Cry Freedom! (To Speak Up!)
A staff governor has been appointed the Trust’s “Freedom To Speak Up Guardian”, a new NHS post recommended by Sir Robert Francis in his report into the culture of raising concerns, published in February. Such guardians have responsibility for ensuring staff feel confident in raising concerns.

Jenny Edwards (pictured on the cover) has been seconded to work three days a week in the role. She said Colchester was one of about only 20 NHS organisations nationwide to have such a post.

“My ambition is to help establish an open and honest culture where all staff feel comfortable about putting their hand up to raise concerns and issues, no matter how big or small,” she said.

“It is essential that all matters raised are taken seriously and listened to, and never brushed aside. Nobody knows this Trust like the staff and I am confident that we can improve the quality of the care we provide and the experience of patients if we listen to what they say and, where appropriate, take action.”

Jenny will continue to work two days a week as UNISON branch secretary and will also carry on as a staff governor representing nursing and midwifery staff. During her secondment, she will give up her role as an associate practitioner on Stanway Ward. Chief Executive Frank Sims said: “The post is one that I am personally hugely committed to because it is imperative that we listen and engage with staff, and act on what they tell us. Jenny has the full support of the Trust’s board of directors in this vital new role.”

Call Jenny: ext 5300 or mobile 07919 298635. Email: raisingconcerns@colchesterhospital.nhs.uk

More on the intranet, via: bit.ly/1Ff2brt

About Mainstream
This edition is posted to our 6,289 public members at home as well as distributed to our staff at work (see back page). On page 10 is a form to complete and return about the healthcare services you are interested in. To get a free Mainstream monthly or contribute an item or a photo, see the back page.

The Trust made conditional job offers to 16 adult nursing and two child nursing branch students at a jobs fair on 5 November. The aim of the event at Anglia Ruskin University was to retain nursing students in Essex and offer employment to those qualifying in 2016. Dorothy Adetukasi, Professional Practice Lead (Education), said: “These nurses have been trained in Essex with the expectation that they will work for the NHS. With the shortage of nurses nationally and locally we need to increase our staff capacity through employing nurses we have invested in to return and contribute towards providing quality patient care.”

Jobs fair success

Join us... we’re recruiting!

All our jobs are on: bit.ly/nhsjobsEssex
Chief cardiac physiologist Hugo Nunes (left) and Dr Kare Tang, consultant cardiologist, are pictured inside the angio suite at Colchester General Hospital where a total of £90,000 has been invested in state-of-the-art equipment to monitor patients and keep them safe during heart procedures. It is the first time that the Toshiba/Fysicon equipment has been installed in a UK hospital and staff working in its angio suite anticipate visits from other hospitals which are considering making a similar investment. The equipment is monitored by a cardiac physiologist while cardiologists carry out one of three invasive procedures – an angiogram, fitting a pacemaker or a tranoesophageal echocardiogram (TOE).

Read the full story on our website, under “Latest News”:
www.colchesterhospital.nhs.uk

A vascular ward serving the people of east Suffolk, north east Essex and the Colne Valley has re-opened following a £670,000 transformation. The eight-week project at Colchester General Hospital significantly improved patient accommodation and resulted in new facilities which include a rehabilitation room, educational room and an operating theatre for minor procedures.

Wivenhoe Ward, which has 20 beds and is located on the first floor of the main hospital building, is now used only by vascular patients whereas previously patients from other specialties were also cared for there.

Pictured below are some of the many staff who work on the ward.

Read the full story on our website, under “Latest News”:
www.colchesterhospital.nhs.uk

Colchester General has become the first hospital in Essex to provide a new radiotherapy technique for patients with breast cancer. Deep Inspiration Breath Hold (DIBH) has been introduced for some women to minimise potential radiation damage to the heart during radiotherapy for breast cancer. The technique is suitable for women who have cancer in their left breast and whose heart sits particularly close behind the left breast and chest wall. Veronique Mackay is pictured above in the Radiotherapy Centre with Keir Williamson, specialist breast therapeutic radiographer, who, along with her colleagues, implemented DIBH. In the background are radiographers and radiotherapy physics staff, with consultant oncologist Dr Mukesh on the far right.

Read the full story on our website, under “Latest News”:
www.colchesterhospital.nhs.uk
How social media is being used to interact with people

The Communications Team use Twitter to engage more with users of the Trust’s services.

