Irene Dix - PA (Nursing & Clinical Governance)

From: Matthew Thomas - Corporate Project Manager

Sent: 12 March 2004 14:53

- To: EHPCT Executive Committee; EHPCT Management Team; EHPCT NEDs; EHPCT Board
- Cc: F&G Admin; Sheila Clark Chief Executive Portsmouth City PCT; Portsmouth Hospitals NHS Trust - Pat Forsyth (FAX); EHPCT GP Fax

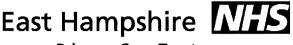
Subject: Information Exchange - Improving Working Lives

This is the full EHPCT Information Exchange for March 04

Matthew Thomas Corporate Project Manager East Hampshire PCT Raebarn House Hulbert Road WATERLOOVILLE PO7 7GP Code A Code A

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Update no 13 March 2004





Primary Care Trust

Improving Working Lives

Your guide to how we're doing in meeting the standards

Finding out more about Improving Working Lives...

It is important that everyone is aware of the Improving Working Lives Standard so here are some of the ways you can find out more:

- attend an IWL presentation a member of the personnel team will be available to come to speak to staff (for approximately an hour) at any team meetings. Contact Sandra Grant on Code A
- access the IWL website: www.doh.gov.uk/iwl
- contact any of the IWL steering group members see back page.

This guide is published monthly to provide you with the latest news on Improving Working Lives in this PCT...

Update on training

The Personnel Department has recently facilitated two workshops aimed at all managers who have supervisory responsibilities:

Managing Bullying and Harassment

This workshop is arranged over 2, 4-hour sessions with members required to attend both sessions. To promote understanding of the issues relating to bullying and harassment the workshop is an interactive mix of group work and discussion.

It is envisaged that all managers with supervisory responsibilities, whether or not they are, at the present time, experiencing episodes of bullying or harassment within their department, will attend this workshop.

Initial feedback from the sessions includes: "thought provoking and interesting" and "thoroughly enjoyable and constructive morning."

Management Awareness

Managers are presented with complex scenarios from their employees on a day-to-

day basis. These can range from issues that affect performance at work right through to the impact private lives have on an individual's contribution in the workplace.

The Management Awareness Workshop promotes broader thinking and problem solving that is both practical and flexible meeting the needs of all stakeholders in your department. Arranged over 4 hours it is aimed at all managers.

Self-Rostering Workshop

The NHS has a number of workforce shortages in key clinical and professional staff groups. Flexible and self rostering are seen by the Government as part of a range of support mechanisms that can make important contributions to the retention of staff and to encourage staff to join or return to the NHS.

This workshop is designed to enable ward managers to consider the implementation of self-rostering on their ward. Through exploring its potential impact, and taking into account staff consultation, managers can arrive at an informed decision about how self-rostering can benefit the staff and patients on the ward.

Feedback from staff includes: "As a ward manager, I no longer have to spend two days each month completing the off-duty rota. Since we introduced self-rostering, staff share the responsibility of ensuring the ward is covered."

To discuss dates, venues and to secure your place, please contact: Training and Development Shared Services 02392 894415 (telephone) 02392 894439 (fax) Course.bookings@ports.nhs.uk (email)

Dates available include:

Managing Bullying and Harassment (9am to 1pm-Professional Centre, Cosham) Session one Session two

1 April	and	8 April
5 April	and	13 April
6 April	and	14 April

Management Awareness (9am to 1pm-Beneficial Centre, Eastern Road) 16 March 25 March

29 March (Venue changed to Room 12, Quad Centre, QA) Please book early to ensure your place is reserved.

Bullying and harassment officers

In conjunction with the training currently being offered to managers, the establishment of Bullying and Harassment Officers is being proposed. Officers will be specially trained volunteers ideally taken from a wide range of staff groups. It is intended they will provide a confidential listening service for those who feel bullied or harassed and to allow the time and space to decide what course of action to take.

If you are interested in helping to establish this group, wish to become a volunteer, or

have a comment to make about this initiative please contact Kathy Bowden Ellis on Code A

Catering, Accommodation and Security Questionnaire

You may recall completing a short questionnaire last autumn. Kathy Bowden Ellis has been meeting with department and ward managers to discuss the responses in order that these can be prioritised.

In summary, so far a total of 104 responses have been received. These have come from across 26 sites - out of which 10 require "no further action." Overall common concerns arising across all sites are:-

- Dedicated food preparation areas away from patients/relatives enabling the preparation of hot and cold foods and drinks in particular out of office hours.
- Improved security.

