

Outline

January 10

The staff newsletter of Gloucestershire Hospitals NHS Foundation Trust

Staff called to rise to the challenge in 2010



Reducing emergency admissions by 3000, patients to spend one day less in hospital, and significantly fewer beds, are all in the picture for the Trust in 2010.

Chief Executive, Dr Frank Harsent, said: *"None of this will come as a surprise to anyone who has been listening to my regular messages during 2009.*

"We must begin to see the benefits of UTOPIA, for example, removing the time which is wasted when patients are waiting for an intervention such as having ward rounds early in the day; no delays for TTOs and social care being involved in the planning for discharge on day one. Also we need to work urgently with the PCT to dramatically reduce the number of emergency patients we see.

"In the coming financial year the revised national tariff means that all hospitals cannot exceed the level of emergency admissions that they had in 2008/09. If we do so we will only be paid 30% of the tariff. As we are now treating some 3000 patients

more than the 08/09 level, we will make a large financial loss if we continue as we are at present.

"Obviously we need to devise, with NHS Gloucestershire, a new treatment system where a proportion of emergency patients can be seen in the community and at community hospitals rather than be admitted at CGH or GRH."

This change was outlined by the Department of Health in December through its publication of the Operating Framework for 2010/11. The Framework effectively dictates what we can and cannot do. The national tariff has not been uplifted for pay and prices which means all trusts have to save 3.5%.

The knock-on effect of the Operating Framework, plus the carry forward of £2 million debt from this year means that our savings target is £27 million for 2010/11. To achieve this we will need to focus on reducing length of stay by one day, thereby decreasing our need for beds. We must also improve productivity within our out-patient clinics and operating theatres.

The changes to length of stay, improved efficiency, and having more day cases will all bring improvements to the experience of patients and are all being achieved in other Trusts.

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Staff called to rise to the challenge in 2010

Dr Harsent said: *“We’re not alone in being in this position. The national economic climate means that the public sector is going to see reduced levels of resource compared to recent years, though the NHS has received a good settlement relative to other sectors. Sometimes people think that the wider financial climate doesn’t affect the NHS, but it does, and we are now seeing its impact.*

“We all need to pull together to improve discharge, reduce length of stay, improve productivity and reduce our emergency admissions. Our aim is to reduce our beds and avoid job losses - which can be achieved if we plan the change now and begin implementation quickly.

“Change is now part of the way we work on a day to day basis. If we don’t adapt and deliver more

efficient ways of working, there will be serious consequences. The level of finance coming to the NHS is now known and fixed. We cannot carry on as we always have, no-one can.

“Our staff have shown in the recent cold snap that they have huge commitment and can pull out the stops – we need that attitude to carry us through and make sure we succeed in 2010 and beyond.”

Clinical engagement will be key to the success of the Trust over the coming years. Therefore from April 1st we will adopt a clinical leadership model, meaning that the four clinical divisions will be led by a Medical Director. We will shortly be advertising internally for applicants for these new leadership posts.

To find out more all staff are invited to one of a series of open sessions being hosted by Dr Harsent at CGH and GRH.

Staff Open Sessions

Date	Time	Venue
Monday 25th January (Team Brief – all invited)	12noon – 1pm	Gallery 1, GRH
Thursday 28th January (Team Brief – all invited)	12noon – 1pm	Boardroom, 1 College Lawn, Cheltenham
Tuesday February 2nd	12noon – 1pm	Room 3, Sandford Education Centre
Friday February 5th	12.30pm – 1.30pm	Lecture Hall, Redwood Education Centre
Tuesday February 9th	1pm – 2pm	Lecture Hall, Sandford Education Centre
Thursday February 11th	1pm – 2pm	Room G2, Redwood Education Centre

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The deadline for submitting an article for the February edition is Monday 25th January.

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Getting discharge planning right for patients and carers



“And if we also achieve these improvement targets (CQUINS) then we will secure funding, which will in turn help us to improve patient care.”

“This is funding we previously got as matter of routine but now £312,780 will only be secured if we achieve a 20% improvement against all seven measures. All measure / indicators are questions from the National Inpatient survey and could be easily addressed by staff.”

We can improve discharge planning

The Trust is calling on staff to help improve patient experience of discharge planning and communication from January onwards.

Patients are telling us we need to improve and our commissioners, NHS Gloucestershire, who pay us for the care we deliver, have now made it a measure by which we are paid.

There are seven Patient Experience measures that are part of the Commissioning for Quality and Innovation Indicators (CQUINs) and patients who are admitted in January will be surveyed on these aspects of care in readiness for our end of year assessment by NHS Gloucestershire.

Head of Patient Experience Gill Brook:

“If we work together to better inform patients about their care, our patients will get a much improved experience.”

To ensure the experience of patients improves, staff need to:

- Take into account the home and or family/carer situation into account in planning the discharge of patients
- Better involve patients in the discussions and decisions about their discharge.
- Give information to all patients, and when relevant their carers, about the care they need to undertake at home; this includes things to look out for and what to do if they happen
- Provide family or other carers with information on how to care for their relative / friend at home
- Give information about medications they are taking home including the side effects

Gill Brook: *“Everyone has a key role to play in getting this right. We must work together to make sure all this is happening for all the patients we are caring for.”*

Patients say thank you

My son has had ongoing treatment for cancer at Cheltenham General Hospital. He has come through a big operation and over 10 years of surgery and aftercare. He has received the most wonderful treatment from all concerned in his case.

Letters Page... The Echo 11/12/09

Please say thank you to all the staff at Gloucestershire Royal Hospital. I have had many stays, operations and scans this year than I care to remember. Throughout all of this I have been looked after by the most dedicated of doctors, nurses and ward staff. The skill of the surgeons and theatre staff and all the others have made it more bearable....I thank you.

Letters Page The Citizen 14/12/09

Safer Hospitals

Reduce harm to patients, staff and visitors



Hand Audit Success

Hand hygiene audit returns for November last year came back at an impressive 96%, however compliance remains at 86%.

Marion Johnson, Clean your Hands Lead: "The safety of our patients is an absolute priority. These figures are an excellent reflection of the hard work our staff have put in completing and returning the audit, but actual hand hygiene compliance needs to achieve a target of 95%.

