

Team Brief: March 2012

Subject	Content	Action	Feedback communications@ shropcom.nhs.uk
Service Delivery			
Service Delivery News	<p style="text-align: center;">News In Brief from the Service Delivery Directorate</p> <ul style="list-style-type: none"> • Rachael Dain (Community Nurse from Bridgnorth) has been seconded for a three-month period as Pressure Relieving Equipment Review Advisor. This is a CIP scheme initiated due to the large amount of equipment being issued from Community Equipment Store e.g. high specification mattresses where patients have not been re-assessed. The pilot will identify potential cost savings and a way forward for re-assessments becoming routine practice • The refurbishment programme at Lancaster Road in Shrewsbury is near completion. The premises, which currently accommodate wheelchair services and Shropshire Enablement Team, offer much improved accommodation, including an increase in clinic and consulting rooms, a physiotherapy area and patient rehabilitation kitchen facilities. There is potential for increasing activities within the building for other rehab related services in the future if needed. • Andrea Davies has started as Continecne Team Leader within the Trust (as of 1 April). Interim management arrangements for the south east and Telford and Wrekin locality are in-place, and are being led by Karen Taylor. • The Winter 9 project (which was launched in December throughout the Trust) has now come to an end. An evaluation workshop took place in early March to review the project, its successes and the views of patients too. The feedback is being collated by the project commissioning lead and will be shared with stakeholders in the near future. 	No specific actions, though please pass this information on to colleagues who may not have attended your team meeting/ briefing.	
Update on Ludlow Health	New Ludlow Hospital and GP Practices Close to Becoming a Reality	More information about the Ludlow Project will be	

<p>Facility</p>	<ul style="list-style-type: none"> • After six years of hard work by interested local groups and the NHS working together, we are now just one step away from the final go-ahead for the new health facility in Ludlow and south west Shropshire. Plans for the building, including the new hospital and two Ludlow GP surgeries at the Eco Park site, are well advanced, and are on track for final planning approval to be gained so that building can start this summer. • This is an amazing opportunity at a time of general public austerity, to secure the last stage of approval for a building which will bring major benefits to very many people for years to come, by making more services available locally. • There have been some concerns raised again recently by a small number of people about the transfer of the GP practices out of the town centre to the Eco Park, to be alongside the new hospital. The funding and location of GP practices are the responsibility of the PCT, and we have been working with the PCT and Clinical Commissioning Group to respond to the concerns, which have been raised and dealt with before in the public consultations. • It's recognised that the Eco Park location will be less convenient for some people in the town centre who can walk to their GP now, but overall, the new development will provide a much greater benefit for many more people across the broad area of Ludlow and south west Shropshire 	<p>made available via <i>Inform</i> – watch out for more information</p>	
<p>Help2Quit</p>	<p style="text-align: center;">H2Q Client Tells Their Story</p> <ul style="list-style-type: none"> • A Help2Quit client told her story of giving up smoking at the recent Trust Board meeting. She had been to see her GP due to experiencing problems with her asthma. She had smoked for 17 years, and smoking made her condition worse. Her GP referred her to Help2Quit. • Whilst the first week seemed really hard, she wasn't sure if she could quit and her carbon monoxide reading was 30. By the second week her carbon monoxide reading had reduced considerably and she had found the telephone support service and regular meeting a great help to achieving her goal. • The client has now been a non-smoker for 7 months and considered it to be the best thing she had ever achieved. She has recommended the service to many of her 	<p>Any member of staff who would like to stop smoking, or who would like to signpost their patients to help to stop smoking, then please call the Help2Quit team on 01743 366940.</p>	

	<p>friends and family and is now an avid non-smoker and thought that the habit was disgusting, too expensive and anti-social. She was keen to highlight how vital the support of the team was to getting her to achieve her goal of giving up smoking. She was also now clear with her children about the benefits of not smoking.</p> <ul style="list-style-type: none"> • The Help2 Quit service operates an open referral system which is county wide, providing a 12 week course to patients in a variety of locations eg. GP surgeries, pharmacies, hospitals, village halls and home visits if required. • The Trust Board thanked both the client and the Help2Quit team for their hard work and success. 		
Developments in the Trust			
<p>Transformational Change Funding Bids</p>	<p style="text-align: center;">Update on Applications Put in for Additional Funding</p> <ul style="list-style-type: none"> • During February the Trust put in several applications to local commissioners (the two Clinical Commissioning Groups) for a share of 2% of non-recurrent money available across the West Mercia area for projects that encourage transformational change of services • The Trust developed business cases for several projects, including one for funding the Trust to become a site of innovation and best practice in eliminating pressure ulcers; two that focus on transforming care of the frail and elderly and patients with long term conditions; one that focuses on developing a specific 'transformation' team to help support the Trust in redeveloping services and one that focuses on the Ludlow Health Facility programme of work. • The Trust is currently still waiting to find out the outcome of the funding requests and will update staff on the results as soon as we can. 	<p>Information on the success of our bids will be made available to the Trust via a future edition of Team Brief... <i>watch this space.</i></p>	
<p>Equality and Diversity Event</p>	<p style="text-align: center;">Update from Workshop Session</p> <ul style="list-style-type: none"> • An Equality and Diversity workshop session was held on 22 March which included around 70 people and representatives from around 25 different equalities groups from around the county, as well as NHS staff members. The groups that took part, 	<p>Staff will be updated as to how they can get involved in Equality and Diversity work</p>	

