

Service Strategic Managemen.B1 Leadership	Site Interview- Friday.EileenThomas- NursingDir	Initiated post-grad. Certificate on clinical governance.
Service Strategic Managemen.B1 Leadership	Site Interview- Friday.EileenThomas- NursingDir	ET and Medical Director had just arrived in post in 98. ET didn't learn about complaints until police became involved.
Service Strategic Managemen.B1 Leadership	Site Interview-Friday.Text Jerry Clasby-SenNursColW	Acute administration on mental Health ward-Collingwood Accepted her and warmed well From Knowles Hospital 6years ago when it closed
Service Strategic Managemen.B1 Leadership	Site Interview- Friday.ToniScammell- SenNursCoord	Came from QA ward manager medical ward intermediate care. Started November 2000. 11m in post with gap*, new post role is supporting/managing clinical manager/areas. Also facilitate clinical practice. 50:50 clinical admin. Involved in training and development of nurses at GWMH eg. alert system. Back before care wards tended to deal with issues alone. Now have "common" ACD .
Service Strategic Managemen.B1 Leadership	Site Interview- Friday.ToniScammell- SenNursCoord	Purpose of post? Reason was there was no nursing leadership at GWMH. Also SM (Read) had too wide a role. H grade. Aware of problems when arrived? Knew but not in depth - bring up skills of nurses.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.BarbaraRobinson- DepGenMgr	General - In this area since 1981. Nurse (district) background. 1987 management - ?? care - Mental Health - Comm Hospital is Fareham. 1996 Managed St Christophers (F) GWMH, other services in Gosport. GWMH was small, but upgraded and enlarged.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.BillHooper-ProjDir	Oversaw principles applied at other community hospitals. Strong union representatives

		very high health and safety. Union - domestic abuse whistle blowing.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.BillHooper-ProjDir	Sultan - 1998. Very comfortable service - efficient, excellent senior nurse, 5 senior GP - GP committee meet monthly, 50 GP had admission rights, worry single handed GP would be edged out by group practice, some beds were used for ??? were flexible within reason. Haslar were ?? did not specialise in Elderly. Haslar staff changed often which caused problems with admission & discharge. Translation of Processes - no problems, GP Gostop, used GWMH outpatients as base rather than surgeries.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.FionaCameron-Gen Mgr	Background of elderly nursing, was Service Manager Petersfield Hospital. Then added Havant as Nurse leader. Now locality General Manager. (Leader) Contract for Phys, OT, Community Hospitals, Podiatry, Physical disability, now has health visiting, district nursing - Fareham & Gosport. Primary Care Trust (attends Gosport 1 day a month). So she has a very broad & diverse remit.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.FionaCameron-Gen Mgr	Is Line Manager for Jan Peach, meets monthly. Spends one day a month Gosport, Nicky leads intermediate care. She reports to Nurse Director & Operation Director Ian Piper.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.JanPeach-ServMgr	Supervision route? Fiona - Jan - Tony - Rosemary Packston, Support Service Manager - Beverly Carler/Jill Hindson, Out patients Manager No clinical involvement - Core management. Support appraisal.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.JanPeach-ServMgr	Personal appraisal - constant contact. Informally - meet monthly - Development problems. Fiona IPR 6 months & annually.

Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.JanPeach-ServMgr	Int care developments. Ward - D Initially anxious then excited. Daedulus developed skills for slowstream & continuing care. Big leap - to rehab. Meet regularly with clinical team & with therapist about managing beds. Conclusion - need to increase level E grade staff, 4 staff, 4 support. E & D night staff - ward clerk time - Tony, nurse leadership. Took a year to recruit the staff for the post - due to extra cash that had been released across the trust opening more opportunity for staff.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.JanPeach-ServMgr	Clinical Manager of Sultan was away so clinical manager of Shannon ward at St Christophers came to cover. St Christophers - 9 beds stroke. Shannon - 26 beds rehab. 18 continuing care. Nurse consultant Jane Williams - stroke management. To improve & develop nurse skills.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.Pat Wilkin-SenStaffNursDaed	Clinical Manager very good, looking at self medication 'self contained flat' in ward.
Service Strategic Managemen.B1 Leadership	Site Interviews- Tuesday.VickyBanks-LdClf	Felt there has been improvement over last two years in terms of how decisions over patient care are handled especially change form rehab -> palliative care.
Service Strategic Managemen.B1 Leadership	Site Interviews-Monday.07.01 Max Millet-CEO	Trust style - expressed in four Ps (people, pennies, partnerships, performance). Nothing can be acheived by trust alone. Have always tried to involve local communities.
Service Strategic Managemen.B1 Leadership	Site Interviews-Monday.Andy Wood-Dir of Finance	Local flexible management? Autonomous and good communication with e@ division. So long as comply with policies.

