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**Meeting of the Health and Adult Social Care Scrutiny Committee – 26<sup>th</sup> January 2022**

**Report of the Dudley Group NHS Foundation Trust**

**Update on Breast screening services for Dudley, Wolverhampton and South West Staffordshire**

**Purpose**

1. This report provides further assurance and update to the committee based on reports received in October 2019, December 2020 and January 2021 into service improvements in breast screening services run by The Dudley Group NHS Foundation Trust.
2. It provides assurance of service improvements following the actions implemented as a result of two serious incidents one in 2018, failure to re-invite following a DNA and in 2019 an administrative error that led to a delay in screening for some women. Also, further recommendations given following the Quality Assurance Visit in 2018, (66) Administration follow up visit in 2019 and the interim screening quality assurance (ISQAR) visit March 2021.

**Recommendations**

3. It is recommended that the Scrutiny Committee: -
  - Note and comment on the contents of the report;
  - Note that the action plans for each incident have been completed in order to satisfy the requirements of the investigations and subsequent Root Cause Analysis and that both incidents are now closed.

**Background**

4. The committee have received detailed information regarding the incidents in 2019, 2020 and 2021 and this report is to inform that both incidents are now closed with all direct actions complete. There has been and continues to be significant external quality assurance processes in place to assure the quality of the breast screening services offered across Dudley, Wolverhampton and South West Staffordshire.

5. The action plans for each incident were completed at the time in order to satisfy the requirements of the investigations and subsequent Root Cause Analysis. Further to these overlapping Quality Assurance visits identified gaps in leadership and administration skills across the service and are what formed the majority of the recommendations the service had to work through to provide subsequent assurance to commissioners and Quality Assurance.
6. In May 2021 a new Programme Manager was appointed and the service has evidenced further compliance to the recommendations outstanding, resulting in a further ten recommendations being closed by Quality Assurance (QA) in July 2021.
7. The programme manager continues to assess gaps in knowledge by ensuring national guidance is evident throughout internal processes that are currently being updated. Regular screening planning meetings are held (monthly) to monitor restoration following the pause in screening due to all such services being halted during the first wave of COVID and identify where resource is required to manage the backlog effectively.
8. There are a small number of actions that remain ongoing due to their nature and form part of the service peer review (Quality Assurance visit) of 2018, the admin review of 2019, the Interim Screening Quality Assurance (ISQAR) visit March 2021 and the incident. They have been agreed as part of an overall action review by NHSE/I and Screening quality Assurance Service (SQAS) at Programme Board meeting in December 2021.

### **Finance**

9. There are no direct finance implications arising from the contents of this report.

### **Law**

10. There are no direct legal implications arising from the contents of this report.

### **Risk Management**

11. There are four Risks currently open on the risk register that relate to outstanding actions following the reviews of the service.

Risk No:	Description	Risk Level Start	Assurances	Risk level Current
CSS1231	Sub-contract with RWT	Major	Sub-contract to be agreed in principle by 31/12/21 signed by all parties by 14/1/22	Minor
CSS1294	Inadequate Monitors in MDT room	Moderate	Monitors ordered – awaiting	Minor

			delivery and installation	
CSS1233	Absence of substantive Breast Radiologist	Major	Job Description with Radiology leads for sign off before advertising in Jan 2022	Major
CSS1237	No dedicated reading facility	Major	Added to risk CSS1236 as part of the wider relocation of the service – feasibility study to be carried out before 31/3/22	Minor

### **Equality Impact**

12. All breast screening services are open to women as defined by the national breast screening programme. Targeted work continues where social distancing allows for those hard-to-reach communities in line with the Health Equity Audit.
13. The Breast Screening Service impacts on all sections of the local community. The Trust is committed to ensure that equality and diversity is reflected in all areas.

### **Human Resources/Organisational Development**

14. Organisational development and transformation issues identified during the investigation have been addressed in the contents of report.

### **Commercial/Procurement**

15. There are no direct commercial implications arising from the contents of this report.

### **Council Priorities**

16. There are no direct Council implications arising from the contents of this report.

*Karen Kelly*

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