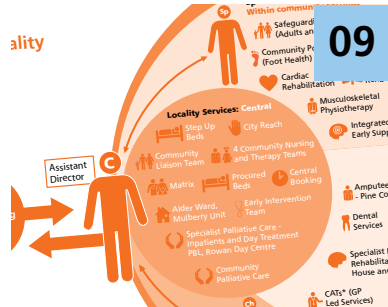


Ten minutes with the Trust



Redesigning MSK service

Our Trust is currently involving local GPs in the review and redesign of our existing MSK Physiotherapy Service across the county. Working with our leading MSK clinicians to address areas for further improvement within this service, we aim to ensure that, moving forward, our service meets the highest quality standards and that it is fully integrated with your practices. We also recognise that it needs to meet the requirements of our current commissioners and the leading CCGs.



Locality-based structure enables tailored approach

NCH&C has reorganised its top management structure into four geographic localities and two specialist localities. They are North, South, West, Central, Children's and Specialist. This is enabling the Trust to customise its services to best meet the needs of different populations, as well as to the commissioning intentions of local Clinical Commissioning Groups. The Trust can now more proactively involve GPs in the redevelopment of services.



NCH&C wins majority of Norfolk's children's centres

From July our Trust will provide expert support to even more local families after being awarded a significant contract by the county council to manage the majority of Norfolk's Sure Start Children's Centres. The council recently confirmed the results of its tendering project to find expert providers for 44 of its children's centres. Our Trust won its bid to manage 31 - a significant rise from our current three. Two of our current three centres receiving 'outstanding' ratings from Ofsted.



Case Management avoids 1k acute admissions

Case Managers and Community Matrons from NCH&C, working with local GP practices, have helped local people to avoid 1,103 acute hospital admissions in less than five months. Between August and the end of December 2011, the specialist nurses also helped people to avoid 1,838 GP visits. They help patients to stay independent and to reduce their risk of an unexpected hospital stay by helping people to better manage their conditions and to make best use of their medicines.



Patient feedback helps us 'get better', together

In February, NCH&C recorded its highest ever level of patient satisfaction within surveyed adults services with 98% of those who responded saying they were 'satisfied' or 'very satisfied' with the care they had received. 92.5% were 'very satisfied'. Within children's services the overall level of satisfaction was 97%, with the vast majority (80%) within the very satisfied marker. "By reviewing results month-on-month, we can quickly implement action plans to improve things."



Highlighting our service achievements, best practice and plans for the future

A few words from our Medical Director



Welcome to the first edition of the GP Exchange.

The Health and Social Care Bill has finally been passed by Parliament and, I'm sure, like me, you are trying to take on board these huge changes to the NHS,

not least Clinical Commissioning Groups taking on responsibility for the majority of commissioning of care in the NHS.

The DH direction of travel around health care has been very clear – more services within high quality and accessible community settings will help us all achieve the savings we need to deliver, and improve patient outcomes.

As a GP I know firsthand how important it is to have accessible, good quality services within our communities, and how these must continue to improve and develop despite all the changes in the NHS reforms.

As a community services provider, that is the central tenet of our 'business' but we also recognise that it is only through effective, joined up working with our partners – such as GPs – and future commissioners – including CCGs – that any of us will achieve better care for our patients.

This quarterly publication is being launched as just one means through which our Trust will endeavour to further build upon our partnerships with you, keeping you informed on our plans to develop services to meet the needs of your patients. It is also an opportunity to encourage your feedback and active involvement in the development of those services.

We also provide opportunities for clinical learning and dialogue at our 'Grand Round' meetings and other CPD approved events.

You'll read more about how we are reorganising our services to wrap around your practices and patients on page 9, and how we are hoping to develop even better face to face contact between your practices and our teams. If you don't know them already, meet your Locality Leads on page 11.

We hope that the GP Exchange will also help you learn more about what NCH&C has to offer local patients, the excellent staff we have working within a whole range of areas from children's to intermediate services, community and home-based services, to the highly specialised areas of stroke and neurological rehabilitation.

We want this publication to become a two-way channel and would really appreciate your suggestions or questions for future items which you would find informative. So we hope you find this first edition useful, but regard it as the stepping stone to develop better communication in the future.

Best wishes

Dr Ian Mack, Medical Director
Norfolk Community Health and Care NHS Trust



His Royal Highness, the Prince of Wales, recently visited NCH&C's Priscilla Bacon Centre and heard how the Trust's expert staff provide specialist palliative care, advice and support to people with life-limiting illnesses.

Highlighting our service achievements, best practice and plans for the future

New community nursing and therapy service offers better outcomes for patients

After many months of close partnership working between our clinicians, CCGs and the PCT, our Trust has been awarded an additional £1.5m investment to provide an enhanced Community Nursing and Therapy service across the county.

This means more staff delivering more services that patients and GPs want.

Patients will see the benefit of the new service immediately as the new specification for the service launches in April, with more improvements and expanded services coming online over the coming months.

Our CN&T teams currently have, on average, 108,000 face to face contacts with local patients every month. The new specification has an even stronger focus on keeping these patients stable and out of acute hospitals.

It will do this by delivering more equitable access to CN&T services through strong integrated frontline teams, using the successful Case Managers model, and increasing the levels of general care and support, right across the county.

Anna Morgan, Director of Operations, said: "With our expertise in providing the CN&T service in Norfolk we were asked to advise CCGs on the best service model to achieve the best outcomes for our patients.

"Not only does this new model offer additional services, but also a vastly improved 'core community nursing and therapies' which are fully tailored

around GP practices and their patients' needs, with agreed funding levels to match.

"This is the first time our Trust has been in a position to negotiate and establish a new specification for our CN&T service and we are really delighted with the results.

"This demonstrates really good partnership working with GPs and CCGs, with the support of NHS Norfolk and Waveney, to produce an excellent result to improve care for local people."

Some of the enhanced services will include:

- An expanded and NCH&C delivered Out of Hours Community Nursing service with a team based within each locality from November (the West locality will continue with their existing service)
- Care at Home teams - currently only provided in the south - providing supervised, non-qualified, healthcare support to patients in their own homes right across our patch from November
- A dedicated 'named link nurse' working with each GP practice, acting as a direct clinical link between the practice and the Trust and helping our service respond to the needs of patients. Discussions with GPs / CCGs is continuing to further define this role.