- Protection of personal belongings.
- Improved lighting in grounds and car parking facilities.

In conjunction with her research, Kathy is talking to managers about Communication Points. The idea has come from Angela O'Brien, Senior Nurse, Wimbourn Ward, who has seen Communication Points being used to great effect at Sussex Downs and Weald PCT Trust. The points will take up a small area often frequented by staff and will provide them with information such as Personnel Policies, Training Directories, bulletins etc. Proposed sites for the points include:

- St James' Coffee Lounge
- Gosport War Memorial
- St Mary's
- Queen Alexandra Hospital
- Emsworth Cottage Hospital
- Havant War Memorial Hospital
- Hayling Island Health Centre
- Waterlooville Health Centre
- Fareham and Gosport Dental Department
- Raebarn House

For input into these initiatives, or to complete and Catering, Accommodation and Security questionnaire, please contact Kathy Bowden Ellis at Havant Civic Offices on Code A

Diversity

You will remember that in last months Bulletin we were looking for "Diversity Champions" who could begin the task of moving the organisation forward with the huge diversity agenda. Unfortunately, due to the disappointing response, the training being provided by Portsmouth Hospital NHS Trust has had to be cancelled.

This is being rescheduled for September and by then we hope to have our own Diversity Group established and have significantly progressed on improving the equality of opportunity for staff and ensuring the organisation benefits from the diverse skills, culture and experience our staff bring to the workplace.

If you are interested in diversity and would like to become involved, or voice your opinions, please contact Natalie Beaumont on Code A.

Portsmouth's Black and Ethnic Minority Staff Network Celebrating Diversity Event

Portsmouth Ethnic Minority Staff Network (PHT, PCPCT, EHPCT, F&GPCT) held a "Celebrating Diversity" event in December to promote the cultural diversity of the workforce, with a diverse group of people from the Portsmouth Health economy gathering to share their culture, religion and uniqueness.

The event was opened by the Chairman of PHT, Michael Waterland and members of staff provided the entertainment - displays of colour, music, dance, culture and togetherness and everything from Irish dances and Filipino songs to belly dancers!

There were also talks by Equal Voice members and a sari and turban demonstrations, displays of goods from Malaysia, India, Philippines, Africa and Mauritius and a delicious array of food from around the world produced by the catering department from recipes provided by staff.

The event was well attended and provided a wonderful opportunity to learn and have a better understanding of the cultures of the diverse community we work with.

Recruitment

Work has been ongoing on with the Communications team to update and improve the current information issued with recruitment packs by the PCT. This new improved package of information should be available shortly.

Richard Bussey is forming a Recruitment Leads group within the PCT who will meet for the first time in March and start to address some of our key recruitment issues. The details of who is involved in this group and the terms of reference will be published next month after the first meeting.

As part of the national recruitment strategy the NHS has also been successfully piloting e-recruitment in some areas linking it to Trust websites. The PCT has expressed its interest in being considered for the next phase of the rollout programme to further enhance our recruitment service.

There are a number of recruitment events coming up that we are attending including a careers day at South Downs College on 24th March. There is also joint event involving PHT and the local PCTs specifically aimed at the development and recruitment of Health Care Support Workers. This is being held at the Quad Centre at QA on 15th March starting at 10 am until 4pm.

NHS Professionals

As early implementers we continue to work closely with our colleagues at NHS Professionals to try to improve the service being offered. NHS Professionals are actively recruiting new staff to increase their capacity, as well as continuing their rollout programme taking on more bank staff from other Trusts and PCTs in the HIOW region, including Fareham and Gosport from April.

 Our NHS Professionals Service Manager is Louise Ginns and she is contactable on

 Code A
 or via e-mail at I
 Code A

Agenda for change

As with most organisations, this PCT is beginning to make progress with implementing Agenda for Change. We have identified some staff to focus on the work the organisation needs to do to prepare for the changes ahead. Progress includes; the commencement of two Agenda for Change project workers, identification of a list of potential job evaluators (letters will be issued to them soon inviting them to take part in training in this area) and potential "grouping" of jobs within job families across local NHS organisations.

Work will now start to ensure there is a staged approach to updating job descriptions where necessary and a clear programme of matching, evaluating and analysing roles as appropriate.

