

Fareham and Gosport 
Primary Care Trust

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Noreen Kickham/Kathryn Rowles
Director of Public Health

Fareham and Gosport and East Hampshire PCTs
Gosport War Memorial Hospital CHI Implementation Group
Notes of the meeting held on 24th January 2003

Present : Anne Stewart
Jane Parvin
Jeff Watling
Nigel McFetridge
Fiona Cameron
Sue Damarell-Kewell
Hazel Bagshaw
Judith Goodall
Paula Turvey
? East Hants Rep with Judith
Kathryn Rowles
Noreen Kickham

Apologies: Ian Reid
Neil Stubbs
Alan Pickering

1. Notes of Previous Meeting

These were agreed as an accurate record. Matters arising from the minutes:

1.1 Terms of Reference

These had been amended to reflect the participation of the Pharmaceutical Advisor (Fareham and Gosport PCT) on the Implementation Group.

Dissemination of the notes of the meetings of the Implementation Group and the implementation Progress report were discussed. **Action** - Notes to be circulated to the following by Noreen K and Kathryn R:

- Members of the Implementation Group
- Fareham and Gosport PCT Board (paper to be presented at March Board meeting by Noreen K and Kathryn R)
- East Hants PCT Board (Paula T to take notes and progress report to Board)
- Local Medical Committee
- Social Services (via Nicky Pendleton, Partnership Manager)
- Relatives
- Staff
- Adrian Osbourne (Communications Lead at the Strategic Health Authority)

2. Pharmacy Business Case

Hazel B. reported that she had met with Jeff W. and Ian Reid to identify the additional resource required to meet the specific requirements identified in the CHI report on the provision of Pharmacy Services to Gosport War Memorial. Jeff

had produced a revised business case. There was wide ranging discussion about what the additional resource investment (approx. £68k) would fund over and above the current Pharmacy Service provision to the hospital.

Action - It was agreed that Jeff W would meet with Fiona Cameron and Hazel Bagshaw to clearly outline:

- Current pharmacy Service Provision to GWMH
- Additional activity to be sourced by additional investment (including specific detail on guideline development)

3. Training Resource from Workforce Confederation

Jane P reported that she had met with Fiona C to identify expenditure already incurred to support training in response to the CHI Action Plan and to begin to pull together a bid proposal for next year (2003/04) that will be submitted to the Workforce Development Confederation. It was agreed that this training could be open to staff working at all the Community Hospitals across the local health economy.

Action - Accountable leads were asked to identify training needs for 2003/04 and feed these back to Jane as soon as possible.

4. Progress report against each recommendation

The progress report collated at the meeting is attached to these notes.

Action - It was agreed that it would be useful to identify a system to differentiate those actions, which have been successfully completed, and those that are still outstanding. Kathryn R and Noreen K to progress

Action - It was also agreed that accountable leads would be asked to complete a written report of progress against the actions they are accountable in preparation for the next meeting. A proforma is attached for this purpose.

5. AOB

It was suggested some of the good work coming out of the CHI Action Plan Implementation should be communicated to staff. **Action** - It was agreed that Kathryn R and Noreen K would speak to Sue Galley and David Barker to identify how best this could be disseminated through the communications mechanisms in each PCT.

Date and time of next meeting - All meetings will be held between 12pm -2pm at Fareham Reach on the following dates.

- 21 March 2003
- 23 May 2003
- 25 July 2003
- 26 September 2003
- 28 November 2003

