



YorkTalk

September 2007 Issue 1

Foundation first

A NEW era in Trust decision-making dawned on 4 July when the first Foundation Trust Members' Council met in York.

The new council includes 32 governors, many elected by members of the newly created Foundation Trust. Its powers include the appointment of chairmen and non-executives and the right to be consulted on future developments.

Trust board of directors chairman, Professor Alan Maynard, who also chairs the Members' Council, said: "This is a significant milestone in the Trust's history and I am honoured to be a part of a new strategic direction which aims to listen to and act on the views and knowledge of local people, staff and partner organisations."

Alan opened the first council meeting by saying that York was not a tranquil place and that there had been and remained a number of challenges.

Trust chief executive Jim Easton, in his report, said that the last few months had been dominated by the trust's financial relationship with the local primary care trust which had resulted in a reduction in hospital capacity.

However, he highlighted advances in hitting A&E targets and the fact that cancer services have been highly rated.

Deputy chief executive Mike



Down to business: the first Council meeting

Proctor explained that 87 beds had been lost and that the speed of the process had left some staff dissatisfied. It had, he added, been a difficult balancing act, but he was encouraged by the recent patient experience survey showing a year-on-year improvement.

Director of finance and performance Patrick Crowley
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Factfile: Members' Council composition

- 17 public and patient governors represent patients and carers, and the areas of the City of York, Selby District Council and Hambleton District Council.
- Ten governors appointed from organisations which work closely with the Trust, such as North Yorkshire and York Primary Care Trust, local councils, the University of York Medical School and the voluntary sector.
- Five governors represent staff.

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NewsTalk

Welcome to your new newsletter

THIS is the pilot issue of what we intend to be a regular newsletter primarily aimed at staff and members of the Foundation Trust.

We hope you will find this informative and useful.

We welcome your feedback on this newsletter and ideas for features in future editions.

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- Telephone: (01904) 725233
- E-mail: jayne.bone@york.nhs.uk

Important diary date

THE ANNUAL General Meeting will be held on Wednesday 26 September at 5.45pm in the Lecture Theatre, Postgraduate Medical Centre, York Hospital.

This will be an opportunity for the Annual Report and Annual Accounts for 2006/7 to be presented and for any questions from the general public to be raised.

A copy of the Annual Report is available on the Trust's website at www.yorkhospitals.nhs.uk or by calling 01904 725189.

You will need to register your attendance at the AGM by calling our Membership Helpline on 0870 703 0151 or by emailing the membership team at yort@nhs-membership.co.uk

Queries about the AGM should be directed to Jayne Bone, head of chairman and chief executive's office:

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NewsTalk

Minister visits Trust



YORK was chosen as one of the starting points for a newly announced review of the NHS.

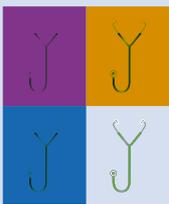
The review, announced by Health Secretary Alan Johnson on 4 July, asked Parliamentary Under Secretary of State Professor Lord Ara Darzi to directly engage patients, NHS staff and the public on the challenges facing the health service – and Prof Darzi began by visiting York Hospital where he met staff and patients.

Trust chief executive Jim Easton said: “The new ministerial team is in place and one of its initial announcements was the review to be undertaken by Professor Lord Ara Darzi. I was pleased that the Strategic Health Authority had selected us to host one of his initial visits.”

Brand new

YOU may have noticed our new branding – based around that trusty, age-old tool of the medical profession, the stethoscope.

Trust deputy chief executive Mike Proctor said: “It will help give us a greater sense of local identity as we move forward.”



Chapel given a makeover

STAFF, patients and volunteers at York Hospital joined together to celebrate the opening of a new inter-faith Chapel and quiet space in June.

At a special service, the redesigned and refurbished chapel was relaunched as a space for people to reflect and find quiet whether they have a faith or no faith.

As well as a new design and layout, lighting that changes colour and new window vinyls have helped to modernise and add fresh colour to the chapel.

Innovation boost

TWO IT solutions are making life easier for staff and improving efficiency.

The new systems have been created by the Trust's in-house IT team in response to asking staff a simple question: how can we make life better for you?

The first is an electronic whiteboard and the second, electronic handover notes for nursing staff – both are currently in use on several wards.

