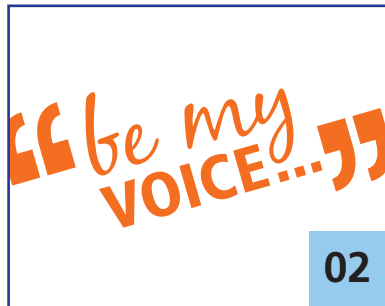


Ten minutes with the Trust



Very first Governor Elections are coming

We are now able to hold our very first Governor Elections, which will see our Council of Governors formed, consisting of 24 Partner, Public and Staff Governors. Among the six Partner Governors will be Dr Graham Clark, Chet Valley Medical Practice, who has been selected as the CCG representative. Dr Clark will be responsible for feeding back the views of the CCGs and GPs to help inform the decisions we make about the development of our services.



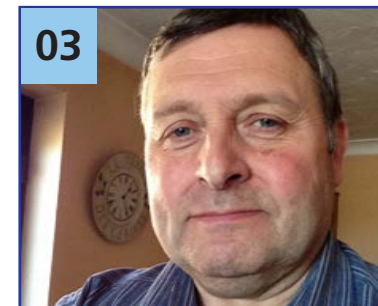
Community-based care is key for patients

Our Chief Executive, Michael Scott, has reiterated the key role of community-based NHS services and the importance of joining up teams to ensure patients' total needs are met. Across England, as well as Norfolk, patients are clear that they want more and better care provided in their local communities and within their own homes. Our input means that we can reduce pressure on secondary and emergency services, freeing up resources.



More care for children closer to home

Children across our county will soon be able to access even more care in, or closer to, their homes. The move aims to reduce the need for children to attend acute hospitals by offering the care they need in community settings. This will further improve service accessibility and continuity of care. This development comes following investment of around £225k by local Clinical Commissioning Groups into our existing Children's Community Nursing Service.



Associate Medical Director in post

Our Trust's Medical Directorate has been boosted by the recruitment of a very experienced clinician to the role of Associate Medical Director. Dr Chris Carney joined our Trust in the spring and is helping to ensure that our staff comply with regulatory and revalidation requirements and are able to continue to offer safe and effective care. He has recently been practicing as a part-time GP in south Norfolk and as a triage GP at South Norfolk CIC.



Helping smokers kick the habit

We are taking further steps to help more people to quit smoking as helping people to stop is the single most successful health intervention we can make. To support this we are looking to further strengthen our partnership with GP practices across the county, as we know that the highest quality quits come from GPs. As part of this initiative, we expect to provide you with key information about smoking cessation in your area.



A few words from our Medical Director



“ Welcome to this summer edition of GP Exchange! I am delighted to report that with the year now in full swing, our Trust continues to go from strength-to-strength.

Firstly, we have recently been boosted by the appointment of a new Associate Medical Director, Dr Chris Carney, who brings a wealth of experience to the Trust. Read more about his role on page 3.

I am also pleased to report that we have recently expanded our services and the care we provide. This will bring benefits to our existing patients, as well as increasing the number of people locally who can access care from our Trust.

For example, thanks to investment from Norfolk's CCGs, we are now able to offer children even more care within their own homes, helping them to avoid a trip to hospital. See page 5.

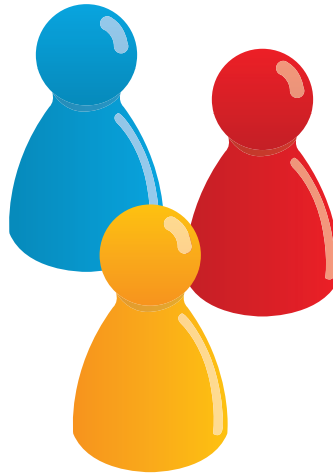
We are also expanding the care we provide to vulnerable people, having been recommissioned to deliver our Matrix Project. This service delivers support to sex workers and we plan to strengthen the partnership with our City Reach team and external partners to create a one-stop shop for vulnerable groups. See page 6 for more.

The future also looks bright, as our Transformation Programme is driving positive change, setting us in good stead for the future. Our Trust, staff, and

patients are already seeing the benefits of this long-term plan. See page 12.

On a personal note, I am honoured to have been selected to receive an MBE. This is very humbling and I wanted to take this opportunity to thank you all for your support and assistance in recent months and years.