- Further enhancements to our community-based Long Term Conditions services which are currently under discussion

The new specification will see additional recruitment to support the enhanced services, and the expanded core services, to deliver a full range of unplanned and planned care interventions to support patients in the community.

Anna went on to say: "This new starting point has enabled us to formalise the scope of our services and activity levels within our contract, and clearly outlines baseline activity levels with trigger points should the number of patients or the complexity of their illnesses start to cause pressure points in the teams.

"These triggers will prompt a discussion between local managers and the CCGs / GPs about perhaps reviewing their local needs, or how we can jointly resolve the pressures."

Work is now underway with team leads to successfully develop the enhanced services and to roll out the expanded core services and discussions are continuing with CCG leads.

Highlighting our service achievements, best practice and plans for the future

Trust wins contract to manage the majority of Norfolk's children's centres

From July NCH&C will provide expert support to even more local families after being awarded a significant contract by the county council to manage the majority of the Norfolk's Sure Start Children's Centres.

The council recently confirmed the results of its tendering project to find expert providers for 44 of its children's centres. Our Trust won its bid to manage 31 of the centres - a significant rise from our current three.

(The remaining 13 centres will be managed by two other providers and a further 10 will continue to be run by local schools.)

Anna Morgan, Director of Operations, said: "This is a huge achievement for our Trust. Incorporating social workers, family support workers, health visitors, community nursery nurses, and speech and language therapists – our Sure Start staff consistently deliver the very best of care and it's thanks to them that we were able to demonstrate why the majority of children's centres should be entrusted to NCH&C.

"We are really looking forward to developing these centres – incorporating the best practice from the staff new to our Trust, and adding our own experience to the mix. And we will continue to work in close partnership with other professionals to ensure these children and their families get the very best support."

Children's centres provide families with affordable, flexible and high-quality childcare places. Children are encouraged to take part in learning and play activities which improve their physical, emotional and social development. Support and advice is also offered to families and they are signposted to further services they may need.

NCH&C has a track record of delivering excellent children's services with two of our current three centres receiving 'outstanding' ratings from Ofsted.

The Tree Tops Day Nursery, at Thetford's Sure Start was rated 'outstanding' in all 17 categories of its Ofsted inspection report which looked at aspects ranging from the overall effectiveness of early years' provision, effectiveness of leadership and management, to outcomes for children.

NCH&C's Bowthorpe Sure Start, in Norwich, was also rated 'outstanding' and inspectors commented: "... it is an outstanding children's centre that plays a pivotal and highly respected role in serving the needs of its community..."



Contact point:

- To discuss our plans to develop Sure Start Children's Centres contact the project leads
Sian.Larrington@nchc.nhs.uk or
Rita.Turnbull@nchc.nhs.uk

Highlighting our service achievements, best practice and plans for the future

State of the art health units to open to patients soon

Patients in north Norfolk will soon be able to access expert care within state-of-the-art, purpose-built facilities, with the opening of a new hospital unit and a brand new health centre.

Over the past few months North Walsham Community Hospital has undergone a major £3.7m redevelopment, and the construction of a new health centre in Aylsham is also nearing completion. Both are managed by NCH&C.

It is anticipated that from early May the new community inpatient unit at North Walsham will open its doors to patients offering them general rehabilitation and care within a new 24-bed ward – 8 more beds than was available in the old, outmoded hospital.

All of this work is now complete and the new hospital building sits alongside the newly refurbished Rebecca House outpatient unit, now to be called the North Walsham Outpatient Department. This offers a range of services, including a purpose built physiotherapy suite and theatres equipped for minor surgery.

The redevelopment of North Walsham and the creation of a new health centre at Aylsham is all part of NHS Norfolk and Waveney's (PCT) Intermediate Care Review. This long term plan – outlined in 2007 – has also incorporated the closure of St Michael's Hospital, Aylsham and the relocation of services to other appropriate, units across the county.

Outpatient services will remain at Aylsham, within a new health centre complex also managed by NCH&C. This is expected to open its doors to patients this summer.

While the development work continues outpatient clinics will still operate from the old hospital building.

Part of the town's new health campus, the new health centre will offer patients services including:

- Respiratory • Smoking Cessation
- Occupational Therapy Splinting
- Continence • Podiatry • Women's Health
- Specialist Neurological Rehabilitation
- Adults' Speech and Language Therapy
- Children's Speech and Language Therapy

Anna Morgan, NCH&C's Director of Operations, said: "These projects represent significant investment in local health and care settings, which will bring them more in-line with the high-quality of services offered within them by NCH&C.

"I am delighted that both of these units are now very close to opening to patients, who I'm sure will benefit from accessing services within brand new, modern units."

Patient transfer information

From the end of April, to minimise disruption to our patients, we will steadily reduce the number of patients at St Michael's.

- Appropriate patients will be discharged from St Michael's in the lead up to the opening
- New admissions from the end of April will be referred into alternative NCH&C inpatient units, such as North Walsham, Kelling Community Hospital, Benjamin Court in Cromer, or NCH

Once all patients have either been transferred to North Walsham or other inpatient units, St Michael's Hospital will close to inpatients, but outpatient clinics will continue within the old hospital building, until the new health centre opens in the summer.

A letter to GPs and other stakeholders will follow confirming the opening date of North Walsham Hospital.

Contact point:

- Referrals to North Walsham Hospital: call the Community Liaison Team on 01603 289857
- Modern Matron Belinda Williamson: 01692 408318
- North Walsham Reception: 01692 408070
- North Walsham Outpatient Dept. Reception: 01692 408000

Highlighting our service achievements, best practice and plans for the future

Trust takes over Night Nursing Service

NCH&C will shortly take over provision of the local Night Nursing Service, which provides care to people from 7pm to 8am.

It is expected that this will improve continuity of care and help prevent unplanned admissions to local hospitals, while taking our Trust a step closer towards providing a 24/7 service - something local CCGs have expressed an interest in us providing.

