"I WANT ALL NURSES TO FEEL VALUED..."

Director of Nursing & Patient Experience
Steve Trenchard
I wish you all a Happy New Year and thank you for your commitment to services over the Christmas and New Year period. I’ve heard about many staff who went above and beyond the call of duty to get to and from work during the heavy snow - putting our patients first. Thank you.

We are expecting return visits from the CQC to our services this year as they assess if change is really happening here following last year’s investigation. They will expect to see changes happening both centrally and locally to address the problems identified in last year’s report. We all have a responsibility to demonstrate the changes which are taking place. You should by now be aware of our CQC action plan and what it means for your part of the organisation. If you are unsure and have any questions about it, please ask your manager. The CQC will be testing us to ensure that we are an improving organisation where high quality patient care is being delivered and patient safety is at the heart of everything we do.

So I’m expecting another year of challenge for us in 2010. Aside from our own challenges at the Trust you will be aware that the whole of the public sector is now in a ‘zero growth’ phase as a result of the banking crisis. This means that for all intents and purposes our income will be flat for the next three years. That is why our newly established clinical engagement and leadership forum has started to look at re-designing some of our services, so that we can increase our productivity whilst keeping a tight control over our costs. I’ll talk more about this throughout the year.

Although it will be another challenging year for us I’m confident that we have lots of good people here who will work with me to challenge the ways of the past and seize the opportunity to improve the work we do. I have been with WLMHT now for almost five months and would like to thank you for your efforts so far and wish you a good start to 2010.

Peter Cubbon, Chief Executive
Why have you decided to come and work at WLMHT?
When I first saw the post it was the patient experience combined with nursing that really attracted me. The idea of providing leadership to strengthen the ‘voice’ of patients at board level was very appealing and as I am very passionate about recovery and values based practice, I thought it would be a good personal as well as professional challenge.

I was obviously aware of the CQC report – being a Director of Clinical Services at The Retreat in York. I had circulated the report and the key lessons. What struck me most was that it could so easily have been any large mental health service and a number of other directors outside of WLMHT have also said that to me.

As I researched the Trust before interview I read several back-copies of Mental Health Matters and to be honest that really decided it for me. There is huge potential here at WLMHT – it’s like a large sleeping giant – and the many diverse stories of progress and innovation in MHM made me want to work here.

I want all nurses to feel valued and appreciated for the hard work they do, and for the compassion they demonstrate day in day out.

What are your priorities for nurses at the Trust?
Mental health nursing is all about the relationship that exists between the nurse and the people who use our services. Nurses are absolutely crucial to a high quality service as they are the ones that are there throughout the day and night, at weekends, during moments of crisis and in day out. Secondly, I want all nurses to feel valued and appreciated for the hard work they do, and for the compassion they demonstrate day in day out. Thirdly, I’d like a style of practice to be consistently visible which demonstrates recovery – by that I mean the language we use, the actions we take and the behaviours we exhibit should all be about reducing the sense of ‘us and them’. In many ways nurses, along with other professionals have a huge amount of power over the most vulnerable members of our society, and we need to be able to relinquish this power, working in collaboration and helping people make as many personal choices as possible.

I will be working with my deputies, Heads of Nursing and with other senior nurses to set out clear standards for what we as nurses expect in a modern service. I will be out and about as much as possible so I can get to know as many staff as possible. I will be encouraging new ideas and changes to happen at all levels – and I will celebrate these with others and encourage the spread of good practice. I will also hold people responsible and to account when I spot unacceptable standards and I will be following improvements and suggestions up with regular reviews document which will eventually set out the Trust’s expectation for all staff – a template for the whole workforce supporting recovery orientated practice.

We’ve never had a patient experience lead at the Trust?
People who use our services should be at the heart of everything we do. And we mustn’t forget that. My job, along with others, is to establish a programme of work across all service areas whereby the involvement of people using our services is thriving. This should include involvement in training, recruitment, high level and ward level committees and in the design of new service models. In three years time I would hope that WLMHT is a centre of excellence for patient experience, and that if patients across London had a choice of a care setting they would choose here.

What are your first impressions of the Trust?
Overall my impressions of the Trust have been positive. I have been out and about quite a bit with Carol Scott who is an excellent ambassador for visiting areas and making herself visible. I have seen some really good examples of practice and I’m feeling very lucky to have excellent nurses in senior posts to take forward the improvements that have already been identified. There is a palpable energy within senior nurses to progress work already underway on raising the profile of nursing and working to better to both define and further improve nursing interventions.

Other good things include a willingness on behalf of teams and nurses to learn from patients, the Star Wards initiatives and Productive Wards which are freeing up more face-to-face time with patients. We need to explore how we can accelerate the roll out of this and get better at sharing and disseminating innovations across teams – again it’s all about short cutting lessons from change.

As an organisation we are obviously responding to the CQC action plan. Whilst doing this, we need to be mindful of the danger of hitting targets but missing the point. I think collectively we need to remember to celebrate and be positive at least fifteen times more than we might constructively challenge – and that the latter may feel like a criticism. Equally though, we all have a part to play in service improvement and we need to support colleagues through the changes as we know that change can be hard – and especially when there is so much of it.

