

Appendix

- 1 - Governance and Quality Committee Terms of Reference**
- 2 - PHT Committee Structure to support Risk Management**
- 3 - Risk Management Strategy**
- 4 - Trust Risk Assurance Committee Terms of Reference**
- 5 - Joint Clinical Quality Review Meeting Terms of Reference**
- 6 - Governance Strategy**
- 7 - Adverse Events and near Misses (including SUI) Policy**
- 8 - Adverse Incident Reporting Form and Statement Form**
- 9 - Risk Assessment Policy and Protocol**
- 10 - Risk Assessment Hazard Inventory**
- 11 - DMOP Management and Governance Committee ToR**
- 12 - DMOP Management and Governance Committee minutes**
- 13 - DMOP Management and Governance Committee reporting scheduled**
- 14 - DMOP Performance Reports to EMT**
- 14 - DMOP Governance Report to Trust Governance and Quality Committee**
- 15 - DMOP Divisional Risk Register**
- 16 - DMOP Risk Manager Job Description**
- 17 - DMOP Risk Report to M&GC Nov 08**
- 18 - NHSLA Assessment March 2008**
- 19 - NHSLA Risk Management Standards overview**
- 20 - Policy and protocol for Medicines Management**
- 21 - Controlled Drugs Policy**
- 22 - Formulary and Medicines Group Terms of Reference**

43 - Duty Management Guidelines

44 - Rehab Flow chart - bed pressures

45 - Operational policies for Collingwood and Ark Royal Wards

45 - Copy of rehab assessment form

45 - Clinical Services Directory

46 - Nursing Strategy June 2007

47 - DMOP essential training report

48 - Governance and Quality Committee ToR

49 - Audit Committee ToR

50 - DMOP Health and Safety Plan

51 - DMOP Health and Safety Plan

51 - Essential Training Matrix 2008

52 - Whistle blowing policy

53 - Whistle blowing poster

54 - Whistle blowing leaflet