Health and Safety Six Pack

Gloucestershire Hospitals has a key strategic objective – to maximise safety for both staff and patients.

To support this objective, the Trust's Risk Team has developed a Staff, Visitor and Contractors Safety Strategy Safety Framework with the core aim of reducing work related illness, accidents and near misses at work.

Getting hurt or becoming ill through work should not be an expectation or a consequence of working for the Trust. Absence from work adds to the pressure on the remaining staff and is not cost effective.

The facts speak for themselves with 40% of all sickness absence in health care workers is related to musculo skeletal injury and health care services demonstrating higher rates of sickness absence to other industries.

However, the new Health and Safety Six Pack is designed tackle these very issues. Go to page 3 to find out how we are working to improve health and safety at the Trust…
Gloucestershire Hospitals is committed to providing single sex accommodation.

Protecting patients’ privacy and dignity is an essential part of delivering high-quality care. Providing same-sex accommodation is a powerful sign of our commitment to treating all patients with respect, and to making their time in hospital as comfortable as possible. Everyone working in the NHS has a vital part to play in achieving the goal of eliminating mixed-sex accommodation in hospitals by April 2010.

We believe there are no exemptions from the need to provide high standards of privacy and dignity, men and women should not have to sleep in the same room and should not have to share mixed bathing and toilet facilities unless they require hoists or specialised baths.

Why same-sex accommodation is so important to patients

Sharing accommodation with the opposite sex can undermine privacy and dignity at a time when patients are already feeling vulnerable. The most common concerns include physical exposure, being in an embarrassing or threatening situation, noise, and the risk of overhearing conversations about other patients’ conditions.

Women, and elderly women in particular, are most likely to worry about being in mixed-sex accommodation, although male patients may also be reluctant to talk openly and/or feel embarrassed when in a mixed-sex setting. Some patients are also strongly opposed to mixed-sex accommodation for cultural or religious reasons.

When mixed-sex accommodation is unavoidable

The need to eliminate mixed-sex accommodation applies to all areas, including admissions wards and critical care areas. However, there may be times when it is acceptable for men and women to be treated together, for example when they are receiving high-tech care (with one-to-one nursing), very specialised care or urgent/emergency care. Staff must consider the implications for all the patients involved and make sure that patients are moved to same-sex accommodation as soon as possible. In the meantime, staff should take practical steps to protect patients’ privacy and dignity, for example by providing clear information and making sure that private conversations cannot be overheard.

Where mixing of the sexes is unavoidable the situation must be rectified as soon as possible.

What will it mean for this hospital?

From April 1st the Trust is required to report to the commissioners and SHA all occasions when we fail to provide single sex accommodation.

To ensure this does not happen, the following process has been agreed:

- The clinical area identifies the single sex accommodation breach
- The clinical area phones the single sex breach automated telephone breach line on 4480 (if calling from GRH prefix with 72)
- The next working day, Clinical Audit will log the breach. If the breach is longer than 30 mins a Root Cause Analysis form will be forwarded to the ward.
- The breach details are also sent to Trust bed managers and general managers
- The clinical area will complete the Root Cause Analysis form and return to Clinical Audit within 1 week
- Clinical Audit complete monthly exceptions report for commissioners and SHA
How we are improving Health and Safety

The Trust has identified six areas for Health & Safety improvements. The Health and Safety Six Pack programmes will identify targets and plans to reduce harm in the work place. Each of the following groups will have staff side representatives and expert leads:

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<tr>
<th>Stress</th>
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<td>The prevention, reduction and management of stress related illness.</td>
<td>Prevention and reduction of unnecessary slips, trips and falls.</td>
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<th>Sharps</th>
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<td>The prevention and reduction of sharp related injuries.</td>
<td>Reduction of violence at work</td>
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<th>Muscular-skeletal Injuries</th>
<th>Leadership</th>
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<td>Prevention and reduction of muscular-skeletal and upper limb injuries/disorders.</td>
<td>Health &amp; Safety leadership and management</td>
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If you wish to get involved in these programmes or would like to find out more, contact Andrew Seaton Director of Safety or Bev Williams Trust Risk Manager at GRH on 5765.

Six Pack Screen Savers

Keep an eye out for the screen savers raising awareness of the key six areas and for details of consultations over the next few weeks or go to the front page of the staff intranet for more information about the safety six pack weekly topics. These pages detail more information about each of the following areas and feature resources such as questionnaires and useful links to external bodies.