Managers, in particular, are encouraged to be aware of Agenda for Change and its implications. Kerry Bayley or your Personnel Manager can assist you further in this or arrange to undertake a short presentation to your team regarding this process. Kerry can be contacted on **Code A**

First step into employment

East Hants PCT, in partnership with South Downs College, is developing an exciting initiative which aims to provide local people who have low level skills and limited work experience the chance to obtain some key work-related skills, along with a few hours of work experience. Whilst it is recognised that employed people tend to be healthier than those who are not able to get work and that this is good for the health of the nation, it is also hoped that by making posts within the PCT more accessible we will begin to resolve some of our recruitment problems in specific areas.

Participants will need to be supported to spend three hours a week over four weeks with some of our staff within the PCT to get a taste for the type of work we do. If you would like to be part of this process and feel you have something to offer people taking their first steps into the NHS then please contact Sandra Grant on Code A Code A to discuss this further.

Improving working lives focus groups

Jam Bungshy may be contacting you soon to be part of a one-off group providing feedback on your experiences as an employee. This will be one of the indicators we use to check our progress on achieving the Improving Working Lives progress and will covers areas such as:

- are you able to access a team meeting?
- do you have an annual appraisal?
- are you involved in the development of your service/department? etc.

If you do not hear from Jam but would like to be part of one of these groups, please contact Sandra Grant on Code A

The IWL Steering Group

Members of the IWL steering group are listed below. This group oversees the organisation's progress against its IWL action plan working towards Practice Plus status, and agrees priority areas for action.

Helen Astle Marie Corner Joy Cowan Jam Bungshy

Denise Farmer (Chair) Sandra Grant Judith Holdforth Jane McQuillan Sara Mousley Angela O'Brien Jackie Oliver Melanie Poulter Barbara Robinson Adrienne Spiers Occup. Therapy Dental Occupational Health IWL Co-ordinator

Head of Human Resources

Snr Personnel Manager Unified Adolescent Team Health Visiting Childcare Co-ordinator EMH (RCN) Non-Executive Director District Nursing Elderly Medicine Comm. Hospitals Emsworth Hospital Havant HC Havant Hospital Workforce Development Confederation Raebarn House

Havant CO Cosham HC Havant HC St James St James Raebarn House Denmead HC Queen Alexandra Hospital Petersfield Hospital

For more information on IWL, any feedback, or ideas about the next stage please contact your local steering group member or: Sandra Grant, Senior Personnel Manager (IWL Lead) tel. Code A

East Hampshire



Primary Care Trust

information exchange

MARCH 2004

This document provides general information and news of potential interest to most, if not all, members of staff. It can either be used as a prompt for a briefing meeting or circulated for people to read, but should not be used as a 'script' at a meeting. Please try to convey the information in your own words, using relevant local examples where possible and explaining the implications for the staff you are talking to. Questions are welcomed and where the briefer does not know the answer to a particular point it should be subsequently clarified.

PCT's staff survey results highlight opportunities to make progress

Thank you to all of you who completed and returned the questionnaire. We have just received the results of the national staff survey conducted last October. The results give us a broad view of your responses about what it is like to work here and benchmarks us against the responses from staff in PCTs across the country.

Our overall response rate at 55%,[404 of the 737 staff who received the questionnaire] although higher than last years local survey was a little below the national average for PCTs.

We are very pleased that in a number of areas e.g. training and development we appear to be doing reasonably well, for example most of our staff (73%) had appraisals within the last twelve months and most have a personal development plan – 94% had some form of training or development (although only 46%) indicated they had participated in Health and Safety training).

Generally we seem to compare well with other organisations and have a good basis on which to build.

However some of the responses are at the lower end of the national averages for a PCT. For example, numbers of staff reporting that they experienced physical violence in the last twelve months or that they experienced harassment, bullying or abuse are high comparison to others. In respect of work life balance, we do not have specific percentages, but we seem to compare unfavourably to other PCTs in respect of opportunities that are provided for flexible working.

We are of course a somewhat atypical PCT with a large secondary care provider function and in many respects are more comparable with NHS Trusts. When considered against the average figures for specialist mental health providers our figures for indicators that appear low in comparison to other PCTs are closer to the medium/average.

We are a little disappointed with our comparative position on the rating for quality of senior management leadership. Although this was 4 on a scale of 1 - 5 [where 1 is poor] it is lower than average for a PCT. The indicator was based on staff's perception of the leadership role played by senior managers in the organisation in terms of setting out a clear vision, innovating, focusing on patients' needs and building strong links with the community and other organisations.

