

## MEDICAL CLINICAL GOVERNANCE

Exec  
Summary  
Number

- ✓✓✓ 1 Fareham & Gosport PCT and East Hampshire PCT should work together to build on the many positive aspects of leadership developed by Portsmouth HealthCare NHS Trust in order to develop the provision of care for older people at the Gosport War Memorial Hospital. The PCTs should ensure an appropriate performance monitoring tool is in place to ensure that any quality of care and performance shortfalls are identified and addressed swiftly.
- ✓ 2 The Fareham & Gosport PCT and East Hants PCT should, in consultation with local GPs, review the admission criteria for Sultan ward.
- ✓ 3 The East Hants PCT and Fareham & Gosport PCT should review all local prescribing guidelines to ensure their appropriateness for the current levels of dependency of the patients on the wards.
- ? 11 Both PCTs must find ways to continue the staff communication developments made by the Portsmouth HealthCare NHS Trust.
- ✓ 13 The provision of out of hours medical cover to Daedalus, Dryad and Sultan wards should be reviewed. The deputising service and PCTs must work towards an out of hours contract which sets out a shared philosophy of care, waiting time standards, and adequate payment and a disciplinary framework.
- ✓ 14 The Fareham and Gosport PCT and the East Hampshire PCT should ensure that appropriate patients are being admitted to the Gosport War Memorial Hospital with appropriate levels of support.

- ✓ 16 The Fareham and Gosport PCT should develop local guidance for GPs working as clinical assistants. This should address supervision and appraisal arrangements, clinical governance responsibilities and training needs.
- ? ✓ 19 The Fareham and Gosport PCT and East Hampshire PCT must fully embrace the clinical governance developments made and direction set by the Trust.
- ✓ 20 All staff must be aware that the completion of risk and incident reports is a requirement for all staff. Training must be put in place to reinforce the need for rigorous risk management.
- ✓ 21 Clinical governance systems must be in place to regularly identify and monitor trends revealed by risk reports and to ensure that appropriate action is taken.
- ✓ 22 The Fareham and Gosport PCT and East Hampshire PCT should consider a revision of their whistle blowing policies to make it clear that concerns may be raised outside of normal management channels.

**Source: CHI Report – Investigation into Gosport War Memorial Hospital July 2002**

## NURSING CLINICAL GOVERNANCE

Exec  
Summary  
Number

- |   |    |   |
|---|----|---|
| ✓ | 1  | Fareham & Gosport PCT and East Hampshire PCT should work together to build on the many positive aspects of leadership developed by Portsmouth HealthCare NHS Trust in order to develop the provision of care for older people at the Gosport War Memorial Hospital. The PCTs should ensure an appropriate performance monitoring tool is in place to ensure that any quality of care and performance shortfalls are identified and addressed swiftly. |
| ✓ | 8  | Fareham and Gosport PCT should lead an initiative to ensure that relevant staff are appropriately trained to undertake swallowing assessments to ensure that there are no delays out of hours.  |
| ✓ | 9  | Daytime activities for patients should be increased. The role of the activities coordinator should be revised and clarified, with input from patients, relatives and all therapists in order that activities complement therapy goals.  |
| ✓ | 10 | The Fareham and Gosport PCT must ensure that all local continence management, nutrition and hydration practices are in line with the national standards set out in the <i>Essence of Care</i> guidelines.   |
| ? | 11 | Both PCTs must find ways to continue the staff communication developments made by the Portsmouth HealthCare NHS Trust.  |
| ✓ | 15 | The Fareham and Gosport PCT should ensure that arrangements are in place to ensure strong, long term nursing leadership on all wards.   |
| ? | 22 | The Fareham and Gosport PCT and East Hampshire PCT should consider a revision of their whistle blowing policies to make it clear that concerns may be raised outside of normal management channels.   |

