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| **Agency\Organisation responsible** | **Recommendation** | **Response** |
| **Welsh Government** | **Recommendation 1**  1. that the residential and nursing care home sector:   1. becomes *a sector of primary national strategic importance* for Wales, recognising that low investment in the social care system means higher costs for the National Health Serviceand affects economic potential by failing to support a modern and trained labour force 2. is shaped by explicit policies to regulate and allow intervention in the social care ‘market’ to improve the quality of care by directly addressing issues such as pay and working conditions, staffing levels and the knowledge and expertise of commissioners of publicly funded services 3. (iii) care home managers are registered and are members of a professional body which   sets professional standards, has disciplinary powers and provides them with a voice  on national policy and   1. (iv) develops credible quality indicators to inform strategic planning for health and   social care | Please see attached Written Statement |
| **Welsh Government** | **Recommendation 2**  **2.** thatthe Welsh Government, in association with **Public Health Wales**, ensures that:   1. the significance of deep pressure ulcers is elevated to that of *a notifiable condition* 2. senior clinicians, including Registrars, General Practitioners and Tissue Viability Nurses, assume a lead role in preventing avoidable pressure ulcers and in developing a National Wound Registry, assisted by the **Welsh Wound Innovation Centre** 3. senior clinicians are made responsible for notifying **Public Health Wales** of deep pressure ulcers and 4. where **Public Health Wales** has been informed of the existence of deep pressure ulcers, a process is identified whereby that information is communicated to the **Care and Social Services Inspectorate Wales** or the **Healthcare Inspectorate Wales** and appropriate commissioning authorities as well as to people’s families | Please see attached Written Statement |
| **Welsh Government** | **Recommendation 3**  **3.** the **Protection of Vulnerable Adults** (POVA) process:   1. defines more narrowly and specifically its functions 2. strengthens protective outcomes for individuals where there is an allegation or evidence that harm has occurred, by ensuring that either a care assessment or a review of that individual’s care plan is undertaken. The outcome of the process should be specific action rather than simply a determination of, for example, *institutional abuse* 3. ensures that the NHS is accountable for fulfilling its lead responsibility for investigating such major and potentially lethal conditions as deep pressure ulcers in the residential and nursing care sector | Please see attached Written Statement |
| **Gwent Coroner** | **Recommendation 4**  **4.** Inquests should be held, notwithstanding the fact that the deaths of **Stanley Bradford**, **Megan Downs**, **Edith Evans**, **Ronald Jones**, and others known to the Coroner, have already been registered | Response dated 21 August 2015    Response dated 29 September 2015 |
| **Gwent Police** | **Recommendation 5**  **5. Gwent Police** provides the families of older people in the six homes included in Operation Jasmine with the information prepared by members of the expert panel and ensures that they are supported during and after this process | Response dated 15 July 2015    Response dated 25 September 2015 |
| **Welsh Government** | **Recommendation 6**  **6. NHS Wales** considers how the responsibility for reporting hospital deaths to the Coroner is undertaken by senior clinicians and considers the need for a legal presumption in favour of reporting the deaths of residential and nursing home residents to the Coroner | Please see attached Written Statement |
| **General Medical Council (GMC):** | **Recommendation 7**  **7. General Medical Council (GMC):**   1. collaborates with NHS Wales to identify ways in which conflicts of interest can be managed that arise from the admission of patients of General Practitioners and other GMC registrants (hospital consultants, for example) into residential and nursing homes in which such doctors are company directors, or are related to the directors of these homes 2. ensures that all General Practitioners and other GMC registrants are informed about what constitutes a conflict of interest and how to manage this in practice. Given that declaring a conflict by itself would have been an inadequate safeguard given the findings of this Review, the GMC may wish to consider the specific example of clinicians owning nursing and care homes 3. considers in its review of the Medical Register, the potential for recording information on declared conflicts of interest | Response dated 24 August 2015 |
| **General Medical Council (GMC)**  **Nursing and Midwifery Council (NMC** | **Recommendation 8**  **8. General Medical Council (GMC)** and the **Nursing and Midwifery Council (NMC)** consider the need for continuing reform to ensure that fitness to practise proceedings are conducted as quickly as practicable, while maintaining their primary purpose of protecting the public | General Medical Council (GMC) response dated 24 August 2015    Nursing and Midwifery Council (NMC) response dated 4 September 2015 |
| **Director of Public Prosecutions** | **Recommendation 9**  **9. Director of Public Prosecutions** refers the Operation Jasmine Investigation to the Special Crime and Counter Terrorism Division (formerly known as the Special Crime Division) of the Crown Prosecution Service | Response dated 31 July 2015 |
| **National Police Chiefs’ Council** | **Recommendation 10**  **10**. the **National Police Chiefs’ Council** ensures that the primacy of a police investigation delivers the ability of (a) the **Care and Social Services Inspectorate Wales** and (b) professional regulators, such as the **GMC**, the **NMC** and the **Care Council for Wales (CCW)** to take forward civil and criminal action; and address concern about alleged fitness to practise within a defined time frame | Response dated 9 September 2015 |
| **National Police Chiefs’ Council** | **Recommendation 11**  **11.** the **National Police Chiefs’ Council, the Health and Safety Executive, the Care and Social Services Inspectorate Wales** and the professional regulators share what has been learned as a result of this Review and collaborate to specify and confirm the components of a framework for undertaking timely team and parallel action in future | Response dated 9 September 2015 |
| **Law Commission** | **Recommendation 12**  **12.** the **Law Commission** reviews the current legal position in relation to private companies with particular relevance to the corporate governance of the residential and nursing care sector | Response dated 23 September 2015 |