

TRUST DISSOLUTION

Summary of the meeting held on 1st November 2001 to agree future management arrangements for risk and clinical governance systems and groups

Present:

Sue Damarell-Kewell	East Hampshire PCT	Ian Piper	Portsmouth HealthCare
Julie Jones	East Hampshire PCT/Portsmouth HealthCare	Ian Reid	Portsmouth HealthCare
Fiona Cameron	Fareham & Gosport PCG	Helen Matthews	West Hants MH Trust
John Kirtley	Fareham & Gosport PCG	Steve King	West Hants MH Trust/Portsmouth HealthCare
Sheila Clark	Portsmouth City PCT	Tricia Radway	West Hants MH Trust
		Carole Rowden	West Hants MH Trust

Apologies:

Tony Horne East Hampshire PCT

Topic	PHCT Committee/s (Role, Members, Chair)	PHCT System	AGREED FUTURE MANAGEMENT ARRANGEMENTS
Clinical Audit	Clinical & Services Audit Group	Central Clinical Effectiveness Team; auditors specialise in different services Annual Audit Programme in place	<ul style="list-style-type: none"> • PCTs have agreed to a devolved Clinical Effectiveness Service model but recognise that a fair share split of resources will need to go to West Hants MH Trust. Discussions between the PCTs and the Clinical Effectiveness Team are planned. <u>LEAD: Sue DK - East Hants PCT</u> • West Hants to receive a copy of the Options Paper and to liaise with PCTs to facilitate transfer of their share of the Service
Clinical Governance	District Clinical Governance Group Clinical Governance Panel Clinical Governance Reference Group Clinical Governance Groups established in each Service	Clinical Governance Development Plans in place for PHCT as a whole and within each Service Annual Report to Trust Board Governance Section in Divisional Review Reports	<ul style="list-style-type: none"> • District Clinical Governance Committee to continue • Each organisation to make own clinical governance management arrangements • Arrangements for receipt of MH Act support/advice to be made by relevant organisations with West Hants or City PCT as required.

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Controls Assurance	No Groups Monitored via Risk Management Group, Financial Audit Panel	Lead Managers carry out assessments and develop/implement action plans Good rapport established with Internal Audit CA progress reported to Risk Management Group and Financial Audit Panel Annual CA Report to Trust Board produced Compliance Statement in Trust Annual Report	<ul style="list-style-type: none"> Each organisation to make its own arrangements for managing Controls Assurance requirements. CA co-ordinators to liaise to minimise duplication in relation to assessment of shared services e.g. those provided by PHT (Infection Control, Medicines Management, etc) and PHCT (Estates, Fire, Housekeeping, etc) CA Co-ordinators: Julie Jones - East Hants PCT Sukey Long - Ports City PCT Steve King - West Hants PCT
COSHH	Trust-wide Steering Group <ul style="list-style-type: none"> JJ chairs services represented + Occ Hlth/Estates/COI Risks Group <ul style="list-style-type: none"> JJ chairs Considers COSHH risks and actions Key services represented 	<ul style="list-style-type: none"> COSHH Policy/Procedure Central system for recording assessments Management structure in place Co-ordinators and Assessors COSHH training programme in place Risks/issues reported via Health & Safety Committee structure 	<ul style="list-style-type: none"> PCTs/West Hants to collaborate to agree common assessment process. <u>LEAD: Julie Jones - East Hants PCT</u> There will be no central COSHH information/support system Each organisation has responsibility for managing assessment information, providing COSHH advice & support to its services, managing risks arising, etc.
CPR	Trust CPR Group <ul style="list-style-type: none"> IR chairs District Resus Cttee led by PHT	CPR training programme in place – purchased from PHT CPR Policy in place Automated defib equipment at SJH with training programme; also introduced in all community hospitals	<ul style="list-style-type: none"> Central training arrangements with PHT to be retained and managed via Training & Development Team. <u>LEAD: Fareham & Gosport PCG</u> West Hants have contract for CPR training with Soton UHT; West Hants to liaise with F&G PCG about future arrangements and to facilitate transfer of funds if appropriate
Critical Incidents	No Group Exec Directors notified when incident happens	TCO system for logging all CIs that is in addition to usual route for reporting and managing risk events.	<ul style="list-style-type: none"> Each organisation to establish its own internal management process for notification, review, monitoring, etc, of critical incidents.

