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• Support for mum in campaign for awareness around abusive head trauma
• New bedside pressure monitoring system on trial at Oldham
• Manchester single hospital service review update

Community physiotherapy reduce waiting times
Pennine Acute’s stroke team shortlisted for national award

THE stroke team at Pennine Acute Trust has been shortlisted for the Specialist Services award in the Health Service Journal (HSJ) Value in Healthcare Awards.

The team, which is based at Fairfield General Hospital, has made the shortlist for its centralisation of the Trust’s stroke service at Bury.

The team were centralised at Fairfield in November 2014. This was a clinically led decision which brought with it a lot of benefits for patients, their relatives and the Trust. The service was reconfigured from a three site model to a one site model and this enabled staff to expand the thrombolysis service from 7am until 11pm and to provide a seven day hyper acute and rehabilitation service for all stroke patients.

Fairfield’s specialist stroke unit is now one of the best performing hyper-acute stroke units in the country according to Sentinel Stroke National Audit Programme (SSNAP) data gathered by the Royal College of Physicians.

The HSJ Value in Healthcare Awards 2016 seek to recognise and reward outstanding efficiency and improvement by the NHS. They recognise excellent use of resources and look for examples of demonstrable improvement in outcomes.

For the specialist services category they are looking at service improvement which has benefited clinicians, healthcare organisations and patients alike. There should be innovative methods of delivering care and a patient-focused approach, with service users engaged in any redesign.

“I have been hugely impressed by how this team works; they embody the Trust’s values ... everything they do is focused on improving things for patients…”

The overall winner of the award will be announced at a ceremony on 24 May in Manchester Central.

Dr Khalil Kawafi, consultant stroke physician and stroke lead, said: “The full implementation of centralisation of stroke services to the Fairfield site coupled with the launch of the seven day hyper acute service locally and across Greater Manchester in April 2015 has resulted in our excellent SSNAP performance over the last nine months. Pennine has been awarded a grade A service and for six months had the best figures in the UK. This award nomination is testimony to the hard work, passion and dedication of the multidisciplinary stroke team at Fairfield. I would also like to acknowledge the support and cooperation of our colleagues in general medicine, A&E and radiology as well as the matrons, site managers and bed managers without whom the award would not have been possible. The challenge now is to maintain performance and to prepare ourselves for the future advances in stroke medicine, such as the implementation of an intra-arterial thrombectomy service across Greater Manchester.”

Professor Matthew Makin, executive medical director at Pennine Acute said: “I have been hugely impressed by how this team works; they embody the Trust’s values of quality-driven, responsible and compassionate; everything they do is focused on improving things for patients and they always seek to learn how they can make their service even better for patients. I visited the stroke team and they are a shining example of what can be achieved by clinical teams when they work together with an absolute focus on excellence.”
In the news

Oldham integrated service shortlisted for HSJ community health service re-design award

AN Oldham service which has been re-designed to make it more accessible to patients has been shortlisted in the Community Health Service Re-design category in the prestigious HSJ Value in Healthcare awards.

The Pennine Lung Service – Oldham Integrated Respiratory Service was established in 2014 and delivers an integrated respiratory service to the population served by Oldham CCG.

The judging panel was impressed by the excellent use of resources in re-designing the service to make respiratory services more accessible to patients, including the establishment of a roaming pulmonary rehabilitation programme which would move location every three months to improve access for patients who found it difficult to attend one of the permanent locations.

The HSJ Value in Healthcare Awards recognise and reward outstanding efficiency and improvement by the NHS. The winners will be announced at the HSJ Congress event on 24th May in Manchester.

Lucy O’Hare, assistant directorate manager, out of hospital services, division of integrated and community services, who submitted the bid on behalf of the team said: “To be shortlisted for these awards is a fantastic achievement for the team and is a reflection of all the hard work that the staff have put in over the last two years. The service has gone from strength to strength and now provides a first class community respiratory service to the patients of Oldham.”

Steve Taylor, divisional director - integrated and community services at The Pennine Acute Hospitals NHS Trust said: “Pennine Lung Service has been a real success story for both the Trust and the patients of Oldham, who have benefited hugely from having a fully integrated and community based service. Being shortlisted for a national award such as this is recognition of the high quality service being delivered by the clinicians and support staff within the team.”

Other teams shortlisted for the award from Pennine Acute include the community health service redesign pharmacy team and the general medicine microbiology team - pharmacy. Details on their entries will be included in the next edition of Pennine News.

North Manchester community nurse shortlisted for leadership award

A NORTH Manchester community nurse has been shortlisted for the Leadership award in the RCNi Nurse Awards 2016.

Victoria Thorne, lead nurse for North Manchester community services at Pennine Acute has made the shortlist for her involvement in the launch of a new North Manchester Macmillan palliative care support service.

The judging panel recognised Vick’s great leadership skills and how she managed changes to staff working patterns and operating hours when the new service launched in April 2015. She also implemented a new triage system and referral criteria that means more patients can be supported and receive care and treatment in their own homes.

The RCNi Nurse Awards 2016 are the profession’s top accolade for nursing excellence and the awards ceremony takes place on Friday 6th May at the Westminster Park Plaza Hotel in London.

Victoria said: “I feel very privileged to have been nominated for the leadership award. The new extended service has greatly enhanced palliative and end of life care and support for patients and families in North Manchester. It has been a pleasure working with staff from a variety of organisations and our patient representatives who have been enthusiastic and motivated in helping to develop the service.”

Gill Harris, chief nurse at Pennine Acute said: “We are very proud that Vick has been shortlisted for the Leadership award and she is thoroughly deserving of the nomination, having played a leading role as both service manager for specialist nursing and then as lead nurse for community services when the North Manchester Macmillan palliative care support service launched in April 2015.

“Vick led a complete change in practice for the community Macmillan service, including a change in operating hours and working patterns. Vick introduced a new clinical triage system to support the team and a new referral criteria, which means more patients can be cared for. This has meant that our patients are receiving more timely care and it is impacting positively on their experiences. Well done Vick.”
Waiting times slashed in community physio

THE community physiotherapy service at Pennine Acute has slashed the waiting time for their service from 15 weeks to 10 days.

The average waiting time for treatment in the first quarter of 2014 was 15 weeks. For the same time period in 2015, 82% of patients were seen within 10 days and 18% of patients were seen within 20 days.