The transfer of the service took place on April 1, with the nurses and drivers initially based at Norwich Community Hospital, and providing a service across north, central and south Norfolk. The west of the county already benefits from 24-hour NCH&C community nursing provision.

Commissioned by the PCT to take the service on from the East of England Ambulance NHS Trust, this move will ensure the night service is more closely aligned with our 'in hours' community nursing service.

Contact point:

- Sue Stockton, Locality Manager – Central:
Susan.Stockton@nchc.nhs.uk

Redesigning our MSK Physiotherapy Service

We recently wrote to all GPs to inform you about a project to redesign our existing MSK Physiotherapy Service across the county, and our wish to involve you within this redesign project.

Prompted by our move to a locality structure, our Trust is working with its leading MSK clinicians to address areas for further improvement. This is to ensure that our service meets the highest quality standards and that it is fully integrated with your practices and best meets the needs of each CCG.

It also needs to meet the requirements of our current commissioners and the leading CCGs and, most importantly, we need to ensure that it delivers the very best service to your local patients.

To do this successfully, and as part of our Trust's ongoing commitment to collaborate with GP practices on service redesign, we've asked for you to feedback via our team leads and through an online survey over the past few weeks.

Thank you to everyone who has taken the time to respond so far; although the survey is now closed your views are still welcome, and we would encourage you to make your Locality Manager aware of any suggestions you may have.

We are collating the feedback we have received and the project group will ensure that these views will be used to inform the redesign of this service. We will keep you informed of any planned changes.



Contact point:

- For further information contact Cathy Mingay, MSK Operations Manager on 01603 776807 or catherine.mingay@nchc.nhs.uk

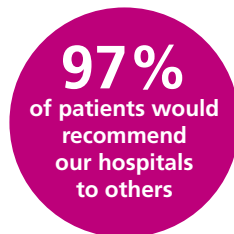
Highlighting our service achievements, best practice and plans for the future

Patient feedback informing further improvements

The quality of our services and the experience of our patients, their families and carers, are what count the most and we use their all important feedback to understand what we're doing really well, and where we need to raise our standards even higher.



In February, our Trust recorded its highest ever level of patient satisfaction within surveyed adults services with 98% of those who responded saying they were 'satisfied' or 'very satisfied' with the care they had received within the previous month. 92.5% were 'very satisfied'.



Within children's services the overall level of satisfaction was 97%, with the vast majority (80%) within the very satisfied marker.

(See page 15 for our quarterly patient experience results.)



Loyola Weeks, NCH&C's Director of Quality and Risk, said: "Of course, we love to see those good results coming through, but those areas where patients and carers tell us we could do better are just as, if not more, important.

"Learning from patient feedback is essential to the ongoing development of our Trust's services and will enable us to further embed quality across NCH&C."

She explained that this year the Trust has significantly stepped up its patient experience programme, introducing regular ongoing surveys across a number of our adult and children's services.

"By reviewing results month-on-month, we can quickly implement action plans to improve things and even within a month see the impact these improvements are having on patients, once again being able to adapt quickly if more work needs to be done."

Loyola explained that the Trust had also improved the methods used to gather this invaluable feedback, introducing hand held devices and kiosks where patients, carers or clients can immediately have their say, offering paper questionnaires, and even freephone lines.

These surveys are not the only method of monitoring standards of care. Monthly reports are submitted to the Trust Board on numbers of complaints versus compliments as another useful temperature check on quality of services.

Figures show that in the first six months of 2011/12, for example, NCH&C received over 400 official compliments - far outweighing the number of complaints received (106) for the same period.

Compared to the same period in the previous year the number of complaints increased by 11, but the number of compliments recorded significantly increased by 185 - an indication that our ongoing quality improvements are showing real benefits to our patients.

"Patients who contact us to register a compliment or a complaint often provide us with a clear indication of what is working well and what we could do better and as its not a 'prompted' source of feedback, it's a truly independent view." Loyola added.

Highlighting our service achievements, best practice and plans for the future

Two thirds
of patients are very satisfied with our services

86%
of patients said they would be likely to recommend our services

97%
rated care in our community hospitals as excellent, very good or good

98%
said levels of cleanliness were high

87%
rated staff communication as excellent or very good

97%
of patients said therapy they received helped to rebuild their confidence

Three quarters
of people rated helpfulness of staff as 'very good'

69%
felt services had either improved or stayed the same

Our Trust held an all-services Patient Experience Survey, carried out on our behalf by independent research organisation, Ipsos MORI, in 2010.

The survey found that people highly rated the health and care services provided by our Trust. And it showed that we had made significant improvements in patient/client satisfaction over the previous 12 months, with 'fairly good' scores having been transformed into 'very good' scores in many areas.

More than 90% of the 1,139 people who took part expressed their satisfaction with our services. And two-out-of-three people said they were 'very satisfied' (the highest rating possible) with our services - an increase of 2% on the previous year's (2009) survey results.

People were particularly positive about how their care was joined up between services, an increase in choice, how supported they felt by staff in making healthcare decisions, and the helpfulness of our staff.

A further survey, held by the Picker Institute in early 2011, focused on people's experience of our inpatient units. This saw 97% of patients who had recently stayed in one of our community hospitals rate the care they received as 'excellent', 'very good' or 'good'.



Highlighting our service achievements, best practice and plans for the future

Health visitors are 'early implementers'

NCH&C's Health Visiting service is rolling out a redesigned and further improved service to local families after being granted 'Early Implementer' status by the Department of Health.

The service, which was chosen after showing innovation and high-quality care, is just one of just 20 Health Visiting services nationally - and one of only two in the East of England region - to have started delivering the new service already. The new programme is due to be rolled out across the country by 2015.

The redesigned service will see NCH&C's Health Visitors working even more closely with other health and care professionals, such as GPs, Family Nurse Partnership teams, Sure Start Children's Centres and midwives, to deliver further joined up and personalised care.

A recruitment drive is also underway to significantly expand the service. By the end of 2011, around 50 qualified nurses and midwives had already been recruited to undertake Health Visitor training, with an additional 40 recruited since. This is expected to see the service increase to around 140 Health Visitors over the next two years, and could see up to 170 in place by 2015.