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	<p>Investigation monitored via TCO and Divisional Managers</p> <p>Implementation of Action Plans monitored by Divisional Reviews</p>	<p>Outstanding CIs need to be handed over to PCTs when shadow management arrangements begin</p> <p>Guidelines in place for CIR chairs</p>	<ul style="list-style-type: none"> Handover of outstanding CIRs to successor organisations to be facilitated by PHCT by 1 April 2002. Central register of trained Investigators and Investigator Training programme to be established. Investigation protocols to be reviewed to explore whether common protocol viable. <p><u>LEAD: Steve King - West Hants MH Trust</u></p>
Incident Reporting	<p>District Group to look at incident reporting (1st meeting on 17/10)</p>	<p>PHCT Risk Event Reporting Policy/Procedure including Critical Incidents and SAI in place – fully compliant with existing CNST/Cont Ass requirements</p> <p>Risk Event Forms/Continuation Sheets widely available and familiar to staff</p> <p>Central data collection/management reporting via CareKey</p>	<ul style="list-style-type: none"> (Limited life) District wide Group already established which is considering the following: <ul style="list-style-type: none"> review of existing incident reporting systems software requirements / transfer of data national (NPSA) requirements common reporting template/form across District links with Social Services <p><u>LEAD: Julie Jones - East Hants PCT</u></p> <ul style="list-style-type: none"> Lessons from incidents to be shared at District Clinical Governance Group
Risk Assessment	<p>No Groups</p>	<p>Annual Risk Assessment process well established in Services</p> <p>Guidelines and forms widely available and familiar to staff</p> <p>Annual training programme for Assessors in place</p> <p>Central collection/analysis point for data</p> <p>Feeds into Health & Safety Committee framework</p>	<ul style="list-style-type: none"> Each organisation to establish own risk assessment system/process Whilst risk assessment process remains the same across all organisations, joint training programme to be maintained. <p><u>LEAD: Fiona Cameron - Fareham & Gosport PCG</u></p> <ul style="list-style-type: none"> Each organisation to make own arrangements for collating risk assessment information, establishing Risk Registers, managing risks, implementing action plans, etc
Decontamination	<p>District Group led by HA</p> <ul style="list-style-type: none"> Edmundo Neira chairs <p>Pan-PCT/G Group</p> <ul style="list-style-type: none"> JJ chairs (at present) All PCTs and key services represented 	<p>PAT completed for PHCT Services</p> <p>Action Plan in place and being implemented</p> <p>Resources needed – funding bids currently made through SaFF</p>	<ul style="list-style-type: none"> Pan-PCT Group to continue. Consider future need for District Group and whether PHT could feed into PCT Group. <p><u>LEAD: Lyn Darby - Portsmouth City PCT</u></p>

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Emergency Planning	<p>No Trust Group</p> <p>JPEG - District Multi-Agency Group led by HA, attended by JJ</p> <p>JJ liaises with PCC & HCC Social Services on joint Phase II Plans</p>	<p>Joint PCT/PHCT Major Incident plans for</p> <ul style="list-style-type: none"> • Elderly Medicine • Community Nursing/Community Hospitals • Psychological Support <p>PHCT ED On-call Rota in place to support MI Plans</p> <p>TCO (JJ) keeps Service/PCT contact lists up to date and distributes</p> <p>TCO keeps up to date numbers for Gov Pref Telephone Scheme - currently comprises of old PHCT staff and sites</p>	<ul style="list-style-type: none"> • Acknowledged ongoing requirement for JEPG - query future leadership (Strategic HA or PHT?) • Each organisation to establish its own Major Incident Plans which dovetail with those of other NHS organisations (PCTs, West Hants, PHT & Ambulance Service) and Social Services • Each organisation to establish its own out of hours on call arrangements and notify other PCTs/PHT/HA/etc • Portsmouth City PCT & West Hants to agree ongoing management arrangements for Psychological Response Plan • Each organisation to notify Regional Health Emergency Planning Adviser of requirements for Government Preferential Telephone Scheme (a copy of the current list of numbers is on its way to PCT/West Hants Chief Execs).
Health & Safety	<p>Trust-wide Group</p> <ul style="list-style-type: none"> • IP chairs • Attended by chairs from Div Groups and Union Reps <p>Divisional Groups</p> <ul style="list-style-type: none"> • Chaired by Div Mngr or Service Manager • Attended by local staff and Union reps 	<p>Trust Health & Safety Policy</p> <p>Health & Safety / Union Reps appointed</p>	<ul style="list-style-type: none"> • Each organisation to make its own arrangements for management of health and safety issues
Infection Control	<p>Joint COI Committee</p> <ul style="list-style-type: none"> • attended by SK/IR/JJ <p>Trust COI Committee</p> <ul style="list-style-type: none"> • Chaired by IR • Attended by COI team and PHCT managers 	<p>Infection Control Policy</p> <p>Service Agreement with PHT Infection Control Team for provision of services in place</p>	<ul style="list-style-type: none"> • PCTs & West Hants to collaborate and establish level of current service provision with PHT Infection Control Team. Once current provision known, Joint PCT & West Hants SLA for Infection Control Services to be agreed with PHT/HA <u>LEAD: Julie Jones - East Hants PCT</u> • Each organisation has responsibility for managing infection control issues that arise in its services