Foundation trust application moves on to final stage



I am delighted to confirm that our application to become a foundation trust (FT) has been approved by the NHS Trust Development Authority (TDA), which considers all FT applications.

Following close scrutiny of our quality, safety, financial stability, and leadership, the TDA

has granted us permission to move on to the final stage in the FT application process.

This will see our application considered by Monitor and we hope to receive final approval to become an FT within the next year.

Governors to strengthen Trust

We are also now able to hold our very first Governor Elections, which will see our Council of Governors formed, consisting of 24 Partner, Public and Staff Governors.

Among the six Partner Governors will be Dr Graham Clark, from Chet Valley Medical Practice, in Loddon, who will represent Norfolk's CCGs.

Dr Clark will be responsible for feeding back the views of local CCGs and GPs to help inform the decisions we make about our services and strategy in the future.

Other Partner Governors are:

- NCC Adult Services - Cllr Deborah Gihawi
- NCC Children's Services - Cllr Tom Garrod
- Voluntary Norfolk - Brian Horner
- UEA - Dr Nicola Spalding
- Healthwatch - tbc

A further 18 Public and Staff Governors are set to be elected as the representatives of our constituencies by our 13,000-strong Membership. See page 14 for election timeline.

If you would like to stand as a Public Governor, sign up as a Member, or just want to find out more, go to: www.norfolkcommunityhealthandcare.nhs.uk/Get-involved/our-governors.htm

Best wishes,

Rosalyn Proops

Dr Rosalyn Proops MBE

Associate Medical Director joins Trust



Our Trust's Medical Directorate has been boosted by the recruitment of a very experienced clinician to the role of Associate Medical Director.

Dr Chris Carney joined our Trust in the spring and is actively working with the team to ensure our staff offer safe and effective care.

Chris brings a great deal of experience, having held a number of diverse roles during his career.

He has recently been working as a part-time GP in south Norfolk, clinical support to Urgent Care commissioning for NHS Norfolk and as a triage GP at South Norfolk CIC.

During his career Chris has worked as a GP in Berkshire, and led two ambulance trusts as CEO.

During his time with the East Anglian Ambulance NHS Trust, Chris introduced new services, such as cardiac thrombolysis, and attached community paramedics and emergency care practitioners to GP surgeries in order to improve care and support.

New report shows quality counts



Our Quality Account for 2012/13 is now available to download. It highlights our achievements and learning from the previous financial year.

It also sets out our priorities and quality goals for 2013/14, demonstrating our commitment to quality and improvement.

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

Part 1 contains a statement on quality

Part 2 sets out our quality improvement priorities for 2013/14

Part 3 reviews our quality performance in 2012/13 and details our achievements, performance, and learning.

The quality account includes key information drawn from our annual plan, patient experience results, clinical audit and research information, and performance data.

Resource point:

- www.norfolkcommunityhealthandcare.nhs.uk/About-us/Priorities-and-performance/quality-and-performance.htm

New syringe driver chart available

A revised format for prescribing and recording administration of medicines via syringe drivers has recently been introduced.

This replaces the previously used 'Community variable drug prescription and administration record'.

This format has been designed and tested to ensure it supports best practice in prescribing and administration using syringe drivers.

It also introduces a symptom assessment section for nursing staff to complete to help review symptom control over time.

The chart, guidance for completing it, as well as our recommendations and standard operating procedure for anticipatory prescribing are available from the end of life section of Knowledge Anglia and will also be available from community nursing staff.

Resource point:

- <http://www.knowledgeargia.nhs.uk/eol.htm>

Exciting times as community-based care comes into its own



Our Chief Executive, Michael Scott, has reiterated the key role of community-based NHS services and the importance of joining up teams to ensure patients' total needs are met.

"Across England, as well as Norfolk, patients are clear

that they want more and better care provided in their local communities and within their own homes.

"As a provider of community-based NHS services, this is incredibly exciting as demand for, and recognition of, our services is greater than ever."

Michael explained that this 'prevention rather than cure' approach was good for patients, as well as the wider health and care economy.

"Our input means we can reduce pressure on secondary and emergency services, freeing up resources for those who really need them," he said.

Michael also explained that further integration of health and social care services could also bring significant benefits to patients.

