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Calderdale and Huddersfield **NHS**

NHS Foundation Trust

GP Update

LATEST NEWS FROM THE TRUST

WINTER 2015 Number 30

Our Perfect Week

Our Trust has hosted two "Perfect Week" exercises where we focussed on making every effort to improve the patient's stay from start to finish at CHFT.

Held in December with a follow-up in January, the aim is to improve the care and rule out delays for patients from the minute they arrive until their discharge.

During both weeks there was intense monitoring in areas such as A&E departments, on ward level, in planned diagnostics, discharge information and transport.

The weeks were very challenging, with high levels of activity across our Trust. Colleagues responded to

extraordinary pressures in an extraordinary way, especially in January when the NHS nationally was facing serious pressures.

Staff featured in a range of posters and screensavers to promote the two events stating what would make their "Perfect Week". See

illustrations above.

Some real improvements were achieved during the weeks, including the launch of a new bed transfer team to free up nursing time, additional phlebotomy

cover for both hospital sites, and enhanced transport provision.

The plan is now to embed these in future care delivery to build on for the future.

A&E patients say services improving

The findings from the Care Quality Commission's 2014 Accident and Emergency (A&E) survey has highlighted positive findings, including improvements since the last survey in 2012, in a number of areas.

Our Trust performed better than many Trusts in England in relation to care and treatment and all other scores were in the better than average, or average range.

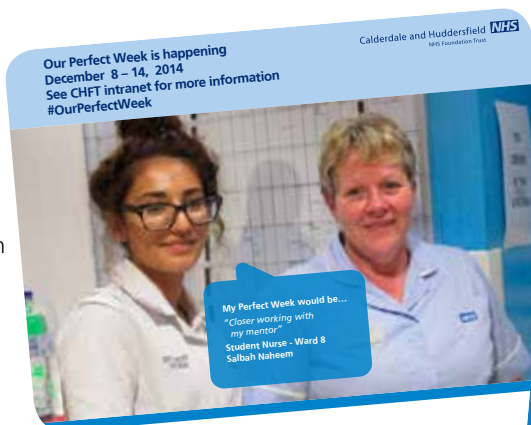
A&E Consultant, Mark Davies attributed the encouraging results to the hard work of colleagues in the departments. He said: "We have a fantastic team of clinical and non-clinical staff who are committed to using patient feedback and data to improve patient experience.

"However, we are not complacent and we will always strive to further improve."

Director of Nursing, Julie Dawes, said: "The findings of the survey are very positive and show that despite increased demand, overall patient experience is improving."

The survey is the fifth national A&E survey carried out by the CQC, involving 142 acute and specialist NHS trusts with a major accident and emergency department.

Three-hundred-and-nineteen patients, who had attended our A&E Departments in March 2014, responded to the survey.



Talking babies

We are inviting local families to an event about getting pregnant and having babies on Saturday, 28 February 2015, 10.00am-1.30pm in the Learning and Development Centre at Calderdale Royal Hospital.

Members of the public are invited to come along and find out about the latest innovations in fertility services and treatments, preparing for pregnancy, ante-natal screening, birth choices and breast feeding from the experts at our Trust.

Consultant obstetrician Mr Martin DeBono,

midwives, nurses and health visitors will showcase the latest advances in the pregnancy journey and talk to visitors in a relaxed, discreet setting.

We shall be sending more information before the event and would ask local GPs to highlight the event and display our posters to their patients.

● Our assisted conception team also has a special email address which is free and confidential for anyone to send questions to our experts – chftfertilitydirect@cht.nhs.uk



Our Assisted Conception Unit Team celebrating National Fertility Day

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News Round-up

Acre Mills due to open

The new outpatients centre at Acre Mills, near Huddersfield Royal Infirmary, is due to open in February.

All major internal and external works are now complete and the historic and revamped building has been formally handed over to the Trust.



Amanda at work

NT Awards finalists

Our complex care matron Amanda Mckie and the team reached the finals of the NT Awards 2014.

They were shortlisted for their training DVD to highlight the importance of good communications for patients with learning difficulties and their families.

More than 1,100 nursing professionals from all over the country and all specialties attended the finals at the Grosvenor House Hotel, in London.

Mouth Cancer Action Month

Nearly 100 people attended the drop-in sessions held by our Maxillofacial teams for Mouth Cancer Awareness Day. Ten required further investigation.

The emphasis is very much on early detection and the message this year was "Be mouth aware".

Our experts said looking in your mouth should be as common as part of your own health awareness as examining breasts or testicles.



The sessions were held at the maxillofacial unit at HRI and the ENT department at CRH.

Consultant David Mitchell said: "The cure rates for these cancers

have improved in the last decade although treatment is complex and demanding.