Sharps Awareness
Did you know? 438 of our staff were exposed to sharp injuries in 2009 but only 63% were caused by needles and 2% of injuries were from needles in rubbish bags.

Manual Handling - 4th - 7th May 2010
Take a look at the manual handling intranet pages to find out more.

Violence and Aggression
Meet with community police and security advisors and find out what they do.

Leadership and Management
Come and get a copy of the new Controls Manual and join Dr Frank Harsent and Alison Fry (HSE Inspector) in the Lecture Hall GRH on 29th April. If you would like to attend contact Andrew Seaton or Jacky Fetters on 5765.

STaF - Slips, Trips and Falls
Have a look at the HSE Shattered Lives campaign (see link from the intranet pages) and think about how slippery your floor is.

Stress and Wellbeing
If you have a job that challenges you, you should expect to feel some pressure at work. However, when that pressure is excessive and you suffer an adverse reaction to it, then it has become stress.

Take part in two staff sessions with the Wellbeing Group to learn about assessment of workplace stress.

For more information about managing stress in the workplace, details about the Wellbeing and Stress Group and how to join as well as stress tests, go to the Health and Safety intranet pages.
Staff Matters

Carol’s creativity

Estates Officer Carol McIndoe is the creator of colourful murals that have been brightening up Gloucestershire Royal and Cheltenham General for years.

Carol painted her first murals in the College Road Wing stairwell in 1988-89, followed by others in public areas such as the Avening Ward corridor, Link corridor, Dietectics, Delancey Hospital and some toilets!

However, the majority of her work is in clinical areas and not seen by the public or most members of staff.

We caught up with Carol to find out more about how she got involved in this work and about her inspiration for many of these designs.


“I enjoyed scratching away at the drawing board producing complex engineering drawings, but relished designing the odd leaflet, poster or pamphlet whenever I could. Gradually word got around that I was “arty” and I painted my first set of large-scale murals in College Road Wing in 1989.

“I’ve painted several windows in areas which don’t have a real one, to create a less claustrophobic, more pleasant environment for staff and patients; not all of these still exist but I’ve painted them for Cheltenham General and Cirencester Hospital.

“Most of the earlier paintings were in public areas like stairwells and corridors at CGH and Delancey, but increasingly they became a useful source of distraction/relaxation in clinical areas such as anaesthetic rooms and acute care wards such as ITU and HDU, and to date I’ve painted murals and panels for 32 clinical areas; some single paintings, others consisting of extensive images.

“Being mindful of the effects that some drugs can have on patients perception and also on the ‘colour-casting’ of strong colours, careful consideration goes into each painting to ensure it won’t have a detrimental effect in a clinical area.

“Many of the paintings are based on landscape and skies, with imagery such as fish, kites and balloons being popular.

“I’ve been absolutely delighted to hear that the paintings are frequently referred to when working with anxious patients and that they really serve a valuable purpose – it’s very rewarding."

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Staff Matters

Staff appraisal success

Following the efforts of all staff in the run up to the February deadline, the vast majority of departments achieved the 100% Trust Appraisal target.

The Appraisal and Development review is a process designed to help staff in their jobs and improve patient care by ensuring staff have the right knowledge and skills to do their job well.

The target was determined by the Trust Board in October 2009 and meeting this is a significant achievement. David Smith, Director of Human Resources and Organisational Development reported to the Board an overall appraisal rate of 92% completion.

The Trust Board recognised the progress made and charged the Appraisal Management Project Group with maintaining the progress. They joined the group in thanking and congratulating staff. Speaking after the March Board Meeting, David commented:

“It is important that managers and individual staff continue to work together to maintain the high compliance rates and work to further improve the quality of appraisals within their department.”

For further information, help and resources visit the Appraisal and Development Review Staff Intranet pages at http://ghnnst/C2/C12/appraisal/default.aspx or contact Lucy Bates, Head of Lifelong Learning.

News in Brief

New mums have a say

The Trust will be running the National Maternity Survey 2010 during May. The survey will go those women who gave birth in Gloucestershire during February 2010.

The Trust is required by the Care Quality Commission to participate in the National Survey Programme which annually includes an Inpatient Survey and either an Emergency Department, Outpatient or Maternity Survey.

The National Maternity Survey results will be available in the autumn.