CHI ACTION PLAN - PROGRESS CHASING MARCH 2003

Action point	Objective	Action required & timescales	Accountability	Progress as at 21 March 2003	Action status
Rec: 1	To develop performance-monitoring arrangements to ensure that any performance shortfalls in the provision of services for older people at Gosport War Memorial Hospital are identified and addressed swiftly.	<ul style="list-style-type: none"> • Appointment of Operational Director for Secondary Care - in post • Develop a Service Level Agreement (SLA) for Older People's Services with jointly agreed principles, clinical governance standards and responsibilities, and key performance criteria – by December 2002 • Establish a system for monitoring and performance managing Service Level Agreement arrangements – January 2003 • Set up and run regular dedicated clinical/ management meetings that involve the associate lead consultant – from December 2002 	Tony Horne	Action Completed	✓✓
			Fiona Cameron/Neil Stubbs	In progress. First draft produced 17.3.03. On target for end March	✓
			Fiona Cameron/Neil Stubbs	As above	✓
			Ian Reid	In place	✓✓
Rec: 2	To review the policy for admitting patients to Sultan Ward at Gosport War Memorial Hospital	<ul style="list-style-type: none"> ▪ Establish a meeting to review and revise, as necessary the criteria for admitting patients to Sultan ward – completed September 2002 ▪ Establish a Gosport War Memorial Hospital Medical Committee to review criteria for GP admissions to Sultan Ward - Jan 2003 ▪ Establish a process to ensure that ongoing review of the admissions policy is undertaken as 	Fiona Cameron/Ian Reid	Policy reviewed again in Feb 03 in light of GP changes. Working draft currently with GPs	✓✓
			Fiona Cameron/Ian Reid	GP beds now a regular agenda item on Gosport GP meeting. Above policy being reviewed and ratified there.	✓✓
			Fiona Cameron/Ian Reid	Ongoing monitoring to take place at GP group	✓✓

Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Accountability	Detailed progress to date
Rec: 3	To review all local prescribing guidelines to ensure appropriateness for current levels of patient dependency on elderly care service wards.	part of routine review, and in particular in response to service changes			
		<ul style="list-style-type: none"> Establish Medicines Management Group as a sub group of the Area Prescribing Committee, to oversee the review and guideline development process where necessary - Group established by November 2002 	Ian Reid/ Hazel Bagshaw/Jeff Watling	Meeting planned for the end of April	✓ Delay caused by the need to recruit Guidelines Pharmacists
		<ul style="list-style-type: none"> Carry out a review and revision of guidelines in 6 key areas - by March 2003 	Ian Reid/ Hazel Bagshaw	Some Guidelines have already been completed - Jeff Watling to confirm list of completed/outstanding guidelines.	✓
		<ul style="list-style-type: none"> Establish an ongoing audit programme and process for all prescribing guidelines developed to ensure prescribing practice reflects patient management plans/outcome - March 2003 	Ian Reid/ Hazel Bagshaw/Jeff Watling	Guidelines Pharmacist to be appointed by district Pharmacy Service provided by Portsmouth Hospitals Trust. Clinical Pharmacist for Community Hospitals in Fareham & Gosport to be recruited by the PCT.	
		<ul style="list-style-type: none"> Audit prescribing against initial 6 revised guidelines and assess appropriateness in relation to patient dependency levels - by December 2003 	Ian Reid/ Hazel Bagshaw/Jeff Watling	On target for completion	X
<ul style="list-style-type: none"> Ensure staff training requirements arising from revised guidelines are integrated into PCT 	Jeff Watling/Hazel Bagshaw	Pharmacy Training Plan to be completed by 30 April 2003	✓		

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Action point	Objective	Action required & timescales	Progress Report as at 24/1/03	Accountability	Detailed progress to date
Rec: 4	To establish comprehensive pharmacy service support to wards at Gosport War Memorial Hospital	training programmes, and as new guidelines are reviewed and developed and implemented – ongoing			
		<ul style="list-style-type: none"> Review the current level of pharmacy services provided based on the existing Service Level Agreement, and prepare a business case to enhance provision, which includes an explicit specification for Out of Hours cover – by October 2002 	Ian Piper	Local discussions and PCT agreement reached. See Rec 3 - bullet point 3 and 4	✓
		<ul style="list-style-type: none"> Integrate additional investment /pharmacy activity into Service Level Agreement - January/February 2003 	Hazel Bagshaw/Fiona Cameron	See above	✓
		<ul style="list-style-type: none"> Establish central point of reference for Pharmacy Staff working in satellite sites - in place 	Hazel Bagshaw/ Fiona Cameron/	In place	✓✓
		<ul style="list-style-type: none"> Establish Pharmacy involvement in ward rounds undertaken on Dryad, Daedalus and Sultan wards - by March 2003 	Hazel Bagshaw /Fiona Cameron	Additional pharmacy time to be implemented as a result of recruitment of clinical pharmacist by PCT	XX
Rec: 5	To review and monitor prescribing of all medicines on wards	<ul style="list-style-type: none"> Carry out a retrospective audit of diamorphine prescribing on Sultan ward to ensure that current guidelines are 	Ian Reid/Hazel Bagshaw	Started March 2003. Notes of all patients who have received diamorphine since May 2001 when the new pain guidelines were introduced will be examined to monitor adherence to those guidelines as well as the PNF and Wessely Palliative Care guidelines. Ian	✓

