

HEALTHCARE COMMISSION CLINICAL GOVERNANCE REVIEW

FAREHAM AND GOSPORT PCT

ACTION PLANNING WORKSHOP 8TH JULY 2004

FACILITATORS GUIDE

Dear Fiona

Thank you for agreeing to facilitate groups 1 & 2. Attached is a list of all six recommendations, an outline programme for the workshop, a list of group members and the format for the action plan. In addition there is a list of 'points to consider', taken from the report which may help to focus some of the groups' discussion.

The overall aim of the workshop is to identify the actions the PCT needs to take to comply with the recommendations in the report, including the means by which the PCT will measure its progress against the identified actions.

It will be important to keep the group focused on the elements of the recommendation, where these are specific, to ensure the group achieves its objective in the time available.

During the first group session the group should

Look at the recommendation and clarify any questions re meaning (5 mins)

Decide what success in meeting this recommendation would look like. (25 mins)

Identify gaps in terms of where the PCT is now (30 mins).

The second group session should

Concentrate on identifying the actions required to close the gap (1 hour).

I would be grateful if those of you facilitating groups would collate your groups responses on the formatted flip chart provided using one page per action point.

Each facilitator will then be asked to feedback the **top three or four** actions identified to achieve the recommendation and indicate both timescales and accountability where this is possible/appropriate.

**FAREHAM & GOSPORT HEALTHCARE COMMISSION CLINICAL GOVERNANCE
REVIEW DRAFT REPORT**

RECOMMENDATIONS

- 1. The PCT needs to continue developing systems and processes to ensure patients receive good quality care. It needs to ensure these systems are integrated across all primary and community healthcare services including those provided by GPs, dentists, optometrists and pharmacists.**
- 2. The Professional Executive Committee, the committee that involves clinicians in strategic decision making, needs to get better involved in making sure systems and processes exist to ensure patients receive good quality care.**
- 3. Action needs to be taken to develop a coordinated approach to carrying out audits of clinical work. Clinical audit systems and processes need to be linked to other clinical governance systems and processes, such as those for risk management and staff management.**
- 4. Information systems and the use of information need to be improved to help clinicians develop services and give good quality patient care.**
- 5. The PCT needs to continue to develop and incorporate quality indicators into its service level agreements with acute trusts so that it can monitor the quality of services that the acute trust provides to patients living in the PCT's area.**
- 6. The PCT needs to continue to develop its medicine management strategy and prescribing monitoring framework.**

**FAREHAM & GOSPORT HEALTHCARE COMMISSION CLINICAL GOVERNANCE
REVIEW REPORT – ACTION PLANNING DAY**

PROGRAMME

09.00	Registration & Coffee	
09.30	Welcome	Lucy Docherty
09.35	The Review Process	Code A
09.45	Key Issues	Code A
10.00	Group Work	Fiona Cameron
11.00	COFFEE BREAK	
11.15	Group Work	
12.30	Group Feedback	
13.25	Closing	Lucy Docherty
13.30	LUNCH	

HEALTHCARE COMMISSION CLINICAL GOVERNANCE REVIEW REPORT – ACTION PLANNING DAY – 08/07/2004

ATTENDEES:

RECOMMENDATION 1 & 2	GROUP 1	11
<p><i>The PCT needs to continue developing systems and processes to ensure patients receive good quality care. It needs to ensure these systems are integrated across all primary and community healthcare services including those provided by GPs, dentists, optometrists and pharmacists.</i></p>	Martin Robinson	
	Fiona Cameron	
	Jo York	
	Chris Kelly	
	Code A	
	Faye Prestleton	
RECOMMENDATION 2	Martin Combs	
<p><i>The Professional Executive Committee, the committee that involves clinicians in strategic decision making, needs to get better involved in making sure systems and processes exist to ensure patients receive good quality care.</i></p>	Ann Turner	
	Caroline Harrington	
	Anne Dalby	
	David Penfold	

GROUP 1 RECOMMENDATION 1 & 2

The PCT needs to continue developing systems and processes to ensure patients receive good quality care. It needs to ensure these systems are integrated across all primary and community healthcare services including those provided by GPs, dentists, optometrists and pharmacists.

The Professional Executive Committee, the committee that involves clinicians in strategic decision making, needs to get better involved in making sure systems and processes exist to ensure patients receive good quality care.

What are the key areas of action that the PCT needs to address to improve its clinical governance systems?

Key Areas For Action

- Development of systems and processes to ensure patients receive good quality care.
- Integration of these systems across community and contractor services.
- Involvement of the PEC in

You may also want to consider the following points when developing actions.

- The PCT needs to continue implementing the action plan for patient and public involvement and embed patient and public involvement at all levels of the organisation.
- The PCT should continue to develop the adverse incident form and encourage staff in primary and community care to use it to ensure a consistent approach to risk management in primary and community care.
- The PCT needs to support staff in primary care to share information about risk management activity with the PCT.
- Action needs to be taken to develop mechanisms for sharing learning from incidents across primary and community care.
- The PCT should continue to develop and support training and education opportunities for dentists, optometrists and pharmacists.
- The PCT needs to support to GPs dentists, optometrists and pharmacists to develop systems for patient and public involvement.
- The PCT needs to continue to work with staff to ensure they feel supported and protected against bullying and harassment, and monitor the impact of interventions.
- The PCT should continue working to improve safety for all staff.
- Mechanisms for coordinating and planning education and training need to be strengthened and the PCT needs to develop an education strategy and an annual training plan and ensure they are linked to workforce planning, relevant areas of clinical governance and PCT priorities.
- The PCT needs to continue working with GPs to improve waiting times to see a GP.
- The PCT needs to continue developing its workforce planning to support future service developments.

ACTION PLAN FOLLOWING A CLINICAL GOVERNANCE REVIEW - 8TH JULY 2004

Action point (Recommendation)	Objective	Action required and timescales	Constraints and/or impact of not taking the action	Accountability	Intended outcome	Monitoring	Reference

Cont'd

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