Staffing & Accountability.D1 Wrkfrc & serv planning	Statutory Stakeholder.Betty Woodlands.txt	IPR process doesn't work well everywhere, sometimes just because of turnover of line managers
Staffing & Accountability.D1 Wrkfrc & serv planning	Statutory Stakeholder.Betty Woodlands.txt	Nursing input into policy development - BW has had major contribution
Staffing & Accountability.D1 Wrkfrc & serv planning	Statutory Stakeholder.Community Health Council.txt	Poor level of domestic services at time of incidents
Staffing & Accountability.D1 Wrkfrc & serv planning	Statutory Stakeholder.Interview.Nicky Pendleton.22.	Staff at GWM had difficult time in coping with arrival of greater number of acutely ill patients with serious mobility problems; found it difficult to get patients up and moving around; some of the staff were not used to being assertive with patients
Staffing & Accountability.D1 Wrkfrc & serv planning	Statutory Stakeholder Code A Code A txt	Trust aspiring to be a very good employer
Staffing & Accountability.D2 Medical accountability	Stakeholder.Mr and Mrs Ripley 21.11.01.tx	One day nurses were unable to wake him as was Mrs Ripley. Mrs Ripley requested that a Doctor be sought immediately - not available but summoned - waited for 5 hours - told only 7 emergency doctors for whole of South.
Staffing & Accountability.D2 Medical accountability	Stakeholder.Mrs Code A Code A <sup>txt</sup>	Appointment arranged for 27 Feb never given name of consultant he was under - told he didn't have one
Staffing & Accountability.D2 Medical accountability	Statutory Stakeholder.Interview with Dr McKenning G	Clinical assistant contract (ie GPs employed part-time in hospitals like Dr Barton) is a fairly nebulous, not very robust contract which has been around for about 30 years -

		simply arrangement where GPs with specialist expertise in particular field help out on short-staffed wards; most GPs who do this sort of work prefer a 'hospital practitioner' contract which are much clearer and allow for more hands-on, supervisory work
Staffing & Accountability.D2 Medical accountability	Statutory Stakeholder.Interview with Dr	Getting access to consultants: procedure is that 1) ask that short letter requesting
	Warner.22.1	consultant visit be put in patients' notes and request passed to consultant's secretary; 2) button-hole in corridor; 3) ring them up directly
Staffing & Accountability.D2	Statutory	
Medical accountability	Stakeholder.Interview with Dr Warner.22.1	Consultants department 'always accessible'; they always come back to me quickly not too difficult to get GWM consultants to attend patient when requested; more problematic getting consultants from other hospitals
Staffing & Accountability.D3	Stakeholder.Interview- Mr	
Nursing accountability	Code A & Mr Code A	Mr Code A felt that nurses could do what they wanted.
Staffing & Accountability.D3	Stakeholder.Mr and Mrs	
Nursing accountability	Ripley 21.11.01.tx	No nurse identified with responsibility for Mr Ripley's care. Mrs Ripley's impression was most were nursing auxiliaries. "I don't blame any of the doctors" - very few fully qualified nurses evident - Doctor would come around each evening to Sultan Ward (Mrs Ripley's GP).
Staffing & Accountability.D3	Stakeholder.Mr and Mrs	
Nursing accountability	Ripley 21.11.01.tx	Was not under the care a nurse with specific responsibility for him. According to Mrs R, most of the nurses who dealt with him were nursing auxillaries - very few fully qualified nurses appeared to be on duty in ward
Staffing & Accountability.D3 Nursing accountability	Stakeholder. Code A	Nursing Accountability
	Code A <sup>txt</sup>	Nurses should be checked performing as they should.