The electronic whiteboard gives a visual representation of the ward. The information replicates that already on the central system. The user can see the following at a glance:

- Who is on the ward and in which bed
- Which nursing team and consultant is dealing with them
- Further information related to that patient
- Indicators or alerts, such as when radiology and pathology results are available
- When EDD (estimated date of discharge) has passed.

The advantage of the system is that the information is more secure, as the monitors are placed

on desks and so can't be seen by people walking onto the ward.

The system has been well received by nursing staff around the Trust – currently 10 wards are using it, including the wards with the highest throughput of patients.

Discussions have already begun with other wards and with clinics and satellite sites.

The electronic handover note system was developed as it was identified that different wards and the nurses on those wards used different systems for recording information handed over between shifts.

Wherever nurses work they have some form of sheet that highlights key information about a particular patient. The new handover notes were designed so that they follow the patient throughout their inpatient stay.

The notes give the following information:

- Patient's name
- Case note number
- Bed number
- Consultant
- Expected date of discharge
- Diagnosis

- Chronic conditions
- Nursing interventions.

The nurses are able to add information about such areas as observations, hygiene, nutrition and mobility.

The great benefits are:

- Information is more up to date as this is quick and easy to update
- The information follows the patient until they are discharged so if transferred between wards, this information follows the patient
- The information is more auditable
- There is a history of changes grouped into 10-minute blocks so that nurses can view what changes have been made, and by whom.

Diana Kay, sister of the Acute Medical Unit, said: “We now have access to patient information before the patient is on the ward. This enables us to deal with any potential problems and plan care. The electronic handover sheets mean that when we transfer a patient to another area, all the information that the nurse has gathered about that patient goes with them, so hopefully stopping information being repeated.”

Continued from page 1 informed the Council that the Trust had a surplus of £185,000 at the end of May, but he cautioned that there would be financial challenges in the year ahead.

The governors posed a number of questions, on areas such as waste recycling, income generation, out-of-hours services, patient choice, PCT

Foundation first...

spending and communications.

Deputy chief executive Mike Proctor said: “To take part in the first members council meeting was a great feeling, it is something we have been looking forward to for a long time.”

Council member David Vasey said: “I think the first Members’

Council meeting was productive in an educational/developmental way. The members are still feeling their way and defining what their role is and how they relate to the directors, chief executive, etc. They are still learning about the nature of the Trust in terms of staff and buildings.”

Factfile: Powers of the Governors include

- To appoint or remove chairman and other non-executive directors.
- To approve the appointment of the chief executive.
- To appoint/remove external auditors.
- To be consulted on forward plans of the Trust.

Parking solution is right on queue



SLOW-MOVING traffic queues of frustrated visitors will soon be a thing of the past, with work due to begin shortly on a new car park at York Hospital.

The new three-storey facility will provide 250 extra visitor car parking spaces over and above what already exists. At the same time it will open up new areas for future hospital expansion.

Planning approval has been granted and work should begin in the autumn, providing much-needed relief for visitors and also simplifying the hospital's entrance and exit.

The Trust's deputy director of strategy and planning Brian Golding explains the benefits: "The original plan was to have the car park at the same



Planning: Brian Golding

location as the present one, but we realised that by shifting it to one side we would open up a very useful area which can be used for future hospital development.

That's very important on a site like ours where space is tight to begin with.

"There will be lots of extra parking spaces for visitors and the bus stop will be relocated so that everyone visiting the hospital will arrive at the same point. This is a great advantage as we will then be able to signpost people as soon as they arrive."

It is estimated that construction will take around 12 months and already the Trust is investigating how to minimise disruption to visitors during that time, including possible temporary parking arrangements nearby.

The new car park has been designed by APCOA, the Trust's Private Finance Initiative partners. Because it is being



Within reach: computer images of the new car park

financed through a Private Finance Initiative, this means the Trust will not need to find a penny of the £4million construction costs. The Trust will also receive a yearly income from the contractors out of the parking fees collected.

Deputy chief executive Mike Proctor said: "As a result of this development there will be considerable inconvenience to many people for about a year and we will seek to minimise this inconvenience. However, the outcome will be worth it. I look forward to the day when car parking is no longer considered to be a problem at this hospital."

GovernorTalk

Dr David Vasey

What is your background and what do you do presently?

I retired as a GP five years ago and now am employed part-time as a general practitioner with a special interest in ophthalmology (GPSI Ophthalm.).