Describe yourself in four words?
Driven, innovative, caring and hopeful.

What three things would you put in your Room 101?
Traditional views about non-recovery for people experiencing psychosis and/or diagnosed with schizophrenia, email, half of the top 40 singles charts.

What do you like doing when you are not at work?
Spending time with my family is a priority. Doing simple things like walking the dog, listening to music and watching TV are all important for my work life balance. I’m chair of a charity called ISPS (The International Society for the Psychological Treatments of the Schizophrenias and other psychoses) which is an organisation which supports talking therapies and humane approaches to recovery. I’ve also set myself the goals of learning how to play guitar and basic Spanish.

What’s the best piece of advice you’ve been given?
When I first qualified, the then Director of Nursing at Central Manchester Hospital, Phil Mitchell said, “Remember that being a nurse is a privileged position not to be taken for granted or misused.” I have often reminded students and staff of this because I truly believe that the trust people place in us when they are at their most vulnerable is humbling and deserves our deepest compassion and respect.
A national audit of NHS staff has revealed an unprecedented number of absentees. The scale of sick leave, according to the NHS Staff Health and Well-being Review, amounts to 45,000 staff being off sick every year (one and a half times the rate of absence in the private sector) and costs the NHS a staggering £1.5 billion annually.

The review led by Dr Steve Boorman, a former GP and chief medical adviser to Royal Mail, estimated that reducing overall sickness absence by a third would result in 3.4 million more working days available to the NHS each year, equivalent to 14,900 whole-time staff, and saving £555 million.

“It is only right that the NHS should put prevention and treatment at the top of its agenda. Staff should be given the quickest and best treatment to help them remain in or return swiftly back to work. One of the main recommendations of this independent enquiry into the health and welfare of NHS staff sites involves the implementation of proactive counselling services. The Critical Incident Stress Management (CISM) programme developed by the Staff Counselling and Support Services Department at the Trust is a pioneering example of such a service.”

Samira Ammounah, Staff Counselling and Support Services Manager

The programme takes a pragmatic approach to anticipate possible reactions from staff involved in a major incident and to offer them support and advice. Within the counselling sessions, staff attempt to make sense of an incident and the resulting stress, and then frame the incident within an appropriate context to give them an understanding of why it occurred. This helps get them back on the ward where they can continue to care for patients.

Call staff counselling on x8177

“Over the past 12 months, all inpatient wards have been working on one or more elements of our Time to Care programme. For example, Star Wards, which was launched trust-wide, encourages more meaningful engagement between staff and service-users to aid patient recovery. Additionally, Productive Mental Health Wards (PMHW) was adopted by six inpatient acute wards during 2009.

From January 2010 the Time to Care Team will introduce all inpatient wards to the first module of PMHW, which is called Knowing How We Are Doing. Part of this first module is to get a baseline on direct patient care for each ward. To do this, the Time to Care project team will support the wards in conducting one Activity Follow each.

The Patient Experience Trackers (PETs) are now in use on our inpatient wards. These electronic mobile devices aim to capture the patient and service user experience on a weekly basis. The feedback will help each ward, as well as the Trust, to understand and monitor the quality of care being delivered and take positive steps to make improvements.

‘The away day was a major success! The concept of releasing time to care for our patients was welcomed by all and reminded us that patients need quality time with staff. Everyone shared their thoughts on how we could improve our patients’ experiences, the reliability of care, efficiency on the ward and staff well-being.

Since starting, the whole team have felt empowered and enthused to make challenging changes to the way we work. Our expectations have already been exceeded. Productive Mental Health Wards has enabled us as a team to compare our own performances with that of others in the Trust, learn from our peers and make positive improvements for our patients.

Our thanks to Una Kallis and Diane Wiles for facilitating the day.

Sakina Ramzan, Clinical Team Leader

By Joseph Lansana and Musonza Manyere from Conway Ward

Our first Productive Wards Away Day was a major success! The concept of releasing time to care for our patients was welcomed by all and reminded us that patients need quality time with staff. Everyone shared their thoughts on how we could improve our patients’ experiences, the reliability of care, efficiency on the ward and staff well-being.

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Our Away Day

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“Our away day was an excellent tool to get all the staff involved and express their ideas on a practical level. Involving the ward staff to find a solution has helped them to believe in the programme!”

Call staff counselling on x8177

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**FACEING THE BULLIES IN CYBERSPACE**

Sue Robinson and Suky Macpherson from Hammersmith & Fulham Child, Adolescent and Family Service ran a workshop on cyber-bullying at an international conference in Salzburg, which has led them to take real world action in their SDU.

The conference, run by Inter-Disciplinary. Net, provided a forum for the exchange of ideas and research around bullying and the abuse of power. Having encountered an increasing number of young people reporting incidents of bullying via social networking websites, the pair decided it was a very relevant subject for today’s child and adolescent mental health professionals.

Using an interactive presentation that included a mock social networking page, Sue and Suky helped participants to explore the role of the bystander in cyber-bullying, ranging from ‘sideskicks’ who encourage the bullying to those who are apparently uninvolved but still witness victims’ suffering.