The full survey results will be circulated once officially published next week. They will also be viewable on the CHI web site during week beginning 8th March 2004. We will be developing action plans to take account of the results both in continuing to improve what we are doing well and tackling areas where we can improve. It is important that you get the chance to contribute to those plans – your service manager will talk to you about how you can do that. These will be monitored as part of the PCTs service performance review process, by the Personnel Panel and as part of our IWL implementation process. We began that process at the 2nd March 2004 Staff Conference.

If you have any specific queries do contact your Personnel Manager.

2 PCT strategic framework document launched

Improving Health, the PCT's five year strategic framework document, was launched at the staff conference at the beginning of March. It highlights our priority objectives for the next five years, and sets out the vision for how we want to see local services develop over that time. It will be important in setting the context for our developing plans, ideas and initiatives to help us meet the challenge of improving the health of the population we serve

Copies will be circulated widely over the next few weeks and more information about the document is available in the latest edition of the PCT's Echo newsletter.

3 Local treatment centre for East Hampshire

The PCT is taking part in the national initiative to develop treatment centres, which is an opportunity to work with an independent health care company to provide healthcare services locally. This is linked to our LIFT plans to develop the community hospital in Oak Park, Havant (planned to open in 2007, and set to include at least 90 inpatient beds, day hospital facilities for the elderly, a minor injuries unit and an outpatients department).

The treatment centre initiative will be sited within the community hospital and will provide a range of treatments closer to home for people living in the Havant area - diagnostics tests, such as X-rays and ultrasounds and simple treatments, for example bowel and stomach investigations. This will allow GPs easier access to tests for their patients and will reduce the need for patients to travel to hospitals elsewhere.

A preferred bidder has been chosen and we look forward to working with Mercury Healthcare Limited, local GPs, Portsmouth Hospitals NHS Trust and the local community in developing exactly the way in which these health services will be provided. Until the Oak Park Community Hospital opens in 2007 some of these simple treatments will be provided from a similar facility in Portsmouth.

4

Developments in Specialist Palliative Care - Gold Standards Framework

The aim of this project is to develop a practice based system to improve the organisation of care of cancer patients in the last 6 - 12 months of life. Primary care teams from all three PCTs have been invited to join the Phase 5 programme, with a district wide workshop taking place on February 26th. Virtually all Practices in East Hants wish to take part, with district nurses being key and very involved in the programme.

A GSF facilitator has been appointed who will support the practices throughout the year long programme. Alethea Adair-Charlton will be joining the Planning and Performance team on Monday March 15th 2004 and she will based at Raebarn House.

Alethea will be working on behalf of the three localities of East Hampshire, Fareham and Gosport and Portsmouth City, as a Project Facilitator within the specialist palliative care service. The post is for one year to review and facilitate the care pathway for people who access district cancer services. Recommendations for service improvement will be identified from this whole system review.

The post was designed as a result of significant change in the district service this year involving an expansion of hospital and community based services in Portsmouth and South East Hampshire, including the Countess Mountbatten Hospital in Southampton, Portsmouth Hospitals Trust, The Rowans Hospice in Purbrook, St Wilfrids Hospice in Chichester and Macmillan in Midhurst. A district wide forum was established to agree the service model and invest the Department of Health national funding allocation of £50m. Portsmouth and South East Hampshire's combined allocation was £532,000.

In addition, in the advent of implementing the Gold Service Framework within primary care and the Liverpool Care Pathway at PHT, there is a need to ensure that all aspects of existing and developing services are supporting a whole systems pathway, which is coordinated and integrated to improve the service provided.

The overall aim is to progress the implementation of the 'Supporting and Palliative Care' NICE Guidance within primary and secondary care services, to support people at home wherever that choice is made and is possible.

At the end of the year, Alethea will provide a final report and recommendations to be taken to the Cancer DIT, who will be responsible for supporting and monitoring the action plan to ensure that further service improvements are realised and that the next steps are identified.

5 Listening to our patients

This is the second year that a national patient survey has been undertaken in which local people are asked for their views about how to improve local health services.

MORI, the independent research company working with the local Primary Care Trusts (PCTs), has sent out almost 2,500 questionnaires to local people, chosen at random to take part in the survey, from East Hampshire, Fareham and Gosport, and Portsmouth City during this month.

The results of the surveys will help the PCTs to identify areas in which we can improve the quality of health care for local people."

Patients and members of the public who receive a questionnaire, are being asked to complete and return it in the freepost envelope provided as soon as possible.