## PHARMACY

Exec  
Summary  
Number

- 1 Fareham & Gosport PCT and East Hampshire PCT should work together to build on the many positive aspects of leadership developed by Portsmouth HealthCare NHS Trust in order to develop the provision of care for older people at the Gosport War Memorial Hospital. The PCTs should ensure an appropriate performance monitoring tool is in place to ensure that any quality of care and performance shortfalls are identified and addressed swiftly.
- ✓ 3 The East Hants PCT and Fareham & Gosport PCT should review all local prescribing guidelines to ensure their appropriateness for the current levels of dependency of the patients on the wards.
- ✓ 4 The Fareham & Gosport PCT should review the provision of pharmacy services to Dryad, Daedalus and Sultan wards, taking into account the change in casemix and use of these wards in recent years. Consideration should be given to including pharmacy input into regular ward rounds.
- ✓ 5 As a priority, the Fareham and Gosport PCT must ensure that a system is in place to routinely review and monitor prescribing of all medicines on wards caring for older people. This should include a review of recent diamorphine prescribing on Sultan ward. Consideration must be given to the adequacy of IT support available to facilitate this.
- ✓ 6 The Fareham and Gosport PCT and East Hampshire PCT, in conjunction with the pharmacy department, must ensure that all relevant staff including GPs are trained in the prescription, administration, review and recording of medicines for older people.

Source: CHI Report – Investigation into Gosport War Memorial Hospital July 2002

## PATIENT AND RELATIVE QUALITY ISSUES

Exec  
Summary  
Number

1

Fareham & Gosport PCT and East Hampshire PCT should work together to build on the many positive aspects of leadership developed by Portsmouth HealthCare NHS Trust in order to develop the provision of care for older people at the Gosport War Memorial Hospital. The PCTs should ensure an appropriate performance monitoring tool is in place to ensure that any quality of care and performance shortfalls are identified and addressed swiftly.

7

All patient complaints and comments, both informal and formal, should be used at ward level to improve patient care. The Fareham and Gosport PCT and East Hampshire PCT must ensure a mechanism is in place to ensure that shared learning is disseminated amongst all staff caring for older people.

11

Both PCTs must find ways to continue the staff communication developments made by the Portsmouth HealthCare NHS Trust.

12

Within the framework of the new PALS, the Fareham and Gosport PCT should, as a priority, consult with user groups and consider reviewing specialist advice from national support and patient groups, to determine the best way to improve communication with older patients and their relatives and carers.

17

Fareham and Gosport PCT and East Hampshire PCT should ensure that the learning and monitoring of action arising from complaints undertaken through Portsmouth HealthCare NHS Trust quarterly divisional performance management system is maintained under the new PCT management arrangements.

18

Both PCTs involved in the provision of care for older people should ensure that all staff working on Dryad, Daedalus and Sultan wards who have not attended customer care and complaints training events do so. Any new training programmes should be developed with patients, relatives and staff to ensure that current concerns and the particular needs of the bereaved are addressed.

## **CHI ACTION PLANNING DAY BRIEFING PAPER**

### ***Overall Aim & Objectives***

The CHI report, based on its investigation into a series of Clinical Governance issues at the Gosport War Memorial Hospital, makes twenty two recommendations.

A brief summary of CHI's main action points, categorised under four major interconnected themes, is attached.

The primary aim of the action planning day is to address the themes and the specific issues noted within each. We will determine what action is needed, how it will be taken forward by the Trusts and how progress will be monitored. Specific objectives are to:

- Review the main recommendations of the CHI investigation
- Determine what is critical to successful action planning
- Identify key issues to be addressed and consider what action is already underway in relation to each of the themes
- Assess further development needs and options for change in these areas
- Agree preferred approaches
- Decide upon action and performance indicators

The actions and performance indicators identified on the day will constitute the detailed action plan to be published by Fareham and Gosport PCT in September 2002.

The style of the event will be informal and because of the number of participants much of the work will be undertaken in small working groups. Regular plenary sessions to share ideas and take decisions will be scheduled. To help us with the process of the day we have engaged Alison Farrell to act as a facilitator. Alison is an independent management consultant specialising in supporting change and development in health service organisations.

## PROCESS NOTES

**Arrival:** Coffee will be available on arrival to allow time to badge people and to effect some key introductions before we start.

