

Recommendation 7

Examples of Learning from events through PCT wide publications

The PCT originally developed a Quality newsletter SEQUAL which ran during 2001/2. Quality issues were then incorporated into the Echo magazine. The PCT has since developed an email learning lessons newsletter and is currently developing an electronic quality newsletter because of the number of articles and initiatives that need to be covered. The changes in approach have led to gaps in production and delivery. There are examples of all of these documents enclosed.

September 2001

SEQUAL

Welcome to the first edition of the Service QUALity section of the Newsletter. We hope that this will become an interactive page with feedback and discussion on the quality issues that matter most to you. This month we would like to introduce you to the trust team, our plans for the year and information on some relevant projects. So send in your comments and let us know what is happening in your areas of work...

The service Quality Team: WHO'S WHO!

The Service Quality team has been developed to bring together the functions of clinical and corporate governance for both provider services and commissioning. The role of the team is to provide support and advice to the Trust and individual services on quality and governance issues and to develop related programmes of work,



Dr Ian Reid – Trust Clinical Governance Lead

Leading on: strategy development, policy and action plans, revalidation, performance, and clinical risk

Contact me at: Department of medicine for the Elderly, QA. Tel:

Code A



Sue Damarell-Kewell – Head of Service Quality

Leading on: Quality and clinical governance, education and professional development, public and patient involvement, audit and effectiveness.

Contact me at: Raebarn House,

Code A



Julie Jones – Risk & Governance Manager

Leading on: Risk management, incident reporting and risk assessment, clinical governance, controls assurance, complaints and emergency planning.

Contact me at: Raebarn House.

Code A

Email:

Code A

Code A

Code A

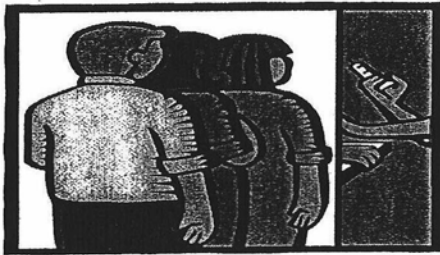
Clinical Governance Plan 2001/02

The Action Plan for this year identifies the key challenges facing the PCT in relation to clinical governance and the responding programmes that are to be implemented. The plan is awaiting agreement from the Board and will then be disseminated widely. The key areas of work proposed are:

- Practice and personal development through protected time
- Trust wide educational sessions including NSF's, risk management, patient involvement
- Educational needs assessment work
- Audit programme including CHD and significant events
- Developing information and support
- Developing patient centred services through multidisciplinary working.

Patient Group Directions

Over the next few weeks practices and community staff will be receiving a set of Patient Group Directions for adoption. Patient Group Directions are written instructions for the administration of medicines to groups of patients. This most commonly includes for example groups of patients who are given vaccines as part of an immunisation programme.



To comply with **HSC 2000/026 Patient Group Directions** each Direction has been drawn up and signed off by a group of multi-disciplinary professionals that include a doctor and a pharmacist. They are also approved by the Health Authority and all organisations that employ staff who may be required to follow the Direction.

The qualified health professionals who may supply or administer medicines under a Patient Group Direction are nurses, midwives, health visitors, pharmacists, optometrists, chiropodists, orthoptists, radiographers, physiotherapists and ambulance paramedics. They can only do so as named individuals.

Each Patient Group Direction contains a range of information including:

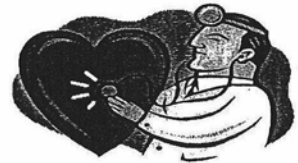
- the date it comes into force,
- the class of professional who may administer the medicine,
- the clinical condition to which the Direction applies,
- a description of patients who should be excluded from treatment,
- appropriate dosages (minimum's and maximums)
- relevant warnings and potential adverse reactions

- a statement of records to be kept for audit purposes.

East Hants PCT will shortly be issuing Patient Group Directions for the following:

- Administration of Vaccines for Travel
- Administration of Miscellaneous Vaccines (e.g. Tetanus, Influenza, Polio, Hep A, etc)
- Administration of Vaccines for Childhood Immunisations
- Administration of Adrenaline Injections (guideline only)

These will be sent to the Clinical Governance Lead in the first instance. On receipt of the Direction, each healthcare professional deemed competent (as defined in the Direction) and authorised to administer or supply the medicine, must sign and date the signature sheet, which can be found in each document. A copy of the Patient Group Direction must then be accessible to each competent clinician at all times.



CHD NSF Primary Care Audit

An Audit tool for practices has been developed which covers all the Primary care audit requirements from the NSF. The tool also provides clear instructions on how to get the relevant information from your local systems.

The audit tool will be sent out to practices shortly and the audit should run from mid-September until the end of October. The audit team at Portsmouth Healthcare NHS Trust will undertake the analysis and produce reports from the information practices provide. The Audit Team will also be available to assist practices that have specific queries or require help retrieving information.



Information Overload!

Sometimes it feels like we're drowning in paper – continually bombarded with Newsletters (!), circulars, guidance, instructions, requests for information, reports, training courses and so on.

Some of this is a necessary evil – especially when it could impact directly on health and safety, personal safety and patient care.

The Service Quality Team needs a fast and efficient system for cascading safety notices, hazard warnings and other information quickly. Sometimes it will be necessary for local Managers to act quickly and provide feedback.

When action is needed, bulletins and notices will be printed on RED paper.

This will indicate that action is necessary and that feedback – usually be completing a reply slip – is required.

Clinical Governance Away Day – Feedback

Thanks to all of you who attended and contributed so fully on 5th July at the Professional Centre. We received some really useful feedback from the group work and evaluation forms. Here's a summary...

