

**CHI ACTION PLAN - PROGRESS REPORT AS AT END OF MAY 2003
(including feedback from Implementation Group meeting on 23 May 2003)**

| Action point | Objective | Action required & timescales | Accountability | Status | Progress report as at 23/5/03 | Documentary evidence of action(s) completed |
|--------------|---|---|---|---------------------------------------|--|--|
| 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"> • Appointment of Operational Director for Secondary Care - in post • 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 • Establish a system for monitoring and performance managing Service Level Agreement arrangements – January 2003 • Set up and run regular dedicated clinical/management meetings that involve the associate lead consultant – from December 2002 | <p>Tony Horne</p> <p>Fiona Cameron/Neil Stubbs</p> <p>Fiona Cameron/Neil Stubbs</p> <p>Ian Reid</p> | <p>44</p> <p>4</p> <p>4</p> <p>44</p> | <p>Neil Stubbs has final draft of SLA. Fiona Cameron agreed to chase progress</p> <p>Monitoring process will be included in SLA</p> | <p>Job description</p> <p>Final copy of SLA</p> <p>Terms of Reference and notes of meeting</p> |
| Rec: 2 | To review the policy for admitting patients to Sultan Ward at Gosport War Memorial Hospital | <ul style="list-style-type: none"> ▪ Establish a meeting to review and revise, as necessary the criteria for admitting patients to Sultan ward – completed September 2002 ▪ Establish a Gosport War Memorial Hospital Medical Committee to review criteria for GP admissions to Sultan Ward - Jan 2003 ▪ Establish a process to ensure that ongoing review of the admissions | <p>Fiona Cameron/Ian Reid</p> <p>Fiona Cameron/Ian Reid</p> <p>Fiona Cameron/Ian Reid</p> | <p>44</p> <p>44</p> <p>44</p> | <p>Fiona Cameron has a standing invitation to attend GP Committee meetings</p> <p>Review process will be undertaken as part of current monthly meetings held</p> | <p>Notes of Out of Hours meeting July 2002</p> <p>Notes of GP Group meeting March and May 2003-07-24</p> <p>Guidelines for admission to GP beds Sultan Ward and admission to Dryad</p> |

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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. | <p>review of the admissions policy is undertaken as part of routine review, and in particular in response to service changes</p> <ul style="list-style-type: none"> 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 | Ian Reid/ Hazel Bagshaw/Jeff Watling | 4 4 | First meeting 13 th May 2003. Policy agreed for drug therapy guidelines and associated procedures. Route for guideline approval agreed. A part time Drug Therapy Guideline Pharmacist being advertised by Portsmouth Hospitals Trust. | Terms of Reference May 2003 Notes of May 2003 meeting |
| | | <ul style="list-style-type: none"> Carry out a review and revision of guidelines in 6 key areas - by March 2003 | Ian Reid/ Hazel Bagshaw/Jeff Watling | 4 | Medicines Management Group agreed to review/revise guidelines in 4 key areas. Jeff Watling to produce a paper on the process, to include mechanisms for involving patients/carers | Copies of revised Guidelines |
| | | <ul style="list-style-type: none"> Audit prescribing against initial 6 revised guidelines and assess appropriateness in relation to patient dependency levels – by December 2003 | Ian Reid/ Hazel Bagshaw/Jeff Watling | X | Audit will fall out of guideline reviews | Audit reports |
| | | <ul style="list-style-type: none"> 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 | Hazel Bagshaw | X | Hazel Bagshaw to co-ordinate launch of revised guidelines across PCT and liaise with colleagues in the other 2 two PCTs. | Guideline dissemination plan |

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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"> 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 | Ian Piper/Fiona Cameron | 4 | F&G PCT has advertised for a clinical pharmacist. Closing date for post is 24/5/02. Interview date 17 June. Supply part of current SLA will not change. | Business Case and letter March 2003 CHI Implementation notes 24/1/03 and 21/3/03 Job description |
| | | <ul style="list-style-type: none"> Integrate additional investment /pharmacy activity into Service Level Agreement - by January/February 2003 | Hazel Bagshaw/Fiona Cameron | 4 | Revised SLA to take account of additional investment in clinical pharmacist appointment by Fareham & Gosport PCT | Revised SLA |
| | | <ul style="list-style-type: none"> Establish central point of reference for Pharmacy Staff working in satellite sites - in place | Hazel Bagshaw/Fiona Cameron/ | 44 | Dependent on appointment | Protocol/plan for central point of reference |
| | | <ul style="list-style-type: none"> Establish Pharmacy involvement in ward rounds undertaken on Dryad, Daedalus and Sultan wards - by March 2003 | Hazel Bagshaw /Fiona Cameron | XX | | Work programme |
| Rec: 5 | To review and monitor prescribing of all medicines on wards caring for older people at Gosport War Memorial | <ul style="list-style-type: none"> Carry out a retrospective audit of diamorphine prescribing on Sultan ward to ensure that current guidelines are implemented – by December 2002 | Ian Reid/Hazel Bagshaw | 44 | | Audit report March 2003 Copy of action plan to address recommendations |
| | | <ul style="list-style-type: none"> Establish a system for routine monitoring and auditing of narcotic | Ian Reid/Hazel Bagshaw | | An audit is currently being undertaken. Now widened to include Elderly Mental Health and drugs with potential | Audit protocol/plan and report on baseline audit |

