

Ten minutes with the Trust



Hospice at Home service offers more choice

Our Trust will lead a new service which will enable even more patients who are coming to the end of their lives to access expert NHS care and support within their own homes. The Hospice at Home Service aims to improve care on offer to west Norfolk patients with palliative care needs, such as cancer, motor neurone disease and other long term conditions. Commissioned by West Norfolk CCG, the service is expected to be available from September.



Progress made on new CN&T Service

Further progress has been made in implementing the new Integrated Community Nursing and Therapy Service specification. We have recently introduced changes to SystemOne which will enable us to improve our reporting. At the request of local CCGs, when we begin caring for patients we will now provide their GP with a plan of care and also a full discharge. We are also now reviewing Quarter One activity information and will be discussing the needs of local patients with each CCG.



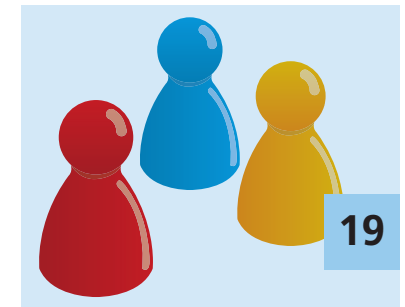
Integrated care steps up a pace

Our Trust has signed a joint statement of intent with Norfolk County Council (NCC) to drive forward the integration of our two organisations - building a more responsive and unified health and social care system with easier access to services. The aim is to further improve the experience of patients and clients when accessing care from our Trust and social care colleagues. Any service where a patient would benefit from an integrated care pathway between health and social care will be in scope.



Re-ablement service to keep more patients independent

Our community teams are working closely with Norfolk County Council to offer patients integrated support and re-ablement care following a period of ill health or a stay in hospital. The aim is to help people remain as independent as possible, while avoiding unnecessary hospital admissions. The service has now been rolled out in south Norfolk, having already been available in mid Norfolk, with plans in place to roll it out in other areas of the county soon.



Governor elections to be held later this year

This year our Trust will hold its first ever elections to appoint a wave of Public and Staff Governors. Having a fully engaged Council of Governors, representing the views of our Membership, will mean our patients and colleagues can have their say on the future of our Trust. It is also key to our Trust being approved as a Foundation Trust (FT), which will bring greater freedom for us to establish a wider range of partnerships to improve the services we deliver.



A few words from our Medical Director

“ Now we are a quarter of the way through the new financial year, it is a good time to take stock of what has already been achieved and what we are striving to accomplish in the coming months.

Our achievements in quality and safety during 2011/12 can be found in our recently published Quality Account. You can read more about our Quality Account on page 6.

Some of the highlights for me were seeing the number of injurious falls within our community hospitals reduced from 5.2 per 1,000 occupied bed days to 4.0, which was as a result of improved assessments and care plans for patients by our staff.

We have also, after an audit process, improved the administration of medicines in our units, halving the number of omitted or delayed doses.

In June we held two events which both had the aim of further improving the quality of care and safety we offer to our patients.

The latest Grand Round event focused on commonalities between Safeguarding Children and Adults and how we can improve communication between organisations and teams. There is more on this on page 18.

We also held our first ever Falls and Fracture Risk Reduction Conference, which you can read about on page 16. At this event, expert speakers discussed the complex medical nature of falls and how we can work together to reduce the rate of falls in the future.

There is, however, much more to do this year and we have set tough challenges. These include our aim to eliminate all preventable pressure ulcers among our patients by December, and to halve the number of catheter acquired urinary tract infections. To achieve these improvements for our patients and reduced rates of harm, we will of course need to work closely with our primary care colleagues.

I know all of us who are GPs will have recently received correspondence from NHS Norfolk and Waveney about our enhanced appraisals ahead of revalidation. So you may be interested to know that NCH&C runs a number of CPD approved events, many of which are free to attend, which I hope you may find useful in supporting your appraisal documentation. These are highlighted on page 22.

Best wishes



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



Pressure Ulcers campaign is launched

NCH&C has signed up to the elimination of all avoidable pressure ulcers by December 2012.

This important clinical initiative will help us make a real difference to our patients' lives and is being supported right throughout our Trust.

In order to achieve this target the Trust has set up a Pressure Ulcer Clinical Improvement Team to work in collaboration with staff to roll out high level training and education to help our staff and our patients achieve this ambition.

The team will lead a health promotion campaign with local patients and carers to ensure those living within their own homes can help to protect themselves from developing pressure ulcers.



Implementation of new integrated Community Nursing and Therapy Service makes good progress

Further progress has been made on putting in place the new Integrated Community Nursing and Therapy Service specification.

Our focus over the last few weeks has been on further improving our core clinical services, to serve as a bedrock for further development.

Our integrated teams of clinicians - including community matrons, nurses, therapists, assistant practitioners and health care assistants - continue to deliver a fully holistic approach to patient care. In particular, we have recently asked our staff to focus on reducing the risk of patient falls and lowering rates of pressure ulcers, in line with our wider objectives.

At the request of local Clinical Commissioning Groups (CCGs), when we begin caring for patients we will now provide their GP with a plan of care and also a full discharge summary at the end of the process.

These will be provided using tasks on our Clinical Patient Record System, SystmOne, or through alternative local arrangements for non-SystmOne using GPs. If any practice does not wish to receive this information, you should let your Locality Manager know.

Details of how to contact your NCH&C Locality Manager can be found on page 23.

Ahead of this, we have recently modified our methods for SystmOne recording to ensure we can provide full and accurate clinical information against each patient record for GP practices.

This has included creating new clinical templates to record, in read-coded format, the interventions undertaken by our staff, as well as recording the overall care given in clear patient clinical pathways.

We have also now completed monitoring of the service delivery levels for Quarter One and are reviewing this information against the reference points set out within the service specification.

This gives us an excellent opportunity to discuss with CCGs the type and amount of activity undertaken so far, and we will continue to do so on a monthly basis.

This will ensure the needs of patients continue to be met in each locality.

We are currently recruiting to our Out of Hours Nursing Team, as we look to expand the service, and we are also developing the Care at Home Service. Both of these are expected to be in place by their planned implementation date of November 2012.

All GP practices will now have a named nurse who will be working with you to determine clear processes to identify vulnerable patients. By working together, we can ensure patients can receive care in their own homes, avoid unnecessary hospital admissions, and - when they are admitted - to leave hospital sooner.

Anna Morgan, our Director of Operations,

commented: "We have continued to have regular conversations about the implementation of this new service specification with the CCGs and NHS Norfolk and Waveney, which have been very positive.

