

Ten minutes with the Trust



DH's Deputy Chief Nurse praises joined up care

The Department of Health's Deputy Chief Nurse, Dr David Foster, has heard how NCH&C's integrated teams join up with services provided by partner organisations, such as GPs, Norfolk County Council, and acute hospitals. During a recent visit to one of the Trust's Sure Start Children's Centres, Dr Foster also heard how NCH&C's 'Early Implementer' status is enabling its staff to provide innovative and effective support to local families.



Partnership working key to Trust's Annual Priorities

NCH&C has issued details of its 2013/14 Annual Priorities and Quality Goals. These aim to support the Trust in the delivery of its vision to: 'improve the quality of people's lives, in their homes and community, by providing the best in integrated health and social care'. NCH&C's Chief Executive Michael Scott has reiterated the importance of working closely with GPs and other partners, which will enable the delivery of these objectives and vision, while improving the care available to local patients.



More community nurses caring for local patients

Latest figures show that there are currently 308 frontline community nurses caring for local patients, the highest level of the last four years. These nurses work in NCH&C's integrated teams alongside specialist clinicians, therapists, assistant practitioners and health care assistants. They deliver essential care to patients in their own homes and community clinics, which enables people to stay as healthy and independent as possible, while also reducing pressures on a primary care and acute services.



New 'yellow folders' to improve communication

Patients with progressive, life-limiting conditions will now be offered a new 'yellow folder', in which they can record their preferences about the type and location of care they would like to receive. The folders will improve communication between all health and social care staff, including Trust staff and GPs, and ensure patient's preferences can be respected. An information event will take place in May for clinicians interested in finding out more.



Supporting GPs to diagnose rare form of diabetes

Local GPs who suspect their patients may have a rare type of diabetes can now access expert help to make a diagnosis. In her role as Genetic Diabetes Nurse for East Anglia, Anita Murphy is working with GPs to identify patients who may have monogenic diabetes. This only affects 1 to 2% of the diabetic population. Correctly identifying this condition can help to change how it is treated and greatly improve a patient's quality of life.



Welcome to the latest edition of The GP Exchange!



“ As we enter the new financial year, we also enter a new era for the NHS. With CCGs taking over commissioning responsibilities and other bodies also coming into effect,

these are changeable and exciting times for everyone connected to the NHS.

Moving forward, it will almost certainly be a difficult environment for everybody as we all find our feet in this new world.

The standards we use to measure ‘quality’ are under ongoing consideration, particularly in light of the Francis Report, and we will all have to work under some tight financial pressures.

However, I can confirm that NCH&C enters this new period in a very strong position.

A priority for the Trust has always been to offer high-quality services which are safe and effective. Therefore, I am pleased that we have seen a significant reduction in the level of avoidable pressure ulcers and very low levels of falls and health care acquired infections during 2012/13. You can read a more about our performance on page 15.

With clinical effectiveness in mind, particularly in the context of Francis, I am also pleased to report that we currently have the highest level of community nurses since our integrated teams were formed in 2009/2010.

The increasing focus on community-based care means there are now more of these essential, expert clinicians providing compassionate care to your patients closer to their homes, which is taking the pressure off our primary and acute care partners. Read more on page 6.

Our commitment to compassionate care, as well as innovation and partnership working, is also behind our new Community Supportive Care Records, or ‘yellow folders’.

Created by our Trust, these patient-held records give people with end of life or palliative care needs the chance to record details on the type and location of care they would like to receive. This will ensure all health and care staff, including GPs, have a consistent record of patient’s wishes, ensuring choice, quality of life, and avoiding duplication. See page 9 for more.

We recently had a very positive visit from the DH, as the DH’s Deputy Chief Nurse, Dr David Foster, visited one of our children’s centres in April. Dr Foster heard how our health visitors and integrated teams work closely with GPs and other health and care experts to deliver an innovative and joined up service locally. Read more on page 5.

Our intention is to work even more closely with our partners, including GPs, and over the course of the coming year we will further progress our plans to integrate services more closely with Norfolk County Council. See page 7.

Another key objective this year is to improve the culture of supported and transparent decision making. It is very important that we support clinicians who make difficult decisions, and there a number of ways we can achieve this.

One of these is our quarterly Ground Round events, which bring together clinicians from across NCH&C and local GPs. The latest event focused on drug and alcohol abuse, which you can read about on page 7, where you can also see details about upcoming events too.

We have also started a Clinical Ethics Group, with support from the UEA medical school’s ethicist, which aims to support and work with the clinicians to make the right decisions in an open and transparent ways.

We are working on an Ethics and Values Framework to test and challenge initiatives, including efficiencies, to ensure quality, safety and fairness is integral to all of our plans.

I welcome input from primary care colleagues too, so please read more about this group’s work and how you can get involved on page 7. I look forward to hearing from you!

Very best wishes,

Dr Rosalyn Proops, Medical Director
Norfolk Community Health and Care NHS Trust

'We can make new-look NHS really benefit local patients'

NCH&C's Chief Executive Michael Scott has committed the Trust to working even more closely with Norfolk GPs, which will ensure further improvements can be made to services.



Michael said: "With CCGs taking over commissioning powers from this month, and the delivery of NHS care being increasingly focused on community settings, the 'new-look' NHS has brought increased responsibilities to both local GPs and NCH&C.

"This is why we thought it crucial to hold a number of meetings with local CCG representatives, so we could discuss how our roles fit together and how we can best work in partnership to benefit our patients. These recent meetings were a great success and well attended, which holds us in good stead for the coming year.