The results of the survey will be published in the summer of 2004 reflecting the performance of local PCTs.

6 Intermediate care strategy approved

This clinical strategy was endorsed by the PEC at its February meeting. It sets out plans to ensure that patients needing intermediate care are supported in the right environment by the most appropriate clinicians/carers. The aim of each of the schemes is to avoid unnecessary admission to hospital or to ensure timely discharge from hospital. The Capacity Planning group will be responsible for evaluating the impact of the strategy

The strategy supports:

- The appointment of a community geriatrician to lead and coordinate the full range of services
- A five day a week assessment and treatment service operating from the Laurel Assessment Unit at Petersfield Hospital
- The enhancement of the EMH service to support Intermediate Care
- Community/rehabilitation service
- An emerging plan for a domiciliary based service to support people with a specific chronic disease
- The continued realignment and extension of the community rehab and rapid response services
- An integrated falls service
- Support for nursing/residential homes, ie a nurse practitioner to support the homes on Hayling Island and the local development scheme managed by GPs in Petersfield
- The further development of older persons coordinators/care managers, 'pump –primed' through the innovations forum

Further information about any of these schemes are available from either Paula Turvey or Judith Goodall at Raebarn House.

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Phase 2 of the CHI Review

Having sent CHI evidence on our progress towards implementing clinical governance, highlighting both areas of best practice as well as areas for further development, we are now entering the second phase of the review and preparing for the site visit (26th-30th April).

The evidence was captured in the form of clinical governance questionnaires and existing documents (such as strategies, business plans and committee arrangements). Questionnaires were submitted for the PCT, for each of our community hospitals and for Elderly Medicine and Elderly Mental Health services. These questionnaires will be circulated to staff through managers, enabling these examples of best practice to be shared. Service managers are continuing to review examples of best practice in preparation of CHI's site visit, please let your service manager know if you have any examples.

CHI's analysts will be producing a summary of evidence over the coming weeks. This will be used to guide the review team during the site visit, both in terms of the areas they will visit (such as a community clinic or GP Practice) as well as the themes they will explore.

The Review Team (consisting of Healthcare professionals and one lay member) will be spending an intensive 5 days on site at the end of April to 'test out' areas selected in an earlier stage of the review. They will do this by interviewing staff, conducing observational visits on different sites across the PCT and looking at the systems, policies and procedures we have in place.

Once we know which areas CHI will focus upon, Beth Walker our CHI Review Coordinator, will be able to start scheduling staff interviews (around the 26th March). Please note that CHI will give us guidelines as to which grades, professions and teams they would like to interview. The PCT will provide support to help those put forward for interview to prepare. Likewise, debriefing sessions will be arranged for interviewees post-interview.

CHI briefing sessions continue to run for staff across the various sites (see below) offering staff a further understanding of the review process. Alternatively, Sue Damarell-Kewell, Head of Service Quality and Beth are happy to come to team meetings to talk about the review. Please contact Beth on **Code A** or e-mail **Code A**

Thursday 4 March 12.30pm Friday 5 March 1pm Monday 8 March 1pm Wednesday 10 March 7pm Thursday 11 March 1pm Friday 12 March 1pm Tuesday 16 March 1pm Friday 19 March 1pm

Hayling Island Health Centre, Meeting Room St Christophers, Fareham (1) Seminar Room Gosport WM (2) Seminar Room St James (2) Committee Room 1 Waterlooville Health Centre Meeting Room Emsworth (1) Meeting Room St James (2) Committee Room Denmead Health Centre, Health Education Room

8 Sharing good practice

As part of the CHI Review preparation we have asked services and clinical teams to give us some examples of good practice – being ever the shrinking violets in East Hants! – it was a slow start, but we have since been inundated with great pieces of work that have really made a difference to patient care. Many of these projects are transferable to other care areas so here are just a few to give you a taste of the creative and hardworking teams there are working in the PCT. If we are talking about you give yourselves a pat on the back, if you have a project you would like to share contact Sue Damarell-Kewell **Code A**

Code A

Improving Quality

- Audit Tool for Blood Pressure Monitoring in District Nursing
- Baseline Foot Assessment for People with Diabetes in Podiatry
- Support for Patients with Fractured Neck of Femur in Elderly Medicine
- Emergency Hormonal Contraception in Community Pharmacies
- Clinical Governance Tool Kit for General Dental Practitioners

Health improvement

- Improving the care of Patients with Chronic Respiratory Disease
- Cool to Be Healthy and Go 4 It activity project
- Walking to health
- Teenage Pregnancy and Connexions