Contact point:

- Julia Whiting, Nurse Consultant:
julia.whiting@nchc.nhs.uk or 01603 218163

Glowing CQC report for respite care centre

The Care Quality Commission (CQC) has published a glowing report about the health and care services provided at Mill Close, Aylsham, our community respite centre for people with learning disabilities and other complex needs.

The CQC inspectors visited the centre, which accommodates up to five people and provides short term, nurse-led respite care, in February.

We were found to be 'compliant' – the highest rating possible - in all areas which includes staff respecting the needs of people using the services and involving them in their care; ensuring that people benefit from safe, good quality care and were protected from any potential risk of abuse; and that staff were supportive of people's needs and rights.

As well as reviewing standards of quality and safety and observing first-hand how people were being cared for, the inspectors discussed the care offered at Mill Close with relatives or carers and NCH&C staff.

Staff told inspectors that they felt valued and well supported by the Trust.

The CQC report also outlined how there were opportunities for families and staff to jointly review care plans, discussing what care was being provided and why; that families could influence how care was delivered and that people using the service were supported to make choices about their care.

Nurses show high quality care

- Tracey Blazey,
Community Nurse and Care Manager

Tracey was a finalist in the 2011 national General Practice Awards' 'Nurse of the Year' category, after being nominated by her colleagues from the North Norfolk Community Learning Disability Team. She was shortlisted for delivering consistently high quality care and received numerous letters of support from her patients.

- Katrine 'Trine' Kiertzner,
Specialist Neurological Nurse

Trine has been awarded the title of 'Queen's Nurse' in recognition of her commitment to delivering further improved community-based care. She has 25 years' nursing experience and received the title from community nurses' charity, the Queen's Nursing Institute.

- Bernadette Osterberg, School Nurse

Bernadette is rolling out a trial project to provide innovative care for high school students who have a history of self-harm, substance abuse and risk-taking behaviours. She aims to improve their mental wellbeing by facilitating joined up care between health and care experts so young people can easily access counsellors, youth workers, and advisers.

Caring for patients in the community

Wrapping our services around your patients and practices

Our Trust recognises that it's vital we deliver services tailored to the needs of the communities we serve and become even more responsive to our Clinical Commissioning Groups (CCGs) and GP practices, as well as to regional and national commissioning opportunities.

And so to better support the CCGs, this year our Trust reorganised our structures into four geographic localities and two specialist localities, wrapping our services around your patients and practices.

Our aims are that, with much clearer and open contact points for GPs, Practice Managers and CCGs in each area, we can:

- Better involve all of you in any plans for service redesign we may have
- Enable you to speak to us about your plans and how we might help
- Provide you with a much easier and more open communication route to get your views about our services heard within our Trust
- Respond more quickly to those views or requests

Anna Morgan, NCH&C Director of Operations, explained: "We really believe this will help us develop stronger partnerships with CCGs, GPs and their practices – and, of course, offer improved, joined-up services for all of our patients.

"This couldn't be more important than now, when we all need to adapt to the changes within the wider NHS. We recognised we need to be prepared for our new ways of working and to make working with us as easy as possible.

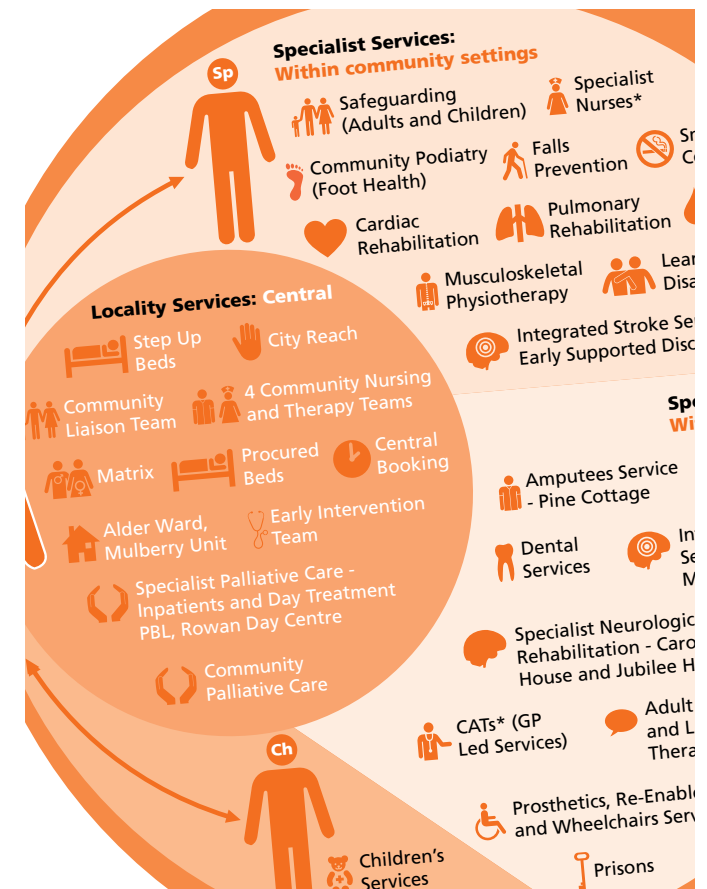
"Another significant aim of these changes has been to devolve a lot more of the clinical and managerial leadership out into the communities to our frontline staff, where the services, patients and our commissioners are based.

"That is a central part of our Trust's strategy - to further reduce our central corporate management and put the running of our services into the hands of the people who know best – the staff who deliver them, where they deliver them!"

• How it works

Each of the geographic localities - North, South, West, Central - incorporates integrated Community Nursing and Therapy Teams, community rehabilitation beds, and services offering admission avoidance interventions, such as case managers, community matrons, and step-up beds.

The NCH&C Specialist 'locality' incorporates our established centres of care as well as some specialist outreach services – such as the Mulberry Stroke Rehabilitation Unit and the Stroke Early Supported Discharge team; Caroline House, our inpatient centre for specialist neurological rehabilitation; and Pine Cottage, from where we manage the Specialist Amputee Rehabilitation service.



Caring for patients in the community

NCH&C Children’s Services ‘locality’ structure fundamentally remains the same, as this area already aligns its geographic boundaries with those of its key commissioners, including Norfolk County Council.