"Without doubt the NHS reforms have brought significant change and exciting opportunities. The possibility of further improving services for local patients cannot be missed. I truly believe that by working together, we can make the new-look NHS really benefit our patients.

"As a Trust whose services are based right in the heart of Norfolk's varied communities, we know first-hand what GPs are facing day-to-day. We understand the things that are working fantastically well, as well as those areas where we can work together to further improve.

"The new financial year also heralds the launch of our Trust's Annual Priorities and Quality Goals, which are designed to enable NCH&C to continue delivering on its vision. This is to: 'Improve the quality of people's lives, in their homes and community, by providing the best in integrated health and social care'.

"We, of course, have robust plans in place to deliver on each of these aims. However, I believe we are made stronger by working together. As such, I'd like to invite you to get in touch with the Trust if you would like to discuss how we can capitalise on the new opportunities afforded by the new NHS and how we can work together towards NCH&C's vision."



Michael Scott, Chief Executive

FT Update:

NCH&C's foundation trust (FT) application is currently awaiting consideration by the Trust Development Authority (TDA). We hope that this will take place by around autumn/winter and are working in very close partnership with the TDA to progress the application as soon as is appropriate.

2013/14 Annual Priorities

- 1 We will improve care for patients by implementing our Transformation Programme and by removing obstacles to delivering high quality care
- 2 We will improve the quality of care for our patients by achieving our Quality Goals
- 3 Our Trust aims to achieve sustainable financial health
- 4 We will listen more to our staff and show that we've made things better as a result
- 5 We intend to further improve relationships with those who buy our services (commissioners)
- 6 We will significantly develop our services through innovation and integration
- 7 We intend to make best use of our buildings so that they are fit for purpose, safe and compliant
- 8 Our Trust will add 'social value' to our wider community and be a sustainable organisation

2013/14 Quality Goals

- 1 We will continue to embed a culture of compassionate care, integrating the 6Cs - care; compassion; competence; communication; courage; commitment - and will act on learnings from the Francis Report
- 2 We will develop and promote our approach to clinical effectiveness
- 3 Our Trust will meet its Commissioning for Quality & Innovation (CQUIN) goals

Chief Executive celebrates 'Trust's best ever year'

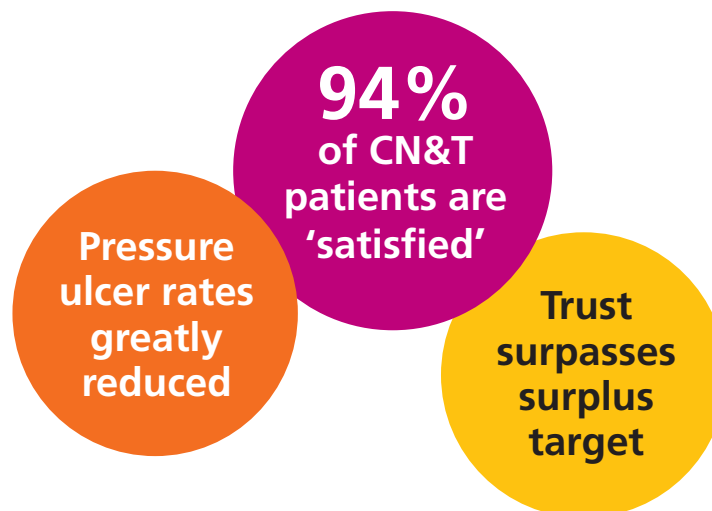
The last financial year was NCH&C's most successful, says the Trust's Chief Executive, Michael Scott.

"However you look at it, 2012/13 was NCH&C's best ever year; we hit key quality goals, kept our patients safe, developed our existing services, and put new ones in place to further expand the care on offer to people in and around our county.

"Our services really shone through as being exceptional, which was recognised by the people who know best, our patients. For example, nine-out-of-10 of our Community Nursing and Therapy service patients say they were satisfied with the care they receive.

"Accessibility of our services has also greatly improved. Today, almost every single patient, across each of our services, is seen within the 18 weeks target.

"Our new services, including our increased number of Sure Start Children's Centres and the Hospice at Home service in west Norfolk, also mean that even more patients are able to access NCH&C's expert care - from the start to the end of their lives.



"A key objective for the year was to reduce levels of patient harm and I am delighted to report that we have seen a drastic reduction in the level of avoidable pressure ulcers seen locally.

"We have had just one pressure ulcer in our inpatient units in the last four months. There is still more to be done to maintain this and reduce rates in the community, but we are on the right track and have plans in place to make pressure ulcers a thing of the past.

"Similarly, we have seen very low levels of falls and health care acquired infections, which all contribute to our goal of delivering harm-free care. You can see our year-end performance figures on page 15.

"Thanks to the hard work of the Trust's staff and the procedures we have in place, it isn't just our patients who are in a healthy position; our finances are too. We finished 2012/13 in the black and even delivered a greater surplus than we had initially expected. This good financial management keeps our services stable and enables us to invest into enhancing them further in the future.

"The huge strides made by the Trust is significantly down to our excellent staff. So I am delighted that many of these colleagues deservedly picked up recognition from a number of external bodies, which saw them named 'NHS Heroes', 'Queen's Nurses', and 'Health Mentor'.

"The bottom line is that NCH&C is an organisation that delivers, and we will continue to provide our unique brand of high-quality, community-based care to Norfolk's patients throughout 2013/14.

"These are exciting times for the NHS and I look forward to working with you in the new financial year and further developing services locally."

Michael Scott
Chief Executive

Read more about NCH&C's 2013/14 goals on page 3.