He recently met with Harold Bodmer, Norfolk County Council's Director of Community Services, and Minister of State for Care and Support, Norman Lamb MP, to discuss how our county could potentially become a 'pioneer integration site' in the future.

This would bring together NHS services, public health programmes, and social services in order to

achieve improved outcomes for local people and ensure their total health and care needs are met.

With increasing focus on community services, Michael also explained that it was important that necessary resources followed suit.

Michael added: "We have an excellent record of making a difference for patients and I firmly believe that the time for community-based services is now.

"However, we do need a greater shift in resources to support the transfer of care into community settings and to focus our efforts on keeping people well and out of hospital.

"As Chair of the NHS Confederation's Community Health Services Forum, I will also be speaking to national leaders about the overall shift of focus into the community and how this can be best facilitated and supported across the country.

"In my role as NCH&C's Chief Executive I look forward to working with you to make sure we get the balance of resources in our county right for the needs of our patients.

"This partnership approach will include working with your CCG representative on our Trust's new Council of Governors, which is being formed in light of our FT aspirations."

Michael Scott, Chief Executive

New equipment to reduce falls within inpatient units

Innovative new equipment is being introduced to our community hospitals and inpatient units across the county to further reduce our patients' risk of having a fall.

The new falls sensors are made of thin paper which can be cut to size and positioned underneath a patient's mattress or chair cover.

If the patient becomes restless the sensors send an electronic signal to mobile receivers held by our nursing staff, alerting them to a patient's heightened risk of falling and enabling them to promptly provide support.

The equipment comes from a £32k investment by the Trust and will be used to help staff to monitor patients at high risk of having a fall, such as those with a history of falls or patients with dementia.

In 2012/13 we remained below our ceiling of 4.0 falls resulting in harm per 1,000 occupied bed days and the sensors are expected us to drive this figure down further.

Resource point:

- www.norfolkcommunityhealthandcare.nhs.uk/Whats-happening/Media-centre/special-sensors-to-boost-safety.htm

More care to be provided to children within their own homes

Children across our county will soon be able to access more care in, or closer to, their homes.

The move aims to reduce the need for children and their families to attend acute hospitals by offering the care they need within community settings. This will also further improve service accessibility and continuity of care.



The development comes following an investment of around £225k by local CCGs into our existing Children's Community Nursing Service.

From this month (July), the team will begin to offer IV therapy, pre and post surgical care, oxygen therapy, care of stomas, and symptom management, within children's own homes.

The team has recently been undergoing further training and development to enable this, while additional staff are also expected to be recruited.

By offering expanded care within the community, it is anticipated that the team's young patients, aged 0-19, will not have to attend hospital as regularly. For those who do need to attend an acute setting, their length of stay may be significantly reduced.

The change is expected to be warmly welcomed by parents, as feedback has shown that there is an overall preference for care to be provided close to home, whenever possible.

Hannah Tall, Integrated Team Leader, said: "More so than ever, we will be able to provide children with access to the right care, at the right time, and in the right place for their needs.

"Empowering and enabling children and families to become more competent in the management of conditions reduces the need for hospital admissions and can enable early discharge, which further promotes independence and quality of life."

Babies to benefit from new speech and language support

We are to provide expert support across Norfolk and Suffolk to babies with feeding or swallowing difficulties after being commissioned by the East of England Strategic Commissioning Group.



A specialist Speech and Language Therapist (SLT) will be recruited to provide care to children aged under one.

They will assess and advise parents and other health and care professionals about babies' readiness to feed, their feeding skills, and any swallowing difficulties.

They will also ensure SLTs are a firm part of the multidisciplinary care team and will ensure services are joined up on the frontline by linking medical staff and midwives with community-based health visitors and GPs.

Alan Hunter, Head of Learning Disability and Development, said: "Our new SLT will provide advice to parents and staff about the safety of feeding and ways to optimise feeding and nutrition.

"They will also contribute to multidisciplinary decision making about the need for alternative feeding, such as nasogastric or gastrostomy, promote attachment and observation of infants by parents, and provide all SLTs caring for neonates with expert support."

The new provision will build upon our existing SLT service, including our existing in-reach support to the Norfolk and Norwich Hospital and follow-up care in the community.

The new role will see the expert SLT split their time between the Norfolk and Norwich, James Paget, Queen Elizabeth, and Ipswich hospitals, increasing the number of families who will benefit from our care.

