

# Action Plan for Northwick Park Hospital, North West London Hospitals NHS Trust, Undermining Check 2014/15

## Requirements

Report Ref	Due Date	Description	Action taken by LEP/ LETB / Deanery to date	Further action planned by LEP/ LETB / Deanery	Timeline for action (month/year)	LEP/ LETB / Deanery lead
1	Next scheduled report to the GMC	The Trust must implement more structured and formalised multi-professional handover arrangements in the obstetrics and gynaecology unit, such as the Situation Background Assessment Recommendation framework. There must be consistent presence by consultants and midwives during handover to ensure doctors in training have appropriate support and advice and to improve the educational value of this process. This needs to be urgently addressed by the Trust. (TTD Standard 1.6)	LW co-ordinator and senior midwives attend handover Attendance registers are kept at LW handover meetings and a template used for theatre team brief. A process has commenced to implement change which was discussed at clinical governance meeting and consultant meeting in March 2015. At these meetings the following was agreed: - The present system of multiprofessional handover needed to include the midwives ( As per the CQC findings) - Timings of handover needed further discussion to ensure handovers for gynae also matched obstetric handover.	Implement process discussed at Clinical Governance and consultant meetings to effect requirement. Adopt structured handover documentation (as per theatre team brief) using SBAR format. Archiving of SBAR handover documentation to be finalised.	August 2015	Bosko Dragovic Interim Clinical Director. Asra Saleem College Tutor

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2	Next scheduled report to the GMC	The use of outdated terminology to describe doctors in training and rotas (for example, 'SHO') must cease to be used. All documentation, guidance and rotas should be reviewed to ensure that this terminology is removed. The Trust should refer to GMC guidance on clinical supervision. (TTD Standard 1.2)	Immediate change to documentations, such as rotas – was implemented after the visit. Department was made aware of the importance of this issue. Evidence, on Rotas. This was also discussed and minuted at the LEP faculty meeting	Continue high lighting importance of terminology to all staff groups to effect permanent change.	Completed	A Saleem College Tutor

## Recommendations

Report Ref	Due Date	Description	Action taken by LEP/ LETB / Deanery to date	Further action planned by LEP/ LETB / Deanery	Timeline for action (month/ year)	LEP/ LETB / Deanery lead
1	Next scheduled report to the GMC	The Trust should take steps to ensure consistent application of clinical guidelines by Consultants in the obstetrics and gynaecology unit to reduce tensions between some individual members of staff. (TTD Standard 6.33)	Cases of concern will be discussed at risk management and clinical governance meetings to high light this issue. Feedback to individuals will be the responsibility of the clinical director.	Continued emphasis on consistent application of guidelines – deviation needs to be clearly documented and explained to trainee.	Ongoing	Bosko Dragovic Interim Clinical Director

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2	Next scheduled report to the GMC	Doctors in training in obstetrics and gynaecology are expected to see any pregnant women and women with possible gynaecological problems in the emergency department to meet national waiting time targets. The Trust should urgently investigate the effect this is having on clinical prioritisation within the emergency department and timely review of patients in maternity services. (TTD Standard 6.32)	Request to discuss this issue at senior management level made by College Tutor. A proposed model for out of hours emergency service delivery to be presented at the senior management meeting.	Requirement for additional staffing assessment	Sept 2015	A Saleem College Tutor Bosko Dragovic Interim Clinical Director
3	Next scheduled report to the GMC	The Trust should introduce more opportunities for engagement and interaction between obstetrics and gynaecology consultants and the unit's leadership team to improve cohesion among the consultant body and improve the educational environment and culture within the department. (TTD Standard 6.33)	Change of clinical leadership took place on 1 <sup>st</sup> December 2014. New roles identified and work in progress to review patterns of working and cultural environment. Transparency encouraged. Regular consultant meetings have taken place since December. We have reinvigorated a regular timetable of Local faculty group (LFG) meetings addressing training environment.	Continue effective educational faculty meetings. Address education at senior departmental meetings.	Quarterly review	Bosko Dragovic (ICD) Rosemary Heed (DGM) Asra Saleem (CT)

## Good practice

Report Ref	Due Date	Description	Details of dissemination (across LEPs within or outside the LETB/deanery)	Any further developments planned to enhance the area of good practice	Timeline for action (month/ year)	LEP/ LETB / Deanery lead
1	Next scheduled report to the GMC	The vision and education focus of the Chief Executive, Director of Medical Education (DME) and the senior management team means that there is good senior engagement with education and training matters and the Trust's postgraduate education department is well supported. (TTD Standard 2.2, Standards for Deaneries 5.1)	The CEO and DME have regular meetings with the Trust Liaison Dean	The current CEO retires at the end of March and a new CEO appointed to commence 1 April 2015. The DME will continue to foster this relationship with the new CEO. The HENWL Dean has extended an invitation to meet the new CEO once she has settled into post	October 2015	Roger Sharpe (DME)
2	Next scheduled report to the GMC	Doctors in training are very positive about the quality of experience in the obstetrics and gynaecology unit. They are well supported and supervised by consultants, midwives and the labour ward team, with excellent educational opportunities offering broad clinical exposure and experience. (TTD Standard 5.1, 6.11 and 6.17)	LEP management meeting-good practice declared at last meeting on 30 <sup>th</sup> January. Reiterate at next meeting on 20 <sup>th</sup> May.	Areas of good practice are also disseminated through regular LEP faculty meetings at which all College Tutors/educational leads are invited to attend. We will continue to monitor this feedback through the NTS and local surveys.	20 May 2015	A Saleem (CT)