

An *inspector* calls: asso

The Commission for Health Improvement (CHI) monitors the quality of care for NHS patients and service users. Here is what happens when, in the words of JB Priestly, an inspector calls.

WHAT IS CHI?

CHI is a non-departmental public body covering England and Wales. It has statutory powers, but is independent from government. It aims to help improve the quality of patient care by reviewing clinical governance arrangements. CHI also carries out more detailed investigations into serious service failures and administers the annual performance rating process, including patient and staff surveys.

CHI's reviewers include full time NHS employees seconded for the review visit, a lay person (with no NHS experience) and a user of mental health services.

WHAT DOES CHI ASSESS?

- service user, carer and public involvement in their own care and in developing services;
- risk management;
- clinical audit;
- staffing and staff management;
- education and training;
- clinical effectiveness;
- use of information.

CHI also describes:

- patient's or service user's experience of care
- strategic capacity, a trust's overall ability to monitor and improve care.

WHAT'S IN A REVIEW?

A CHI review lasts about 28 weeks. There are four main stages:

STAGE 1: DATA COLLECTION AND MEETING THE PUBLIC

- Collecting documents (eg minutes of meetings, policies and procedures and performance information).
- CHI analysis of documents
- Local meetings (open to other local organisations, such as DATs, service users and the public). Select three trust areas (teams) for investigation. 'Teams' complete questionnaires about clinical governance arrangements.
- Interview service users.

STAGE 2: THE VISIT

- Visit the trust to interview staff and observe how it works. During a CHI inspection, staff can have a say about their own workplace.
- Initial findings are presented to the trust at the end of the visit. *The interviews are not a test but a confidential discussion with CHI reviewers about how the systems work.*

Assessing your organisation

CHI AND THE DRUG TREATMENT SECTOR

During the early part of 2002, CHI met drug professionals, users, user organisations, policy makers and other bodies involved in improving quality in the sector, most notably the National Treatment Agency (NTA).

This research demonstrated that clinical governance principles are central to providing good care for users of drug treatment services. However, they may be applied in different ways to other sectors. For example, in hospitals they may consider systems to monitor and prevent the incidence of hospital-acquired infection as an indicator of their risk management. In the drugs sector, it is more relevant to consider how trusts are working with partners and service users to prevent the spread of blood borne viruses.

CHI's first review focusing on drug treatment services was conducted in Berkshire Healthcare NHS Trust. The report commended the trust's agreement between social services, primary care and service users. This was then used to develop guidelines on evidence-based practice. However, the review also found that the trust and its partners needed to develop a common understanding of how to meet service users' needs.

KEEPING IN TOUCH

A focus on services for people with substance use problems may provide a powerful insight into an organisation's arrangements to provide quality care for service users.

CHI keeps in touch with the significant changes in the NHS and drug treatment sector. It meets regularly with the NTA to ensure CHI is aware of new guidance, such as implementation of Models of Care, and to update the NTA on changes within CHI.

CHI also assesses its own work; for example, its work with Berkshire suggested several alternative ways of collecting service users' views.

WOULD YOU LIKE TO REVIEW FOR CHI?

As a reviewer you can experience another organisation close up and translate those experiences into improvements.

Reviewers spend seven days away from home on a review. Before becoming a CHI reviewer, candidates attend a half day selection centre and if successful, a two and a half day training course.

All reviewers who are employed within the health and educational sector will have their employment costs reimbursed to the organisation they work for. These costs include: salary, national insurance contributions, pension etc.

For details and eligibility criteria visit www.chi.nhs.uk or call the reviewer recruitment line on 020 7448 9467, text phone: 020 7448 9292 or email: reviewer@chi.nhs.uk, stating the category of reviewer that applies to you. ■

STAGE 3: THE REPORT

● CHI prepares a report on the trust. Seven components of clinical governance are scored from 1 to 4 to reflect what CHI has found. *The trust has an opportunity to comment on the report's accuracy at this stage before it is printed and published on the CHI website www.chi.nhs.uk*

STAGE 4: TIME FOR CHANGE

● Reports provide an insight into the quality of other organisations. Reviews also act as drivers for change.

● In response to areas highlighted in the report, each trust will carefully plan how to make changes, giving timescales and ensuring someone is accountable for seeing them through. The action plans are public documents.