

cc ED's Gm's  
Anne  
Lesley

Portsmouth Hospitals



NHS Trust

Ursula Ward  
Director of Nursing and Midwifery

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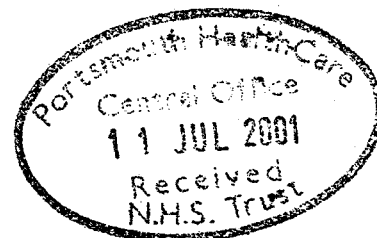
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Our Ref: UW/JMC/CHIEF-EXC-CHI

15<sup>th</sup> June 2001

Mr Max Millett  
Chief Executive  
Portsmouth Healthcare NHS Trust  
St. James Hospital  
Locksway Road  
Milton  
Portsmouth PO4 8LD



Dear Mr Millett

**Re: Commission for Health Improvement Review**

You may already be aware that the Trust has received formal notification from the Commission for Health Improvement that a review will take place later this year. I am enclosing for your information a briefing paper that I took to Trust Board on 24<sup>th</sup> May 2001.

As part of the process you will note that the stakeholders views will be sought. As I understand it the Commission will contact you directly. Whilst I would not wish to under estimate the amount of work involved in preparing the organisation for the visit, I nevertheless believe that this is an opportunity to have sound objective assessment made of the Trust that will help us focus in moving the agenda forward.

If you require any further information then please contact me at your convenience.

With kind regards

Yours sincerely

Code A

Ursula Ward  
Director of Nursing & Midwifery

Cc Mr R Greenwood – Director of Nursing – NHS Executive South East

Portsmouth Hospitals NHS Trust

Commission for Health Improvement Review

**INTRODUCTION**

The Commission for Health Improvement (CHI) was established in 1999 to improve the quality of patient care in the NHS across England and Wales. The Health Act passed by Parliament in that year empowered the Commission to inspect every NHS Trust and Health Authority and will include Primary Care Groups and General Practices, in England and Wales on a rolling programme every four years. CHI's findings will be based on evidence and not opinion.

Portsmouth Hospitals NHS Trust (PHNHST) received notice that this review will commence on the 3<sup>rd</sup> September 2001 with a site visit either the week before or the week after Christmas week. In response to this notification a CHI Project Team was established :-

CHI Review Co-ordinator – Ursula Ward Director of Nursing and Midwifery

CHI Project Manager - June Watson

CHI Project Assistant – Code A

**Review Programme**

A CHI review examines the effectiveness of the NHS Organisation's Clinical Governance arrangements, that is, it will assess the management, provision and quality of service provided by the organisation. CHI will recognise best practice which it will share with the rest of the NHS and will identify areas that require improvement.

This 24 week programme encompasses :-

**Start Up Meeting – 24<sup>th</sup> September 2001 approximately.**

This takes place during the third week of the review process and will explain the review process in more detail and discuss the additional preparation that will be required. The allocated CHI Review Manager, Co-ordinator and a Communications Officer will attend the meeting with :-

- The Chief Executive Officer
- The Trust's Clinical Governance lead
- The nominated Trust Co-ordinator
- The Medical Director
- The Director of Nursing and Midwifery
- The lead Allied Health Professional
- The lead Pharmacist
- The Head of Communications

**Weeks 1 – 15:** Data and information collected / collated and submitted to CHI for analysis

**Week 16:** CHI site visit

**Week 17 – 24 :** Reporting and publication

**Process****Data / Information**

The data and information requested by CHI comprises of the following :-

1. Trust Profile
2. Clinical Governance Strategies
3. Organisation and Responsibilities for Clinical Governance
4. Consultation and Patient Involvement
5. Clinical Risk Management
6. Clinical Audit
7. Research and Effectiveness
8. Use of Information
9. Staffing and Staff Management
10. Education, Training and Continuing Personal and Professional Development
11. Information from External Sources

**Stakeholder Views**

In addition CHI will :-

1. Issue patient diaries for completion by patients recording their experience over the 3 month period prior to the CHI visit.
2. Contact and seek the views on the performance of the Trust from other stakeholders i.e. Health Authority, West Sussex, Southampton.

The information requested is specific, comprehensive and vast and will be analysed by CHI to assist in the identification of specific areas the review team will investigate during the visit.

**CHI Site Visit**

The CHI Review Team will spend one week visiting the site with some weekend and night observation. The team composes an NHS doctor, nurse, professional allied to medicine, or a pharmacist or therapist, plus a manager. This Review Team will:-

1. Interview key members of staff.
2. Meet with clinicians, managers and other staff to collect information about clinical governance in the organisation.
3. Observe patients and staff together.

The team will focus on the triangulation of information obtained from the interviews and the information gathered.

**Reporting**

Following the visit :-

1. The review team will draft a report of their findings.
2. This report will be discussed with the Trust to seek comments on its factual accuracy.
3. The final summary and report when published is made available to the public and on the CHI's web site.

This report will include CHI's key findings and will identify best practice, as well as areas that require improvement.

**Follow Up**

1. The Trust will be expected to begin work on its action plan.
2. CHI will assist the Trust to set objectives to take forward the improvements needed.

The Regional Office will take a vital role in the setting of the action plan and is responsible for ensuring its implementation.

### **Internal Arrangements**

Ursula Ward and June Watson considered the need to establish a Steering Group to manage and oversee the implementation. On reflection, given the current pressures, the logistics of establishing another steering group makes this difficult to achieve within the required timescale. It is therefore proposed that the existing Clinical Governance Team is refocused for this purpose.

An initial audit of the following will provide a baseline assessment of the Trust's current position :-

- Trust Board minutes
- Clinical Governance Board minutes
- Clinical Governance Team minutes

### **Communication**

Communication is critical to the success of this review, effective communication will be achieved by :-

- Establishing a PHNHST CHI Website.
- Delivering information sessions to all staff within Divisions and Directorates.
- Working with the Divisional Senior Nurses to ensure all key personnel are clear of their responsibilities.
- Regular publication in the 'Link Report'.

In addition, Ursula Ward will ensure that stakeholders ie. Health Authority, Community Health Council, PCG's are notified of this review .