"We have already made good progress, and have plans to further enhance our services in the coming weeks and months. We have plans in place to closely monitor the demand for the services that we have not previously provided so that by working together with the practices we can clearly define areas for staff training and investment in necessary equipment.

"I would like to thank you for your ongoing support with this process and am delighted that, together, we can continue to improve local services for people in and around Norfolk."

Hospice at Home service to give more choice to end of life patients

Our Trust is to lead a new service which will enable even more patients who are coming to the end of their lives to access expert NHS care and support within their own homes in the west of the county.

The Hospice at Home Service aims to improve the care on offer to patients with palliative care needs, such as cancer, motor neurone disease or other long term conditions.

Our expert community nursing and therapy staff already provide palliative care support to patients across Norfolk, but this newly commissioned service will build on existing service provision.

As the lead provider, our Trust's community teams will continue to lead on the day-to-day provision of nursing, therapy and support to patients, while our experienced community matrons will also ensure that the care provided to each patient continues to meet their individual needs.

We will also play a key coordination role and will be expanding our coordination team - which is in place seven days-a-week - and organises care through a central hub to ensure patients are able to promptly access the nursing, therapy, and support that they need and services continue to meet demand.

The service has been commissioned by West Norfolk Clinical Commissioning Group (CCG) for patients in the west of the county and it is expected to be available from September. Our Trust has been selected as the lead provider and will deliver it in partnership with Norfolk Hospice (Tapping House) and Marie Curie Cancer Care.

The CCG commissioned the service after its member GP practices, NHS partners, and other groups discussed how best to improve the care and support available to patients at the end of their lives.

Referrals to the service will be made by a range of health professionals including GPs, acute hospitals, and community-based NHS teams, as well as by care homes and other residential settings.

In addition to the care provided by NCH&C, Palliative Care Nurses from Norfolk Hospice (Tapping House) will provide additional care to patients, as well as essential education and training to care home and healthcare staff.

This will help the health and care professionals to increase their working knowledge of end of life care, including national 'best practice', such as the Gold Standards Framework, and to raise awareness of how patients and clients can access the support on offer.

As part of the developments, Marie Curie Cancer Care will expand the existing Nursing Service provided in partnership with NCH&C.

Marie Curie's two new Senior Health Care Assistants will also provide practical hands-on care overnight to patients in their homes, as well as offering support to carers. This overnight help will ensure

patients can be cared for in their place of choice and give carers a break, knowing that their loved one is in safe hands.

Anna Morgan, our Director of Operations, said: "This service will make a real difference to patients in west Norfolk, as well as their carers. The improved service will help even more patients to be able to access the care they need, in the location they choose."



Healthy year for Trust's patients and for its finances... but more challenges lie ahead

Our Trust took big steps in further improving the quality of our services for our patients over the past year and delivered a financial surplus of £0.5m in 2011/12.



But NCH&C Chief Executive **Michael Scott** stressed that if we are to continue to deliver savings and efficiencies for the local health service in 2012/13 we need to see sensible investment into community services in Norfolk.

"We are delivering more affordable care in the community, achieving high standards in joined-up, integrated services. We are consistently hearing from local patients and carers that they are satisfied with our services, to the highest levels and that they want more local services, closer to home.

"But at present the funding is simply not following the demand. It really is the time to start calling for more funding to come into developing community-based care. Only this can enable us to meet increasing patient demand, and to sensibly integrate with local authority services and offer local people a joined-up package of excellent care closer to their homes.

"When care was transferred from mental health organisations into the community there was a bridging fund provided. If this was implemented now for acute hospital care transfer, we could treat more patients in the community without impacting on acute care," Michael explained.

Results from the 2011/12 Commissioning for Quality and Innovation (CQUIN)* commitments show that NCH&C made its services better, safer, and more accessible last year, while improving levels of patient satisfaction.

As a result of meeting the vast majority of our CQUIN goals in 2011/12, NCH&C earned around £1.25m from the PCT.

An overview of our 2011/12 CQUINS is listed over the page, along with information on our performance against these goals during Q4.

Figures up to the end of March 2012 showed that the Trust made an in-month surplus for five months in a row, and again since May 2012, ensuring it continues to operate at a consistently efficient level. Looking into the current year (2012/13) the Trust is in a year-to-date surplus position.

"The dedication of our staff to work ever more efficiently and to deliver Cost Improvement Plans (CIPs) and achieving CQUIN goals has contributed towards this success so far.

"However, the challenges of achieving further NHS savings in this year, set against rising inflation, means that 2012/13 will present some real financial challenges.

"We need to have a more realistic outlook and take an 'invest to save' approach – moving more of the funding into the community and out of acute services has to start becoming the reality in Norfolk," Michael added.

Michael stressed that the future for NCH&C was as a foundation trust, which would enable the organisations to reinvest any surplus in future years back into local NHS community services.

"FT status will be achieved as a consequence of our being a strong organisation, putting us in a better position to deliver more local services and to help lead the way in developing excellent NHS healthcare for Norfolk," he said.

**CQUINS are contractual commitments which aim to encourage progress to be made within key areas of local services; for meeting these commitments and further improving local services, trusts receive payments from commissioners.*

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CQUIN success in 2011/12

We met around 90% of our Commissioning for Quality and Innovation (CQUIN) commitments in Quarter 4 of 2011/12. CQUINS are contractual commitments which encourage progress to be made within key areas of local services.

In striving to achieve these goals we have improved the quality of our services and the experience patients have while accessing care from our Trust.

As a reward for meeting these commitments, NCH&C receives investment from our commissioner. In total, NCH&C received around £1.25m as a result of its delivery of CQUINS.

Michael Scott, our CEO, said: "It is because of the hard work of our dedicated staff that we have been able to deliver these improvements to patients and meet our CQUIN commitments.

"This achievement shows our organisation's commitment to improving the quality of services for the benefit of our patients."

CQUIN Indicator	Q4 Achievement
1 - Use of Telehealth (assistive technology)	Partial Achievement
2 - EoL Gold Standard Framework (GSF)	Full
3 - EoL Liverpool Care Pathway (LCP)	Full
4 - Medicine Management	Full
5a - Patient Satisfaction: Adults' Services	Full
5b - Patient Satisfaction: Children's Services	Partial Achievement
6 - Reduction of Injurious Falls within Inpatient units	Full
7a - Carer Experience: Adults' Services	Full
7b - Carer / Parent Experience: Children's Services	Full
8 - UNICEF Stage 1 Accreditation	Full

Quality Account highlights Trust's achievements

We have now published our Quality Account for 2011/12, which shares our achievements and learning over the past year.

It also sets out our priorities and quality goals for the current year, demonstrating the Trust's ongoing commitment to quality and improvement.

The document is now available on our website and on NHS Choices.