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| Rec: 6 | Hospital, including diamorphine prescribing on Sultan ward. | analgesic prescribing on wards, including a baseline audit of all controlled drug prescribing on wards at Gosport War Memorial Hospital - by March 2003 | | 4 | for misuse, across whole health economy. PCT audit of prescribing of analgesics Dec 02 – Feb 03 underway. A critical path analysis reflecting the appropriate action to be taken in response to a prescribing problem has been developed. This needs to be finalised, tested, revised and disseminated. Portsmouth Hospitals have established a process for monthly audit and will supply PCT with monthly data. | Critical Pathway and dissemination plan |
| | | <ul style="list-style-type: none"> Carry out monthly analysis of this data and investigate sudden changes – by April 2003 Ensure dissemination of prescribing data to medical staff to support rigorous routine review - by May 2003 | Ian Reid/Hazel Bagshaw | | | Monthly data analysis report |
| | | | Ian Reid/Hazel Bagshaw | 4 | Clinical pharmacist will pick up this role on appointment. Ian Reid and Hazel Bagshaw will pick up any prescribing anomalies identified through audit data with medical staff during the interim period. | Outline dissemination plan eg staff meetings, notes of meetings, internal circulation lists |
| | | | Ian Reid/Hazel Bagshaw | 4 | Refer to recommendation 3 | Dissemination and training plan |
| | To ensure that all-relevant staff, including GPs, in Fareham & Gosport and East Hampshire and PCTs are trained in prescription, administration, review | <ul style="list-style-type: none"> 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 Ensure the integration of prescribing training requirements into PCT training delivery | Ian Reid/Hazel Bagshaw/Fiona Cameron | 4 | Training issues will be determined from audit results | PCT training plan developed from audit findings |

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| Rec 7 | and recording of medicines for older people. | programmes – by April 2003 | Fiona Cameron | 4 | Audit underway on a sample of patients (prescribed analgesic during Dec 02 – Feb 03). Results to be presented to Clinical Governance Committee | Audit report and recommendations |
| | | <ul style="list-style-type: none"> Carry out an audit of the quality and legibility of prescribing notes to facilitate discussions between medical staff/GPs - audit by April 2003 | | 4 | | Sample PCT Newsletter (to identify approach to inclusion of complaints) |
| | To ensure that lessons from patient complaints and comments are disseminated amongst all staff caring for older people in Fareham & Gosport and East Hampshire PCTs | <ul style="list-style-type: none"> Action and learning points from complaints to be included in PCT Quality Newsletter SEQUAL in East Hants PCT - from Oct 2002 All complaints and lessons learned to be fed through Service Clinical Governance Groups in East Hants PCT - in place Review Complaints Policy in Fareham & Gosport PCT - by Dec 2002, and provide training to support implementation of new policy - by March 2003 Representatives from Service Clinical Governance Groups to continue to share lessons at team meetings - ongoing Action plans generated from each complaint in Fareham & Gosport PCT | Sue DK | 44 | Initial training undertaken at GWMH and inclusion as a fixed item as part of PCT staff induction programme | Notes of Clinical Governance Group meetings to demonstrate process of sharing lessons |
| | | | Sue DK | 44 | | Copy of revised Fareham & Gosport PCT Complaints Policy and staff induction programme |
| | | | Fiona Cameron | 44 | | Notes of pan PCT Clinical Governance Network meeting May 2003 Notes of Clinical Managers meeting March 2003 in Fareham & Gosport |
| | | | Sue DK/Fiona Cameron | 44 | | Quarterly Service Review report |
| | | | Fiona Cameron | 44 | Action plan to respond to complaints now incorporated as part of Service | |

