

Keith Thomson  
Chief Executive  
Pembrokeshire and Derwen NHS Trust

Eich cyf . Your ref  
Ein cyf . Our ref

8 November 2006

Dear Keith

**HEALTHCARE INSPECTORATE WALES (HIW) REVIEW OF PEMBROKESHIRE AND DERWEN NHS TRUSTS PROGRESS AGAINST THE COMMISSION FOR HEALTHCARE IMPROVEMENT (CHI) ACTION PLAN.**

I write further to Healthcare Inspectorate Wales' recent review of Pembrokeshire and Derwen NHS Trust's progress against the action plan prepared following publication of the CHI report in March 2004.

We found that the Trust has made good progress in taking forward the recommendations made by CHI and in implementing the agreed action plan. The review team found the Trust to have given careful consideration to the recommendations made and the impact that they have on the organisation. It was clear that there has been close consultation with staff and partners to ensure that the Trust's responses were appropriate and timely. Specifically the HIW review team considered the Trust to have:

- Clear Strategic direction in terms of the development of policies and systems relevant to the CHI recommendations.
- Significantly raised the profile of Mental Health and Learning Disability services.
- Improved IM&T systems.
- Good working relationships with the local LHBs. In particular we noted the planned secondment to Pembrokeshire LHB, as an excellent approach to developing improved understanding of the roles and interface issues related to mental health services.
- Well developed incident and risk management systems

We considered the Functional Analysis of the Care Environment project (FACE) and measures put in place to meet the communication needs of deaf and blind patients accessing acute services to be excellent examples of initiatives focused on improving the patients experience.



In addition the Trusts positive work in relation to the management of unscheduled care is worthy of note.

There are a few areas where progress has been slower which the Trust now needs to address, specifically:

- Links between clinical governance and the modernisation agenda need to be made clear and elements of clinical governance such as PPI and the patient experience must be fully integrated and equally resourced under any new arrangements (Recs. 1 & 2).
- PPI should be mainstreamed across all divisions and all staff included in PPI training programmes. The Trust also needs to consider how it is going to evaluate and evidence the outcomes and benefits of PPI activity given the disparate nature of its current systems. (Rec. 3). Additionally, the Trust should ensure that the patient's voice is heard when taking strategic decisions forward.(Rec.9).
- Consistency in the way patients are involved in their care should be ensured across all divisions and directorates. (Rec. 4)
- Working with its partners the Trust should develop closer alignment of collegiate commissioning agreements with direct patient care options and decisions (Recs. 7 & 8).
- Steps should be taken to ensure an increased uptake up of opportunities for Welsh Language training (Rec. 5)
- Equal access to computers should be ensured for all clinical staff (Recs. 5, 6, 11).
- Staff at operational level should be provided with timely and specific feedback in relation to reported incidents.(Rec. 10).
- Equity of access to training and development opportunities across all divisions and directorates should be assured. (Rec. 11).
- Progress work to ensure equity of access to and the quality of section 12 (2) doctors across the three counties (Rec. 12.)

Further details of the progress made against the 12 recommendations made by CHI are set out in the attached Appendix. These have been drawn from your self assessment submission and the findings arising from our review of the documentary evidence and the site visit that took place between 25 and 27 September 2006.

If you have any queries relating to factual accuracy of this response then please would you contact Lesley Simpson, Inspections Manager on 02920 928862 to discuss this. If we do not hear from you by 10 November we will assume you are happy with the review of progress against the CHI action plan and this letter and Appendix will be placed on the HIW website.

Once the letter and Appendix have been posted on the HIW website, the Trust should prepare a response based on the recommendations made within the letter.

- The response should be approved by your Board and returned to us within 6 weeks of receipt of our letter.
- Final sign off of your Action Plan will then be agreed jointly between HIW, the Trust and the Mid and West Wales Regional Office.
- The Regional Office will then monitor progress against the agreed Action Plan as part of its routine performance management arrangements.

We believe this will conclude the process, however, should any issues remain unresolved at this time we will be happy to discuss them. May I take this opportunity to thank you and everyone at the Trust for your assistance with this review.

I am copying this letter to Caroline Oakley, Director of Nursing.

Yours sincerely

**DR PETER HIGSON**  
Chief Executive