With 900 referrals in the last year, the team which is based at Plant Hill Clinic in North Manchester, provides assessment and rehabilitation to the residents of North Manchester in their own homes, residential and nursing homes. This includes patients with a variety of clinical conditions including musculo-skeletal, neurological, respiratory, general mobility and falls problems.

The team treat patients who are too frail, unwell or immobile to attend outpatient appointments as they are usually at high risk of falls or deteriorating quickly with the potential for being admitted to hospital.

A telephone triage system ensures that patients who are referred to the service are contacted within 24 hours to check that their referral information is accurate, prioritise the patient’s need for intervention and ensure that the patient has been referred to the most appropriate service. Working in this efficient and responsive way with patients; together with a daily team meeting to discuss new referrals and patients’ needs ensures that they receive an appropriate appointment, specific to their clinic condition in a timely manner.

Eighty-seven year old Florence Cassidy from Miles Platting was referred into the service last October. She had fractured her right tibia and fibula following a fall down some steps at her home. After undergoing an operation at North Manchester General Hospital and a period of rehabilitation at Fairfield General Hospital, she was discharged home where she lives with her daughter.

Florence was then referred into the community physiotherapy service where she was contacted within 24 hours of the referral for triage and seen at home for her initial assessment five days after her referral. Struggling with her mobility, Florence started her treatment with the physio team which included advice and reassurance, along with a home exercise programme to increase strength, improve balance and mobility and prevent further falls in the future.

She achieved all of her goals and was discharged from the service one month later, after returning to her normal level of being independently mobile with a zimmer frame.

Florence’s daughter Patricia, said: “The community physiotherapy service have been very good with Mum. She has come along a lot with her balance and it was good that the service came to us as I wouldn’t have been able to get her to the hospital for an appointment.

“Previously Mum couldn’t stand or balance, but now she is walking with a frame. Laura the physio also showed me how to walk with her and left us an instruction sheet for her exercises so that we knew what to do.

“Mum was referred very quickly into the service and I know that they are there to help us in the future if we need them.”

Tracy Walker, rehabilitation service manager (community stroke service, falls service, physiotherapy service), said: “The community physiotherapy team set treatment plans with patients to work towards achievable, functional goals that aim to improve quality of life and independence. We aim to provide this in a responsive time, based on clinical needs.

“Nationally the wait for access to community physiotherapy services varies from around one to 27 weeks for assessment for routine appointments. The majority wait for between four to eight weeks nationally which highlights that our service is performing at a high level.”

“I’ll play if you play” say physio staff

A GROUP of physiotherapists from Fairfield General Hospital put together a team to take part in a recent charity netball event in support of Bury Hospice.

The event was organised by I Will If You Will, who are a movement in Bury aimed at encouraging more women and girls to get active and is delivered by Bury Council. The event was aimed at women who were new to netball and was held at Phillips Park High School

Lorraine Ogbonmwan who was nominated team captain, said: “When we heard about the event, many of my work colleagues were really keen to have a go. Most of us haven’t played netball since we were at school and for some of us, this was a long time ago!

“Bury Hospice is such a good cause that we decided to put our team (the PAT Physio Hot Shots) together. We did a little practicing in our lunch breaks and had a really fun time on the day. It was a great team building opportunity and we are planning to continue to enter more work team activities in the future.”

The physiotherapy service are partner of I Will If You Will and signpost many of their patients to community activities in order to help them get more physically active.
Pennine Acute Trust supports mum in her campaign for more awareness around abusive head trauma

THE Pennine Acute Hospitals NHS Trust is supporting a mother who is campaigning to get more awareness around abusive head trauma (AHT) in children.

AHT or shaken baby syndrome is a severe and preventable form of child abuse that results in life changing consequences. It happens after a baby or infant is shaken violently with the result that there is bleeding on the brain, blood clots and/or damage to the eyes. All victims suffer serious health issues as a result of being shaken violently and these can include blindness, deafness, brain damage and paralysis. Sadly, one in every four babies who suffer an AHT, die.

Huddersfield mum, Joanne Senior, spoke of her experience of AHT to over 85 multi-agency staff including nursing and medical staff, community nursing staff, representatives from health visitors, social care and the police, who attended a master class at North Manchester General Hospital on abusive head trauma (shaken baby syndrome): early recognition.

Also speaking at the event was Professor Alison Kemp from the Institute of Primary Care and Child Health, Cardiff University School of Medicine. She spoke about the clinical features of abusive head trauma and about the tool that she is developing with PhD student Laura Cowley which will help clinicians determine the accuracy of their diagnosis. Alison is well published and has an international reputation for her work in recognition and assessment of children with suspected child abuse, head injuries and burns, and cardio-pulmonary resuscitation in children.

The multi-agency event was organised by the safeguarding team at Pennine Acute so that staff could hear about the latest clinical features relating to the recognition and diagnoses of AHT and also hear about the importance of recognising early signs of stress such as difficulties in coping with a crying baby, in an effort to help prevent babies being shaken.

Dr Suzanne Smith, Assistant Director of Nursing (Safeguarding), said: “Prevention and recognition of abusive head trauma is not high profile in the UK, and falls a long way behind that of the USA and Canada. Hosting this event is the start of what I hope to be a Greater Manchester wide campaign to improve how we raise awareness about AHT, how we can help prevent it happening by helping parents and care givers to cope with babies who cry excessively and how we can be more confident in diagnosing and referring cases of AHT that come to our attention.

“I will be travelling to the USA and Canada later in the year to find out more about how we can make a difference in this field as part of my Winston Churchill Travel Fellowship. Hearing the experiences of Joanne Senior at our seminar was a powerful reminder of the importance of supporting families where there has been a victim of AHT and who continue to live and care for the children who survive.

“In the North East sector of Manchester alone we have had four babies who have suffered abusive head trauma, resulting in either life-long severe disability or death.”

Charlie also attended the event with his stepdad Alan. He managed to steal the show when he announced that instead of suffering from a cold, it was ‘man flu’!

For support on AHT go to www.charleesangelsfoundation.co.uk

Pictured at the event, left to right, are Dr Beena Padmakumar, Named Dr: Child Protection; Dr Suzanne Smith, Assistant Director of Nursing (Safeguarding); Professor Alison Kemp, Professor of Child Health and Honorary Consultant Paediatrician, Cardiff University School of Medicine; Laura Cowley, PhD Research Student, Cardiff University School and Dr Nadeem Jilani, Named Dr: Child Protection.

