

## ACTION PLAN IN RESPONSE TO CHI INVESTIGATION AT GOSPORT WAR MEMORIAL HOSPITAL - AGREED OCTOBER 2002

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 1	To develop performance-monitoring arrangements to ensure that any performance shortfalls in the provision of services for older people at Gosport War Memorial Hospital are identified and addressed swiftly.	<ul style="list-style-type: none"> <li>• Appointment of Operational Director for Secondary Care - in post</li> <li>• Develop a Service Level Agreement (SLA) for Older People's Services with jointly agreed principles, clinical governance standards and responsibilities, and key performance criteria – by December 2002</li> <li>• Establish a system for monitoring and performance managing Service Level Agreement arrangements – January 2003</li> <li>• Set up and run regular dedicated clinical/ management meetings that involve the associate lead consultant – from December 2002</li> </ul>	<ul style="list-style-type: none"> <li>• Operational Director in post</li> <li>• SLA to be completed by end March 2003. Fiona Cameron to draft</li> <li>• Linked to above. System for monitoring will be identified in SLA</li> <li>• First meeting to be held on 11/2/2003. Medical Director participating</li> </ul>	<p>Lack of direction for the service managed across two PCTs</p> <p>Lack of formal agreement and monitoring processes for the PCTs to evaluate</p> <p>Time</p>	<p>Chief Executive East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport and East Hampshire PCTs</p> <p>As above</p> <p>Medical Director, East Hampshire and Fareham &amp; Gosport PCTs</p>	Provision of high quality patient care supported by robust and responsive performance management arrangements between the two PCTs.	<ul style="list-style-type: none"> <li>▪ Quarterly Service Review process</li> <li>▪ Bi-annual hosted Service Review</li> <li>▪ Board Performance Report</li> </ul>
Rec: 2	To review the policy for admitting patients to Sultan Ward at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>▪ Establish a meeting to review and revise, as necessary the criteria for admitting patients to Sultan ward – completed September 2002</li> <li>▪ Establish a Gosport War Memorial Hospital Medical Committee to review criteria for GP admissions to Sultan Ward - Jan 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Initial review undertaken. Further policy review almost complete - required to reflect changing circumstances in service provision, in particular GP bed fund</li> </ul>	Quality of patient care potentially compromised by inappropriate admissions	<p>Operations Director, Fareham &amp; Gosport PCT in conjunction with PCT Medical Director</p> <p>As above</p>	Appropriate case mix and level of clinical care provided to patients admitted to Sultan ward	<ul style="list-style-type: none"> <li>▪ Audit against new admissions criteria undertaken 3 months after new policy implemented (January 2003) followed by three monthly review thereafter</li> </ul>

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Rec: 3	To review all local prescribing guidelines to ensure appropriateness for current levels of patient dependency on elderly care service wards.	<ul style="list-style-type: none"> <li>▪ Establish a process to ensure that ongoing review of the admissions policy is undertaken as part of routine review, and in particular in response to service changes</li> <li>• Establish Medicines Management Group as a sub group of the Area Prescribing Committee, to oversee the review and guideline development process where necessary               <ul style="list-style-type: none"> <li>- Group established by November 2002</li> </ul> </li> <li>• Carry out a review and revision of guidelines in 6 key areas - by March 2003</li> <li>• Establish an ongoing audit programme and process for all prescribing guidelines developed to ensure prescribing practice reflects patient management plans/outcome - March 2003</li> <li>• Audit prescribing against initial 6 revised guidelines and assess appropriateness in relation to patient dependency levels – by December 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Revised criteria to be presented to Gosport GP Group</li> <li>• Sub Group established with GP membership. Terms of Reference agreed and representation secured from PCTs.</li> <li>• Review and revision of 6 sets of guidelines on target for completion by March 2003.</li> <li>• Audit programme will be developed as soon as additional pharmacy staff secured.</li> <li>• On target for completion by December 2003.</li> </ul>	Pharmacy service workforce capacity issues	As above  PCT Medical Director in conjunction with Pharmaceutical Advisers, Fareham & Gosport and East Hants PCTs	<p>System in place to ensure the ongoing review of local prescribing guidelines for older people in community settings</p> <p>Improved delivery of care through appropriate prescribing, and therefore reduced risk to patients</p> <p>Comprehensive training programme and increased awareness and application of prescribing guidelines</p>	<ul style="list-style-type: none"> <li>▪ Quarterly exception reports submitted through Fareham &amp; Gosport PCT Clinical Governance Committee</li> <li>• Submission of quarterly reports from the Medicines Management Group to the Area Prescribing Committee and PCT Prescribing Sub Committees - from March 2003</li> <li>▪ Publication and dissemination of revised prescribing guidelines through Medicines</li> </ul>

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Rec: 4	To establish comprehensive pharmacy service support to wards at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>• Ensure staff training requirements arising from revised guidelines are integrated into PCT training programmes, and as new guidelines are reviewed and developed and implemented – ongoing</li> <li>▪ Review the current level of pharmacy services provided based on the existing Service Level Agreement, and prepare a business case to enhance provision, which includes an explicit specification for Out of Hours cover – by October 2002</li> <li>▪ Integrate additional investment /pharmacy activity into Service Level Agreement - January/February 2003</li> <li>▪ Establish central point of reference for Pharmacy Staff working in satellite sites - in place</li> <li>▪ Establish Pharmacy involvement in ward rounds undertaken on Dryad, Daedalus and Sultan wards - by March 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Jeff Watling to feed in training needs in relation to pharmacy recommendations to Jane Parvin for inclusion in Workforce Confederation bid.</li> <li>• Fareham &amp; Gosport PCT have agreed additional investment of £68,000 to recruit additional pharmacy staff. Jeff Watling to progress recruitment</li> <li>• Specification/revised SLA to be developed by Jeff Watling, Hazel Bagshaw and Fiona Cameron and share with Fiona Harris at Strategic Health Authority</li> <li>• Current level of service provision and definition of additional resource will be identified within the revised SLA.</li> </ul>	<p>Capacity to deliver training programmes</p> <p>Pharmacy workforce capacity issues to Gosport War Memorial Hospital</p> <p>Pending appointment of additional pharmacy staff resource</p>	<p>PCT Chief Executives</p> <p>Pharmaceutical Adviser, Fareham &amp; Gosport PCT in conjunction with PCT Commissioning/ Planning colleagues</p> <p>As above</p>	<p>Improved co-ordination and delivery of pharmacy services to Gosport War Memorial Hospital</p>	<p>Management Group as produced and first 6 guidelines - by May 2003</p> <ul style="list-style-type: none"> <li>• Outcome of review submitted to PCT Chief Executives by October 2002 and investment decision taken by December 2002</li> <li>• Quarterly review of Pharmacy Service Level Agreement</li> </ul>
Rec: 5	To review and monitor	<ul style="list-style-type: none"> <li>▪ Carry out a retrospective audit of diamorphine</li> </ul>	<ul style="list-style-type: none"> <li>• Retrospective audit now to be undertaken by</li> </ul>	Timescale pending	PCT Medical Director in	Robust arrangements in	<ul style="list-style-type: none"> <li>• Submission of quarterly reports from the</li> </ul>