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Rec: 6	on wards caring for older people at Gosport War Memorial Hospital, including diamorphine prescribing on Sultan ward. To ensure that all-relevant staff, including GPs, in Fareham & Gosport and East Hampshire and PCTs are trained in prescription, administrative review and	guidelines are implemented – by December 2002	Ian Reid/Hazel Bagshaw	BNF and Wessex Palliative Care guidelines. Ian Reid will peer review the notes.	
		<ul style="list-style-type: none"> Establish a system for routine monitoring and auditing of narcotic analgesic prescribing on wards, including a baseline audit of all controlled drug prescribing on wards at Gosport War Memorial Hospital - by March 2003 	Ian Reid/Hazel Bagshaw	The notes of all patients who have received a narcotic analgesic from December 2002 to February 2003 will be examined to check adherence to pain guidelines, BNF and Wessex Palliative Care guidelines when applicable. The quality and legibility of the notes will also be assessed. A baseline of controlled drugs use will be established.	✓
		<ul style="list-style-type: none"> Carry out monthly analysis of this data and investigate sudden changes – by April 2003 	Ian Reid/Hazel Bagshaw	Centralised audit to be presented at March meeting. Assume ongoing responsibility will be with F&G pharmacist.	✓
		<ul style="list-style-type: none"> Ensure dissemination of prescribing data to medical staff to support rigorous routine review - May 2003 	Ian Reid/Hazel Bagshaw	On target	X
		<ul style="list-style-type: none"> Establish short life group (as a sub-group of the Medicines Management Group) to review and make recommendations for action regarding training and development - group established by November 2002 and plan developed - by March 2003 	Ian Reid/Hazel Bagshaw	Guideline development will determine training and development needs. Progress to be achieved on appointment of Guideline Pharmacists	XX
	<ul style="list-style-type: none"> Ensure the integration of prescribing training requirements into PCT 	Ian Reid/Hazel Bagshaw/Fiona Cameron	Prescription training requirements to be derived from audit results.	✓	

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Rec 7	To ensure that lessons from patient complaints and comments are disseminated amongst all staff caring for older people in Fareham & Gosport and East Hampshire PCTs	<ul style="list-style-type: none"> requirements into PCT training delivery programmes – April 2003 Carry out an audit of the quality and legibility of prescribing notes to facilitate discussions between medical staff/GPs - audit by April 2003 	Cameron		
		<ul style="list-style-type: none"> Action and learning points from complaints to be included in PCT Quality Newsletter SEQUAL in East Hants PCT - from Oct 2002 	Fiona Cameron	Audit against current guidelines underway. Report due end March 03	✓
		<ul style="list-style-type: none"> All complaints and lessons learned to be fed through Service Clinical Governance Groups in East Hants PCT - in place 	Sue DK	System in place	✓✓
		<ul style="list-style-type: none"> Review Complaints Policy in Fareham & Gosport PCT - by Dec 2002, and provide training to support implementation of new policy - by March 2003 	Sue DK	System in place. This will form the basis of monthly analysis data.	✓✓
		<ul style="list-style-type: none"> Representatives from Service Clinical Governance Groups to continue to share lessons at team meetings - ongoing 	Fiona Cameron	New complaints policy developed. Initial launch training underway – two events at GWMH	✓✓
		<ul style="list-style-type: none"> Action plans generated from each complaint in Fareham & Gosport PCT 	Sue DK/Fiona Cameron	In place. Community Hospital network established pan PCT	✓✓
			Fiona Cameron	Draft paper setting out proposed new arrangements developed and being piloted.	✓