Hand hygiene should be embedded into practise, auditing is a tool for measuring compliance but the message needs to be that staff should be thinking of the task they are undertaking, assessing and decontaminating hands appropriately.

The audit results highlight that there are still some issues with compliance amongst medical staff, pharmacists and occasionally AHPs which are being addressed.

The cleanyourhands programme has now been running at the Trust for six years, although each initiative has a different slant, the aim to protect patients by ensuring staff and visitors clean their hands effectively has remained the same.

Throughout 2009 the Trust's cleanyourhands programme has focused on the '5 moments for hand hygiene'.

Staff were issued with cards detailing when to wash and gel their hands specifying that this should be before and after patient contact, before an aseptic task, after exposure to bodily fluids and after contact with the patient's environment.

The programme was aimed at emphasising that this applies to all staff who come into contact with patients or their immediate environment. The Trust has also advised that hands should be decontaminated on entry and exit from the wards/clinical areas.

This year we recruited 60 new champions across the Trust. There were a number of workshops held to raise awareness and to advise all the Clean your hands champions of their roles and responsibilities.

Marion Johnson explains: "Issues that need to be tackled to improve compliance would

include all staff being aware of the 5 moments and decontaminating at the appropriate times, the staff auditing need to be familiar with the requirements of the audit tool so that they are not being too rigorous in their auditing but also giving an accurate reflection of compliance. Also advising staff immediately if they have failed to comply with decontaminating hands so that they can be aware and rectify the problem.

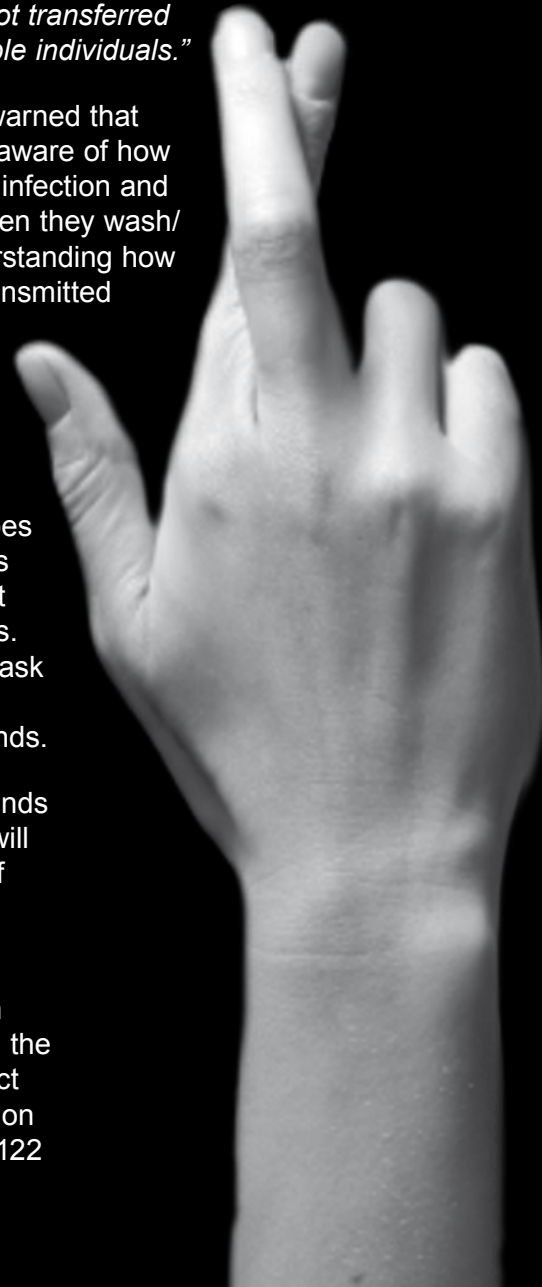
"Hand hygiene is the cornerstone of infection control and the simplest means of reducing Health care associated infections. Pathogens/germs are easily transmitted from patients or their environment on the hands of healthcare workers, washing/gelling hands breaks the chain and ensures that the organisms are not transferred to other vulnerable individuals."

Staff are being warned that they need to be aware of how they can reduce infection and be mindful of when they wash/gel hands, understanding how infections are transmitted and the effect they have on vulnerable patients.

Patients can be offered hand wipes and opportunities to wash hands at appropriate times. They could also ask staff if they have cleaned their hands.

The cleanyourhands awareness day will be held on 5th of May this year.

To find out more visit our infection control pages on the intranet or contact Marion Johnson on 08454 223129/6122



Protecting patients from Venous thromboembolism (VTE)

Every year there are more than 25,000 preventable deaths from Venous thromboembolism, and the cost of treating those who are disabled in the long term is £640 million a year.

Thanks to a significant amount of work by the Leading Improvement in Patient Safety (LIPS) group and the involvement of consultant nurses and doctors, VTE champions and others, the Trust now has a single policy which is being rolled out.

What is VTE?

Venous thromboembolism consists of Deep Vein Thrombosis and Pulmonary Embolism. A venous thrombosis occurs when blood clots in a vein, this is usually one of the deep veins of the calf, thigh or pelvis. If part of the clot breaks off it forms an embolus which may lodge in the lung, hence pulmonary embolus.

The national DoH policy is that all patients should have an assessment of their risk of VTE on admission to hospital and if necessary have timely and appropriate prophylaxis.

A team from the Trust had joined the LIPS programme of the Institute of Innovation and Improvement in May 2008. Action in our Trust is led and monitored at the weekly meetings of the LIPS team.

Other actions by the LIPS team include:

- Trauma and Orthopaedics: this group had just agreed guidelines for VTE prophylaxis. Small steps of change methods were led by the consultant nurse so that all elective patients were risk assessed and given prophylaxis as required. Nurses and doctors were educated about their roles and regular audits established.
- Acute Medicine: Consultant physician leads were appointed on each site. The risk assessment tool became part of the Joint Acute Medicine Assessment Record and training of junior doctors was set up. Regular audits were started.
- Nurse champions were appointed for all wards and a microteach was written to use for multidisciplinary teaching at ward level. Training was given to the nurse champions.
- Consultant leads were appointed for all Divisions and appropriate sub-specialities
- A VTE Committee has been set up – to be chaired by the Associate Medical Director
- VTE Prophylaxis is one of the CQUINs (Commissioning for Quality and Innovation) and targets have been agreed with the PCT, if these are not met then the Trust will lose financially

News in Brief

Clean your hands

The ward clerks on Woodmancote Ward at CGH have been highlighted by the Infection Control Team as an example of staff members who have embraced the clean your hands campaign.