Sue explains: “In classic bullying, it’s usually one on one and you know who has witnessed your humiliation. Cyber-bullying is insidious because it can involve large numbers of people. On a popular social networking site, people may have hundreds of ‘friends’ on their page, all reading what is written on their ‘wall’. You don’t know who has seen what and that can lead to greater paranoia, especially for people who already have difficulty with social interaction.”

Suky adds: “There’s a ‘fun’ element to this type of activity that implies it’s acceptable and makes it easier for witnesses to stand by. But cyber-bullying can have a more sinister side, with threats of violence becoming an increasing concern. Recently we’ve seen a rise in the suicide rate of young people as a result of this kind of bullying and intimidation.”

Whilst efforts are being made to tackle cyber-bullying through the social network providers, there is still a long way to go. Meanwhile, Sue and Suky plan to use their research to carry out an ‘intervention’ at a local school where cyber-bullying is a particular issue, offering support and emphasising a no-blame approach that seeks to educate rather than single out individual perpetrators.

Social networks have become major parts of young people’s lives and actions online are increasingly affecting real life. Sue and Suky hope that this project and similar ideas will highlight the importance of this new reality and its impact on the work of mental health professionals.

According to the Anti Bullying Alliance, 22% of UK children and young people claim to have been the targets of cyber-bullying through social networks, email and mobile phones.

For more information about cyber-bullying and the support available, visit www.direct.gov.uk/cyberbullying.

Take me to London

When Jacqui Thomas, Service Manager for Hammersmith & Fulham Child, Adolescent and Family Service, was approached to take part in an film project about young people’s views of London, what started out as ‘something for kids to do in half-term’ turned into a powerful tool to help them discover renewed self-believe and confidence.

Jacqui explains: “I was approached by Watermans Arts Centre and Chocolate Films who wanted to explore and develop the views of vulnerable teenagers though a series of filmmaking workshops.”

“They met and interviewed all kinds of people involved in sport and learned how much was involved in putting on a major event like the Olympics, including hosting sports like archery, which will take place at Lords,” says Jacqui.

The group completed self-measurements before and after the workshops and everyone had increased self-confidence and had a more positive attitude towards their own future.

Jacqui adds: “I’m really proud of them, Some therapists got involved as co-facilitators and have been amazed at the difference the workshops made to the young people who took part. And I’ve already heard requests to do more!”

The Hammersmith & Fulham ‘Take me to London’ film forms part of a major exhibition at Watermans Arts Centre until 28 February. You can also watch the films at www.youtube.com/takemetolondon.

EALING NEWS

**Improving the patient experience**

The Limes Nursing Home and Assessment Unit has recently undergone a radical transformation providing new improved areas for residents.

Each person in the nursing home now has an individual room and women patients have their own ladies lounge area where they can rest and relax in peace and quiet. Whilst the assessment unit offers residents cleaner, more spacious areas with improved lighting, showers, bedroom facilities and a kitchen.

Leticia Dela Cruz, Nursing Home Manager and John Nursinoooloo, Assessment Unit Manager says: “The new facilities will enable us to continue providing excellent care to all our patients, allowing them to develop their independence and improve the quality of their lives.”

**New facilities**

Work has begun on a new psychiatric intensive care unit (PICU), for men, in John Conolly wing on the Ealing site. It will be cited on the former Derwent Ward. This relocates Blair ward from within the Tony Hills wing and provides a new purpose built clinical design in line with national low secure/ PICU standards. Service users and carers were involved in the six month consultation and planning phase.

Information boards for staff and patients are on display in the reception area of John Conolly Wing. If you would like to find out more, contact Andy Jacques, service manager on 020 8354 8853 in relation to the clinical model or John Atkins, Head of Capital Development on 020 8354 8760 in relation to the project build. The unit is due to be completed in July 2010.

**Therapy services under one roof**

The Ealing occupational, art and music therapies including advocacy services will be housed in a fully refurbished Therapies Centre in The John Conolly Wing. Andy Jacques, Service Manager says, “This will improve the service user experience by allowing therapies to be delivered in a specifically designed area and will enable much improved joint working within the therapies teams.” The services are located temporarily in Drake Ward of the John Conolly Wing until June, when they plan to move into the new centre.
Physical healthcare of patients

The recent launch of a physical healthcare strategy for the Trust brings together work going on around the trust to look after the physical healthcare needs of our service users.

Physical healthcare lead, Lynne Read, says: “All of our service users have a right to access services and information that will help them live a healthy life and to have a similar life expectancy as the rest of the population. The strategy pulls together the good examples of work already being done and gives national guidance so that we have a consistent approach to this important area of work, within our SDUs.”

Our physical healthcare strategy aims to:

1. Improve the physical wellbeing of mental health service users by promoting healthy lifestyles.
2. Improve the physical wellbeing of service users living in the community, by promoting healthy lifestyle choices, by the signposting of service users to relevant clinical pathways, and increasing access to primary care services.
3. Improve the physical wellbeing of service users admitted for short periods to inpatient units by assessing and addressing their physical health needs.
4. Improve the physical wellbeing of service users living for more than 12 months on an inpatient ward assessing their physical health needs.
5. Promote physical health by minimising and managing the side effects of medication.
6. Improve and develop clinical practice, ensuring that staff have the necessary knowledge and skills to provide and promote good physical health.
7. Ensure compliance with national and local guidance, guidelines and policy.
8. Ensure our structures and governance arrangements for physical health care are fit for purpose.