1. *Barriers to Clinical Governance*

- ❖ Time
- ❖ Culture/ perceptions
- ❖ IT and Information

2. *Things that will help us*

- ❖ Lots happening already
- ❖ Education/ training
- ❖ Protected time
- ❖ Evidence based info. Guidelines etc.

3. *Support the PCT should provide*

- ❖ Co-ordination
- ❖ IT, Information & communication
- ❖ Resources
- ❖ Education and training support

4. *Clinical Governance Priorities*

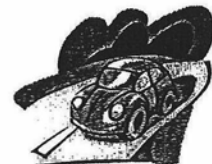
- ❖ IT, Information
- ❖ Significant event audits
- ❖ Patient/ public involvement
- ❖ Should be set by the PCT



Clinical Governance Development

South East Regional Office has requested that trusts use the Commission for Health Improvement framework for development plans this year. There are no longer "7 pillars" but 9 headings! They are

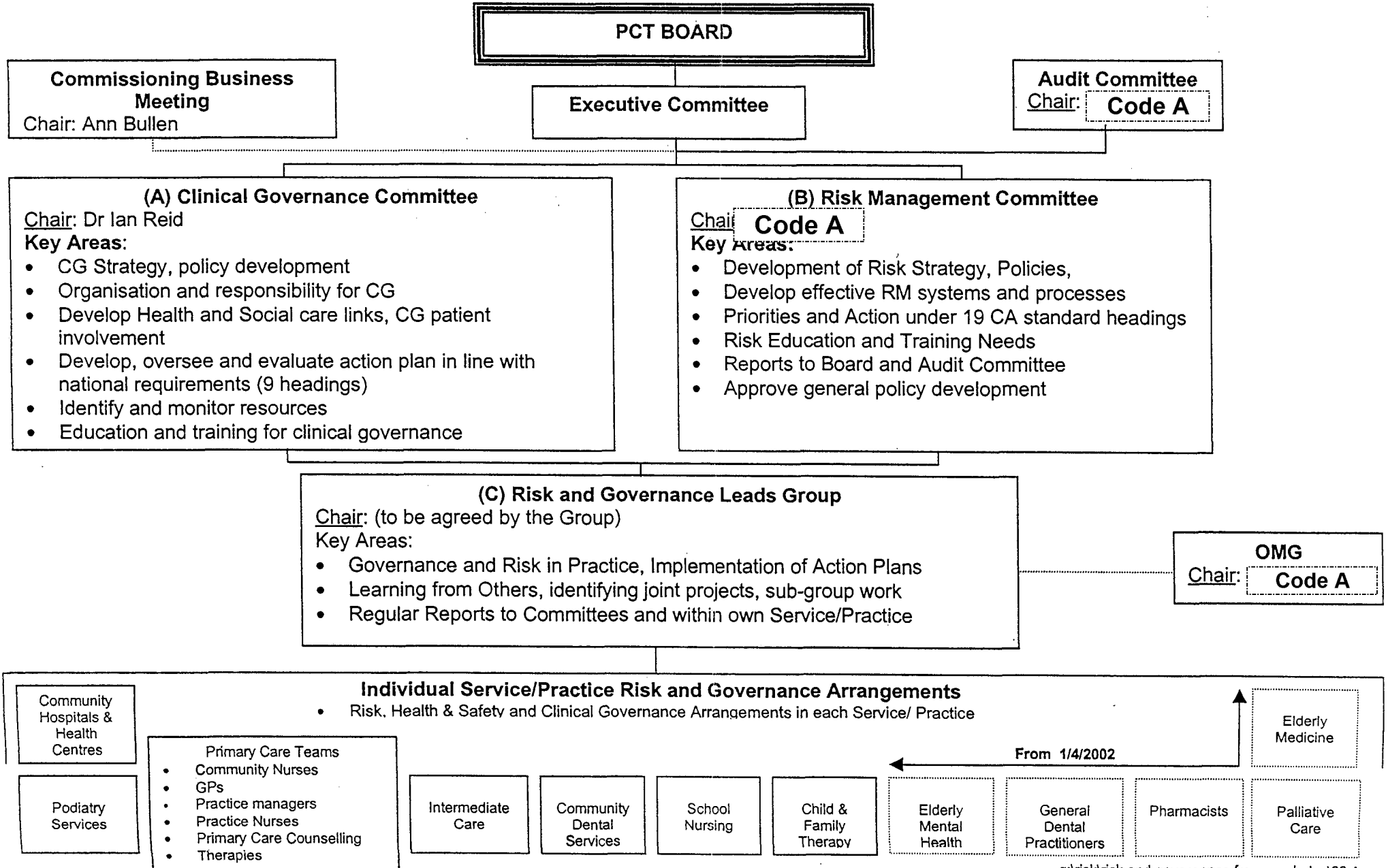
- Clinical governance strategies
- Organisation and responsibilities
- Patient/carer experience & involvement
- Risk management
- Clinical audit
- Research and effectiveness
- Information, information management and technology
- Staffing and staff management
- Education, training and continuing personal and professional development.



Introduction Visits

Over the next few months the Service Quality Team will be out and about visiting Primary Care Teams and Service Managers to introduce themselves and discuss how clinical governance and risk management can be developed within the PCT over the next few years.