Trust Lead for Saving Lives Programme Cheryl Haswell explains:

“They constantly remind all staff entering the ward to clean their hands and challenge anyone who fails to do so.

“They understand that the importance of preventing harm coming to their vulnerable patients and they understand that it infection control is everyone’s responsibility”.

Lambourne Ward at GRH also has an excellent champion for hand hygiene in their ward clerk, who reminds all people entering the ward on the intercom to gel their hands.

Best practice in cannulation

Harry Thangavel, F1 doctor, has also been highlighted for his exemplary practice of inserting a peripheral venous cannula and was observed doing this during Trust-wide audit. Cheryl explains: “It was fantastic to see full compliance with the care bundles as very often doctors forget to use aprons and sterile fields.”

Improving compliance with hand hygiene and saving lives

Well done to Laura Watson SCBU and Carol Ackerman on Ward 9a at GRH. The Infection Control team have been impressed by the way they both worked to make a big difference to improve compliance with Saving Lives and hand hygiene in the face of constant challenges.

Staff Matters

Commit to Tell - Commit to Listen – Commit to take Action

A quick reminder of what you said in the 2008 staff survey and what happened as a result.

Executive Walkabouts



We want to reduce the number of staff witnessing errors, near misses and incidents.

We listened...

The Trust launched its Safety Strategy, taking small steps to make changes to behaviour and improve patient safety.



This included Executive Walkabouts which give frontline staff the chance to speak informally with executive directors about issues which can be easy to fix but cause frustration and reduce efficiency.

From January and September 2009 there were 59 Walkabout visits to wards and departments at CGH and GRH which identified 349 actions.

So far 217 (90%) of these have been followed up.

What emerged?

Themes included staffing, estates, equipment and storage and infection control.

Examples of resolved issues include a ward with no permanent domestic staff; slow response rates for repairs; soap dispensers in toilets too high for people in wheelchairs; lack of storage space and poor hand washing compliance by junior doctors. Positive feedback included good team spirit, good working relationships between disciplines and strong support for junior member of staff.

For more information see Safer Hospitals, page 4.

Reward and Recognition



56% of you would recommend the Trust as a place to work, we wanted to increase that number.

We listened...

A Total Reward and Recognition Strategy has been agreed by the



board. The plan includes:

- Making sure the Trust is competitive in the local/national job market
- A consistent approach to reward issues
- A programme of additional/ alternative staff benefits
- A programme to expand the range of recognition events

Leadership and Development

You wanted:



- more clarity about what is expected of you when leading and line managing others
- more support in line management roles
- more opportunity for personal development
- more support from your line manager

We listened...

In 2009, the Leadership and Accountability Project:



- Explained the leadership behaviours expected from leaders at 4 levels within the Trust, including clear expectations that all leaders should motivate, develop and support their teams
- Designed and started to run our new leadership programmes to support and develop leaders at each of the 4 levels
- Provided information about all of these on the leadership webpage, display stands in staff restaurants and on noticeboards

2010 will bring a new range of development opportunities

- skills workshops
- learning sets
- leadership coaching

Appraisal and induction



We needed simpler appraisal with specific support for certain areas and

to set the right expectations at induction with a clear focus on patient care, teamwork and values.

We listened...

In 2009 appraisals increased to 70% and plans are in place to achieve 100% by the end of January 2010. 213 appraisers undertook training, and 73 staff attended the 'preparing for your appraisal' training in 2009.



To clarify what is expected from staff, an employee proposition will be produced, in line with the new reward policy, staff engagement strategy and the NHS constitution – watch this space.

From March 2010 there will be a new-look corporate induction which will emphasise the Trust Values and Teamwork

Communication between senior managers and staff



You didn't feel that managers acted on feedback from staff and that communication between senior managers and staff needed to improve.

We listened...

We launched **Email the Chief Executive** direct email address to Dr Frank Harsent.

Chief.Executive@glos.nhs.uk was launched in October and to date has received 38 emails from staff right across the Trust. Dr Harsent has been pleased to receive your suggestions for saving money, improving efficiency, listening to frustrations and explaining why some things happen.

Dr Harsent replies to all emails, taking up invitations to spend time with a particular department and passing good suggestions to senior colleagues.

Team Brief was restructured to align it with the Trust's Strategic Objectives and opened up to all staff.



'**Hear, here**' is launched in January when members of the Organisation Development task group will be out and about asking staff how they find out about the Trust's key messages. This will help us to communicate in the best way for you.

The '**You said... we listened**' email Alert campaign was used to bring you up to date on survey actions.

Staff Survey



We wanted to improve on the 29% of staff who responded to the staff survey in 2008.

We listened....

We listened to what didn't work well last year, from the addressing of envelopes to the way the surveys were circulated and the length of the survey.

The number of you who responded to this year's staff survey was 3132 which is a rise to 41.8%.

Dave Smith, Director of HR and Organisational Development, said: "Thank you very much to the staff who have taken part in the survey.

"We expect to receive our initial results in January and by the end of February to have received the full Care Quality Commission results and to be able to begin forming detailed action plans for the Trust as a whole and your own divisions.

"Thanks also to members of the HR, Portering and Communications teams for working hard to improve upon the distribution process and involvement of staff."



Living within our means - optimising the use of our resources and ensuring value for money

Financial Position at the end of November 2009

At the end of November the Trust is £2.8m overspent for the first eight months of the year. This is in line with the position I reported in last month's team brief and relates to a further under-recovery of income against the plan. The revised plan assumed that the lower levels of activity would continue in November but we expect elective activity to increase from the start of December.