The Quality Account is a mandatory document, which sits alongside our financial accounts in its importance, and is set out in three parts:

- Part 1 contains a statement on quality by Michael Scott, our Chief Executive, and sets out our vision for the future
- Part 2 sets out our priorities for quality improvement for 2012/13 and contains statements of assurance from the Board
- Part 3 reviews our quality performance in 2011/12 and includes our staff's achievements, performance against our quality goals, and learning from incidents and complaints. It also contains supportive statements from our commissioners, NHS Norfolk & Waveney, and Norfolk LINK, our local involvement network.

The Quality Account includes key information drawn from our annual plan, quality and risk reports, patient experience results, clinical audit and research information, performance data, as well as news articles featured throughout the year.

Michael Scott, commented: "I am delighted with this year's Quality Account and the Trust Board were pleased to endorse it. This public document provides us with an excellent opportunity to share our successes as well as our learning, demonstrating that we are committed to continuously improve the quality of our services."



Quarterly performance

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 NHS Midlands and East.

They also highlight areas where our Trust is approaching its ceiling or is at risk of missing a target.

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

Visit the Smokefree Norfolk website for more information: www.smokefreenorfolk.nhs.uk

Is this your time to go smokefree?
Call us on our local freephone

0800 0854 113

Visit us at www.smokefreenorfolk.nhs.uk

Email smokefreenorfolk@nchc.nhs.uk

You're up to **four times more likely** to stop smoking successfully with the support of Smokefree Norfolk

March 2012 – May 2012

Ref	Indicator	Target or upper ceiling	March - May performance	Year-to-date performance
1	MRSA bacteraemia	No more than one case during 2011/12	1 case	1 case
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 2012/13	0 cases	8 cases
4	Injurious falls	Number of falls resulting in harm to be below 4.4 per 1,000 Occupied Bed Days	3.79	4.02
5	Smoking cessation	To be on or above cumulative year to date trajectory	2,019 (data reported one month in arrears, relates to total quits in 2011/12)	
6	Venous Thromboembolism (VTE) assessments	90% or more admissions having a VTE assessment	93.3%	94.9%
7	Delayed transfers of care	No more than 6% of beds occupied by patients whose discharge is delayed for non-medical reasons	3.9%	4.2%
8	Community equipment store (CES) response within seven days	99% or more items delivered within seven days of receipt of a referral	99.6%	99.70%
9	18 week wait referral to treatment	All patients receiving definitive treatment within 18 weeks of referral	99.1%	99.3%
10	Health visiting	95% or more of mothers receiving a New Birth Visit within 28 days of birth	97.4%	97.0%

Statement of intent: Integrating health and social care services steps up in pace

Our Trust has signed a joint statement of intent with Norfolk County Council (NCC) to drive forward the integration of our two organisations - building a more responsive and unified health and social care system with easier access to services.

The aim is to further improve the experience of patients and clients when accessing care from our Trust and social care colleagues and any service where a patient would benefit from an integrated care pathway between health and social care will be in scope.

This will see teams co-located and some shared management, where this is appropriate. Integrated practice could also include senior managers being seconded to or joining the senior management team or executive team of each organisation.

Michael Scott, NCH&C CEO, said: "While there is a lot to do, we would want to see this practice embedded across the county with staff co-located, wherever possible, by March 2013, and we are in agreement with NCC that the pace now needs to step up.

"The integration of health and care services offers real benefits to our patients and through public consultation they have made it very clear that they expect a joined-up approach linked to primary care. They want to tell their story once and do not expect to have to navigate across organisational boundaries.

"Effective integrated working also offers time and financial efficiencies, and good developmental opportunities for both health and care staff.

"This is an exciting time and we look forward to working with our partners in progressing towards what we agree is the best solution for looking after people locally."

Integrated practice will include the flexibility to use the resources of the partner organisation within agreed limits. For example, Community Nursing staff could switch on social care packages for patients to avoid a hospital admission. Social Care staff could access clinical advice about their clients to assist in social work decision making.

Integration may also extend beyond health and social care to include housing or neighbourhood support schemes.

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NCH&C already has a very good record of integrated working – as seen during the successful Integrated Care Organisation pilots (ICOs). This saw our Trust, NCC, GPs, and other partners working together to deliver innovative ways to improve the care offered to patients in Norfolk.

The six pilots delivered improved patient care, reduced demand on local hospitals, and saved money. 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 while the rest of the county saw a 2.4% increase
- Permanent admissions to residential care was reduced by 7.6% and temporary admissions dropped by 16.4%
- Emergency admissions to hospitals among the target patient group fell by 31% – equating to a saving of £38k

Best practice from each ICO continues to be rolled out around the county and a joint Integrated Project Lead has been appointed to ensure the good work continues.

Award-winning ways of working

The 'Greater Efficiency in Collaboration – Integrated Care Teams in Mid Norfolk' project has been named as a finalist in the Health Service Journal Efficiency Awards 2012.

The project was originally rolled out as ICO pilot and proved to be such a success that it has now been adopted as 'business as usual' by the mid Norfolk practices and listed within the HSJ's awards Community Service Redesign category.

The project involves NCH&C community-based staff working closely with GPs, acute, social care and mental health colleagues. Together, they aim to provide a seamless service to patients to improve the care on offer, while also improving efficiency.

Their approach has seen the number of unplanned acute admissions in their area fall below both the local and national averages. As a result:

- The number of unplanned acute and residential inpatient or day admissions in the mid Norfolk area is around 28% lower than would normally be expected
- The rate of admissions is also around 15% lower than the Norfolk average

This means more patients are being helped to stay as independent and healthy as possible. It has also enabled the local health economy to make savings, with figures showing reduced spending on acute activity for 2011/12.

The award results will be announced in September.

Diabetes events promote improved patient support

A range of events are taking place over the next few months to further promote improved care for patients with diabetes. A Diabetes Care Symposium was held by the NCH&C Community Diabetes Team in west Norfolk in July.



Representatives from over 40 local care homes attended and heard how they, in partnership with our staff, can best care for their residents. They were advised on how their residents can access blood pressure and blood level checks, retinal screening, foot testing, and injections from NCH&C, all key to ensuring patients with diabetes can access consistent and high quality care while within a care home.

Julie Widdowson, NCH&C Diabetes Service Lead (West), said: "Diabetes is a key issue facing Norfolk's communities. There are around 30,000 people in Norfolk who have diabetes, with 2,500 people newly diagnosed each year.

"Our nurses offer first rate care to these patients, but it remains essential that we continue to develop our partnership working with care homes and other organisations as a consistent approach and quick access to care can make a big difference to patient's lives."