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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. | to be monitored through Quarterly Service Review process until action completed by Service Managers – by October 2002 | Fiona Cameron | 44 | Review process | Training programme proposal Schedule of training Meeting notes May 2003 Copy of induction programme | |
| | | <ul style="list-style-type: none"> ▪ Engage Speech and Language Therapy in providing additional training programmes - to commence early October 2002 ▪ Initiate an audit to assess the impact of training and to identify unmet need - by March 2003. ▪ Implement agreed action plan arising from audit findings - by October 2003 | | 44 | | | Audit report |
| | | | | 44 | | | Copy of action plan |
| Rec: 9 | To review and clarify the role of the Activities Co-ordinator at Gosport War Memorial Hospital | <ul style="list-style-type: none"> ▪ Widen the membership of the Activities Co-ordinator Working Group to include patient / relative, medical and pharmaceutical staff representation - by December 2002 ▪ Review the need for the Activities Co-ordinator role | Fiona Cameron | 44 | Funding agreed to appoint Activities Co-ordinator post | Copy of proposal and job description | |
| | | | Fiona Cameron | 44 | Re-launch undertaken. Action plan in progress | | |

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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 | <p>to be used in specific ward areas and recommend a way forward - by April 2003</p> <ul style="list-style-type: none"> ▪ Re-launch 'Essence of Care' a standard with nursing and other profession leads - by November 2002. ▪ Undertake an audit and analysis of compliance against national standards and identify a plan of action to implement standards - by March 2003. ▪ Identify a lead/link nurse for each care standard area - by March 2003 | <p>Fiona Cameron</p> <p>Fiona Cameron</p> <p>Fiona Cameron</p> | <p>44</p> <p>44</p> <p>44</p> | <p>Link nurses identified & further workshop sessions booked to support ongoing development. Nurse Development Report will capture an action plan</p> | <p>Notes of Pan PCT Clinical reference Group for Community Hospitals April 2003 Dates of re-launch programme/participant list</p> <p>Audit Report/Action Plan</p> <p>List of link nurses and copy of Nurse Development Report and action plan</p> |
| Rec: 11 | To ensure that communications developments with staff working in community hospitals are continued in both Fareham & Gosport and | <ul style="list-style-type: none"> ▪ Feedback CHI action plan and progress reports through regular meetings with staff – ongoing • Implement PCT Communications Plan in East Hants PCT – from September 2002 ▪ Finalise internal communications improvements in each PCT – by December 2002. | <p>Fiona Cameron / Sue DK</p> <p>Sue DK</p> <p>Sue DK/Fiona Cameron</p> | <p>44</p> <p>44</p> <p>44</p> | | <p>Copies of Newsletters, monthly briefings</p> <p>Copy of Communications Plan and monitoring arrangements</p> <p>Copy of communication strategy/plan Copy of CHI cascade Action Plan for Fareham & Gosport PCT</p> |

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| Rec: 12 | East Hampshire PCTs To determine the best way to improve communication with older patients and their relatives /carers | <ul style="list-style-type: none"> Produce draft outline Patient and Public Involvement Strategy, incorporating staff communications in Fareham & Gosport PCT by January 2003 | Noreen Kickham / Kathryn Rowles | 44 | Consultation arrangements being progressed through the development of PALS in Gosport War Memorial and St Christopher's Hospitals. HealthFit initiative focusing on older people's services will capture service users perspectives in phase 3 and 4. Information ready for distribution | Copy of Patient and Public Involvement Framework and Action Plan 2003/4 |
| | | <ul style="list-style-type: none"> Review Nurses Directory in Fareham & Gosport PCT – by March 2003. | Fiona Cameron | 44 | | Copy of revised Nurse Directory |
| | | <ul style="list-style-type: none"> Fareham and Gosport PCT to develop a process for consulting with key local organisations/user groups in relation to older people - by March 2003 | Noreen Kickham / Kathryn Rowles | 44 | | PALs activity report and HealthFit feedback report |
| | | <ul style="list-style-type: none"> 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. | Fiona Cameron | 4 | | Copies of revised information packs |
| | | <ul style="list-style-type: none"> Follow-up of actions arising from the communication audit undertaken by the | Fiona Cameron | 44 | Report to May PCT Trust Board - Action Plan to June Board | Copy of CHC report and PCT action plan |