Service Strategic Managemen.B1 Leadership	Site Interviews-Monday.Andy Wood-Dir of Finance	How is Fiona told to break even? Verbally, meeting about next year, meet at quarterly meetings, start of year plan.
Service Strategic Managemen.B1 Leadership	Site Interviews-Monday.Andy Wood-Dir of Finance	Clinician and front line staff involvement? Business plans written by reference groups and multidisciplinary groups.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.AnneMonk-Chair	Staff Union Reps. Could they forward to the Manager. "Ask Barbara Robinson". Does not know if staff would be afraid to whistle blow.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.DavidLee-Complaints Conveynor	It was evident at divisional level good management between Managers and clinical staff / lead consultants.
Service Strategic Managemen.B1 Leadership	Site Interviews-Monday.Debra Hunt-telephone	gets good support from clinical manager-Philip Beed-and meets with him and other colleagues regularly to be given information about new developments and other trust issues
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.DrAltheaLord	'Everyone chips in' ie no one leads or chairs meetings.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.IanPiper-Ops Dir	Chair risk management group.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.IanPiper-Ops Dir	Accountability. Lead Consultants - not line managed by F.C. but internally managed by each division. - They work alongside divisions.

Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.JeffWatling- ChiefPharmacist	Eg. Intrathecal drugs, DoH wanted consultant only use. Trust wanted a Waiver agreed to by the CEO.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.JeffWatling- ChiefPharmacist	Audit Commission "spoonful of sugar" - recommended more pharmacy involvement in clinical areas, warning of high doses.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.PeterKing-PersDir	98 - very good manager in elderly medicine. Barbara Robinson her successions are "ok", but BR was especially good.
Service Strategic Managemen.B1 Leadership	Site Interviews- Monday.PeterKing-PersDir	Ian Piper given specific responsibility to oversee service (checking client care plans etc).
Service Strategic Managemen.B1 Leadership	Site Interview- Thursday Code A Sp- LangThera	Ethical decision will be made by Consultant and documented in medical notes. Discussion with family and Consultant and nurse grade. Issues around swallowing eg. patient who refused to eat although had swallowing problem but consultant wanted to peg speech, therapist would not. Late stage dementia – Consultant wanted peg feeding – therapist felt quality of life said no and family decided no. Decisions – no MDT meeting not necessarily unilateral decision.
Service Strategic Managemen.B1 Leadership	Site Interview- Thursday.JaneParvin Senior Personn	Sickness in unit - advising rec. & ret. Ward managers work with. Work force information divided reviews Sickness info, turnover, vacancy levels, workforce, predictive planning, training and development.

Service Strategic Managemen.B1 Leadership	Site Interview- Thursday.JaneParvin Senior Personn	Perception with ward managers, now need more support than others. Would know by meeting with people and establish how managing problems and pick up data. Maureen meeting with ward managers.
Service Strategic Managemen.B1 Leadership	Site Interview- Thursday.PhilipBeedclinicMgr Daed	Rehab was driver for change and strategy team working and letting them drive change. Particularly focus on rehab.
Service Strategic Managemen.B1 Leadership	Site Interview- Thursday.PhilipBeedclinicMgr Daed	Common approach to other wards Anne Haste Jill Hanton Philip Beed And many supervision meetings Monthly meetings and Toni Scandle
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Support lower down through grades is reduced. Training available for qualified staff but not same level for HCSW.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Morale was low – investigation management support. Communication was good.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Comms – very good: memos, memos to individual, communication book night staff, ward team meeting.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt	Policies – Head of department meeting, clinical managers meeting, memo notice

