

Private & Confidential

Briefing Note for the Crown Prosecution Service (CPS)

CHI investigation at Gosport War Memorial Hospital

Status of the investigation

This investigation falls within CHI's statutory function to investigate serious potential systems failures in the NHS. Under the Commission for Health Improvement (Functions) Regulations 2000, section 11, CHI is required to carry out an investigation when required to do so by the Secretary of State. This is not a matter for discretion on the part of CHI.

CHI has recently been instructed by the Secretary of State for Health to produce a report in respect of the Gosport War Memorial Hospital. This report will address a specific term of reference. CHI has been grateful to the Department of Health for facilitating a constructive dialogue in order to shape the terms of reference, though the final wording remained with the Secretary of State.

CHI understands that the letter instructing CHI to begin this work has been signed by the Minister and is currently en route to CHI. CHI understands that the decision to make the instruction public has been placed on hold pending the CPS decision.

Aims and objectives

CHI will produce a written, public report which addresses the terms of reference attached at Appendix A.

The investigation will examine whether from 1989 to 1998 there had been a failure of local NHS systems to properly act upon concerns raised by patients, relatives and staff about prescribing practices or unexpected deaths at the Gosport War Memorial Hospital.

CHI's objective is to understand whether there was a failure of systems. CHI will not make any judgements regarding the outcome of any individual complaint or the conduct or ability of any former or present member of NHS staff.

Methodology

In order to address the term of reference, CHI will:

- Request and review documents and correspondence from the former Portsmouth Healthcare NHS Trust and previous NHS organisations responsible for the management of the Gosport War Memorial Hospital. This would include complaints correspondence, correspondence with professional organisations (eg RCN), management team minutes and

prescribing policies. This documentary evidence has not been requested to date.

- Invite local stakeholders (such as patients and relatives) via the local media to tell CHI their views on the service between 1989 and 1998. CHI will be particularly keen to understand the systems in place for raising concerns and complaints and the outcome of such action.
- Interview present and, where possible, previous NHS staff to test out CHIs findings following the document review and stakeholder interviews. Interviewees may be accompanied during interviews, this may be by their legal representative who is not permitted to answer questions on the interviewees behalf. CHI would wish to interview staff mentioned in the "dossier" submitted recently by nurses as well as NHS managers responsible for the wards, complaints and hospital between 1989 and 1998.
- Consider whether to undertake a review of relevant case notes covering the period of the investigation.

Outputs

CHI will produce a report made publically available on the CHI website which will detail CHIs findings and recommendations.

CHI will take a non-verbatim note of each interview, which will be typed and collated via a software system.

Timetable

CHI would estimate that this piece of work could be completed by the Spring 2003.

Julie Miller
19 December 2002

Gosport War Memorial Hospital

Terms of reference for a further investigation by CHI

The investigation will look at whether, *from 1989 to 1998*, there has been a failure of local NHS systems to properly investigate and act upon concerns and complaints about standards of patient care.

CHI will take into account of the clinical audit, based on patient records, conducted by Professor Richard Baker.

The investigation will look at:

- the systems in place in the trust (and its predecessor organisations) from 1989 - 1998 to enable patients, relatives and staff to raise concerns about patient care;
- the concerns raised by patients, relatives and staff about prescribing practices or unexpected deaths from 1989 - 1998;
- the adequacy of the response to the concerns raised by patients, relatives and staff by trust managers;
- the adequacy of the trust's response to any concerns raised by professional organisations; and
- whether the management systems in place between 1989 - 1998 in local NHS organisations allowed concerns to be addressed at all levels