Several of the Trust’s Executive Team are on Twitter including:
- Chief Executive @franksims9
- Medical Director @angela_tillett
- Director of Nursing and Quality @StuttleBarbara
- Deputy Chief Executive & Chief Operating Officer @DrShaneGordon
- Director of Workforce @julesfryatt
- Director of Finance @DawnScreaid
- Divisional Director Medicine @CharlesBodmer
- Company Secretary @Tredaran

Our Tweets had 58,500 impressions over the 28 day period to 23 December.

Impressions are the number of times users saw our tweets. This is up 252.8% on the previous 28 days, due in part to the Executive Team tweeting.

Our tweet “Ta to #colchester ModnCasuals Scooter Club, & others present giving at Children’s Ward & Care of the Elderly wards pic.twitter.com/q1z6Q3OQZP” earned 3,098 impressions.

Tweeting a picture increases engagement and impressions by a factor of 10. Our tweet “Staff governor appointed as our Freedom To Speak Up Guardian Colchester General Hospital pic.twitter.com/rtVnWL1yzo” earned 1,457 impressions.

Legacy wall means that Essex County Hospital can live on at Colchester General Hospital.

A legacy wall has been created so that Essex County Hospital can live on at Colchester General Hospital. It is a montage of photographs (above) covering a 12m long wall in the reception and waiting area of the main outpatient department (pictured inset). Staff were asked to vote for their favourite photographs to be used.

The legacy wall in situ in the Outpatients area

Oral and Facial Multidisciplinary Network

For some time, specialist oral surgery and orthodontic services in Essex have been organised on an informal “hub and spoke” arrangement. These are no longer sustainable and a number of consultants have retired or are about to retire. NHS England wishes to see a clinically sustainable service model established which provides equitable services across Essex. They have approved a proposal to move to a formal hub and spoke model across four acute trusts in Essex. From 1 April, Mid Essex Hospital NHS Trust will be designated as the hub for these services and NHS England will have a single contract with them for the provision of these services.

Sarah Walker has been appointed as project manager to support the delivery of the new model which is under the responsibility of the South and Central Essex Acute Care Collaborative.

Sarah.Walker@meht.nhs.uk

Wheelchair loan

Five volunteers running the Wheelchair Loan Charity, currently based at Essex County Hospital, have loaned out 3,000 people with the free loan of a wheelchair. The NHS does not provide wheelchairs for people unless they have long-term conditions which necessitate permanent use.

Wheelchair Loan Charity says the scheme runs Monday to Thursday.

Our Trust was one of three chosen to be part of a Royal College of Nursing film that premiered at the Chief Nurse Officers summit in December. It focuses on the contribution that nurses and other clinical staff can make to support the procurement of clinical products and devices. The film crew interviewed Liam Horkan (above), our clinical procurement nurse specialist, who said: “It’s not about the cheapest product; it’s about getting the right product for our patients.”

Watch it here: https://youtu.be/uecEnKKEo_U

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Wheelchair loan scheme

Five volunteers running the Wheelchair Loan Charity, currently based at Essex County Hospital, have helped more than 3,000 people with the free loan of a wheelchair. The NHS does not provide wheelchairs for people leaving any hospital unless they have long-term conditions which necessitate permanent use of a wheelchair. The scheme solves the problem when one is required to cover emergency or short-term need. Over 100 self-propelling and transit wheelchairs are available for loan, including smaller ones for children. They can each be equipped with additional equipment such as leg elevators or cushions. All the wheelchairs, which are in excellent condition, are aluminium and can be folded for transport in a car. The normal loan period is three months although this can be extended. The scheme runs Monday to Thursday. Anyone with a couple of hours to spare is most welcome to join the team of volunteers, especially as they are trying to extend the days it operates.

10am-12noon Monday to Thursday. No appointments are necessary, nor a referral required. Contact 01206 744696 or email wheelchairloan@gmail.com or visit www.wheelchairloancharity.com

Pioneering new role for pharmacists

Hospitals across the UK are showing interest in a new pioneering role for pharmacists being piloted at Colchester General Hospital. Four junior pharmacists have joined the Trust as “ward internship pharmacists” and are undergoing induction training, not only in pharmacy skills but in nursing skills too.

Full story on our website, under “Latest News”

Physio woos dragons to win innovation award

A physiotherapist won the Trust’s first Dragons’ Den style innovation scheme in October. Rebecca Impson, supported by Head of Occupational Therapy Tracey Williams-Macklin persuaded a panel of five “dragons” that her idea of setting up a falls prevention education and support group was the best of the eight shortlisted ideas. Rebecca was awarded £250 to use in her department and the Trust will also help her to set up a pilot group.