However, to further reflect commissioners’ and patients’ needs, three integrated pathways of care have been established – Healthy Child; Learning Disabilities and Development; and Complex Needs Disabilities.

• **Locality Managers**

Each locality is headed by a Locality Manager. These managers work closely with GPs and Practice Managers, our own service leads and other providers and commissioners, such as the local authority or the regional specialist commissioning group.

They continue to review local needs, the quality of services and to ensure any issues are quickly addressed, as well as feeding upwards into the Trust how things are going and where improvements may need to be made.

As a GP or Practice Manager they are one of your first points of contact and we would encourage that you meet or talk with them regularly to discuss developments within your practices, ideas or plans for the future.

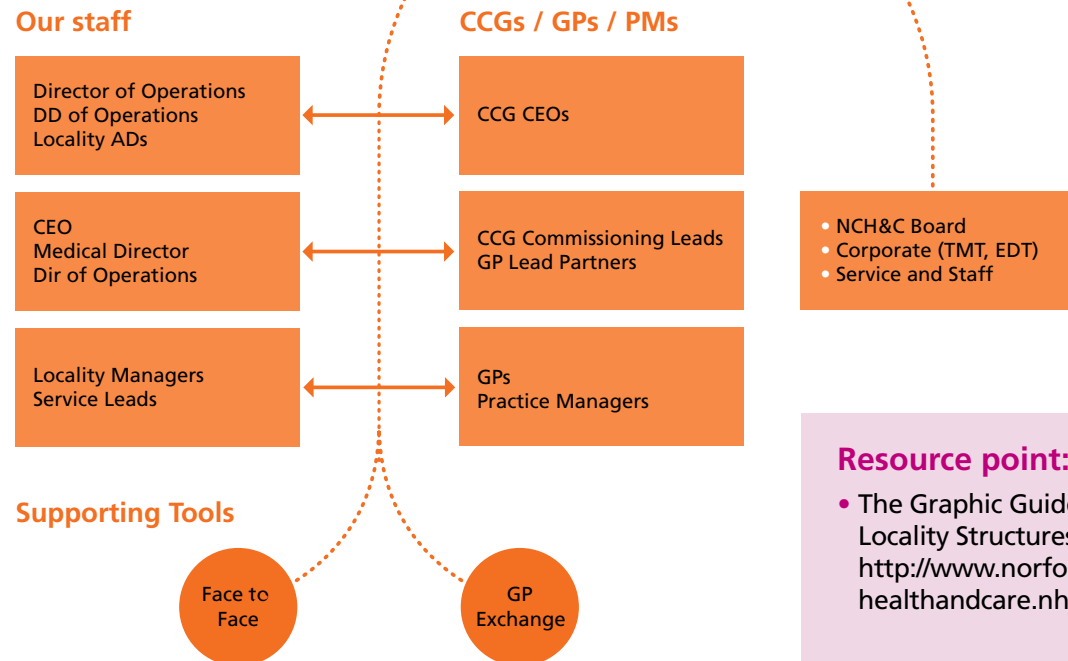
• **Locality ADs**

The Locality Managers report into Locality Assistant Directors, who work closely with the CCGs and other commissioners.

They hold overall responsibility for services in each locality area, for performance, budgets, and for ensuring all services across the patch are joined up, efficient and cost effective for all.

They also all work together to ensure that patients in every locality can access the services we provide regardless of area, such as the specialist centres of care.

Therefore, if you lead a CCG we would encourage you to meet or talk regularly with these ADs to discuss commissioning developments, any issues you may be aware of, or ideas or plans for the future.



Resource point:

- The Graphic Guide to the NCH&C Locality Structures can be accessed at: <http://www.norfolkcommunityhealthandcare.nhs.uk/about-us/>

Caring for patients in the community

Locality leads for your area

If you have any questions or comments about NCH&C's services delivered in your area, or would like to know more about services you have heard are benefiting patients in other localities, please contact the leads below.

Central



Assistant Director
John Mallett
john.mallett@nchc.nhs.uk
01603 776608



Locality Manager
Sue Stockton
susan.stockton@nchc.nhs.uk
01603 776751

South



Assistant Director
Jo Fisher
jo.fisher@nchc.nhs.uk
01362 654925



Locality Manager
Lisa Edwards
lisa.edwards@nchc.nhs.uk
07734 703344

North



Assistant Director
Becky Cooper
rebecca.cooper@nchc.nhs.uk
07990 595193



Locality Manager
Jayne Rose
jayne.rose@nchc.nhs.uk
07789 861517

West



Assistant Director
Jo Fisher (Interim)
jo.fisher@nchc.nhs.uk
01362 654925



Locality Manager
Teresa Webb
teresa.webb@nchc.nhs.uk
01553 668579

Children's Services



Assistant Director
Siobhann Leviton
siobhann.leviton@nchc.nhs.uk
01603 776605

Specialist Services



Assistant Director
Jane Webster
jane.webster@nchc.nhs.uk
07827 283452

Caring for patients in the community

Case Managers working with local GP practices helped avoid over 1000 acute hospital admissions

Over 1000 acute hospital admissions were avoided in less than five months, following the development of the Case Manager and Community Matron roles and their work alongside local GPs.

These expert specialist nurses provide care to patients within their own homes and helped people to avoid over 1,103 unnecessary admissions to local acute hospitals between August and the end of December 2011.

In addition, NCH&C's 60 Case Managers and Community Matrons reduced pressure on local primary care services, having also helped patients to avoid 1,838 GP visits in the same time period.

By helping patients to better manage their conditions and make best use of their medicines, Case Managers help people to stay more independent and reduce their risk of an unexpected hospital stay.

Community Matrons perform a similar role, but as senior nurses they also offer overarching support to Case Managers within their locality.

Patients can be referred to the Case Manager service by their GP, NCH&C's community nursing teams, local hospital, or social services.

It can provide benefits for people who have frequent health problems, are frail, or are at risk of developing conditions which could affect their independence, such as a fall.

They also act as the 'glue' between different services and organisations to ensure patients are able to access appropriate and joined-up care for their individual needs. For example, in the last five months of 2011, they helped 1,118 people to access support from social services.