RISK & GOVERNANCE COMMITTEE STRUCTURE



EAST HAMPSHIRE PRIMARY CARE TRUST

NEWSLETTER – APRIL 2002

NUMBER 10 CONTENTS:

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Code A

Risk Assessor Training

Code A

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Editor:

Code A

Quality Counts

The PCT Board has approved a Quality Strategy for the Trust. The Strategy sets out how we will drive improvements in the delivery of services between now and 2005. It explains how four defined work programmes will link to deliver a very challenging and full agenda. The four programmes of work are:



Appended to the Strategy are some clear objectives for the coming year. The objectives reflect the PCTs need to establish a solid foundation on which the future development and improvement can flourish. Some of the key aims include:

Quality Framework

- Establishing a robust committee framework that will ensure the Board are consulted and informed of all significant quality issues

Clinical Governance

- Establishing a Clinical Governance Committee
- Developing a Clinical Audit service and beginning a programme of integrated primary care, secondary care and community service audits
- Cultivating a platform to facilitate evidence based practice and clinical effectiveness

Continued from page 1

Risk Management

- Establishing a Risk Management Committee
- Reviewing and embedding core systems for managing complaints, risk events, critical incidents and risk assessments
- Meeting the external assessment requirements of Controls Assurance and the Clinical Negligence Scheme for Trusts
- Ensuring the PCT is resourced and equipped to meet its major incident obligations

Education & Professional Development

- Ensure quality underpins the PCTs Training & Education Strategy
- Publish and begin a Quality Training Programme
- Implement the national requirements for GP appraisal

Public & Patient Involvement

- Implement the model Consent Policy and Consent Forms developed by the Department of Health
- Establish a Patient Advice & Liaison Service (PALS) across the District in collaboration with the other PCTs and appoint a PALS Manager
- Publish an Annual Prospectus for patients
- Facilitate the GP Assessment Survey (GPAS) in all Practices

Copies of the full document have been distributed to Lead Consultants, Service Managers and GP Practice Clinical Governance Leads (via Induction meetings) and other NHS and patient advocacy organisations; other staff who would like a copy can contact me at Raebarn House.

Code A

Risk & Governance Manager

Tel: (023) 9224 8831



NEW Consent to Treatment Forms: Centralised Production Facility

HSC 2001/023 sets out the timetable for the implementation of the model consent to treatment forms and consent policy as part of the Good Practice in Consent initiative.

1 April 2002 is the date for the introduction of the new consent to treatment forms and accompanying patient information and all PCT services should now be using them.

Following numerous expressions of interest, and to help reduce unit costs, DoH has been working with the NHS Purchasing and Supply Agency and Collector Set Printers to provide a central production point for the forms.

These can be ordered directly from the printers. The print specifications will also be made available on this website to allow for local production.

To order the forms, please contact Collector Set either by fax, post, or e-mail, stating how many of each form you require, and giving the full delivery and invoice address:

Collector Set Printers Ltd
Unit F Forstal Road
Nr. Maidstone
Kent ME20 7BU

Tel: 01622 716636

Fax: 01622 717515 or 01622 882178

Contact names:

Code A stock office manager - ext: 230

Code A Orders manager - ext: 221

Code A sales manager: ext : 226

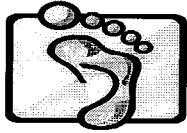
email: sales@collectorsetprinters.co.uk

orders@collectorsetprinters.co.uk

Web: www.collectorsetprinters.co.uk

DoH Contact: **Code A**

DoH Website: www.doh.gov.uk/consent



Podiatry Services for Local People:

Recent changes - the facts

The Pressures

- The Podiatry Service has struggled to meet the increasing foot health demands and increasing expectations of the local community.
- An investigation of all registered patients identified around 30% with relatively low needs, involving mostly personal care such as nail cutting and skin care.
- New patients with these needs have not been able to enter the service for 2 years following an earlier demand management review and change of access criteria.
- With an increasing clinical caseload and insufficient capacity, it has become difficult to provide the necessary level of service for the care of the high risk foot, musculo-skeletal disorders and painful skin and nail conditions in which we specialise.
- Waiting lists and waiting times have continued to grow.

The Solution

- Commissioning and employing organisations have agreed that podiatry is a specialist clinical service for patients with a medium to high clinical need.
- The whole caseload will be assessed and treatment will be provided to those with appropriate need as defined by access criteria.
- An improved service will be available to those with greatest risk.
- Many people with relatively low needs will no longer be able to receive foot care, but will be entitled to second opinion if unhappy with assessment, and will be able to access the service again if individual conditions change.

- An education team has been established for one year to provide support and information for those who will need to manage their own foot care.
- As part of a foot health strategy other organisations will become involved with personal foot care.
- The Podiatry Service will, in future, provide shorter packages of treatment for conditions that can be improved, and ongoing care only for the at risk foot.

Mike Townson, Service Manager
Podiatry

DOMESTIC CONTRACT

The new domestic contract will be available in Draft format in early April and those wishing to view and comment on the specification (quite long) should contact myself as soon as possible – it is your opportunity to influence it's content. Additionally, a small manned display will be held at Havant Health Centre between 12 pm and 2 pm on 10 April 2002. Everyone is welcome to come along and discuss any concerns or explore implications of the new contract directly. Clinical staff and GP practices occupying our premises are particularly welcome.

The new contract will see some significant developments including:

- Output specification – i.e. It must be clean RATHER than clean it twice a week.
- Inclusion of security, window cleaning, grounds and gardens
- Additional roles for caretakers including minor maintenance (e.g. replace a bulb)
- Clear definition of risk areas in line with the National standards of cleanliness for the NHS (also see www.cleanhospitals.com).

Martin Robinson

Havant Civic Offices – Code A

Occupational Health
Service

Move - Update

The new Department in the Overton Centre at St.James' Hospital is now open. Although staff working for Elderly Medicine (EHPCT) can still use the Occupational Health Department at QA or St.Mary's.

Our new number is - **023 9275 3346**

The **Handling Advisory Service** have their own direct line - **023 9275 2676**.

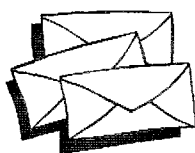
The **fax number** for Occupational Health and Handling Advisory Services is -

023 9289 4332 (*which is the existing fax number for OHD SJH*)

For further information please contact Allison Macklin 023 9289 4329.