New appointment to further ensure clinical quality



Patients can be further assured of the clinical quality of NCH&C's services following the appointment to a new role.

Marcia Perry is to take up the role of Deputy Director of Nursing, Quality and Operations and will join the Trust in May.

In this position, Marcia will be responsible for providing strategic leadership to NCH&C's nursing, allied health professionals, and health care assistant staff.

She will also provide assurance of clinical quality to the Trust's management, to ensure NCH&C is able to continue delivering safe and effective services. This will see Marcia focusing on introducing new initiatives and procedures, based on learnings from the Francis Report.

She will also ensure the Trust delivers on the Chief Nursing Officer's 6Cs, which are: care, compassion, competence, communication, courage, and commitment.

Marcia brings with her a great deal of expertise and experience to the role. She comes to Norfolk from Wye Valley NHS Trust where she is the Service Unit Manager for Integrated Family Health Services.

She has also worked at the Department of Health on a national immunisation programme.

Deputy Chief Nurse describes NCH&C staff as 'creative, committed and professional'



The Department of Health's Deputy Chief Nurse Dr David Foster recently paid a visit to some of NCH&C's Children's Services staff and praised their innovative and joined-up approach.

During his visit on April 4 to Kingsway Sure Start Children's Centre, in Thetford, he heard how NCH&C's integrated teams join up with services provided by partner organisations, such as GPs, Norfolk County Council, and acute hospitals.

Dr Foster, who is a registered nurse and midwife, was also told how the Trust was selected by DH as a Health Visitor Early Implementer Site in 2011.

The status means NCH&C staff are already delivering a new-look Health Visitor Service to families in Norfolk, ahead of the rollout of the programme elsewhere in the country by 2015.

The Trust's health visitors are also now able to spend even more time caring for local families, thanks to NCH&C's £450k investment into mobile working technology.

New Toughbooks, which are hardwearing briefcase-like laptops with integrated mobile connectivity, have now been given to 130 health visitors.

The kit allows the clinicians to securely access SystemOne remotely, reducing the need for staff to travel back to their base to complete paperwork. This gives them more time with families and enables them to update patient records immediately.

The Trust has also recently increased the number of health visitors working in the county, enabling teams to increase the quantity and quality of visits offered to families and improving outcomes for children.

Dr Foster commented: "It was such a fantastic opportunity for me to learn, understand the opportunities and challenges and to be able to mix with such creative, committed and professional practitioners.

"It was so inspiring to see how innovative people are being despite the constant pressures and the exemplars I saw yesterday will help people not reinvent the wheel."

During his visit, Dr Foster also shadowed Gill Wiltshire, a Health Visitor from Thetford, on a visit to a patient's home.

She said: "As Thetford is right on the border between Norfolk and Suffolk, our team is a great example of how it is possible to not only join up with other local services but also those from other counties."

Patients benefit from peak level of community nurses

There are currently more frontline community nurses caring for local patients than at any point in the last four years.



Latest employment figures show that there are now 308 general community nurses in post, the highest level since the integrated teams of community nurses and therapists were formed in 2009/2010.

NCH&C's integrated teams of clinicians – including community matrons, nurses, therapists, assistant practitioners and health care assistants – deliver essential care to patients in their own homes and community clinics. This enables people to stay as healthy and independent as possible, while also reducing pressures on a primary care and acute services.

There has been a dramatic rise in the number of community nurses since the end of 2011. In October 2011, there were 225 posts for registered community nurses; but only 197 staff in post.

However, following a recruitment campaign, plus the creation of new roles, such as case managers, by October 2012 NCH&C had increased the number of community nurses in post to 308. This represents a real-term increase of 56%.

These figures do not include the Trust's range of specialist nurses, health visitors, school nurses, assistants, or therapists.

Anna Morgan, NCH&C's Director of Nursing, Quality, and Operations, commented: "This is fantastic news for patients, as our greater workforce ensures the prompt and effective delivery of this essential service to Norfolk's ageing and widely-distributed population.

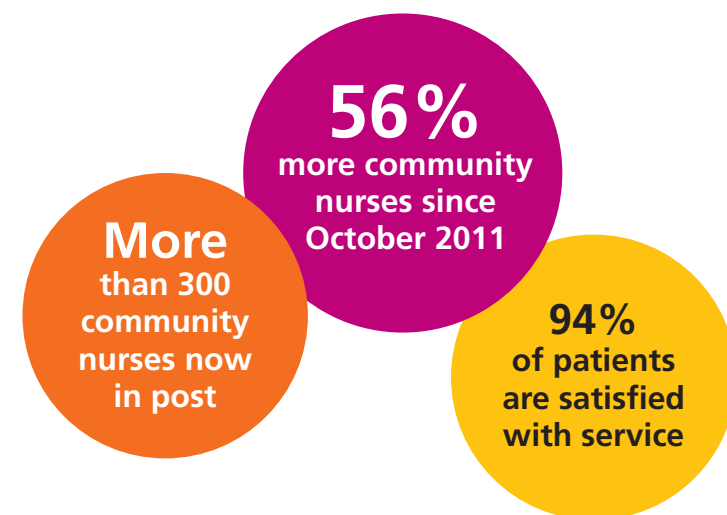
"However, as the focus on the delivery of NHS care shifts from acute settings to the community, our frontline staff are set to face greater pressures.

"As such, it is important that the Trust and its commissioners, including local CCGs, continue to discuss the ongoing demands on the service to ensure we have enough staff on the ground to continue delivering a safe and effective service, which meets the needs of local patients and the requirements of commissioning bodies."