If you would like more information then please contact the PPI department by email at Patient&PublicInvolvement@glos.nhs.uk
Celebrating Success Staff Awards 2010 coming soon!

This year’s Celebrating Success Staff Awards ceremony, where winners will share their success with family, friends and colleagues, will be held on October 11th at the Cheltenham Chase Hotel.

Details will follow in next month’s edition of Outline on how you can make sure your colleagues get the recognition they deserve at this year’s ceremony. This information will also be available on the intranet from the middle of next month.

David Smith, Director of Human Resources, said:

“We recognise that it is staff who help to make our patients experience of hospital a good one and the Trust a better place to work and we want to encourage as many nominations as possible this year.”

Board roundup

At the Trust Main Board meeting held on Thursday 25th March, the Infection Control team, microbiologists and domestic staff were praised for their consistently high level performance over the last few months in spite of a dramatic increase in workload caused by swine flu earlier in the year and, more recently, Norovirus.

The Board heard that during March the Trust began to implement changes surrounding the 10am discharge of patients and the prescription of TTOs on the day before discharge.

Meanwhile the Board stated its commitment to working with the SHA to implement a Dementia Strategy ahead of time. The Trust plans to launch all safeguarding issues on 26th April ahead of the county launch in June. The Board heard that the Care Quality Commission had stated that it was pleased with progress the Trust had made.

The Board heard that Dr Roger Owen had been appointed to the post for the Chief of Service for the Diagnostic and Specialist Division.

Finally, the Chair informed the Board that the Complaints Policy was presented for information. The Chief Executive noted that there had been some key changes and highlighted that the timescale in which complainants could make complaints had increased from 6 months to 1 year; nationally, the 25 day response period for complaints had been abolished on the grounds that complex cases took longer to close; the Trust, however, would continue to use the 25 working day timescale as an internal quality measure; there is now a 2-stage resolution process instead of 3 and there is now an opportunity for redress.

The next public meeting of the Main Board will take place at 9am on Friday 30 April 2010 in the Boardroom, 1 College Lawn, Cheltenham.
In memory of John

In Memoriam: Alison Riddell 1943 -2010

It is with great sadness that we report the death of Alison Riddell, formerly District Superintendent in Radiology at Cheltenham General Hospital. After completing her training in 1962 at the Royal Infirmary in her home city of Glasgow, Alison worked at the Paisley Royal Alexandra Infirmary until 1971 when she crossed the border to take up a senior position at Hull Royal Infirmary before moving on to the Lancaster Royal Infirmary a year later.

In 1973 she was appointed Deputy Superintendent radiographer at the University Hospital of South Manchester where she remained for ten years. In 1983 she continued her journey south to take up the position of District Superintendent at Cheltenham General Hospital; a post she held until her retirement in November 2002.

A formidable boss, Alison took a no-nonsense approach to the machinations of leading a radiography workforce that sometimes had difficulties in embracing the changes that inevitable took place over a twenty year period. She recognised quite early on that the traditional “on-call” system was an anachronism in a modern health service and Cheltenham Radiographers benefited from her foresight in reducing the maximum working shift from 27 hours to 12 whilst other departments were still wondering what the Working Time Directive actually meant!

Although she hated the increasingly politicised nature of the NHS, Alison remained committed to the principles that defined radiography to her: the privilege of seeing inside patients, the fascination of the skill and detail that radiography involved and the need to embrace new processes that technology brought about.

Alison devoted her life to Radiography with a career spanning 40 years and it is fitting that she was able to benefit from the services that she had been so instrumental in creating, in the last few years of her life.

Alison was cremated at Cheltenham Crematorium on Monday 22nd March followed by a memorial service at St Andrews which was attended by over 200 friends and former colleagues.

Simon Plumb, Rosemary Luce, Christine Dooley; Department of Radiology, Cheltenham General Hospital.

News in Brief

In memory of John

Following a short illness, bravely fought, John Fuller, Assistant Director of Procurement passed away on Good Friday.

John will be sorely missed by his team and all who knew him at Gloucestershire Hospitals.

Irwin Wilson, Associate Director of Contracts pays this tribute: “I met John when I came to work in Gloucestershire in 1987. He was then the manager for sterile services at Gloucestershire Royal Hospital. Many of us have worked with John in different roles throughout the intervening years; not least during the five year new development of Gloucestershire Royal. John was a true gentleman who provided a wealth of expertise and professionalism to everything he did. He had a wickedly dry sense of humour and we will miss him.”
Patients with hospital appointments are being texted an appointment reminder in a bid to reduce the numbers of patients who don’t turn up and don’t tell the hospital.