The new postal address will be:

**Occupational Health Service of
Handling Advisory Service
Ground Floor
Overton Centre
St.James' Hospital
Milton
PO4 8LD**



How to address mail:

To assist the Admin Staff to maintain an efficient service, we would be grateful if Managers and Staff could mark all correspondence (i.e. sick certs, accident forms, referrals, etc) with the relevant Primary Care Trust and send to the above address.

We thank you for your assistance.

IMPORTANT CHANGES TO DATABASE & ELECTRONIC JOURNAL ACCESS

If you have previously registered with us for a password to use Ovid databases and electronic journals, you now need to re-register with us to obtain an Athens ID and password. Your existing Ovid password will cease to work at the end of April.

In addition to providing you with Internet access to Ovid databases and electronic journals, your new Athens ID and password will provide you with Internet access to the National Electronic Library for Health databases, that you can otherwise only access via the NHSnet, and to other electronic resources that we may be able to make available in the future.

Please contact
the QAH Library (tel: 023 9228 6039)
or e-mail

Library.QAH@porthosp.nhs.uk for an Athens registration form.

If you have not previously registered but would be interested in having Internet access to these resources, again please contact the Library staff for a registration form.

Code A

Library Development Facilitator

**PORTSMOUTH NHS
LIBRARY SERVICE**

CLINICAL ENGINEERING SERVICES

IF YOU USE MEDICAL
EQUIPMENT -
YOU NEED US!

Due to a re-organisation within the Medical Physics Department, Medical Engineering is now known as CLINICAL ENGINEERING.

This name change is to reflect the enhanced and diverse services that Clinical Engineering offers.

All requests for equipment support or reported faults are to be notified on extension 2610.

Other extensions within Clinical Engineering are:

Service Manager - Code A
Team Leaders: Radiotherapy - ext. Code A
St.Mary's - ext. Code A
QAH - ext. Code A

Portsmouth Health Staff Lottery VENUES 2002

26 April The Potteries
24 May Petersfield Community
Hospital
21 June St Mary's Hospital

**A unique opportunity for
SISTERS TO DO IT FOR THEMSELVES!**

**Cancer Research UK is looking for women
to take part in the**



RACE FOR LIFE

Since 1994, the Race for Life fundraising event has been entered by 450,000 women who have raised £20 million. This money has been spent on the ongoing research involved in finding treatment and cures for the cancers that affect women. This year you can participate in this event in Portsmouth. Participation involves being sponsored to run or walk a designated 5KM course.

- ◆ YOU CAN ENTER AS AN INDIVIDUAL or AS A TEAM
- ◆ YOU CAN RUN / WALK ON BEHALF OF OR IN MEMORY OF SOMEONE WHO HAS BEEN AFFECTED BY CANCER
- ◆ YOU COULD SPONSOR RATHER THAN PARTICIPATE

**Portsmouth will be hosting their race on
SUNDAY 19th MAY @ 11.00 am.**

**For more details Telephone 08705 134314 or
www.raceforlife.co.uk**

(There is an entry fee of £7.50 per adult and £4.50 per child – this covers the race organisation and legislation so that all sponsor money will go direct to research).

'Baby Think it Over' Programme at Staunton Park School

In September 2002, Taryn Samways was appointed as Teenage Pregnancy Project Worker by East Hampshire Primary Care Trust. Taryn is employed to work in the Havant and Petersfield area to develop projects that aim to reduce the number of unplanned teenage pregnancies in the area.

One such project is the 'Baby Think it Over' Programme. This is a life-like baby infant simulator that young people can borrow to take home. This 'baby' provides an experience of what it may be like to look after and care for a baby for one or two days. It helps young people realise that a baby takes up a great deal of time, that they are very demanding and that becoming a parent is a huge responsibility and will change your life forever!

The 'baby' weighs 7 pounds and comes with a buggy, Moses basket, clothes and equipment. The 'baby' will cry randomly day and night and will require 'care' that the young person must give straight away. The head will fall back if not supported and the baby will register neglect. A small computer chip in the baby's back will record how well the baby has been cared for.

The staff and pupils at Staunton Park Community School have accepted the challenge and have been participating in the Project since Christmas. In December a number of parents were invited to school to hear all about the Project. We were particularly pleased to welcome a couple of dads as well as mothers and young people all keen to participate.

Four members of staff have had special training on how to work with the babies. The 'Baby Think it Over' Programme has been built into the Sex and Relationships curriculum and also the Child Development course in year 9.

The feedback from the young people who have borrowed them has been very valuable; the majority are glad to give them back and did not realise what hard work it is --they are often quite tired too!! The young people have kept diaries about their experience, which is then shared with staff and friends. The parents, who must provide their signed consent in advance, have completed evaluation forms and have stated that they think they are a good idea. It has allowed many families to discuss the role of a parent and how your lifestyle changes once you decide to have children.

**FURTHER INFORMATION ABOUT THIS AND OTHER TEENAGE PREGNANCY WORK IN THE EAST HAMPSHIRE PCT AREA IS AVAILABLE FROM TARYN SAMWAYS, TEENAGE PREGNANCY PROJECT WORKER
TEL: 023 9247 8051.**

FRANKING MACHINES

As some of you already know, a contract has been awarded to Ascom Haslar for the purchase / planned preventative or fully comprehensive maintenance of franking machines.

Following my recent letter of 25th March 2002, which stated the new contract prices, I would just like to bring your attention to the fact that due to the new Post Office Regulations that will take place in September 2002 for changes in Royal Mail Standards, which we as an organisation must comply to.

Please contact Code A at the Supplies Department on Code A to discuss the different options of franking machines available to you as a user.

SMEAR TEST LEAFLETS

Please can all Practices introduce policies to ensure that a smear test leaflet accompanies every appointment letter inviting patients for a smear test.

This action has become increasingly important as the new leaflet contains information about the programme explaining that the test is not 100% accurate, thus reducing the likelihood of GPs or laboratories being successfully sued.