Avenue House staff meeting the needs of patients

As part of the SDU’s strategy to improve physical healthcare of service users, the Community Mental Health Team at Avenue House (Ealing SDU), are piloting a physical healthcare clinic for their service users.

Community psychiatric nurse, Leon Kaday says: “Research by the Disability Rights Commission tells us that there are massive inequalities between the general population and mental health service users, who tend to be over-represented in statistical data for physical health problems such as heart disease, obesity and diabetes. By running the clinic our hope is that we can help our service users to identify physical problems early so that appropriate action can be taken. With feedback from the clinic, care coordinators in our multi-disciplinary team will be able to link clients into primary care services such as GPs and smoking cessation clinics. The pilot will run for six months and the early signs are that it will be extended beyond that time.”

The clinic is run by a team of community psychiatric nurses, Anita Sheehan, Bhekisithemba Thombola, Utsha Lagan and Leon Kaday.

Leon adds: “Feedback from service users who have used the clinic has been positive. It has raised awareness of unidentified physical health issues, which service users now wish to address. It is great to be involved in work which is improving the lives of our service users.”

Involving our patients and their carers

Involving the people who use our services and their carers in decision making at the Trust is an important priority. The Patient and Public Involvement team continues to work with user involvement leads around the trust to develop the skills of service users and carers to enable them to sit on staff recruitment panels. Pat McGrath from our Patient and Public Involvement team, who attended one of the recent training sessions says: “Delegates were very enthused and committed to their potential role on recruitment panels and there was much learning and insight for everyone involved.”

Can anyone sit on a recruitment panel?

Yes, provided they have used services at the Trust or have a family member who has used services. They must have completed the recruitment training, which is done over two long half days.

What are you required to do as part of recruitment activities?

Service users or carers may be asked to be a panel member during interviews to ask specific questions. Or they may be invited to attend a group meeting before the interviews and give feedback to the interview panel. Additionally, they may be invited to attend a panel meeting to select applicants for interview and then attend the interview to ask some questions.

What do staff need to know?

Local service user and carer leads can help to find someone to attend the panel and support their involvement. It’s important that staff ask service users and carers how they wish to be involved.

See the PPI section on the Exchange for more information.

The view of a local lead

Mark Ballentine is the User Involvement Project (UIP) worker at Hammersmith & Fulham. He deals with request from managers across the SDU to place service users on recruitment panels. He says: “I receive the majority of the bookings via email and then place service users who have been trained by the Trust on the interview panel and recruitment training on a rota basis. Job descriptions and person specification is provided ahead of time, and we ask recruiting managers to provide us with enough notice to include service users in the short listing process as well. This time is also used for them to formulate their own questions for the interview and get a clearer idea of the role they are being asked to recruit for before the interview takes place. I get excellent feedback from service users and recruitment managers about this process.”

Steve Trenchard, the new Director of Nursing and Patient Experience supports this initiative and says: “Involving people who have direct experience of receiving our services in interviewing new staff is an excellent way of ensuring we recruit the high calibre of staff with the right values to develop the type of relationships all people deserve. By this I mean the type which supports their recovery. When involvement is right you get a qualitatively different type of conversation, much more meaningful and somehow richer in terms of authenticity and being real.”

Want to know more?

To find out who your local lead is contact the PPI team: Pat McGrath on 020 8354 8758 or Sue Cumming on 020 8483 2073.
ORGANISATIONAL CHART

NON-EXECUTIVE BOARD DIRECTORS

Chairman
Nigel McCorkell
PA: Jacky Vincent x8067

Deane Sally Powell
Contact: abby.fadina@wlmht.nhs.uk

Ann Chapman
Contact: abby.fadina@wlmht.nhs.uk

Lisa Harrington
Contact: abby.fadina@wlmht.nhs.uk

Christine Higgins
Contact: abby.fadina@wlmht.nhs.uk

Barbara Keen
Contact: abby.fadina@wlmht.nhs.uk

Professor Christopher Mathias
Contact: abby.fadina@wlmht.nhs.uk

Geoff Rose
Contact: abby.fadina@wlmht.nhs.uk

EXECUTIVE DIRECTORS

Chief Executive
Peter Cubbon
PA: Jacky Vincent x8067

Director of Finance and Information
Barbara Byrne
PA: Kim Broadbent x8250

Deputy Chief Executive
Jan Kent
PA: Kim Broadbent x8250

Director of Organisation Development and Workforce
Ruth Lewis
PA: x8055

Director of Nursing and Patient Experience
Steve Trenchard
PA: x8055

Medical Director
Dr Liz Fellow-Smith
PA: Mandy Bassi x8110

Director of High Secure Services
Leeanne McGee
PA: Delore Jones x4050

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Ealing
Director
Bridget Ledbury
PA: Loraine Coeshott x8917