13 priorities to be achieved

The Care Quality Commission (CQC) report of its formal inspection in September is expected in mid-January (see page 14) and while we wait for it, we take a look back at the role the Trust’s Improvement Plan has played in addressing the CQC’s concerns.

The Improvement Plan – first created in August 2014 – has always had one function: keeping the focus on ensuring our patients receive the best possible care. Its latest iteration has 13 priorities, all agreed with regulators and stakeholders. When the CQC inspection report is published, the Improvement Plan will be updated once more.

Over the past year there has been a huge effort by staff to drive improvement, with a strong desire and determination to change. A great deal of work has been undertaken to improve quality and safety at our hospitals. In October, two of the three Section 31 warning notices imposed by the CQC were lifted, following much hard work by staff and divisional teams. Staff are working hard to achieving the lifting of the final notice for Emergency Assessment Unit (EAU) – see below. Meanwhile, it is essential we continue to strive to make improvements beyond the scope of the Improvement Plan and to be proud of what staff are achieving. While there are other action plans which divisions and departments are working on, these provide a safe patient journey. Admission to the area is from EAU or A&E, the criteria being a National Early Warning Score of 5 or above. We have received fantastic support from the EAU staff, doctors, Outreach and Critical Care and the data that we have collected seems to show that we are having an impact on patient outcome, with 84% of patients admitted having an improved NEWS score on discharge. It has also been found that since it started the number of cardiac arrests within EAU have also declined.

Staff Involvement Group
This group provides a mechanism for “admin & clerical” staff, junior and middle managers to be involved in the working of the Trust. Hosted by Dawn Scafield, Director of Finance, it meets three or four times a month. A Forum has been set up on the intranet, via:

Medical Director Dr Angela Tillett
- Deteriorating patient
- Clinical Documentation
- Mortality
- Clinical Leadership Medical
- End of Life

Chief Operating Officer Shane Gordon
- Outpatient Patient Safety

Director of Estates & Facilities Chris Howlett
- Equipment

Thirteen priorities

Director of Nursing Barbara Stuttle
- Ward to Board
- Medicine Management
- Safeguarding
- Patient Experience

Director of HR Julie Fryatt
- Workforce
- Freedom to speak up

For more news, staff can go to http://intranet.rde.local and click on “News” or “Forums”

Urology stone referrals
The Urology Service have a new electronic stone referral form which can be used alongside, or instead of, the paper referral form. The electronic referral pathway goes directly to Kellie Woods, the Stones Co-ordinator. This is especially helpful for clinicians working in the Emergency Department out of hours.

More on the intranet via the Urology page or from kellie.woods@colchesterhospital.nhs.uk

Salary Sacrifice Car
A new Salary Sacrifice Car Scheme allows staff to drive a brand-new, fully maintained and insured car for up to three years. The scheme provides a complete, fully inclusive motoring package for a fixed monthly amount so you only need to worry about adding fuel.


EAU’s High Observation Bay success
As a result of the Section 31 warning notice placed on EAU 12 months ago by the CQC, it was decided that along with the secondment of an outreach nurse to EAU, these patients would benefit from being placed in a designated area, in order to receive expert and concentrated care. And so in August a High Observation Unit was created, a four-bedded area with a ratio of two patients to one nurse.

Gillian Bridges, Critical Care Nurse Specialist Outreach, writes: “Patients are continually monitored and rapidly treated to either improve outcome or provide a safe patient journey. Admission to the area is from EAU or A&E, the criteria being a National Early Warning Score of 5 or above. We have received fantastic support from the EAU staff, doctors, Outreach and Critical Care and the data that we have collected seems to show that we are having an impact on patient outcome, with 84% of patients admitted having an improved NEWS score on discharge. It has also been found that since it started the number of cardiac arrests within EAU have also declined.

Contact Gillian on ext 5938 or bleep 247

More news for staff, page 12
The programme to improve the flow of emergency patients at Colchester General Hospital – also known as the Safer 343 programme – has developed swiftly since it started in late October. Members of the Emergency Care Intensive Support Team (ECIST) facilitated an assessment of every adult inpatient in the hospital with the aim of rapidly reducing the number of adult inpatients that were safe to be discharged or transferred. As a result, the Safer343 programme was launched on three wards (Easthorpe, Tiptree and Peldon) for three weeks, all implementing the Safer Flow Bundle.

This project has been welcomed by the ward teams and is now being rolled out to all our acute wards over the winter period.

R:
Reduce delays. No one waiting for external, on-going care outside Colchester General Hospital.

A:
All patients have an expected date of discharge that is reviewed daily.