Staffing & Accountability.D3 Nursing accountability	Statutory Stakeholder.Betty Woodlands.txt	Reflective practice - ward in 97/98 in Havant. Younger nurses took it on board seriously but older nurses a bit wary of clinical suprvision and resitant to reflective practice (not needed because we talk about things anyway so why we doing it)
Staffing & Accountability.D5 Other staff accountability	Statutory Stakeholder.Community Health Council.txt	Poor level of domestic services at time of incidents
Staffing & Accountability.D5 Other staff accountability	Statutory Stakeholder. Code A	managers or middle managers moving in that direction
		informally some still working in old way
Staffing & Accountability.D6 Out of hours arrangements	Stakeholder.Mrs Mackenzie.txt	<ul> <li>5. 11 August, 2001: Mrs R admitted to GWM with note from consultant saying that she was fully mobile; She was placed in a room on her own in Daedalus ward facing onto corridor and in sight of nursing staff</li> <li>6. She there for a sight of nursing staff</li> </ul>
		6. Shortly after arrival at GWM, put on heavy sedation; became groggy; nurse said that she wasn't lucid
		7. Neice came to visit soon after and told that 'she'd had a little fall'; neice asked why no X-ray; seen by a Dr Briggs who worked at same surgery as Dr Barton who recommended morning Xray; family confused as fall apparently happened at 1:30 pm and GWM Xray dept open at that time
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Interview with Dr McKenning G	Out or hours arrangements: GPs responsible for ensuring appropriate cover; many use deputising services monitored by LMC, particularly for response times

Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Interview with Dr McKenning G	Out or hours arrangements: GPs responsible for ensuring appropriate cover; many use deputising services monitored by LMC, particularly for response times Particularly concerned about Healthcall which is used by many Portsmouth-area services which relies increasingly on standby doctor as becoming more difficult to fill regular rota
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Interview with Dr Warner.22.1	Out-of-hours arrangements: patients covered by an on-call GP from patients' own family practice
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Interview with Dr Warner.22.1	Can't handle emergencies out-of-hours: admit them straight away to QA A&E
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Interview with Dr Warner.22.1	Healthcall doctors don't have accesss to GWM beds out of hours
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Interview with Dr Warner.22.1	A lot of hours medicine practised pragmatically and not by the book
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder Code A	Working time directive (EWTD) Management has invested a lot of time educating staff about working hours & benefits of EWTD
Staffing & Accountability.D6 Out of hours arrangements	Statutory Stakeholder.Tele Int- Dr Pennell	Out of hours arrangements Out of hours - used to cover stopped - now. Healthcall called in - GP told is excellent.
Staffing & Accountability.D7	Statutory Stakeholder.Betty	

Team working	Woodlands.txt	No 'us and them' feeling between unions and management at GWM
Staffing & Accountability.D7 Team working	Statutory Stakeholder.Interview.Nicky Pendleton.22.	Protocols for cot sides developed in late 90s (need to check date): it was a good example of pulling together all staff involved in elderly care
Staffing & Accountability.D9 Staff Welfare	Documentation.Letter from Code A	Characterised by a complete lack of support from her employers.
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	No 'us and them' feeling between unions and management at GWM
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	Lots of support systems for staff (counselling in wards) in house training
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	Term-time contracts to enable patients to look after children- more family - friendly working- now largely adopted.
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	Staff don't mind whistle blowing - they know they will be given support. Its taken very very seriously
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	Domestic abuse policy - used as benchmark around the country
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	Occupational health easily accessible for staff facing difficulties

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Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Betty Woodlands.txt	Ellen Barnes, Nursing Director has supported nurses with police inquiry to the full
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Community Health Council.txt	Staff have taken a real bashing at Gosport
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder. Code A Code A txt	Staff at GWM feeling very battered And bruised'
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder Code A Code A	Trust has gone out of its way year after years to meet pay results
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder I Code A	Trust has always allowed employees who wished to can move from CP To Whitley Council Concept
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder. Code A	Working time directive (EWTD) Management has invested a lot of time educating staff about working hours & benefits of EWTD
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder. Code A	Immediate support from for OT's when problems rise.
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder. Code A Code A	Immediate support from Gode A for OT's when problems rise.
		Independent counselling service for staff completely independent of trust (up to 6 counselling sessions available)

Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder. Code A	Chaplainancy service - intergrated into teams - open accessible & visible
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder. Code A Code A txt	Human scale - people know each other - like a family unit
Staffing & Accountability.D9 Staff Welfare	Statutory Stakeholder.Tele Int- Steve Barnes. txt	GWM has a good record in supporting staff at senior management level; not so sure about behaviour of middle managers. 'Why pick on such a good trust to investigate?'