Clinical director
Dr Jonathan Scott
PA: x2148

Hammersmith & Fulham
Director
Helen Phelan
PA: Anymay Bowes x1334

Clinical director
Dr Michael Phelan
PA: Anymay Bowes x1334

Hounslow
Director
Nicky Holdaway
PA: Marcene Facey x1401

Clinical director
Dr Alice Parshall
PA: Koni Birdi x1413

West London forensic
Director
Amy Weir
PA: Jackie Wilson x8722

Clinical director
Dr Nick Broughton
PA: Tracey Parkinson x8102

High secure services
Director
Kate Lyons
PA: Gina Allnutt x4250

Clinical director
Dr Kevin Murray
PA: Gwyneth Ellis x4082
The Risk Management Team held their third Joint Working Conference, ‘Working together for a safer and therapeutic service.’ The event brought together security management, staff counselling and support services and Safer Ealing Partnership services.

Steve Pound, local MP for Ealing opened the event and highlighted the need for bridging the gap in the community by providing safety for everyone. He spoke about the introduction of police constables on the Ealing site as a real step forward for the Trust.

Gail Miller, Associate Director of Risk Reduction says: “The aim of the conference was to share views and experiences and look at things that together we really want to tackle. We also used the conference to talk about some of the recent improvements we have made working with our partners.”

A really positive result is the appointment of PC Adam Fox in May 2009, which derived from one of the joint working initiatives. The aim is to reduce assaults on staff and increase sanctions as well as reduce crime on the Ealing site. In the past 6 months, he has dealt with over 111 individual charges or sanctions. Staff feedback shows that safety is being taken seriously and patients feel more able to speak to a real person rather than an officer in uniform. Future plans include workshops for managers and staff which focus on key facts to think of when an incident takes place.

The Trust is also working with the ‘Safer Neighbourhood Scheme’ to identify solutions for a safer environment. Victim support is now available for staff and representatives from the Metropolitan Police attend weekly incident meetings to provide assistance on how to progress cases.

The Hospital Watch scheme piloted in Ealing, has successfully recruited four Trust staff, two of which have completed their training and operate as special police constables, dedicating a certain number of policing hours in addition to their normal working role. The aim is to deter crime, discourage anti-social behaviour and offer reassurance to patients, staff and the public. The scheme will soon be rolled out to Hounslow and Hammersmith & Fulham SDUs.

A consultants’ perspective given by Nadji Kahtan, says that patients need to be treated equally, those who offend and those who have been victimised. There is a question as to whether patients should be prosecuted whilst under hospital care. By charging patients they face the reality of their offending behaviour.

Vijay Khuttan, Mental Health Lead for the Crown Prosecution Service (CPS) explained the complexities of establishing if patients with mental health needs are morally responsible and are fit to plea in court. The CPS are currently looking at low level assaults, such as common assault and looking at how best to use resources to deal with deterrents and protect public safety.

A question and answer session followed the main conference and discussion groups looked at implementing Lord Bradley’s recommendations.
Safeguarding children is everyone’s business

A campaign has been launched to remind all staff of their professional responsibilities towards children.

A campaign has been launched to remind all staff of their professional responsibilities towards children. A poster giving staff prompts for identifying children involved with service users and the action that should be taken has been sent out to all wards and departments. Focus groups have also been taking place to raise awareness. In addition, safeguarding children refresher training is now available via the Exchange to make it easier for staff to access.

Every single NHS trust in the country has been asked to relook at their safeguarding children strategies in light of the Baby Peter case, a national review by the CQC and other high profile reports on the back of serious incidents involving children.

When you are working with an adult service user you must find out if they have children of their own or are in contact with children. You must record details about these children as part of the Care Programme Approach (CPA) and an appropriate risk assessment needs to happen. Following that, if you have concerns about any children you MUST seek advice from the safeguarding professionals in your area and agree action. If service users express delusional beliefs involving children or might harm their children as part of a suicide plan you MUST refer to Children’s Social Services.

Safeguarding Children Focus Groups

Our named nurse for safeguarding children, Cressida Zielinski and members of the audit team, Sarina Martin and Aparna Linton have been running safeguarding children focus groups in all of the SDUs.

The aim is to hear the views of staff who are working with service users and to gain an insight into the safeguarding children concerns and challenges that staff are experiencing. It allows for the sharing of ideas and knowledge and enables the safeguarding children team to work in positive partnership with staff.

Says Sarina Martin, Head of Clinical Effectiveness and Audit: “Staff who attended the events told us that they found them extremely rewarding and useful for sharing information and experiences with other colleagues.”

LOCAL INVOLVEMENT NETWORKS (LINks)

A bit of history
You may recall that there used to be Community Health Councils and then Patient and Public Involvement (PPI) Forums. Their aim was to help local communities have an influence over the health services provided and how they are run.

The report ‘A Stronger Local Voice’ (June 2006) suggested a model of involvement to replace PPI Forums called Local Involvement Network (LINks). The introduction of LINks is part of the Government’s wider process to help the community have a stronger local voice.

Since April 2008
On 1 April 2008 the LINks model replaced PPI Forums.

