

# Trust Team Brief

Hampshire Partnership **NHS**  
NHS Trust

December 2008

## Notes to the Team Briefer:

- *The brief provides the core message – add this information to your own briefing material.*
- *Convey the meaning in words that you feel will be understood and that illustrate with a practical example that is relevant to your team wherever possible.*
- *Encourage questions. If you do not know the answer, say so, take a note, get the answer and give it to the questioner at the earliest possible time.*
- *Ensure that you have prepared your own local brief and share this with your manager, before he/she briefs you.*

## Message from the Chief Executive

I am pleased to report that we are now reactivating our application for Foundation Trust authorisation. On 12th December we will be sending a letter to Monitor requesting that they begin assessment of our readiness to become an FT. We are hopeful that Monitor may be able to undertake this assessment in the period immediately following Christmas with the earliest possible date for the outcome being three months later – meaning we could potentially be authorised as an FT from spring 2009.

Although the assessment process will be intensive alongside a very busy period for the Trust, I now feel we have made sufficient progress to be a very strong candidate for FT status. I will let you know more details once we are clearer about the precise timetable and the assessment process.

Hence 2009 looks set to begin in an exciting way. For me 2008 has been a year of change and I have thoroughly enjoyed my first six months in Hampshire Partnership. I have been very impressed with the hard work of all staff and the significant progress being made right across the organisation to improve the care we deliver to local people.



Please accept my thanks for all your hard work throughout this year and my best wishes to you and your families for a safe and happy Christmas

Kind regards,  
Nick Yeo

## Human Resources / Staff

### Interim Chief Operating Officer

Jane Elderfield has agreed to take up the role of Interim Chief Operating Officer for the Trust from 1 January 2009. This follows the recent recruitment process where unfortunately we



were not in a position to make a substantive appointment. Jane will act as interim until the summer, at which time we will re advertise the post with a view to making a permanent appointment. Jane will be based at Maples in her new role. Whilst an interim appointment, Jane will have full authority as COO during a period where there will be a huge amount to move forward in preparation for Foundation Trust status, in addition to implementing the new role across the trust.

Karen Guy will be the Interim Director of Operations for Adult Mental Health throughout this period. This will also commence on 1 January 2009 and a secondment opportunity for the East Hants Locality manager post will be advertised internally in the next two weeks. Cover arrangements in the locality are established until the person takes up their secondment.

### **Note2Nick**

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Note2Nick is a staff suggestion scheme giving you the opportunity to air your concerns, make suggestions or to ask the Chief Executive, Nick Yeo, questions about our services or the Trust.

If you would like to contact Nick please email [Note2Nick@hantspt-sw.nhs.uk](mailto>Note2Nick@hantspt-sw.nhs.uk) or look for Hantspt Note 2 Nick on the global email list.

### **Successful reapplication for Clinical Negligence Scheme for Trusts (CNST)**

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I am delighted to inform you that we have been successful in our reapplication for CNST at both levels 1 and 2 with an excellent overall score. To remind you all this was a 2 day external assessment covering the following:

1. Governance
2. Competent and capable workforce
3. Safe environment
4. Clinical Care
5. Learning from Experience

This has been successful because of the commitment of our staff across the Trust, to demonstrate via the CNST process that we have the proper policies and strategies in place, and that we are compliant with all processes we set out.

To demonstrate this many staff put in many hours of work, well done to everyone involved who have given of their time to do this. This is excellent news for the Trust.

### **Staff Survey deadline extended**

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The staff survey contractor has told us that the response from this Trust is below the average of the other Trusts they work with. Only 43% of our staff have replied and the national average is now 50%.

To make sure that we get in as many completed surveys as possible, an extension of the survey period until 23rd December has been negotiated.

It's only by getting a high response rate that we can get a good idea of what staff think and feel about the Trust as their employer and about the services we provide.

If you have misplaced your staff survey, please contact Helen Richmond who will be able to provide you with a replacement. [Helen.richmond@hantspt-sw.nhs.uk](mailto:Helen.richmond@hantspt-sw.nhs.uk) 023 8087 4116.

**General**



## Experienced Based Design Pilot

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The Trust has been successful in its application to become one of six pilot sites for the 'Experience Based Design' project. This nationally recognised project, led by the NHS Institute of Innovation and Improvement, will review and re model services based on service users stories, narrative and personal experience.

Mandy Johnstone, Deputy Director of Governance, who is leading the project, said "I am delighted that we have been selected to take part in this exciting and groundbreaking pilot which provides us with a structured methodology to improve performance, safety and governance and most importantly is based on the experiences of service users and those staff supporting them."

The pilot will be undertaken initially in the Specialised Services Directorate where improving the service user experience has been one of the key development areas. For more information contact [mandy.johnstone@hantspt-sw.nhs.uk](mailto:mandy.johnstone@hantspt-sw.nhs.uk)

## Update on HoNOS pilots

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HoNOS (Health of the Nation Outcomes Scale) was developed during the early 90s as a measure of the health and social functioning of people with severe mental illness. Its key purpose was to enable recording of progress towards the targets within the Health of the Nation, the key health strategy document of the time.