Patient and Public Involvement

- Early Onset Dementia Support Group and Conference in Elderly Mental Health Services
- Goal Setting in Stroke Care
- Expert Patients Programme

Clinical Audit and Effectiveness

- Development of the PCT Clinical Audit Pack
- Peer Audit Review in Community Dentistry
- Essence of Care Implementation
- Falls Implementation projects

Risk Management

- Drug Error Review reflection Group in Elderly Medicine
- Violence and Aggression Training Pack for GPs

Staffing and Staff Management

- Older Peoples Health Care Co-ordinators
- Bullying and Harassment project
- Flexible working arrangements in Elderly mental Health

Training and Development

- Gerontological Training Programme
- Treasure Trove Project in Palliative Care
- ADAPT training in Elderly mental Health

Use of Information

- The PRIMIS project in General Practice
- Oral Health for 5 Year Olds in Community Dentistry
- Reconfiguration of Specialist Child and Family Therapy.

We are highlighting many more projects through other methods such as the Quality Newsletter IQ, ECHO, e-bulletins, staff conferences, posters and briefings – so keep an eye out for those over the next few weeks.

9 News in brief

Local:

All Change for NHS Continuing Care: The PCT has been working closely with the independent sector to create a more suitable environment for older people with continuing care needs. From April 16 beds will be available for local residents at Wenham Holt in Liss. Clinicians have been closely involved in the selection process and are confident that the home will provide expert care and a very pleasant environment The medical care will still be provided by the Elderly Medicine dept with support from a locally based practice.

NHS Pension scheme review: The NHS Confederation is reviewing the NHS Pension Scheme for England and Wales. The review's project team have issued a letter (February 2004) to all NHS staff in England and Wales giving them an introduction to the review and reassurances on any potential future changes. This letter has been attached to your February 2004 pay slip, if you did not receive a copy please contact the Pensions Team based at Payroll, St James' Hospital, the direct line telephone number is <u>Code A</u>.

Finance update: Two reminders – firstly it's that time of year when we need to remind all people dealing with invoices to ensure they are processed and sent to Finance (addressed to the correct PCT please – c/o Hants Financial Services at SJH) in time for them to ensure payment by the end of March. All outstanding paperwork/invoices must be cleared and returned to Creditors by 15th March.

Secondly, the raising of debtors invoices - it has become apparent recently that several departments are raising their own invoices. It is an audit requirement that all debtors invoices are raised by the Accounts Receivable Department of Hampshire Shared Financial Services. If anyone is not clear of the correct procedure to raise an invoice we are happy to offer a roadshow where a representative from the Debtors Section will call in to see you at your unit to deliver the necessary training. Please contact Joy Wiliams or a member of the Accounts Receivable team who will be happy to give you guidance. Tel:

Substance Misuse Training: A free, two day training session to explore substance misuse issues in relation to young people (Tier 1) is being funded by the PCT in March and April. The course is available to 24 participants on a first come, first served basis - and you should be available to attend both sessions (Thurs 25/3 and Thurs 15/4). It is being run for agencies and individuals involved in the care of young people.

Session 1 will provide the opportunity to learn why young people take substances, to recognise some signs / symptoms and to be aware of agencies who may be able to offer help. Session 2 will provide some basic information about interventions which may help when working with young people. For more information and or to book a place please contact Anne Clarke or Jane Clements on **Code A**

Provision of specialist treatments: You may well have seen recent media coverage and an item on the BBC Watchdog programme relating to the local position over periacetabular pelvic osteotomies (PAOs). This particular case concerns an operation that is only carried out in a few places in the NHS. There is one part time surgeon who performs the operation for Portsmouth Hospitals NHS Trust (PHT). An independent review of published evidence commissioned by the PCTs did not find any clear evidence to support or refute the claims made for this operation over existing treatments. Discussions between PHT and PCTs are still ongoing and it is hoped there will be a rapid resolution on the issue.

10 Improving working lives

March's update is attached.

11 Have your say

If you have any comments or questions arising from this information exchange, that you haven't been able to air at a team meeting or with your manager, we would be happy to hear from you (don't forget your name and address if you would like a response)...Write to:

TONY HORNE, CHIEF EXECUTIVE, EHPCT, 3RD FLOOR, RAEBARN HOUSE or DAVID BARKER, MEDIA AND COMMUNICATIONS SERVICE, ST JAMES' HOSPITAL.