FEATURE

No more black days

THE PATIENT FLOW project is improving the way our patients move through our hospitals - ensuring that they receive the right care, at the right time, in the right place. For us, it is also means that we can increase our capacity - and go some way towards increasing the number of days we are on 'green' status.

There are six streams to the project, each with their own aim:

- Ambulatory care - medical staff can become the default position for all emergency medical pathways (Lead – Marjie Clague, Clinical lead – Tim McElrane, DM – Emma Bennett).
- Ambulatory care - pathology initiatives
- Ambulatory care - emergency surgery
- Ambulatory care - emergency surgery – Occupational Therapy recently begun their first rotation working in the community and Physiotherapy will soon follow with their own aim:
- Medical foot care – to support ward sisters with daily duties with tasks like taking blood and ensuring EPR is up to date. There will be a review into whether HMIs should be a permanent feature on the Trust. To find out more, contact Sharon Herring.
- Integrated discharge – to reduce unnecessary delay in the transfer of patients out of the hospital (Lead – Dr. Tricia Johnson, Clinical lead – Dr. Peter Malone, PM – Sue Brannam)
- Integrated discharge Initiatives Occupational Therapy

The newly opened Surgical Assessment Unit (SAU) on Hunter ward sees surgical and urology patients that have been referred by their GPs between Monday to Friday, 9am-6pm. It also accepts referrals from specialist nurses and outpatient clinics.

Why the change?

We recognise that this has been a stressful experience for patients, having a single point of contact (medical secretary) to being supported by a team of multi-skilled staff.

Going forward

What is a CAT?

Clinical Admin Teams – what’s the story?

After several months of consultation, the Clinical Admin Teams (CATs) have been formed to provide a more efficient service for our patients. The CATs were officially launched on 6 July 2015.

What is a CAT?

Clinical Admin Teams provide full administrative support to a group of specialists. Each team is led by a Patient Response Manager (PRM) supported by a team of Patient Admission Coordinators (PAC), Assistant Radiology Coordinators (ARC) and Radiology Support (RS).

The CATs consist of administrative support to ensure smooth running of the Specialist. This includes booking appointments, clinic scheduling, typing letters and monitoring patient pathways against the 16-week target and cancer-related waits.

The new teams move away from clinicians having a single point of contact (medical secretary) being supported by a team of multi-skilled staff.

If you have any issues or have we can further improve our patient flow, please contact Mark Robson.

Pathology transformation

Pathology transformation over the next year."

Says: “These innovative initiatives are helping us towards being a much more efficient Trust where patients can receive the best care. I look forward to seeing the initiatives progress over the next year.”

If you have any questions about the Royal Berkshire NHS Foundation Trust and Surrey Pathology Services, please contact, lead Mark Robson on mark.robson@fhft.nhs.uk.
OPERATIONAL UPDATES
Talking strategy and values

In August we asked for your views to help us shape our strategy, and it’s not too late to tell us what you think.

What is a strategy?
A strategy is simply a plan that we will follow for the next five years to achieve our vision – to be the safest trusts in England, working better together with health and social care providers in our community.

We have ambitious plans to improve what we do, while trying to improve our finances at the same time.

And what about values?
Our values, as set out by the NHS Constitution, play a key part in helping us to reach our goals. They go hand-in-hand with our strategy.

These values are not new to us, but now is a good time to remind ourselves what drives us all.

Why do we want your views?
We want to hear your thoughts and views on both our strategy and our values. It is vital for all staff to influence the way our services are delivered in the future.

Staff on the ground are the best people to tell the management teams and executives how we reach our goals.

What matters to you is important to us and this is your opportunity to influence the way our services are delivered in the future. This is not a ‘tick box’ exercise, we really can’t do this without you.

How can you give your views?
First, you’ll need to read the briefing document on the internet – go to ‘Reading here’ and click ‘Our strategy values’. The briefing document explains:

• What we want to achieve (our Vision)
• What we need to concentrate on (our Goals and Ambitions)
• What we need to do to get there (your Objectives)

You have several options:

• On the same internet page, you will find a link to our survey where you can provide your views.
• We are holding group feedback sessions in each site, which all staff are encouraged to attend.
• We are holding 1 to 1s with senior managers.
• We are gathering feedback at team meetings.