Joanne and Charlie’s story

JOANNE spoke about her son Charlie who had been shaken violently at 15 weeks old by his father. Charlie, who is now nine years old sustained bleeding on the brain and behind the eyes and has been left with severe brain damage and is virtually blind. He will need 24 hour care of the rest of his life.

When Charlie was first taken to hospital Joanne had no idea how he had sustained his injury. She said: “The morning after Charlie was admitted to hospital, two child protection officers said that they would have to interview me and Charlie’s father, Paul, separately. I was horrified that they could think one of us could have hurt Charlie. A week later I was told by my social worker that something had come up in Paul’s past. It was clear from then on that Paul was responsible for Charlie’s injuries and it then emerged that he had a previous conviction for GBH. He eventually admitted that he was guilty and was sentenced to four years, although he served just two years.”

As Joanne was completely unaware of Paul’s past, she has since campaigned to allow people to check their new partner’s history to ensure that children are not put at risk. She has appeared on the BBC1 Panorama programme on shaken baby syndrome and has done an enormous amount of work for the NSPCC and their Coping with Crying campaign.

She continued: “If we can just make someone stop and think for a second. It won’t harm a baby to be left crying for a few minutes, but a few seconds can be all it takes to cause a life-time of damage.”
**New bedside pressure monitoring system on trial**

The Royal Oldham Hospital is trialling a new bedside pressure monitoring device which has the potential to significantly reduce the incidence of pressure ulcers (bed sores) in patients.

The system on trial at ward F10 general medicine at The Royal Oldham Hospital, uses a pressure sensing mat filled with thousands of tiny sensors to show where patients are experiencing areas of high pressure when resting in bed.

This information is sent to a monitor attached to the mat which shows areas of high pressure as red and orange, and lower pressure areas as green and blue.

Carers can reposition the patient using small ‘micro-movements’ to reduce pressures dramatically, which is particularly effective for people where full body repositioning or even turning may be restricted.

Alarms can also be set as reminders for carers to check if a patient needs repositioning or not.

The Monitor Alert Protect (M.A.P) system on trial is produced by Sidhil and costs in the region of £5,000. Only two other Trusts in the country use the system at present. The open-ended trial is initially running for two months, during which time the Trust will assess its effectiveness.

If the Trust does decide to purchase the equipment, it would be used for training purposes and on high risk patients.

Reducing the incidence of pressure ulcers plays a vital role in improving outcomes for individuals as well as reducing the costs associated with treatment.

Charlotte Dent, quality matron for medicine at Pennine Acute, said: “Trialling this new high tech piece of equipment is exciting and highlights our team approach at The Royal Oldham Hospital to consistently use best practice to improve patient care. We are continually striving to reduce hospital harms to our patients and this is seen in the enthusiasm the team on ward F10 have by showing their commitment to reducing pressure ulcers and embracing the evaluation of the MAP system.”

Figures from Health Service Monitor in 2013 suggest that the prevalence rate of pressure ulcers in healthcare environments is 4.7%. Quite apart from the unnecessary suffering caused, the daily costs of treating a pressure ulcer are estimated to range from £43 to £374.

**Pictured: Pauline Abraham, ward manager at The Royal Oldham Hospital.**

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**SpeakInConfidence**

**Confidential service for raising concerns**

ON 24 December 2015, the Trust launched the SpeakInConfidence, a system that allows staff to have an anonymous conversation with management in the Trust to raise ideas, issues and concerns.

The system has been set up to supplement the current channels open to staff to raise issues with either their line manager, staff representative or use the whistleblowing line.

This service allows staff to anonymously raise issues about the service we are providing but whereas the whistleblowing line is one way, this allows a two way email exchange, which allows managers to ask for more details about the concern and importantly give feedback to the person raising the issue.

Part of this process was to auto enrol everyone onto SpeakInConfidence so you would have an account created for you and would receive an email with login details. If you have not received an email with your login details please email Catherine Gardner at catherine.gardner@pat.nhs.uk who will arrange login details for you.

Staff can choose to raise their concerns with a number of managers which include the executive directors, assistant chief executive, the deputies to the executive directors and the counter fraud manager.

The Trust will never know if you have used SpeakInConfidence and your identity will never be revealed to us. You can find more information on SpeakInConfidence’s website http://support.workinconfidence.com/knowledgebase/information-for-individuals/ or send an email to help@ speakinconfidence.com

The Trust has set up a webpage under the Healthy Happy Here Programme which can be found at http://nww.pat.nhs.uk/corporate-departments/HR/speakinconfidence.htm

We hope that you find the system a helpful addition to other channels that are available to staff for raising concerns. Further information is available at http://nww.pat.nhs.uk/corporate-departments/Corporate%20Services/whistleblowing.htm

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**In the news**

**6 May 2016**

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**Pictured: Pauline Abraham, ward manager at The Royal Oldham Hospital.**
Focus on dementia
Awareness event held

THE Trust in partnership with Pennine Care NHS Foundation Trust, hosted a free dementia talk in April at Fairfield General Hospital.

Fifty-three people attended the event to learn more about one of the world’s most common illnesses.

Pennine Care consultant psychiatrist, Dr Udaya Gammanpila, and Janice McGrory, dementia nurse consultant from Pennine Acute, gave attendees the opportunity to find out more about dementia and the support available for people in our hospitals and communities, including anti-psychotic prescribing and other treatment options. At the end of the session, people had the opportunity to ask questions.

Dr Gammanpila explained the different types of dementia and how it can lead to delirium, which can have devastating consequences to patients and their families. There is no cure for dementia, but there are anti-psychotic treatments available to delay the cognitive symptoms.

Sister Julie Archibald displayed two Reminiscence Pods (Rempods) of a garden shed and corner shop used at the Oasis medical unit at Rochdale Infirmary, and described how pop-up RemPods are helping to change the quality of life for people with dementia by turning any care space into a therapeutic and calming environment.

The feedback received from the audience was very positive with comments received including: “An excellent talk, very informative,” and “Very good overview of the subject, including services. Great to have opportunity to ask questions.”

North Manchester Nurses’ League
REUNION AND AGM

If you work or have worked at North Manchester General Hospital, Ancoats, Jewish, Northern or Monsall hospitals, everyone is welcome to attend on 4 June, from 10am to 4pm in the post graduate centre, North Manchester General Hospital.