The focus must continue to be on ensuring that the length of stay is kept down, to ensure that beds are available for the elective workload as we enter our busy winter months. We cannot afford to have operations cancelled due to a lack of beds, not only because of the impact on our income position but also the impact that this will have on our ability to continue meeting our waiting time targets.

The divisional expenditure budgets improved slightly again in November, which is very encouraging, and they look on line to bring expenditure back in line with the budget.

Overall, we are still forecasting a £2m deficit due to the under recovery of income against our plans. This forecast means that while we have overspent in the first eight months, we now need to deliver

a surplus position of £0.8m in the final four months to deliver this outturn position. If this is delivered, £23m of the £25m savings programme will have been delivered.



We are now starting to turn our attention to next year and in January I will update you on the likely impact of the changes recently announced in the Department of Health's Operating Framework for 2010/11. The Operating Framework sets out the rules on how the NHS will carry out its business over the next year. The early announcements last week will have a significant impact on the way we charge for services and over the next couple of weeks we will be quantifying what this means for the Trust.

Thank you for your efforts to date. I am sure I can count on your support to continue and step up where necessary the improvements needed.

Dr Frank Harsent, Chief Executive

Board Update

The December Board noted and received a number of papers including the Financial Performance Report, the UTOPIA Monthly Update, the Performance Management Framework, the Prevention and Control of Healthcare Associated Infection Report and considered the Board Work Programme for 2010 in strategic session. The Board reverts to meeting in public session at the start of each of its monthly meetings in 2010. The Board will also continue with separate informal meetings to discuss strategic matters.

Working through the big freeze

Parts of the county woke up to eight inches of snow in places on 6th January, disrupting transport services and businesses and causing virtually every school to close.

The freeze forced the emergency services to advise motorists to travel only if essential, but our staff made a huge effort to ensure it was business as usual at our hospitals.

A big thank you to all staff who attended work through the snow, especially the nurses and midwives who worked so flexibly over the worst affected days and nights. Thank you also to the volunteers of the Gloucestershire 4x4 Response Team who helped to bring in stranded nurses and midwives. Everyone's efforts were very much appreciated.

Trust to promote health and wellbeing

“The health and wellbeing of our staff has to be at the centre of what we do” says Dave Smith, H.R. and Organisational Development Director for the Trust.



Despite the fact that in the 2008 staff survey the Trust appeared in the best performing 20% of Trust's across the country on this indicator, Dave explains there can be no room for complacency:

“If NHS organisations cannot be at the forefront of looking after the health of their staff then who can be?”

“Our staff deserve to work in an environment where we provide opportunities for them to maintain their health, wellbeing and safety.”

The last survey showed that nearly 1 in 4 staff experienced some form of work related stress in the last year. Many of these may not have reported it or sought help and advice and in many ways that could have made the problem worse for them.

Support is available through support from H.R and Health Psychology as well as Staff Side representatives, Trust policies and management and leadership development programmes. But Dave believes we can do more:

“We must take an active role in identifying areas where stress exists and do something about it. Stress is something that any of us could experience it at different times in our working career.”

The Trust's Stress and Wellbeing Committee has been working very closely with the Health and Safety Executive (HSE) to get their best advice on the identification and management of stress. The HSE have established a set of 'management standards' that can be associated with poor health and well-being, lower productivity and increased sickness absence.

These are:

- **Demands** – includes issues such as workload, work patterns and environment.
- **Control** – how much say the person has in the way they do their work.
- **Support** – includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues
- **Relationships** – includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.
- **Role** – whether people understand their role and whether the organisation ensures that they do not have conflicting roles.
- **Change** – how organisational change (large or small) is managed

Tackling stress at the Trust

One of the Trust's main plans for 2010 is to introduce a local risk assessment process for identifying stress.

Managers will be asked to conduct risk assessments with their teams on the issues that may cause stress and then ask them to develop action plans.

Joint Staff Side Chairs, Gill Bliss and Lisa Sedgeley, have also been involved in designing the risk assessment process:

“We are pleased that the Trust is taking a proactive role to this serious issue, but want to ensure that managers and their teams have sufficient time to engage in this and to complete the risk assessments properly.”

“Not everyone may feel comfortable doing this in a team environment, so it will be important to ensure that they can still give their feedback in other ways.”

Dave Smith explains: *“We are serious about this and over the coming months we will be briefing managers and staff about what is expected of them through this process and will ensure that any lessons we learn are taken on board at the highest level.”*

Battledown Christmas party



Battledown Ward held their Christmas Party on 12th December for the children who visit the hospital regularly. The party was mainly funded by the Starlight Foundation and included face painting and entertainers.

Trust nurse wins presentation prize

Donna Parkin, Consultant Nurse Vascular Surgery, has been awarded the James Purdie Prize for her presentation/work on 'Nurse led pinch grafting in the diabetic foot'.

Donna delivered a presentation at The Society of Vascular Nurses conference in Liverpool. It was entered into their prize session and this was awarded to Donna by the Circulation Foundation.

Donna explains: *"My presentation was very well received. There is nothing published in the literature on this technique in management of the diabetic foot post debridement or amputation, and we have had some promising early results undertaking this on the ward area on suitable patients."*

"As a result of this I am hoping to now put together a formal research proposal in order to attract funding for a research study into this treatment and its long term benefits."

On receiving the good news, Nursing Director Maggie Arnold said: *"Fantastic news. I am sure you will all join me in congratulating her."*

97% patients likely to recommend Gloucestershire Hospitals

Throughout November hospital volunteers carried out face to face 'Real Time Surveys' with patients on Medical wards at Cheltenham General and Gloucestershire Royal. This is part of our ongoing program to monitor and improve the experiences of patients.

The aim of 'Real Time surveys' is to enable staff to quickly act on feedback given by patients as well as to celebrate good practise that gives good experiences to the patients. The surveys on medical wards take place every 3 months to allow time for action to be taken to make improvements. Other wards are also surveyed on a 3 monthly rotation.