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Rec: 8	To ensure that nursing and other relevant staff at Gosport War Memorial Hospital are appropriately trained to undertake swallowing assessments to enable patient care needs to be met across the 24-hour period.	<p>to be monitored through Quarterly Service Review process until action completed by Service Managers – October 2002</p> <ul style="list-style-type: none"> ▪ Engage Speech and Language Therapy in providing additional training programmes - to commence early October 2002 ▪ Initiate an audit to assess the impact of training and to identify unmet need - by March 2003. ▪ Implement agreed action plan arising from audit findings - by October 2003 	<p>Fiona Cameron</p> <p>Fiona Cameron</p>	<p>All qualified staff now trained in initial assessment. Programme of broader training commenced on three levels</p> <p>Level 1: Four qualified nurses will be trained via a competency-based model by the speech & language therapists. Two of these nurses will be from Daedalus, one from Sultan and one from Dryad, with a view to their supporting the speech and language team in the further training of other staff. This training will commence on 27th January 2003.</p> <p>Level 2 relates to all other qualified nurses in community hospitals. Again, it will be competency based and assessed by either speech and language therapists or the four nurses identified above.</p> <p>Level 3 is for all health care support workers. Again, this will be provided by the four nurses in Level 1 and by speech and language therapists.</p>	<p>✓✓</p>
Rec: 9	To review and clarify the role of the Activities Co-ordinator at Gosport War Memorial Hospital	<ul style="list-style-type: none"> ▪ Widen the membership of the Activities Co-ordinator Working Group to include patient / relative, medical and pharmaceutical staff representation - by December 2002 ▪ Review the need for the Activities Co-ordinator role 	<p>Fiona Cameron</p> <p>Fiona Cameron</p>	<p>Job description developed and consultation has taken place with GNP advisory group. Further consultation in early April with patients and relatives via focused meeting. Recommendations due end April in option form</p> <p>Task undertaken</p>	<p>✓✓</p> <p>✓✓</p>

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Rec: 10	Hospital To ensure clinical practice relating to continence management, nutrition and hydration are in line with the standards set out in 'Essence of Care' at Gosport War Memorial Hospital	Activities Co-ordinator role to be used in specific ward areas and recommend a way forward - by April 2003			
		<ul style="list-style-type: none"> ▪ Re-launch 'Essence of Care' a standard with nursing and other profession leads - by November 2002. ▪ Undertake an audit and analysis of compliance against national standards and identify a plan of action to implement standards - by March 2003. ▪ Identify a lead/link nurse for each care standard area - by March 2003 	Fiona Cameron	Successful re-launch over 4 workshops 7 th & 20 th March 03	✓✓
			Fiona Cameron	Retrospective audits complete. Actions arising have been incorporated into the re-launch of the Standards.	✓✓
Rec: 11	To ensure that communication developments with staff working in community hospitals are continued in both	<ul style="list-style-type: none"> ▪ Feedback CHI action plan and progress reports through regular meetings with staff – ongoing 	Fiona Cameron / Sue DK	Link nurse s to be identified from March 2003 workshops	✓
		<ul style="list-style-type: none"> • Implement PCT Communications Plan in East Hants PCT – from 	Sue DK	Cascade system established via existing team meetings Completed	✓✓ ✓✓

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Rec: 12	Fareham & Gosport and East Hampshire PCTs To determine the best way to improve communication with older patients and their relatives /carers	September 2002	Sue DK/Fiona Cameron	Community hospital Clinical Reference Group reviewed and terms of reference agreed.	✓✓
		Finalise internal communications improvements in each PCT – by December 2002.	Noreen Kickham / Kathryn Rowles	Approved by PCT Board at January 2003 public meeting - implementation now underway	✓✓
		Produce draft outline Patient and Public Involvement Strategy, incorporating staff communications in Fareham & Gosport PCT by January 2003	Fiona Cameron	Completed	✓✓
		Review Nurses Directory in Fareham & Gosport PCT – by March 2003.	Noreen Kickham / Kathryn Rowles	PALs Co-ordinator working through Heads of Service at Gosport WM Hospital to establish robust PALS presence/understanding with staff. Draft patient information leaflets to be available by end of March and draft referral protocols under consultation.	✓
		Fareham and Gosport PCT to develop a process for consulting with key local organisations/user groups in relation to older people in conjunction with PALS Co-ordinator - by March 2003	Fiona Cameron	All ward information reviewed and front sheet generated to provide factual information re services at GWMH.	✓✓
Ensure information about services at Gosport War Memorial Hospital is available at Queen Alexandra Hospital, St Mary's Hospital and RH Haslar for patients and families prior to transfer. Information leaflets to be prepared - by end March 2003.					

