discuss progress against recommendations
6 months post visit	-	Suggested follow-up visit to assess progress against recommendations
12 months post visit	Review participants will be asked to repeat the self-assessment questionnaire	Review participants will be asked to repeat the self-assessment questionnaire

6.5 **Service review follow-up visits** – RCEM will liaise with the original organisation contact to arrange a follow-up review visit to occur approximately 6 months after the initial review.

The follow-up review will be structured to meet with key participants to assess progress against the recommendations and findings of the initial review.

Follow-up visits will normally take half a day.

Documentation to inform the follow-up visit will be sought in a similar manner to the initial review.

The follow up visit is not mandatory.

6.6 **Feedback** – Following a review feedback will be sought in confidence from review participants via an online questionnaire in order to inform continuous improvements of reviews.

7. Governance

7.0 Emergency Care Service Reviews are conducted by a panel of selected reviewers and governed by RCEM Council.

7.1 **Confidentiality** – RCEM will not disclose any details of a review to the public or any individual not authorised by the organisation without written consent from the

Chief Executive or Medical Director. Any information created, received, stored or exchanged will be retained in compliance with the Data Protection Act 1998. Access to such information will be restricted to authorised College personnel. All records will be retained for a minimum of 5 years following a review.

8. Finance

8.0 **Purchase orders** – RCEM must be in receipt of a purchase order for the relevant amount at least two weeks prior to the review visit.

8.1 **Invoices** – Following a review, an invoice for the relevant amount will be raised and sent to the named organisational contact. Payment will be required within 30 days. Reports will be withheld if necessary until payment is received.

9. Invited Review process chart