In total 443 patients responded to the face to face survey (47% male, 57% female)

- 94% of patients said staff always washed their hands/used alcohol gel before treating them
- 95% of patients said they were definitely treated with respect and dignity whilst in the hospital

- 95% of patients said staff always washed their hands/used alcohol gel before treating them
- 90% of patients said they were definitely made to feel welcome when they arrived on the ward

Ward managers will go through the results with relevant staff to identify and agree on actions against all questions where the score has not reached the target of 80% satisfaction. Areas for improvement include: giving more information about ward routines, involving patients more in decisions about their care and generating more awareness about how the hospital uses personal information.

The action plan for each ward will be displayed on notice boards in the ward in January and the next survey on Medical Wards will be carried out during February.

Appraisals success stories

Some of our departments are already hitting their 100% appraisal targets. Here, two of them explain how they approached the task and share some key factors in their success.



General Medicine

Sarah Brown and Kim Hill, Lead Co-ordinators for General Medicine, adopted a back to basics approach for the appraisals of their 45+ staff. To begin with, they went through records to identify when and if appraisals had been done for every member of staff. They then created new files for everyone, outlining the basics of the appraisal4u programme, and worked out a plan with a date for each member of staff to have their appraisal. They also minimised paperwork where possible, as many members of staff had negative memories of the previous system, with its wordy and (at times) intimidating paperwork.

Kim found it important to tailor the appraisal process to individual members of staff – some preferred more time to plan, some wanted to complete their preparation at home, others wished to be guided through the process. The key factor for Kim? *“Know your staff.”* She comments *“Keep reviewing and re-tailoring to individuals, it has got to feel relevant to them in order for them to feel involved”*.

Sarah and Kim have also been able to reinforce the fact that appraisals really matter, and to

communicate that preparing for appraisal is your protected time to focus on your career, to focus and to add value to the job you do.

Sarah Brown says *“No matter how busy you are, it is worth putting in the time as a manger to plan now for the year ahead.”* adding *“Once the deadline passes, don’t put appraisals to the back of your mind, plan throughout the year to make the whole task more manageable.”* Both Sarah and Kim have found that putting in this time and effort has made the whole process easier all-round and certainly more enjoyable for staff.

Catering

Trust Catering Manager Mike Byrne has 40 staff at CGH, mainly part-time shift workers. He outlines how he’s made a success of the appraisal process.

To begin with, the manager and supervisors agreed a work plan and each member of the team was allocated a person to undertake their appraisals, the person who normally supervised their work and so had a good knowledge of their role and responsibilities. Because it had been identified that one of the supervisors’ own personal development goals was providing staff appraisals, they were keen to make the process work.

Mike says *“The key for the department is that all supervisors have had the Trust appraisal training, and were mentored by one of their colleagues during their first session until they were comfortable and confident with the process.”* It seems that as the supervisors’ confidence grew, staff also began to get used to a process that initially seemed unfamiliar and daunting. Line Managers were crucial for checking consistency and to ensure that all details are recorded correctly and entered onto the website.

Three years on, the whole team seem happy with how appraisals are run and what they are there to achieve. Mike concludes *“It’s good to have the opportunity to congratulate team members on a job well done and to make plans for the future”*.

Father Christmas in flying visit to Christmas Party

Staff's children were treated to a visit from Father Christmas last month when he flew in for the Trust's first Children's Christmas Party held at the Dowty Sports and Social Club.

The event was organised by the H.R. Department with the help of Staff Benefits committee funding. Party activities included face-painting, temporary tattoos, Santa's grotto and presents, magic shows, balloons, food, disco and prizes for fancy dress.

The main organiser, Rebecca Budd said: *"There was a phenomenal response and uptake of tickets for this event. In fact all 150 tickets were given out within the space of 48 hours!"*

"Well done to the snowman, the elf and the princess, who all won prizes in the fancy dress competition."

"Thank you to all who volunteered their time to help put together the National Elf Service Children's Xmas Party. Ho ho ho!"

"Santa and the team hope that everyone had a very merry Christmas and wish you all a great New Year."

The feedback from the day has been very positive with staff calling on the event to be held again next year.

What they said:

"I would like to say a big thank you and well done

to the team that organised Saturday's Party, you all obviously worked really hard both beforehand and during."

"My daughter thoroughly enjoyed herself, the best children's party I've been to in a long time, and the individual presents from Santa just made it that little bit more special for her."

"Thanks again & Merry Christmas."

Joanne Vincent

"Thank you for organising the children's Christmas Party, everyone obviously worked very hard to make this event run smoothly. My children thoroughly enjoyed meeting Father Christmas, the presents were a big hit and my children were very excited that Father Christmas already knew their names. Please do something like this next year!!"

Sadie Wallace



Gloucester Rugby stars play Santa!



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Players from Gloucester Rugby Club visited sick children at GRH over Christmas.

The whole team turned out to the Children's Ward to give out presents and to chat to families.

Olivier Azam said: *"All the players brought presents and we made sure all the children had a present."*

"We just tried to cheer up the children and their families before Christmas."

"We had lots of toys and things for them, they ranged from babies to 15 year olds."

"They all seemed happy to see us and I think it gave them something else to think about for about an hour while they were in hospital."

Head Coach Bryan Redpath said: *"It was a real pleasure visiting the children. It's obviously very difficult being in hospital at any time but particularly at Christmas."*

"As a squad, we thought it would be a nice gesture if we all bought a present and helped in just a small way to brighten up someone's Christmas. I'd like to think we achieved that."

The visit was arranged by The Pied Piper Appeal as a part of the charity's work to try and make hospital a less frightening place for children and their families.

Thanks to Volunteers



An annual reception was held at Cheltenham College to say 'Thank you' to the volunteers who give their time to Cheltenham General Hospital.

This event is a highlight in the volunteer's calendar and is where the Trust has the opportunity to thank them, celebrate their success and show appreciation for the time and commitment they give.

Dame Janet Trotter, Trust Chair, presented long service awards to those who have generously given five, ten and twenty years to volunteering.

Acting Voluntary Services Manager, Liz Waller said: *"The Trust values enormously the commitment and dedication of the Cheltenham General Hospital volunteers and the annual reception gives us an opportunity to say thank you and to show our appreciation for all they do for our patients and staff."*

Stoma care donation

The Gloucestershire Ileostomy Association has donated two new equipment trolleys to the stoma care departments at Cheltenham and Gloucestershire Hospitals in September.

