

RECOMMENDATION 1 & 2	GROUP 1	11
The PCT needs to continue developing systems and	Martin Robinson	
processes to ensure patients receive good quality care. It	Fiona Cameron	
needs to ensure these systems are integrated	Jo York	
across all primary and community healthcare	Chris Kelly	
services including those provided by GPs, dentists,	Code A	
optometrists and pharmacists.	Faye Prestleton	Code A
RECOMMENDATION 2	Martin Combs	
The Professional Executive Committee, the committee	Ann Turner	
that involves clinicians in strategic decision making,	Caroline Harrington	
needs to get better involved in making sure systems and processes exist to ensure patients receive good quality care.	Ann Dalby	
	David Penfold	
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RECOMMENDATION 3	GROUP 2	11
Action needs to be taken to develop a coordinated	Sarah Atherton	
approach to carrying out audits of clinical work.	Diane Wilson	
Clinical audit systems and processes need to be linked	Anne Stewart	
to other clinical governance systems and processes, such	Code A	
as those for risk management and staff management.	Sue Galley	
	Beverly Carter	Code A
	Justina Jeffs	
	Code A	
	Code A	
	Yvonne Astridge	
	Dr Kanagaratnum	
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RECOMMENDATION 4	GROUP 3	9
Information systems and the use of information need to be	Jane Parvin	
improved to help clinicians develop services and give	Alan Pickering	
good quality patient care.	David Miles	
	Code A	
	Peter Grimwood	Code A
	Liz Jenkins	
	Code A	
	Code A	
	Code A	
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RECOMMENDATION 5	GROUP 4	11
The PCT needs to continue to develop and incorporate	Rachael Boynes	
quality indicators into its service level agreements with	Tom Smith	-
acute trusts so that it can monitor the quality of	Gail Byrne & FOR BARGARA HAMILE	<b>č</b>
provides to patients living in	Code A	
the PCT's area.	Inger Hebden	
	Code A	Code A
	Code A	
	Code A	
	Code A	
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RECOMMENDATION 6	GROUP 5	9
The PCT needs to continue to develop its medicine	Kathryn Rowles	
management strategy and prescribing monitoring	Lucy Docherty	
framework	Code A	
	Rio Kaderbhai	
	Susan Chan	Code A
	Code A	000071
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	Code A	
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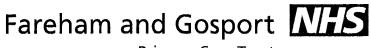
RECOMMENDATION 1 & 2	GROUP 1	11
The PCT needs to continue developing systems and	Martin Robinson	
processes to ensure patients receive good quality care. It	Fiona Cameron	
needs to ensure these systems are integrated	Jo York	
across all primary and community healthcare	Chris Kelly	
services including those provided by GPs, dentists,	Code A	
optometrists and pharmacists.	Faye Prestleton	
RECOMMENDATION 2	Martin Combs	
The Professional Executive Committee, the committee	Ann Turner	
that involves clinicians in strategic decision making,	Caroline Harrington	
needs to get better involved in making sure systems and	Ann Dalby	
processes exist to ensure patients receive good quality care.	David Penfold	
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RECOMMENDATION 3	GROUP 2	11
Action needs to be taken to develop a coordinated	Sarah Atherton	
approach to carrying out audits of clinical work.	Diane Wilson	
Clinical audit systems and processes need to be linked	Anne Stewart	
to other clinical governance systems and processes, such	Code A	
as those for risk management and staff management.	Sue Galley	
	Beverly Carter	
	Justina Jeffs	
	Code A	
	Yvonne Astridge	
	Dr Kanagaratnum	



RECOMMENDATION 4	GROUP 3	9
Information systems and the use of information need to be	Jane Parvin	
improved to help clinicians develop services and give	Alan Pickering	
good quality patient care.	David Miles	
	Code A	
	Peter Grimwood	
	Liz Jenkins	
	Code A	
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Primary Care Trust

RECOMMENDATION 5	GROUP 4	11
The PCT needs to continue to develop and incorporate	Rachael Boynes	
quality indicators into its	Tom Smith	
service level agreements with acute trusts so that it can	Gail Byrne	
monitor the quality of services that the acute trust	Code A	
provides to patients living in the PCT's area.	Inger Hebden	
	Code A	
	Code A	
	Code A	
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RECOMMENDATION 6	GROUP 5	9
The PCT needs to continue to develop its medicine	Kathryn Rowles	
management strategy and prescribing monitoring	Lucy Docherty	
framework	Code A	
	Rio Kaderbhai	
	Susan Chan	
	Code A	
	Pam Grocock	
	Pam Grocock	