

GOSPORT WAR MEMORIAL HOSPITAL

ACTION FROM COMPLAINTS AND SERVICE DEVELOPMENT

INTEGRATED ACTION PLAN AND ACHIEVEMENTS

1998-2001

Prepared November 2001

Introduction

Between April 1998 and October 2001 there were 9 formal complaints in respect of Daedalus, Dryad and Sultan Wards at Gosport War Memorial Hospital (GWMH).

Analysis of the individual complaints investigation reports, a report by the Health Service Ombudsman, including independent medical and nursing opinion and an Independent Review Panel Report has revealed a number of key issues.

These key issues have been the subject of significant development work in both policy and practice within the Trust generally and specifically at GWMH. Lessons learned from Gosport have contributed to specific policy developments which have been rolled out Trust wide.

The complaint history for these three wards is as follows:

DATE	WARD	EVENT
Aug. 98	Daedalus	Complaint Mrs. L. re care of mother Mrs. R.
Oct. 98	Dryad	Complaint Lt. Comm. F re- Mr. C
Nov. 98	Dryad	Complaint Mr. W re Mrs. P.
Dec. 99	Daedalus	Complaint Mrs. S re Mr. S
Jan 00	Dryad	Mrs. R and Mr. D re Mrs. D
Jun. 00	Sultan	Mrs. R re Mr. R.
Jun. 00	Dryad	Mrs. B re Mrs. G
Aug. 00	Sultan	Miss W re Mrs. W
May 01	Sultan	Mr. P.H. re Mrs. H

The following table presents the key issues identified and links them to specific actions taken. Finally, previous developments and ongoing related development work is described where it can be seen to relate to the issues raised.

INTEGRATED ACTION PLAN AND ACHIEVEMENTS 1998-2001			
KEY ISSUE	ACTIONS	DATE	EVIDENCE
Communication with Relatives			
<ul style="list-style-type: none"> • General • Use of opiates • Documentation 	<ul style="list-style-type: none"> • Analysis of 5 complaints • Workshop with senior clinicians to develop action plan. • Development of patient survey • Development of policy and guidelines on the management of pain including standards for communications. • Nursing documentation now clearly identifies the NOK and the prime contact person for all communications • Conversations with families are documented clearly identifying time, date, name of individual and 	<ul style="list-style-type: none"> Jan. 2000 Feb. 2000 Action plan updated 31 Oct. 2001 	<ul style="list-style-type: none"> • Analysis paper • Action plan • Patient survey, results for 2 quarters and action plan. • Policy guidelines and standards attached

•			services.
Destruction of medical records			
<i>NB this is the only occasion when records have been microfilmed out of sequence. No records were destroyed. However it was not Trust policy to micro film observation chart at that time.</i>	<ul style="list-style-type: none"> Changes made to the list of material for inclusion in micro-filming to include observation charts 	Feb. 2001	<ul style="list-style-type: none"> Letter requesting observation charts added to the microfilming list. Confirmation of this request.
Misplaced clothing			
Clothing misplaced despite family stating their desire to manage the laundry. Told that clothing sent for marking	<ul style="list-style-type: none"> No specific action was taken as this was a genuine oversight. However staff were reminded re the importance of care for patients belongings. 		

Related Developments

- **Feeding people** - The feeding people group was set up in 1998 in response to national concern regarding the nutritional status of hospitalised patients. The group was chaired by the Operations director for the Trust, (now chaired by the Nurse Director). and had representatives from across the Trust as its' membership. The group produced a policy entitled 'prevention and management of malnutrition within Trust residential and hospital services'. This policy was the result of audit of current practice, development of standards and re-audit of the standards. Link nurses were trained for each department so that a network existed and there was a forum for sharing good practice.
- **Clinical Nurse Leadership Programme** - Led by the Director of Nursing this programme (which has gained national recognition), established a development path for senior nurses to facilitate the development of leadership skills, clinical effectiveness and reflection in practice.
- **Intermediate Care** - The local PCG's worked with the Trust localities during 2000 to develop locally based intermediate care services. In Fareham and Gosport just over 1 million pounds development money was invested in changing the use of community hospital beds, enhancing community nursing and therapy support via a community enabling service and improving access to social care packages. Specific developments include:

Additional consultant sessions	
ALERT Training	There is now one course a month and by end Nov. 2001 all qualified staff in Fareham and Gosport will have undergone training. ALERT is a simple technique for assessing quickly and describing effectively changes in patients conditions to provide an early warning of changes.
AED's and related training	Automated external defibrillators - now managed via 1 emergency number at GWMH with a team drawn from departments who are trained to respond.
Appointment of an H grade nurse (practice development)	This appointment has facilitated clarity in the nursing structure and the individual functions as a role model, nursing leader and supervisor working directly with the clinical managers

- **Gerontological Nursing Programme** - This programme commenced in Community Hospitals in Sept. 2001. All F and G grade nurses are participating. The programme was developed by the RCN in conjunction with the Trust and is specifically geared toward the principles of individual care, reflection in practice and clinical effectiveness utilising an action learning model. It is a work based programme supported by a group of specially trained critical companions who in turn are supported by the RCN programme leads.

• Community Hospitals - Clinical network

CONCLUSION

Each of the nine formal complaints received by the Trust during the period Apr 98 - Oct. 01 was the subject of an investigation resulting in the recommendations which form the basis of the actions identified in the integrated action plan.

A number of actions are derived from more than one complaint, sometimes covering more than one ward area. Where the resulting action was of a policy nature and or seen as a common issue, the actions taken had Trust wide application. Examples of this are the policies, (management of pain, prescription writing, management of malnutrition) and the alterations to the document list for microfilming records.

In addition there are ongoing developments described above which are intended to support continuing practice development for nurses.

Portsmouth HealthCare



NHS Trust

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Medical			
<ul style="list-style-type: none"> • Staffing 	<ul style="list-style-type: none"> • Weekly consultant ward rounds. • Appointment of staff grade doctor • Increased consultant sessions 	16th Feb. 1999 30th Oct 2000 Septa 2000	<ul style="list-style-type: none"> • Dr. A. Lord memo
<ul style="list-style-type: none"> • Transfer of patients 	<ul style="list-style-type: none"> • Explicit instructions re transfer out of hours. 	Dec. 1998	
<ul style="list-style-type: none"> • Prescribing practice 	<ul style="list-style-type: none"> • Review of Prescription writing policy • Development of a Management of pain policy (including variable dose syringe driver prescription management). 	Jul. 2000 May. 2001	
<ul style="list-style-type: none"> • Communication with relatives 	<ul style="list-style-type: none"> • This has been greatly enhanced by presence of staff grade Dr M-F 	30th Oct 2000	
Fluids and Nutrition			
<ul style="list-style-type: none"> • Prevention and management of dehydration • 		Nov. 2000	<ul style="list-style-type: none"> • Policy for prevention and management of malnutrition within Trust residential and hospital services.

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