Who are they?
LINks are comprised of individuals and groups from across each local authority, or borough. They are funded and supported to hold local health and social care services to account. Each LINks has the broad range of health and social care services to consider and some LINks have sub groups working on specialist areas such as mental health.

There are five LINks related to the services we provide: Hammersmith and Fulham, Ealing, Bracknell Forest and Richmond Upon Thames.

The role of LINks?
• To ask people what they think about their local health services and to give them a chance to suggest ideas for improvement
• Investigate specific issues of concern to the community
• Ask health providers for information that will help them progress issues raised
• Carry out site visits to see if services are working well
• Make recommendations for change to health providers
• Refer issues to the local ‘Overview and Scrutiny Committee’ if necessary

Guidance on LINks’ visits
LINks are able (under the law) to enter certain publicly funded health and care services to see them at work.

To help ensure that these visits by authorised LINks’ representatives are carried out correctly, a code of conduct has been published by the NHS Centre for Involvement. Informed by best practice, the code aims to ensure that visits are proportionate, reasonable and do not impact on the rights of people who use services. Guidance on visits has been produced by the Department of Health, and published on their website.

LOCAL CONTACTS

Hammersmith & Fulham
Karen Lyon
H&F LINk Development Officer
Community Engagement Team
Unit 18, The Quadrangle, 49 Atalanta Street, Fulham, SW6 6TU
020 7381 4934
Karen.Lyon@hestia.org

Hounslow
Derek Duggan
LinK Officer
5 Spa Road
Melksham, SN12 7WS
07875 75361
derekduggan@hapuk.co.uk

Ealing
Beth Hales
Development Officer
3 Masstock Lane, W13 9LA
020 8280 2275

Bracknell Forest
Emma Austin
Bracknell Forest Development Officer
Suite 3, First Floor
26-28 Market Place
Wokingham, RG40 1AP
emma.austin@helpandcare.org.uk

If you have any questions about LINks please contact Sue Cumming, Head of Patient and Public Involvement by email sue.cumming@wlmht.nhs.uk or telephone 020 8483 2073
You need to do is complete a registration form from the trust library services to enter. So, if you work with patients, do encourage them to take part. For the less confident readers there will be a selection of easier to read books and library staff will be able to offer assistance if needed. At the end of the challenge, each reader will be invited to a ceremony and presented with a certificate by the Trust’s Associate Director of Learning and Development.

The challenge is open to all staff and patients and all you need to do is complete a registration form from the trust library services to enter. So, if you work with patients, do encourage them to take part. For the less confident readers there will be a selection of easier to read books and library staff will be able to offer assistance if needed. At the end of the challenge, each reader will be invited to a ceremony and presented with a certificate by the Trust’s Associate Director of Learning and Development.

Do you enjoy reading or sometimes find it a struggle? Why not take part in the national Six Book Challenge 2010 run by the Reading Agency. Read six books between January and June and keep a record of your progress in a reading diary and receive incentives along the way. For staff that read all six books, a £5 book voucher will be given. The challenge is open to all staff and patients and all you need to do is complete a registration form from the trust library services to enter. So, if you work with patients, do encourage them to take part. For the less confident readers there will be a selection of easier to read books and library staff will be able to offer assistance if needed. At the end of the challenge, each reader will be invited to a ceremony and presented with a certificate by the Trust’s Associate Director of Learning and Development.

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A roadshow was held at trust headquarters recently to promote Union Learn who provide excellent resources to assist and support unions in the workplace to help promote a culture of life long learning. Union Learn Project Manager, Giannina Maina, is seeking to recruit 40 Union Learning Representatives (ULR’S), trust wide for the new learning centre which is being created in Hammersmith & Fulham SDU due to open soon.

ULR’S act as learning champions and work with individual employees to support them in identifying learning needs for themselves to further their personal aspirations or development. They are able to source a host of development opportunities which are either free or at a minimal cost.

To become a ULR, you need to give up two working days a month with the approval of your line manager. To find out more contact Giannina Maina on 020 8354 8132 or visit the website www.unionlearn.org.uk.
Broadmoor leads the way

Broadmoor Hospital led a seminar on improving risk assessment in high secure hospitals, joined by colleagues from Rampton and Ashworth. The purpose of the seminar was to share experiences to ensure the best possible approach to risk management is used across the three hospitals. Representatives from the Department of Health and the National Secure Commissioning Team also attended.

Dr Kevin Murray said: “It was an extremely useful event at which we had around 30 participants. As a next step, Broadmoor will lead on further work to ensure common standards are in place across the high secure services.”

Scientists have been buying themselves of late with minds, as well as bodies, and the quality press is listening. They’ve discovered a gene which may help explain the causes of mental illness, and another which maps a link between physical pain and social rejection. It turns out that this gene – imaginatively named ABCA13 - is partially inactive in patients with conditions such as schizophrenia, bipolar disorder and depression. This will be of no surprise to the clinicians, but in the quest to educate the great British public that mental illness is physiological, and therefore ‘nobody’s fault’, it’s another window opened to the fresh air of anti-stigma.