Lunch is £5, but please pre book for catering purposes. To reserve your place, contact Mary Varey on 0161 6653190, 07956407906 or rickandmaryvarey@hotmail.com

Diary dates

12 May - National Nurses’ Day
12 May - Bowel cancer screening talk with Dr Roger Prudham. 1.00pm to 2.00pm, education centre, Fairfield General Hospital
8 June - Head and neck talk with Mr Andrew Baldwin and Dr S Jayaram. 2.00pm to 3.00pm, Postgraduate Medical Centre, North Manchester General Hospital

North Manchester midwife wins top midwifery award

A MIDWIFE who works on the postnatal ward at North Manchester General Hospital has won one of the UK’s top midwifery prizes.

Jenny Brown has jointly won the RCM Members’ Champion Award at the Royal College of Midwives (RCM) Annual Awards.

As an RCM steward Jenny has been recognised for demonstrating a positive and professional attitude and in promoting the benefits of RCM membership.

Jenny has organised many study days for members, all of which contribute to better care for mothers and babies at the Trust.

Jenny was presented with her award at the Royal College of Midwives’ Annual Midwifery Awards at a ceremony in The Brewery, London. The ceremony was hosted by journalist and broadcaster Kate Silverton.

She said: “I’m overwhelmed to receive the award and would like to thank my regional officer for all her help and support as well as the nomination.”

Helen Howard, interim divisional director of midwifery at Pennine Acute, said: “I am delighted for Jenny who has worked hard in her role as RCM representative. A close working relationship with the RCM is crucial for effective working as a maternity service and I look forward to that continuing going forward. Jenny should be very proud of her achievement.”

Cathy Warwick, chief executive of the Royal College of Midwives, said: “This award celebrates the work of our workplace representatives and their value to the workplace and our members. In Jenny we have a wonderful example of this. She never hesitates to find time for the RCM and our members. She is truly an asset to her Trust, the profession and the RCM.

“Her commitment and enthusiasm are appreciated by the RCM, and I know, by their colleagues who have benefited from it. I congratulate her heartily.”

Pictured left to right: Stephen Cavalier, chief executive of Thompson Solicitors the award sponsors; Jenny Brown, midwife at Pennine Acute; Cathy Warwick, RCM chief executive and Kate Silverton, broadcaster and event host.

Pics are credited to RCM/Carmen Valino

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Have you been briefed?
Team Talk takes place once a month and is a way of updating you about the latest news from the Trust.

APRIL TEAM TALK

Trust leadership

ON 22 March a series of special Team Brief meetings were held across each site to announce the appointment of Jim Potter as chairman and Sir David Dalton as chief executive of the Trust from 1 April 2016. Both Jim Potter and Sir David will take on the chairman and chief executive responsibilities as well as continuing their positions at Salford Royal. Together they will bring their experience, expertise and track record of patient safety, strong operational performance and leadership which will help the Trust to accelerate its quality improvement journey and to ensure improvements in performance.

The Trust will continue to build on the progress made over the past two years, particularly in relation to Raising the Bar on Quality, standardisation of how we operate and manage our services and aligning our clinical transformation plans to the place based locality plans for health and social care in line with Greater Manchester devolution. Both Jim and Sir David will also play a significant leadership role in the Single Service Review for the City of Manchester (alongside Central Manchester NHS Foundation Trust and University Hospitals South Manchester) and also in the implementation of Healthier Together.

During the next three months a review will be carried out across the Trust focused on governance arrangements and finance. There will be opportunities for staff to contribute to this work through a number of focus groups, a staff survey and during visits to services.

Commenting on the announcement, Sir David said: “I am pleased to be able to support another Greater Manchester Trust during this period of change for the region, one of the aims of which is to enable a better, more co-ordinated way of providing local health services, consistent with the concepts of standardisation of best practice delivered at scale and the potential of creating a Group of NHS organisations.

“The senior team at Salford and I are looking forward to working with the staff at Pennine to help deliver the best outcomes for patients. We are respectful of the major improvements which have been made over recent years at Pennine and we will engage with staff and stakeholders to ensure that we pursue changes consistent with the plans in each locality to secure safe and reliable services for the populations served by the Trust.

“I am really keen to meet and engage with as many staff as possible across all of our hospital, community and integrated services. We all have a collective and individual responsibility and a unique opportunity to rise to the challenges and aspirations set out as part of GM Devolution. We need to work collaboratively and progressively with local commissioners and health and social care partners to improve services in each locality.”

GM Devolution takes charge of health and social care

GREATER Manchester took full control of the budget and decisions for health and social care services under ‘GM Devolution’ from 1 April 2016. The 37 health and social care organisations across Greater Manchester (CCGs, provider Trusts and local authorities) now have the freedom to transform the way they work and provide services and make improvements to the health and wellbeing of the 2.8m people who live across Greater Manchester.

Some of the proposed new ways of working together across Greater Manchester are contained within a final draft five-year strategic plan for the area. Staff and the public are invited to read and give feedback on this plan via the GM Devo website at http://www.gmhealthandsocialcaredevo.org.uk/the-plan/

Our CQC Chief Inspector of Hospitals inspection

A TEAM of approximately 60 inspectors visited the Trust and focused on hospital services from 23 – 26 February and on community services from 1 – 3 March 2016. The CQC inspectors acknowledged the huge amount of work completed over the last two years and the progress that has been made in improving clinical services and strengthening governance arrangements in the Trust. The unannounced follow-up inspection took place on 17 March.

In their initial feedback CQC highlighted many areas of good patient care, particularly in community services. Where the CQC has challenged the Trust, the executive team has responded positively and quickly. Over the last few weeks the new Decision To Admit (DTA) policy has been implemented, a combined North Manchester / Oldham urgent care consultant level rota has been introduced, paediatric bed capacity has been reduced to reflect staffing numbers, an interim dedicated medical rota has been put in place for the HDU at Oldham (with plans for a substantive rota being finalised), equipment maintenance arrangements have been amended and made more robust and a number of changes have been made in maternity services in relation to staffing escalation and theatre support for c sections.

The CQC formal report and rating will be provided in 2-3 months. We are aware that there are rumours circulating that the Trust has been placed in special measures – this is not true. We have taken a number of immediate actions following the inspection and these are highlighted above.
A typical day

There’s not really a typical day for me as my role is so diverse. However most days start by responding to emails and any learning disability information sharing forms sent by staff if they have a patient with learning disabilities on their ward or department.