Re-ablement Service keeps patients independent

Patients in south Norfolk are now able to access integrated support and re-ablement care following a period of ill health or stay in hospital, which will help them stay as independent as possible while preventing unnecessary readmissions.

The service will see NCH&C's community teams, which include occupational therapists, physiotherapists, nurses, and health care assistants, working alongside Norfolk County Council's existing Norfolk First Support Service. This joined up approach is in line with Department of Health directives to integrate re-ablement support.

GPs are also now able to directly refer to this service, avoiding the need to refer via council staff and for further assessments to take place.

Having already been made available to patients in mid Norfolk, the roll out in the south of the county is part of a phased approach, with plans in place to deliver this service to patients right across Norfolk.

The service aims to help patients whose independence is at risk, including people who cannot maintain their personal care and those who have lost confidence in the ability to carry out tasks of daily living.

NCH&C's experienced staff will assess patients in their own homes, or within another community setting, and ensure that they receive the care they need to regain their independence.

This may involve the provision of clinical care from our community teams or, where necessary, more intensive re-ablement from Norfolk County Council.

Studies have shown that this intervention can bring radical benefits in both the short and long term: with up to:

- 68% of patients requiring no immediate homecare package
- 48% of patients requiring no care package for two years after re-ablement

Contact point:

- NCH&C Single Point of Referral: 01953 609409

Adults' Services continue to improve

Figures from a recent patient experience survey have shown that further improvements have been made to our Adults' Services.

Patients accessing the Norwich and King's Lynn clinics of our Orthopaedic Triage, MSK Physiotherapy, Podiatry, and Biomechanics services were asked questions on four themes: General; Information; Environment; and Communication.

The results showed:

- The Biomechanics service at St James' scored 100% satisfaction across each theme
- Our Podiatry clinics in both Norwich and King's Lynn scored 100% for Information, Environment, and Communication
- The MSK Physiotherapy service in Norwich scored 100% satisfaction in two of the four themes
- All of the services scored 100% satisfaction for Environment

Patient feedback also informed an action plan which was drawn up to ensure we continue to meet their needs.

As a result, we have: produced new leaflets which contain information specifically requested by patients; improved service accessibility by providing new maps and parking directions; and rearranging our waiting areas.

The survey was carried out as part of one of our 2011/12 Commissioning for Quality and Innovation (CQUIN) commitments, which see our Trust receiving funding for achieving quality-related goals.



Stroke service delivering excellent care to patients

NCH&C's integrated stroke services continue to deliver excellent care to local patients, while continuing to see an increase in the number of patients, year-on-year.

In 2011-12 the Trust's Stroke Rehabilitation Unit (SRU), based at Norwich Community Hospital's Mulberry Unit, admitted over 300 patients at a rate of 26 patients per month, up from 24 per month in 2010-11.

Despite that rise:

- The stroke team has successfully discharged 87% of patients back to their own home rather than going into care, or to an acute hospital
- Over 96% of patients reported that they were satisfied with the care provided by the service in an independent survey (Ipsos MORI)
- The Care Quality Commission's (CQC) National Stroke Report (Jan 2011) reported that services within the NHS Norfolk & Waveney's area are rated as among the 'Better Performing'

Trish White, Lead for NCH&C's Stroke Rehabilitation Services explained that our services form a central part of the Norfolk Integrated Stroke Care Pathway which sees health and care teams from acute hospitals to community services and the voluntary sector all working closely together to offer a joined up service for patients.

"Working closely in partnership with other health and care organisations NCH&C is delivering stroke services in the community which are in-line with best national practice for patients who have had a stroke," she said.



The SRU admits patients directly from the acute stroke unit based at the Norfolk and Norwich University Hospital. Patients benefit from the expertise of a multi-disciplinary team of healthcare professionals, which includes nurses, physiotherapists, occupational therapists, doctors, dieticians, social workers, clinical psychologists and speech and language therapists.

These staff are supported by a team of healthcare assistants, rehabilitation assistants, and assistant practitioners in stroke rehabilitation.

Where appropriate, some patients are offered ongoing support from NCH&C's Stroke Early Supported Discharge Team (ESD), either immediately after an acute hospital stay and assessment, or following a stay within the SRU.

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The ESD Team provides intensive rehabilitation to patients in their own home, nursing homes or residential homes, including social work support.

This team also saw an increase in the number of referrals in 2011-12:

- More than 320 patients were referred to the team, an increase of around 100 patients on the previous year
- 85% (9 out of 10) of ESD patients returned to their own homes rather than going into care, or to an acute hospital
- NCH&C's Early Supported Discharge Team achieved CQC's top score of 5 in overall ratings (only 17.8% of all PCT areas achieved this)

The six-month Follow Up Service is also provided by NCH&C – commissioned in central Norwich and south Norfolk only.

It offers health monitoring to reduce recurrence of stroke, including blood pressure and pulse checks, a review of medication and discussion of lifestyle changes, including ongoing social care needs, either in clinic or within the patient's home.

In 2011-12:

- 100% of patients referred are offered a follow-up appointment
- 81% of patients offered a six-month appointment attended

"Local stroke services are helping to make a big difference to patients. However, we are keen to continue to build on the progress made so far," Trish added.

Trish takes up stroke lead role

Trish White leads the NCH&C Stroke Care Team. Her post includes holding the role of Matron for the Early Supported Discharge team (ESD) and for Beech Ward, the inpatient stroke rehabilitation ward within the Mulberry Unit, at Norwich Community Hospital.

"The most important challenge for me is to continue to develop an excellent and sustainable service that delivers patient-centred rehabilitation to stroke patients, and support their carers. And to maintain the seamless transfer of patients between the acute, us and community teams.

"I am very fortunate to work with amazing staff on Beech Ward and ESD who are dedicated to improving the outcomes for people who have had a stroke, as well as being very flexible, keen and innovative," she said.



Contact point:

- Trish White: patricia.white2@nchc.nhs.uk or 01603 217006

Research nationally recognised

Dr Tammy Davidson Thompson, one of our Principal Speech and Language Therapists (SLT) who works with adults, has received a national award for her work looking into stammering in adults and how therapeutic support could be improved.



Working with both our Specialist Neurology Service and the Dysfluency Team, Tammy received the Travers Reid Award for the research she carried out in completing her PhD.

Her thesis focused specifically on the field of dysfluency – or stammering or stuttering – in adults, and how SLTs work with their clients particularly in regards to psychosocial issues.

It was this work which saw her win the award, which was presented at the Michael Palin Centre for Stammering Children by Travers Reid, a lifelong stammerer and founder of the Association for Research into Stammering in Childhood.

"The research found that there was a large difference in practice between specialist and generalist therapists and, in summary, the recommendation was a move of NHS funding towards more specialist SLTs," Tammy commented.