More than 39,000 appointments are missed (but not cancelled) each year. This costs Gloucestershire Hospitals NHS Foundation Trust more than £4 million in lost income.

Sean Elyan, Medical Director, said: “When people fail to turn up for their outpatients appointment it’s a terrible waste. It’s a lost opportunity for another patient, it’s a waste of time for the doctors and nurses who run the clinics, a waste of the efforts of the booking staff and administrators who are trying to run an efficient service.

“And of course it’s a waste of money - around £100 per appointment.”

Text reminders are now being sent to patients with appointments in Diabetes, Endocrinology, Acute Paediatric appointments, Gynaecology, Orthopaedics and Dermatology at Cheltenham General and Gloucestershire Royal Hospitals. It will be gradually rolled out to all OP clinics.

Texts are sent 7 days before the appointment. The message includes a reminder of the date, time and location of their appointment and asks them to confirm whether they will or won’t be attending, with the option to rebook.

This project is being championed by important frontline staff such as the reception staff in outpatient departments, the Booking Office Team and medical secretaries – just some of those who are helping to make texting make a difference.

Patients will continue to get their usual written appointment letter, and not everyone will receive a text reminder, as the Trust is still collecting mobile phone numbers. As the service rolls out, patients are being encouraged to complete one of the leaflets available in the outpatients departments.

39,000 missed hospital appointments in 1 year Cost - £4 million

Figures for 12 months, Gloucestershire Hospitals NHS Foundation Trust Outpatients Departments
Andrew Bishop retires

Colleagues from Medical Engineering and GRH SCBU gathered together at the end of last month to bid farewell to Andrew Bishop and to wish him all the best in his retirement.

Andrew began as a trainee at GRH in medical physics in 1987 and retired as a specialist technician at GRH in medical engineering in 2010.

His career spanned the mechanical section as well as electronic section of medical engineering and Andrew was a familiar face to many staff over the years as he worked at both GRH and CGH. Andrew, in conjunction with Surgeon James Robinson, developed and manufactured a range of micro surgical instruments for the then new YAG laser in 1991 and he engineered and manufactured many specialist instruments while in the medical engineering mechanical section.

He has a degree in history of art from Cambridge College of Arts & Technology and his interests include art and travel.

His colleagues told Outline that Andrew was very quiet and reserved, but had a great sense of humour. Steve Burnside: “He was very good at his job, very well liked by the staff he worked with and for and is a better snow skier than he admits!

“Over all, he is a very interesting person who will be greatly missed in medical engineering.”
If you have applied for your new staff car park permit, please arrange to pick up your new permit and parking card from your nearest Parking Shop this month.

VINCI Park manned the Parking Shop from 8am to 8pm on Tuesday 6th until Saturday 10th April to enable as many staff members as possible to pick up their permits and to top up their Parking Cards. However, some staff members were understandably unable to attend these dates due to annual leave. If you have been unable to pick up your permit, please contact your parking shop as soon as possible on your return to arrange alternate arrangements.

The new permits and 50p per day Parking Card system will officially start from 12th April, however, VINCI Park does appreciate that staff will need time to collect their permits and therefore VINCI will issue notices and guidance tickets for one month after the official start date.

About the Parking Cards

The reusable Parking Cards will be issued alongside the permits. On those occasions when you may need to park in the permanent car parks, these will enable staff to top up their card, and to swipe the card when parking rather than using cash in the parking machines on both sites.

There is a £5 refundable deposit to pay when you pick up the Parking Card, and the minimum top up fee for the card is £1, therefore staff will need to take £6 with them to the Parking Shop when they collect their new permit and card. Please bring your staff ID with you as well as proof of address (ie water bill or driving licence card)

A leaflet will be given to staff members on collection of the permit, this explains how to use the new system. This practical information is also available on the Trust Intranet ‘Parking and Transport’ pages.

Temporary car parking arrangements at GRH from April 26th - You will not be able to use these cards in three of the temporary standard user car parks at GRH for the duration of the multi-storey car park build. More information on this can be found on the ‘Parking and Transport’ pages of the staff intranet.
Katherine Jenkins Charity Concert

LINC are delighted to announce that Katherine Jenkins will perform a charity concert at Cheltenham Racecourse on Saturday 3rd July 2010. Picnics and chairs can be taken to this outdoor event, gates open at 6pm, with the concert commencing at 7.30pm.