Personalised Health Plans have been rolled out to 175 people, as well as Assistive Technology to over 400 patients, both of which aim to further empower people, to take greater control over their care and the management of their own condition.

By caring for patients within their own homes and reducing GP and hospital visits, it is estimated that the work of Case Managers and Community Matrons will help the local NHS to free up resources and generate significant savings.

Based on national 'marginal tariffs', each acute admission which is above expected levels of activity is estimated to cost the local NHS around £600 per patient. This equates to £0.6m savings per 1,000 admissions avoided. This is funding which can be reinvested into patient care and the further development of local services.

- A Carer satisfaction survey has shown that 95% of Carers are 'very satisfied' with the overall service, with the remaining 5% 'fairly satisfied'
- The survey results showed that 99% of carers felt as involved in the care decisions as they wanted to be, while 90% rated the advice given as 'very helpful'

Discussion point:

- The NCH&C Locality Manager for your area would be happy to discuss your experience of working with this service, how it can benefit your patients, and how you think it could improve in the future.

Contact point:

- Integrated Care Teams:
http://www.knowledgenorfolk.nhs.uk/heron_km/organisationdetails.aspx?id=22599

Caring for patients in the community

Real benefits seen through integrated care pilots

A joint pilot to integrate services between our Trust, GPs, social care and voluntary organisations, has been hailed a 'great success and offered very real benefits to patients'.

Last month, Norfolk Health Overview and Scrutiny Committee (NHOSC) heard from representatives from NCH&C, NHS Norfolk and Waveney and Norfolk County Council, how the six Integrated Care Organisation (ICO) pilots had improved patient care, reduced demand on local hospitals, and saved money.

Although the pilots officially ended in June 2011, councillors heard it had been agreed to keep the schemes running after that date. Best practice from each ICO was now being rolled out around the county.

NCH&C Chief Executive, Michael Scott told the committee: "We don't want the good work to be lost. There have been real benefits to patients and the standard of care they receive, as well as to how our teams work in partnership to ensure patients receive the right type of care where they need it most, and from the most appropriate agency.

"It offers us a solid foundation to further build upon in offering excellent and joined up health and social care, from GPs outwards, within the community and in avoiding a duplication of effort, which is not only an inefficient use of our resources but which is frustrating for patients."

After the meeting, the Chief Officer of the North Norfolk Clinical Commissioning Group, Mark Taylor, said: "As one of the pilot areas, our CCG will look to

build on the success of this pilot as we seek to develop fully integrated primary and community services."

NHOSC heard that a joint Integrated Project Lead had now been appointed to ensure the good work continues.

The ICO pilots ran for around two years from 2009, when the Department of Health announced that Norfolk was to be one of the 16 national sites to trial new ways for health and care organisations to work even closer together.

The six Norfolk pilots covered approximately one third of all GP practices in Norfolk, involving a patient population of more than 300,000 people. The pilots comprised of integrated teams of community health experts from NCH&C, GPs and Norfolk County Council's social care professionals. They worked with partner organisations, such as ambulance services, acute hospitals, the voluntary sector and housing groups - all working together to deliver the best possible care to local people.

While a national evaluation of pilot sites around the country is due soon a Norfolk evaluation has been carried out, which demonstrated that:

- the number of emergency admissions to acute hospitals in pilot areas between 2009/10 and 2010/11 were held in check whilst the rest of the county saw a 2.4% increase

- the number of permanent admissions to residential care was reduced by 7.6% and temporary admissions dropped by 16.4%
- the number of emergency admissions to hospitals among the target patient group fell by 31% – equating to a saving of £38k

Members of NHOSC heard that staff taking part in the pilots had reported improved communication, levels of trust, and efficiency. Overall, this led to Norfolk's health and social care professionals delivering further improved care to patients.

Mr Scott added: "We remain committed to continue working with our partners, such as Norfolk County Council, GPs, and other NHS trusts, to deliver high-quality and joined up care to local people."

Contact point:

- Karen Turner has been appointed the joint Project Lead for Health and Social Care Integration. Based at NCH&C headquarters in Norwich, you can contact her by email on Karen.Turner@nchc.nhs.uk

Leading the way, improving care locally

DH praises family focused service



The NCH&C Family Nurse Partnership (FNP) has received praise from the DH for successfully supporting soon-to-be mums under the age of 18.

The team helps young mums from early pregnancy through until their child is two years old. They aim to improve pregnancy outcomes, child health and development, smoking and breastfeeding rates, child language development, and father involvement, while also reducing child abuse and neglect.

After a visit to Norfolk, the DH's Service Development Lead for FNP, said: "The Norfolk FNP team is delivering the programme to a high standard with good organisational support.

"Indicators suggest that there are positive impacts in the areas of smoking and breastfeeding and we can see that the nurses are engaging large numbers of young fathers."

Mums-to-be can be referred to the service via GPs, midwives and education services.

Contact point:

- Michelle Ackroyd, Family Nurse Supervisor:
Michelle.Ackroyd@nchc.nhs.uk or 01603 751712

Trust's 'baby friendly' status

NCH&C has been awarded Baby Friendly Stage One status by UNICEF (United Nation's Children's Fund).

The achievement comes after NCH&C's Infant Feeding leads further developed the processes in place to promote breastfeeding, support local families, and monitor breastfeeding rates.

Training in Breast Feeding Management and Awareness is also being rolled out to our clinical and non-clinical staff so they have a shared understanding of the principals of the Baby Friendly scheme.

UNICEF has commented that the comprehensive package of improvements already put in place means NCH&C is well on the way to achieving Stage Two status.

The initiative was set up by UNICEF and the World Health Organisation to support health services in improving care provided to mothers and babies.

Contact point:

- Amanda Wagg, Infant Feeding Lead
amanda.wagg@nchc.nhs.uk

An update on how we are performing

Quarterly performance table

The following table details a small number of key indicators, where NCH&C is meeting the expectations of our customers and stakeholders, including commissioners and the NHS Midlands and East. They also highlight areas where our Trust is approaching its ceiling or is at risk of, or falling short of, missing a target.