The new service is expected to be available from September.

Enhanced support for sex workers and vulnerable groups

It has been confirmed that we have been successful in our bid to continue providing a unique service for vulnerable people in Norwich.



We have been recommissioned to deliver the Matrix Project, an innovative service which provides sex workers, former sex workers, and their families, with health and care support, as well as signposting to other local services.

The service's clients will soon be able to access a wider range of support, as we plan to bring together the Matrix service and our City Reach Health Services to create a one-stop-shop for vulnerable people.

City Reach also provides care to vulnerable people, specialising in providing primary care to people who are homeless, ex-offenders, and refugees.

The Matrix team will be relocated from their current base at a health centre on Adelaide Street, in Norwich, to the Under-1-Roof unit, on Westwick Street, which is more central in the city and the existing base for City Reach.

This new 'hub' will mean the teams can work even more closely together, while also enhancing their partnership with St Martins Housing Trust, which runs Under-1-Roof and has a team based there.

This will enable clients to access a greater range of support, including accommodation options. It is also intended that volunteer opportunities with St Martins will be put in place for users of the Matrix and City Reach services.

The Matrix is recognised nationally as a ground-breaking service for the support it offers, which is delivered not only from clinics, but also directly in the red-light district via a mobile outreach van.

It has been commissioned by the Norfolk Drug and Alcohol Partnership on behalf of Norfolk County Council. The current service is focused in and around Norwich but work is also planned to identify and respond to the needs of people in other areas of Norfolk.

Strengthening links with primary care to help smokers kick habit

We are taking further steps to help more people to quit smoking. As helping people to stop is the single most successful health intervention we can make, it is essential that we help as many people as possible to kick the habit and that we exceed our target for 2013/14 of delivering 2,000 quits.



To support this, we are looking to further strengthen our partnerships with GP practices across the county, as we know that the highest quality quits come from GPs. In the coming weeks, a representative from Smokefree Norfolk will contact your practice to discuss how we can work even more closely.

As part of this initiative, we expect to soon provide you with key information about smoking cessation in your area. This will include the smoking prevalence in your locality, the activity of our professional Smokefree Norfolk team in your area, and the number of referrals made by your practice.

As well as supporting the delivery of smoking cessation, we understand that each locality will have priority concerns, such as rates of COPD or diabetes, and this information will also help us to tailor our support around your priorities.

Our staff are also re-doubling their efforts to generate referrals to our Smokefree Norfolk team, who have already helped thousands of people to quit.

Our Smokefree advisors are now participating in team meetings to discuss the referral process and support, while also offering a short online training course to all staff to help them refer patients to stop smoking support.

Referral point:

- Smokefree Norfolk:
Freephone 0800 0854 113 or www.smokefreenorfolk.nhs.uk

NCH&C among first community Trusts to introduce Friends and Family test to inform further improvements

Feedback from our patients and their families about their experiences of using our services is to be even more closely monitored. This will enable us to further develop the environment of our units and the quality of care we provide.

Would you recommend our services to your friends and family?



Our patients are now being asked one simple question about our services: 'How likely are you to recommend our ward, department or service to friends and family, if they needed similar care or treatment?'

The question is being put to them as part of the rollout of the new Friends and Family Test (FFT), which is being rolled out by trusts across the country in order to ensure patient experience remains a key priority for the NHS.

NCH&C will be one of the first community-based NHS trusts to adopt the scheme, as it follows a similar premise to the Net Promoter Score, which was successfully

introduced to our inpatient units last year as part of a CQUIN.

The FFT is being implemented by all of our Community Nursing and Therapy teams from this month (July), with further services set to use it from later this year. It will also continue to be used in our inpatients units.

The FFT will enable us to measure the experience of our patients by taking the proportion of respondents who would be 'extremely likely' to recommend the service, minus the proportion of those who say they are 'neither likely nor unlikely', 'unlikely' or 'extremely unlikely' to recommend it.

The FFT score will enable us to measure patient experience over time and against other services. This will ensure we can promptly gather patient feedback and investigate any areas of concern, while also adopting best practice approaches from our highest-performing sites.

Trial to gather patients' opinions concludes

A trial aiming to test a new way to gather patient's views of our services has now been concluded.

During the pilot of Patient Opinion, which ran between March and the end of June, we received around 70 comments about our services.