F:
Flow. The ward will bring a patient to their ward from Emergency Assessment Unit (EAU), before 10am, every day, seven days a week.

E:
Early discharges should be the aim.

S:
Senior consultant review every day, early in the morning and to see how this could be done seven days a week.

n associate practitioner at Essex County Hospital has been highly commended in a national competition to recognise and celebrate outstanding work in ophthalmology in the UK. DEBBIE SMITH, who is the Co-ordinator of the hospital’s Retinal Suite, was the runner-up in the Ophthalmology Unsung Hero category of the Bayer Ophthalmology Honours 2015. Debbie was presented with a framed certificate by Falklands War veteran Simon Weston OBE (above) during an awards ceremony at the Royal College of Surgeons in London.

John Grice honoured
Dr David Milne, President of the Colchester Medical Society conferred Honorary Membership of the Colchester Medical Society to JOHN GRICE in October.

John (pictured seated below) was presented with the Society’s rhino badge for his long-standing voluntary contribution to promoting, thus enhancing the important role that the Medical Society, founded in 1774, and its members have played in local events. He set up and ran the Society’s website as well as setting up many presentations and exhibitions from its historical archives, including the one at the Walk-in Centre in Turner Road. The other lay persons bestowed Honorary Membership were Alec Blaxill in 1947 and Lord Alport in 1969. The ceremony took place on John’s 63rd birthday – 30 October – at Freda Gunton Lodge where John now resides.

Tissue Viability CNS
JENNIE ARMSTRONG is now the new full-time tissue viability clinical nurse specialist (CNS). She was previously a deputy sister on Aldham Ward and has been a link nurse for tissue viability for eight years. She is available for practical support, teaching and advice for surgical wounds, traumatic wounds and pressure ulcers. Jennie can be contacted on ext 6052 or 07919 303652.

Well done Kathy!
Staff attending our infection control conference in November were encouraged to participate in a crossword promoting the antibiotic guardian campaign. Sixty crosswords were returned with 100% correct when marked. Kathy Maddox’s name was drawn out of a hat as the winner. Well done Kathy!

Well done Dave!
Staff, patients and visitors at Colchester General Hospital made generous donations of £162.63 for the Poppy Appeal which security officer Dave Cussons (right) organised this year.

Updated organisational charts published
Charts, biographies and photos of the Board of Directors and the Council of Governors have been updated on the Trust’s website.

You can find downloadable charts of the Board and Council’s relationship in detail and the clinical divisions management structure chart.

To find out more, look on our website under About Us > Organisational structure.

www.colchesterhospital.nhs.uk/organisational_structure.shtm

Read the full story on our website, under “Latest News”:
www.colchesterhospital.nhs.uk

Staff should look on the intranet under Info About > Winter Plan Update

Join in on the discussion on Twitter #safer343
A short online survey was launched in October when Chief Executive Frank Sims started at the Trust. It asked staff to provide insights to him about the Trust and more than 280 staff fed back about what makes them most proud – or frustrated – about working here and what ideas they have for improving patient care, the patient experience or making cost savings.

Frank said: “Those who have met me will have heard my commitment to developing clinical and staff engagement and to create a culture that listens to frontline staff and empowers you to take positive action.

“There were many great ideas, covering a wide range of topics. In fact there have been so many that it took a bit of time to collate into themes, but I am now able to share initial findings as one step towards taking listening into action.

“Our staff are at the centre of everything we do. Therefore, there will be a major push on more recruitment and retention as well as more development and support to our leaders and clinicians. This is a key priority and commitment to you all.

“On the intranet we have listed the top 15 topics for each question, with some specific examples along with the spreadsheet which contains all of the ideas clustered into the themes. Please take a moment to read them and let me know what you think.

“A key part of my philosophy and the reason for engaging staff is to listen, to act and to empower you to take sensible actions and control over your own areas. I call this harnessing the clinical and frontline voice. We are going to use your ideas to launch “big conversations” in the New Year – quarterly staff engagement events, to talk about priorities, listen to staff and find ways together to solve problems, helping us on our journey to outstanding.”

Read more on the intranet news pages, via this link: http://bit.ly/intranetnews
Our staff *are empowered* to...

Stay motivated, Help educate others, Support others, Boost morale, Communicate, Encourage others, Follow protocols and procedures, Share my ideas, Value others, Be positive, Do my best, Smile, Be caring, Team building.

Follow Frank on Twitter!

@franksims9
We offer a wide range of healthcare services and we want to know which interest you as a Trust member. Please circle up to 10 choices, complete the form, and return it to the address on the back page.