A presentation was made on the 23rd of September by Carolyn Stammers, Chair of the Gloucestershire IA, Derek Lawton, Secretary of Gloucestershire IA and Peter Boyle, Gloucestershire IA committee member at the Stoma Care Department at Cheltenham General Hospital.

All of the Stoma Care Nurses would like to send their thanks to the Gloucestershire Ileostomy Association for these generous donations which have made the clinic rooms at Gloucestershire Royal and Cheltenham General much easier to use.



Staff Social Committee

There was a staggering response to the Bath Shopping Trip on the 30th January, with 2 coaches being filled almost as soon as it was announced! We're sorry that many staff missed out on tickets and had to join the long cancellation list in the hope of last-minute tickets.

Do keep checking the social committee website for details of upcoming events, and if you have comments or suggestions, please get in touch!

Natasha Scott, Chairperson of the NHS Staff Social Committee

Gynae Outpatients Department get their Goat

Helen Roberts, medical secretary in the department at GRH, baked for a cake sale on 14th December. They raised enough money not only to buy a Goat, but also 5 bags of seeds and one bag of fertiliser via Oxfam! Well done to Helen for organising this fundraiser for a life-changing gift.

Trust staff excel in C&G Excellence Awards

Last year, we nominated two staff for City and Guilds Excellence awards.

Radiographer Jenny Thick was nominated for her years as an assessor, mentor and teacher on the NVQ within Radiology. Jenny achieved a highly commended award, with the judges commenting that 'Jenny shows commitment and dedication in all she does'.

Carly Anderson, HCA Surgical Outpatients, Breast Clinic was recognised as an outstanding candidate when undertaking her Level 2 award. Carly was awarded a City and Guilds Medal of Excellence for outstanding performance in the Health and Social Care Sector. The judges explained that 'this was a detailed nomination with excellent evidence to support Carly deserving a Medal for Excellence. The comments on the nomination were supported by the evidence presented and demonstrate the commitment and determination of this nominee to reach best practice'.

Congratulations to Jenny and Carly for all their hard work and for this prestigious recognition of their achievements.

Happy Retirements to Anne and Susie

Anne Sims has retired from CGH after almost 40 years. She had been working in the Linen room since the early nineties, but had begun working within domestic services for the Hospital way back in 1970!

Anne looks forward to having more time to spend on her hobbies of gardening and music, and perhaps to taking some holiday – it was only last year that she took her first holiday abroad.

Colleagues including Irene Barrett laid on a lovely lunchtime party and gave Anne a fitting send-off on her final day in December.

Staff at Cheltenham General Hospital have also paid tribute to long-serving cleaner Snezana Jovicic. Known to her friends as Susie, she has just retired from her duties after more than 38 years.

Colleagues said the mother-of-three, who is originally from the former Yugoslavia but now lives in Springbank, was a "true character" who would be missed. Mrs Jovicic said: *"I will miss working at the hospital because over the years I have got to know everyone"*

Workers gathered on her final day to present her with a bouquet of flowers and a crystal vase to commemorate her long service.

Corporate Templates now on the Intranet

A new page has been developed on the staff intranet designed to make searching for key corporate documentation much easier.

It is located under 'T' for templates and one 'click' takes you to a template, guidelines or an exemplar document.

It is anticipated that this page will develop over time with new templates being added and existing templates improved.

Presently we are somewhat limited in terms of the design of the page (by the associated software) but any comments, or feedback, for improving the

overall appearance would be appreciated – even if it's just to say you like it!

Contact Information Governance Officer Anna Pryce-Jones at CGH on **3319**



Prepare yourself for Single PAS Live on... Monday 18th January 2010

Single PAS will combine records from the two separate Patient Administration Systems (PAS) improving data quality and performance.

If you use PAS, STORK, SWIFTOP, IPS or ICS - THIS WILL AFFECT YOU!

What should you do?

1. Complete the PAS Survey on the intranet by 31st December - This will ensure your user name and email is registered so you can log in when the system goes Live http://www.glos.nhs.uk/questionnaires/pas_survey_2009/survey.htm

No survey means no username and no PAS access.

2. Please take note of all Single PAS communication e.g. global emails you receive as they will provide you with valuable information.

3. Be Aware - If you are working on Friday 15th, Saturday 16th or Sunday 17th January **PAS will not be available**. Procedures to follow during

this time will be issued in time for go live make sure you read them and know what to do.

4. Between now and go live please return case notes to Health Records as soon as they are finished with. This will help ensure they are available for emergencies whilst PAS is not available and will speed up re-labelling to the new MRN number **after go live**.

ANY QUESTIONS? -

contact the Single PAS Project Team at single.pas@glos.nhs.uk



Gloucestershire's NHS Counter Fraud team achieves top rating again

Gloucestershire leads the way in clamping down on fraud within the NHS.

The county's Local Counter Fraud Service received the highest possible rating for its work during 2008-09.

The NHS Counter Fraud and Security Management Service (CFSMS) awarded a top rating of 4 for the counter fraud work at 2gether NHS Foundation Trust, Gloucestershire Hospitals NHS Foundation Trust and NHS Gloucestershire. It praised exceptional performance and innovation in local counter fraud work and said the Gloucestershire counter fraud team could share good practice with NHS organisations elsewhere in the country.

Local Counter Fraud Specialist Sallie Cheung said: *"We are delighted with this rating which is achieved thanks to the support of colleagues throughout the NHS in Gloucestershire."*

"We would like to thank staff for their willingness to help prevent individuals cheating the NHS out of valuable resources. This rating sends out a strong message to anyone thinking of defrauding the NHS that they will be caught and risk punishment through the courts."

Over the past year the Local Counter Fraud Service has successfully investigated several cases for Gloucestershire Hospitals including fraudulent time sheets, working while on sick pay and conspiracy to make fraudulent insurance claims.

Anyone who suspects a case of fraud in the NHS can contact the Local Counter Fraud Team on **01452 318842**.