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Manual Handling	Trust Manual Handling Review Group well established <ul style="list-style-type: none"> Chaired by Rosemary Salmond Attended by Service Reps and Risk Rep (JJ) 	Manual Handling Policy / Guidelines in place Manual Handling Advisers allocated to each Service / Handling Trainers recently appointed Local Handling Links Network established	<ul style="list-style-type: none"> Manual Handling Service is part of Occupational Health Service and therefore transferring to PHT Specification with details of current level of support/training/advice to be provided to PCTs/West Hants by Occupational Health Service Manager
Personal Safety	No specific groups, forms part of Health & Safety	Violence & Aggression Policy Lone Working Policy Site Incidents Policy Procedures/Leaflets/Posters/Information & Advice made available via JJ NHS Zero Tolerance Campaign supported Personal Safety Training Programme delivered via Crime Concern	<ul style="list-style-type: none"> Each organisation to make its own arrangements for personal safety training/policies/etc.
Medical Advisory Committee	PHCT Education Group (Medicine)	Query whether medical staffing forum needed across PCTs Community Clinical Tutor	<ul style="list-style-type: none"> The Group is considering how this will be taken forward
Medical Devices	Joint MESHG <ul style="list-style-type: none"> Attended by SK Trust Medical Devices Group <ul style="list-style-type: none"> Chaired by Attended by Service Reps 	New Medical Devices Management Policy in place Central system for procuring medical devices via Marie Preston MDA Notices cascaded via TCO	<ul style="list-style-type: none"> MDA Bulletins to be cascaded by successor organisations PHCT Group to continue to meet with time limited brief (till 31/3/02) of embedding medical device management arrangements in successor organisations. This includes liaising with PHT & PHCT to ensure maintenance SLAs in place. Successor organisations to ensure each of their Services represented on this Group. <u>LEAD: Steve King - Portsmouth HealthCare</u> Successor organisations to take responsibility for maintaining medical device management arrangements their Services from 1 April 2002.

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Medical Issues	Medical Advisory Group Medical Staffing Dept Education Group	Discretionary points Disciplinary functions Appraisals Clinical Governance	<ul style="list-style-type: none"> • Tasks/functions of PHCT Medical Director (as outlined in adjacent columns) to be picked up by successor organisations.
Medicines Management	Formulary & Medicines Group Area Prescribing Committee PHCT Medicines & Prescribing Committee	Policies and procedures in place Provision of pharmacy advice/service	<ul style="list-style-type: none"> • Area Prescribing Committee to continue • Each organisation responsible for managing its medicine/pharmacy requirements and feeding into APC
Radiation Safety	Trust Radiation Safety Committee <ul style="list-style-type: none"> • chaired by Mike Holubinka (PHT) and attended by Dental, Risk Mngr and EDs • 2 main issues: • radiation protection for staff (e.g. in dental) • radiation major incident 	Radiation Protection Adviser appointed (MH) Radiation Protection Policy in place Trust MI Plans feed into PortSafe (local Radiation Incident Emergency Plans)	<ul style="list-style-type: none"> • East Hants PCT to manage Radiation Safety in the Dental Service • Each organisation to ensure plans for responding to a radiation incident are included in respective Major Incident Plans
Research and Development	Portsmouth Consortium Steering Committee (ports, iow, chich) PHT R&D Committee PHCT R&D Committee		<ul style="list-style-type: none"> • Each organisation to make its own arrangements for Research & Development • Jointly funded R&D post (Kate Greenwood) to continue
Risk Management	Trust Risk Management Group well established <ul style="list-style-type: none"> • Chaired by IP • Attended by senior and risk managers 	Risk Management Strategy & annual Objectives well established Risk Management Policy in place Annual Risk Management Report produced for 1 st time in 2000/1 Personnel: Corporate Risk Adviser, Clinical Risk Adviser, Risk Information Assistant Quality, Clinical Governance & Risk Management Budgets of	<ul style="list-style-type: none"> • Each organisation to establish its own risk management framework, strategy, policy, etc. No need for joint risk management forum. • PHCT quality, clinical governance and risk management funding (pay and non-pay) to be divided between successor organisations in accordance with formula agreed jointly by Finance Directors. • In addition to resources, there are PHCT employees who carry out some clinical governance tasks and who will be able to transfer to new host organisations.

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		approximately £200k (includes salaries of above staff)	
Health Records	Trust Health Records Review Group Data Protection Co-ordinator and management framework in place	Dedicated Health Records Manager in place Health Records Management Policy in place	<ul style="list-style-type: none"> • Health Records Manager transferring to PHT with IM&T Service. • Future provision of this function to PCTs/West Hants still to be agreed.
Vicarious Liability	No groups	Discussion to clarify legal responsibility for staff employed by one organisation but carrying out the work of another.	<ul style="list-style-type: none"> • All organisations to ensure legal responsibility/liability for staff clearly defined in relevant Service Agreements.
Policies	No Groups	PHCT has set of Corporate Policies relating to Operational, Clinical, Personnel, Occupational Health and Infection Control issues Policy on Policies sets out approval/review framework Policy Holders in each Division identified	<ul style="list-style-type: none"> • Steve King to liaise with Lorna Green to obtain a copy of full set of Policies for West Hants MH Trust
Public & Patient Involvement Agenda	User/Carer framework / system established at service level in PHCT PALs not established in PHCT		<ul style="list-style-type: none"> • Each organisation to develop their own Public & Patient Involvement process/framework.
CPD	Included in Medical Staffing HR budget		
Libraries Service	PHCT currently employ a Library Project Manager		<ul style="list-style-type: none"> • Service will be transferring to PHT; current level of service to PCTs/West Hants should be maintained

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