A need to improve the co-ordination of non-emergency work at night led to the establishment of the Improving Care Out Of Hours project, which since it was launched in August has been very successful.

Run by a small multi-disciplinary team led by Dr Ian Gooding, it has the specific purpose of introducing new ways of working to improve patient care overnight.

World Antibiotic Awareness Week

Antibiotic resistance is a very big threat and the overuse or misuse of antibiotics is making the problem worse. The Trust supported the first ever World Antibiotic Awareness Week led by the World Health Organisation from 16-22 November.

Claire Allen, Clinical Pharmacy Technician, writes: “Without effective antibiotics, many routine treatments will become increasingly dangerous. Setting broken bones, basic operations, transplants, even chemotherapy all rely on access to antibiotics that work. To slow resistance we need to cut the use of unnecessary antibiotics. Health professionals, patients and health leaders are being encouraged to visit the website and choose a pledge that they can fulfil and play their part in protecting some of our most precious medicines.”

Visit: www.antibioticguardian.com

Handy new service for pregnant women

A new online and phone service for newly-pregnant women has started in Colchester, Tendring, Halstead and the Colne Valley. It means that women are spared the inconvenience of having to make an appointment to see their GP when they first find out they are expecting a baby.

Instead, they can book with a midwife by phoning 07554 228297 between 9am and 5pm, seven days a week, or by completing an online self-referral form.

To access the self-referral form online, visit:
www.colchesterhospital.nhs.uk/maternity.shtml
New children and young people service for Essex
Since 1 November, all Children’s and Adolescent Mental Health Services (CAMHS) across Essex have been provided by North East London NHS Foundation Trust (NELFT). The service is now known as the Emotional wellbeing and mental health service (EWMHS) for children and young people. NELFT’s new service is for anybody aged 0-18 years living in Essex and is free at the point of entry. The service is also for young people with special educational needs (SEN) up to the age of 25. Call 0300 3001600 9am-5pm, weekdays. Out-of-hours for north east Essex, call 01206 228712 or visit: www.nelft.nhs.uk/services-ewmhs

Supporting older people for independent living
Community Agents Essex help improve the health and wellbeing of older people and their informal carers, supporting older people to maintain independent living and thereby reducing the demand on health and social care services in Essex. In the 12 months they have been operating, agents have supported 3,550 clients across the county. For more information, or to request their support, contact 08009 775858, email: enquiries@caessex.org.uk or visit www.communityagentsessex.org.uk

Stay Well this Winter
Winter conditions can be seriously bad for our health, especially for people aged 65 or over, and people with long-term conditions. Our Trust is supporting the NHS campaign, Stay Well this Winter. On our website is winter health advice, winter illnesses information and finding a service which can help. There is also a downloadable Guide to quicker treatment closer to home leaflet for people living in north east Essex. www.colchesterhospital.nhs.uk/winter.shtml

EPIC launch in Essex
An innovative scheme to support and attract more doctors and nurses to Essex and to enhance the skills of the wider primary care workforce has been launched. EPIC (Essex Primary Care Inter-Professional Centre) for workforce development based in Witham, is the result of collaboration between the seven Essex CCGs and other stakeholders who seek to recruit, retain and support GPs and primary care nurses. The centre acts as a resource, networking and support hub and an interactive website allowing staff to access training opportunities through which they can further their skills and careers, as well as find mentoring opportunities. Visit: www.epic-wd.org.uk

NHS Professionals’ winter pressures incentive
NHS Professionals are running an incentive for bank staff in December and January that will see all flexible workers who work four shifts or more between 1 December and 31 January be in with a chance to win £100 worth of vouchers. There will be 250 winners nationally. If you currently work for the Trust and are interested in working bank shifts with NHSP, please contact Amelia Maraula, Trust Liaison Co-Ordinator, NHS Professionals, on 01206 742953 or 07990 674797, email: colchester@nhsprowfessionals.nhs.uk or visit: www.colchesterhospital.nhs.uk/nhs_professionals.shtml

Inspired by men wearing fabulous moustaches!
Inspired by men wearing fabulous moustaches in Movember, Library Assistant Lyn Bloom and Acting Clinical Librarian and Library Lead Agi Hajnal put on a display promoting men’s health.

Agi said: “Any member of the Trust staff can use the library. We lend books, have print journals which can be read in the library, as well as a large collection of online journals. You can request a journal article easily too. We also have wi-fi for staff to log on and use! We are on the first floor of the Postgraduate Medical Centre at Colchester General Hospital.”