Some of these feedback opportunities have already taken place, and will continue over September.

If you have any questions about the strategy or your values, or if you haven’t heard about an opportunity to get involved, please contact our Director of Strategy John Taylor by email or on 07870 803955.

Organisational Design Review

THE AIM of the Organisational Design Review (ODR) was to help us assess the appropriateness of the Trust structure and ways of working:

The initial objectives were to strengthen our foundations in terms of how we are structured and work together, that the clinical services are aligned and clinically led, and to ensure corporate services support front-line delivery.

A senior internal Steering Group will be moving the work forward. The group is chaired by Chief Executive, Jean O’Callaghan, and consists of Mary Sheedy, Warren Fisher, Wendy Gildroy and Paul Bell. They hope that by end of September:

• The ODR will have a consistent operating framework;
• The decision will have been made around whether there is a need for an additional 1 or 2 Care Groups;
• A single organisational chart will be drawn-up to describe any new organisational arrangements across the Trust and how it all fits together;
• Clinical leadership accountability levels will have been rationalised from three levels to two levels;
• Each corporate service will progress its own workforce review, with the Executive taking an overview at where we can work together better;
• A plan to support local working for transformation will have been drawn up (this is likely to be part of all our wider updated Organisational Development Plan – which will form the Autumn theme for the Steering Group).

A patient’s assessment of our services

Patient-led Assessments of the Care Environment (PLACE) are a self-assessment of non-clinical services – and the 2015 results are in.

We have improved across all areas compared to the previous year, and results were better than the national average across all areas:

• Food and hydration: 86.99% compared to 83.34%;
• Privacy, dignity and wellbeing: 96.71% compared to 93.84%;
• Cleanliness: 99.38% compared to 97.54%;
• Maintenance: 97.54% compared to 97.57%;
• Health and safety: 88.49% compared to 83.34%;
• Free WiFi: 89.32% compared to 83.34%.

The initial objectives were to strengthen our non-clinical services and to ensure staff knew what was expected of them.

What was inspected

• Free WiFi
• Privacy, dignity and wellbeing
• Cleanliness
• Health and safety
• Food and hydration
• Full timeframe

THE BIG MONEY question

In August our regulator Monitor sent all trusts a letter asking for further action to reduce spending. Director of Finance Craig Anderson explained our response:

We said: ‘We are predicting a deficit this financial year, but Monitor would like that figure to be much less, as indeed we would.’

We recognise that our financial position is non-sustainable and it remains critical that we do everything we can to improve our financial performance.

Things we can do to help reduce our costs are:

1. Before using agency staff, ask yourself if there is any alternative
2. Before re-ordering stock, think carefully about whether we really need that amount
3. Before spending any money asking yourself if it’s really needed now
4. Before asking to attend conferences, consider how much benefit it will really have on patients
5. Only carry out our investigations or activity for patients that we know is funded by our commissioners.

If you are unsure about this, please talk to your Care Group Finance Director.

We’ll be sending two reminders before we close the submission period in October.

What are the big money areas?

• Certainty of requesting – no photocopying forms
• Removal of duplicate requests and duplicate patients
• Faster return of results – saving time and phone calls changing paper
• Central record of requests and results and approval

As well as the obvious benefits around reducing payments for staff, our patients will benefit from getting their results much quicker than before – meaning any unnecessary treatment can be prevented earlier. This is a huge step that will help us to provide the safest care possible for our patients.

The team are working to get Requests and Results up and running in outpatients. Thank you to the EPR and Radiology teams for their hard work both behind the scenes and on the wards supporting clinicians.

Support and training

Each area should have a ‘change lead’ and ‘superusers’ who are trained to use the system. These staff are your ‘go to’ people.

Free WiFi

We are pleased to announce that due to popular demand free WiFi will be available within walkable areas on the Royal Belles site from October.