November 2011 – January 2012

Help your patients to quit smoking

Smokefree Norfolk offers Stop Smoking advice and support to smokers from across Norfolk who want to quit. GPs can refer their patients to the service on 0800 0854 113.

Alternatively, referral forms can be accessed at:

http://www.knowledgenorfolk.nhs.uk/heron_km/organisationdetails.aspx?id=19492

Visit the Smokefree Norfolk website for more information:

<http://www.smokefreenorfolk.nhs.uk/>

Ref	Indicator	Target or upper ceiling	Quarterly performance	Year-to-date performance
1	MRSA bacteraemia	No more than one case during 2011/12	0 cases	0 cases
2	MRSA Screening - elective patients	100% of patients having planned surgery screened for MRSA	100%	100%
3	Clostridium difficile	No more than nine cases during 2011/12	1 case	8 cases
4	Injurious falls	Number of falls resulting in harm per 1,000 Occupied Bed Days. (A year end ceiling of 4.4 injurious falls has been agreed with NHS Norfolk during 2011/12 as part of the Trust's QIPP scheme)	3.79	4.02
5	Smoking cessation	On or above cumulative year to date trajectory against annual target of 2,700 successful quits agreed with NHS Norfolk. (Initiatives are in place to improve quit rates, including increasing recall rates and working with Norfolk prisons and Norwich pharmacies)	1,513	
6	Venous Thromboembolism (VTE) assessments	Percentage of admissions who had a VTE assessment undertaken - on or above trajectory. (By Feb 2012, 90% of admissions having a VTE assessment should have been met or exceeded)	89.9%	81.70%
7	Delayed transfers of care	No more than 6% of beds occupied by patients whose discharge is delayed for non-medical reasons	3.9%	4.10%
8	Community equipment store (CES)	99% or more items delivered within seven days of receipt of a referral	99.1%	99.40%
9	18 week wait referral to treatment	100% patients receiving definitive treatment within 18 weeks of referral. (Most services are compliant, the main exception is podiatric surgery, but full compliance is expected by end of Mar 2012)	97.9%	98.7%
10	Health visiting	95% or more of mothers receiving a New Birth Visit within 28 days of birth	96.4%	97.3%
11	Satisfaction with Adult Services	Overall level of satisfaction in excess of 90%	97.7%	97.40%
	Satisfaction with Children's Services	Overall level of satisfaction in excess of 90%	94.0%	94.60%

What else is happening at NCH&C

Clinical events resulting in improved and safer services

A series of 'Grand Round' clinical conferences focusing on some of the clinical, legal and ethical challenges that face medical professionals are already resulting in improved ways of working across NCH&C services.

Improving access to specialist psychological support for end of life care patients, developing a tracheotomy pathway, and exploring the possibility of developing a Trust-wide system for providing ethical advice, are just some of the projects being taken forward so far.

The quarterly Grand Round events for NCH&C staff are jointly chaired by NCH&C's Medical Director, Dr Ian Mack; Associate Medical Director, Dr Rosalyn Proops; and Director of Quality and Risk, Loyola Weeks. The aim is to develop best practice and to share learning across all of our own services, and with health and care partners.

Two events have now been held – the first looking at End of Life Care for local patients and how NCH&C can better join up its palliative care approach across all services; and the second, in March, focusing on the complexities, challenges and diversity of capacity and consent issues faced by our services.

A future Grand Round is planned on how our Trust can strengthen working between our services, GPs and other partners. All GPs are welcome to attend.

Expert clinicians from within our Trust - with support from legal advisors and guest speakers - lead the sessions where case studies are presented

to staff from all services, including children's, rehabilitation, and palliative care services, as well as a number of GPswSI.

As well as gaining valuable insight staff also gain Continuing Professional Development (CPD) points.

At the inaugural Grand Round in November, attendees considered three case studies of patients who had received end of life care after accessing our community paediatric services, neuro rehabilitation or palliative care services.

Attendees were asked to discuss the many factors which can determine how best to care for each of these patient's individual circumstances, and to identify the most effective, personalised care possible.

Speaking at the event, Dr Mack said: "It is important that we offer high-quality support to patients and high-quality support to colleagues. Clearly our staff experience periods of working under significant pressure and have intense professional relationships with their patients.

"It is key that we ensure that there is appropriate support in place across our range of services, so our clinicians know there is help available to them in making decisions about patient treatment and in dealing with the emotions involved in caring for someone."

People attending the events are encouraged to speak openly about the support they had been offered recently and whether – and how – further improvements could be made.

Further Grand Round events will include a spotlight on Safeguarding Adults and Children; Violence - Trauma Network; Domestic Violence and Violence towards staff; and the Mental Health Act 2007 and its implications.



What else is happening at NCH&C

Dussindale opens its doors once again

NCH&C's staff and services are now even more accessible to patients in Dussindale, Norwich, following the opening of a new clinic in November 2011.

The Dussindale Community Clinic is making use of the refurbished former Walk-In Centre building, which had been closed since July 2009.

At the clinic, NCH&C provides, continence clinics, stop smoking sessions, and plans to also offer leg ulcer clinics. NCH&C's teams work alongside a team of midwives from the Norfolk and Norwich Hospital, who are also based at the clinic.

The clinic is also the new base for NCH&C's 'City Two' Community Nursing and Therapy Team, placing them in the heart of the community.

From this base, the Trust's expert clinicians visit patients in their own homes or local care homes, carry out skilled assessments, and provide people with interventions and support to improve their health, comfort and independence.



Contact point:

- Sue Stockton, Locality Manager (Central): susan.stockton@nchc.nhs.uk

Right Royal visitor pops in at PBL

His Royal Highness, the Prince of Wales, recently visited NCH&C's Priscilla Bacon Centre, Norwich, where he met patients and their families, as well as staff and invited dignitaries.

During his private visit in February, Prince Charles heard how the Centre at Colman Hospital, Norwich, provides specialist palliative care, advice and support to people with life-limiting illnesses, such as cancer or motor neurone disease.



He chatted to members of the unit's multidisciplinary team which incorporates occupational and physiotherapists, nurses, doctors, a social worker and chaplain, along with volunteers who work closely together to support the physical, psychological and spiritual needs of its patients.