### ***Introductions:***

It is probably appropriate that Ian introduces the event with some key messages such as:

- He welcomes the CHI report which is both comprehensive and extremely valuable to the two Trusts in determining what further action needs to be taken.
- His personal concern, and that of the Trusts, is to ensure that in the future, governance arrangements are comprehensive and robust. All staff must be properly supported and developed to understand and carry out their responsibilities in providing high quality, safe care and the events leading to the CHI investigation must never be repeated.
- His other concern is to rebuild the confidence of the patients and the public in the GWMH through putting in place a credible and realistic action plan which is made known to the local population and one where the future performance of the Trust can be properly monitored.
- The purpose of the day is to develop the action plan and he welcomes the participation of this diverse and important group of people.
- Participants will have an opportunity to introduce themselves in small groups and during refreshments.
- To remind people of the recommendations of the report he/Julie Miller will run through them and then hand over to Alison Farrell to explain how we are going to work on the day to take them forward.

### ***Reviewing the CHI Recommendations***

Ian Piper/Julie Miller will run through the main outcomes and take questions.

### ***Critical Success Factors***

Alison will introduce the process of the day and the four themes which are:

- ❖ Patient and Relative Quality Issues
- ❖ Medical Clinical Governance
- ❖ Nursing Clinical Governance
- ❖ Pharmacy

Alison will record participants' thoughts on what will make the action planning successful. These may include:

- Action should not undermine the good work that is underway, it should build on strategies and plans already in place
- It should focus not just on what we need to do but also on how we need to do it
- Mechanisms should be in place to enable us to know how well we are doing
- Actions should be communicated well

This session should ensure that everyone realises that they are not starting from a blank sheet of paper in terms of action planning and it is therefore important to be aware of what is underway and to build on this.

### ***Issues, Diagnosis and Development***

This session and the session after lunch will provide the main opportunity for action planning. Groups will be given a brief with the themed recommendations, the specific actions noted by CHI and the work in progress. In the morning session they will be asked to:

1. Brainstorm the issues to be tackled through thinking about what success would look like e.g. if we have successful communication between staff and patients/carers what would be in place and how would we know that?
2. Then they will decide upon any development gaps – i.e. what do we still need to do that hasn't been set in train.

Each group will have a facilitator to keep people focussed and to time. The facilitator will also act as scribe and a presenter for the group (unless the group decides otherwise). Each group will also have participants with more detailed knowledge which can be drawn upon in relation to what actions the Trust is already taking.

### ***Options, Action Planning and Performance Indicators***

In the afternoon session groups will:

1. Consider options for change focussing on the identified development needs
2. Propose what actions need to be taken to move their preferred options forward and also performance indicators.

A suggested group brief follows these process notes.

### ***Plenary feedback sessions***

Each group will feed back its outcomes, proposed action and performance indicators which will form the basis of the more detailed action plan.

### ***Final Summary***

Reinforce the requirement to produce a detailed action plan which includes as many of the stakeholders as possible.



# LOGISTICS

## *Groups*

Assuming an attendance of at least 40 people we will have four groups of 10+ people.

## *Group ‘experts’*

There will be an ‘expert’ in each group who has more detailed knowledge on the theme to be addressed by that group and up to date knowledge on where the Trust is with action already underway.

## *The room*

The room will be laid out using five round tables, each seating a maximum of ten participants. Each table will have a flip chart with paper and pens, and there will be pens and paper on each table. Jugs of water and glasses will also be on each table.

A register of expected participants will be signed by each delegate as they enter the room, whereupon they will be given their badge. This register is split into the proposed table plan, therefore upon signing for their badge, each delegate will be able to see which group they will be joining.

## *Other equipment*

Paper and pens will be available on each table

Flip chart, paper and pens available for each group

## **GROUP BRIEF**

### **Morning Session**

*How should we ensure that the following issues are taken forward by the Trusts?*

**PLEASE SEE THE CHI RECOMMENDATIONS TO BE ADDRESSED BY YOUR GROUP.**

Your group has been asked to address 3 subsidiary questions:

- Brainstorming your ideas – what would success look like in this area and what would you want to see in place to ensure success?
- To what extent do current plans and action move the Trusts toward your view of success and meet the specific concerns noted by CHI?
- Where are the gaps in current plans and what still needs to be tackled?

Your group should record the main outcomes of your discussions and your proposals on the flipchart for a short presentation to the whole group.