Code A

Asst Service Development Manager

Tel: **Code A**

UPDATED LOCAL CERVICAL SMEAR TEST GUIDANCE TO BE ISSUED SOON

This note is to let Practice Managers, GPs and Practice Nurses know that in April or May each Practice will be receiving copies of an updated and laminated guidance on the smear taking and colposcopy process. Practice Managers are asked to dispose of the old version and make sure all GPs and Practice Nurses see the new version.

Copies will be sent direct from the Cytology Laboratory to Practices along with the latest practice smear data. It is hoped that sufficient copies will be provided to enable one to be placed in each GP or clinical room. If not they can be copied freely by the Practice.

Code A, **Public Health
Consultant**

RISK ASSESSOR TRAINING

The Primary Care Trust are running three ½ day training sessions for GP Practice Risk Assessors - one in June, one in July and one in September at Cosham Park Surgery.

The courses are 100% reimbursable and will equip Practice staff with everything they need to carry out a full and thorough assessment when they return to their Practice. Elaine Guy will be sending out details shortly.

I'm liaising with the Risk Managers in the other PCTs to agree what training will be provided for assessors in community services this year. It's likely that the assessment process will be unchanged and courses for new assessors will resume in the autumn. Dates and details will be advertised widely.

Code A

Risk & Governance Manager

Tel: **Code A**

Staff Discount Scheme

Simon Davies Hair & Beauty
have informed us that they no longer wish to continue in the Staff Discount Scheme.

They will not be giving discount to Trust Card holders with immediate effect.

**EAST HAMPSHIRE PCT AREA
HEALTH IMPROVEMENT &
MODERNISATION PLAN (HIMP)
2002-2005**

This is an opportunity to contribute to the HIMP. HIMPS are the main strategic plans for the NHS and its' partners. Each Primary Care Trust is tasked with developing a HIMP; reflecting a coherent approach to strategic planning for health improvement. The HIMP will be developed by July to cover the period 2002-2005.

With this in mind, the Primary Care Trust is requesting details of health improvement activities with which organisations and communities are involved or planning to be involved. A template and accompanying notes are available to assist with this process

Within the health economy, service managers and staff with specific responsibilities for the National Service Frameworks (NSFs) have been requested to contribute. Details contained within Primary Care plans and the Primary Care Investment Plan (PCIP) will also be incorporated. If however you wish to contribute more directly to the HIMP, please contact Natalie Jones for a copy of the template (paper and electronic versions available) or contact myself or Natalie if you have any queries relating to the process.

Thank you in advance for your contribution to the HIMP.

Code A Service Development
Manager (HIMP)

Code A

e-mail: **Code A**

Code A Assistant Service Development
Manager

Code A

e-mail: **Code A**

**FIRE LECTURES
FOR NIGHT SHIFT STAFF**

FIRE LECTURES WILL BE HELD FOR NIGHT SHIFT STAFF (ALTHOUGH DAY SHIFT STAFF ARE ALSO WELCOME TO ATTEND) ON

9 JULY 2002
12 JULY 2002
30 JULY 2002
2 AUGUST 2002

IN THE COMMITTEE ROOM (FRONT HALL)
OF ST.JAMES' HOSPITAL

STEWART HO

Diary Dates

PORTSMOUTH HOSPITAL
TRUST AND
PORTSMOUTH CITY PCT

THE TRAINING TEAM

SUMMER PROGRAMME

May to August 2002

**BASIC HIV AWARENESS
MODULE**

Tuesday 14 May (9.30 to 12.30)
St.James' Hospital
Monday 27 May (9.30 to 12.30)
Gosport War Memorial Hospital

HIV IN GENERAL PRACTICE

Thursday 2 May (2.00 to 3.00)
St.James' Hospital

**HEPATITIS C – ESSENTIAL
INFORMATION FOR
PROFESSIONALS**

Tuesday 7 May (10.00 to 12.00)
St.James' Hospital

**AN INTRODUCTION TO SELF-
HARMING BEHAVIOUR**

Thursday 30 May (9.30 to 4.30)
St.James' Hospital

**AN INTRODUCTION TO HIV
AND MENTAL HEALTH ISSUES**

Tuesday 7 May (9.30 to 12.30)
St.James' Hospital

**LOSS, DEATH AND
BEREAVEMENT**

Tuesday 21 May (9.30 to 4.00)
Petersfield Hospital

**THEORY OF VENEPUNCTURE
FOR THE HCSW AND RGN
WORKING IN THE COMMUNITY**

One day workshops for HCSWs and half-days for RGNs in the Theory of Venepuncture are run by the Training Team at the request of the Clinical Managers.

BOOKING

All Training is multidisciplinary and FREE for health staff in Portsmouth and South East Hants.

To secure your place, please make a booking by telephoning the Training Team at Somers Town Health Centre on **023 9285 1180 ext 230** (between 8.45 am and 1.45 pm)

Confirmation of booking will be sent to each successful applicant.