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Rec: 6	<p>prescribing of all medicines on wards caring for older people at Gosport War Memorial Hospital, including diamorphine prescribing on Sultan ward.</p> <p>To ensure that all-relevant staff, including GPs, in Fareham &amp; Gosport and East Hampshire and PCTs are trained in prescription, administrat-</p>	<p>prescribing on Sultan ward to ensure that current guidelines are implemented – by December 2002</p> <ul style="list-style-type: none"> <li>▪ Establish a system for routine monitoring and auditing of narcotic analgesic prescribing on wards, including a baseline audit of all controlled drug prescribing on wards at Gosport War Memorial Hospital - by March 2003</li> <li>▪ Carry out monthly analysis of this data and investigate sudden changes – by April 2003</li> <li>▪ Ensure dissemination of prescribing data to medical staff to support rigorous routine review - May 2003</li> </ul> <ul style="list-style-type: none"> <li>• Establish short life group (as a sub-group of the Medicines Management Group) to review and make recommendations for action regarding training and development - group established by November 2002 and plan developed - by March 2003</li> <li>• Ensure the integration of prescribing training</li> </ul>	<p>PCT Clinical Effectiveness Manager. Audit to be completed by</p> <ul style="list-style-type: none"> <li>• Jeff Watling in collaboration with Hazel Bagshaw to develop critical pathway for monitoring and auditing of narcotic analgesic prescribing on wards to be presented at next Implementation Group meeting.</li> <li>• System for routine monthly analysis of data in place.</li> <li>• System for regular dissemination of prescribing data to be established.</li> </ul> <ul style="list-style-type: none"> <li>• Status/progress on establishing training group unclear. Accountable officer not present. Update to be provided at next meeting.</li> </ul>	<p>appointment of additional pharmacy staff resource</p> <p>Timescale pending appointment of additional pharmacy staff resource</p>	<p>conjunction with Pharmaceutical Adviser, Fareham &amp; Gosport PCT</p> <p>PCT Medical Director in conjunction with the Pharmaceutical Advisers</p>	<p>place to ensure appropriate prescribing practice based on locally agreed guidelines on all elderly care wards at Gosport War Memorial Hospital</p> <p>Improved delivery of care through reduced risk for patients</p> <p>All appropriate staff trained to prescribe, administer, review and record legibly and accurately</p>	<p>Medicines Management Group to the Area Prescribing Committee and PCT Prescribing Sub Committees - from March 2003</p> <ul style="list-style-type: none"> <li>• Training plan developed by sub group by March 2003</li> <li>• Bi-annual prescribing training course features in the PCTs annual training programme</li> <li>• Production of audit report by June 2003 and</li> </ul>

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Rec 7	<p>ion, review and recording of medicines for older people.</p> <p>To ensure that lessons from patient complaints and comments are disseminated amongst all staff caring for older people in Fareham &amp; Gosport and East Hampshire PCTs</p>	<p>requirements into PCT training delivery programmes – April 2003</p> <ul style="list-style-type: none"> <li>• Carry out an audit of the quality and legibility of prescribing notes to facilitate discussions between medical staff/GPs - audit by April 2003</li> <li>• Action and learning points from complaints to be included in PCT Quality Newsletter SEQUAL in East Hants PCT - from Oct 2002</li> <li>• All complaints and lessons learned to be fed through Service Clinical Governance Groups in East Hants PCT - in place</li> <li>• Review Complaints Policy in Fareham &amp; Gosport PCT - by Dec 2002, and provide training to support implementation of new policy - by March 2003</li> <li>• Representatives from Service Clinical Governance Groups to continue to share lessons at team meetings - ongoing</li> <li>• Action plans generated from each complaint in Fareham &amp; Gosport PCT to be monitored through Quarterly Service Review</li> </ul>	<ul style="list-style-type: none"> <li>• Audit scheduled to be undertaken through Fareham &amp; Gosport PCT's Clinical Governance Team.</li> <li>• Action achieved and ongoing</li> <li>• Process established to ensure lessons learnt are fed back through Clinical Governance Groups</li> <li>• Review to be completed by March 2003 and new procedure launched during April 2003.</li> <li>• Mechanisms established too enable feedback/sharing of lessons across Clinical Governance Groups</li> <li>• Quarterly Service Review process in Fareham &amp; Gosport PCT underway -</li> </ul>		<p>PCT Quality Leads. Fareham &amp; Gosport and East Hants PCTs</p> <p>Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p> <p>Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p>	<p>Staff have a clear understanding of quality issues from patient feedback and how they are acted upon</p> <p>Clear and open two way communication processes for sharing complaints issues and action</p>	<p>action plan for discussions by July 2003</p> <ul style="list-style-type: none"> <li>• Regular use of PCT Newsletters to ensure action and learning points are a key feature</li> <li>• Clear documentation of complaints action plans and reviews</li> <li>• Review of minutes of clinical governance meetings and appropriate team meetings to ensure action and learning points from complaints are integrated into local action planning <ul style="list-style-type: none"> <li>▪ Action and learning points from complaints</li> </ul> </li> </ul>

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Rec: 8	To ensure that nursing and other relevant staff at Gosport War Memorial Hospital are appropriately trained to undertake swallowing assessments to enable patient care needs to be met across the 24-hour period.	<p>process until action completed by Service Managers – October 2002</p> <ul style="list-style-type: none"> <li>▪ Engage Speech and Language Therapy in providing additional training programmes - to commence early October 2002</li> <li>▪ Initiate an audit to assess the impact of training and to identify unmet need - by March 2003.</li> <li>▪ Implement agreed action plan arising from audit findings - by October 2003</li> </ul>	<p>next meeting to be held on 28/1/2003.</p> <ul style="list-style-type: none"> <li>• Training of qualified staff completed. Three levels of training established to ensure that qualified nursing staff and support workers (level 3 training) is provided. Audit has been carried out simultaneously to assess level of training required.</li> </ul>	Releasing staff from wards to undertake training	Operations Director, Fareham & Gosport PCT through the Modern Matron, Gosport War Memorial Hospital As above	100% of qualified staff able to undertake initial swallowing assessment with patients. All new staff to receive training within 3 months of taking up post.	<p>incorporated as part of Service Review meetings</p> <ul style="list-style-type: none"> <li>▪ Monthly reports of numbers of staff trained in swallowing assessments provided and monitored via PCT quarterly Service Reviews</li> </ul>
Rec: 9	To review and clarify the role of the Activities Co-ordinator at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>▪ Widen the membership of the Activities Co-ordinator Working Group to include patient / relative, medical and pharmaceutical staff representation - by December 2002</li> <li>▪ Review the need for the Activities Co-ordinator role to be used in specific ward areas and recommend a way forward - by April 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Wider Group established</li> <li>• Recommendations for the revision of the role of Activities Co-ordinator to be agreed by March 2003.</li> </ul>		Operations Director, Fareham & Gosport PCT  As above	Clear role brief identified for Activities Co-ordinator post holder, which ensures that there are increased and appropriate day time activities for patients that complement therapy goals	<ul style="list-style-type: none"> <li>▪ Report outlining options for role of Activities Co-ordinator submitted to PCT quarterly Service Review meeting by March 2003</li> </ul>

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Rec: 10	To ensure clinical practice relating to continence management , nutrition and hydration are in line with the standards set out in 'Essence of Care' at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>▪ Re-launch 'Essence of Care' a standard with nursing and other profession leads - by November 2002.</li> <li>▪ Undertake an audit and analysis of compliance against national standards and identify a plan of action to implement standards - by March 2003.</li> <li>▪ Identify a lead/link nurse for each care standard area - by March 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Three workshop days planned for March 2003.</li> <li>• Workshops will support audit and analysis of compliance against national standards and identification of action plan.</li> <li>• Link nurses to be identified through planned workshops during March 2003.</li> </ul>		Fareham & Gosport PCT Director of Operations	Improved nursing care and management of older patients in community hospital settings in Fareham and Gosport	<ul style="list-style-type: none"> <li>▪ Audit implementation of 'Essence of Care' standards by September 2003</li> <li>▪ Develop action plan by March 2003</li> <li>▪ Ongoing progress monitoring through peer audit arrangements</li> </ul>
Rec: 11	To ensure that communication developments with staff working in community hospitals are continued in both Fareham & Gosport and East Hampshire PCTs	<ul style="list-style-type: none"> <li>▪ Feedback CHI action plan and progress reports through regular meetings with staff – ongoing</li> <li>• Implement PCT Communications Plan in East Hants PCT – from September 2002</li> <li>▪ Finalise internal communications improvements in each PCT – by December 2002.</li> </ul>	<ul style="list-style-type: none"> <li>• CHI Action Implementation Plan cascaded through staff groups (Gosport War Memorial Hospital and St Christopher's Hospital.</li> <li>• Implementation of Plan in progress.</li> <li>• Mechanisms in place for Community Hospital staff. Discussions to be progressed with communications lead (hosted</li> </ul>		Operations Director Fareham & Gosport and East Hants PCTs Head of Quality, East Hants PCT	<p>All staff are kept up to date about NHS and PCT Issues,</p> <p>Staff and patient/public access to information in a range of mediums</p> <p>Staff/ patients/ public are able to fully engage in services and provide feedback</p>	<ul style="list-style-type: none"> <li>• Ongoing review of content of PCT staff newsletters and other communications to ensure comprehensive access to information regarding CHI Action Plan Implementation</li> <li>• Progress against milestones set out in PCTs Communications and Patient /Public</li> </ul>