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Rec: 13	To review 'Out of Hours' medical cover to Daedalus, Dryad and Sultan wards at Gosport War Memorial Hospital	<ul style="list-style-type: none"> ▪ Follow-up of actions arising from the communication audit undertaken by the Community Health Council – by March 2003. 	Fiona Cameron	Awaiting final report	✓
		<ul style="list-style-type: none"> ▪ Review the "Living with Bereavement" booklet – by March 2003 	Fiona Cameron	Group established and work progressing	✓
		<ul style="list-style-type: none"> ▪ Review and renew the 'Out of Hours' contractual agreement for medical cover on consultant led Dryad and Daedalus wards – by December 2002 	Fiona Cameron	Ongoing review process in place	✓✓
		<ul style="list-style-type: none"> ▪ Review the admissions criteria for GP led Sultan ward - by September 2002 	Fiona Cameron	See Recommendation 2 - ongoing review to meet services changes	✓✓
		<ul style="list-style-type: none"> ▪ Develop/implement alternative models of 'Out of Hours' Service Delivery - by January 2003 	Fiona Cameron		
Rec: 14	To ensure appropriate patients are admitted to Gosport War Memorial Hospital and receive appropriate levels of support.	<ul style="list-style-type: none"> • Review the admissions policy for Sultan - by September 2002 and for Dryad and Daedalus wards – by December 2002 	Fiona Cameron / Ian Reid	Formal review of Dryad and Daedalus criteria underway.	✓
		<ul style="list-style-type: none"> • Undertake audit of patients admitted to Daedalus, Dryad and Sultan Wards to determine the appropriateness of 	Fiona Cameron / Ian Reid	On target	X

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Rec: 15	To establish arrangements in Fareham & Gosport PCT to ensure strong, long-term nursing leadership on all wards at Gosport War Memorial Hospital	admission against new admissions policy Sultan Ward 2002, Daedalus & Dryad – by June 2003			
		<ul style="list-style-type: none"> ▪ Establish a 6 month secondment Practice Development post facilitate leadership developments in Gosport War Memorial Hospital – by September 2002 	Fiona Cameron	Achieved	✓✓
		<ul style="list-style-type: none"> ▪ Establish nursing reference groups that will identify and implement clinical support processes in conjunction with Practice Development postholder - by December 2002 	Fiona Cameron	In place	✓✓
		<ul style="list-style-type: none"> ▪ Develop PCT Nursing Strategy 	Fiona Cameron	Work plan generated to take this forward	✓
		<ul style="list-style-type: none"> ▪ Establish an implementation group to support delivery of PCT nursing strategy – by December 2002. 	Fiona Cameron	In place	✓✓
		<ul style="list-style-type: none"> ▪ Evaluate the Gerontological Nursing Programme - by November 2002 	Fiona Cameron	Evaluation report now available	✓✓
Rec: 16	Develop local policy guidance in	<ul style="list-style-type: none"> ▪ Develop guidance for using GPs as Clinical Assistants to inform 	Jane Parvin/Ian Reid	Draft guidance produced.	✓

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Rec: 17	relation to GPs who work as Clinical Assistants in Community Hospitals in Fareham and Gosport PCT. To ensure arrangements are in place for continued learning and monitoring of action arising from complaints across Fareham & Gosport and East Hants PCTs	personnel policy and employment practice - by March 2003			
		<ul style="list-style-type: none"> Utilise Service Review process and bi-annual hosted services review arrangements to oversee monitoring of trends and action taken in relation to complaints 	Ian Piper / Tony Horne	In place	✓✓
		<ul style="list-style-type: none"> Complaints trends and actions shared through Clinical Governance Committees and Quarterly Quality report – in place in East Hants PCT 	Fiona Cameron / Sue DK	Achieved and ongoing	✓✓
		<ul style="list-style-type: none"> Set up PCT Complaints Panel in East Hants PCT – by Oct 2002 	Sue DK	Achieved	✓✓
		<ul style="list-style-type: none"> Review Complaints Policy and develop complaints action plan in Fareham & Gosport PCT - by March 2003 	Fiona Cameron	New complaints policy developed. Complaints action plans in operation.	✓
<ul style="list-style-type: none"> Develop mechanism for sharing lessons learnt from complaints across both organisations, which 	Sue DK / Fiona Cameron	Pan PCT group involving Heads of Quality and Risk Managers established	✓✓		