I receive numerous telephone calls asking for advice and support around topics such as how to support somebody who has complex learning disabilities and understanding mental capacity assessments and best interest meetings.

I may need to visit a patient or carers on one of the Trust sites and I may also have to attend a meeting, as an important part of my role is to have strong links with carer and advocacy groups and health and social care community learning disability teams across the boroughs.

Ruth Bell works within the safeguarding team at Trust Headquarters at North Manchester General Hospital.

She has been in post for just over six months and her role is to offer support to adults and children with learning disabilities, their parents and carers, and Pennine Acute Trust staff to ensure that our services are equitable, accessible and person centred.

What are the highlights of your job/service?

There are many highlights to my job; supporting people with learning disabilities and their carers and developing the service with them, being able to work with diverse staff teams, giving support and advice to empower staff to give a person centred service to some of our most vulnerable patients. I also really enjoy offering awareness raising training to all disciplines of staff.

What word best describes your job/service?

Uplifting.

What aspect of your job/service is the most rewarding?

The most rewarding aspects of my job are helping some of our most vulnerable and complex patients to have the treatment they need in hospital by conducting home visits, sometimes with colleagues (recently with a consultant) to find out what their support needs are and how we can meet them.

Also when parents and carers tell me that hospital staff have really listened to them and the person they care for, that they have read their Traffic Light Hospital Passport and made any reasonable adjustments that the person needs, to make their hospital stay the best it can be.

As the learning disability lead for the Trust it is my role to raise awareness, through training and other activities, about supporting people with learning disabilities and autism in hospital. It’s important that all staff have the opportunity to access this information and the biggest challenge for me is finding the best and most effective ways of engaging with them.

A typical day

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Manchester Single Hospital Service Review

THE City of Manchester Single Hospital Service Review was established in January, with a remit to look at the benefits that could be achieved from closer alignment between the hospital services in Manchester, and how these could most effectively be delivered. Hospital services in Manchester are facing many challenges around staffing, workload pressures and financial viability, and standards of care are not consistent across the city. The hospital trusts and the commissioning organisations have agreed to look at whether closer collaborative working can help to address these problems.

This independent review is being undertaken by Sir Jonathan Michael and the first stage, which focuses on the identification of benefits, has just been completed. In the Stage 1 Report, Sir Jonathan has identified a wide range of very significant benefits that a Single Hospital Service model could deliver in areas such as quality of care, patient experience, and research and innovation.

The review has involved extensive engagement with key stakeholders including a large number of clinicians from each hospital trust, GPs, patient groups and commissioners. The recommendations in the report are, however, the independent views of Sir Jonathan.

The scope of the review included University Hospital of South Manchester NHS Foundation Trust (UHSM), North Manchester General Hospital (run by Pennine Acute Hospitals NHS Trust – PAHT) and Central Manchester University Hospitals NHS Foundation Trust (CMFT).

The Review looked in detail at a group of eight ‘exemplar’ services, including cardiac services, respiratory services, critical care, radiology (including interventional radiology), secondary care paediatrics, obstetrics, infectious diseases and rheumatology. A number of different ‘single service’ models were considered for each of these specialties, ranging from the adoption of common protocols and clinical pathways, through hub-and-spoke arrangements, to rationalisation in to one centre.

The key recommendation from the report is that a Single Hospital Service model should be developed within Manchester to deliver the benefits identified in the first stage of the Review. It is proposed that the Single Service Review should go on to consider the appropriate organisational/governance arrangements to deliver these benefits in its second stage.

Commenting on Sir Jonathan’s report, Sir David Dalton, Chief Executive at Pennine Acute, said: “We welcome this first stage independent report from Sir Jonathan Michael which has involved commitment and contribution from a number of clinicians across all three NHS trusts. It is clear that we need to organise hospital care so that it is provided to the same consistently high standard across the City of Manchester and across the whole of Greater Manchester. There is a real need for us to work together so that we can drive consistency in the way hospital services are provided to improve care standards and clinical outcomes for patients, and avoid unnecessary service overlaps and duplication. It will be important that benefits to hospital services within the City of Manchester are achieved at the same time as safeguarding the services of surrounding hospitals. This is an opportunity to enable a better, more co-ordinated way of providing local health services, consistent with the concepts of standardisation of best practice, delivered at scale.”

The Stage 1 report is available on the Manchester City Council website at www.manchester.gov.uk under Health and Wellbeing Board meetings 27 April 2016. The Stage 2 report and further recommendations are expected to be published and considered by the Manchester Health and Wellbeing Board on 8 June 2016.

Developing ward managers with specialist programme

IN autumn 2015, the trust’s chief nurse, Gill Harris, sponsored the Pennine Ward Managers’ Leadership Development Programme.

At Pennine, our ward/department managers are critical leaders and play a pivotal role in ensuring that we provide an environment to enable delivery of safe, effective and person centred care to our patients. In doing this and offering the best possible patient experience, we need to invest in the ward managers to help this excellent delivery of care to happen.

The Pennine Ward Manager Leadership Development Programme has been designed in conjunction with Gill Harris and Kimberley Salmon-Jamieson, deputy chief nurse, with a view to the successful development of Pennine’s ward managers. The programme focuses upon the development of the individual within the context of the challenges within their ward manager role and is aligned to the Trust’s leadership strategy and Raising the Bar on Quality.

Maura Moss, organisational development manager, said: “The programme launched in February 2016 and will be completed by November 2016 over a series of four cohorts, each consisting of four days by over 80 ward managers. Working with Salford University our ward managers will use reflective practice techniques to action their agreed projects to improve quality and patient experience. “Additionally each manager will participate in a clinical simulation experience which is undertaken using a range of different clinical and ethical scenarios supported by the L&OD’s clinical skills and simulation team, subject matter experts.

“Senior nurses have agreed to actively support the Pennine Ward Managers’ Leadership Development Programme with input and facilitation on learning days and appropriate follow up to monitor project progress.”
Easter delivery for young patients

THE generous staff and customers of Harvey & Thompson Pawnbrokers in Cheetham Hill have once again donated Easter treats for young patients at North Manchester General Hospital.

The chocolate eggs were delivered to the children’s ward in time for the Easter weekend.

Mr Mirza said: “We at H&T Pawnbrokers are passionate about supporting the local community and donating to the children’s ward at North Manchester General is something we are delighted to do. Thank you to all our customers for your generous donations!”