In the past I have served as a North Yorkshire County Councillor and been chair of the governing body of our local secondary school in Whitby where I live. I am a Labour Party member.

Why did you want to be a governor?

As a grateful (past and present) patient of the hospital, I feel that I would like to put a little back into an organisation that has helped me. In view of having experience on both sides of the counter I believe I am in a fortunate position to contribute.

What are your ambitions for the Trust?

I would like to see the trust continue to improve in the quality and range of the services it offers but foremost I would like to see an improvement in the standard of care of the patients as I feel that care has been pushed down the agenda by many factors – financial, efficiency, technology to name a few.

Mandy McGale

What is your background and what do you do presently?

I have worked at the hospital for 26 years, initially as a nurse, then various management posts across the trust. My current post is head of patient flow.

I am responsible for admission and discharge processes across the Trust.

Why did you want to be a governor?

The hospital is a great place to work and I wanted to give something back. I feel that having the opportunity to work with a wide group of people from various backgrounds will be a good opportunity for me to learn from other governors. I also wanted to help and support the trust and represent non-clinical staff.

What are your ambitions for the Trust?

I would like to develop two-way feedback to ensure effective communication for the staff that I represent.



picture courtesy of the Yorkshire Evening Press

Mums made to feel more marvellous

YORK teenage mums and mums-to-be came together for a chinwag and a chance to talk babies at a special reunion in July.

The young women, as well as babies and toddlers, gathered in Michael le Belfry church hall where as well as a chance to pick up advice from NHS health professionals and staff from Connexions, they were given refreshments and could browse around books and clothes stalls.

The event, which was put together by York Hospitals NHS Foundation Trust Mums-2-B Co-ordinator Denise Robson, had the backing of local companies and agencies.

Denise said: "The atmosphere was great and the girls really enjoyed it. They were really made a fuss of. I think some of them wished we could do this every month!"

Integration is the key

HEALTH CARE in York is undergoing a revolution thanks to the launch of a new emergency service.

For the first time ever, patients needing out of hours health care can now get it all in one place.

The new service – dubbed 'integrated urgent care' by health chiefs at the primary care trust and hospital – does away with the GP out of hours service in Monkgate and instead brings emergency and urgent care together all in one place at York Hospital.

It means patients needing urgent GP care between 6.30pm and 8am and who have been referred from the out of hours service can now go to A&E at the hospital – putting an end to confusion and creating a one-stop shop for emergency healthcare in the city.

It also goes some way to tackling rising national criticism about out of hours services not

meeting patients' needs.

Vice Chair of York Local Medical Committee, Dr Brian McGregor, who is one of the GPs who is working in the new

service at the hospital says: "This is a very positive step for GPs. It's better for patients because they're seen by the most appropriate person and it's better for GPs and hospital staff because they are able to concentrate on patients needing secondary care. It is a logical way of working which provides urgent care all on one site."

But the benefits don't end there. Clinical Director for Accident and Emergency at York Hospital NHS



'Better service for patients': Mike Proctor

Foundation Trust, Dr Steven Crane, said: "All the emergency skills that patients might need will be in the same place for the first time. And as well as patients receiving the most appropriate care, it's also an opportunity for A&E doctors and GPs to learn from each other, and share the urgent care workload."

"And while patients must still contact the out of hours telephone service in order to see a GP, it means that when advised, they will come to A&E rather than elsewhere."

"Patients with problems that are not urgent should continue to visit their own GP, phone NHS Direct or visit the York Walk-In Centre during normal working hours. However, we're certain that working in this way with our primary care colleagues is the right way forward for emergency health care in the city."

While the new service combines

the skills and expertise of hospital doctors and GPs, they don't work in joint teams but rather as teams within the same area.

Dr McGregor said: "A&E continues to work as it does now, the team of primary care doctors, nurse practitioners and community nurses work alongside them on an adjacent corridor."

The GP team assesses patients with urgent primary health care and the A&E doctors and nurses continue to see patients with acute emergency needs, such as intense chest pain or serious injuries."

Trust deputy chief executive Mike Proctor said: "This is a completely new way of working and without a doubt it's much better for patients. Not only does it put an end to confusion over what to do or where to go in an emergency, but it brings together a vast range of skills under the same roof."

Got a story for YorkTalk?

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