In the last year, NCH&C has relaunched the CN&T service after a new specification was developed in partnership with the local primary care trust and GPs.

It is a service which is highly rated by patients; feedback shows that nine-out-of-10 patients are satisfied with the service they receive, with 85% of those saying they are 'very satisfied'.

Almost all (99%) feel safe and professionally cared for, while 92% are as involved in decisions about their care as they wanted to be.



FT Members from your communities inspect inpatient units

Local people from Norfolk's diverse communities have signed up to inspect NCH&C's inpatient units.

This means your patients have a real voice in scoring healthcare facilities and driving through further improvements.

Almost 30 of NCH&C's FT Members and prospective Governors new PLACE (Patient-Led Assessment of the Care Environment) annual assessment scheme, which is part of a new Department of Health rating system.

It replaces the Patient Environment Action Team (PEAT) inspections.

Among those who have volunteered, there is an ex-NHS Ward Sister, a LINK member, and a building expert.

Together with three staff from NCH&C's Estates, Facilities and Nursing teams, they will visit nine of the Trust's sites between April and the end of June to rate the food, cleanliness, environment and levels of privacy and dignity.

An action plan will be drawn up and a list of priority areas agreed so NCH&C can target its spending on improvements which will make the biggest difference to patients.

The findings will also be submitted to the NHS Commissioning Board and published nationally.

Clinicians discuss ethical care

NCH&C is working towards developing a culture of support and transparent decision making for clinicians.

To support this, a Clinical Ethics Group has been formed, which GPs are welcome to get involved with. Existing members include NCH&C's Medical Director, Dr Rosalyn Proops, our chaplain, members of the Trust's staff, a non-executive director, and the Lecturer in Ethics from the UEA medical school.

The group is developing an Ethics and Values Framework which will ensure the quality and ethical standards of NCH&C's services are maintained. Read more about this on page 2.

The group is also set to shortly meet with colleagues from a local acute Trust. They will discuss how to mitigate any risks to the delivery of compassionate care to frail and elderly patients with dementia, within both hospital and community settings.

In addition, a number of local GPs and clinicians recently discussed the impact that alcohol and drug abuse can have on people's lives, as well as the support in place to help them.

The topic was discussed by attendees at NCH&C's latest Grand Round for Clinical Professionals in March. Upcoming Grand Round events will focus on academic liaison and research, and safeguarding adults and children. See page 17 for details.

Contact point:

- To get involved, contact the Executive Assistant to Dr Proops: debbie.blundell@nchc.nhs.uk

Steps taken towards integration of services

NCH&C's plans to work even more closely with Norfolk County Council (NCC) in the delivery of high-quality adult health and social care continue to progress.

The approach builds on the Trust's previous and ongoing integration work, including its participation in the Integrated Care Organisation (ICO) pilots. These were very successful in bringing health and social care teams together, wrapped around individual GP practices.

More recently, integration has had an emphasis on co-location and co-management opportunities. For example, in the west of the county there is a single Assistant Director, Jo Fisher, who manages both health and social care provider staff.

The utilisation of this approach in other parts of the county, as well as other options to further integrate services, are now being considered by the Trust, its staff, and NCC.

There is great support for integrating services, which is shown to improve outcomes for patients and increase efficiencies.

Michael Scott, NCH&C's CEO, said: "We have a rich history of working closely with our partners in the delivery of services which meet the holistic needs of local people.

"We are now in a position to look at the next stage of this integration process, which we expect will bring further benefits to our patients, our staff, and the wider health and care economy."

The latest from NCH&C's Boardroom



Ken Applegate, NCH&C's Chair, shares some of the recent headline discussions from the Trust's monthly Board meetings.

Board hears Patient's Voice

Each month, NCH&C's Board invites a patient or staff representative to hear their experiences of using the Trust's services

In January, Canon Mair Talbot, NCH&C's Chaplaincy Lead, attended to explain how the spiritual well-being of patients is often supported by the chaplaincy team. She outlined how the team helps to improve patients' emotional and mental wellbeing, which had improved rehabilitation and outcomes in a number of cases.

At another meeting, a newly qualified health visitor and her mentor told the Board how local families were benefiting from the new training for health visitors. They explained that the mentoring system of training student health visitors meant that the service no longer saw staff train up and move on. The graduating staff were also more experienced and confident, which benefits local families.

Quality

The Board recently heard that the number of complaints received by the Trust in December was just seven in total. They discussed favourable comments

made by patients responding to service Net Promoter surveys, including one stating that it had been the 'best experience I've had in the NHS, ever...'

However, the Board queried any delays in responding quickly to outstanding complaints to ensure people had a positive experience with the Trust, even if they had registered a complaint.

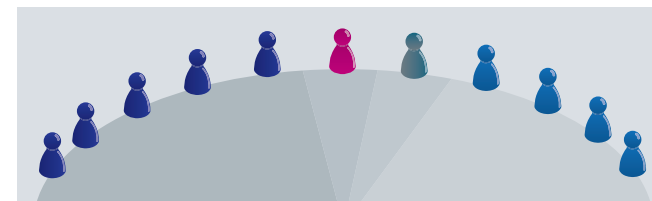
Operations

At their meeting in January, Board heard how there had recently been an increase in referrals of around 40% in the Norwich Locality's CN&T service. While this had put a strain on services, the Board was assured that patients were being seen as promptly as possible, and that safety and quality was maintained at all times. The Board also heard that recruitment to any vacancies was underway which would help to address the increased demand.

Finances

At a recent Board meeting, NCH&C's Board agreed to revise the originally anticipated year-end surplus from £1.1m to £2.6m.