The Trust’s charitable fundraising co-ordinator, Shelley Owen, said: “I was thrilled when Mr Mirza contacted me to say they would like to support the Trust again this year by organising an Easter egg collection in store. On behalf of the Trust may I take this opportunity to thank the whole team at H&T Pawnbrokers and their customers for giving so generously. Their donation has brought a big smile to the faces of our patients and staff on the ward.”

Pictured are Mr Mirza and his colleagues Chowdhury and Georgie Macfarlane.

New Trust volunteers’ service

Do you have volunteers in your department? Would you like to establish a new volunteer role into your work area?

On 1 June 2016, the Trust will be launching the new volunteers’ service across the four hospital localities and community services.

Volunteers play an important role in our Trust by providing non-clinical support to our healthcare professionals in our hospital wards and departments. Anyone over the age of 16 years can be a volunteer.

Volunteers come from all walks of life and represent the diversity of the local communities we serve. We welcome anyone to bring their experience to our volunteer services programme.

As part of the launch we will be hosting some drop-in volunteer information sessions on:

- Wednesday 25 May - Post Graduate Centre, North Manchester General Hospital from 1pm to 4pm
- Thursday 26 May - Education Centre, Fairfield General Hospital from 1pm to 4pm
- Friday 27 May - Education Centre, The Royal Oldham Hospital from 9am to 12 noon
- Wednesday 1 June - Education Centre, Rochdale Infirmary from 9am to 11am

The sessions will be on a rolling programme basis, lasting 30 minutes.

The aim of the sessions is to provide people with:

- Information about what our volunteers can offer wards and departments.
- Information on the new volunteer kinetics database, whereby staff areas will be able to source and advertise their own specific volunteering opportunities on our new database.
- Information on a new logging on procedure to record time and attendance at hospital sites for volunteers.

If you, or you know someone who may be interested in becoming a volunteer, why not pop along to one of the sessions and speak to a member of the volunteer service team.
Thought for the month

by Rev Ian Inglis

WE live in interesting times, changes are in the wind, people feel unsettled and life remains for many staff busy, busy, busy. In the hurly-burly of life we don’t always make time to sit and reflect, although this is increasingly recognised by most professional healthcare bodies as something worthwhile and beneficial to our practice and experience.

However, even though we don’t always have time to sit down and reflect (individually or with colleagues) many tend to take moments to look back at things that have happened during the day, perhaps on the journey home, in the shower or trying to fall asleep. Incidents (good and bad) may rise to the surface, and we mull over what we did. A simple exercise is to ask three questions (the ‘What Model’): What happened? So what? What now?

Sometimes people think spiritual care is just about ‘religion’, and though that is a specialism for the chaplains, we do a lot more in terms of emotional and broader spiritual care. Many people use the chapels, prayer rooms and other spiritual spaces to pray, to reflect or just find a bit of ‘head space’. When individuals (patients, loved-ones or staff) are concerned about things they often find it helpful to talk over those worries with someone who can bring a bit of perspective. Whilst reflection can be done by oneself, it really can be helpful to have someone else. As the poet Robert Burns said:

“O would some power the gift to give us; To see ourselves as others see us.”

Another way of saying it is, “The best mirror you’ll ever have is a good friend.”

So if we can be of help, or if you just want to use one of the chapels or prayer rooms to sit and reflect, please feel free to use the resource of the spiritual care team.

End of life volunteers to support dying patients

THE end of life care team has recruited eight volunteers to support dying patients and their carers on wards.

Every year, approximately half a million people die in England. For three quarters of people, death is not sudden but is expected, and many of them may benefit from having an end of life care volunteer to add to a quality experience.

The Trust’s end of life care volunteers show kindness and compassion and have a desire to support this group of people. They will wear uniform and a name badge stating only ‘Volunteer’. They will integrate into the ward team and we ask that wards that have end of life care volunteer support provide a supportive and welcoming atmosphere for them.

The role of the end of life care volunteer may involve the following:

- Offering assistance with eating and drinking following advice from nursing staff and after undertaking Trust training.
- Washing hands, face and combing hair.
- Hand massage.
- Showing significant others quiet areas, if available; providing maps of the hospital site.
- Sit with the dying person if they are alone.
- Sit with the dying person to give significant others a comfort break.
- Offer/provide comfort packs which are currently in the process of being purchased.
- Using the butterfly symbol to try and maintain a calm environment.
- Liaising with nursing staff at the beginning and end of each shift.

As well as Trust mandatory training, the volunteers have undertaken specific end of life care training with the end of life care team.

Pictured are new volunteers (L-R) Margaret McKenzie-Lunn, Margaret Clarke and Marie McLaughlin at their end of life care training session.

If you would like more information on the end of life care volunteer scheme or would like to be a part of it, please email endoflife.care@pat.nhs

Healthcare science staff celebrate awareness week

HEALTHCARE science staff from the pathology department at The Royal Oldham Hospital celebrated Healthcare Science Week in March with an information stand at the hospital.

With posters and equipment on display, staff were also on hand to describe the work performed by healthcare scientists in pathology, and promote healthcare science as a career.

Jane Fielding, organisational lead scientist at Pennine, said: “Healthcare Science Week was a great opportunity for us to celebrate the amazing work of all healthcare science staff at Pennine. The chance to get out in the community and celebrate our profession is fantastic. People working in healthcare science don’t often get the opportunity to talk about the work they do and the difference they make to people’s lives. I love my job and being able to use science to improve the care we provide to patients every day in the NHS.”

Pictured, L to R: Naeema Ansari, microbiology; Hugh Mills, biochemistry; Hawanat Adams, microbiology; Colin Hylton, microbiology and Delia Gallagher, biochemistry.
Hypnobirth classes to learn about gentle birth techniques

COUPLES from the Oldham and Rochdale areas who are expecting a baby can now learn about a birthing technique which uses self-hypnosis and relaxation.

Seventeen community midwives from The Royal Oldham Hospital have completed a hypnobirth diploma, funded by The Royal College of Midwives, and have now set up evening classes at children’s centres in the community to support couples to use the hypnobirth techniques during labour and birth.

Community midwife Keri Alldritt, said: “The hypnobirth technique is a complete education programme that teaches simple but specific self-hypnosis, relaxation and breathing techniques.

“Couples can be taught how to use self-hypnosis to induce deep relaxation during the labour and birth of their child. The technique is all about the couple supporting each other, using exercises and positive words to enhance the process of birth. Massage is also used on the mum-to-be to release endorphins which are the body’s natural analgesia which help with pain relief. By using visualisation exercises and positivity, the couples feel more confident, calm and positive as they face the birth.”