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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"> ▪ Review the “Living with Bereavement” booklet – by March 2003 ▪ Review and renew the 'Out of Hours' contractual agreement for medical cover on consultant led Dryad and Daedalus wards – by December 2002 ▪ Review the admissions criteria for GP led Sultan ward - by September 2002 ▪ Develop/implement alternative models of 'Out of Hours' Service Delivery - by January 2002 | <p>Fiona Cameron</p> <p>Fiona Cameron</p> <p>Fiona Cameron</p> <p>Fiona Cameron</p> | <p>44</p> <p>4</p> <p>44</p> | <p>Booklet re-named 'Because we care"- currently at printers</p> <p>Two out of hours providers in place</p> | <p>Copy of 'Because we Care' booklet</p> <p>Copy of Out of Hours medical cover contract</p> <p>Copy of Admission Criteria policy (Refer recommendation 2)</p> <p>Copy of Out of Hours Agreement</p> |
| Rec: 14 | To ensure appropriate patients are admitted to Gosport War Memorial Hospital and receive appropriate levels of support. | <ul style="list-style-type: none"> • Review the admissions policy for Sultan - by September 2002 and for Dryad and Daedalus wards – by December 2002 • Undertake audit of patients admitted to Daedalus, Dryad and Sultan Wards to determine the appropriateness of admission against new admissions policy Sultan | <p>Fiona Cameron / Ian Reid</p> <p>Fiona Cameron / Ian Reid</p> | <p>44</p> <p>44</p> <p>44</p> | <p>All 3 policies reviewed</p> <p>Preparatory work underway - audit design being finalised</p> | <p>Copies of revised admissions guidelines (Refer recommendation 2)</p> <p>Audit report and action plan</p> |

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| Rec: 15 | To establish arrangements in Fareham & Gosport PCT to ensure strong, long-term nursing leadership on all wards at Gosport War Memorial Hospital | Ward 2002, Daedalus & Dryad – by June 2003 | Fiona Cameron | 4 | | Copy of Practice Development Facilitator job description |
| | | <ul style="list-style-type: none"> Establish a 6 month secondment Practice Development post facilitate leadership developments in Gosport War Memorial Hospital – by September 2002 | Fiona Cameron | 44 | | Terms of reference for Clinical reference Group for nurses working in Community Hospitals in East Hampshire and Fareham & Gosport |
| | | <ul style="list-style-type: none"> Establish nursing reference groups that will identify and implement clinical support processes in conjunction with Practice Development postholder - by December 2002 | Fiona Cameron | 44 | In progress | Copy of PCT Nursing Strategy |
| | | <ul style="list-style-type: none"> Develop PCT Nursing Strategy - by September 2003 | Fiona Cameron | 44 | Implementation group undertaking development work | Terms of reference of Implementation Group |
| | | <ul style="list-style-type: none"> Establish an implementation group to support delivery of PCT nursing strategy – by December 2002. | Fiona Cameron | 4 | | Copy of Report |
| Rec: 16 | Develop local policy guidance in relation to GPs who | <ul style="list-style-type: none"> Evaluate the Gerontological Nursing Programme - by November 2002 | Fiona Cameron | 4 | | |
| | | <ul style="list-style-type: none"> Develop guidance for using GPs as Clinical Assistants to inform personnel policy and employment practice - by | Jane Parvin/Ian Reid | 44 | Draft policy document in circulation. Needs to be ratified through Medical Advisory Committee and LMC before adoption by the PCTs Professional Executive Committee | Copy of policy |

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| Rec: 17 | work as Clinical Assistants in Community Hospitals in Fareham and Gosport PCT. To ensure arrangements are in place for continued learning and monitoring of action arising from complaints across Fareham & Gosport and East Hants PCTs | March 2003 <ul style="list-style-type: none"> Utilise Service Review process and bi-annual hosted services review arrangements to oversee monitoring of trends and action taken in relation to complaints Complaints trends and actions shared through Clinical Governance Committees and Quarterly Quality report – in place in East Hants PCT Set up PCT Complaints Panel in East Hants PCT –by Oct 2002 Review Complaints Policy and develop complaints action plan in Fareham & Gosport PCT - by March 2003 Develop mechanism for sharing lessons learnt from complaints across both organisations, which are timely and effective – by March 2003 | Ian Piper / Tony Horne | 44 | | Service Reviews for Q3 and Q4 2002. Copy of Quarterly Report Terms of reference of Panel Copy of revised policy (Refer recommendation 7) Copy of notes of meeting April 2003 |
| | | | Fiona Cameron / Sue DK | 4 | | |
| | | | Sue DK | 44 | | |
| | | | Fiona Cameron | 44 | | |
| | | | Sue DK / Fiona Cameron | 44 | Joint mechanism established to share quarterly reports for risk/complaints across the two PCTs | |