Patient Opinion is a website which provides people with the opportunity to anonymously publish details about their experiences. It also enables our staff to respond directly to comments, ensuring people know their feedback has been received.

The services participating in the trial were our Physio teams in Dereham and Thetford, our Community TB Service, our City Reach Health Service, and the Matrix Project.

We are now evaluating the success of the trial and considering how it may be used in the future.



Funding boost to support end of life support in care homes

Residents of care homes in Norfolk and Suffolk will soon have access to further improved end of life care, following a major investment into our Trust.

We have been awarded £100,000 from Skills for Care to bolster our 'Six steps to success in end of life care' training course. The course is aimed specifically at supporting care home staff to be more confident and competent at assessing and delivering palliative care.

The investment secures the future of our course in both Norfolk and Suffolk and will lead to a new qualification in 'Leading and managing services to support End of Life Care'. The programme will run twice a year in Norfolk with potential for 40 care home leaders a year to take part.

During the programme, care home leaders write an end of life care policy, start an end of life care register, audit various aspects of the care they deliver and learn new ways of meeting the end of life care quality markers for care homes.

This brings significant benefits to care home residents including: the chance to discuss their end of life wishes and preferences; better coordination of care between the care home, GP and out of hours service; better recognition of deterioration; a well-led and coordinated end of life care service from the care home; and attention to the needs of families, including bereavement care.



Resource point:

- Read more about this course and our other end of life care training courses at: www.pacenorfolk.co.uk

Palliative care support praised by families and healthcare staff



Resources provided by our Trust to ensure patients in Norfolk receive the very best palliative care have been praised by both local families and health and care professionals.

An evaluation of comments and feedback from healthcare staff who have completed our Nuts and Bolts of Palliative Care course has shown that 98% report increased competence in palliative and end of life care.

Upon completion of Nuts and Bolts, the staff from NCH&C, care homes, and other settings said they were now more confident in each of the national core competencies for palliative care.

The course is one of a number of palliative care training courses provided by our Trust. Our **Palliative Medicine for GPs** course is aimed specifically at primary care staff and offers delegates the opportunity to network with, and learn from, best practice as delivered by Norfolk's wider palliative care team.

Meanwhile, families of people who received palliative care from our Trust before they died have praised the care available to local patients and carers.



Findings from our recent VOICES (Views of Informal Carers - Evaluation of Services) survey found that the majority of patients had input from one of our community nurses, with almost all of the respondents reporting that the overall quality of care was either 'excellent' or 'good'.

Similar feedback was received from carers whose family member had received care at our Priscilla Bacon Centre, in Norwich.

Resource point:

- Find out more about the palliative care training available to you and your colleagues. Download our PACE prospectus at: www.pacenorfolk.co.uk



Palliative care advice just a phone call away

GPs and clinicians across the county are being reminded of the expert palliative care support available from our Trust.

Our palliative care and end of life staff provide a 24/7 specialist palliative care advice telephone line for health professionals in central Norfolk.

It can be accessed by calling **07699 734610**.

The line aims to support the care provided to patients with specialist palliative care needs and to prevent unnecessary hospital admissions.

The service is provided by our Specialist Palliative Care Teams at Priscilla Bacon Centre, in Norwich, and our partners at Norfolk and Norwich University Hospital.



A service in west Norfolk is also available, provided by the Queen Elizabeth Hospital.

Resource point:

- Priscilla Bacon Centre for Specialist Palliative care: www.norfolkcommunityhealthandcare.nhs.uk/The-care-we-offer/Service-search/priscilla-bacon-centre.htm

Appointment made to integrated role



We have taken a further step towards providing patients with services which integrate health and social care, following the substantive appointment to a key role.

In west Norfolk, staff from our Trust and Norfolk County Council are now led by Sarah Ellis, who has been

confirmed as our jointly appointed Head of Health and Social Care in for the west of the county.

Sarah has been appointed substantively after holding the position on an interim basis since autumn 2012 and will continue to support Jo Fisher, our AD for Integrated Services.

This integrated approach will more closely align health and care provision by bringing the leadership and management of both NHS and social care services into one role.

Sarah previously worked at Norfolk County Council as Acting Head of Social Care and as Head of Occupational Therapy.

Read our Chief Executive's comments on integration on page 4.