Mike Robbins, Associate Director of Information, says: ‘We’ve very pleased that we’re now able to offer WiFi to staff, patients and visitors. It is particularly beneficial for patients and visitors who will be able to access the internet while waiting for appointments. We want to thank the Royal Belles Charity for agreeing to fund the enabling to us to offer this service.’
SANDRA WHEELER, senior chief cardiac physiologist, has recently returned from Nepal where she oversaw the safe delivery of urgent medical supplies and funds following the devastating earthquake in April.

A curry day in the staff restaurant in April raised more than £4,000 for the cause thanks to generous donations from staff, visitors and patients. The generosity didn’t stop there, as our cardiology charity, Heartbeats, matched the money raised in the hospital, meaning Sandra had nearly £10,000 to donate to the valuable cause.

Sandra has been visiting the Tribhuvan University Teaching Hospital in Kathmandu for ten years – but this year was very different – not only because the hospital was so overwhelmed with caring for patients affected by the earthquake, but also because a change in law meant Sandra faced a huge challenge to get the supplies to the Tribhuvan hospital.

Sandra explained: “It was a huge logistical operation. I’d managed to secure free shipping of 100 boxes of medical supplies – from medications, bandages, to baby blankets. When I arrived however, I was told that a law had changed which meant the destination of foreign aid had to be decided by the government, and not by the people who were sending it.

“As you can imagine, this was devastating to hear and I wasn’t going to let that happen. Thanks to my contacts in the country, I was able to arrange a meeting with the Prime Minister of Nepal. It was certainly a change from my day job, but he was a really nice man who agreed that we should be able to give the supplies to the hospital they were intended for.

“I was given permission to retrieve the boxes if so to get them delivered to the hospital. Dr Dali and I literally had to search the airport delivery depot for hours – I was with the Cardiology team in the department at the Royal Berkshire Hospital carefully marking each box with our name, we would never have found them among the hundreds of other boxes.

Sandra’s adventure didn’t stop there. During her visit, Dr Bikash Dali showed Sandra two local village schools that had been completely destroyed in the earthquake.

“Thankfully on a holy day, there were no children in the schools,” she said, “but it was devastating to see that all that was left of the schools was a pile of rubble. I joined hospital staff, people, teachers and local villagers to help move some of the rubble. I decided that some of the remaining funds would be used to rebuild the schools I visited.

I turned project manager, meeting with local building merchants to get the right materials for the job.

“The schools erected a sign to honour the Royal Berks, which was really humbling. I hope to return in November to officially open the school and tick box for the children. “I have so many people to thank for the supplies, and the rebuilding of a school and sick bay for the children – thank you to Parminder Johal in Procurement, John Fitzgerald and his amazing catering team, Heartbeats, our local Nepalese community who raised £500 from the auction of dried food, the 3rd Creek Foundation, Qatar Airways, and everyone who added money to the pot! The biggest thank you of all is to our Cardiac Department who put up with all the boxes in the department for two weeks and everyone who helped free every step of the way from storing sticks on boxes to loading them onto the Qatar truck on a Sunday morning.

“I look forward to updating you with the next step of the operation.”

Super Sandra supports Nepal after earthquake

NEWS & EVENTS

WE LAUNCHED our Staff Excellence Awards this year due to popular demand. We are very excited about celebrating the hard work and achievements of our staff and volunteers at the awards ceremony on 25 September.

There are 11 categories and we’ve received some inspiring entries: judging is now underway and teams and individuals will be notified if they are shortlisted.

The awards ceremony will take place in the TEC where winners will be presented with a prize and all will be able to enjoy celebratory tea and cakes.

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Staff Excellence Awards 2015

Celebrating success and long service

Long Service Awards

In the autumn, we are re-introducing our Long Service Awards for staff who have shown a significant commitment to the Trust and worked here for 20 and 30 years. We have some catching up to do, so we’re pleased to say that we will be recognising many staff who have reached these special milestones over the past two years.

60 staff were recognised on 7 September.