	afNursDryad	board, manager identified policy and alert staff to folder.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Expressed concern about MH numbers. Set up working parties to look at problems to develop skills – study days often clashed with low staffing levels.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Junior have not received as much support <ul style="list-style-type: none"> - invited to CHI meeting directed at grade - briefing with general discussion - aware support is there
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Gill Hamblin has always been available.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Required to participate in resus. Lack of support , only people directly involved in resus. Support need from ward managers LD, HCSW or Toni Scannell.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Look to HCSW local experience rather than Senior Management.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Clinical supervision system in place, 2 groups, mixed nights and days <ul style="list-style-type: none"> - 6 people group night/day/grades - reflective practice and learning - confidential issues - ways of dealing - researched producing solutions - meets monthly - staff shortages not monthly

		- not available across the board Support from Gill Hamblin
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.GinnyDay- SenStafNursDryad	Standard of care is very high. Improved by new H grade structure and training and development.
Service Strategic Managemen.B1 Leadership	Site INterview- Wednesday.MargaretWigfall- ENNursDryadNt	Leadership - no problem.
Service Strategic Managemen.B2 Accountabilities	Site Interview-Friday.Jeff WattlingChiefPharmic	Kevin has led at trust level, with prper input from other Profs and has been developed together with partners in health community.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Friday Code A senior Diet	Executive feeding people committee
Service Strategic Managemen.B2 Accountabilities	Site Interview- Friday.ToniScammell- SenNursCoord	Service Manager is person who will be responsible for addressing radical ????? goals on wards.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Friday. Code A Phar ma	How does she find out about policy? PD deals with these matters. Information is e:mailed.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Friday. Code A har ma	Communication of new policy? Paula is main link, but may occasionally forget to tell her of changes.

Service Strategic Managemen.B2 Accountabilities	Site Interviews- Tuesday.FionaCameron-Gen Mgr	Is Line Manager for Jan Peach, meets monthly. Spends one day a month Gosport, Nicky leads intermediate care. She reports to Nurse Director & Operation Director Ian Piper,
Service Strategic Managemen.B2 Accountabilities	Site Interviews-Monday.Andy Wood-Dir of Finance	Communication - own and aware of trust values.
Service Strategic Managemen.B2 Accountabilities	Site Interviews-Monday.Andy Wood-Dir of Finance	Pounds matter - making sure people are aware of value of spending. Corporate - Trust newspaper, staff letters, monthly info exchange, divisional review process, personal contact, networks.
Service Strategic Managemen.B2 Accountabilities	Site Interviews-Monday.Andy Wood-Dir of Finance	Executive Director - group operational management, group very cohesive - role awareness. Group meets 2 weekly or monthly.
Service Strategic Managemen.B2 Accountabilities	Site Interviews-Monday.Andy Wood-Dir of Finance	Clinical Management. Lead Consultant -> MD. No direct role. Voice heard through divisional meetings.
Service Strategic Managemen.B2 Accountabilities	Site Interviews-Monday.Andy Wood-Dir of Finance	Eileen - empowering clinical leadership, is in harmony with operational remit.
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.AnnMonk-Chair	Regional Support. On edge of Region - Induction SE Regional if 18 months. Induction training for South West. Can go if Region, Chairs District. Twice yearly Chair meeting in London. Chair of clinical governance training meeting. Non-executive.
Service Strategic Managemen.B2	Site Interviews- Monday.DavidLee-Complaints	Feels that there has been no findings of clinical negligence, has never to be shown to be

Accountabilities	Conveynor	proven
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.Eileen Thomas Nursing Dir	New approach to improving care she's trying to introduce: direct observation and evidence like crtical incidents, complaints is approach trust key evidence if review direct observation?????????
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.IanPiper-Ops Dir	Delegation - how do you keep track. Operational Team
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.IanPiper-Ops Dir	Something may have been delegated by accountability would not change.
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.JeffWatling- ChiefPharmacist	Accountable to Division Manager for Clinical Support in Portsmouth. He provides services through SLA to this Trust. Liaises with Finance Director.
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.JeffWatling- ChiefPharmacist	Service to Trust is managed by a Grade E Pharmacist (Code A) and 2 pharmacists elderly and mental health + community. She also has staff at QA.
Service Strategic Managemen.B2 Accountabilities	Site Interviews- Monday.PeterKing-PersDir	Weekly management when problems in elderly medicine came to fore.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday Code A Patient Affairs	Employee of the trust Communication, do know what's going on. Line communication very good

Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday.JaneParvin Senior Personn	Report to Personnel Director. Divided Local Management. Division Management meeting. Monthly.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday.JaneParvin Senior Personn	Training on personnel policies. Her lead is on sickness management policy.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday Code A PractDevlFacil	Has wide remit in her role of Clinical Governance - not much in corporate. Sees Toni Scannel on general matters only every 3 months. Toni might raise training needs of staff in ad hoc way.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday Code A PractDevlFacil	Examples of working with Toni Scannel. No specific examples. Training and Development "can you make sure that people get ??? training.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday Code A PractDevlFacil	3 monthly meeting with Toni - Training, Development. Is everything OK? Asks about Gerentological developments, ??? training discussed.
Service Strategic Managemen.B2 Accountabilities	Site Interview- Thursday Code A T	Structure, no-one is ward based. Work alongside Rehab. Eileen Kettlewell, stroke. Liz Jenkins Fareham and Gosport area manager for OT. Rosemary Saliman Distinct Manager. Shelly GWMH / Clare St Clins. MH has similar structure - not as close in links. Unit more self-contained.
Service Strategic Managemen.B2 Accountabilities	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Teamworking character. Very caring team put patients first but let down by documentation.

Service Strategic Managemen.B2 Accountabilities	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Gill Hamblin has always been available.
Service Strategic Managemen.B2 Accountabilities	Site INterview- Wednesday.TLDrRavindraneC onsult	Chaired Clinical Governance Group (Acute). Feeds into service meetings Feeds into service meetings - Lesley Humphrey, Clinical Governance groups stroke.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday.AnneHasteClinical manager	Initially problems therefore different management style-everyone equally valued. After a course, changes implemented and evaluated
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday.AnneHasteClinical manager	Change to Intermediate Care, needs have to be met and management system 'Flattened'
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday.EileenThomas- NursingDir	Processes of system in clinical practice since 98: have been major changes in 3 areas: (1) Management of pain training related to it triggered by incidents, primarily for nurses. (2) Very broad variation in clinical practice in trust so clinical practice development programme appointed f????????? to ensure s???? of good practice and circulation of evidence-based practice. We would have commissioned an investigation without question if it hadn't been for police investigation starting.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday.EileenThomas- NursingDir	Changes include: evidence based practice ??????? consistency in dealing with patients and focused on middle grade nurses – appointed better calibre people from outside.
Service Strategic	Site Interview-Friday.Jeff	

Managemen.B3 Direction & planning	WattlingChiefPharmic	In respect of total medicines Policy that has been recently revamped
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday.JoTaylorSenNursDayWard	MDT training – other reflective practice meetings. Issue: patient in residential care may have time reduced in day ward to allow for home based patients and carer opportunities for respite and assessment.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday.JoTaylorSenNursDayWard	Oe patients are on wards, easy to think save to MDT is forgotten.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday.JoTaylorSenNursDayWard	Staff – front line staff should be involved in management meeting.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday.MaxMillett-CEO	Blockages to change - choices - culture of ward levels. More objective blockages than culture. There's no such thing as "open culture". Difference in culture and beliefs between three wards.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday Code A Senior Diet	Systems were very different between Dolphin and Dryad and Sultan. Knowledge seemed less than on Dolphin.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday Code A Senior Diet	3 wards 1 day a week. Daedalus – stroke patterns had dedicated support on nutrition/feeding. Sultant and Dryad – called for critical incidents or special problems with feeding – responded when called.
Service Strategic Managemen.B3 Direction &	Site Interview-Friday Code A Senior	Now working on learning disabilities so aware of policies of trust and aware policy