The HoNOS score consists of 12 items which measure behaviour, impairment, symptoms and social functioning. Adapted versions are available for use within older people's services (HoNOS65+) and secure settings (HoNOS-Secure). HoNOS forms part of the Minimum Dataset for Mental Health and is intended to be completed following routine clinical assessment in any setting.

A pilot project to support the recording, analysis and feedback of HoNOS data has begun within 13 sites in the Trust and across AMH, OPMH and SS Directorates. The pilot will identify what needs to happen to embed routine clinical outcome measurement. It will highlight resource implications and training requirements for staff and establish analysis and feedback processes for staff, service users and commissioners.

The findings of the pilot will be used to inform the wider roll out of clinical outcome measures across the Trust from April 2009.

Save the date for our conference, "Implementing Clinical Outcome Measures" to be held at the Holiday Inn, Eastleigh on Thursday 26<sup>th</sup> March. Further information will be circulated in the New Year.

For further info on the pilots, please contact Penny Kirk, Service Improvement Manager (02380 874387) or Liz Vernon-Wilson, Asst Project Manager (02380 874132).

## RiO: A Clinical Information Management System for HPT

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The Trust has been advised that it should prepare to be ready to commence implementation of the RiO information management system in February 2009. RiO is the specialist mental health and community system which BT (British Telecom) has installed in London where it is the principal private partner for the National Programme for Information Technology (Npfit). This follows the withdrawal of Fujitsu in the South of England and the subsequent discussions between Connecting for Health (the national NHS agency for Npfit), the SHAs in the South of England and BT. It is expected that this will result in a confirmation of the contract with BT by Christmas.



This is an exciting development and we will be very busy in the New Year in setting up the Programme arrangements in the Trust and confirming where we will be commencing our implementation. The Trust Programme Team will be recruiting additional members of staff and will also be looking for other members of staff based in both Service and Corporate Directorates to be actively involved in the planning and change work. Indeed reviewing and agreeing the best processes to be used for RiO will be vital if we are to ensure we realise the considerable benefits it offers.

If you would like to know more about the system or the opportunities to be involved with the planning, please discuss this with your manager. More information can be obtained from the Programme Office by contacting 023 8047 5387 or email [NHSCRS@hantspt-sw.nhs.uk](mailto:NHSCRS@hantspt-sw.nhs.uk)

### **Emerging Rehabilitation Services Strategy**

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The AMH services Directorate in June 2008 established a Rehabilitation Project Board to develop a Rehabilitation Strategy. The Board have developed an emerging strategy document which will form the basis for discussions with all internal and external stakeholders.

This emerging strategy focuses on all of the rehabilitation services provided by Hampshire Partnership Trust and provides an opportunity to develop a robust framework which supports and develops best practice ensuring that recovery and social inclusion principles are central and in line with national best practice.

There will be a pre consultation period from which the Trust will gather feedback. Recommendations from this will inform the consultation exercise that follows.

It is expected that pre consultation will begin in mid January 2009 with formal consultation completed by the end of June 2009.

### **NHS Choices Feedback**

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NHS Choices ([www.nhs.uk](http://www.nhs.uk)) is a national website, which is being promoted as the 'front door' to all NHS online information and services. It provides health information (such as an A-Z of conditions and common health questions) as well as information on health services across the UK.

One of the most important features of NHS Choices is the 'Voice' section. This enables service users to give feedback on their experience of accessing Trust services. It will also enable service users to benchmark and compare our Trust with other Mental Health Trusts.

Whilst this information is useful to other service users when making decisions about their treatment, it will also be valuable feedback for the Trust.

Previously only acute trust hospitals could receive feedback. However, this is no longer the case, and Mental Health Trust hospitals, are now also eligible to receive feedback. This feedback can be seen by any user of the NHS Choices website, so it is important that the Trust is aware of any feedback received and is able to respond appropriately.

The PALS team have produced a briefing report which sets out how the Trust will respond to any feedback received from the Choices website. If you have any queries relating to the NHS Choices Voice facility in general, please contact the PALS team at [hp-tr.hantsptPALS@nhs.net](mailto:hp-tr.hantsptPALS@nhs.net), or by calling 023 8047 5265. For any queries about the Trusts' content on NHS Choices, please email the Web Officer at [web.editor@hantspt-sw.nhs.uk](mailto:web.editor@hantspt-sw.nhs.uk).