He visited patients' bedsides within the unit's 16-bed inpatient ward, where patients can access specialist nursing care within a community setting and staff aim to keep them as comfortable and independent as possible, particularly when their conditions worsen. Many patients visit the unit for short stays; other patients will pass away there.

The Prince also toured the centre's Rowan Day Unit where patients have access to a number of medical and complementary therapies, including IV therapy, massage sessions, and even a hair salon.

Christine Hawkins, Modern Matron at PBL said: "It was wonderful to meet the Prince and we were delighted that he spent so much time speaking to patients and staff. They really enjoyed meeting with him and he seemed to enjoy finding out about the expert care we offer to people here."

What else is happening at NCH&C

Email Encryption

All NHS organisations have a responsibility to make sure that the transfer of information via email is done with adequate security measures, especially when communicating sensitive/confidential and/or person sensitive data.

To ensure this responsibility is met the Trust has introduced an email encryption system when sending this information outside the organisation. All other emails should reach you unencrypted.

How does it work?

- The first time you are sent an encrypted email you will receive a notice stating that an email is waiting to be delivered. To receive the email you will need to register a password. The email will then be delivered prompting you to enter the password to access the message and any attachments
- This password will allow you to view all encrypted emails sent by NCH&C no matter who the sender is
- You have the option of securely replying by clicking on the reply button 'within' the message
- If 30 days pass between receiving encrypted messages from NCH&C you will be prompted for a new password in order to continue to receive encrypted emails from the Trust
- If you forget your password, contact our IT Service Desk - the password can be cleared and you can set up a new password

Resource point:

- If you would like a copy of 'Recipients Guide to Email Encryption', please contact the NCH&C IT Service Desk on 01603 508622 or servicedesk@nchc.nhs.uk

Contact point:

- For support and information, contact: servicedesk@nchc.nhs.uk or Debbie Blundell, Executive Assistant to Dr Ian Mack: debbie.blundell@nchc.nhs.uk

Norfolk's Falls & Fracture Risk Reduction Conference

South Green Park Enterprise Centre, Mattishall
Tuesday 12 June 2012, 9.30am – 5.00pm

GPs and practice staff are invited to attend the first ever Norfolk Falls and Fracture Risk Reduction Conference.

This free event is co-ordinated by NCH&C Falls Team with support from AMGEN, the National Osteoporosis Society and CareUK. The aim of this conference is to provide direct access to speakers who are leading the way in the latest evidence based practice in the area of Osteoporosis, Dementia and the overarching links with falls prevention.

Confirmed speakers to date:

- Dr. Sarda – Osteoporosis Treatment and Therapy
- Dr. Lee – NNUH Falls Medical Clinic
- NCH&C Falls Champions – Community Falls pathways
- Becky Gear – Osteoporosis and DEXA scanning
- Andrew Pover – Community Inpatient CQUIN target
- Willie Cruickshank – Dementia from a commissioning perspective
- Denise Forder & Lucy Davis – Norfolk First Support & SWIFT service

The day will be offered on the basis of a half-day or full-day attendance. An application for Royal College of Physicians CPD points has been submitted.

Contact point:

- If you would like more information or would like to attend, please email: norpct.norfolkfallsconference@nhs.net

What is happening where and when

Diary Dates

May

Clinical Workshops in Palliative Care

Communication: assessments, strategies and difficult conversations

Date: 30 May 2012 **Time:** 2pm – 4pm

Venue: Rowan Day Centre, Colman Hospital, Unthank Road Norwich, NR2 2PJ

Cost: £10

Booking: sandra.taylor@nchc.nhs.uk or call 01603 255738

NCH&C Public Board Meeting

Date: 30 May 2012 **Time:** 9.30am – 12 mid-day

Venue: John Jarrold Suite, UEA Sportspark, Norwich, NR4 TTJ

June

Falls and Fracture Risk Reduction Conference

Date: 12 June 2012

Time: half-day/ whole-day bookings

Venue: South Green Pk Enterprise Centre, Mattishall, Dereham

Associated CPD points

Booking: louise.mcgreevy@nchc.nhs.uk

June

Grand Round for Medical Professionals

The Grand Rounds are themed to highlight ethical and legal concerns. Two to four short presentations will be followed by discussion.

Safeguarding (Adults and Children)

Date: 13 June 2012 **Time:** 12 mid-day – 2pm

Venue: Patient and staff coffee lounge, Norwich Community Hospital

CPD points: 2

Booking: debbie.blundell@nchc.nhs.uk

Clinical Workshops in Palliative Care

Pain: assessment, tools and breakthrough pain

Date: 20 June 2012 **Time:** 2pm – 4pm

Venue: Rowan Day Centre, Colman Hospital, Unthank Road Norwich, NR2 2PJ

Cost: £10

Booking: sandra.taylor@nchc.nhs.uk or call 01603 255738

NCH&C Public Board Meeting

Date: 27 June 2012 **Time:** 9.30am – 12 mid-day

Venue: Merchant's Place, Cromer, NR27 9ES

July

Clinical Workshops in Palliative Care

Psychological: the psychology of illness and assessment of distress

Date: 11 July 2012 **Time:** 2pm – 4pm

Venue: Rowan Day Centre, Colman Hospital, Unthank Road Norwich, NR2 2PJ

Cost: £10

Booking: sandra.taylor@nchc.nhs.uk or call 01603 255738

NCH&C Public Board Meeting

Date: 25 July **Time:** 9.30am – 12 mid-day

Venue: NCH&C Head Office, Elliot House, 130 Ber Street, Norwich, NR1 3FR

August

Nuts and Bolts of Palliative Care

This six-day course enables you to assess patients in the physical, emotional, spiritual and social aspects of palliative care.

Dates: August 2012 – March 2013

Venue: Diss

Cost: £400

Booking: sandra.taylor@nchc.nhs.uk or call 01603 255738

We would welcome your feedback

We hope you found this specially-extended first edition of the GP Exchange informative. We would welcome your feedback and any suggestions you may have around areas of interest you would like to see covered in future editions. You can contact the editor by emailing the Communications Department at: communications@nchc.nhs.uk