

13 February 2013

Dear Colleague

As part of its responsibility for commissioning primary care services, the NHS CB will have responsibility for ensuring that their contractors are aware of relevant safety critical information. Therefore, the NHS CB primary care commissioning role includes responsibility for cascading safety alerts to their primary care contractors for action, where appropriate. The NHS CB will also be responsible for monitoring the implementation of relevant alerts by primary care contractors.

This function had historically been managed by PCTs, and will transfer to NHS CB Area Teams from the 1st April 2013.

Area Teams will be required to use the Central Alerting System (CAS), a web-based cascading system, for receiving the alerts. They will then cascade alerts on to their primary care contractors where relevant. Area Teams will be responsible for responding to alerts on the CAS system by confirming that the alert has been received and cascaded onwards for action as appropriate.

Implicit in this is the expectation that Area Teams will monitor the implementation of alerts, by primary care contractors, given their responsibility to ensure that the services they commission are safe.

There are two different kinds of alerts issued by CAS.

Non-emergency alerts are issued on behalf of Department of Health (DH), Medicines and Healthcare Products Regulatory Agency (MHRA) devices, DH Estates & Facilities and the former National Patient Safety Agency (NPSA). This type of alert is issued during office hours and requires a response to CAS

Emergency alerts are Chief Medical Officer (CMO) messages, MHRA drug alerts and Dear Doctor Letters. This type of alert can be issued 24/7 with a need to be cascaded immediately in extreme cases. No response to CAS is currently required due to the potential difficulties this could cause out of hours.

Each Area Team will need to have a designated CAS liaison officer (with appropriate back up cover) responsible for cascading alerts to primary care contractors and making responses on CAS along with robust mechanisms in place to fulfil these obligations both in and outside of normal office hours when there is a need for the alert to be cascaded urgently.

## For Action

Each Area Team is required to identify a CAS liaison officer and appropriate back-up cover now.

Once identified, Area Team CAS liaison officers will need to contact the CAS Helpdesk to arrange for receipt of alerts and login access to CAS. This will involve the Area Team setting up a dedicated generic email address for the receipt of alerts that the CAS liaison officer can access. Draft guidance on how to use CAS and a contact details form for CAS liaison officers to submit to the CAS helpdesk are attached to this letter.

Any email address could be used by the Area Team CAS liaison officer, however we would recommend that a generic email address be set up so that if the relevant officer is not available then other staff can access the email account to see the alert/s. The same is true for email addresses to which CAS alerts are cascaded by Area Team Liaison Officers.

The CAS Helpdesk can be contacted between 9:00am and 5:00pm Monday to Friday either by telephone (020 7972 1500) or via email ([safetyalerts@dh.gsi.gov.uk](mailto:safetyalerts@dh.gsi.gov.uk)).

Designated Area Team CAS liaison officers should also liaise with their predecessor PCT CAS liaison officers and obtain relevant mailing lists of all the primary care contractors for which the Area Team will be taking on commissioning responsibilities. These email lists will be used to cascade alerts issued via CAS.

If Area Team CAS liaison officers are unable to identify relevant PCT CAS liaison officers for handover of mailing lists, they should contact the CAS Helpdesk.

PCTs will hand over their relevant, up-to-date primary care mailing lists to the appropriate Area Team and assist with any cleansing or consolidation required. PCTs should ensure that all outstanding alerts are signed off prior to the transfer of responsibility to Area Teams.

Area Team CAS liaison officers should discuss with PCT CAS liaison officers taking on responsibility for relevant mechanisms to cascade the small number of alerts that are received out of normal office hours that need to be cascaded urgently. As part of the hand over arrangements, PCTs and Area Teams are responsible for ensuring knowledge transfer including how the CAS cascade function currently operates within their locality.

PCTs will continue to receive alerts whilst they remain legal entities commissioning primary care. However, once the commissioning function transfers to Area Teams, so will the CAS cascading function and alongside the requirement to respond to relevant alerts via CAS.

For general queries or clarification, please contact the CAS helpdesk either at [safetyalerts@dh.gsi.gov.uk](mailto:safetyalerts@dh.gsi.gov.uk) or on 020 7972 1500.

Yours etc.



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To be filled in by designated Area Team CAS liaison officers and submitted to the CAS Helpdesk via [safetyalerts@dh.gsi.gov.uk](mailto:safetyalerts@dh.gsi.gov.uk)

<b>Business of organisation</b>	NHSCB AT
<b>Area</b>	
<b>PCTs previously responsible for alerts</b>	
<b>First name</b>	
<b>Last name</b>	
<b>Job title</b>	
<b>Full postal address</b>	
<b>Email address for receipt of alerts</b>	
<b>Personal email address if different from above</b>	
<b>Telephone number</b>	
<b>Fax number</b>	