Professor Nick Stone lights up Healthcare Science Awards



Prof. Nick Stone, Head of the Biophotonics Research Unit at GRH recently attended the Chief Scientific Officer's Conference in London to present some of the centre's work. While there, Nick was quite unexpectedly presented with an award – the highly prestigious CSO R&D award for 2009. Deservedly recognised for their pioneering research and development in Biophotonics, Nick and the team were delighted to be awarded with one of the most significant R&D awards at national level.

The Trust are enormously proud of the work that Prof. Stone and his team are doing, and of the national and international recognition they've achieved as leaders in the field. Nick was delighted to be singled out from the other 55,000 scientists in the NHS for this award.

The award was given in recognition of the entire and on-going research, rather than a dramatic breakthrough or single project. Nick advises *"Currently, our work is primarily lab-based, with a number of prototype projects on the go at any one time"*. However, it's expected that within 2-3 years, the technique they are developing

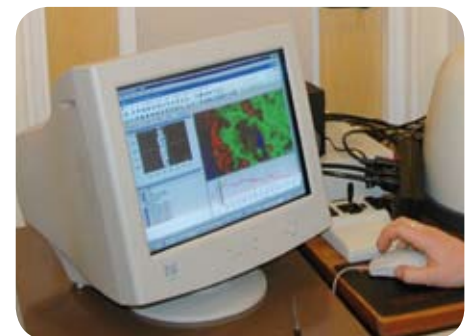
will be used on patients outside the lab environment, and that in 10 years time it'll be a universal tool within medicine.

Nick explains some of the science behind the award *"Biophotonics essentially uses light to diagnose or treat disease, and will have a profound affect on the improvement of cancer diagnosis and treatment in the future."* The technique uses lasers – Raman Spectroscopy – to understand what the constituents of tissues and cells are. Once employed by clinicians, it will facilitate much earlier and more accurate diagnosis, as well as being used in surgery to, for example, identify exactly where a tumour or cancerous cells begin and end.

So what does it mean for patients in the future?

"Currently, due to late diagnosis, only 7-10% of patients with Oesophageal cancer survive more than five years. By using fibre-optics via endoscopy, we believe that early diagnosis and treatment will significantly improve" comments Prof. Stone *"We also believe that the accuracy of breast cancer diagnosis will benefit patients and clinicians alike."* Definitive and accurate diagnoses of many cancers will affect a huge number of patients in years to come.

It would seem that all the hard work of Nick and his team is beginning to come to fruition, and that Biophotonics has a bright future within the NHS.



New research midwife aims to help improve care and clinical services for women

Ellie Sonmezer is a research midwife working with the Western Comprehensive Local Research Network, one of twenty five research networks across England. This network forms part of the Government's 'Best Research for Best Health' research and development strategy aiming to increase and streamline the quality of research practice throughout England.

Ellie is part of a team of Doctors and Midwives who aim to increase women's participation in research in Gloucester and Cheltenham. They decide which current projects would be beneficial for our staff, the women we see and our current clinical practices. They also support new local research in our field that comes from NHS trusts' doctors and midwives, and is intended for the National Institute for Health

Research Portfolio. Two current projects include teamwork research and the streamlining of obstetric emergency training and risk review processes.

Ellie describes her role as a new and exciting post that's developing as the research does. She comments *"We hope to ensure that our work towards excellence in research will benefit all of the women that come through our clinical services"*, adding *"We hope staff will have some good research ideas to develop with us and we are excited about encouraging local women to participate and help, through research, to improve the care that they and other women receive."*

For more information about WCLRN, visit www.crnc.nihr.ac.uk/index/networks/comprehensive/clrns/western.html

Robins spread festive cheer



Pictures by Daniel Martino, Gloucestershire Echo.

For the fourth year running the Cheltenham Town football team has visited the Children's ward at CGH to hand out presents to the children in hospital over Christmas.

The fans of Cheltenham Town complete different fund-raising activities to raise funds to buy the presents for the children and this year Club Director Barrie Wood also donated a box of items.

The event is organised by the Robins Trust, which is the Cheltenham Town Supporters Trust, and see it as a great way for the club to contribute to the local community.

Player Shane Duff said: *"It is rewarding to be here, and it puts things at the club in perspective. Even when things are hard we are in a privileged position. To bring a little bit of joy to these kids is a great thing,"*

Team mate David Bird added:

"It is quite difficult coming here when you are a parent and seeing children in this sort of environment."

"They are all very brave going through this."

"It must be very difficult for the parents being here at Christmas when all you want to do is be at home with your family."

Hospital Play Specialist Elizabeth Wiltshire:

"The Robins' visit was eagerly anticipated by the patients and their parents."

"It is great, we even had the first smile off one little girl since she came in here."

"It is fantastic for the kids and the parents seeing the players here."

Chairman of the Robins Trust, Clive Gowing: *"This is one of the most rewarding achievements the Robins Trust complete each year and is something which I am very proud of."*



Staff don't shave for charity!

Microbiologists at GRH showed their hairier side in a charity event held last November. More than a dozen staff members from Pathology grew a wide variety of moustaches and raised nearly £800 for the Prostate Cancer charity.

This was part of international 'Movember' month. Movember involves men, or 'Mo Bros', growing a 'Mo' (Australian slang for a moustache) throughout the month formerly known as November, to raise money.

Many celebrities, including a number of international rugby players took part this year as well and the whole campaign is enjoying a high profile.

GRH Microbiology Section Supervisor Tim Chance: *"Everyone in Pathology helped raise the money and we all thoroughly enjoyed looking a bit silly for a month."*

FOCUS Donation in memory of Trudi



Paula Newell has donated £900 in memory of her mother, Trudi Newell, who was living in the Falklands and came to CGH for cancer treatment for ovarian cancer.

Trudi was very grateful for the wonderful care she received in the Oncology Centre and made many friends with other patients and especially the staff.

Sadly, Trudi died in September in the Falkland Islands and has been laid to rest there.

She had to travel the 8,000 miles on a regular basis for her treatment but was very grateful to have received this.

The family and friends of Trudi held a Fun Day in the Falklands with a raffle to raise this money and Paula is looking to buy a painting of the Falklands to go on one of the walls in Oncology in memory of her mum.