The library is open Mondays and Fridays 9am-5pm, Tuesdays, Wednesdays, Thursdays, 9am-6pm. Find out more on the intranet, under Info About > Library, call 01206 742146 or email: library.services@colchesterhospital.nhs.uk
From the Chairman

Without being over dramatic, I believe we are now in a crucial period which will shape the future of the Trust. This is the “test” of how our new substantive Executive Team can steer the organisation into the next phase of development of our local health economy. We are under intense scrutiny, but are being supported by the Care Quality Commission (CQC), Monitor, NHS England and others to demonstrate that the confidence they wish to have in us as leaders is warranted. As Chief Executive Frank Sims says, the Trust must show enough demonstrable improvement in selected headline performance metrics and the financial “run-rate” to indicate to ourselves and the world that the turnaround is genuinely underway.

Meanwhile, the CQC inspection report is due in January and we have worked to show the CQC how we are responding to the feedback from September’s inspection.

Read Chairman Alan Rose’s Board report in full on our website, under “Publications”: www.colchesterhospital.nhs.uk

Winter planning initiatives and Jump Start January!

Working with the Urgent Care and Medicine Divisions the Executive Team have agreed a recovery plan for the provision of urgent care and of the emergency care standard of patients being seen, treated or discharged within four hours. The key schemes involve additional investment, improvements to Emergency Department processes, admission avoidance schemes and the ECIST-supported programme known as “safer 343” – see page 7 – supported by schemes in the community with the North East Essex Clinical Commissioning Group (CCG), social services, Anglian Community Enterprise (ACE) and GPs.

Additional investment has been made for patients to be discharged home safely. Twice-weekly multi-disciplinary team (MDT) ward rounds with community partners expedite the discharge of medically-fit patients. The number of such patients at Colchester General Hospital has halved since October. New community rehab services are being commissioned too.

More medical staff have been agreed for the Emergency Department and recruitment is proceeding well with five new staff starting in January. A Hospital Ambulance Liaison Officer from the ambulance trust is on site at the General every day to support ambulance handover processes. Additional spaces in the Medical Day Unit will be opened to improve short-stay assessment and treatment capacity and ambulatory models of care, including respiratory medicine and care of the elderly, will also be extended.

The fourth project identifies patients who frequently attend A&E. It offers community MDT support to reduce their need to use hospital services. These patients can have several hundred health contacts a year so even a small percentage reduction in attendances helps. The initial cohort of eight patients reduced their average attendances by nearly 200 in the first six months. The Urgent Connect project, run with the CCG, improves GPs’ access to specialist advice to avoid some admissions. The Rapid Assessment Service offers an alternative to hospital for some ambulance and GP patients.

The New Year is always a busy time, so we are running “Jump Start January!” from 4 January. Volunteers from our own staff and partners in the community such as the CCG will be working with our wards to improve the flow and speedy discharge of patients after treatment. This will make the emergency care system safer and also be a great experience for many staff who are usually in supporting roles.

Staff should look on the intranet under Info About > Winter Plan Update.
See also www.colchesterhospital.nhs.uk/winter.shtml
How long will I wait?

Apr-Sep '15 (Apr-Sep '14 in red):
- Outpatients attending hospital for first time 68,521 (73,141)
- Follow-up outpatients 142,907 (154,485)
- Outpatients attending for a procedure year-to-date 29,862 (28,460)
- Non-face-to-face appointments year-to-date 11,704 (11,436)
- Day case spells 20,469 (20,220)
- Elective inpatient spells 3,691 (3,540)
- Non-elective inpatient spells 22,452 (21,872)
- Regular day attends 129 (489)

In Sep 2015 (in Jul 2014):
- A&E attendance 6,736 (6,692)
- Patients seen, treated or discharged against the four-hour standard is 77.35% (94.46%). Target is 95%
- 18-week referral to treatment 53.43% (79.61%) for admitted patients. Target is 90%
- Non-admitted patients, 85.23% (92.86%). Target is 95%
- % patients waiting six weeks or more for a key diagnostic test 4.06% (0.37%). Target is <1%
- Urgent suspected cancer referrals (those meeting two-week maximum wait from GP urgent referral to first outpatient appointment) 97.5% (91.4%). Target is 93%
- MRSA 0 cases in the month (0)
- 0 cases year-to-date (0)
- (ceiling is 0 for 2015/16)
- C Diff 1 case in the month (2)
- 16 cases year-to-date (8)
- (ceiling is 18 for 2015/16)
- Hand hygiene compliance 96.65% (96.52%). Target 95%

Visit “How long will I wait”: www.colchesterhospital.nhs.uk

Obstructed parking and buddy parking

In December 2014, in an effort to alleviate some of the pressure on staff parking around Colchester General Hospital, additional buddy bays were created to accommodate two parked cars at a time.

