

Mrs Stewart

3.12.01

Ex-Sister- Dolphin Day-ward

retired from full time work at the end of June 2000

since then was Practice development facilitator (PDF) which finished in January 2001

three month project to improve, and raise awareness of why people fall

Links with three concerned wards was through PDF

-Clinical Governance- input into wards to raise awareness and give examples amongst staff.

-Facilitated annual away days, which would result in looking at patient care, may have a remit of wards 0 (Reflective Practice)

Clinical Governance (CG) agenda

Director of Nursing would put the CG Programme together and then 22 people throughout trust would be given CG, CG supervision through the trust. It was very successful.

CG was then tailored to specific areas of trust.

Every ward had a CG board.

There was also a research and development day to show the good and bad types research assuring evidence based practice

Nurses had access to library-collection services

Single point @ GWMH access online

Evidence based practice was welcomed generally.

The downfalls were that it should have been accessible at ward level.

Shared-learning through CG boards with A4 information on particular subjects with access to numbers and names of people.

Shared learning was also through the Communicate

Networking was encourages. An example was Elderly Care- Ace inhibitors trails in Dolphin

This was passed around and Pharmacy at Q & A adopted the findings and utilised them in age prescription.

The fall policy was another example of how networking happens.

CG Agenda- multidisciplinary approach- nursing staff, OT, Docs, Physio Round days- Nursing staff, OT, Physio and CG reporter.

Everybody had a valued input into an issue  
At ward level Daeduls was multi disciplinary.

CG implementation- nurse led but a good level of medical input.

Accessing information was very easy for Mrs Stewart at the GWMH because of her 7 years previous work at the Q & A.

All GWMH is based on elderly medicine so PDF programme was applicable to the all of the GWMH

Q & A PDF contributed to the GWMH PD programme.

Two groups would meet at least once a month

Community hospital- GWMH and St Christopher's would meet once a month too.

Links with complaints and the PDF Programme.

In the Dolphin ward this was through patient questionnaires, specialist groups and carers day.

Any complaint were mainly based on transport

Dolphin was very open and flexible.

The channel for complaints was there but not transferred on a formal teaching basis at the hospital.

Complaints would be monitored through audit.

All audit have to be evidence based and would be done on a formal and informal basis.

The trust was accessible.

Line managers have study days to learn how to appraised staff.

Deadulus had not problems with its management a view taken form being opposite the ward on a working day.

Mrs Stewart has had good reports about Dr Lord and praise about the sultan ward.

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