The Trust's Deputy Board Chair, Alex Robinson, was given assurances that this surplus increase was not caused by vacancies or financial controls which could threaten the quality of our services. It was explained that this was being delivered, in part, by an increase in income to the Trust in-year.



Board meets with CCG leads

Directors from NCH&C recently met with the heads of the newly formed CCGs. Ken said: "We were able to articulate where we are now as a Trust, and where we want to be, with their support."

Trust urged to push on with integration

During the private session of the March Board meeting, Lady Joyce Hopwood, Chair of Norfolk Older People's Strategic Partnership, urged the Board to proceed with plans to integrate local health and social care services.

She said: "Your many patients will be hugely grateful for it. Your staff's work will also be simplified by being alongside their diverse colleagues and sharing information in a way which can lead to more informed treatment."

Resource point:

- You can download Board papers from NCH&C's website at: www.norfolkcommunityhealthandcare.nhs.uk/About-us/Who-we-are/Meet-the-board/board-papers.htm

Trust at the forefront of delivering joined-up and improved palliative care

New 'yellow folders' to promote patient choice

Patients with progressive, life-limiting conditions will soon be offered a new pack to help them to record their preferences about their care.

The Community Supportive Care Records, also known as 'yellow folders', have been created by NCH&C. They will be given to patients to help them consider the type of care they want to receive and the location in which it should be delivered.

The folders aim to improve communication between clinicians, ensuring continuity of service and the delivery of care which meets each patient's care preferences.

Jenny Vincent, NCH&C's Palliative Care Coordinator, has led the development of the patient-held records and said: "The Yellow Folders aim to ensure patient's care is focused on comfort and quality of life.

"Making the use of these recognisable folders common place will improve communication between all health and social care staff, ensure they have access to a clear record of their patient's preferences, and means patients don't have to repeat their wishes over and over again."

The yellow folders are not to replace community nursing notes, but instead give patients the opportunity to record anything they feel is important, ensuring patient choice is safeguarded.

The records include principals from the Gold Standards Framework, Advance Care Planning, and PEPSI COLA chart.

Clinicians can find out more at an information session on **May 7 (3 - 4.30pm)** at: **The Costessey Centre, Longwater Lane, Old Costessey, Norwich, NR8 5AH.**

Contact point:

- More information and to book a place at the information session, call Jenny Vincent on 01263 714966

Trust pledges to further improve palliative care

NCH&C has made a commitment to further improve the palliative care on offer to local patients. The pledge was made alongside a number of other local health and care organisations at a recent event.



The palliative care summit was held last month (March) and was attended by representatives from a number of public, private and voluntary organisations, including CCGs, Norfolk County Council, the ambulance service, Age UK, and the East Anglia Children's Hospices.

Attendees came up with three main focus points, which were:

- To improve information sharing
- Ensure 24/7 access to specialist advice
- Bring together all types of providers to ensure joined up working

NCH&C already has a number of initiatives in place to improve care on offer to patients, including the new Community Supportive Care Records. See the adjacent article on this page.

The Trust's expert staff also provide a number of training courses to health and care colleagues, including a course specifically for GPs. These are detailed in NCH&C's PACE (Palliative Care Education) Prospectus.

NCH&C's Specialist Palliative Care team at Priscilla Bacon Centre, in Norwich, also provide an advice line for professionals.

Resource point:

- Specialist Palliative Care Advice Line for Professionals: 07699 734610
- Copies of the Pace Prospectus have been distributed to each Practice in Norfolk. You can also download a copy here: www.pacenorfolk.co.uk

Specialist can help GPs to diagnose rare form of diabetes



GPs who suspect their patients may have a rare type of diabetes can now access expert help to make a diagnosis after one of NCH&C's nurses was appointed to a new specialist role.

Anita Murphy, who has been Diabetes Specialist Nurse with NCH&C since January 2010, has taken on the additional role of Genetic Diabetes Nurse for East Anglia.

As well as providing education to her clinical colleagues, she is working with GPs to identify patients who may have monogenic diabetes, which is also known as MODY, so that their condition can be managed more effectively.

"MODY, which stands for maturity-onset diabetes of the young, is very rare and only affects 1 to 2% of the diabetic population," said Anita. "Yet 90% of those people are misdiagnosed as having type 1 or 2 diabetes.

"We can make significant changes to their treatment if they have the correct diagnosis, and can even stop insulin therapy in some cases. This can make an enormous difference to the patient as they no longer have to inject four times a day.

Patients who have MODY tend to:

- Have been diagnosed before the age of 25
- Not be insulin dependent
- Have a parent with diabetes

Referral point:

- To make a referral or organise an education session at your practice: anita.murphy@nchc.nhs.uk or 07833 294 670

Resource point:

- There is a MODY risk calculator at www.diabetesgenes.org, which GPs can use before making a referral to Anita

GPs invited to discuss how Norfolk can learn from Francis Report

Local GPs and staff from NCH&C are being encouraged to attend one of a number of workshops which have been arranged in light of the Francis Report.

The workshops aim to ensure the learnings from the Report can be implemented in our county, so events similar to those in Mid Staffs can never occur closer to home.

They will be led by Anna Morgan, NCH&C's Director of Nursing, Quality and Operations, and the Trust's CEO, Michael Scott.

Anna said: "We have already done a tremendous amount to ensure that our Values and Behaviour Framework are included in our day to day working, including through recruitment, appraisals and, most recently, our 'patient centric' mandatory training.

"However, we are keen to build on this good work and close working between our staff and our partners is central to achieving this."