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Rec: 12	To determine the best way to improve communication with older patients and their relatives /carers	<ul style="list-style-type: none"> <li>▪ Produce draft outline Patient and Public Involvement Strategy, incorporating staff communications in Fareham &amp; Gosport PCT by January 2003</li> <li>▪ Review Nurses Directory in Fareham &amp; Gosport PCT – by March 2003.</li> <li>▪ Fareham and Gosport PCT to develop a process for consulting with key local organisations/user groups in relation to older people in conjunction with PALS Co-ordinator - by March 2003</li> <li>▪ Ensure information about services at Gosport War Memorial Hospital is available at Queen Alexandra Hospital, St Mary's Hospital and RH Haslar for patients and families prior to transfer. Information leaflets to be prepared - by end March 2003.</li> <li>▪ Follow-up of actions arising from the communication audit undertaken by the</li> </ul>	<p>service) to explore wider dissemination.</p> <ul style="list-style-type: none"> <li>• Patient and Public Involvement framework in Fareham &amp; Gosport PCT approved at January Public Board meeting.</li> <li>• Review completed.</li> <li>• PALS Co-ordinator to progress establishment of arrangements for Patient Advisory Liaison Service at Gosport War Memorial Hospital.</li> <li>• Review of printed information/leaflets underway in collaboration with discharge co-ordinators. On target for completion by end of March 2003.</li> <li>• CHC has fed back the audit. Audit report currently being finalised.</li> </ul>	<p>Capacity to deliver communication / patient &amp; public involvement strategies</p> <p>PALS Co-ordinator appointed August 2002 serving 3 PCTs across the whole of Portsmouth &amp; South East Hampshire. Availability to support delivery against agreed action is likely to be a constraint</p>	<p>Director of Public Health, Fareham &amp; Gosport PCT,</p> <p>Operations Director/PCT Board Nurse members. Director of Public Health, Fareham &amp; Gosport PCT</p> <p>Operations Director, Fareham &amp; Gosport PCTs</p> <p>Operations Director, Fareham &amp; Gosport PCTs</p>	<p>Explicit arrangements for improved communication and consultation with older patients/relatives and user groups in place</p>	<p>Involvement strategies</p> <ul style="list-style-type: none"> <li>• Annual staff opinion surveys</li> <li>▪ Progress reporting for communications with older patients and relatives/carers against action plans to support implementation of PCT Patient and Public Involvement Strategy Group by April 2003</li> <li>• Information from Community Health Council audit findings shared with staff through local workshops, as appropriate, by April 2003</li> </ul>



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Rec: 13	To review 'Out of Hours' medical cover to Daedalus, Dryad and Sultan wards at Gosport War Memorial Hospital	<p>Community Health Council – by March 2003.</p> <ul style="list-style-type: none"> <li>▪ Review the "Living with Bereavement" booklet – by March 2003</li> <li>▪ Review and renew the 'Out of Hours' contractual agreement for medical cover on consultant led Dryad and Daedalus wards – by December 2002</li> <li>▪ Review the admissions criteria for GP led Sultan ward - by September 2002</li> <li>▪ Develop/implement alternative models of 'Out of Hours' Service Delivery - by January 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Review in progress and on target for completion by March 2003</li> <li>• Review undertaken. Agreements established with two out of hours service providers (Primecare and the Knapman Practice) working. Discussions ongoing in relation to Out of Hours Service delivery model alongside recruitment of additional medical staff.</li> </ul>	Local workforce capacity to provide medical out of hours cover	<p>As above</p> <p>Medical Director, East Hants and Fareham &amp; Gosport PCTs</p> <p>Operations Director, Fareham &amp; Gosport PCT</p> <p>As above</p>	Improved co-ordination and quality of out of hours service provision for older patients at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>• Revised policies/criteria for 'Out of Hours' medical cover in place by January 2003</li> <li>▪ Implementation of criteria and model of provision monitored through PCT quarterly Service Review</li> </ul>
Rec: 14	To ensure appropriate patients are admitted to Gosport War Memorial Hospital and receive	<ul style="list-style-type: none"> <li>• Review the admissions policy for Sultan - by September 2002 and for Dryad and Daedalus wards – by December 2002</li> <li>• Undertake audit of patients admitted to</li> </ul>	<ul style="list-style-type: none"> <li>• Achieved</li> <li>• Audit on target for completion June</li> </ul>		<p>Operations Director, Fareham &amp; Gosport PCT and East Hants PCT in conjunction with Medical Director</p> <p>As above</p>	Explicit admission and transfer criteria incorporating clear accountability for review, in place to ensure patients are admitted to the ward most	<ul style="list-style-type: none"> <li>▪ Audit report produced by June 2003 and submitted as part of PCT quarterly Service Review and action plan</li> </ul>

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Rec: 15	<p>appropriate levels of support.</p> <p>To establish arrangements in Fareham &amp; Gosport PCT to ensure strong, long-term nursing leadership on all wards at Gosport War Memorial Hospital</p>	<p>Daedalus, Dryad and Sultan Wards to determine the appropriateness of admission against new admissions policy Sultan Ward 2002, Daedalus &amp; Dryad – by June 2003</p> <ul style="list-style-type: none"> <li>▪ Establish a 6 month secondment Practice Development post facilitate leadership developments in Gosport War Memorial Hospital – by September 2002</li> <li>▪ Establish nursing reference groups that will identify and implement clinical support processes in conjunction with Practice Development postholder - by December 2002</li> <li>▪ Develop PCT Nursing Strategy</li> <li>▪ Establish an implementation group to support delivery of PCT nursing strategy – by December 2002.</li> <li>▪ Evaluate the Gerontological Nursing Programme - by November 2002</li> </ul>	<p>2003.</p> <ul style="list-style-type: none"> <li>• Achieved</li> <li>• Development of nursing strategy underway and nursing reference groups established. Action learning approach being adopted.</li> <li>• Nursing Strategy Group established.</li> <li>• Achieved</li> </ul>		<p>Operations Director, Fareham &amp; Gosport PCT</p> <p>As above</p> <p>Board/PEC Nurse member and PCT Director of Operations</p> <p>Operations Director, Fareham &amp; Gosport PCT through RCN/Critical Companion Group Head of Human</p>	<p>appropriate to their care needs.</p> <p>Clearly identifiable clinical nursing processes in place across all wards at Gosport War Memorial Hospital</p> <p>Adoption of high quality nursing practice supported by good nursing leadership across elderly care wards at Gosport War Memorial Hospital</p> <p>Clear nursing leadership structure and development programme in place</p> <p>Clarity regarding the development and scope of nursing roles in caring of older people</p>	<p>developed by PCT Clinical Governance sub committee by September 2003</p> <ul style="list-style-type: none"> <li>▪ Project evaluation report of Practice Development initiative by April 2003</li> <li>▪ Clinical supervision framework in place and monitored through Executive Nurse Action Learning Group</li> <li>▪ Final evaluation project report of Gerontological Nursing Programme produced by January 2003</li> <li>▪ Draft Nursing Strategy produced by March 2003</li> </ul>

