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HEALTHCARE COMMISSION CLINICAL GOVERNANCE REVIEW

FAREHAM AND GOSPORT PCT

ACTION PLANNING WORKSHOP 8^{TH} JULY 2004

FACILITATORS GUIDE

Dear

Thank you for agreeing to facilitate group Attached is an outline programme for the workshop, a list of group members and the format for the action plan. In addition there is a list of 'points to consider', taken from the report which may help to focus some of the groups' discussion.

The overall aim of the workshop is to identify the actions the PCT needs to take to comply with the recommendations in the report, including the means by which the PCT will measure its progress against the identified actions.

It will be important to keep the group focused on the elements of the recommendation, where these are specific to ensure the group achieves its objective in the time available.

During the first group session the group should

- Look at the recommendation and clarify any questions re meaning (5 mins)
- Decide what things will look like when the recommendation has been achieved (25 mins)
- Identify gaps in terms of where the PCT is now (30 mins).

The second group session will concentrate on identifying the actions required to close the gap (1 hour).

I would be grateful if those of you facilitating groups would collate your groups responses on the formatted flip chart provided.

Each facilitator will then be asked to feedback the **top** three four actions required to achieve the recommendation and indicate both timescales and accountability where this is possible/appropriate.

What are the key areas of action that the PCT needs to address to improve its clinical governance systems?

RECOMMENDATION 1

The PCT needs to continue developing systems and processes to ensure patients receive good quality care. It needs to ensure these systems are integrated across all primary and community healthcare services including those provided by GPs, dentists, optometrists and pharmacists.

RECOMMENDATION 2

The Professional Executive Committee, the committee that involves clinicians in strategic decision making, needs to get better involved in making sure systems and processes exist to ensure patients receive good quality care.

Key Areas For Action

- Development of systems and processes to ensure patients receive good quality care.
- Integration of these systems across community and contractor services.
- Involvement of the PEC in

- The PCT needs to continue implementing the action plan for patient and public involvement and embed patient and public involvement at all levels of the organisation.
- The PCT should continue to develop the adverse incident form and encourage staff in primary and community care to use it to ensure a consistent approach to risk management in primary and community care.
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- The PCT needs to continue to work with staff to ensure they feel supported and protected against bullying and harassment, and monitor the impact of interventions.
- The PCT should continue working to improve safety for all staff.
- Mechanisms for coordinating and planning education and training need to be strengthened and the PCT needs to develop an education strategy and an annual training plan and ensure they are linked to workforce planning, relevant areas of clinical governance and PCT priorities.
- The PCT needs to continue working with GPs to improve waiting times to see a GP.
- The PCT needs to continue developing its workforce planning to support future service developments.

What are the key areas of action that the PCT needs to address to improve its clinical governance systems?

RECOMMENDATION 3

Action needs to be taken to develop a coordinated approach to carrying out audits of clinical work. Clinical audit systems and processes need to be linked to other clinical governance systems and processes, such as those for risk management and staff management.

Key areas for action

- Coordination of audit of clinical work
- Audit linked to other clinical governance systems and processes.

- The PCT needs to continue developing a coherent and systematic approach for planning, monitoring and reporting audit, to enable it to prioritise and ensure the audit cycle is completed.
- The PCT needs to continue working to integrate audit activity in other components of clinical governance.
- The current list of audits for 2002/2004 needs to be reviewed and updated.
- Action needs to be taken to develop systems for disseminating results from audits to ensure learning takes place and good practice is shared across primary and community care.
- The PCT needs to ensure there is sufficient support for staff wishing to undertake clinical audit.
- The PCT needs to promote training in audit skills for relevant staff.
- The PCT needs to develop and implement a clinical effectiveness strategy.
- Action needs to be taken to ensure there is a clear process for implementing, monitoring and sharing evidence-based practice.
- The PCT needs to implement clinicial effectiveness work and link it to the audit programme to ensure it is evaluated.
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- Further work is required to improve the systems for evaluating the effectiveness training and education

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RECOMMENDATION 4

Information systems and the use of information need to be improved to help clinicians develop services and give good quality patient care.

Key Areas for Action:

- Improve information systems and use to develop service.
- Improve information systems and use to support good quality care.

You may also want to consider the following points when developing actions.

The PCT needs to approve and develop an action plan to implement the ICT strategy.

Action needs to be taken to improve the use and quality of information to inform the development of services.

Action needs to be taken to address the variability of staff access to information technology.

The PCT needs to ensure staff attend training on confidentiality and data protection.

What are the key areas of action that the PCT needs to address to improve its clinical governance systems?

RECOMMENDATION 5

The PCT needs to continue to develop and incorporate quality indicators into its service level agreements with acute trusts so that it can monitor the quality of services that the acute trust provides to patients living in the PCT's area.

Key areas for action:

- Develop quality indicators for acute providers.
- Develop monitoring mechanism.
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You may also want

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What are the key areas of action that the PCT needs to address to improve its clinical governance systems?

RECOMMENDATION 6

The PCT needs to continue to develop its medicine management strategy and prescribing monitoring framework.

Key Areas for Action

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Healthcare Commission's Clinical Governance Review

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