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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 | <ul style="list-style-type: none"> Develop comprehensive complaints and customer care training programme for staff that links to the PALS and induction training programmes – by March 2003 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 | Sue DK / Fiona Cameron | 44 | Training programme being developed | Copy of training programme |
| | | | Ian Reid/Andrew Patterson | 44 | All substantive medical staff receive appraisal. GPs who also hold Clinical Assistant posts will be appraised as part of GP appraisal process | Template for continuous personal development appraisal process of medical staff and timetable for rolling out GP appraisal. |
| | | | | 4 | | |
| 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"> Implement Quality Strategy and annual action plans in East Hants PCT – ongoing Produce a Clinical Governance Framework/Action Plan for Fareham and Gosport PCT – by January 2003 Produce a Quality Development Plan for Fareham and Gosport PCT – by September 2003 Ensure clear PCT structures and accountabilities for | Sue DK | 4 | | Copy of strategy and annual action plan |
| | | | Fiona Cameron | | | Copy of Clinical Governance Framework and annual development action plan 2003/4 |
| | | | Fiona Cameron | | | Copy of Quality Development Plan |
| | | | Ian Piper / Tony Horne | 44 | | Copy of Clinical Governance structure/accountability framework Copy of CASU/governance |

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| Rec: 20 | To ensure all staff are aware of the requirement to complete risk and incident reports | Clinical Governance - in place | Sue DK / Fiona Cameron | 44 | East Hants PCT has reviewed risk/clinical governance processes. Fareham & Gosport PCT have yet to audit processes | assessment |
| | | <ul style="list-style-type: none"> Audit current reporting mechanisms to test robustness – by March 2003 | | X | | Copy of audit/action plan |
| | | <ul style="list-style-type: none"> All staff, including medical staff, are trained in the completion of risk management forms and basic risk management & awareness – ongoing | Ian Reid/ Fiona Cameron / Sue DK | 44 | Initial training undertaken and now included in staff induction programme | Copy of training programme, including staff induction |
| | | <ul style="list-style-type: none"> Risk management training for junior doctors and new medical staff on induction - from January 2003 | Ian Reid/ Fiona Cameron / Sue DK | 4 | Incorporated as part of junior doctors/new medical staff induction programme | Copy of induction programme for new medical staff |
| Rec: 21 | To ensure systems are in place to identify and monitor trends revealed by risk reports and action is taken | <ul style="list-style-type: none"> Re-launch risk incident forms in Fareham & Gosport PCT - by March 2003 | Fiona Cameron | 44 | Risk incident forms to be re-launched in GWM Hospital. A revised risk scoring system has been developed and new risk incident forms currently at printers | Copy of revised risk incident forms and documentation of re-launch programme |
| | | <ul style="list-style-type: none"> Further develop the current quarterly quality reporting mechanism in East Hants PCT to make explicit action taken and lessons learned – from October 2002 | Fiona Cameron / Sue DK | 44 | Mechanism to share quality and risk data established | Refer to recommendation 17 |
| | | <ul style="list-style-type: none"> Agree process for cross organisational reporting and sharing lessons/ learning lessons – by March 2003 | Fiona Cameron / Sue DK | 4 | | Documentation of the process agreed |
| | | <ul style="list-style-type: none"> Review quarterly quality | Fiona Cameron | | | Copy of review report |

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| Rec: 22 | To ensure 'Whistle Blowing' policies across Fareham & Gosport and East Hants PCTs enable staff to raise concerns outside normal management channels | reporting mechanism in Fareham & Gosport PCT - by March 2003 | | 44 | | | |
| | | <ul style="list-style-type: none"> Develop an audit trail to identify any gaps in the current system – by June 2003 | Sue DK / Fiona Cameron | | | Copy of audit process and programme | |
| | | <ul style="list-style-type: none"> Implement recommendations as a result of audit - by September 2003 | Sue DK / Fiona Cameron | 44 | | Copy of action plan | |
| | | <ul style="list-style-type: none"> Work with Joint representative committee to review policy | Jane Parvin | 44 | | Pan PCT workshop to be held on 16 June, including staff side representation, to revise and amend existing policy. Revised policy to be ratified by Personnel Panel. | Copy of revised policy |
| | | <ul style="list-style-type: none"> Redefine "whistleblowing" to gain greater acceptance amongst staff. | Jane Parvin | 44 | | | |
| | | <ul style="list-style-type: none"> Revise and approve - by June 2003 | Jane Parvin | 44 | | Ongoing training programme to commence from July 2003 onwards | Copy of training programme |
| <ul style="list-style-type: none"> Establish a programme for investigation officer training | Jane Parvin | X | | | | | |
| | | | | 4 | | | |
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