Pre-diagnostic Doppler assessments



Our Community Nursing and Therapy (CN&T) teams in west Norfolk are now offering patients pre-diagnostic Doppler assessments.

The Doppler Ultrasound, using a handheld Doppler, is a non-invasive screening tool used to determine the presence or absence of arterial flow in lower limbs.

It is particularly useful to help diagnose patients with Arterial Insufficiency. The assessment takes approximately 30 minutes and is relatively painless.

To refer patients for an assessment, please contact your local CN&T team in the usual way.

Contact point:

- For more information, please speak to your Locality Lead, as detailed on page 15.

Neuro-rehab unit granted unique status

Our Specialist Neurological Rehabilitation Service at Caroline House, in Norwich, has been granted 'Level One' status by NHS England.

The inpatient unit is the only service in the East of England region to have been afforded such a status, which is based on the service's specification, complexity, and scope.

The 18-bedded inpatient unit is part of our Colman Centre for Specialist Rehabilitation Services, in Norwich.

The site also offers specialist neuro-rehab services to outpatients at Jubilee House. There, our physiotherapists, OTs, psychologist, SLTs, nurses, rehab assistants and doctors, provide support to people with complex needs following an acute neurological event, such as a stroke, trauma, or illness.

Also on the site is Pine Cottage, where our staff provide specialist amputee rehabilitation to people who have lost a limb.

These units form part of the East of England Trauma Network which coordinates services across our region to provide the best care to people after a major trauma.

Resource point:

- www.norfolkcommunityhealthandcare.nhs.uk/The-care-we-offer/Service-search/colman-hospital

Increasing patients' awareness?



Staff at our Specialist Neurological Rehabilitation Service are to carry out a research project involving patients with severe brain injuries following a coma.

The study will see whether patients' awareness levels increase when they are elevated to a standing position, compared to when they are lying down or sitting.

It will be carried out at Caroline House, part of Colman Hospital, in Norwich, and will be led by Kate Lee, Senior Physiotherapist. The project will run until the end of the year and will involve two patients.

Kate said: "Early studies suggest that awareness levels may increase when patients are elevated to a standing position. We intend to compare awareness levels when people are lying down, sitting upright and standing on a tilt-table.

"I hope that this research project may help to further advance our approach to caring for people with brain injuries."

The project has been designed by Kate and the multi-disciplinary team at Caroline House. The research has been supported by a Primary Care Researcher Bursary.

Lymphoedema service to be expanded

Patients across Norfolk are to benefit from further improved lymphoedema care from our Trust.



The improvements come after our Trust was jointly commissioned by Norfolk's CCGs and Macmillan to expand service coverage over the next two years.

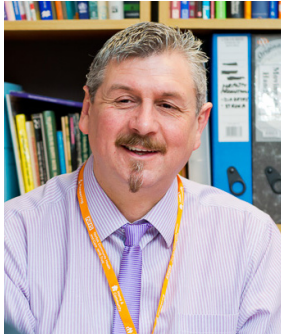
In addition to the existing clinics at Norwich Community Hospital and St James', in King's Lynn, further provision will be put in place in other areas of the county in order to make it easier for people to access care closer to their homes.

The £200k funding will see Macmillan Lymphoedema Practitioners recruited to work alongside our existing Specialist Lymphoedema Nurse in west Norfolk and our Specialist Lymphoedema Physiotherapist in Norwich.

The process of putting these changes in place is now well underway and we hope to offer the improved service within the coming months.

Lymphoedema is caused by damage to the lymphatic system and causes swelling which can lead to pain and loss of mobility.

Steve named 'Mentor of the Year'



A health expert from our Trust who has offered the NHS staff of the future vital learning support, guidance and encouragement has received an award for his outstanding contribution.

Steve Lay, Specialist Nurse Care Manager in our Learning Disabilities

Service, in Norwich, received a 'Mentor of the Year' accolade at the Norfolk and Suffolk Workforce Partnership's Celebrating Excellence awards.

He was nominated for the award by colleagues at University of East Anglia's School of Nursing, who place students with the service each year, in recognition of his efforts to enable scores of student nurses to reach their full potential.

Our Learning Disabilities staff work closely with Norfolk County Council colleagues and offer specialist health and social care to patients from across the county and aims to help people to maintain as much of their independence as possible.