Attendees will also be invited to consider how they can help the Trust to deliver its Quality Goals (see page 3) and meet the Chief Nursing Officer's 6Cs, which are: care, compassion, courage, communication, competency and commitment.

Francis Report workshops will be held:

- Wednesday, May 8 (1.30pm - 4.30pm)
Poringland Community Centre, Overton's Way, Poringland, NR14 7WB
- Monday, May 13 (9.30 am - 12.30pm)
Park View Resource Centre, London Road, King's Lynn, PE30 5QD
- Monday, July 1 (1.30 am - 4.30pm)
Regency Room, Assembly Rooms, Market Place, Swaffham, PE37 7QH
- Wednesday, July 24 (1.30 am - 4.30pm)
Aylsham Town Hall, Market Place, Aylsham, NR11 6EL

Referral point:

- lacy.lee@nchc.nhs.uk

Change to way children are allocated health visiting services

All GPs should be aware that the method of allocating a child to one of NCH&C's expert health visiting teams has now changed.

With immediate effect, the child's postcode will now determine which Children's Centre Cluster they reside in and which of NCH&C's expert Health Visiting teams will be responsible for delivering services to them.

This comes after NCH&C's Health Visiting Service caseloads were moved into units on SystmOne, which are inline with local children's centres.

We have already sent all GPs a database which identifies how postcodes are allocated to Children's Centre Clusters.

In order to ensure tasks are allocated to the correct team, it is of the utmost importance that GPs use this database to match the child's postcode to the correct cluster.

Please be aware that the Children's Health Services Unit is now only used by NCH&C's Disability, Additional and Specialist Healthcare (DASH) pathway. Therefore, please do not use this unit for children who require services from the Healthy Child Pathway.

This change comes as part of NCH&C's SystmOne Optimisation Project, which aims to improve and promote the integration of Community Health Services with Children's Centres and also supports taking forward the Healthy Child Programme.

Contact point:

If you have any questions about this change, please contact us immediately for clarification.

- Chris Barnett, Locality Manager, North: 07786430085
- Catherine Knox, Locality Manager City and South: 07771626126

Pledge to make Norwich a 'Healthy City'

NCH&C has made a number of pledges which aim to improve the health and wellbeing of people in and around Norwich.

The pledges are in support of Norwich's new 'Healthy City' status, which was awarded by the World Health Organisation after an application was made by Norwich CCG and Norwich City Council.

The status means the city is now part of a worldwide network committed to improving health in urban areas and will see local organisations working together to tackle the range of factors which influence people's health.

Ken Applegate, NCH&C's Chair, attended the launch of the initiative in February and said: "As an NHS Trust we are always working towards improving the health of local people, so we are delighted to sign up to support the Healthy Norwich initiative. We look forward to working closely with our partners in delivering on each of these commitments."

Some of NCH&C's pledges:



Physical Activity

- Encourage our employees to bike or walk to work
- Create a lunchtime walking group



Diet, nutrition and healthy weight

- Educate our staff on the importance of eating healthily
- Work with schools to educate about healthy diets



Smoking, alcohol and drug misuse

- Support vulnerable people in the community



Health screening and prevention

- Restrict smoking on our organisation's premises
- Fund annual flu vaccinations for staff



Specialist service for vulnerable people



The vital work carried out by a specialist team which provides

NHS healthcare for vulnerable groups has been showcased at an international conference.

Kevin Hanner, Operations Manager of NCH&C's City Reach Health Service, recently joined forces with GP Heidi Gure-Klinke to address an International Conference on Homelessness, Health and Inclusion, which was held in London, in February.

They explained how City Reach's team of GPs, nurses, health visitors and support workers provide care to people who find it difficult to visit mainstream primary care services, concentrating at the conference specifically on services for homeless people.

The conference was organised to explore options for commissioning care for vulnerable groups. It is hoped feedback will be used to shape future Department of Health guidance.

The team also provides treatment for minor illness or injuries, immunisations, sexual health screening, advice on mental health, and onward referrals. Their clients include people who are at risk of becoming homeless, sex workers, ex-offenders, substance mis-users, and asylum seekers.

Referral information:

- www.norfolkcommunityhealthandcare.nhs.uk/The-care-we-offer/Service-search/city-reach.htm

Innovative project to reduce rate of falls

Expert staff from NCH&C have created an innovative new project which aims to further reduce the risk of patients suffering a fall.

'Mind Your Step' will initially run as a one-year pilot programme in south Norfolk, with GPs in the locality able to refer patients who are potentially at risk of a fall. The Trust's expert Falls Service will then triage appropriate patients to the project and offer further assessment if required.

The project aims to develop the exercise component of the existing Falls Pathway. It is to be delivered in partnership between NCH&C, Active Norfolk, and an organisation specialising in exercise classes. It is funded by Norfolk County Council's Living Well in the Community Fund.

The eight-week course focuses on key exercises which will improve people's strength, balance and confidence. The group exercise classes are based on the 'Otago' model of strength and balance exercises, which is proven to reduce falls.

This will enhance the benefits of primary prevention to patients, with the first participants set to begin their course from the end of April.

Referral point:

- This pilot is currently available in south Norfolk only. Referrals should be made to NCH&C's Falls Service for triage, via the Single Point of Assessment: 01953 609409.

Specialist training to help children 'Talk About'

Expert staff from NCH&C are now delivering specialist training to early years practitioners to help them identify and support children aged three to five with communication difficulties.



The two-year Talk About project has been commissioned by Norfolk County Council and is being led by NCH&C's Children's Speech and Language Therapy Team.