One of our fellow mental health institutions has also been in the news, but while BBC online picked this up, the US station ABC News gave it much greater visibility than many British media. A study from the Biomedical Research Centre for Mental Health at South London and Maudsley NHS Foundation Trust (SLaM) and KCL, has found that people who smoke skunk are almost seven times more likely to develop psychotic illnesses than those who use traditional cannabis resin (hash) or grass. How odd, then, that the debate over whether cannabis should be Class C or B still rages irrelevantly on in the background, politicians what should be a simple message about risk.

If only the tabloid press was similarly enlightened. I enjoyed my first conversation with a Daily Star reporter recently. When challenged by him to explain why patients at Broadmoor were being treated at tax-payers’ expense to poetry classes, I tried to put him straight on the therapeutic value of arts-based therapies. “And there are so many other interesting stories about the exciting work that really goes on within mental health trusts”, I told him enthusiastically. “Your readers might find the reality even more interesting!” He simply repeated his opening assertion another four times. I realised that the Spirit of St Louis is not much more comfortable. We have to change this, so that actually learning from incidents will become a fundamental and routine part of everyone’s practice. These incident summaries are a small but important way of promoting a culture of learning at Broadmoor,” he adds.

It may give poor Brian Thomas little comfort as hemourns the loss of his wife, but his being cleared of murder due to mental health issues may serve to enlighten some people that you can do bad things and still merit compassion and understanding. Thomas, a retired steelworker from Neath in south Wales, remained untreated for “pavor nocturnus” (sleep terrors) for 40 years, although at one stage took tablets for depression. He killed his wife as they slept together in their caravan and the transcript of his 999 call as he wakens to realise his crime makes tragic reading. Whilst our staff may be used to dealing with the traumas arising from recovery after violent acts arising from mental disorder, often against a family member, it would be heartening to think that such cases may promote sympathy and insight amongst the public, too.

Ever wondered what it takes to get to the top in politics? Meeting Dominic Grieve, shadow Minister for Justice, offered a few clues. He visited WLMHT to learn more about the work of our forensic unit. Looking somewhat younger than his 53 years, he’s packed a career in law as well as politics, local government experience, and charity and charitable work into them, in between mountain climbing, skiing and fell walking. (Obviously relentless activity is the new anti-wrinkle treatment). He applied his incisive mind to our operational efficiency and quickly understood that the biggest challenge we face in treating more patients is finding high quality step-down and community facilities. Let’s hope if the Tories are first past the wire he’ll remember what he learned at WLMHT.

Dr Nick Broughton, Clinical Director of West London Forensic SDU (left), with Dominic Grieve.

Sharing the learning

A new incident review summary document is in use at Broadmoor. Says, Consultant Forensic Psychiatrist, Dr Shaun Bhattacherjee: “We introduced it because staff didn’t have the time to read in full every incident review report commissioned within the SDU, but it’s so important that we all learn from these. At the end of every incident review a summary document is now produced and circulated to all clinical staff for display on notice-boards.

“We wanted to use a simple, standard template across the hospital so that staff will become familiar with the format.”

“We know that when a review is commissioned after an adverse incident, the additional scrutiny can make staff uncomfortable. We have to change this, so that actually
If you would like us to feature a colleague in moving on up send an email to communications@wlmht.nhs.uk

Ali Nunan, communications officer

joiners

Carol Dinham-Tracy has joined the Trust’s IMBT department as Contact Centre Manager to establish and develop our new contact centre. Her previous experience includes setting up a new contact centre for a pharmaceutical organisation in the United States and working as an Operations Manager for a contact centre in the UK. Carol says: “I am looking forward to making the Trust’s contact centre the best in customer experience.”

movers

Flippa Watkeys is currently Acting Head of Allied Health Professions, managing professional leads in spiritual and pastoral care, dietetics, physio, speech and language therapy, work rehab, arts therapies and occupational therapies. Flippa says: “I’m grateful for the opportunity to work with all the AHPs to continue to develop the services across the Trust for service users.”

Gemma Stanion, who was Head of Allied Professions is now the Programme Director for the CQC action plan.

Gemma is working closely with the SDU directors, clinical directors and all the corporate leads to ensure that the actions and tasks we have set ourselves are achieved and make a difference to the experiences of our service users, carers and staff.

Anne Spence has moved to the London Directorate at Broadmoor as PA/Administration Manager to Rob Murray, Service Director after working as the PA to Director of Workforce and Environment for 12 years. Anne says: “I am enjoying my new post, particularly the managerial aspect which is a new area for me.”

congratulations

Dr Craig Ritchie has been appointed as Director of Research & Development for the Trust.

Craig says: “I am honoured to be appointed to this position at this important time for the Trust. This role marks a progression for me having been involved in clinical research for almost 20 years, including four years as clinical lead for North Thames DeNDRoN (Dementias and Neurodegenerative Diseases Research Network).”

He says, “Initially, we need to develop the R&D office to take an even more strategic approach to research participation across WLMHT. The vision is to enable the Trust to become a centre of excellence for research across multiple mental health domains. I will be looking at mechanisms to overcome the barriers that clinicians face in undertaking and supporting research as well as working to strengthen our relationships with our affiliated academic institutions.”

