

Confidential

Hampshire 
Primary Care Trust

Monday 8th December 2008, 10.30 to 12.00
Seminar Room
Gosport War Memorial Hospital
*Meeting regarding Gosport War Memorial Hospital –
Coroner's Inquests*

Action Notes

Present:
Richard Samuel (Chair)

Code A

Code A

Item		Action
1	Code A	
2	<p>Notes of the last meeting:</p> <p>Item 3.1 First bullet point: SK will be part of the approvals process for media statements once the inquests have started.</p> <p>Item 3.2, Final bullet point: JH and the legal team will be enquiring from the coroner as to whether he will accept further written statements.</p>	
3	<p>Matters Arising: progress by sub-groups</p> <p>3.1 Communications: packs of information for different groups including staff and media are being put together, as well as a key stakeholder list to ensure the right people are kept informed. Trimedia and comms reps to prepare strategic plan including identification spokespersons for attendance on specific dates and times through the inquests, and their training. Trimedia are to develop a checklist of actions from their plan tabled today, to act as a manual to help all organisations through the inquest period.</p> <p>3.2 Legal issues: JH reported on developments since the last meeting. It was noted that:</p> <ul style="list-style-type: none"> • The coroner has still not announced where the inquests will take place. • SK has asked for the 2000 exhibits still held by the police, but is not optimistic about receiving them before the inquests take place • The original medical records are to be returned to MD, who will ensure copies are made for SK, and for witnesses to refresh their memories from before attending the inquests. • SK had summarised the evidence of the expert witnesses in his report. The group felt that it needed to be made clear to the coroner that the practices of which the experts were critical were common practice at the time throughout the NHS. JH to take back to SK. • It was noted that the RCN members who are called as witnesses already 	<p>ST, ET, JD/MD</p> <p>CS/JD</p> <p>MD</p> <p>JH/SK</p>

	<p>have had a barrister engaged for some time. SK is to discuss representation at the inquests of this group of staff with CG.</p> <ul style="list-style-type: none"> It was agreed that a summary of actions arising out of the 1991 staff complaints should be prepared for SK/JH and the comms team, to assist in developing a communications line. A statement given to SK by LH was tabled, which explains the provision of services on Dryad and Daedalus wards now. Comments on the statement are to be sent to MD/SK/JH by the 15th December at the latest. To assist both the legal and the comms teams in developing their strategies, it was agreed that RS would circulate a list of objectives for the NHS to achieve out of the inquests, for others to comment on and add to. Comments to MD by 31 December. <p>3.3 Steering Group TOR: Acknowledged.</p>	<p>SK/CG</p> <p>RS/BW</p> <p>ALL</p> <p>RS/ALL/MD</p>
4	<p>Feedback on Actions</p> <p>4.1 CHI action plans:</p> <ul style="list-style-type: none"> Draft HPCT response to CHI recommendations was tabled. PCTPCT plan is almost complete. HPT has only just assigned the work to the appropriate person to complete. RS to call Nick Yeo with deadlines post meeting. PHT plans are still being completed. Completed plans to MD as soon as possible. MD to produce a generic covering paper to go to each organisational Board with their CHI response. It was agreed that we need one document for the coroner to demonstrate that organisational governance is meeting CHI standards across the whole health system (LH document on behalf of PHT in response to CHI recommendations). Individual organisations to produce Board papers for sign-off of CHI recommendations, and to be sent to MD by 2nd January for assurance by Code A prior to being submitted to BP. A medical assessor will also be invited to respond to the CHI recommendations, to be invited by RS. When all this evidence is put together the comms team will have all the information they need to demonstrate that we know we are delivering better care. <p>4.2 History storyboard: JH tabled a timeline of key events and a summary of key changes produced by LH. Group were asked to send comments and suggestions to SK/JH/MD by 31st December</p>	<p>RS</p> <p>JJ/NM/PS MD</p> <p>ALL ORGS</p> <p>RS</p> <p>ALL</p>
5	<p>Any Other Business</p> <p>5.1 JH reported that the barrister would be briefed in January.</p> <p>5.2 JH reported that the coroner would be approached once barrister briefed regarding a pre-inquest meeting with the coroner. JH to update group via MD.</p> <p>5.3 JJ reported that the final touches to the PCTPCT plan would be completed when a former member of staff had been located.</p> <p>5.4 JJ reported that their CHI plan focussed on the provision of OPMH services.</p> <p>5.5 BP re-affirmed that in all our documents we need to ensure that we make it clear that what is described as happening in 1996 – 98 has all changed now, and that the way the service is provided is very different.</p>	<p>SK/JH</p> <p>JJ</p>
6	<p>Date of next meeting</p> <p>Monday 5th January 2009, 11.00 – 12.30, Room 11, Quad Centre, QA. Please note the change in venue and time.</p>	

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