The Trust's experienced staff are now delivering face-to-face courses to school-based staff, as well as those at nurseries and playgroups.

The team is also in the process of developing an online resource to back up the training. Their website will feature information, latest advice, and tips, as well as video examples of good practice.

As well as being accessible to early years practitioners, this online resource will be available to other clinicians, including GPs, families of children with communication difficulties, and members of the public.

Talk About follows on from the successful 'Every Child a Talker' project which was delivered during 2010/11.

Apprenticeships are 'growing tomorrow's dedicated workforce'

NCH&C's Chief Executive, Michael Scott, has reiterated the Trust's support for apprenticeships, saying they 'provide opportunities to bring through future NHS staff who are enthusiastic and dedicated'.



Michael said: "Apprenticeships are a key element of our offer significant benefits and opportunities to both individuals and our Trust.

"The apprentice HCAs I shadowed explained how their experiences had validated their passion for working with patients and one informed me of her intention to pursue a career in health and care after her apprenticeship was completed.



"In this respect, apprenticeships are enabling us to 'grow our own' workforce for the future, bringing through enthusiastic and dedicated health and care staff."

NCH&C is part of the successful Norfolk and Waveney NHS Apprenticeship Programme, which brings together partners from across the local NHS to develop and promote apprenticeship opportunities.

He made the comments after spending an afternoon alongside two apprentice HCAs at Norwich Community Hospital's Alder Ward, where he found out first-hand what their role entails.

He shadowed the duo as they made beds, carried out housekeeping tasks, handed out meals, helped to feed patients and assisted with personal care and vital rehabilitation.

The shadowing was organised to celebrate National Apprenticeship Week in March and saw Michael swap his suit and tie for a healthcare assistant (HCA) uniform.



'Open door' tour at award-winning care complex



A number of local dignitaries and representatives from Norfolk's media have attended a special 'open door' event at an innovative care complex in north Norfolk.

During the tour in March, members of staff from NCH&C, as well as those from a number of partners, showcased the services and facilities available at St Michael's Care Complex, in Aylsham.

As part of the complex, an NCH&C-run health centre offers a variety of NHS specialist community services, including: podiatry, speech and language therapy and continence services.

Michael Scott, NCH&C's Chief Executive, said: "This visionary complex brings together a comprehensive range of services which will really benefit local people. It puts key services right in the heart of the community, making them easier to access than ever before."

Other units forming the complex include: The ACT (Aylsham Care Trust) Centre, which provides a range of social care activities; St Michael's Court - an 86-bed care home; Green Lane View - a 30-apartment housing scheme which provides independent living with 24-hour care; and a pharmacy.

The innovative complex was developed in partnership by NCH&C, ACT, Wherry Housing Association, NorseCare and Runwood Homes. It is supported by Norfolk County Council and Broadland District Council.

Contact point:

- Aylsham Health Centre, Off Cawston Road, NR11 6YA

Health day for people with learning disabilities

An information day designed to give people with learning disabilities (LD) the chance to find out more about healthy living has been hailed a success.

The event was organised by the Health Focus Group, which includes NCH&C and a number of partners, and took place in Great Yarmouth at the end of February.

It gave people the chance to speak to health and care experts about the services available locally and pick up tips on following a healthy lifestyle.

Staff from the east Norfolk team of the Joint Specialist Community Learning Disabilities Service, which is run in partnership between NCH&C and Norfolk County Council, attended the event.

The service has teams in each of Norfolk's localities, with multidisciplinary staff working with people with LD who are over 18.

The teams provide: specialist community health services for individuals with LD; assessment, advice and support on health, lifestyle, mobility and communication needs; support with personal budgets; and help with accessing other services, such as health and care, housing, and benefits.

NCH&C also has a number of services in place for people with LD who are under 18, including the Starfish Service.

As well as dealing with health-related issues, the Starfish Team's specialist learning disability nurses, clinical psychologists and family support workers can provide help and information related to ADHD, autism and psychology.

Referral information:

- Joint Specialist Community Learning Disabilities Teams: www.knowledgenorfolk.nhs.uk/heron_km/organisationdetails.aspx?id=20724
- Starfish: www.norfolkcommunityhealthandcare.nhs.uk/The-care-we-offer/Service-search/learning-disabilities-child-and-adolescent-service.htm

Year-end and quarterly performance

The following tables detail NCH&C's performance for 2012/13 against a small number of key indicators. As well as showing those that meet the expectations of our customers and stakeholders, including CCG commissioners, they also highlight areas where our Trust is at risk of missing a target for the financial year.

Achieved 2012/13 target

Indicator	Target or upper ceiling	2012/13 performance	Quarter 4 performance
MRSA Screening - elective patients	100% of patients having planned surgery screened for MRSA	100%	100%
Clostridium difficile	No more than nine cases	3 cases	2 cases
Injurious falls	Number of falls resulting in harm per 1,000 Occupied Bed Days below 4.0	3.41	3.99
Venous Thromboembolism (VTE) assessments	95% or more admissions having a VTE assessment (non-admitted patients)	96.5%*	96.4%*
18 week wait referral to treatment	95% patients receiving definitive treatment within 18 weeks of referral	98.2%	99.3%
Health visiting	95% or more of mothers receiving a New Birth Visit within 28 days of birth	97.9%	97.9%

At risk of missing 2012/13 target

Indicator	Target or upper ceiling	2012/13 performance	Quarter 4 performance
Community equipment store (CES) response within seven days	99% or more items delivered within seven days of receipt of a referral	98.4%*	97.2%*

* Data to end of February

Commentary

CES - The vast majority of items were delivered within the target period of one week. Those provided outside of this period were due to the items being either out of stock or being linked to items which were out of stock.

