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Summary of findings into a review of actions taken against CHI recommendations at Gosport War Memorial Hospital

Context

This document represents a current assessment of whether services at Gosport War Memorial Hospital continue to meet the recommendations made in the Commission for Health Improvement (CHI) report published in July 2002. It is an independent review commissioned by Hampshire PCT.

Caution should be applied in its interpretation as there have been changes in services, service providers, and indeed much organisational change since CHI reported. It should not be assumed that issues currently being addressed have been persistent since July 2002. Actions are already in hand to address problems raised in this findings document.

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1. Introduction.

Written submissions were reviewed from Portsmouth Hospitals NHS Trust, Hampshire Partnership NHS Trust, Portsmouth City tPCT and Hampshire PCT in order to assess whether each organisation has enough evidence to show that the CHI recommendations continue to be met. In some cases further evidence was received following conversations with managers. The medical aspects were also reviewed by Dr Keith Ollerhead and his findings have informed this summary. This review is concerned with the current configuration of inpatient services at Gosport War Memorial Hospital (GWMH).

2. NHS Organisations submitting evidence.

- Portsmouth Hospitals NHS Trust (PHT)

The Trust produced a comprehensive report with hyperlinks to a large number of documents that provide sound evidence. These demonstrate clear organisational structures and responsibilities and gave confidence that the issues have been and continue to be addressed. The Trust manages Ark Royal and Collingwood Wards.

- Portsmouth City tPCT (PCPCT)

Portsmouth City tPCT does not manage wards or admit patients to Gosport War Memorial Hospital (GWMH). It does provide speech therapy and primary care out of hours services. The final action plan has been signed off by the PCT Operational Board. It is confident that the PCT has implemented the recommendations across its services but this review has considered evidence relating to GWMH in the time available.

- Hampshire Partnership NHS Trust (HPT)

The final version of the action plan is comprehensive and provides hyperlinks to a range of evidence. The Trust provides Older People's Mental Health Services on Daedalus and Dryad Wards. Generally the action plan gives a high level of confidence.

- Hampshire PCT

The Hampshire PCT has responsibility for commissioning the services provided at GWMH by the three other organisations and also directly provides services on Sultan Ward. The organisational systems and structures for clinical governance are more complex.

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3. Review of actions against CHI Recommendations

- CHI Recommendation 1. Each organisation produced evidence to demonstrate positive leadership of the services. All have internal performance management systems in place but the commissioning of Older People's Mental Health and PCT provided services is not yet fully developed. At this time Hampshire PCT is realigning its provider services and there is not complete assurance that current structures and processes are clearly understood by all staff.
- Recommendation 2. Admission criteria have been redefined on all GWMH wards.
- Recommendation 3. Each provider organisation has evidenced increased pharmacy input which includes at least weekly ward visits and review of prescriptions.
- Recommendation 4. Each organisation has approved medicine management policies.
- Recommendation 5. Evidenced as above.
- Recommendation 6. PHT includes Medicines Management as essential training for clinical staff on an annual refreshed basis. HPCT and HPT nursing staff have induction training in medicine management but an annual update is not essential training. Staff work to audited medicine management policies. Essential training is usually but not always achieved locally due to service pressures.

Prescribing on Sultan Ward is the responsibility of GPs. Monday-Friday 8am-6.30pm this is provided by the Fareham Area Clinical Enterprises Ltd (FACE) under contract from Hampshire PCT. Evidence produced does not demonstrate that GPs are trained in the prescription, administration, review and recording of medicines for older people. The PCT policy for control, prescribing, supply and administration of medicines is for PCT employed staff and is recommended as best practice for independent contractor services. This is not referred to in the contract with FACE. The policy for GP Appraisal was submitted as evidence but this is concerned with general practice and is not designed for hospital practice. Supervision and appraisal should be evidenced. Clinical governance arrangements need to be reviewed for the FACE provider and for Sultan Ward and this needs urgent action by Hampshire PCT.

- Recommendation 7. Each provider organisation has a complaints policy and systems designed to ensure learning from the event. Further

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evidence submitted for Sultan Ward shows résumés of five recent significant complaints that appear to relate to some of the issues that CHI investigated. In order to be assured that the CHI recommendation is fully implemented, an audit of all complaints in the last year relating to patients in all wards at GWMH should be urgently undertaken. This will link to the clinical governance issues identified above.

- Recommendation 8. PCPCT provide this service. Work has been undertaken by each Trust on using swallowing assessments, particularly using the new stroke pathway. Some training is outstanding for PHT and probably other staff.
- Recommendation 9. There are no long stay patients at GWMH and activity is focused on daily living.
- Recommendation 10. HPT has developed an action plan. Hampshire PCT is setting up a group to work on these basic nursing care issues. PHT state that Essence of Care audits form part of the PCT contract.
- Recommendation 11. Staff briefing systems are established in all organisations.
- Recommendation 12. All organisations demonstrate improved processes for working with and listening to patients and carers.
- Recommendation 13. Out of hours (OOH) medical cover to Collingwood and Ark Royal Wards is provided from the PHT rota.

Cover for psychiatric issues on Dryad and Daedalus Wards is provided from the HPT rota. Confusing evidence was submitted suggesting that cover for physical conditions is from the Primary Care OOH service which is provided by PCPCT but this is not mentioned in their OOH service specification 2008/09 submitted as evidence.

Cover for Sultan Ward is from the Primary Care OOH service. This is documented in the PCPCT service specification as being for GWMH as a whole. The specification given as evidence is not explicit regarding ward clinical governance issues. These points need to be clarified in the 2009/10 service specification.

- Recommendation 14. As in Recommendation 2.
- Recommendation 15. The organisations all give evidence of improved nursing leadership.
- Recommendation 16. There are no GPs working as clinical assistants at GWMH but issues of supervision, appraisal, training and clinical

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governance are not resolved on Sultan Ward and in the OOH service. See Recommendations 6, 7 and 13.

- Recommendation 17. Systems are in place in each Trust but see action needed in Recommendation 7.
- Recommendation 18. Each organisation has developed appropriate training courses but it has not been possible in the time available to be confident that all staff at GWMH have attended them. A further audit at ward level would be required if full confidence is needed.
- Recommendation 19. Each organisation has demonstrated that clinical governance has been embraced. However that there is further urgent work to do to strengthen governance in services provided by the OOH service to GWMH and by the provider of medical services to Sultan Ward.
- Recommendation 20. Systems and training are in place.
- Recommendation 21. Systems are in place but in Hampshire PCT there is some confusion as Care Services develop and some undated documents. See also Recommendation 6 and 13.
- Recommendation 22. All organisations have updated their Whistle Blowing Policies.

4. Conclusion

An impressive amount of evidence has been submitted which demonstrates the major improvements that have taken place at Gosport War Memorial Hospital since the CHI Investigation in 2002. There are areas where improvement is still needed to give full confidence that the recommendations continue to be met.