EARLY BOOKING IS ADVISED

ISSUE 6 - 10/03

ECHO

EAST HAMPSHIRE

newsletter for east hampshire primary care trust staff

Be a star - fill in the survey

New survey on the way

Chance to compare ourselves with others

Responses will help star rating

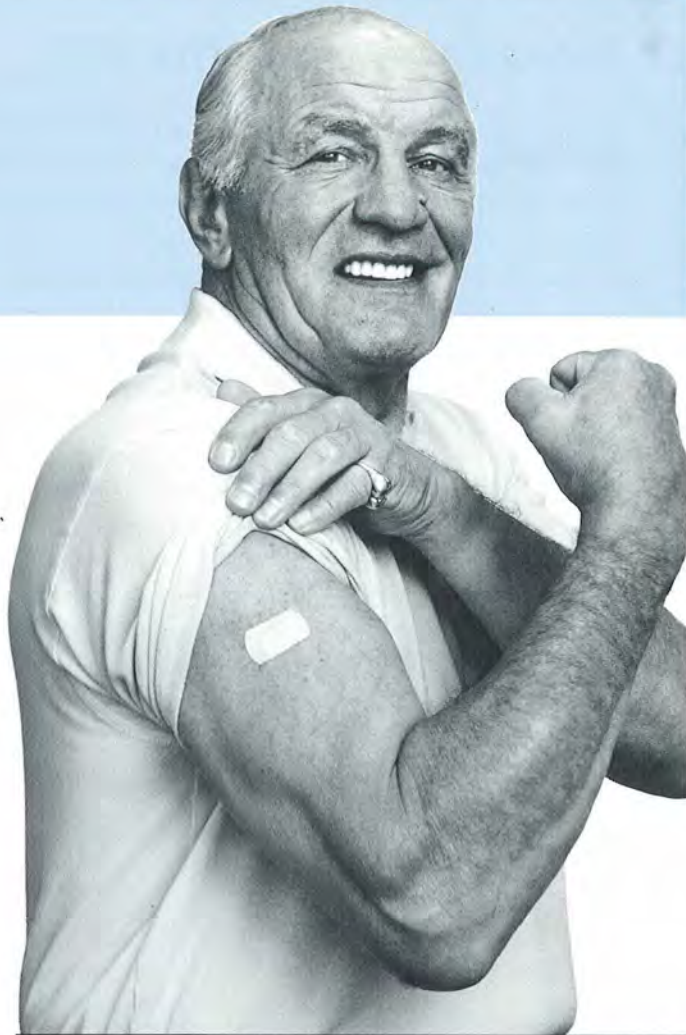
You'll know from previous years that we have undertaken staff surveys, the results of which are used to try and improve working environments for staff and services for patients.

This year we are being asked to take part in a new national NHS staff survey which will enable us for the first time to benchmark against other similar organisations and the NHS as a whole on a range of measures of staff satisfaction and opinion.

making progress ...

The survey will help us collect your views to inform how we might improve working conditions and practices to help us assess how we are making progress on the Improving Working Lives front.

The information, and the number of responses we get back, will also contribute to our CHI star rating next year, so it really is a case of the more back the better! Questionnaires will be sent to a sample selection of staff in October. If you receive a copy we would be grateful if you would complete and return it.



Time to get your flu jab in. Details inside ...

Jenny to co-ordinate PALS

Code A has recently been appointed as the Patient Advice and Liaison Co-ordinator for East Hampshire and Fareham and Gosport Primary Care Trusts.

The Patient Advice and Liaison Service (PALS) works closely with staff and the public to resolve concerns about health care issues. In doing so it seeks to translate the lessons learned into organisational learning, an aspect of work directly linked to the Clinical Governance agenda. The new legislative framework denotes PALS as a key component in the process of change within the NHS and the service is uniquely placed to engage with local communities.

Jenny says "PALS will liaise with all staff and by acting as an organisational resource, help to promote a seamless service across health and social care groups. The PALS focus is on a confidential service, which will improve the NHS experience for service users by sorting out problems quickly on behalf of patients, their families and carers. We will be shortly looking for 'PALS Champions' to act as pro-active links for the service."

You can contact PALS on freephone 0800 917 6039.

ELSE WHERE

Farewell to **Code A** who retires after 20 years



IN THIS ISSUE



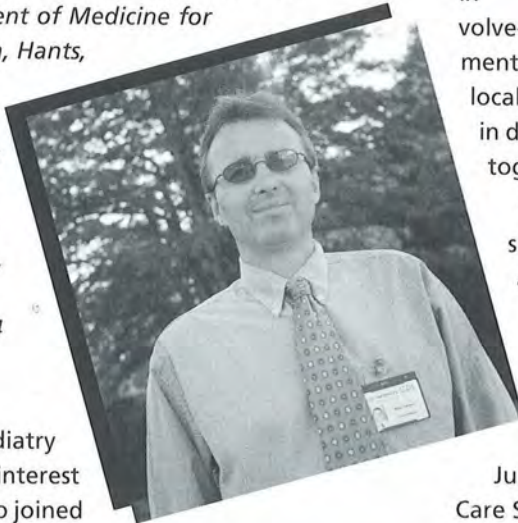
New faces join the PEC

The Professional Executive Committee (PEC) raises and debates clinical and professional issues and ensures the Trust Board is well informed regarding proposals, plans and work in progress.

Two nursing representatives have recently been appointed to the PEC; **Gill Harrison**, who has a primary care background and is a respiratory nurse specialist, and **Jane Williams** (far right), who is a consultant nurse in stroke care. They would like to enlist the help of nursing staff in identifying the key issues for nurses and nursing within all areas of the Trust and have designed a questionnaire which will be distributed during October. If you don't receive one by the end of October please contact *Jane Williams, Consultant Nurse Stroke Care, Department of Medicine for Elderly People, QAH, Cosham, Hants, PO6 3LY. Tel 023 9228 6000 ext 2515. E-mail*

jane.williams@porthosp.nhs.uk or *Gill Harrison, Respiratory Nurse Specialist/Project lead, East Hants PCT, Raebarn Hse, Hulbert Road, Waterlooville, Hants, PO7 7GP. Tel 023 9224 8850. E-mail* *gill.harrison@ports.nhs.uk*

Mike Townson, senior podiatry manager, who has a specific interest in clinical governance, has also joined the PEC and replaces Jill Delaney who retired last year. "I was pleased to be accepted onto the



Professional Executive Committee." said Mike. "I wish to support clinicians delivering an exciting but ambitious health agenda. I fully support the involvement of the local residents population in decision making and working together to ensure a high quality service."