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Rec: 16	Develop local policy guidance in relation to GPs who work as Clinical Assistants in Community Hospitals in Fareham and Gosport PCT.	<ul style="list-style-type: none"> <li>▪ Develop guidance for using GPs as Clinical Assistants to inform personnel policy and employment practice - by March 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Joint East Hampshire and Fareham &amp; Gosport PCT Group established to develop guidance - first meeting 27/1/2003.</li> </ul>	No GP Clinical Assistants currently employment in Community Hospitals in Fareham & Gosport and East Hants PCTs	Resource in East Hants and Fareham & Gosport PCTs conjunction with Medical Director	<p>Delivery of robust medical care that operates within appropriate supervisory/ support structures</p> <p>Equity of employment conditions for GPs working as Clinical Assistants in elderly health care</p>	<ul style="list-style-type: none"> <li>• Policy guidance submitted as part of PCT Quarterly Service Review by March 2003 and then subject to PCT personnel policy and practice review process</li> </ul>
Rec: 17	To ensure arrangements are in place for continued learning and monitoring of action arising from complaints across Fareham & Gosport and East Hants PCTs	<ul style="list-style-type: none"> <li>• Utilise Service Review process and bi-annual hosted services review arrangements to oversee monitoring of trends and action taken in relation to complaints – in place</li> <li>• Complaints trends and actions shared through Clinical Governance Committees and Quarterly Quality report – in place in East Hants PCT</li> <li>• Set up PCT Complaints Panel in East Hants PCT – by Oct 2002</li> <li>• Review Complaints Policy and develop complaints action plan in Fareham &amp; Gosport PCT - by March 2003</li> <li>• Develop mechanism for sharing lessons learnt</li> </ul>	<ul style="list-style-type: none"> <li>• Process established and being further refined in Fareham &amp; Gosport PCT (revision of Service Review process).</li> <li>• Achieved</li> <li>• Achieved</li> <li>• Review underway</li> <li>• Mechanism to be established in line</li> </ul>		<p>Chief Executives, Fareham &amp; Gosport and East Hants PCTs</p> <p>Director of Operations, Fareham &amp; Gosport PCT and Head of Quality, East Hants PCT</p> <p>Head of Quality, East Hants PCT</p> <p>Director of Operations Fareham &amp; Gosport PCT</p> <p>Director of Operations Fareham &amp; Gosport PCT and Head of</p>	Lessons are learnt and shared within and across the PCTs and action plans are implemented	<ul style="list-style-type: none"> <li>• Quarterly complaints reports produced and shared through PCT Clinical Governance subcommittee</li> <li>▪ New complaints policy disseminated by April 2003</li> <li>▪ Plan developed for sharing lessons learnt from complaints across the two PCTs by March 2003</li> </ul>

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Rec: 18	To ensure all staff on Dryad, Daedalus and Sultan attend customer care and complaints training, which are developed with patients, relatives and staff	<p>from complaints across both organisations, which are timely and effective – by March 2003</p> <ul style="list-style-type: none"> <li>• Develop comprehensive complaints and customer care training programme for staff that links to the PALS and induction training programmes – March 2003</li> <li>• Ensure that all medical staff can demonstrate that they continue to improve their communication skills through their Continuous Professional Development programme – medical staff aware of this requirement by April 2003</li> </ul>	<p>with completion of review in Fareham &amp; Gosport.</p> <ul style="list-style-type: none"> <li>• On target for completion</li> <li>• Status/progress on establishing training group unclear. Accountable officer not present. Update to be provided at next meeting</li> </ul>	Capacity for ward cover and staff training	<p>Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT and Head of Quality East Hants PCT through Training and Development Manager Medical Director, East Hants and Fareham &amp; Gosport PCTs</p>	<p>All staff provide care to patients and their families that is sensitive to their needs and the needs of those bereaved</p> <p>Staff understand and provide clear information and support to patients/relatives with concerns or complaints</p>	<ul style="list-style-type: none"> <li>• Training programme developed and uptake and evaluation monitored</li> <li>▪ Integration of communication skills for medical staff monitored through annual appraisal process</li> </ul>
Rec: 19	To ensure clinical governance developments are fully maintained and supported within Fareham & Gosport and East Hants PCTs	<ul style="list-style-type: none"> <li>• Implement Quality Strategy and annual action plans in East Hants PCT – ongoing</li> <li>• Produce a Clinical Governance Framework/Action Plan for Fareham and Gosport PCT – by January 2003</li> <li>• Produce a Quality Development Plan for Fareham and Gosport PCT – by September 2003</li> <li>• Ensure clear PCT</li> </ul>	<ul style="list-style-type: none"> <li>• Established</li> <li>• Draft framework produced</li> <li>• On target for completion</li> <li>• Demonstrated</li> </ul>	Time, staffing and financial constraints	<p>Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p> <p>As above</p> <p>Chief Executives,</p>	<p>PCT culture of continuous improvement</p> <p>Clear action planning processes</p> <p>Robust monitoring mechanisms and audit trail</p>	<ul style="list-style-type: none"> <li>• Monitoring of Quality annual action plan through Clinical Governance sub committee in East Hants PCT</li> <li>▪ Production of Clinical Governance Action Plan and ongoing monitoring through Clinical</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 20	To ensure all staff are aware of the requirement to complete risk and incident reports	<p>structures and accountabilities for Clinical Governance - in place</p> <ul style="list-style-type: none"> <li>• Audit current reporting mechanisms to test robustness – by March 2003</li> <li>• All staff, including medical staff, are trained in the completion of risk management forms and basic risk management &amp; awareness – ongoing</li> <li>• Risk management training for junior doctors and new medical staff on induction - from January 2003</li> <li>• Re-launch risk incident forms in Fareham &amp; Gosport PCT - by March 2003</li> </ul>	<p>through Fareham &amp; Gosport PCT Clinical Governance Framework</p> <ul style="list-style-type: none"> <li>• Status/progress not confirmed</li> <li>• Risk policy and forms under revision in line with forthcoming guidance from National Patient Safety Agency. Training to follow launch of revised policy and forms for all staff.</li> </ul>	Certain staff groups under / over reporting	<p>East Hants and Fareham &amp; Gosport PCTs Head of Quality, East Hants PCT and Operations Director, Fareham &amp; Gosport PCT</p> <p>Medical Director Operations Director, Fareham &amp; Gosport PCT and Head of Quality, East Hants PCT Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p>	Increased compliance of all staff in reporting risks	<p>Governance sub committee in Farehama &amp; Gosport PCT</p> <ul style="list-style-type: none"> <li>▪ Production of Quality Development Plan for Fareham &amp; Gosport PCT</li> <li>▪ Audit reports submitted to PCT Clinical Governance sub committees</li> <li>▪ Monitor risk management training through PCT Clinical Governance and risk management sub committee reports</li> <li>▪ Dissemination plan for re-launch of risk incident forms in Fareham &amp; Gosport PCT produced by February 2003</li> </ul>
Rec: 21	To ensure systems are in place to identify and	<ul style="list-style-type: none"> <li>• Further develop the current quarterly quality reporting mechanism in East Hants PCT to make</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing activity</li> </ul>		Head of Quality, East Hants PCT and Operations Director, Fareham	Improved patient care and safety through effective risk reduction/	<ul style="list-style-type: none"> <li>▪ Quarterly quality reporting mechanisms in place in</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 22	<p>monitor trends revealed by risk reports and action is taken</p> <p>To ensure 'Whistle Blowing' policies across Fareham &amp; Gosport and East Hants PCTs enable staff to raise concerns outside normal management channels</p>	<p>explicit action taken and lessons learned – from October 2002</p> <ul style="list-style-type: none"> <li>• Agree process for cross organisational reporting and sharing lessons/ learning lessons – by March 2003</li> <li>• Review quarterly quality reporting mechanism in Fareham &amp; Gosport PCT - by March 2003</li> <li>• Develop an audit trail to identify any gaps in the current system – by June 2003</li> <li>• Implement recommendations as a result of audit - by September 2003</li> <li>• Work with Joint representative committee to review policy</li> <li>• Redefine "whistleblowing" to gain greater acceptance amongst staff.</li> <li>• Revise and approve - by June 2003</li> <li>• Establish a programme for investigation officer training</li> </ul>	<ul style="list-style-type: none"> <li>• Underway</li> <li>• Quarterly report and progress against action plan to go to PCT Board</li> <li>• On target for completion</li> <li>• On target for completion</li> <li>• Joint PCT Consultative Forum established to take forward action.</li> <li>• On target for completion</li> <li>• East Hampshire PCT taking lead for developing a training programme.</li> </ul>		<p>&amp; Gosport PCT</p> <p>Heads of Human Resources, Fareham &amp; Gosport and East Hants PCTs in conjunction with Non Executive Director lead</p>	<p>management</p> <p>Integrated systems for risk management across services for older people</p> <p>New Policy launched that provides an alternative route for staff to report serious concerns about practice</p> <p>All staff aware</p>	<p>Fareham &amp; Gosport and East Hants PCTs established by April 2003</p> <ul style="list-style-type: none"> <li>▪ Audit trail in place to identify gaps in current system by September 2003</li> <li>▪ Seek views of staff regarding implementation of revised policy through Staff Opinion Survey in East Hants and Fareham &amp; Gosport PCTs</li> <li>▪ Training programme developed by June 2003</li> </ul>