planning	Diet	of feeding in place.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday Code A Senior Diet	Dealt specifically with a patient needs not over whole ward. Eg. of cases of needs <ul style="list-style-type: none"> - overweight, diabetics lipids - glycogen levels, home preparation - peg feeding - nasal feeding
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday Code A Senior Diet	Nutritional reps meeting – 6 months <ul style="list-style-type: none"> - regular update training - access to info.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday Code A Senior Diet	Role of dietician, has changed and respected more by clinical staff now.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday Code A Senior Diet	Enablement team Full-time dietician At wards, St Christopher and Community plus MDT meetings.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Friday Code A Senior Diet	Enablement Services – to improve, interface between hospitals and communities.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday. Text Jerry Clasby-SenNursColW	40 bedded admission ward-Gosport & Fareham-bigger catchment area
Service Strategic Managemen.B3 Direction &	Site Interview- Friday. Toni Scammell-	Team Working - how can Toni make it happen. ASW works on ward herself to role

planning	SenNursCoord	model behaviour. Doesn't think they have got it right yet. Would like documentation to be better across the board - everyone adhering to same core plan. One of issues is to get that sense of working together for integrated goal setting and person centred goal setting, wants to get people working together. Her physio on nursing documentation groups. Hopes this will lead to multi-professional documentation and goal setting.
Service Strategic Managemen.B3 Direction & planning	Site Interview-Friday.ToniScammell-SenNursCoord	Service Manager is person who will be responsible for addressing radical ????? goals on wards.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Tuesday.AngelaWilson-SenStafNursDaed	Mental Health Unit - Collingwood. RGN nurses are being used to work on EMI unit. 1 night staff, nurses were ordered to cover shifts. Ordered by management, happened regularly.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Tuesday.AngelaWilson-SenStafNursDaed	Leaves Daedulas short. Near miss with a drug error at Collingwood - 2 agency nurses.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Tuesday.BarbaraRobinson-DepGenMgr	To "integrate" - cross fertilise?? - between Elderly Care and GP. Also quick PSE (old age psych) opinions. She managed the change, used multidisciplinary team approach - included services such as catering/portering?? aswell as care staff.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Tuesday.BarbaraRobinson-DepGenMgr	In March 2000 - asked to move (reluctantly) to Elderly medicine - because of ward closures and staff leaving.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Tuesday.BillHooper-ProjDir	Main barrier blocking medical cover was funding?? Felt DGH was absorbing all the money.

		Transfer arrangements - Haslar & Q&A. Q&A - new dept - not system that was in place in 98.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.DavidJarrett- LdConslt	Forming into 3 groups as per localities with lead clinicians in each patch. Advertising for extra post, really need 12 % 3 groups of 4.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.DavidJarrett- LdConslt	Health - complex medical & nursing needs that require specialist input eg swallowing/fits. If unfilled C/C beds - may more stable pts awaiting NH bed in to free up acute beds. Rehab emphasis / eg slow stream stroke rehab.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.FionaCameron-Gen Mgr	Community Enabling Service - funding for it came all at once. Intermediate care - possible £1 000 000 Budget - Intergrates current services and all new services. Not yet happening. Purpose of service to prevent admission and promote discharge.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.FionaCameron-Gen Mgr	Hospitals use - enabling service - using physiotherapy, integrity.?? Of occupation therapy ?? of Health Social Services includes OT - Health Care Services ??? "It will happen faster discharge". Hope disclose difficulties relaxed discharge very high??
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.JanPeach-ServMgr	Continually care 'Care in the community' Agenda. Helps identify gaps in training. Initial role was Nurse lead & Service Manager. Service Manager St Christophers Colde East?? Development of service to creating good networks for patient care.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.JanPeach-ServMgr	Examples of impact of shared good practice b/w two community hospitals. At year awayday. Asked nurse - topics - rehab, nutrition.

Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.Pat Wilkin-SenStaffNursDaed	Induction - was continuing care ward. Had continuing care & slow stream stroke. Now has fast stream stroke and general rehab. Take orthopaedic cases - fractured neck of femur & general rehab. Home visits arranged. Care plans handed over from previous hospital. Handovers take place in dining area or quiet room. Fewer inappropriate referrals.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.VickyBanks-LdClf	98 - ward changed from continuing care to rehab. Ward staff confused re role. Also for GPs there was some difficulties about treating different group of patients.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.VickyBanks-LdClf	Nurses found change from continuing care -> rehab patients quite difficult. Does not think nurses were involved in decision in change of ward.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Tuesday.VickyBanks-LdClf	Felt there has been improvement over last two years in terms of how decisions over patient care are handled especially change form rehab -> palliative care.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Monday.07.01 Max Millet-CEO	Acute wards are operating at above safe level of occupancy; creates unacceptably high workload for community teams
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Monday.07.01 Max Millet-CEO	For elderly people. Need to slide with improvements - long slow slog.
Service Strategic Managemen.B3 Direction & planning	Site Interviews-Monday.07.01 Max Millet-CEO	Not much freedom to manoeuvre concerning priorities for vulnerable groups - ie NSFs etc - set direction. Choice is around 'how' - how to work with staff etc, choice around style culture work with voluntary groups etc.

Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.Andy Wood-Dir of Finance	Training budgets. Resources - each division has own training budget but particular issues Trust would invest and fund training.
Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.Andy Wood-Dir of Finance	Role in Business Planning? - Ops Director and comms - David Barker. - Planning patient focused and clinical? Board here for support and providing a framework.
Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.Debra Hunt-telephone	?nurses are responsible for acre plans and for discharge planning Have one ICP- for NOF developed plans with QA
Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.Debra Hunt-telephone	it is seen as very happy on wards and sorry to leave, but feels hassle to develop skills because of case-mix of patients on ward. Thinks too many patients are wrongly placed, having acute hospital health problems. (Anxiety dementia) feels these patients should go to EMI wards.
Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.DrAltheaLord	Portsmouth has always had lots of continuing care beds but slow stream stroke beds recent and very helpful.
Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.DrAltheaLord	We started doing rehab before we were funded to do it.
Service Strategic Management.B3 Direction & planning	Site Interviews-Monday.IanPiper-Ops Dir	Financial year - away day - key issues. Mixture of operational and reconfiguration agenda.

Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.IanPiper-Ops Dir	Ring Ian or Max, group meeting, fortnightly ED meetings, review and comms briefing, forms/key documentation.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.IanPiper-Ops Dir	Consideration given to using the model in place now for elderly medicine to the new PCT? Beds geographically retained local focus - but maintaining a strong linkage d/w two PCT.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.IanPiper-Ops Dir	- planning of elderly services needs to be strategic.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.IanPiper-Ops Dir	M.D Martin Severes 1990 - developed stroke services.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.IanPiper-Ops Dir	Last 3 - 4 years Int Care, separation of ward functions? The driver was Nicky Pendleton - general manager for elderly medicine.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.IanPiper-Ops Dir	No successful CREZ programmes. Very pragmatic approach to CREZ by keeping health level of reserve. Ie. Recurring 1/2 - 3/4 million on turnover of 100 million. Ie CPR training received 80,000 recurring funds.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.PennyWells-District Nurse	Nurses are talking and so communication has not failed due to becoming a PCT?
Service Strategic	Site Interviews-	

Managemen.B3 Direction & planning	Monday.PeterKing-PersDir	Weekly management when problems in elderly medicine came to fore.
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.PeterKing-PersDir	Satisfied that reasonably well staffed in elderly medicine now - thinks staffing level ok
Service Strategic Managemen.B3 Direction & planning	Site Interviews- Monday.PeterKing-PersDir	"This isn't an area that particularly worried me (esp compared too often, areas like psychiatry).
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday. Code A -Sp- LangThera	Service <ul style="list-style-type: none"> - disvager/swallowing - speech therapy 60/40 - work with patient and family, inpatients and outpatients
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday.DrBeasleyGP	So workload complexity increased - what about staffing/infrastructure? Dr B asked for clarification of question/infrastructure? Re: nursing 30% of elderly patients are EMH - presents a number of problems - so scream and howl at lot. Had word with Dr Banks (could he make a room soundproof?).
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday.DrBeasleyGP	Change in case-mix - letters sent from the time to time.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday.FionaWalker-SenStafNursSultNt	Based on Sultan ward last few months with 2 trained staff on nights. Medical problems – will attend, Medical problems on Mulberry – called in frequently.
Service Strategic Managemen.B3 Direction &	Site Interview- Thursday.FionaWalker-	Documentation changed with syringe driver.