Following a review of the way buddy parking was designed to operate, areas outside Villas 4 and 6 have been designated buddy parking for those staff who can pre-arrange with a colleague to park together, meaning one car will be blocked in by your buddy’s car, with drivers parking their cars at the same time. Buddy parking cannot be reserved and like all other staff parking operates on a ‘first come, first served basis’.

In addition, clearly marked “obstructed parking” areas will be created outside Villas 2, 3 and 5 for staff to park on the understanding that the first car in will be blocked by the second car and that it may need to be moved at any time to let the first car out. If you want to use the obstructed parking areas, you must display your name and mobile phone details on your dashboard and you must be available to move your car at any time.

Both schemes will be trialled to see how they work.

THIS MONTH’S GRAPH

It was reported at the Board of Directors meeting on 26 November that without further action the Trust will incur a deficit of £39.4m by March 2016, £9.4m higher than the plan and previous forecast.


Rolling 12 Month Surplus/(Deficit)

- £50m
- £40m
- £30m
- £20m
- £10m
- £0m
- $50m

April 2014 - March 2016

Actual Budget
any of you have already met me in the few weeks I have been here and shown me the great services you are proud to work in. Those who I have met will be clear on my philosophy and purpose – it’s simple – to provide the best care for our patients. We have an incredible workforce that I feel privileged to have joined. Together we face some big challenges, and I’m asking for your help to deliver the improvements we all want for patients.

There are two timescales to manage: “the winter” and the next 3-5 years. Our immediate attention has to be the focus on some short-term priorities:

- delivering the 13 priorities of our Improvement Plan, to keep the focus on ensuring our patients receive the best possible care (see page 6)
- reducing the time patients wait for treatment
- delivering the four-hour standard (as measured in A&E)
- managing the money.

We have made some progress on our Journey To Outstanding and I want to thank everyone for their commitment and efforts. We have recruited lots more nurses and doctors; we have for the first time in 2-3 years, a stable and substantive board and senior clinical divisional team; we have seen improvements in cancer waiting times; the backlog of patients waiting a long time is reducing and we are getting to grips with the maintenance of the equipment we use. We now have a stable platform and now is our opportunity to build some really great services for our patients.

The Care Quality Commission (CQC) report of its formal inspection in September is expected in mid-January which will report on the inspection carried out in September. This will be followed by a Quality Summit on 21 January where we will have the chance to describe the steps we are taking in response to the report and outline our plans going forward. Clearly this is an incredibly significant report for the Trust and an exciting opportunity for us to take the big steps we need to improve care for our patients.

This is so vital that I am personally going to lead the new Improvement Plan with Medical Director Dr Angela Tillett and Director of Nursing & Quality Barbara Stuttle leading alongside me to make this happen.

At the same time, I am working closely with commissioners, Monitor, the CQC, NHS England and the Department of Health to secure even more support so that we can take charge of our own future. Together, as an organisation we have a huge opportunity to step up and lead system change across the populations we serve and I intend to help our clinical and managerial leaders do that.

Frank Sims | Chief Executive | ext 6433
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Letters | Emails
Your views

Recent placement
I spent eight weeks on Mersea Ward as a student with deputy sister Alison Burch as my mentor. Being a part of this team has completely changed my outlook of working on a ward as previously I had only ever thought about working in the community. Mersea Ward really does have a fantastic bunch of people who work really well together and who made me feel extremely welcome – something that doesn’t always happen when you’re a student.

The support from all of the sisters was excellent, as was the support from the health care assistants. This ward is such a busy ward but they all work very hard and I thoroughly enjoyed my placement. I felt that they deserved to be recognised for the excellent mentorship and care to patients they are providing on the ward, which outweighs anywhere I have previously been.

Kerry Cullen
Final year student

See 60 minute interview opposite by Alison

Smoking
As a volunteer driver taking folk to hospital for appointments or to visit their family members, I rarely need to actually go inside Colchester General but I recently had to run the gauntlet of the smokescreen across your entrances, mainly from staff. I am a relatively fit 73-year-old asthmatic who avoids medication by avoiding my known ‘triggers’ (smoky situations being one of them). While smoking is prohibited within the whole site at Clacton and some other hospitals, Colchester appears to encourage smoking on pathways and entrances within the site. I realise that enforcement could be a problem but feel you should at least encourage folk to assemble in areas well away from situations non-smokers have to negotiate.