"Recognising that resources are limited I would hope to support opportunities for new ways of working if they are going to be more effective.

"It is likely that I will have a particular role to play to support Clinical Governance and CHI reviews."

It is hoped that another GP might join the PEC in October.

Julian Neal has recently resigned as chair of the Primary Care Subgroup due to pressure of national and practice commitments but remains a PEC member.



Clinical Governance Facilitators

Jo Robinson (left) and Wendy Ball have recently joined the quality team as Clinical Governance Facilitators based at Raebarn House, Waterlooville. Jo works Monday and Tuesday 8.30am to 5.00pm and Wendy works Wednesday and Thursday 9.00am to 5.00pm.

Their role is to work as part of the quality team to support the development, implementation and maintenance of the clinical governance programme across the PCT. Both Wendy and Jo see themselves working very closely with clinicians to fulfil this role.

Jo, for the rest of the week, is employed as a District Nursing Sister for the Clanfield and Cowplain Practice and is based at Denmead Health Centre.

Wendy, a nurse by background, is currently exploring an educational role to complement her Clinical Governance role.

Jo and Wendy are both undertaking project work which includes the review of clinical supervision arrangements across the managed services and a review of audit programmes in place across the provider services. This will bring them in contact with staff in the very near future.

They can be contacted on 023 9224 8845.

E-mail: jo.robinson@ports.nhs.uk or wendy.ball@ports.nhs.uk



Beat flu, use a jab.

This years campaign

Details of this years national Flu Immunisation Campaign have recently been released to all PCTs. In case you missed it, here is a brief overview of this years programme.

As in previous years all people aged 65 years and over plus, people in clinical risk groups, will be encouraged to have the vaccination. The national target remains at 70% uptake for those in the 65 years and over aged bracket.

GPs will still be responsible for purchasing their own vaccine and uptake will be monitored overall for health care workers in certain key groups which as yet remain undefined. Occupational immunisation will remain the responsibility of the employer.

A national publicity campaign, featuring Henry Cooper again, will support the immunisation programme. Campaign resources and electronic artwork are available to order free of charge now, ready for launch around the beginning of October. As before, no definite start date has been given and it will be up to individual practices when they launch their programme.

Flu vaccination for staff

The Primary Care Trusts have agreed to fund flu vaccination for their Trust Staff. The vaccination has a good safety record, severe side effects are uncommon and the vaccine used, **does not contain live virus**, so cannot cause influenza. It makes good sense for Health Care Workers to have this done. By the nature of our business we would like to protect vulnerable clients and to avoid a situation, where many staff are absent at the same time, during an influenza epidemic. If you normally have the vaccination with your own GP then there is no reason not to continue to do so, but you now also have the choice of having it done at work. It would be useful to know if you have had an injection given by your GP, as we can then make an entry on your OH file.

Staff working for the Primary Care Trusts based at St Mary's and Queen Alexandra Hospital, will be able to receive vaccination in those Occupational Health Departments. Please contact these departments directly to make an appointment to attend.

QAH - 023 9228 6738 or SMGH - 023 9286 6489

Below are dates and times for clinics which have been organised by our Occupational Health Service. Appointments are not needed as these clinics will operate on a 'drop-in' basis.

Flu Vaccination Clinics for Staff

<i>Date</i>	<i>Venue</i>	<i>Time</i>
OCTOBER		
Mon 20th	19 Coldeast Way, Sarisbury Green	2pm – 5pm
Tues 21st	GWMH, Rooms 1 & 2 OPD	9.30am – 12.30pm & 1pm – 4pm
	HWMH OHD	12.30pm – 4pm
	St James' Hospital, OHD	9.30am – 4pm
Wed 22nd	HWMH	9am – 2pm
	St Christopher's Hospital, OPD	2pm – 5pm
Thurs 23rd	St James' Hospital, OHD	9.30am – 4pm
Mon 27th	Petersfield Hospital, Laurel Day Unit	12.30pm – 3.30pm
NOVEMBER		
Mon 3rd	19 Coldeast Way, Sarisbury Green	2pm – 5pm
Tues 4th	GWMH, Rooms 1 & 2 OPD	9.30am – 12.30pm & 1pm – 4pm
	St James' Hospital, OHD	9.30am – 4pm
	HWMH, OHD	12.30pm – 4pm
Wed 5th	HWMH OHD	9am – 2pm
	St Christopher's Hospital, OPD	2pm – 5pm
Thurs 6th	St James' Hospital OHD	9.30am – 4pm
Mon 10th	Petersfield Hospital, Laurel Day Unit	12.30pm – 3.30pm



Local Commissioning of NHS Dentistry



From April 2005 the responsibility and funding to commission NHS Dentistry will be devolved to PCTs. This will involve major changes for Dental Practices, the Dental Practice Board and PCTs. Guidance has now been received including details of a shadow year in 2004/05 and the avail-

ability of support during this transition - this guidance has already been made available to each Dental Practice.

It is anticipated that the new system will be attractive to both patients and Dentists and less bureaucratic than the current way of working. The Department of Health will be working with the NHS to ensure that Dental Practices contracting with PCTs will be no worse off financially.

The PCT and the Local Dental Committee are working together to ensure a seamless transition for both Dental Practices and patients.

Alan Jones retirement



Alan (front) with colleagues celebrate his retirement

Alan Jones has worked in the Community Dental Service in Portsmouth and South East Hants for over twenty years. He has been a dedicated ambassador for Dentistry who has always put the patients first. He will be sorely missed by patients and staff alike.

he will be sorely missed by patients and staff alike ...

The service has changed greatly during his time in charge and many developments have improved services for patients. He has been involved in the centralisation of General Anaesthetic Services, the opening of Dental Access Centres and has been a pioneer for The School of Professions Complementary to Dentistry which is to open in September 2005.