Research has found that adults who stutter often experience social anxiety related to their speech and may worry about how other people view them as a result. This may lead to them avoiding situations and opportunities and restricting their lives.

Hospital's official opening to take place next month



Members of the public, Trust staff, and a number of dignitaries are to attend the official opening of one of our community hospitals in August, following extensive redevelopment work at the site.

North Walsham Hospital will be officially opened on August 1. The opening event will see attendees invited to speak to staff about the services based on or around the site.

Senior representatives from our Trust, including our CEO and Chair, will speak about the benefits the new hospital has brought local people and the excellent care being provided by our expert staff.

Also speaking at the event will be Brian Elliot, Chair of the Hospital's Friends, and Norman Lamb MP, a supporter of the redevelopment project.

The £3.7m hospital first opened its doors to patients in May and provides rehabilitation and care within a new 24-bed ward – eight more than was available in the old hospital, which was demolished at the end of 2011.

Aylsham Health Centre opens to patients

Our new health centre in Aylsham is now open to patients. The £900k unit, which forms part of the St Michael's care complex, offers patients access to a number of clinics, including:

The clinics based at the unit have been transferred from the nearby St Michael's Hospital, which is now expected to close.

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

The Health Centre will also serve as a base for one of our expert community nursing and therapy teams.

Inpatient services have already been transferred to the redeveloped North Walsham Hospital, as planned for some time by NHS Norfolk and Waveney.

Anna Morgan, our Director of Operations, said: "The new health centre is a fantastic resource. It has been built to modern standards and is a great place for local people to access a number of clinics which are delivered by our Trust's expert staff."



Contact point:

- Aylsham Health Centre can be accessed via St Michael's Avenue, Cawston Road, Aylsham, NR11 6YA. Telephone: 01263 739998

Our Sterile Services team can help your patients

NCH&C's Centralised Sterile Services team is offering GPs across Norfolk an innovative and dynamic solution to their decontamination needs.

The team provides both reprocessible sterile instrument packs and a range of pre-sterile 'soft' items, such as dressings, swabs, and cotton wool. The highly trained and experienced Sterile Services Management and Technicians can even design sets to suit specific preferences.

Safety is always paramount and the team offers peace of mind with its advanced track and trace software for each instrument set.

Contact point:

- Denise Moss, Operational Manager:
denise.moss@nchc.nhs.uk or 01603 774308

Attend the Infection Control Conference

This year's Infection Prevention and Control Annual Conference will take place on Tuesday, October 9, 2012 at Holiday Inn Norwich (North), Cromer Road, Norwich.

Delegates will hear from expert speakers on a number of key subjects including: reducing the spread of Clostridium Difficile (C. diff); urinary catheter care and practice, and issues around MRSA.

There is a £50 charge per delegate, or £40 per delegate if you have a service level agreement with the NCH&C Infection Prevention & Control Team. This event is always very popular, so please book your place early to avoid disappointment. Booking closes on August 31.

Contact point:

- Infection Prevention and Control Administrator: beverley.ball@nchc.nhs.uk or 01603 776749

Locality name change

To bring us closer in-line with the local Clinical Commissioning Group (CCG) our Trust has now renamed our 'Central' locality as 'Norwich'.

We hope that this will help to clarify that our services in that area of the county can be commissioned by the Norwich CCG for patients in and around the city.

In the last edition of the GP Exchange we explained how, to better support CCGs, our Trust has reorganised our structures into four geographic localities and two specialist localities, wrapping our services around your patients and practices - North, South, West, and now Norwich.

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

We would highly value your feedback as to how the changes on the ground are working for you so far. Please get in touch with your locality leads about any issues or improvements this may have brought.



Contact point:

- For all Locality Leads contact details turn to page 23

Patients value the benefits of comprehensive Community Respiratory Service

NCH&C's Community Respiratory Service offers a comprehensive diagnostic and treatment service for people with respiratory conditions such as asthma and COPD.

Integrated well with other services it aims to enable people with more complex respiratory conditions to be managed closer to home and to reduce their need for hospital referrals or admissions.

Clinics are held in Thetford, Sheringham, Aylsham and North Walsham (Dr Daryl Freeman), Norwich (Dr Allen Varghese) and referrals are accepted from GPs and practice respiratory nurses.

These can incorporate:

- Where there is differential diagnostic uncertainty
- There is a persistent cough with normal chest X-ray
- Patients with COPD/asthma have been discharged from secondary care
- There is rapid decline in an individual's functional status with normal CXR
- Recurrent exacerbations of respiratory disease whether asthma/COPD or chronic infections are seen
- Assessment for long term nebuliser therapy is required
- Assessment for pulmonary rehabilitation is needed where there is doubt in referrer's mind as to suitability of patients

Patient feedback has demonstrated their appreciation receiving this care closer to home and 86% of patients referred to the service felt that it had helped them.



Resource point:

- Details of the referral criteria and a referral form are available on the Norfolk Knowledge Management website: <http://www.knowledgenorfolk.nhs.uk/respiratory.htm>

Contact point:

- Gemma Anderson, NCH&C Community Respiratory Clinic, Norwich Community Hospital, Bowthorpe Road, Norwich, NR2 3TU, Tel: 01603 776753, Fax: 01603 776690 Email: CommunityRespiratory@nchc.nhs.uk

Our patients have told us:

“ Invaluable help and advice with inhalers... ”

“ The help I received has made such a change to my everyday living... ”

“ Focused on treatment and symptoms have been relieved considerably ”

“ Complete change of meds has helped enormously... ”

“ Pulmonary rehabilitation has changed my life... ”

First ever Falls Conference has high turn out

Our Trust's first ever Falls and Fracture Risk Reduction Conference - with support from AMGEN and CareUK - took place in June at South Green Enterprise Park, Mattishall.

The free event, which offered attendees CPD points, was attended by 93 people including representatives from GP practices, CCGs, Norfolk County Council, as well as Norfolk and Suffolk third sector groups, housing agencies and care homes.

The event was hosted and managed by NCH&C's Falls Service Lead, Roy Crane, and Falls Champions Kate Fricker, Lianne Mason and Louise McGreevy from the Community Falls Prevention Service.

Guest speaker Willie Cruickshank, Director of Norfolk & Suffolk Dementia Alliance, gave context to the increasing need to focus on the care delivery and falls prevention / management for patients with dementia.

A discussion on osteoporosis assessment, treatment and therapies was led by Dr Pradip Sarda, consultant physician at the Queen Elizabeth Hospital, King's Lynn, while Denise Forder and Lucy Davies informed attendees about services and developments in Norfolk County Council's Swift Responder Service.