Ten couples have already signed up to the four week course which is led by a midwife. During the sessions which last for two hours each, the couples receive a workbook to read at home, a hypnobirth book and CD.

Keri added: “As midwives, my colleagues and I were interested in supporting couples with natural birth techniques to achieve a positive birth experience. That is why we undertook the diploma which was taught by Katharine Graves who has taught the hypnobirthing antenatal programme in America, Kuwait, Ireland and Sweden. She holds a teacher training certificate, and is a member of the Royal Society of Medicine’s Maternity and Newborn Forum, The Association for the Improvement of Maternity Services (AIMS) and an associate member of the Royal College of Midwives.

“The technique can be used in all environments either at home, the birth centre at The Royal Oldham Hospital or on the labour ward. Working with couples to enhance and empower a drug-free labour, which results in a more gentle birth is a very exciting prospect.”

The first group of parents-to-be who have undertaken the course (pictured above) have praised the hypnobirth classes. They said: “We have really enjoyed the sessions led by Keri. They gave us more understanding about the release of hormones to support our birth and the gentle environment we need to maintain.”

The sessions are suitable for women over 20 weeks pregnant.

For more information on the sessions contact Marie Clayton at marie.clayton@pat.nhs.uk or speak to your community midwife.
Educating patients and staff with health training boards

THE Urgent Care Centre (UCC) at Rochdale is a lucrative learning environment for service users and staff alike.

Over the last 12 months the service which sees and treats on average 4,500 patients a month has been working towards maintaining a programme of education and health promotion within the department. Sister Sam Reece who is a nurse practitioner within the UCC expanded on the idea of monthly education boards, and with the support of acting lead nurse Lou Harkness-Hudson, has created a 12 month programme of education run from the UCC.

Organised and implemented by the UCC education group, the programme presents health promotion boards in the adult and paediatric waiting rooms and the specially designed cubicle for teenage service users. The boards are aimed at the individual age groups and designed so they can be understood by both adults and children, but with the same message being relayed. The group have also worked in partnership with Big Life and researched national awareness days/months to plan the calendar.

Sister Reece said: “Setting up the group and working collaboratively with our colleagues across other divisions and services has provided an exciting new learning opportunity for our team. Running alongside the health promotion are training sessions for staff not only in UCC, as now it is an established programme, we have rolled out sessions and board presentations to our colleagues in the Clinical Assessment Unit (CAU), The Oasis Unit, Wolstenholme IMC and PIU. Next month we will be inviting staff from the Floyd Unit, the eye service and Tudor Court to benefit from this resource.”

Sister Julie Archibald, CAU manager said: “The development of this training resource which has been initiated and maintained by the UCC team has been fantastic for my staff. We are very grateful to Sam and the emergency department team for inviting us to be part of this excellent resource.”

So far this year the group have presented health promotion boards, teaching sessions and education boards on: Love your liver; TIA/stroke symptoms/risk factors; cervical/ovarian and prostate cancer and allergies and rashes. Teaching session facilitators have included: Cath Curley, stroke specialist, Fairfield; Anne Livesey, alcohol practitioner, safeguarding team; Deirdre Flanagan, children’s alcohol practitioner, safeguarding team; Dr Mark Coates, clinical lead, UCC and Dr Steve Derbyshire, consultant UCC.

Lou Harkness-Hudson, acting lead nurse for integrated and community services has praised the staff for this fantastic on-going resource which keeps improving month after month. Lou said: “Not only are we providing on-going education for our staff which is supportive to them, but we are improving our patient experience and maximising the benefit of in-house health promotion to ensure that we have no missed opportunities for our local population.

“I would like to congratulate everyone who is part of this growing initiative and I would like to thank our colleagues in other services who have facilitated teaching. It is hoped that this initiative will support future work with staff development.”

If anyone would like to attend the sessions or facilitate teaching please contact samantha.reece@pat.nhs.uk

Occupational health and wellbeing service

Help us to help and support you

DNA (Did Not Attend) rates for both management referral and counselling appointments continue to increase across the Trust.

This has a significant effect on the length of time staff and managers have to wait to access our service and the impact of this is a delay in managers obtaining the advice, support and guidance needed to assist them in supporting staff with health related issues, to either remain in work or return to work early following ill health.

The table below provides data on DNA rates so far for 2016, with March resulting in 15.4% of appointment times wasted.

<table>
<thead>
<tr>
<th>Monthly DNA rates</th>
<th>Management referrals</th>
<th>Counselling</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 2016</td>
<td>40</td>
<td>24</td>
<td>64</td>
</tr>
<tr>
<td>Feb 2016</td>
<td>33</td>
<td>26</td>
<td>59</td>
</tr>
<tr>
<td>March 2016</td>
<td>58</td>
<td>32</td>
<td>90</td>
</tr>
<tr>
<td>TOTAL</td>
<td>131</td>
<td>82</td>
<td>213</td>
</tr>
</tbody>
</table>

Occupational health and wellbeing is a confidential service which operates with the use of information to a third party only, with the consent of the individual, unless there are exceptional circumstances eg in the public interest.

Michelle Waite, operation manager for Mediscreen occupational health and wellbeing service, said: “Our role is to provide impartial, appropriate, accessible and timely occupational health and wellbeing services to both employees and managers. The aim of the service is to play a key role in the delivery of safe, effective and efficient patient care through promoting and protecting the health of staff.”

“Staff have a responsibility to attend occupational health service appointments as requested and necessary to support their health and wellbeing. However where staff are unable to attend scheduled appointments it is important that the service is made aware at the earliest opportunity. This will enable appointments to be reallocated and assist with reducing the waiting times for staff accessing the service.”

For more information on the services available to both staff and managers please refer to the Trust intranet pages. Alternatively if you have any questions or concerns regarding your experiences of the services, positive or negative, please email michelle.waite@pat.nhs.uk
In the news

Minnie makes history with new MRI scan

BABY Minnie Macfarlane from Oldham made history when she was 11 days old.

She was the first baby at The Royal Oldham Hospital to undergo a landmark scan using new equipment which allows new born babies to have MRI scans.

Previously new born babies would have had to have been transferred to another hospital Trust if they needed a MRI scan at such an early age, but thanks to the investment in the neonatal MRI compatible monitoring, babies can now be scanned in the radiology department at The Royal Oldham Hospital.