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Rec: 18	To ensure all staff on Dryad, Daedalus and Sultan attend customer care and complaints training, which are developed with patients, relatives and staff	<ul style="list-style-type: none"> are timely and effective – by March 2003 Develop comprehensive complaints and customer care training programme for staff that links to the PALS and induction training programmes – March 2003 Ensure that all medical staff can demonstrate that they continue to improve their communication skills through their Continuous Professional Development programme – medical staff aware of this requirement by April 2003 	Sue DK / Fiona Cameron	Initial customer care training with Heads of Departments and Clinical Managers at GWMH	✓
			Ian Reid	To be taken forward through medical staff appraisal process. Ian Reid agreed to liaise with the Local Medical Committee Chief Executive re: GPs	X
Rec: 19	To ensure clinical governance developments are fully maintained and supported within Fareham & Gosport and East Hants PCTs	<ul style="list-style-type: none"> Implement Quality Strategy and annual action plans in East Hants PCT – ongoing Produce a Clinical Governance Framework/Action Plan for Fareham and Gosport PCT – by January 2003 Produce a Quality Development Plan for Fareham and Gosport PCT – by September 2003 Ensure clear PCT structures and accountabilities for Clinical 	Sue DK	Established	✓✓
			Fiona Cameron	Draft framework and development produced	✓
			Fiona Cameron	On target	X
			Ian Piper / Tony Horne	In place - ongoing development underway	✓

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Rec: 20	To ensure all staff are aware of the requirement to complete risk and incident reports	Governance - in place	Sue DK / Fiona Cameron	Audit completed in East Hants PCT - on target in Fareham & Gosport	✓
		• Audit current reporting mechanisms to test robustness – by March 2003	Ian Reid/ Fiona Cameron / Sue DK	Risk/Incident reporting now in Induction for staff in Fareham & Gosport	✓
		• All staff, including medical staff, are trained in the completion of risk management forms and basic risk management & awareness – ongoing	Ian Reid/ Fiona Cameron / Sue DK	Ian Reid to liaise with consultant colleagues to progress	XX
		• Risk management training for junior doctors and new medical staff on induction - from January 2003	Fiona Cameron	Risk and Incident forms re-launch commenced in GWMH	✓
Rec: 21	To ensure systems are in place to identify and monitor trends revealed by risk reports and action is taken	• Re-launch risk incident forms in Fareham & Gosport PCT - by March 2003	Fiona Cameron / Sue DK	Achieved	✓✓
		• Further develop the current quarterly quality reporting mechanism in East Hants PCT to make explicit action taken and lessons learned – from October 2002	Fiona Cameron / Sue DK	Pan PCT mechanism in place	✓✓
		• Agree process for cross organisational reporting and sharing lessons/ learning lessons – by March 2003	Fiona Cameron	Ongoing	✓
		• Review quarterly quality reporting mechanism in Fareham & Gosport PCT -			

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Rec: 22	To ensure 'Whistle Blowing' policies across Fareham & Gosport and East Hants PCTs enable staff to raise concerns outside normal management channels	by March 2003			
		<ul style="list-style-type: none"> Develop an audit trail to identify any gaps in the current system – by June 2003 	Sue DK / Fiona Cameron	On target for completion	X
		<ul style="list-style-type: none"> Implement recommendations as a result of audit - by September 2003 	Sue DK / Fiona Cameron	On target for completion	X
		<ul style="list-style-type: none"> Work with Joint representative committee to review policy 	Jane Parvin	Development of new policy to be agreed through workshop involving all three PCTs and Portsmouth Hospitals Trust - workshops at planning stage	✓
		<ul style="list-style-type: none"> Redefine "whistleblowing" to gain greater acceptance amongst staff. 	Jane Parvin		✓
<ul style="list-style-type: none"> Revise and approve - by June 2003 	Jane Parvin	✓			
<ul style="list-style-type: none"> Establish a programme for investigation officer training 	Jane Parvin	✓			

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