Chief Executive, Peter Cubbon adds: “I am delighted to have Craig on board in this role and look forward to working closely with him and Imperial to improve the integration and prominence of research in our clinical services. I believe this will bring many benefits to our patients now and in future years.”

Craig is currently a consultant old age psychiatrist based at the West London Cognitive Disorders Treatment and Research Unit at Brentford Lodge. He says, “At Brentford Lodge, we have put systems in place which mean that the majority of our patients are involved in medical research at some point during the course of their treatment. By doing so they are helping to potentially improve outcomes for themselves as well as (eventually) others. Moreover, embedding the research in front line clinical services ensures that all clinical and support staff are involved in cutting edge research improving their clinical skills and engendering enthusiasm. I will be working to nest wherever possible this good practice across the Trust.”

Dr Amrit Sachar was one of ten award winners conferred a Teaching Excellence Award by Imperial College London for teaching excellence and contribution to undergraduate medical education. Dr Sachar is the Trust’s Director of Clinical Studies as well as the Joint Undergraduate Psychiatric Course Leader.

In her capacity as Joint Undergraduate Psychiatry Course Leader, which she shares with a CNWL colleague, Dr Sachar is responsible for designing and evaluating the curriculum and overseeing the delivery of courses. Only 3.6% of medical students go on to choose psychiatry, a trend Dr Sachar and her colleagues are trying to rectify. “Currently students experience a very short glimpse of psychiatry which we are trying to increase. We hope that by ensuring they have a positive med school experience we will attract quality students who will become future colleagues.”

In her role as Director of Clinical Studies, Dr Sachar works to ensure the Trust delivers on our contract with the university and ensure we are delivering high quality of teaching. She says: “It is nice to know that the work we do is valued by our colleagues at Imperial College and I appreciate being recognised.”

Pharmacy changes - Hammersmith & Fulham SDU

Pharmacy services for Hammersmith & Fulham SDU, from 1 February 2010, will be provided by our own Trust – rather than from Charing Cross acute hospital. This will help to strengthen the provision of pharmacy services to the SDU.

Lead pharmacist, Svetlana Jokic, has now joined the Trust’s team. She will soon be joined by another permanent pharmacist (post currently being filled by Pirko Rajanuru, a locum pharmacist). Svetlana and Pirko will no longer be based in Charing Cross Hospital as they will move into the mental health unit.

Individual patient medicines and TTAs will be supplied from the WLMHT dispensary at the Ealing site which is open Monday – Friday. This will mean medicines must be ordered on weekdays before lunchtime if they are needed the same day. Ward stock will be ordered by WLMHT pharmacy technicians and the stock boxes will be sent to Broadmoor Hospital pharmacy where they are filled from our robot.

Evenings and weekends there will be an on-call service (available 24 hrs) contactable through switchboard for advice and in emergencies to supply medicines that are needed before the next available working day. Over the next four weeks the pharmacy team will provide contact details and more information on the procedures for accessing medicines.

Please contact Svetlana on pager 1711 via Charing Cross switchboard, or Trudi Hilton, Chief Pharmacist via Groupwise for more information.
**Coffee time**
The Neurodevelopmental Service; part of the Ealing Child and Adolescent Mental Health Service hosted an ADHD coffee morning for parents who have a child with attention deficit hyperactivity disorder. The team assesses, diagnoses and treats children over five, with ADHD. Following a thorough multi-disciplinary assessment, the family and child follow a treatment package which includes a six week parent group, the option of medication, behavioural management tips and strategies.

The coffee morning was attended by 25 parents and involved three speakers pictured from left: Andrea Bilbow, who spoke about ADHD from a parent’s perspective, Lynne Copeland, who spoke about the role of the educational psychologist and Dr Christine Wee who spoke about ADHD into adulthood.

**Staff survey**
Dr Michael Patrick, Information Governance Manager is one of the twenty randomly selected winners of the NHS staff survey 2009 prize draw run by Capita.

Linda Dyson, Acting Director of HR, who presented the £50 M&S vouchers says: “Many thanks to all those staff who took the time to complete the staff survey. It’s really important to enable the Trust board and management team to get a real understanding of how staff feel about working here and help direct change and improvement in the Trust.”

Over 50% of staff filled in the survey and the findings will be published this spring.

**Occupational Therapy ’Making a Difference’**
West London Forensic Services got involved in Occupational Therapy Week, by running an information stall in Café on the Hill. The aim of the event was to promote the OT services to service users and staff. Steve Dudley, Head of Occupational Therapy, West London Forensic Services says: “Through our work we hope to enable service users to achieve their potential, increase their independence and obtain an improved quality of life.”

**Chapel art**
Staff and service users were invited to a private viewing of work by artist Matthew Clark, on display in St Bernard’s Chapel, Ealing. The art linked very closely with the environment, mental health and a character who is obsessed with building towers. Matthew Clark thanked the Trust for giving him an audience and a space.

Occupational Therapists, Kiran Dookna, Davina Jhummun, Nicola Jhurnes, Jean Trusler, Apama Kuma and Holly Sly.