Tickets are available at £35 each, however any Trust Staff may purchase directly from LINC and therefore not pay the booking fee that is required on-line, they will however, require a stamped addressed envelope.

If you wish to buy your tickets please contact linc@glos.nhs.uk, call 08454 22 44 22 or visit the website www.lincfund.org for further information.

Trust Trainer runs for charity

Mandatory Trainer Lucy Mathieson has come some way after undergoing spinal surgery two and a half years ago and is about to go much further for charity.

The Learning and Development staff member is planning to run three races to raise money for three separate cancer charities as a way of giving something back after her operation.

She explains: “I am running the Bupa Manchester 10km on 16th May for Cancer Research UK, Race For Life 10km 3rd July at the Cheltenham Race Course and the Great South Run on 24th October for the British Heart Foundation. If anyone would like to support me I would be really grateful”.

If you are interested in supporting Lucy go to: www.runningsponsorme.org/lucymathieson3
The 18 week referral to treatment (RTT) pathway is about improving patients’ experience; ensuring all patients receive high quality elective care without any unnecessary delay. 18 weeks applies to the pathways that do or might involve consultant-led care, setting a maximum time of 18 weeks from the point of initial referral up to the start of any treatment necessary for all patients where it is clinically appropriate and where patients want it. 18 weeks referral to treatment data measures the entire patient pathway, from the moment the patient is referred into our care until their treatment begins.

**Opportunity to discuss 18 week questions/scenarios**

The 18 Weeks Intensive Support Team (IST) is currently helping the Trust to deliver and sustain 18 week patient pathways. As part of this joint work we have redesigned the Clinic Outcome Form and the national team are running a series of hour long surgeries/training sessions which will give an overview of 18 weeks clock rules; an overview of revised outcome form and how to complete it and also a Q&A session about difficult scenarios. These sessions will be interactive and give you an opportunity to ask questions about the new form, the 18 week rules and also bring along scenarios that you are unsure about where the clock rules would be applied.

Training sessions will take place on:

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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>28th April 2010</td>
<td>Sandford Education Centre</td>
</tr>
<tr>
<td>29th April 2010</td>
<td>Redwood Education Centre</td>
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<tr>
<td>7th May 2010</td>
<td>Redwood Education Centre</td>
</tr>
<tr>
<td>11th May 2010</td>
<td>Sandford and Redwood Education Centres</td>
</tr>
<tr>
<td>12th May 2010</td>
<td>Sandford Education Centre</td>
</tr>
<tr>
<td>14th May 2010</td>
<td>Redwood Education Centre</td>
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Training is open to both Acute Trust and Community Hospital Staff and all staff (e.g., consultants, registrars, nurses, AHPs, secretaries, booking and admissions staff, service managers, receptionists) involved in the patient pathway from referral, through outpatients to treatment (admitted and non-admitted) should attend this training.

For more information about 18 Weeks and the role of the Intensive Support Team go to [www.18weeks.nhs.uk](http://www.18weeks.nhs.uk)

For more information about the advertised training sessions contact Gina Winter (gina.winter@glos.nhs.uk) or Kayleigh Wheatley (kayleigh.wheatley@glos.nhs.uk)
An initiative to encourage staff to come together to talk about the difficult emotional and social issues that arise in caring for patients is continuing this month at CGH.

The programme is based around monthly one-hour sessions that are designed to help staff feel better able to cope with the challenges they face in their daily work in hospital.

Last month, Cheltenham joined the Royal Free Hampstead, in London, as the first two sites in Europe to pilot the highly regarded Schwartz Center Rounds®.

Supported by a trained facilitator, each session focuses on a particular topic which is introduced through the lens of a particular case. A panel of 2–3 members of staff briefly present a case history, describe their involvement in it and reflect on how it made them feel. Dialogue then opens to the floor: participants ask questions, comment on the case, reflect on their own practice and think through some of the larger issues the case raised.

This month the theme is ‘To tell or not to tell?’. The example given is a patient with a chronic and life threatening condition is approaching a major life event. It seems that the partner has little knowledge about the patients condition and does not engage with the clinical team. What right to know does he have, if any, and how should this be handled?