## ACTION PLAN IN RESPONSE TO CHI INVESTIGATION AT GOSPORT WAR MEMORIAL HOSPITAL - AGREED OCTOBER 2002

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 1	To develop performance-monitoring arrangements to ensure that any performance shortfalls in the provision of services for older people at Gosport War Memorial Hospital are identified and addressed swiftly.	<ul style="list-style-type: none"> <li>• Appointment of Operational Director for Secondary Care - in post</li> <li>• Develop a Service Level Agreement (SLA) for Older People's Services with jointly agreed principles, clinical governance standards and responsibilities, and key performance criteria – by December 2002</li> <li>• Establish a system for monitoring and performance managing Service Level Agreement arrangements – January 2003</li> <li>• Set up and run regular dedicated clinical/ management meetings that involve the associate lead consultant – from December 2002</li> </ul>	<ul style="list-style-type: none"> <li>• Operational Director in post</li> <li>• SLA to be completed by end March 2003. Fiona Cameron to draft</li> <li>• Linked to above. System for monitoring will be identified in SLA</li> <li>• First meeting to be held on 11/2/2003. Medical Director participating</li> </ul>	<p>Lack of direction for the service managed across two PCTs</p> <p>Lack of formal agreement and monitoring processes for the PCTs to evaluate</p> <p>Time</p>	<p>Chief Executive East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport and East Hampshire PCTs</p> <p>As above</p> <p>Medical Director, East Hampshire and Fareham &amp; Gosport PCTs</p>	<p>Provision of high quality patient care supported by robust and responsive performance management arrangements between the two PCTs.</p>	<ul style="list-style-type: none"> <li>▪ Quarterly Service Review process</li> <li>▪ Bi-annual hosted Service Review</li> <li>▪ Board Performance Report</li> </ul>
Rec: 2	To review the policy for admitting patients to Sultan Ward at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>▪ Establish a meeting to review and revise, as necessary the criteria for admitting patients to Sultan ward – completed September 2002</li> <li>▪ Establish a Gosport War Memorial Hospital Medical Committee to review criteria for GP admissions to Sultan Ward - Jan 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Initial review undertaken. Further policy review almost complete - required to reflect changing circumstances in service provision, in particular GP bed fund</li> </ul>	<p>Quality of patient care potentially compromised by inappropriate admissions</p>	<p>Operations Director, Fareham &amp; Gosport PCT in conjunction with PCT Medical Director</p> <p>As above</p>	<p>Appropriate case mix and level of clinical care provided to patients admitted to Sultan ward</p>	<ul style="list-style-type: none"> <li>▪ Audit against new admissions criteria undertaken 3 months after new policy implemented (January 2003) followed by three monthly review thereafter</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 3	To review all local prescribing guidelines to ensure appropriateness for current levels of patient dependency on elderly care service wards.	<ul style="list-style-type: none"> <li>▪ Establish a process to ensure that ongoing review of the admissions policy is undertaken as part of routine review, and in particular in response to service changes</li> <li>• Establish Medicines Management Group as a sub group of the Area Prescribing Committee, to oversee the review and guideline development process where necessary - Group established by November 2002</li> <li>• Carry out a review and revision of guidelines in 6 key areas - by March 2003</li> <li>• Establish an ongoing audit programme and process for all prescribing guidelines developed to ensure prescribing practice reflects patient management plans/outcome - March 2003</li> <li>• Audit prescribing against initial 6 revised guidelines and assess appropriateness in relation to patient dependency levels – by December 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Revised criteria to be presented to Gosport GP Group</li> <li>• Sub Group established with GP membership. Terms of Reference agreed and representation secured from PCTs.</li> <li>• Review and revision of 6 sets of guidelines on target for completion by March 2003.</li> <li>• Audit programme will be developed as soon as additional pharmacy staff secured.</li> <li>• On target for completion by December 2003.</li> </ul>	Pharmacy service workforce capacity issues	As above  PCT Medical Director in conjunction with Pharmaceutical Advisers, Fareham & Gosport and East Hants PCTs	<p>System in place to ensure the ongoing review of local prescribing guidelines for older people in community settings</p> <p>Improved delivery of care through appropriate prescribing, and therefore reduced risk to patients</p> <p>Comprehensive training programme and increased awareness and application of prescribing guidelines</p>	<ul style="list-style-type: none"> <li>▪ Quarterly exception reports submitted through Fareham &amp; Gosport PCT Clinical Governance Committee</li> <li>• Submission of quarterly reports from the Medicines Management Group to the Area Prescribing Committee and PCT Prescribing Sub Committees - from March 2003</li> <li>▪ Publication and dissemination of revised prescribing guidelines through Medicines</li> </ul>



Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 4	To establish comprehensive pharmacy service support to wards at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>• Ensure staff training requirements arising from revised guidelines are integrated into PCT training programmes, and as new guidelines are reviewed and developed and implemented – ongoing</li> <li>▪ Review the current level of pharmacy services provided based on the existing Service Level Agreement, and prepare a business case to enhance provision, which includes an explicit specification for Out of Hours cover – by October 2002</li> <li>▪ Integrate additional investment /pharmacy activity into Service Level Agreement - January/February 2003</li> <li>▪ Establish central point of reference for Pharmacy Staff working in satellite sites - in place</li> <li>▪ Establish Pharmacy involvement in ward rounds undertaken on Dryad, Daedalus and Sultan wards - by March 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Jeff Watling to feed in training needs in relation to pharmacy recommendations to Jane Parvin for inclusion in Workforce Confederation bid.</li> <li>• Fareham &amp; Gosport PCT have agreed additional investment of £68,000 to recruit additional pharmacy staff. Jeff Watling to progress recruitment</li> <li>• Specification/revised SLA to be developed by Jeff Watling, Hazel Bagshaw and Fiona Cameron and share with Fiona Harris at Strategic Health Authority</li> <li>• Current level of service provision and definition of additional resource will be identified within the revised SLA.</li> </ul>	<p>Capacity to deliver training programmes</p> <p>Pharmacy workforce capacity issues to Gosport War Memorial Hospital</p> <p>Pending appointment of additional pharmacy staff resource</p>	<p>PCT Chief Executives</p> <p>Pharmaceutical Adviser, Fareham &amp; Gosport PCT in conjunction with PCT Commissioning/ Planning colleagues</p> <p>As above</p>	<p>Improved co-ordination and delivery of pharmacy services to Gosport War Memorial Hospital</p>	<p>Management Group as produced and first 6 guidelines - by May 2003</p> <ul style="list-style-type: none"> <li>• Outcome of review submitted to PCT Chief Executives by October 2002 and investment decision taken by December 2002</li> <li>• Quarterly review of Pharmacy Service Level Agreement</li> </ul>
Rec: 5	To review and monitor	<ul style="list-style-type: none"> <li>▪ Carry out a retrospective audit of diamorphine</li> </ul>	<ul style="list-style-type: none"> <li>• Retrospective audit now to be undertaken by</li> </ul>	Timescale pending	PCT Medical Director in	Robust arrangements in	<ul style="list-style-type: none"> <li>• Submission of quarterly reports from the</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 6	<p>prescribing of all medicines on wards caring for older people at Gosport War Memorial Hospital, including diamorphine prescribing on Sultan ward.</p> <p>To ensure that all-relevant staff, including GPs, in Fareham &amp; Gosport and East Hampshire and PCTs are trained in prescription, administrat-</p>	<p>prescribing on Sultan ward to ensure that current guidelines are implemented – by December 2002</p> <ul style="list-style-type: none"> <li>▪ Establish a system for routine monitoring and auditing of narcotic analgesic prescribing on wards, including a baseline audit of all controlled drug prescribing on wards at Gosport War Memorial Hospital - by March 2003</li> <li>▪ Carry out monthly analysis of this data and investigate sudden changes – by April 2003</li> <li>▪ Ensure dissemination of prescribing data to medical staff to support rigorous routine review - May 2003</li> </ul> <ul style="list-style-type: none"> <li>• Establish short life group (as a sub-group of the Medicines Management Group) to review and make recommendations for action regarding training and development - group established by November 2002 and plan developed - by March 2003</li> <li>• Ensure the integration of prescribing training</li> </ul>	<p>PCT Clinical Effectiveness Manager. Audit to be completed by</p> <ul style="list-style-type: none"> <li>• Jeff Watling in collaboration with Hazel Bagshaw to develop critical pathway for monitoring and auditing of narcotic analgesic prescribing on wards to be presented at next Implementation Group meeting.</li> <li>• System for routine monthly analysis of data in place.</li> <li>• System for regular dissemination of prescribing data to be established.</li> </ul> <ul style="list-style-type: none"> <li>• Status/progress on establishing training group unclear. Accountable officer not present. Update to be provided at next meeting.</li> </ul>	<p>appointment of additional pharmacy staff resource</p> <p>Timescale pending appointment of additional pharmacy staff resource</p>	<p>conjunction with Pharmaceutical Adviser, Fareham &amp; Gosport PCT</p> <p>PCT Medical Director in conjunction with the Pharmaceutical Advisers</p>	<p>place to ensure appropriate prescribing practice based on locally agreed guidelines on all elderly care wards at Gosport War Memorial Hospital</p> <p>Improved delivery of care through reduced risk for patients</p> <p>All appropriate staff trained to prescribe, administer, review and record legibly and accurately</p>	<p>Medicines Management Group to the Area Prescribing Committee and PCT Prescribing Sub Committees - from March 2003</p> <ul style="list-style-type: none"> <li>• Training plan developed by sub group by March 2003</li> <li>• Bi-annual prescribing training course features in the PCTs annual training programme</li> <li>• Production of audit report by June 2003 and</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec 7	<p>ion, review and recording of medicines for older people.</p> <p>To ensure that lessons from patient complaints and comments are disseminated amongst all staff caring for older people in Fareham &amp; Gosport and East Hampshire PCTs</p>	<p>requirements into PCT training delivery programmes – April 2003</p> <ul style="list-style-type: none"> <li>• Carry out an audit of the quality and legibility of prescribing notes to facilitate discussions between medical staff/GPs - audit by April 2003</li> <li>• Action and learning points from complaints to be included in PCT Quality Newsletter SEQUAL in East Hants PCT - from Oct 2002</li> <li>• All complaints and lessons learned to be fed through Service Clinical Governance Groups in East Hants PCT - in place</li> <li>• Review Complaints Policy in Fareham &amp; Gosport PCT - by Dec 2002, and provide training to support implementation of new policy - by March 2003</li> <li>• Representatives from Service Clinical Governance Groups to continue to share lessons at team meetings - ongoing</li> <li>• Action plans generated from each complaint in Fareham &amp; Gosport PCT to be monitored through Quarterly Service Review</li> </ul>	<ul style="list-style-type: none"> <li>• Audit scheduled to be undertaken through Fareham &amp; Gosport PCT's Clinical Governance Team.</li> <li>• Action achieved and ongoing</li> <li>• Process established to ensure lessons learnt are fed back through Clinical Governance Groups</li> <li>• Review to be completed by March 2003 and new procedure launched during April 2003.</li> <li>• Mechanisms established too enable feedback/sharing of lessons across Clinical Governance Groups</li> <li>• Quarterly Service Review process in Fareham &amp; Gosport PCT underway -</li> </ul>		<p>PCT Quality Leads. Fareham &amp; Gosport and East Hants PCTs</p> <p>Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p> <p>Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p>	<p>Staff have a clear understanding of quality issues from patient feedback and how they are acted upon</p> <p>Clear and open two way communication processes for sharing complaints issues and action</p>	<p>action plan for discussions by July 2003</p> <ul style="list-style-type: none"> <li>• Regular use of PCT Newsletters to ensure action and learning points are a key feature</li> <li>• Clear documentation of complaints action plans and reviews</li> <li>• Review of minutes of clinical governance meetings and appropriate team meetings to ensure action and learning points from complaints are integrated into local action planning <ul style="list-style-type: none"> <li>▪ Action and learning points from complaints</li> </ul> </li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 8	To ensure that nursing and other relevant staff at Gosport War Memorial Hospital are appropriately trained to undertake swallowing assessments to enable patient care needs to be met across the 24-hour period.	<p>process until action completed by Service Managers – October 2002</p> <ul style="list-style-type: none"> <li>▪ Engage Speech and Language Therapy in providing additional training programmes - to commence early October 2002</li> <li>▪ Initiate an audit to assess the impact of training and to identify unmet need - by March 2003.</li> <li>▪ Implement agreed action plan arising from audit findings - by October 2003</li> </ul>	<p>next meeting to be held on 28/1/2003.</p> <ul style="list-style-type: none"> <li>• Training of qualified staff completed. Three levels of training established to ensure that qualified nursing staff and support workers (level 3 training) is provided. Audit has been carried out simultaneously to assess level of training required.</li> </ul>	Releasing staff from wards to undertake training	Operations Director, Fareham & Gosport PCT through the Modern Matron, Gosport War Memorial Hospital As above	100% of qualified staff able to undertake initial swallowing assessment with patients. All new staff to receive training within 3 months of taking up post.	<p>incorporated as part of Service Review meetings</p> <ul style="list-style-type: none"> <li>▪ Monthly reports of numbers of staff trained in swallowing assessments provided and monitored via PCT quarterly Service Reviews</li> </ul>
Rec: 9	To review and clarify the role of the Activities Co-ordinator at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>▪ Widen the membership of the Activities Co-ordinator Working Group to include patient / relative, medical and pharmaceutical staff representation - by December 2002</li> <li>▪ Review the need for the Activities Co-ordinator role to be used in specific ward areas and recommend a way forward - by April 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Wider Group established</li> <li>• Recommendations for the revision of the role of Activities Co-ordinator to be agreed by March 2003.</li> </ul>		Operations Director, Fareham & Gosport PCT  As above	Clear role brief identified for Activities Co-ordinator post holder, which ensures that there are increased and appropriate day time activities for patients that complement therapy goals	<ul style="list-style-type: none"> <li>▪ Report outlining options for role of Activities Co-ordinator submitted to PCT quarterly Service Review meeting by March 2003</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 10	To ensure clinical practice relating to continence management , nutrition and hydration are in line with the standards set out in 'Essence of Care' at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>▪ Re-launch 'Essence of Care' a standard with nursing and other profession leads - by November 2002.</li> <li>▪ Undertake an audit and analysis of compliance against national standards and identify a plan of action to implement standards - by March 2003.</li> <li>▪ Identify a lead/link nurse for each care standard area - by March 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Three workshop days planned for March 2003.</li> <li>• Workshops will support audit and analysis of compliance against national standards and identification of action plan.</li> <li>• Link nurses to be identified through planned workshops during March 2003.</li> </ul>		Fareham & Gosport PCT Director of Operations	Improved nursing care and management of older patients in community hospital settings in Fareham and Gosport	<ul style="list-style-type: none"> <li>▪ Audit implementation of 'Essence of Care' standards by September 2003</li> <li>▪ Develop action plan by March 2003</li> <li>▪ Ongoing progress monitoring through peer audit arrangements</li> </ul>
Rec: 11	To ensure that communication developments with staff working in community hospitals are continued in both Fareham & Gosport and East Hampshire PCTs	<ul style="list-style-type: none"> <li>▪ Feedback CHI action plan and progress reports through regular meetings with staff – ongoing</li> <li>• Implement PCT Communications Plan in East Hants PCT – from September 2002</li> <li>▪ Finalise internal communications improvements in each PCT – by December 2002.</li> </ul>	<ul style="list-style-type: none"> <li>• CHI Action Implementation Plan cascaded through staff groups (Gosport War Memorial Hospital and St Christopher's Hospital.</li> <li>• Implementation of Plan in progress.</li> <li>• Mechanisms in place for Community Hospital staff. Discussions to be progressed with communications lead (hosted</li> </ul>		Operations Director Fareham & Gosport and East Hants PCTs Head of Quality, East Hants PCT	<p>All staff are kept up to date about NHS and PCT Issues,</p> <p>Staff and patient/public access to information in a range of mediums</p> <p>Staff/ patients/public are able to fully engage in services and provide feedback</p>	<ul style="list-style-type: none"> <li>• Ongoing review of content of PCT staff newsletters and other communications to ensure comprehensive access to information regarding CHI Action Plan Implementation</li> <li>• Progress against milestones set out in PCTs Communications and Patient /Public</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 12	To determine the best way to improve communication with older patients and their relatives /carers	<ul style="list-style-type: none"> <li>▪ Produce draft outline Patient and Public Involvement Strategy, incorporating staff communications in Fareham &amp; Gosport PCT by January 2003</li> <li>▪ Review Nurses Directory in Fareham &amp; Gosport PCT – by March 2003.</li> <li>▪ Fareham and Gosport PCT to develop a process for consulting with key local organisations/user groups in relation to older people in conjunction with PALS Co-ordinator - by March 2003</li> <li>▪ Ensure information about services at Gosport War Memorial Hospital is available at Queen Alexandra Hospital, St Mary's Hospital and RH Haslar for patients and families prior to transfer. Information leaflets to be prepared - by end March 2003.</li> <li>▪ Follow-up of actions arising from the communication audit undertaken by the</li> </ul>	<p>service) to explore wider dissemination.</p> <ul style="list-style-type: none"> <li>• Patient and Public Involvement framework in Fareham &amp; Gosport PCT approved at January Public Board meeting.</li> <li>• Review completed.</li> <li>• PALS Co-ordinator to progress establishment of arrangements for Patient Advisory Liaison Service at Gosport War Memorial Hospital.</li> <li>• Review of printed information/leaflets underway in collaboration with discharge co-ordinators. On target for completion by end of March 2003.</li> <li>• CHC has fed back the audit. Audit report currently being finalised.</li> </ul>	<p>Capacity to deliver communication / patient &amp; public involvement strategies</p> <p>PALS Co-ordinator appointed August 2002 serving 3 PCTs across the whole of Portsmouth &amp; South East Hampshire. Availability to support delivery against agreed action is likely to be a constraint</p>	<p>Director of Public Health, Fareham &amp; Gosport PCT,</p> <p>Operations Director/PCT Board Nurse members. Director of Public Health, Fareham &amp; Gosport PCT</p> <p>Operations Director, Fareham &amp; Gosport PCTs</p> <p>Operations Director, Fareham &amp; Gosport PCTs</p>	<p>Explicit arrangements for improved communication and consultation with older patients/relatives and user groups in place</p>	<p>Involvement strategies</p> <ul style="list-style-type: none"> <li>• Annual staff opinion surveys</li> <li>▪ Progress reporting for communications with older patients and relatives/carers against action plans to support implementation of PCT Patient and Public Involvement Strategy Group by April 2003</li> <li>• Information from Community Health Council audit findings shared with staff through local workshops, as appropriate, by April 2003</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 13	To review 'Out of Hours' medical cover to Daedalus, Dryad and Sultan wards at Gosport War Memorial Hospital	<p>Community Health Council – by March 2003.</p> <ul style="list-style-type: none"> <li>▪ Review the "Living with Bereavement" booklet – by March 2003</li> <li>▪ Review and renew the 'Out of Hours' contractual agreement for medical cover on consultant led Dryad and Daedalus wards – by December 2002</li> <li>▪ Review the admissions criteria for GP led Sultan ward - by September 2002</li> <li>▪ Develop/implement alternative models of 'Out of Hours' Service Delivery - by January 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Review in progress and on target for completion by March 2003</li> <li>• Review undertaken. Agreements established with two out of hours service providers (Primecare and the Knapman Practice) working. Discussions ongoing in relation to Out of Hours Service delivery model alongside recruitment of additional medical staff.</li> </ul>	Local workforce capacity to provide medical out of hours cover	<p>As above</p> <p>Medical Director, East Hants and Fareham &amp; Gosport PCTs</p> <p>Operations Director, Fareham &amp; Gosport PCT</p> <p>As above</p>	Improved co-ordination and quality of out of hours service provision for older patients at Gosport War Memorial Hospital	<ul style="list-style-type: none"> <li>• Revised policies/criteria for 'Out of Hours' medical cover in place by January 2003</li> <li>▪ Implementation of criteria and model of provision monitored through PCT quarterly Service Review</li> </ul>
Rec: 14	To ensure appropriate patients are admitted to Gosport War Memorial Hospital and receive	<ul style="list-style-type: none"> <li>• Review the admissions policy for Sultan - by September 2002 and for Dryad and Daedalus wards – by December 2002</li> <li>• Undertake audit of patients admitted to</li> </ul>	<ul style="list-style-type: none"> <li>• Achieved</li> <li>• Audit on target for completion June</li> </ul>		<p>Operations Director, Fareham &amp; Gosport PCT and East Hants PCT in conjunction with Medical Director</p> <p>As above</p>	Explicit admission and transfer criteria incorporating clear accountability for review, in place to ensure patients are admitted to the ward most	<ul style="list-style-type: none"> <li>▪ Audit report produced by June 2003 and submitted as part of PCT quarterly Service Review and action plan</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 15	<p>appropriate levels of support.</p> <p>To establish arrangements in Fareham &amp; Gosport PCT to ensure strong, long-term nursing leadership on all wards at Gosport War Memorial Hospital</p>	<p>Daedalus, Dryad and Sultan Wards to determine the appropriateness of admission against new admissions policy Sultan Ward 2002, Daedalus &amp; Dryad – by June 2003</p> <ul style="list-style-type: none"> <li>▪ Establish a 6 month secondment Practice Development post facilitate leadership developments in Gosport War Memorial Hospital – by September 2002</li> <li>▪ Establish nursing reference groups that will identify and implement clinical support processes in conjunction with Practice Development postholder - by December 2002</li> <li>▪ Develop PCT Nursing Strategy</li> <li>▪ Establish an implementation group to support delivery of PCT nursing strategy – by December 2002.</li> <li>▪ Evaluate the Gerontological Nursing Programme - by November 2002</li> </ul>	<p>2003.</p> <ul style="list-style-type: none"> <li>• Achieved</li> <li>• Development of nursing strategy underway and nursing reference groups established. Action learning approach being adopted.</li> <li>• Nursing Strategy Group established.</li> <li>• Achieved</li> </ul>		<p>Operations Director, Fareham &amp; Gosport PCT</p> <p>As above</p> <p>Board/PEC Nurse member and PCT Director of Operations</p> <p>Operations Director, Fareham &amp; Gosport PCT through RCN/Critical Companion Group Head of Human</p>	<p>appropriate to their care needs.</p> <p>Clearly identifiable clinical nursing processes in place across all wards at Gosport War Memorial Hospital</p> <p>Adoption of high quality nursing practice supported by good nursing leadership across elderly care wards at Gosport War Memorial Hospital</p> <p>Clear nursing leadership structure and development programme in place</p> <p>Clarity regarding the development and scope of nursing roles in caring of older people</p>	<p>developed by PCT Clinical Governance sub committee by September 2003</p> <ul style="list-style-type: none"> <li>▪ Project evaluation report of Practice Development initiative by April 2003</li> <li>▪ Clinical supervision framework in place and monitored through Executive Nurse Action Learning Group</li> <li>▪ Final evaluation project report of Gerontological Nursing Programme produced by January 2003</li> <li>▪ Draft Nursing Strategy produced by March 2003</li> </ul>



Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 16	Develop local policy guidance in relation to GPs who work as Clinical Assistants in Community Hospitals in Fareham and Gosport PCT.	<ul style="list-style-type: none"> <li>▪ Develop guidance for using GPs as Clinical Assistants to inform personnel policy and employment practice - by March 2003</li> </ul>	<ul style="list-style-type: none"> <li>• Joint East Hampshire and Fareham &amp; Gosport PCT Group established to develop guidance - first meeting 27/1/2003.</li> </ul>	No GP Clinical Assistants currently employment in Community Hospitals in Fareham & Gosport and East Hants PCTs	Resource in East Hants and Fareham & Gosport PCTs conjunction with Medical Director	<p>Delivery of robust medical care that operates within appropriate supervisory/ support structures</p> <p>Equity of employment conditions for GPs working as Clinical Assistants in elderly health care</p>	<ul style="list-style-type: none"> <li>• Policy guidance submitted as part of PCT Quarterly Service Review by March 2003 and then subject to PCT personnel policy and practice review process</li> </ul>
Rec: 17	To ensure arrangements are in place for continued learning and monitoring of action arising from complaints across Fareham & Gosport and East Hants PCTs	<ul style="list-style-type: none"> <li>• Utilise Service Review process and bi-annual hosted services review arrangements to oversee monitoring of trends and action taken in relation to complaints – in place</li> <li>• Complaints trends and actions shared through Clinical Governance Committees and Quarterly Quality report – in place in East Hants PCT</li> <li>• Set up PCT Complaints Panel in East Hants PCT – by Oct 2002</li> <li>• Review Complaints Policy and develop complaints action plan in Fareham &amp; Gosport PCT - by March 2003</li> <li>• Develop mechanism for sharing lessons learnt</li> </ul>	<ul style="list-style-type: none"> <li>• Process established and being further refined in Fareham &amp; Gosport PCT (revision of Service Review process).</li> <li>• Achieved</li> <li>• Achieved</li> <li>• Review underway</li> <li>• Mechanism to be established in line</li> </ul>		<p>Chief Executives, Fareham &amp; Gosport and East Hants PCTs</p> <p>Director of Operations, Fareham &amp; Gosport PCT and Head of Quality, East Hants PCT</p> <p>Head of Quality, East Hants PCT</p> <p>Director of Operations Fareham &amp; Gosport PCT</p> <p>Director of Operations Fareham &amp; Gosport PCT and Head of Quality, East Hants PCT</p>	<p>Lessons are learnt and shared within and across the PCTs and action plans are implemented</p>	<ul style="list-style-type: none"> <li>• Quarterly complaints reports produced and shared through PCT Clinical Governance subcommittee</li> <li>▪ New complaints policy disseminated by April 2003</li> <li>▪ Plan developed for sharing lessons learnt from complaints across the two PCTs by March 2003</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 18	To ensure all staff on Dryad, Daedalus and Sultan attend customer care and complaints training, which are developed with patients, relatives and staff	<p>from complaints across both organisations, which are timely and effective – by March 2003</p> <ul style="list-style-type: none"> <li>• Develop comprehensive complaints and customer care training programme for staff that links to the PALS and induction training programmes – March 2003</li> <li>• Ensure that all medical staff can demonstrate that they continue to improve their communication skills through their Continuous Professional Development programme – medical staff aware of this requirement by April 2003</li> </ul>	<p>with completion of review in Fareham &amp; Gosport.</p> <ul style="list-style-type: none"> <li>• On target for completion</li> <li>• Status/progress on establishing training group unclear. Accountable officer not present. Update to be provided at next meeting</li> </ul>	Capacity for ward cover and staff training	<p>Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT and Head of Quality East Hants PCT through Training and Development Manager Medical Director, East Hants and Fareham &amp; Gosport PCTs</p>	<p>All staff provide care to patients and their families that is sensitive to their needs and the needs of those bereaved</p> <p>Staff understand and provide clear information and support to patients/relatives with concerns or complaints</p>	<ul style="list-style-type: none"> <li>• Training programme developed and uptake and evaluation monitored</li> <li>▪ Integration of communication skills for medical staff monitored through annual appraisal process</li> </ul>
Rec: 19	To ensure clinical governance developments are fully maintained and supported within Fareham & Gosport and East Hants PCTs	<ul style="list-style-type: none"> <li>• Implement Quality Strategy and annual action plans in East Hants PCT – ongoing</li> <li>• Produce a Clinical Governance Framework/Action Plan for Fareham and Gosport PCT – by January 2003</li> <li>• Produce a Quality Development Plan for Fareham and Gosport PCT – by September 2003</li> <li>• Ensure clear PCT</li> </ul>	<ul style="list-style-type: none"> <li>• Established</li> <li>• Draft framework produced</li> <li>• On target for completion</li> <li>• Demonstrated</li> </ul>	Time, staffing and financial constraints	<p>Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p> <p>As above</p> <p>Chief Executives,</p>	<p>PCT culture of continuous improvement</p> <p>Clear action planning processes</p> <p>Robust monitoring mechanisms and audit trail</p>	<ul style="list-style-type: none"> <li>• Monitoring of Quality annual action plan through Clinical Governance sub committee in East Hants PCT</li> <li>▪ Production of Clinical Governance Action Plan and ongoing monitoring through Clinical</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 20	To ensure all staff are aware of the requirement to complete risk and incident reports	<p>structures and accountabilities for Clinical Governance - in place</p> <ul style="list-style-type: none"> <li>• Audit current reporting mechanisms to test robustness – by March 2003</li> <li>• All staff, including medical staff, are trained in the completion of risk management forms and basic risk management &amp; awareness – ongoing</li> <li>• Risk management training for junior doctors and new medical staff on induction - from January 2003</li> <li>• Re-launch risk incident forms in Fareham &amp; Gosport PCT - by March 2003</li> </ul>	<p>through Fareham &amp; Gosport PCT Clinical Governance Framework</p> <ul style="list-style-type: none"> <li>• Status/progress not confirmed</li> <li>• Risk policy and forms under revision in line with forthcoming guidance from National Patient Safety Agency. Training to follow launch of revised policy and forms for all staff.</li> </ul>	Certain staff groups under / over reporting	<p>East Hants and Fareham &amp; Gosport PCTs Head of Quality, East Hants PCT and Operations Director, Fareham &amp; Gosport PCT</p> <p>Medical Director Operations Director, Fareham &amp; Gosport PCT and Head of Quality, East Hants PCT Head of Quality, East Hants PCT</p> <p>Operations Director, Fareham &amp; Gosport PCT</p>	Increased compliance of all staff in reporting risks	<p>Governance sub committee in Fareham &amp; Gosport PCT</p> <ul style="list-style-type: none"> <li>▪ Production of Quality Development Plan for Fareham &amp; Gosport PCT</li> <li>▪ Audit reports submitted to PCT Clinical Governance sub committees</li> <li>▪ Monitor risk management training through PCT Clinical Governance and risk management sub committee reports</li> <li>▪ Dissemination plan for re-launch of risk incident forms in Fareham &amp; Gosport PCT produced by February 2003</li> </ul>
Rec: 21	To ensure systems are in place to identify and	<ul style="list-style-type: none"> <li>• Further develop the current quarterly quality reporting mechanism in East Hants PCT to make</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing activity</li> </ul>		Head of Quality, East Hants PCT and Operations Director, Fareham	Improved patient care and safety through effective risk reduction/	<ul style="list-style-type: none"> <li>▪ Quarterly quality reporting mechanisms in place in</li> </ul>