Referral point:

- More about this service in your area: www.tinyurl.com/o42w4vf

Specialist nominated as 'Super Nurse'



A Specialist Neurological Nurse from north Norfolk was recently nominated by one of her patients for a prestigious award.

Suzie Mallett was in the running for the Multiple Sclerosis Trust's 'Super Nurse' award in recognition of the expert care she provides to patients with multiple sclerosis, Parkinson's, motor-neurone disease, and Huntingdon's.

She works alongside another of our specialist neurological nurses, neuro-physiotherapists and neuro-occupational therapists to take a holistic approach to patient care.

While Suzie didn't win the award, she says she was pleased to be recognised for delivering high quality care. "I find caring for my patients to be really rewarding in itself, but it is lovely to know that my patients think I deserve to be in the running for an official title!" she commented.

Referral point:

- http://www.knowledgeanglia.nhs.uk/heron_km/organisationdetails.aspx?id=19246

Award for City Reach nurse Tracy



A committed Nurse Practitioner who dedicates her time to caring for marginalised and vulnerable groups in Norwich has received a prestigious national award.

Tracy Williams has received The Queen Elizabeth the Queen Mother Award for Outstanding Service award from the Queen's Nursing Institute after making a distinguished contribution to the health of people in the community.

As part of our City Reach Health Services team, she provides care to people who find it difficult to access mainstream healthcare services, including refugees, people who are homeless, and ex-offenders. She has also facilitated care to other vulnerable groups, such as sex workers.

Tracy also works as a Nurse Practitioner at Wensum Valley Medical Practice in Norwich, and has been elected onto the Governing Body of NHS Norwich Clinical Commissioning Group.

Resource point:

- Read about our plans to further enhance support to vulnerable groups on page 6.
- More about City Reach: www.norfolkcommunityhealthandcare.nhs.uk/The-care-we-offer/Service-search/city-reach.htm

Trust's Transformation bringing benefits to patients and clinicians

Steps taken by our Trust are expected to bring about greater clinical effectiveness, further efficiency, and offer increased support to our staff and partners over the coming years, with Trust staff already reporting benefits for them and patients.

Programme set to double amount of time clinicians spend with patients

A project to develop the way we deliver our countywide Community Nursing and Therapy (CN&T) Service is expected to double the amount of time our staff spend with patients.

An assessment has shown that, on average, just over a third of CN&T staffs time is dedicated to delivering care to patients. The rest is spent on things like record keeping, travelling and finding resources.

Our goal is to maximise the amount of time our staff can spend where they can make the most difference - with patients. So our project, as part of our Transformation Programme - which was reported in the last edition of GP Exchange - aims to improve the efficiency of our service delivery.

It is expected to increase the proportion of time available for patient care to almost two thirds (63%) within three years.

This will be achieved by providing our staff with the right technology, and putting in place new processes, training and support, to ensure staff can continue offering clinically effective services, which improve the quality of people's lives.

Our Transformation Programme includes some key themes including:



Mobile working for community clinicians

Despite being a community-based Trust, our teams are mainly reliant on office-based technology. We are putting in place mobile working solutions, which will reduce the need for our clinicians to return to a base as frequently to complete paperwork.



Optimise SystemOne

We are updating our SystemOne templates to record keeping quicker and more accurate, which will support clinical colleagues and ensure patient safety.



Adjusting skill mix

We want our future workforce model to be based on patient demand, frontline activity, and the needs of our commissioners. This will ensure we have the right levels of staff, with the most appropriate skills available for our patients, when and where they need it.



Manage demand through a hub

We plan to implement a 'hub and spoke' management model which will see management processes centralised into locality hubs, allowing clinical teams to focus less on managing demand and resources, and more on delivering high quality care.

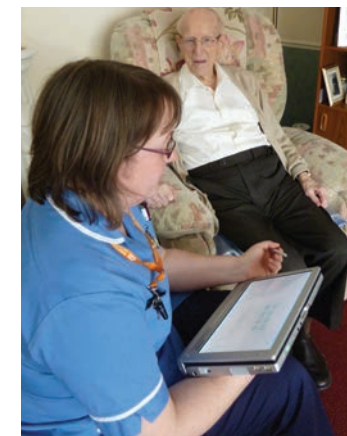
Progress towards 'real time' patient records

Our roll out of new 'mobile working' technology has meant our patient's records are now updated quicker than ever before.