The topic will be presented by Dr Andrea Penketh and members of the Respiratory Care Team.

Participants have noted how useful it is to hear that staff in other roles and disciplines face similar challenges.

This month’s round is being held on Thursday 6th May at the Sandford Education Centre between 1 & 2pm It is open to all staff and lunch is provided. Planning is underway to launch similar sessions at Gloucester so watch this space.
Summary Care Record (SCR)

The NHS is proposing to make changes to the way some of a patient’s health information is stored and managed.

The system being introduced is known as the Summary Care Record. It will contain details of the medicines a patient is taking, any allergies they have and whether they have ever suffered a bad reaction to any medicines. It will not replace the normal health records held by their GP.

The Summary Care Record is a secure, confidential, electronic system. It means that if an individual has an accident, becomes unwell when they are away from home, or need treatment out of hours, then any doctor or other clinician who is treating them will have immediate access to this information. The Summary Care Record will be very useful and important when people require emergency care.

We are about to enter our public information period, which will start with a mailshot to all adult patients in the county (mid April).

Patients have three months to decide if they want a SCR and, if not, what they need to do to opt-out. An SCR will automatically be created for those who do not express a wish to opt out.

Cancer in the Community

November 2009 saw the launch of a new service for people aged 18 and over living with cancer across Gloucestershire.

This pilot project is a new way of following up patients in the community using an existing resource (Village Agents) to signpost cancer survivors to the most appropriate advice, and is designed to work alongside existing NHS services.

It is hoped that this will help improve the patient experience and ensure more timely access to advice. This in turn might result in earlier return to work, less GP consultations, a reduction in admissions and improvements in the quality of life for cancer survivors.

The Gloucestershire project is an example of collaborative working involving cancer patients and carers, employees from the 3 Counties Cancer Network, Gloucestershire Hospitals NHS Foundation Trust, Gloucestershire Community and Adult Care, Gloucestershire Rural Community Council and Macmillan Cancer Support all working together to support cancer survivors.

If you feel this service may benefit anyone you have contact with professionally or otherwise contact Gloucestershire Survivorship Project Managers Sarah Dryden and Fran Callen on 08454 228118.
The Trust is committed to working with carers to help to make the county Carers Strategy a reality. Gill Brook, Head of Patient Experience, said: “We are completely committed to improving the involvement and support of people who provide on-going care for a loved one and we fully recognise the importance of their role and their knowledge.

“The Trust has recently re-launched a Carers Strategy Implementation Group the purpose of which is to improve the involvement, communication and support of carers who attend our Hospitals. Carer representatives are a vital part of this work as are colleagues from Carers Gloucestershire.

“We will be promoting the role of carers and the work we have achieved together during National Carers Week which is 14th – 20th June 2010.”

In relation to discharge, patients are discharged from hospital when they are ready and fit enough to go, ensuring that they do not stay in hospital longer than is necessary. Working with carers is vital to that process. Many patients go home from hospital, others need to receive ongoing care in other places such as community hospitals.

“In order to provide care closer to home the health community is investing in and enhancing community based services, for example, new community hospitals.

“As part of our current work in improving the discharge process we are making arrangements for discharging patients from hospital earlier in the day.

“Our patients and their families are telling us this is very much more convenient for them for a whole host of reasons, transport and tiredness being just two of them” said Gill.

“We also work closely with the adult social care teams, where that is needed.”
News in Brief

Parachute jump for charity

The Trust’s Health Psychology Department’s Kelly Hodges is steeling herself to throw herself out of an aircraft.

Kelly is taking part in a sponsored parachute jump along with 30 other people on 16th April to help raise money for soldiers who need support with dealing with Post Traumatic Stress Disorder.

She explains: “A lot of soldiers suffer from this and the more we can raise awareness then the better it will be for them and their families.

“So many soldiers leave the Army, RAF or Navy, or are still serving, not knowing what is wrong with them and they (and their families) suffer for such a long time with no help and support”.

The event takes place at the Silverstars Parachute school at the Duke of Gloucester Barracks near Cirencester.

The event will include a BBQ and refreshments plus other stalls. So go along if you would like support Kelly as she leaps out of a plane at 13000 feet or to sponsor her go to ptsdhelp@ptsdworldwide.com and quote her name.