planning	SenStafNursSultNt	Intro. Policies <ul style="list-style-type: none"> - Placed on desk - Do not go to clinical management meetings so now policy lands on desk. - No support in developing career
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday.FionaWalker- SenStafNursSultNt	Not aware what is going to be placed on computers.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday.FionaWalker- SenStafNursSultNt	NSF older people – no discussion, no opportunity to discuss new research and effect on staffing.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday.FionaWalker- SenStafNursSultNt	No benchmarking.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A PractDev\Facil	Sharing of good practice with the Trust is not developed, but community network recently established to improve sharing.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A PractDev\Facil	Clinical Network group being maintained.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A OT	Ellen K is Senior for neuro rehab so primarily oversees Daedalus. Sultan has GP, so OT role is discharge management. Dyrad has continuity care - never funded for OT input - do 6/8 referrals per year - for very complex discharge.
Service Strategic	Site Interview-	

Managemen.B3 Direction & planning	Thursday Code A OT	Future- fax referral to central office. Social Services and OT will be based in a central office with outreach workers-Sept 2000 new service started.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A OT	There will be no ward OT Officially community OT
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A OT	caseload divided- based in locality but cover speciality orthopaedics trauma orthopaedics medical team complex general rehab strike rehab
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A phy	Change/move rehab - 4/5 years ago. Next change - intermediate care 14/15 months ago - and staff became team leader.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A phy	Freedom to follow people through - what happened - to change service - organisational change - why to NSF - intermediate care national policies.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A phy	What drives better practice? Validated tools - NSF, government, service plans.
Service Strategic Managemen.B3 Direction & planning	Site Interview- Thursday Code A phy	Goal setting in point of fact physio felt last year has been done badly. Now INSET improving.

Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.ACShirleyHallma nNurseDryad	Mix of patients changed during Shirley time on Dryad. Continuity Care to rehab. Funding not in place to provide sufficient support staff and AHPs to meet PR need.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Quality care – wound care, patient MRSA – surgical wound – treated MRSA healed wound and transferred to NH. Was admitted for terminal care but Dryad rehabilitated patient. Dryad often gets patients for continuing care but rehabilitated. Occasionally patients been tried for rehab but medical condition deteriorates and no rehab.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Dryad – care has improved with time – communication has improved, tightening up more.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Issue – confusion – mental frailty. <ul style="list-style-type: none"> - large proportion of patients - managed as best as possible - could do more mental health training on challenging behaviour, staff safety, communication.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Expressed concern about MH numbers. Set up working parties to look at problems to develop skills – study days often clashed with low staffing levels.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Required to participate in resus. Lack of support , only people directly involved in resus. Support need from ward managers LD, HCSW or Toni Scannell.

Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.GinnyDay- SenStafNursDryad	Policy translations - new changes - talked at mg meetings, minutes from mg meeting - D Ward meeting, memos sent out.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.MargaretWigfall- ENNursDryadNt	Patients have changed. No longer there for years as in Redcliffe annexe. Activity increased, more go to nursing homes - space for more acute beds.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.MargaretWigfall- ENNursDryadNt	Response to Risk forms. Short staffed even through forms are filled in but skill mix review resulted in extra staff.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.TinaDouglas- StafNursSultan	Manicured?? that change.
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.TinaDouglas- StafNursSultan	Slow turnover, low occupancy, little acute. Now new manager, more acute, better working. Was hierarchical / "tasky"?? - now team nursing . How did patient care improve?
Service Strategic Managemen.B3 Direction & planning	Site INterview- Wednesday.TLDrRavindraneC onsult	In charge of Dryad ward Jan - October 2001, Service now expanding. Elderly care department in a self-contained elderly unit.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.BarbraMelrose - Complaints	there have been disciplinary consequences for staff - need to look at patterns and Issues.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	There was a c???? 3% of nurses/ward managers who were subject to most complaints and who were reluctant to change.

Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	Training all managers in performance management.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	We do have some nursing staff that we'd prefer not to have our most difficult ward managers do need a lot of help to change.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	Nursing clinical indicators very poorly developed.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	Essence of Care – aiming to ensure that all wards work to essence of care. PCT will take ??????
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	Cases of poor performance identified earlier. Getting evidence on poor attendance and behaviour is very hard – does depend on people telling us.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.EileenThomas- NursingDir	In the past, some of the senior nurses haven't had confidence to confront poor performing staff. I'd only get involved if I witnessed it myself. Whistle-blowing – good relationship with union reps who'd not hesitate to tell me re. poor practice.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday.JoTaylorSenNursDayW ard	senior management expectations of CG does not match realistic working of front line staff
Service Strategic Managemen.B4 Service perf	Site Interview- Friday Code A Senior	Dryad and Sultan – felt they did not need dietician and was not involved in care

man	Diet	planning.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday Code A Senior Diet	Feels that in 1998 that across the board it was not common practice to document everything ie. nutrition notes.
Service Strategic Managemen.B4 Service perf man	Site Interview- Friday Code A Phar ma	IT for Pharmacy is good. Good technicians.
Service Strategic Managemen.B4 Service perf man	Site Interviews- Tuesday.FionaCameron-Gen Mgr	No contact out with Regional Office.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.07.01 Max Millet-CEO	Satisfied that trust's performance management system integrates clinical governance concerns
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.07.01 Max Millet-CEO	Also there is a group to address winter pressures across health community. Issues (problems) structural, not personal or professional - ie elderly medicine needed additional beds and trust now living with problems generated from not having them.
Service Strategic Managemen.B4 Service perf man	Site Interviews- Monday.AneMonk-Chair	Quality performance matters "It's nice to treat people well", ie care needs to be good. Is clinical care good? Clinical audit include users view.
Service Strategic Managemen.B4 Service perf man	Site Interviews- Monday.DavidLee-Complaints Conveynor	Action list would be integrated into 1/4 division meeting.
Service Strategic	Site Interviews-	

Managemen.B4 Service perf man	Monday.IanPiper-Ops Dir	Quarterly divisional process. Performance Review Process agreed upon common template.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	Weekly meeting general manager. 6 GM's. 1 - 1 1/2 hours.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	Monthly operational management group - policy dev key op issues. Ian - Chairs.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	*Involvement of clinical and front line staff in perf manage?
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	Divisional reviews clinicians are attending on specific issues but minutes are sent to those absent.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	1998 - Incidents Made aware through divisional review process as complaints.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	Information translated to board on quarterly meetings.
Service Strategic Managemen.B4 Service perf man	Site Interviews-Monday.IanPiper-Ops Dir	4 Perf deliver clinical governance and activity targets and financial targets.
Service Strategic Managemen.B4 Service perf man	Site Interview-Thursday.JaneParvin Senior Personn	Work force information divided reviews Sickness info, turnover, vacancy levels, workforce, predictive planning, training and

		development.
Service Strategic Managemen.B4 Service perf man	Site Interview- Thursday.JaneParvin Senior Personn	What does Philip Beed get back on his own ward. Predictions, sickness levels and individuals. Philip Beed not getting individual ward predictive information for each ward.
Service Strategic Managemen.B4 Service perf man	Site Interview- Thursday. Code A HA	Slight laxness of clinical procedures. Wanted you to look at.
Service Strategic Managemen.B4 Service perf man	Site Interview- Thursday.PhilipBeedclinicMgr Daed	Rehab was driver for change and strategy team working and letting them drive change. Particularly focus on rehab.
Service Strategic Managemen.B4 Service perf man	Site Interview- Thursday. Code A DT	Daedalus - rehab / stroke. Variety, fluctuate in case loads.
Service Strategic Managemen.B4 Service perf man	Site INterview- Wednesday.AnitaTubrittSenSt afNursDryad	Informal meetings management approachable.
Service Strategic Managemen.B4 Service perf man	Site INterview- Wednesday.GinnyDay- SenStafNursDryad	Main reporting - falls, trips.
Service Strategic Managemen.B4 Service perf man	Site INterview- Wednesday.GinnyDay- SenStafNursDryad	Monitoring indicators - Toni Scammel is doing drug audits. Would not know trends of incidences.