Dr Susan Lee, consultant physician for the Norfolk and Norwich University Hospital's MFE Falls Medical Assessment Clinic, offered case studies to promote appropriate referrals to the clinic and to give greater depth of understanding to the complex medical nature of falls.

Becky Gear outlined her role in relation to CareUK and osteoporosis management, while Janet Ritchie, National Lead for CareUK, discussed the importance of DXA scanning for diagnosis of osteoporosis and treatment.

The day was rounded off by Andrew Pover, Foxley Ward Manager at Dereham Community Hospital, who presented his work regarding strategies to reduce the number of inpatient falls and an ongoing assistive technology pilot.

Event aims to help patients avoid unnecessary amputations

A study day which will give local health and care professionals the chance to discuss how we can all further improve services for patients with diabetes will take place this September.

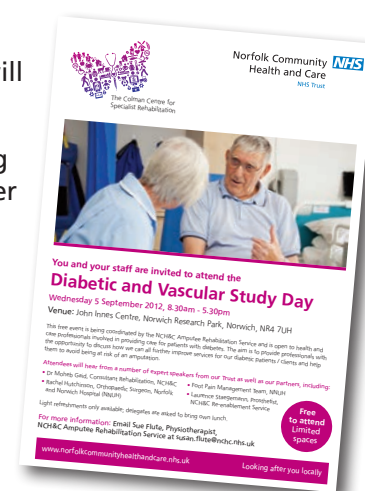
The NCH&C Vascular and Diabetes Study Day, is being held at the John Innes Centre, Norwich, on September 5 and is open to anyone involved in providing care for patients with diabetes, including GPs, with the aim of avoiding unnecessary amputations.

Attendees will hear from a number of expert speakers from our Trust as well as our partners, including:

- Dr Moheb Gaid, Consultant Rehabilitation, NCH&C
- Rachel Hutchinson, Orthopaedic Surgeon, Norfolk and Norwich Hospital (NNUH)
- Foot Pain Management Team, NNUH
- Laurence Staegemann, Prosthetist, NCH&C Re-enablement Service

Sue Flute, physiotherapist at NCH&C's specialist Amputee Rehabilitation Service, is organising the event and commented: "We want to help improve awareness of the issues facing patients with an amputation and diabetes. By improving the understanding of care professionals, we expect that there will be an even better awareness of the expert services in place locally and how they can improve the quality of life for patients in these situations."

Spaces at the event are limited so those wishing to go to attend should book now to avoid disappointment.

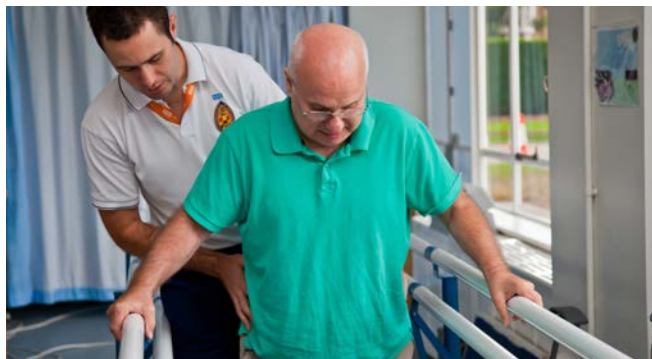


Contact point:

- susan.flute@nchc.nhs.uk

Our staff help Olympic Games stars get back on their feet

With the Olympic and Paralympic Games taking place from the end of July through until September, staff from our teams are gearing up to cheer louder than most when their former patients take centre stage.



On July 4, staff from Caroline House, our specialist rehabilitation unit at Colman Hospital, Norwich, cheered on their former patient, Eddie Pleban, as he carried the Olympic Flame through the Royal Sandringham Estate as part of the official torch relay.

Eddie, 62, from Norwich, received expert care at our unit after having a stroke during a flight from Australia in 2011.

He said: "I could only think about getting through a day at a time. The number of times I was told I might not talk again, or eat again through my mouth. At one point I asked if I would be able to walk again and the doctors stayed very quiet.

"Then I started going to Caroline House and did my physio there and they really put me through the mill to get me standing again." Although Eddie took his wheelchair to Sandringham, he managed to walk part of his torch relay.

Meanwhile, our Re-enablement and Amputee Services will be hoping one of their patients will be able to bring back a little piece of Gold to Norfolk.

Amy Conroy, 19, is expected to represent Great Britain in Wheelchair Basketball at the Paralympic Games.

She has received care from our teams since she was 13 years-old, when she was diagnosed with osteosarcoma - a cancer which affects the bones. Despite a course of chemotherapy, her left leg had to be amputated.

But with help from NCH&C, Amy was helped to recover and to walk again with the provision of a prosthetic leg and intensive, specialist rehabilitative care.

Amy initially received care from Sue Flute, Senior Physiotherapist specialising in amputee rehabilitation at Pine Cottage, also at Colman Hospital, to recover after her leg was amputated and to build up her strength and balance again. Amy was later provided with a prosthetic leg.

She said: "It was really hard at first and I thought I would be in a wheelchair for my whole life, or scooting around on my bum! I didn't realise that they even made artificial limbs at that stage or that there was great care on offer for people in my situation in Norfolk.

"I suppose it is one of those things that you never think about until you need it, but when I needed help the team were fantastic – and they still are."

Amy is now one of Team GB's best chances of getting a medal at the Games. She has received ongoing support from NCH&C's staff throughout and was recently provided with a new prosthetic foot which enables her to wear different shoes.

"I owe a great deal to everyone at the Amputee and NCH&C Re-enablement Services because they helped to get me back on my two feet, literally!

"They've shown me a lot of professional support and also show an interest in me as a person. Without their help, I don't think I'd be where I am today because they've always encouraged me to have confidence in myself and drive forward," added Amy.



Safeguarding our adults and children is 'everybody's business'

NCH&C held a Grand Round event last month focusing on safeguarding adults and children which saw more than 90 doctors and dentists, including GPs, attend.

Dr Kate McGlashan, NCH&C Consultant in Rehabilitation Medicine, presented a case study demonstrating the complexities of caring for patients with head injuries in relation to safeguarding, and the effects on their families.

Debbie Beresford, NCH&C Head of Safeguarding for Adults, presented an overview of clinical and ethical problems in ensuring vulnerable adults are safeguarded, and Ruth MacQueen, Assistant Clinical Psychologist NCH&C Children's Services discussed a complicated story of a child, significantly affected by his early life.

Finally, Dr Sue Zeitlin, Consultant Community Paediatrician, presented an analysis of decision-making, looking at the complexities that arise and diagnostic dilemmas that occur in children who are affected by their troubled childhoods.