	<p>included:</p> <ul style="list-style-type: none"> ○ Shropshire Wheelchair User Group ○ Taking Part ○ Telford and Wrekin Senior Citizens Organisation ○ Shropshire Bangladeshi Welfare Society ○ Shropshire Humanist Group <p>An important point made on the day is that “equalities groups” isn’t about “other people” – it covers all of us and whether services work well for us regardless of our gender, age, disability, ethnic background, sexual orientation etc.</p> <p>The attendees were asked to describe their experience of using our services as a patient or carer, or of working in them as a staff member. Through working with the groups on the day, the Trust has developed four priority areas for making improvements in Equality and Diversity, these are:</p> <ol style="list-style-type: none"> 1. To ensure that the Trust works with service users from equalities groups to ensure that we ask for their feedback on their experience as patients in relevant, acceptable ways that don't feel intrusive, and to ensure action plans are put in place. 2. To improve the impact of equality and diversity training and awareness for staff 3. To ensure that the Patient Engagement Group or Patient Council which the Trust is establishing includes representation from and links to the equalities groups. 4. To add benefit for patients by providing Trust staff with information about relevant local community and support groups, which staff can then signpost patients to. <p>Read more about the Trust’s Equalities work on the ‘About Us’ section of the Trust web site, and contact Julie Thornby, Director of Governance and Strategy, for more information</p>	<p>through future editions of team Brief and <i>Inform</i>.</p>	
<h2>News from the Trust Board</h2>			
<p>How We Are Doing – financial performance</p>	<p style="text-align: center;">Financial Performance of the Trust</p> <ul style="list-style-type: none"> • The Trust is on-course to meet its end of year financial targets for 2011/12 and the Trust Board has agreed budgets for 2012/13, starting on 1 April. 	<p>Staff are reminded that we are all working towards reduced funding in the NHS and are</p>	

	<p>Funding for 2012/13:</p> <ul style="list-style-type: none"> Like all Trusts, we are expected by our commissioners to make internal efficiencies and increase productivity each year. One aspect of this is that commissioners apply what is known as a 'tariff deflator' – reduce the money they pay to providers so providers meet that themselves through increased efficiency. For Shropshire Community Health Trust, this 'deflator' means that for 2012/13 we will be receiving 1.5% less from our local commissioners. Like other Trusts, we are working on a variety of Cost Improvement Plans (CIPs) for the 2012/13 financial year and also for the following financial year. All of the CIPs go through a process of being quality assessed to make sure that they do not have a negative effect on service quality. Maggie Bayley (Director of Nursing, Quality, AHPs and Workforce), and Dr Alastair Neale (Medical Director) both play a major role in reviewing the CIP proposals on patient safety grounds. 	<p>encouraged to reduce costs wherever they can.</p> <p>Updates on CIPs now and in the future will be communicated through Team Brief.</p>	
<p>How We Are Doing – service performance</p>	<p style="text-align: center;">Service Performance Headlines</p> <p>The Trust Board is given an update each month, on how well we are meeting our key targets. A summary of key headlines is below:</p> <p>The Trust is reporting green on all but one of its waiting time targets. Three of the targets have got worse from the previous months targets, including delayed transfers of care and 18 week referral to treatment times for admitted patients.</p> <p>Ethnic coding data (i.e. recording the ethnicity of the patient we see) continues to be reported as a red issue. We are below the 95% target (reporting 91.4% in December 11). Entering data onto the Lorenzo system within 21 days also continues to be a red issue.</p>	<p>Staff are encouraged specifically to make sure that they are asking patients for and providing all of the relevant coding information.</p> <p>This information really helps the Trust to identify how best we can develop services and reach certain target groups. Whilst it may seem like a 'tick-box' exercise, it is vital for the Trust, it's patients and</p>	