As the hospital cares for high risk infants who are transferred to the level three neonatal unit, for therapeutic cooling to reduce the risk of brain injury, MRI scanning is helpful to assess the risk of any long term problems.

MRI imaging of babies is a more complex procedure than the imaging performed in adults. The scanning parameters need to be optimised to enable detailed imaging of the small and newly developing brain and extra protection must also be provided to the infant to protect their developing organs.

Baby Minnie paved the way and underwent a scan modelling the aptly named mini-muff ear protectors which protect the ears from the loud noise that the scanner makes.

Dr Bowden said: “The new service for scanning neonatal patients will greatly improve our assessment of babies at high risk of brain injury, and allow more detailed imaging for early diagnosis of problems without the need for a transfer to a different hospital.”

“Staff commented on what a model patient Minnie was. She did not need sedation as she slept soundly throughout following a feed.”

Dr Kandise Jackson, consultant radiologist at The Royal Oldham Hospital, said: “There are unique issues that must be addressed to develop an effective quantitative neonatal MRI technique, but through careful collaboration between the radiology department and neonatal unit we are now able to offer this procedure to those new born babies who need it.

“We were very impressed with the images obtained and we hope to be able to offer MRI imaging to our neonatal patients who require this.”

Minnie’s parents, Sophie and Adam, said: “It was such a relief for Minnie to be able to undergo this scanning procedure at The Royal Oldham Hospital rather than her have to be taken somewhere else in the north west for this procedure to take place. Being in the hospital we were familiar with, alongside the neonatal team who were directly involved with Minnie’s care was a great comfort to us.”

Pictured above left to right: Adam Macfarlane, Minnie’s father; Dr Lydia Bowden, consultant neonatologist and Yvonne Memory, advanced practitioner radiology. Minnie models the mini-muffs across.

Festival of learning 2016

ADULT Learners’ Week traditionally takes place each year in May. This year it’s not just a week – it’s a whole two months!

To celebrate the Festival of Learning throughout May and June, the learning and organisational development department are holding a series of events to engage with managers to showcase what we offer, and to find out what learning needs there are within the Trust. The Learning Needs Analysis event dates have been made available to managers from each division and directorate so we expect managers to come along and tell us what they need us to provide.

The L&OD department are also holding a series of road shows at the end of June at each of the hospital sites. Stands will be on the corridors, manned by our staff, so feel free to come along and pick up a leaflet, or ask any questions about your own personal development.

We have a large number of apprenticeships for existing staff on offer from health, business administration, customer service, to apprenticeships for laundry staff, porters and pathology staff. We also offer leadership and management courses, English and maths courses plus many more.

Further Information about the road shows will be made available in the weekly bulletin closer to June.

For more Information about any of our courses or qualifications please visit our Intranet site. For details about apprenticeships for existing staff please email Beverley.nixon@pat.nhs.uk or pam.earley@pat.nhs.uk for non-clinical apprenticeships.

National nurses’ day

NATIONAL Nurses’ Day on 12 May gives us the chance to celebrate our nurses, the vital role they play and acknowledge the contributions they make within our Trust.

To celebrate national Nurses’ Day the Trust will be asking our nurses “What makes you proud to be a nurse?”

There will be event stands up at each site, looking at nursing throughout the years, information on free to access courses and revalidation advice, along with gifts for our nurses.

If your team has organised something to celebrate National Nurses’ Day, share this at nmc.revalidation@pat.nhs.uk
Happy 50th Joanne
WISHING a very happy birthday to Joanne Bostock, senior management accountant for the division of support and corporate services, from all your friends and colleagues in management accounts.
Here’s to the next 50!

Farewell to Linda
LINDA Tuckis will be retiring from the Trust at the end of May after 26 years of service.
She has worked on a variety of wards over the years, including A&E at Rochdale, pre-operative assessment at Bury and Oldham, and is currently working as a clinical research nurse at Bury.
Linda will be having an ‘open house’ on her final working day, Friday 20 May, between 8am and 4pm in the clinical research unit (ward 19) at Fairfield. This will be an opportunity for her friends and colleagues to come and say their goodbyes.
Linda is highly valued by her colleagues and we are all sad to see her go, but we wish her well for a long and happy retirement.

Happy 50th Simon
HAPPY 50th birthday Simon Kaye from all in clinical research.
Thanks for all your support in the team, and for putting up with us ladies!

Well done
CONGRATULATIONS to sister Jackie Gunn from the urgent care centre at Rochdale and sister Josie Fletcher from the PIU and rheumatology hub who have both passed their non medical prescribing course. It is a massive achievement say your colleagues so well done from Lou and all your friends and colleagues.

Farewell Judith
THE clinical research team say a sad goodbye to Judith Muir and wish her the best of luck in her new post. Thank you for all your hard work, we will miss you terribly. Our loss is their gain.
See you at Clubbercise!

Happy retirement
FRIENDS and colleagues from radiology have said a fond farewell to Joan Mayall as she retired from the Trust in March.
Joan worked as a nurse from being 19, and has given 31 years of dedicated patient care in the Pennine area.
Her friends say that they and patients have been lucky to have her in their team in interventional radiology for the last six years as she has been very supportive of challenges to improve patient safety and experience.
Joan will be missed by everyone in the department as her smiles and openness encouraged wellbeing and respect amongst her colleagues. Her friends and colleagues wish her a long and happy retirement with her husband Brian; they have lots of dreams they want to fulfil, the first being the marriage of their daughter Helen to Joseph, in Spain in June.
Love to you Joan, from everyone in radiology.

Twice as nice for Tania
TANIA Harrop has got a double celebration on her hands as she notches up her 25th wedding anniversary and 50th birthday.
Louise, Karen, Hassan and Paul from decontamination and all the girls from G3 at The Royal Oldham Hospital would like to wish you a fantastic time as you celebrate. Get your feet up and relax on your week off xxx

Happy 50th Birthday
Happy 50th Simon
HAPPY 50th birthday Simon Kaye from all in clinical research.
Thanks for all your support in the team, and for putting up with us ladies!

Diane retires after 44 years in NHS
THE outpatients department at Fairfield are very sad to say goodbye to their friend and colleague, staff nurse Diane Thompson. After working for 44 years in the NHS they think that she deserves a long and happy retirement.
The department will seem a lot less windy somehow Diane! With love from all your friends in the main outpatients department at Fairfield.