The photograph below is of Paula Newell, her son Rowan presenting the cheque, Dr Counsell, Trudi's Consultant and Paula's mother-in-law.



New start for Divisional Nursing Director

Helen Byard, Divisional Nursing Director Medicine, is leaving the Trust on 6th January to take up the post of Lead Cancer Nurse in Hereford County Hospital. She has been in the Trust for 20 years and will be much missed by staff in all areas, especially at Cheltenham General Hospital. She has made a huge contribution to Nursing during her time here.



Pied Piper Donation to ED

Pied Piper Charity has donated new resus equipment to the Emergency Department at GRH.

Sister Natasha Bull: *"The Emergency Department would like to thank The Pied Piper Appeal for their generous donation which has enabled us to buy a new workstation screen divider for our paediatric resuscitation area."*

"This has very much enhanced the working environment for both children and staff".

The charity was started in 1992 to improve the lives of sick children in Gloucestershire.

The efforts of thousands of Pied Piper supporters have raised over £2million to date. The funds have been used to build the new Children's Centre at Gloucestershire Royal Hospital, refurbish and revitalise the Battledown children's ward at Cheltenham General Hospital, purchase new equipment, enhance hospital environments and help individual children to make life at home easier with hoists and other equipment.

Adverts

Isis Domestic Cleaning: Efficient reliable friendly service offering domestic help for busy people, busy and new mums and dads, after illness or injury or just to give yourself a break! Regular or occasional bookings taken. Local and not an agency...Insured...References...Police Check Applied For...Longlevens Based. Please phone Sue for details **01452 414380** or **07789 597975**

Octopi Computer Services: Virus check & removal hardware installation E-mail assistance wireless connections training/advice. Local & friendly service. £20 Per hour flat rate. Contact: Dave Boon - **01242 650043** Mobile: **07982 238375** Email: daveboon@octopidesign.com

Do you need occasional after school care?: Registered Childminder/Registered Nurse Available Fridays for Nature Studies/Arts & Crafts. Healthy Snacks and/or cooked meal. Homework Help: Chilltime: Funtime: Can collect from the following schools: St.Thomas Moore, St. Marks Junior, Benhall, Gloucester Road, Rowanfield, Monkscroft, Hesters Way Contact Alice Shield **01242 243311** or email: alice.shield@virgin.net

Spicy aroma – indian restaurant & takeaway: Open 6 days per week 5:00pm – 11:00pm. Closed tuesdays. Fully licensed – air conditioned. Church road, churchdown village (Next to bat & ball inn) Gloucester. **01452 712621**. 10% Discount for NHS staff with ID card

UNIQUE PAMPERING: Hairdressing, beauty & complementary therapy salon, Unique Pampering offers a full range of professional hair and beauty treatments together with complementary therapies all at competitive prices. Launch offer 25% off selected treatments Tel: **01242 528019**

English lessons: Offered to Medical, Nursing or Hospital Staff from overseas. Need help with pronunciation, more functional English or help with vocabulary? Ex-nurse can help contact: janty.jonesgreycote@btinternet.com

PROTYRE: Gloucester are offering staff up to 10% discount on services including tyres, exhausts, brakes and four wheel alignment. Call **01452 505588** quoting discount code:**14NSH001**

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.

Staff benefit subsidised reflexology & massage

REFLEXOLOGY

Tuesday 1.00 pm – 4.00pm
Delancey Hospital

Tuesday 5.30 pm – 8.30 pm
(West Block OPD, CGH)

Wednesday 5.30pm – 8.30pm
(West Block OPD CGH)

To book Phone Elaine Greenwood – **01285 -650579**

Price - £16 per hour

MASSAGE

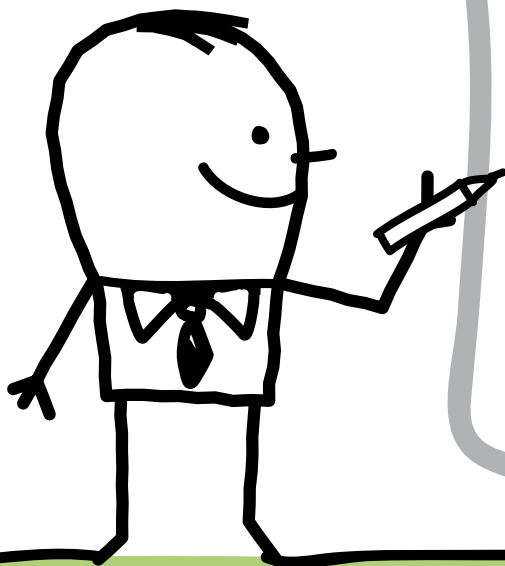
Mondays & Thursday
6:30pm – 8:30 pm
(West Block OPD CGH)

To book Phone Samantha Franklin, **07870 656 181**
Price - £16 per hour

To place an advert, please contact [Colette Ashton](mailto:colette.ashton@glos.nhs.uk) on ext 3563 (CGH) or email colette.ashton@glos.nhs.uk. Alternatively, place your advert on the 'Staff Classifieds' section on the intranet (under useful pages)

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Pharmacists are experts on medicines and how they work. They are qualified to give advice on things like coughs, colds, sore throats, aches and pains, sprains and stomach upsets.

Gloucester Health Access Centre

Walk-in service – open 8am til 8pm 7 days a week

The centre offers a walk-in service for minor ailments and injuries such as minor cuts, bites and stings and allergies.



Find us at: St Michael's Branch Surgery, St Michael's Square, off Brunswick Road, Gloucester, GL1 1HX. Tel: **01452 336290** (Please note the Access Centre will be moving to Eastgate House, Eastgate Street, Gloucester in January 2010).

Call your GP surgery

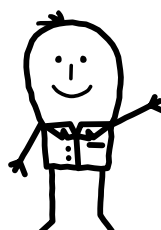


If you have a 'flare up' of a long-standing illness such as kidney or lung disease, bronchitis, asthma or diabetes that is not responding to self care or advice from your pharmacist.



For information about
healthcare options

Text: WELL to 60777*



To find out more call NHS Direct on 0845 4647 or visit www.choosewellglos.nhs.uk

*Each text costs one standard network rate message. See our website for full details.