		services and for meeting our target requirements.	
How We Are Doing – Quality and Safety measure	<p style="text-align: center;">Quality and Safety Performance Headlines</p> <p>The Trust is reporting red on the majority of high impact actions and clinical safety indicators on the Trust Dashboard during December 2012. This includes the following measures:</p> <ul style="list-style-type: none"> • Reduction of sickness absence in nursing working to no more than 3% • Serious incidents (excluding pressure sores) • Grade 2 pressure sores • Grade 3/ 4 pressure sores <p>The Trust is reported as amber for complaints and green for preventing falls.</p>	Quality of services and patient safety remains the Trust's top priority. All staff are reminded that they should be following clinical guidelines and reporting incidents and near-misses as soon as possible on Datix.	
Other useful information / Policy Updates			
TV appearance for Trust specialist	<p style="text-align: center;">Date for Trust TV Appearance</p> <ul style="list-style-type: none"> • You will probably remember from a past edition of <i>Inform</i> that Joy Tickle (Trust Tissue Viability Nurse Specialist) was approached to help out the Channel 4 TV programme, Embarrassing Bodies, with a patient case. • The programme was aired on Channel 4 at 9pm on Monday 9 April. 		
NHS Health Bill	<p style="text-align: center;">Health Bill Passed by Lords and Commons</p> <ul style="list-style-type: none"> • After months of public debate, The Health and Social Care Bill gained Royal Assent to become the Health and Social Care Act (2012) during March. <p>The Act will:</p> <ul style="list-style-type: none"> • Officially introduce Clinical Commissioning Groups involving local GPs, taking over commissioning from PCTs which will come to an end in 2013. 	More information about the Health and Social Care Act (2012) can be found on the Department of Health website at www.dh.gov.uk	

	<ul style="list-style-type: none"> • Ensure a focus on integration: There will be strong duties on the health service to promote integration of services; • Strengthen public health: Giving responsibility for local public health services to local authorities aimed at ensuring that they are able to pull together the work done by the NHS, social care, housing, environmental health, leisure and transport services; • Give patients more information and choice: Patients will have greater information on how the NHS is performing and the range of providers they can choose for their healthcare. They will have a stronger voice through a new organisation working as patients' champion, with a national body called Healthwatch England and local Healthwatches in each local area. 																																		
<p>New or Updated Trust policies.</p>	<p>New Policies During February 2012</p> <p>The following policies have been approved and made available during February 2012.</p> <table border="1" data-bbox="465 820 1361 1366"> <thead> <tr> <th>POLICY</th> <th>NEW or REVIEWED</th> <th>STAFF</th> <th>PUBLIC</th> </tr> </thead> <tbody> <tr> <td>Assessment and Treatment of Alcohol Withdrawal Protocol</td> <td>NEW</td> <td>✓</td> <td></td> </tr> <tr> <td>Chloramphenicol Eye Drops 0.5% / Eye Ointment 1%</td> <td>NEW</td> <td>✓</td> <td></td> </tr> <tr> <td>Ibuprofen 200mg tablets & Ibuprofen Oral Suspension 100mg in 5ml</td> <td>NEW</td> <td>✓</td> <td></td> </tr> <tr> <td>Patient Group Directive for Levonelle Emergency Contraception</td> <td>NEW</td> <td>✓</td> <td></td> </tr> <tr> <td>Patient Group Directive for Lidocaine (lignocaine) Hydrochloride Injection 1%</td> <td>NEW</td> <td>✓</td> <td></td> </tr> <tr> <td>Patient Group Directive for Low-dose Diphtheria, Tetanus and Inactivated Polio Vaccine</td> <td>NEW</td> <td>✓</td> <td></td> </tr> <tr> <td>Patient Group Directive for Paracetamol</td> <td>NEW</td> <td>✓</td> <td></td> </tr> </tbody> </table>	POLICY	NEW or REVIEWED	STAFF	PUBLIC	Assessment and Treatment of Alcohol Withdrawal Protocol	NEW	✓		Chloramphenicol Eye Drops 0.5% / Eye Ointment 1%	NEW	✓		Ibuprofen 200mg tablets & Ibuprofen Oral Suspension 100mg in 5ml	NEW	✓		Patient Group Directive for Levonelle Emergency Contraception	NEW	✓		Patient Group Directive for Lidocaine (lignocaine) Hydrochloride Injection 1%	NEW	✓		Patient Group Directive for Low-dose Diphtheria, Tetanus and Inactivated Polio Vaccine	NEW	✓		Patient Group Directive for Paracetamol	NEW	✓		<p>For staff information</p>	
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	Patient Group Directive for Proxymetacaine 0.5% Eye Drops	NEW	✓				
	Protocol for use of homely remedies in Shropshire prisons	NEW	✓				