Marathon run in memory of the late Sister Tina Franklin

Howard Marshall from Ophthalmology Outpatients at CGH is running a half-Marathon in Annecy, France, on Sunday 18th April to raise funds for the Sue Ryder Hospice in memory of late ophthalmology theatre Sister Tina Franklin who passed away last May in the Sue Ryder Hospice.

If you would like to sponsor Howard, go to: http://uk.virginmoneygiving.com/HowardMarshall

Charity watercolour raffle

Local Artist Pricilla Bennett raised £139 for Lymphoedema patients across Gloucestershire by raffling one of her paintings.

Pricilla suffers from Lymphoedema in her right hand and arm as a consequence for treatment of her breast cancer, but this has not got in the way of her passion of painting both watercolour and oils.

Tickets sold to patients attending clinics and groups at Gloucestershire Hospitals raised the money which will be used to buy new equipment.

Patient Eunice Tandy was lucky enough to win the seascape watercolour and was described by the local Lymphoedema Service spokesman as ‘very happy’.

For further information on the Lymphoedema Service please email trudy.dimmock@glos.nhs.uk or telephone 01452 617569.
New legal rights for patients added to the NHS Constitution

New legal rights for NHS patients in the South West came into force early this month as part of the NHS Constitution.

Anyone suspected of having cancer who is urgently referred by their GP will have the legal right to wait no more than 2 weeks to see a specialist, and people referred for elective procedures will have the legal right to start treatment within 18 weeks.

The rights have been added to the Constitution following a three-month public consultation period.

Nearly nine out of ten people who responded to the consultation supported proposals to give patients the right to maximum waiting times for elective treatment and for urgent cancer referrals, or for the NHS to look for an alternative provider if this is not possible.

From April 2012, a further legal right of five year health checks for people aged between 40 and 74 will come into force.

The Chairman of the South West Strategic Health Authority, Charles Howeson, said: “As the leader and guardian of the NHS Constitution for NHS South West I welcome these rights being added which is good news for patients.

“We will continue to work with all NHS organisations across the South West to ensure that these maximum waiting times, and the NHS Constitution as a whole, are embedded in everything we do.

“The NHS Constitution will form a key part of our vision for improving health services in the region.”

Gastroenterology Specialist Nurse Margaret Collins has had an article published in a peer-review nursing journal.

Based on her study on the ‘principles of emergency care’ at University of West of England, Margaret wrote about the importance and difficulties of implementing the Saving Lives programme in an emergency setting.

Saving Lives is the Government programme which aims to reduce Healthcare Associated Infection (HAI) through High Impact Interventions (HII). These are evidence based clinical interventions which, when carried out consistently, can reduce the risk of HAI to the patient.

Margaret explains: “The tutors encouraged me to submit the article. I submitted it to the RCN Emergency Nurse Journal and, after a long process of peer reviews and editing, it was published in the March edition.

“It also features a "case study" about how A&E at CGH worked to improve hand hygiene.”

The article examines some of the difficulties staff encounter in implementing Saving Lives and HII in emergency settings, recent research around effective infection control, suggestions to improving adherence to HII, the importance of feedback following audit and how staff of all grades can improve infection control by influencing the practice of their colleagues.

Should you be interested in reading more, Margaret has given a paper copy to the GRH Redwood House library.
Cystic Fibrosis patients helped to stay at home

Many people in Gloucestershire with Cystic Fibrosis no longer have to come into hospital to receive regular treatment, thanks to the efforts of the enhanced and extended specialist CF team. Figures for 2009-10 show there has been a 50% decrease in the number of admissions needing to be admitted to hospital.

Dr Andrea Penketh, Consultant Respiratory Physician, said: “I have worked with CF patients for 30 years and when I started it was rare for people to reach adulthood. But we currently have over 30 adults receiving treatment and every year about three young people transfer to our care from paediatrics.”

The enhanced team led by Dr Penketh, is made up of specialist nurse Zoe Primett who won a Staff Excellence Award in 2009 for her commitment and dedication, then in 2008 they were joined by a second specialist nurse, Gill Morris, and a specialist physiotherapist, Clare Williams.

Most Cystic Fibrosis patients have chronic chest infection and need courses of intravenous antibiotics over two weeks every few months, and previously this always took place in hospital.

Dr Penketh said: “The expanded team has allowed us to treat many patients at home, with regular visits by members of the team. This avoids the need for these people to be admitted to hospital which is far better for them, as many people can actually continue at work or at college while being treated. “We are pleased to be providing this much better service to patients, many of whom don’t now need to be admitted to hospital – leaving those beds available for other patients.”