## Updates to Policies and Procedures

A number of new policies and procedures have been approved and a similar number of existing policies have been revised. Copies are found on the Trust's website at: [www.hantspt.nhs.uk/Policies/Corporate Documents](http://www.hantspt.nhs.uk/Policies/Corporate Documents)

If you or members of your team choose to print off hard copies and retain them on file (in which case, please follow the instructions below), whenever you or your teams subsequently refer to that file, you will all need to check the website to ensure the version has not been updated and you are still accessing the most up-to-date copy. The proforma at the front of each policy/procedure will state the version number and its review date.

**Policies and Procedures remain important documents, with which you and your team will need to familiarise yourself as a matter of urgency.**

### CLINICAL POLICIES FOLDER

<u>Policy No.</u>	<u>Policy Reference</u>	<u>What has Changed</u>
	Clinical Policies Index – November 2008	Updated
CP 2.5 & NCP 2.5	Complaints Leaflet, Version 5	Updated
CP 2.7 & NCP 2.7	Complaints Poster, Version 4	Updated
CP 5	Policy for the use of Leave under Section 17 of the Mental Health Act 1983 (as amended), Version 5	Updated
CP 7	Receipt and Scrutiny of Statutory Forms under the Mental Health Act 1983, Version 4	Updated
CP 11 & 11.1	Observation Policy and Procedure	Updated
CP 13	Guidelines for Prescribing Lithium	Updated
CP 15.2	Guidance Notes for the application of Hampshire County, Southampton and Portsmouth City Councils Adult Protection Policy (Multi-Agency Policy, V5	Updated
CP 25.1	Resuscitation: Training and Equipment Requirements, Version 4	Updated
CP 36 & NCP 53	Rapid Tranquilisation: Policy and Guidance for use in Mentally Ill Patients displaying acutely disturbed or violent behaviour, Version 3	Updated
CP 41	Medicines Control, Administration & Prescribing Policy (MCAPP), Version 4	Updated
CP 50	Policy for the Management of Inoculation or Contamination Incidents (Sharps, Bites, Scratches or Cuts), Version 4	Updated
CP 68	Guidelines for Insomnia, Version 2	Updated
CP 89	Aseptic Technique Policy, Version 1	New
CP 90	Overarching Framework for Infection Prevention and Control within the Trust, Version 1	New
CP 94	Self Administration Guidelines, Version 1	New
CP 95	Mental Health Act 1983 (as amended): Scheme of Delegation, Version 1	New

### NON-CLINICAL POLICIES

<u>Policy No.</u>	<u>Policy Reference</u>	<u>What has Changed</u>
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<b>Policy No.</b>	<b>Policy Reference</b>	<b>What has Changed</b>
	Non-Clinical Policies Index – November 2008	Updated
NCP 2.5 & CP 2.5	Complaints Leaflet, Version 5	Updated
NCP 2.7 & CP 2.7	Complaints Poster, Version 4	Updated
NCP 10	Human Rights Policy, Version 2	Updated
NCP 29.1 / IG 18.1	Records Management Policy, Version 2	Updated
NCP 29.2 / IG 18.2	Retention, Review and Disposal Schedule, Version 3	Updated
NCP 53 & CP 36	Rapid Tranquilisation: Policy and Guidance for use in Mentally Ill Patients displaying acutely disturbed or violent behaviour, Version 3	Updated
NCP 56	Policy for Responding to Recommendations from External Agency Visits, Inspections & Accreditations, Version 2	Updated

#### **HUMAN RESOURCES POLICIES**

<b>Policy No.</b>	<b>Policy Reference</b>	<b>What has Changed</b>
	HRP Policies Index – November 2008	Updated
HRP 19	Validation of Professional Registrations Policy, V3	Updated
HRP 23	Employment Policy on Drugs and Alcohol at Work, Version 2	Updated

Please note all Personal Policies are in the process of being renamed as HRP Policies.

#### **INFORMATION GOVERNANCE POLICIES**

<b>Policy No.</b>	<b>Policy Reference</b>	<b>What has Changed</b>
	IG Policies Index – November 2008	Updated
IG 18.1 / NCP 29.1	Records Management Policy, Version 2	Updated
IG 18.2 / NCP 29.2	Retention, Review and Disposal Schedule, Version 3	Updated

#### **FINANCE POLICIES**

<b>Policy No.</b>	<b>Policy Reference</b>	<b>What has Changed</b>
	Finance Policies Index – November 2008	Updated

## **Giving Your Feedback**

Feedback is an important part of the core team brief process. Comments, suggestions and questions on items featured in each month's team brief are encouraged.

If you have any comments please share them with your manager, fax them to 023 8087 4133 e-mail them to [nicola.collins@hantspt-sw.nhs.uk](mailto:nicola.collins@hantspt-sw.nhs.uk).

### **Trust Team Brief – feedback form**

Name of Briefer:

Date of Brief:

Location:

**What was of most interest to your team?**

**What was of least interest?**

**Were there any questions that you were able to answer?**

**Were there any questions that you were unable to answer?  
(Please mark *Follow-up* if you require any issues to be followed up with senior management)**