Best wishes
Ken Frost, volunteer driver

REPLY: Thanks for your comments. We now have only five designated smoking points at Colchester General Hospital, as we announced in October that staff are no longer permitted to use two former smoking points. Alongside providing support for helping staff quit smoking, banning smoking outside A&E and the main entrance is another step towards a smoke free hospital environment.

Correction!
The last edition of Mainstream mentioned the Walk-in Centre’s opening times. It was only open until midnight for a week to help ease demand on A&E.

“Mystery shopper”
I attended the Emergency Assessment Unit following a referral from my GP. From the time I arrived at Reception, had a nurse undertake some tests, had a junior doctor undertake some further assessment to having the consultant reviewing the test results and exploring the options, I received a service that was polite, professional and very reassuring.

At the conclusion of the session I produced my identity badge which did surprise them and I was able to congratulate them on the level of service they provided as an effective team. I was confident that anybody arriving at the EAU would also have received a five star service.

Robin Rennie
Public Governor

New Health Challenge for 2016: Run to Rio!
Health and Wellbeing are launching a new Health Challenge in January! Look out on the intranet and the Health and Wellbeing newsletter for more information. Get fit in time for the Olympics and win a prize for your team! lucy.laurance@colchesterhospital.nhs.uk

Colchester NHS Christian Network
Everyone who works for the Trust, the NHS, Provide, Hospice, CCG and ACE (or any other part of the NHS) is invited to come along for cake and conversation.

St Michaels Church, Mile End Road, Colchester. This is our second event following on from the launch event in September. This is your network it is there to support and give thanks to YOU in everything YOU do.

Best wishes
Nickyyoung83@googlemail.com

Wednesday, 3 February

ICU Steps Colchester
Critical Care patients and relatives drop-in evening
Have you been affected by a stay in Intensive/Critical Care (ICU), whether as a patient, relative or friend? Join us at one of our drop in evenings. Sponsored by the League of Hospital Friends. Colchester Rugby Club, Mill Road, Colchester, CO4 5JF from 6.30-8.30 pm

1st Friday of the month

Mortality meetings
An open house mortality meeting is held on the first Friday of the month (not January) in the Postgraduate Centre, 7.30am-8.30am. It is an opportunity for all staff to share in the discussions around case histories of patients who have passed away recently, and to learn from the patient’s journey whilst in our care.

ECG Basics course
Suitable for HCAs, nurses and clinical staff who come across ECGs in their job. Please book on using OLM. More details: Rebecca Taylor, Chief Cardiac Physiologist.

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Almost £3,000 was donated in November to the Cancer Centre Campaign in support of Terry Rivers, a popular marathon runner known as “Mr Halstead”. Most of the money was raised at a fundraising evening at the Green Man pub in Gosfield, with Terry, who has run 78 marathons, including 21 London marathons. Terry, 70, was diagnosed with lymphoma three years ago and has undergone chemotherapy at the Mary Barron Suite. The Trust plans to relocate the suite into a new building on the existing Radiotherapy Centre, funded by the Cancer Centre Campaign, which is led by Colchester Hospitals Charity (CoHoC) to raise £4.5m. So far, just over £1m has been donated.

Meanwhile, Nicky Withercombe and Karen Robertson, organisers of the Starlight Walk and Starlight Halloween Ball, presented a cheque (right) for £10,401 to Chairman Alan Rose and Oncology Consultant Dr MB Mukesh on 4 December. The amount was raised at the two events and is the most money that Nicky and Karen have raised in the eight years they have been organising the Starlight events. Funds will go to the Cancer Centre Campaign and CoHoC Breast Cancer Funds.

Finally, about 450 people took part in the Santa Fun Run in Colchester’s Castle Park on 6 December, raising in excess of £15,000 for the Cancer Centre Campaign.

You can make a donation to Colchester Hospitals Charity at:
www.justgiving.com/cohoc

Volunteers needed

More volunteers are needed at the Macmillan Information Centre at Colchester General Hospital. Debbie Farthing, the Trust’s Macmillan Information and Support Manager, said she wanted to hear from volunteers, aged over 17, who could spare a minimum of half-a-day a week at the centre any time between 9.30am and 4.30pm on a weekday. Contact Debbie, on 01206 745347 or email: deborah.farthing@colchesterhospital.nhs.uk

Biker Santas deliver!

Members of Colchester’s ModnCasuals Scooter Club, along with riders from supporting clubs, came to Colchester General Hospital on 5 December to hand out presents to patients on the Children’s Ward and the hospital’s four care of the elderly wards.

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