Missed 2012/13 target

Indicator	Target or upper ceiling	2012/13 performance	Quarter 4 performance
MRSA bacteraemia	No more than one case	2 cases	0 cases
Smoking cessation	On or above cumulative year to date trajectory against annual target for successful quits of 2,000	1,434*	
Delayed transfers of care	No more than 3.7% of beds occupied by patients whose discharge is delayed for non-medical reasons	5.4%	5.7%

Commentary

MRSA - Two cases early in 2012/13, but procedures meant no further cases seen.

Smoking Cessation - Quit rates increased at end of 2012/13 and new initiatives in place for 2013/14.

Delayed transfers of care - Delays due to patients exercising choice of placements, plus waits for Continuing Healthcare Assessments.

Chief Executive assesses 2012/13 and 2013/14

Commenting on the Trust's performance, NCH&C's Chief Executive Michael Scott, says 2012/13 saw NCH&C performing well, but the best is yet to come.



“I am delighted by NCH&C's performance during the last financial year. The Trust and its staff have met some key targets related to patient safety, clinical quality, and service access. You can read more about our recent achievements on page 4.

“It is of course disappointing to have missed a small number of targets, but there are some real positives to take from these and we will further improve in 2013/14.

“For example, the procedures we put in place after recording two MRSA cases in early 2012/13 successfully ensured no more cases were seen for the rest of the year. I expect the Trust to continue in this vein in the new financial year.

“Similarly, the rate at which our Smokefree Norfolk service helped people to quit increased throughout the year. The team is set to continue this good work in 2013/14, with new materials and further support available to local people to quit.

“Looking to the new financial year, the Trust is fully geared towards the continued delivery of safe and effective services and we look forward to working towards these goals alongside our partners, including local GPs and CCGs.

“Among our Annual Priorities and Quality Goals are pledges to actively remove any obstacles to the delivery of high quality care, to embed a culture of compassionate care, and to further improve relationships with those who buy our services, including CCGs.

“We are fully committed to delivering each of our targets, which we will achieve alongside Norfolk's GPs and our other partners.”

Resource point:

- NCH&C's Annual Priorities and Quality Goals can be found on page 3.

Targets for 2013/14 - Safety

Indicator	Target or upper ceiling
MRSA bacteraemia	No more than one case
Clostridium difficile	No more than five cases
Injurious falls	Number of falls resulting in harm per 1,000 Occupied Bed Days below 4.0
Venous Thromboembolism (VTE) assessments	95% or more admissions having a VTE assessment

Targets for 2013/14 - Quality

Indicator	Target or upper ceiling
Delayed transfers of care	No more than 3.7% of beds occupied by patients whose discharge is delayed for non-medical reasons
18 week wait referral to treatment	95% patients receiving definitive treatment within 18 weeks of referral (non-admitted patients)
Health visiting	95% or more of mothers receiving a New Birth Visit within 28 days of birth
Smoking cessation	On or above cumulative year to date trajectory against annual target for successful quits of 2,000

Diary Dates

April

Clinical Workshops in Palliative Care Communication: assessments, strategies and difficult conversations

24 April 2013, 2pm - 4pm
Rowan Day Centre, Colman Hospital
Norwich, NR2 2PJ
Cost: £10
Booking: pace@nchc.nhs.uk or 01603 255738

NCH&C Public Board Meeting

24 April 2013, 9.30am - 12noon
The Cromer Room, Elliot House
Norwich, NR1 3FR

May

Dying Matters Awareness Week

13-19 May 2013

International Nurses Day

14 May 2013

Clinical Workshops in Palliative Care Pain: assessment, tools, breakthrough pain

22 May 2013, 2pm - 4pm
Rowan Day Centre, Colman Hospital
Norwich, NR2 2PJ
Cost: £10
Booking: pace@nchc.nhs.uk or 01603 255738

NCH&C Public Board Meeting

29 May 2013, 9.30am - 12noon
Park View Resource Centre,
London Road, King's Lynn,
PE30 5QH

June

Grand Round for Clinical Professionals: Research in NCH&C

12 June 2013, 12noon - 2pm
The Pelican Room, Fledglings,
Norwich Community Hospital, NR2 3TU
CPD points: 2
Booking: debbie.blundell@nchc.nhs.uk

Clinical Workshops in Palliative Care Psychological: the psychology of illness and assessment of distress

19 June 2013, 2pm - 4pm
Rowan Day Centre, Colman Hospital,
Norwich, NR2 2PJ
Cost: £10
Booking: pace@nchc.nhs.uk or 01603 255738

NCH&C Public Board Meeting

26 June 2013, 9.30am - 12pm
NCH&C Head Office, Elliot House,
Norwich, NR1 3FR



July

Clinical Workshops in Palliative Care Alimentary Tract: mouth care, nausea and vomiting, constipation, nutrition

17 July 2013 2013, 2pm - 4pm
Rowan Day Centre, Colman Hospital
Norwich, NR2 2PJ
Cost: £10
Booking: pace@nchc.nhs.uk or 01603 255738

NCH&C Public Board Meeting

31 July 2013, 9.30am - 12pm
Norfolk Room, Breckland Council,
Elizabeth House,
Dereham NR19 1EE

Resource point:

- Board papers can be accessed on our Trust website one week before each Board meeting at: www.norfolkcommunityhealthandcare.nhs.uk/About-us/Who-we-are/Meet-the-board/about-our-board

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.

Norwich



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