Those attending – who gained CPD points – learnt about the commonalities between safeguarding children and adults and discussed the difficulties in sharing information and communicating between agencies and between healthcare professionals.

The meeting generated many questions and comments from the participants and was seen as a very productive way of sharing information across disparate disciplines in the very important area of safeguarding which is everybody's business.

The NCH&C Medical Directorate Team, together with our Named Doctor for Safeguarding, will consider how best this can be incorporated into the Trust's Safeguarding Training Programme and how we can share best practice with GPs and their teams.

The next Grand Round event will be held on September 12. More details are on page 22.



Queen's Nurse Tracy's appointment with the PM at No10

Not only has NCH&C nurse Tracy Williams recently achieved the prestigious title of Queen's Nurse (QN), but she was also invited to a special Downing Street reception with the Prime Minister.



Tracy - a nurse prescriber - leads the clinical nursing team within our City Reach service, based in Norwich, which offers primary care services to people who are homeless, at risk of homelessness or regarded as vulnerable. This can include ex offenders, sex workers, and people with addictions, as well as refugees, travellers and migrant families.

She joined other nurses from around the UK - who were marked out for their work towards improving the quality of nursing care and leadership - to meet Mr Cameron and Health Secretary Andrew Lansley.

Tracy was nominated for the Queen's Nurse (QN) award by her nursing peers around the country for her specialised work with vulnerable and marginalised people.

FT Governor elections to be held later this year

This year our Trust will hold its first ever elections to appoint a wave of Public and Staff Governors.

Our Members are being encouraged to consider putting themselves forward to become a Governor. At the same time, we continue to welcome new Members to the Trust, particularly as to become a Governor you first need to register as a Member.

In addition to the elected Public and Staff Governors, we will also have Partner Governors. Among these will be representatives from NHS Norfolk and Waveney, but when the PCT ceases to exist we aim to have partner governors from each of the CCGs. We will provide you with more information about this as it progresses. Among our other Partner Governors are representatives from Norfolk County Council, Norfolk LiNK, and Voluntary Norfolk.

Having a fully engaged Council of Governors, representing the views of our Public and Staff Members and our Partners, will mean that our patients and colleagues can have their say in what our Trust does in the future. It is also key to our Trust being approved as a Foundation Trust (FT).

Ken Applegate, our **Chair**, commented: "Having a strong Membership which is represented by elected and engaged Governors is so important to the future of our Trust.

"It will mean that our patients and staff have even more say on the services our Trust provides, and how and where we provide them.

"In a former role, I was a Non-Executive Director at the local Mental Health NHS Foundation Trust and have witnessed the positive influence Governors and Members can have on local services.

"As Chair of our Trust I will also hold the role of Chair of the Council of Governors and I look forward to working closely with the elected representatives who will strive to help our Trust to develop and advance for the benefit of patients and colleagues."

We currently have a strong Membership of over 12,000 people. This consists of members of the public who have signed up to become Trust Members, as well as our staff.

Ahead of the elections, we will be holding a number of Roadshow events across the county which will give our Members the opportunity to hear more about what being a Governor means, the important role they will play, and the difference they can make to our Trust and patients.

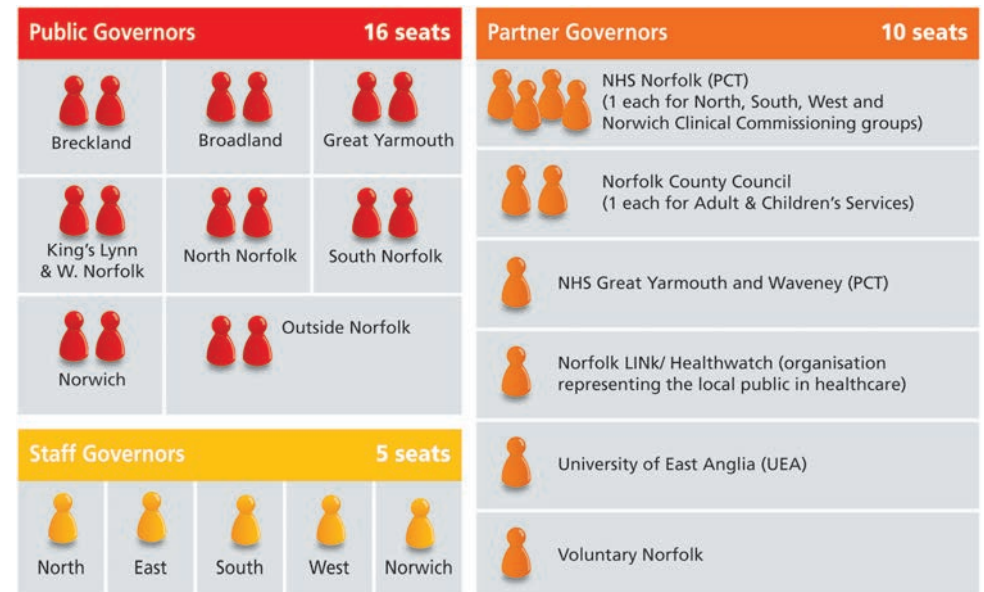
Governor elections for both the public and staff are expected to start in January 2013, subject to Secretary of State approval for our Trust's application to progress to being assessed by Monitor. We currently anticipate that we may be authorised to become an FT from around April 2013.

We continue to work towards becoming an FT, as it will mean we remain a key part of the local NHS but also

gain greater freedoms. For example, not only can we provide the services that our Members and Governors ask for, but we can invest any money that we make into improving local services.

We will also be able to establish a wider range of partnerships with other NHS Trusts, GPs, local councils, private companies or local and national charities, to improve the services we deliver to patients locally.

For more details about NCH&C Membership, and to sign up, go to: www.norfolkcommunityhealthandcare.nhs.uk/membership



Project to improve children's speech



Our Trust's Children's Speech and Language Therapy team has been commissioned to deliver a new project which aims to improve the communication skills of three to five-year-olds with speech, language and communication needs.

The 'Talk About' project is funded by a £0.5m grant from Norfolk County Council and is expected to run for two years (2012-2014). It will see nursery and playgroup staff receive further training from our expert Speech and Language Therapists.

Parents praise short breaks service

A survey has shown that 100% of parents and carers whose children use our residential short breaks services at Little Acorns, Gorleston, and Squirrels, Aylsham, are satisfied (70% 'very satisfied', 30% 'fairly satisfied').

After listening to parents and carers, staff have also developed some new initiatives including: six monthly full care package reviews involving parents; parent and carers forum; and the creation of privacy and dignity plans.

