

Dear Relative

You may be aware that the Commission for Health Improvement (CHI) is currently investigating the care older people at the Gosport War Memorial Hospital since 1998.

Firstly, may I assure you that CHI has not been given your name and address, this letter has been forwarded to you by the Portsmouth Healthcare NHS Trust, who manage the Gosport War Memorial Hospital.

As part of our work, the Commission would like to review a sample of clinical records of patients who have recently died at the War Memorial Hospital. This work is intended to help the hospital and the NHS to understand and improve the care given to older people.

The purpose of my writing is as follows:

- (i) To reassure you that the trust has no cause for concern regarding the care of your relative
- (ii) To let you know that CHI will be reviewing the clinical notes unless you have a strong objection.
- (iii) To give you the opportunity to discuss any concerns or clarify any questions you may have.

Those reviewing the medical notes are all either doctors or nurses with experience of working with older people in the NHS. The review will be based on themes of care rather than on the care provided to individual patients. Should the report refer explicitly to the care of your relative, I will ask the Trust to send you the relevant section. The full CHI report is expected in the Spring and will be publically available. No patient names will be included in the CHI report.

If you have any questions on this review of clinical notes, please contact me as follows:

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It is important that this piece of work is completed very quickly. I would be very grateful if you could indicate on the attached form and return in the stamped addressed envelope provided that you have received this letter.

Thank you very much for taking the time to read this letter and please do accept my condolences on your recent bereavement.

Yours sincerely,

Julie Miller
Investigations Manager

To be completed and returned in the envelope provided by
Friday 15th February

I (please insert name).....

Confirm receipt of this letter and understand that the
Commission for Health Improvement will be reviewing a
sample of clinical notes which may include those of

(please insert relatives name)

Date.....