He is current Chair of the British Society for Childrens Dentistry and has been involved with the Cleft lip and Palate Group for many years.

We wish him well in his retirement.

Diabetes Conference

Dr. John Hughes opened and welcomed over sixty members of the public to the annual Diabetes Conference held earlier last month at Havant Health Centre.

Two Diabetes Nurse Specialists, Jane Danby and Jane Edgerton, spoke about their roles within the service and Dr. Tim Goulder introduced the National Service Framework for diabetes from the patients prospectus.

Two patients gave presentations: one from 'Liz' a mother of a child diagnosed with diabetes (at the age of three) and how it has affected their lives; the other from 'William' entitled 'My Journey' giving an account of how he has lived with diabetes for twenty years.

For the workshops in the afternoon, candidates split into groups to take a look at Clinical Care, Screening and Education.

Help was on hand from Diabetes UK who supplied a stall offering plenty of advice and information. The Hayling Island Diabetes group even cancelled their meeting to attend the event.

'A resounding success ... a most successful meeting, more please ...' and 'it was great to be listened to and given the opportunity to share and be involved...', were just some of the comments written on the feedback forms.

Sian Bamber, Planning Project Manager, said "We are delighted that we have had such a keen response and look forward to a future of working with service users in the Trust."

"There will be another conference and once we have met to discuss feedback we will be looking to form a reference group to enable people to be actively involved in their service.

Right CoreCare can help

Some of you may be aware that the Primary Care Trust has a contract with Right CoreCare for an Employee Assistance Programme. This contract has been tendered and we are pleased to say that Right CoreCare have been successful again and have been awarded a further three year contract.

What does this mean for you?

All staff, including bank staff, have free access to help and advice on various issues, such as: work problems, personal or emotional problems, financial or tax issues, legal advice, marital or family problems, alcohol or drug problems, sexual problems or stress.

If you have any questions or concerns regarding one of the above issues you can call Right CoreCare for confidential advice. You may also be able to have face-to-face counselling sessions, which are free and quick to access.

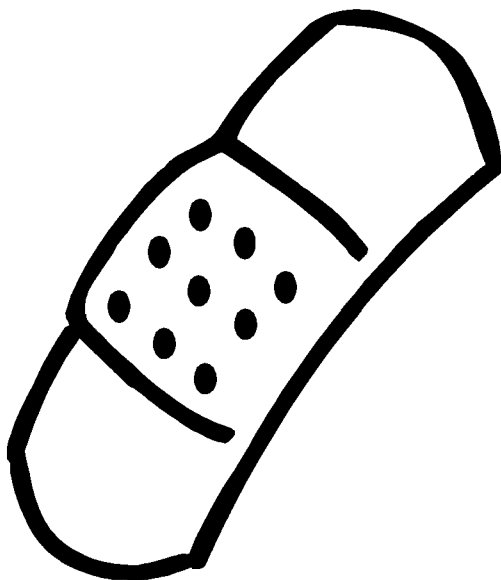
This service is also available free of charge to employees family members.

You can contact Right CoreCare free of charge, 24 hours a day, 365 days a year. The number to call is **0800 181 392**.

If you want further information please either contact Right CoreCare directly or Jill Sadler in the Occupational Health Department, on 023 9275 3346

This is a great service provided to all employees and their families so please make the most of it!

HEALTHCARE SOLUTIONS



To encourage organisational learning

DEALING WITH BROKEN GLASS

Hospital porters experienced three incidents over a period of months when large pieces of broken glass had been placed in general waste for collection.

Ward Managers have been advised where and how to purchase special glass disposal boxes and reminded about disposal arrangements.

LACK OF MEDICAL COVER

Unforeseen circumstances led to no medical cover being available in an acute admissions ward when 3 patients were to be admitted.

Nursing staff now ensure they know the whereabouts of the Medical staff at all times.

Contingency plans in case of future staff shortages have been drawn up.

Medical and nursing staff are exploring ways to improve communications between professional groups.

BOMB SCARES

There have been recent bomb alerts/suspect packages in three different PCT sites.

The Bomb Alert Policy and Procedure has been reviewed and updated and will be redistributed with a reminder to staff to be vigilant.

NURSING STAFF UNABLE TO SET UP AN IV

A patient needed IV fluids with a syringe driver and nursing staff had not been trained to set one up. Staff telephoned other wards for assistance, but no one was able to help. After an hour, a Doctor set up the IV with telephone advice from another ward.

All nurses now receive training in administering IV fluids and setting up syringe drivers.

The role of the Nurse Specialist has been explained to nursing staff.

No: 1 – June 2003

East Hampshire **NHS**
Primary Care Trust

Send queries and contributions to:
Risk & Governance Manager
Raebarn House, Hulbert Road,
Waterlooville, Hampshire, PO7 7GP
Phone (023) 9224 8800 Fax (023) 9224 8810

LEARNING FROM REFLECTIVE PRACTICE

Give brief anonymised details of an event (a complaint, an audit, adverse event or near miss) that resulted in a change or improvement in your Ward, Dept, Service or GP Practice. Please do not include identifiable staff or patient information or personal details. An anonymised summary will be published in a PCT Newsletter that will be distributed to staff in all PCT Services and all GP Practices to help promote and encourage and organisational learning.

Which Service or GP Practice (e.g. community hospital, district nursing, elderly medicine, GP Practice, etc)			
Brief summary of what happened, the complaint, the audit findings, etc			
What has been changed or improved in the Ward/Dept/Service/Practice as a result?			
What wider lessons could be shared with other PCT Services or GP Practices?			
Name of the person completing the form		Contact telephone number (in case of any queries)	Date

Thanks for your help. Please return this form to:

email to Code A

post to: East Hampshire PCT, Raebarn House, Hulbert Road, Waterlooville, PO7 7GP