Palliative care staff offer help to Ethiopia

NCH&C's Priscilla Bacon Centre has twinned with Hospice Ethiopia in Addis Ababa to provide opportunities for staff to share experiences which can be used to improve services in both Africa and the UK.

Sharing our experience with Malawi



An innovative mentorship programme, linking our nurses with those in one of the world's poorest countries, recently saw some key guests visit our staff and patients.

The Director of Nursing for Malawi's Ministry of Health, Sheila Bandazi, and Registrar of Malawi NMC, Martha Mondwiwa, were among the guests hosted by nursing students and nursing mentors from NCH&C's Stroke Service and Community Nursing team, on their visit to Norfolk.

The visit was part of the School of Nursing Sciences, UEA Department for International Development (DFID) funded project to support and develop nurse education in Malawi. The University of East Anglia's School of Nursing Sciences is partnered with the School of Nursing in Malawi, and successfully bid for international aid funding to help the African republic develop its own mentorship scheme.

Becky receives 'Queen's Nurse' award

One of our Trust's Community Neurology Specialist Nurses was awarded the title of 'Queen's Nurse' in recognition of her long-standing commitment to delivering excellent community-based care to local patients.

Rebecca 'Becky' Hipkin, based at St James' Clinic, in King's Lynn was commended by the Queen's Nursing Institute, a community nurses' charity which aims to recognise nurses who have shown high standards of care and to encourage them to champion new ways of delivering innovative support to patients.

In her current role, Becky provides care to patients in west Norfolk who have Parkinson's Disease, Multiple Sclerosis, and Motor Neurone Disease. She visits patients in their own homes, as well as seeing them within community-based clinics in King's Lynn and Downham Market, where she helps them to manage their symptoms.



Garden party to celebrate specialist rehab service

A garden party has been organised by staff at NCH&C's Caroline House to thank local people for their support of the service.

The Trust's expert staff at the unit, based at Colman Hospital, Norwich, provide patients with specialist neurological rehabilitation. They carry out full assessments, deliver a programme of care which is tailored to patient's specific needs, and work with people to achieve their rehabilitation goals.

The multidisciplinary team includes doctors, rehabilitation nurses, physiotherapists, occupational therapists, speech and language therapists, psychologists and social workers.

At the invitation-only event, taking place on July 28, staff, patients and volunteers will recognise the important role that they all play in maintaining the unit's own high standards.

They will also hear from a special guest, Eddie Pleban, who will explain how staff at the unit helped him to recover after he had a serious stroke while on a plane and being told by some that he may have just two days to live.

Eddie's remarkable story saw him selected as one of Norfolk's Olympic torchbearers. You can read more about this on page 13.



Stepping out to take afternoon tea with the Queen at Sandringham

A number of our staff put on their best outfits, brushed up their curtsies and bows and took afternoon tea with the Her Majesty The Queen.

As part of the Diamond Jubilee celebrations our Trust was asked to nominate some of our staff to enjoy a 'Royal Appointment' and attend the Queen's Diamond Jubilee Garden Party, at the Royal Sandringham Estate last month (June).

Sixteen members of staff from different roles right across our Trust were put forward for this Royal honour by our Executive Directors' Team and joined around 4,000 other deserving people selected from local organisations on the day.

Chief Executive Michael Scott said: "It really was not an easy task to select just 16 people from our 3,000 plus excellent members of staff. But each of these individuals, or the team they represent, has really shone out for their achievements, commitments or for going the extra mile in recent months."

Queen honours Children's Services expert

A member of staff from our Trust will receive an MBE from Her Majesty the Queen after being included in this year's Birthday Honours list.



The honours aim to recognise people who have dedicated their lives to improving those of others. The list of latest recipients was announced in June and included Sian Larrington, one of our Children's Centre Service Managers, who will receive the acknowledgment for services to children.

She said: "I am absolutely delighted and really proud to accept the honour."

Sian is a former manager at our Bowthorpe, West Earlham and Costessey Children's Centre. While in charge there, Ofsted rated the Centre as 'Outstanding'.

Anna Morgan, our Director of Operations, added: "Sian is an incredibly worthy recipient of this recognition; she is utterly committed to helping local people and has played a key role in the development and delivery of children's services in Norfolk for a number of years."

In 2010, Debbie Chedghey, Manager of our Matrix Project, received an MBE for services to disadvantaged people.

Diary Dates

August

End of Life Care for Patients with Dementia

8 August, 9.30am - 4pm
Seminar Room, Dereham Hospital
Cost: £10.00

Booking: jennifer.vincent@nchc.nhs.uk
or call 01263 714966

NCH&C Public Board Meeting

29 August, 9.30am - 12noon
John Jarrold Suite, UEA Sportspark

September

Vascular and Diabetes Study Day

5 September, 8.30am - 5.30pm
John Innes Centre, Norwich

Booking: susan.flute@nchc.nhs.uk

Grand Round for Medical Professionals

Violence: Trauma Network, domestic violence, violence to staff

12 September, 12 noon - 2pm
Pelican Room, Fledglings,
Norwich Community Hospital

CPD Points: 2

Booking: debbie.blundell@nchc.nhs.uk

September

Learning Event: Negotiating the Minefield of Social Media

13 September, 1.30pm - 4.30pm
Holiday Inn, Norwich (South)

CPD Points: 3

Booking: lacy.lee@nchc.nhs.uk

Clinical Workshops in Palliative Care:

Alimentary Tract: Mouth care, nausea & vomiting, constipation & nutrition

19 September, 2pm - 4pm
Rowan Day Centre, Colman Hospital, Norwich
Cost: £10

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

NCH&C AGM, Public Board Meeting and Healthier Fair

26 September, 9am - 5pm
The Forum, Norwich

NCH&C Governor Elections Awareness Roadshow

26 September, early evening (times tbc)
The Forum, Norwich

Booking: Lesley.barlow@nchc.nhs.uk

October

End of life care for patients with dementia

3 October, 9.30am - 4pm
Seminar Room, Dereham Hospital
Cost: £10.00

Booking: jennifer.vincent@nchc.nhs.uk
or call 01263 714966

Infection Prevention and Control

Annual Conference

9 October, 8.45am - 4.30pm
Holiday Inn Norwich (North), Cromer Road,
Norwich NR6 6JA

Cost: £50 or £40 with SLA (see page 14)

Booking: beverley.ball@nchc.nhs.uk
or call 01603 776876

Clinical Workshops in Palliative Care:

Loss and Adjustment: Transitions, bereavement

17 October, 2pm - 4pm
Rowan Day Centre, Colman Hospital, Norwich
Cost: £10

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

NCH&C Public Board Meeting

31 October, 9.30am - 12 noon
NCH&C Head Office, Elliot House, Norwich

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