The deadline for submitting an article for the May edition is Friday 30th April.
Adverts

Chapel Spa: 10% offered to all NHS staff on treatments and spa packages Monday-Friday. **Staff ID badge must be shown when booking.**

Hairdresser: ‘Hair By Hannah’ Mobile Hairdressing covering Cheltenham area. Qualified, insured and experienced, competitive prices. Contact 07708 556350

Wedding Photographer: for all your photographic and DVD needs for your special day. Look at our web site www.rainbow-photography.com or call Sharon - 07949100389

Linc are organising a coach trip to the Chelsea Flower Show on Thursday 27th May. Call to book your seat for £70 including entry on: 08454 224422

Prodec - The Complete Decorating Services with over 30 years experience are offering a discount for NHS employees. For free estimates and advice email: prodec@btinternet.com or call them on: 0797 1460314.

JB Garden Services are offering a 10% discount for NHS employees. General garden maintenance, beds and borders, pruning, mowing, hedge-cutting, weeding, digging and general clearance within a 1 mile radius of Cheltenham. Contact Jamie: 07981 858888 or email: jbgardenservices@sky.com

Cambrey Wills is offering NHS staff, friends and families a 20% discount on all services, that can be seen on the website as well as free consultations and quote fixed rates. Go to www.cambraywills.org.uk to find out more.

Holiday Villa in Lanzarote: Luxurious 5* villa in Puerto del Carmen. Very private with own heated swimming pool, large barbecue area, golf putting area, darts, sky movies, sport etc. For more information go to: www.lanzaroteconnoisseurvillas.com or call 07979 63849 for a brochure

Available to rent: One studio flat and one bedroom flat in a beautiful period building in Cheltenham town centre. Both flats recently refurbished with ensuite facilities, modern kitchen and both available from April. Both flats can be part furnished if required (double bed, small sofa, chest of drawers, fridge, washing machine and cooker) Rent starts from £375 per month for studio. For more information contact Ruth on 07885 541241 or email: ruth@meriski.co.uk

To let: Two bed Duplex Flat in Central Gloucester (Close to the Park). Very good order throughout, double glazed, shared garden with shed. Situated in a no-through road. Available Immediately at £475 PCM. No smokers please. Tel: 07766 410139

Cancer research project looking for staff participation: A research project exploring the perspectives of healthcare professionals who have had treatment for cancer, and have returned to working with people with cancer is looking for a dietician, doctor, nurse, occupational therapist, physiotherapist, podiatrist, radiographer or clinical psychologist to take part in a research project. To find out more contact Dr Theresa Mitchell from the University of the West of England at Theresa.Mitchell@uwe.ac.uk or call her on 01452 702168/702177

Physio Staff Self Referral

Did you know that, as a member of staff you can refer yourself to Physiotherapy? All main hospitals offer this service. All you need to do is visit the Physiotherapy Intranet site and complete the on line self referral form. Alternatively, you can contact your local Physiotherapy Department where you will be asked to complete the same form by hand. An appointment will be made for you, as soon as is appropriate.

Gloucester-based qualified Holistic Massage

Therapist Ria Morrison is offering NHS staff discounts on holistic and foot reflex massage. Treatment times vary between 30, 45 and 60 minutes and Ria can travel. Call her on 01452 387638 or on 077 919 495 81. Alternatively go to her website to find out more at: www.riacomplementarytherapy.com

To place an advert, please contact Cathie Stoker on ext 3563 (CGH) or email cathie.stoker@glos.nhs.uk. Alternatively, place your advert on the ‘Staff Classifieds’ section on the intranet (under useful pages)
Cheltenham Cycle Challenge

Sunday 2nd May 2010 at 9.00am

Supporting Marie Curie Cancer Care or your nominated charity
Organised by Rotary Club of Cheltenham North.
26 miles, starting and finishing at Newlands Sports Centre
Southam Lane, Bishops Cleeve.

Entry: £10 each rider, £25 for families, £8 per team member
(min. of £32)

This will go to Marie Curie Cancer Care: you can also raise
sponsorship for a Charity of your own choice

Full details and entry forms available at www.rotarycyclechallenge.info or email cheltenhamcyclechallenge@gmail.com for information