More than 200 of our Health Visitors and CN&T staff now have the ability to update patient records on SystemOne while 'in the field', rather than when the clinician returns to their base.

This means that our clinical colleagues, such as GPs, can be more assured that the patient records they access are completely up to date with the latest care provided by our Trust.

A survey of staff using the kit, which can access SystemOne and other resources remotely, saw staff confirming that they are able to access patient information more quickly and that it had helped to improve the care provided to patients.



Quarterly performance: Quarter One

The following tables detail NCH&C's performance during Quarter One of 2013/14 against a 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 we are currently behind target.

April - June 2013

Indicator	Target or upper ceiling	Q1 performance	Change since Q4
MRSA bacteraemia	No more than zero cases	0 cases	Stable
MRSA Screening - elective patients	100% of patients having planned surgery screened for MRSA	100%	Stable
Clostridium difficile	No more than five cases	1 case *	Stable
Injurious falls	Number of falls resulting in harm per 1,000 Occupied Bed Days below 4.0	3.93	Stable
Smoking cessation	On or above cumulative trajectory against annual target of 2,000 quits	256 **	Decreasing
Venous Thromboembolism (VTE) assessments	95% or more admissions having a VTE assessment	98.3%	Improving
Delayed transfers of care	No more than 3.7% of beds occupied by patients whose discharge is delayed for non-medical reasons	8.4%	Decreasing
18 week wait referral to treatment	95% patients receiving definitive treatment within 18 weeks of referral (non-admitted patients)	99.7% ***	Improving
Health visiting	95% or more of mothers receiving a New Birth Visit within 28 days of birth	98.6% ***	Improving

* This relapse case was counted in March 2013 and is subject to a current appeal

** Figures for April only as data validated one month behind

*** Figures for April and March only

Commentary

Smoking cessation - An internal campaign is now underway to ensure we 'make every contact count' by helping as many of our patients as possible to access expert help to quit from our Smokefree Norfolk service. Further information and advice is being issued to staff and a training module on how clinicians can deliver 'very brief advice' to smokers is also being made mandatory for our staff.

Further public promotion is also planned, including this year's Stoptober campaign. The Smokefree Norfolk team recently supported a local radio campaign aimed at helping people to make healthy lifestyle changes, including kicking the habit.

Delayed transfers of care - While the rate of beds occupied by patients who are medically fit but who are awaiting discharge is above the Trust's ceiling of 3.7%, the overall rate is now decreasing. The number of patients waiting for social reasons, e.g. awaiting a social care package has improved in recent months. Around 50% of all delays are due to patients/families choosing where they want to be discharged to.

Diary Dates

July

NCH&C Public Board Meeting
31 July 2013, 9.30am - 12noon
Norfolk Room, Breckland Council,
Elizabeth House,
Dereham NR19 1EE

August

NCH&C Public Board Meeting
28 August, 9.30am - 12noon
NCH&C Head Office,
Elliot House, Norwich, NR1 3FR

September

Grand Round: Safeguarding adults and children
11 September, 12noon - 2pm
The Pelican Room, Fledglings,
Norwich Community Hospital, NR2 3TU

Clinical Workshops in Palliative Care
Loss and adjustment: transitions and bereavement
11 September, 2pm - 4pm
Rowan Day Centre, Colman Hospital,
Norwich, NR2 2PJ

AGM
24 September, from 8.30am
The Forum, Norwich, NR2 1TF

Healthier Fair
24 September, 9am - 5pm
The Forum, Norwich, NR2 1TF

NCH&C Public Board Meeting
25 September, 9.30am - 12noon
Colman Room, South Norfolk Council,
Swan Lane, Long Stratton, NR15 2XE

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



Elections Timeline

Aug 15	Notice of Elections
Aug 15 - Sept 13	Submit your nomination to stand
Sept 13	Nominations deadline
Sept 16	Details of validated nominations published
Sept 18	Deadline for candidate withdrawal
Oct 7	Voting packs dispatched to Members
Oct 30	Close of election
Oct 31	Governors announced

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



Assistant Director
John Mallett
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(Interim) Locality Manager
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01603 776751

South



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(Interim) Locality Manager
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North



Assistant Director
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Locality Manager
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West



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Head of Operations for Integrated Services
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Children's Services



Assistant Director
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Specialist Services



Assistant Director
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