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Constraints &/or impact of not taking the action	Accountability	Intended outcome	Monitoring
Rec: 22	<p>monitor trends revealed by risk reports and action is taken</p> <p>To ensure 'Whistle Blowing' policies across Fareham &amp; Gosport and East Hants PCTs enable staff to raise concerns outside normal management channels</p>	<p>explicit action taken and lessons learned – from October 2002</p> <ul style="list-style-type: none"> <li>• Agree process for cross organisational reporting and sharing lessons/ learning lessons – by March 2003</li> <li>• Review quarterly quality reporting mechanism in Fareham &amp; Gosport PCT - by March 2003</li> <li>• Develop an audit trail to identify any gaps in the current system – by June 2003</li> <li>• Implement recommendations as a result of audit - by September 2003</li> <li>• Work with Joint representative committee to review policy</li> <li>• Redefine "whistleblowing" to gain greater acceptance amongst staff.</li> <li>• Revise and approve - by June 2003</li> <li>• Establish a programme for investigation officer training</li> </ul>	<ul style="list-style-type: none"> <li>• Underway</li> <li>• Quarterly report and progress against action plan to go to PCT Board</li> <li>• On target for completion</li> <li>• On target for completion</li> <li>• Joint PCT Consultative Forum established to take forward action.</li> <li>• On target for completion</li> <li>• East Hampshire PCT taking lead for developing a training programme.</li> </ul>		<p>&amp; Gosport PCT</p> <p>Heads of Human Resources, Fareham &amp; Gosport and East Hants PCTs in conjunction with Non Executive Director lead</p>	<p>management</p> <p>Integrated systems for risk management across services for older people</p> <p>New Policy launched that provides an alternative route for staff to report serious concerns about practice</p> <p>All staff aware</p>	<p>Fareham &amp; Gosport and East Hants PCTs established by April 2003</p> <ul style="list-style-type: none"> <li>▪ Audit trail in place to identify gaps in current system by September 2003</li> <li>▪ Seek views of staff regarding implementation of revised policy through Staff Opinion Survey in East Hants and Fareham &amp; Gosport PCTs</li> <li>▪ Training programme developed by June 2003</li> </ul>