"Prevention centres on stopping smoking, moderating drinking

Our Maxillofacial Team at HRI

and HPV vaccination."

● The Trust also runs the Calderdale and Huddersfield Head and Neck Cancer Support Group every second Thursday of the month 6-8pm. For more information contact the Head and Neck Cancer Support Team at HRI X 7072.



The Aveta Team, from left: Pat Mallinson, Melanie Struthers and Jennie Wild

Home Birth Team

We have boosted maternity services by launching the new Aveta Home Birth Team to enable more women to give birth at home.

Aveta is our new 24-hour team of dedicated home birth midwives. The service, launched ahead of recent NICE recommendations supporting midwife-led

unit deliveries, or home births for low-risk pregnant women, will provide bespoke support for mums-to-be who want to have their babies at home.

For more information call 07825 115 367.

● The name Aveta is derived from Aveta a Norse goddess of birth and lactation.

American conference

Our nurse consultant in emergency care Janet Youd attended the annual conference of the Emergency Nurses Association, in the Indianapolis Methodist Hospital representing UK emergency nurses on an International Advisory Council.

She found her US counterparts have similar issues with moving patients through the

system and crowding in the ED. She was stunned to see three guards and a dog, and an 'airport-like' security machine at the ED entrance indicating a level of violence not experienced in the UK.

She said: "There are lessons we can learn from America such as the more extensive use of technology, but some things are definitely better here."



Janet, front second right, with American counterparts

The EOR Team:
Front row, from left: Halina Janski, Mike Broadbent and Jen Burbidge

Back row, from left: Chloe Turner, Elaine Reid, Jo Vaughan and Matt Almond; physiotherapist



EOR teamwork make 7 days work

Thanks to the commitment and new methods of the Elective Orthopaedic Rehabilitation (EOR) team, weekend discharges from CRH's wards 8a and 8b have seen a significant increase in the past month.

Before this September, therapy cover on the elective orthopaedic ward consisted

of one physiotherapist and assistant on Saturday and Sunday morning.

These members of staff mainly worked in other specialties during the week.

From the end of September, seven day working has been introduced and staffing on the wards now

consists of one qualified physiotherapist and one assistant for 7.5 hours on Saturdays and Sundays.

These members of staff are drawn solely from the EOR team. The team feels that as the staffing is more consistent, patients are receiving a more standardised service.

FOCUS ON... SIM training

Doctors, nurses, midwives and therapists can now receive on-site training in a range of conditions including emergencies at our new state-of-the-art 3G Sim suite at HRI.

The suite has adult and infant interactive manikins which can be remotely controlled to present a range of conditions.

The models' heart rate, blood pressure and even their blinking can all be altered at the touch of a button from the control room adjoining the ward area. Staff's reactions can then be witnessed and recorded for future training and learning exercises.

The Deputy Post-Graduate Dean for Yorkshire and the Humber, Mr Jon Hossain, opened the suite. He said: "The simulation suite is a great benefit to the Trust and the entire Yorkshire and Humber region."

"Simulation is at the heart of medical education



and will help to improve the confidence and competence of trainees and health professionals in a realistic ward-based setting. The Trust is at the forefront of this innovation."

The suite has been funded by the Trust's own Charitable Funds with generous contributions

from Calderdale and Huddersfield Organ Donation Committee and Health Education Yorkshire and the Humber.

Consultant in Emergency Medicine and Director of Medical Education at the Trust, Andy Lockey, said: "We are very proud of our new facility. Simulation is the closest a health professional can get to a real life situation and is an excellent way of helping them to develop their practical skills, decision making and team work."

Senior Fellow in Emergency Medicine and Simulation, Dr Ivor Kovic, said: "This is an exciting development for the Trust. We have state of the art

equipment to make sure that trainees receive the best possible training so that we can maintain and improve patient safety."

Conditions the models can be programmed to replicate include:

- acute asthma
- acute coronary syndrome
- anaphylaxis/adverse drug reaction
- pneumothorax
- pneumonia
- neuroleptic malignant syndrome
- diabetic ketoacidosis

Jon Hossain, second left, with Trust Chairman Andrew Haigh, Medical Education Manager Sue Burton and Director of Medical Training A&E consultant Andy Lockey



Maya at the control panel showing a child's symptoms

First renal consultant appointed

The Trust has appointed our first renal consultant, Dr Mansoor Naser Ali.

Traditionally the renal input has been providing by nephrologists from Leeds who conducted nephrology clinics at both HRI and CRH including provided their invaluable expert advice twice a week.

With Dr Ali's appointment, the Trust will have its first renal physician providing

Dr Mansoor Naser Ali



the in reach service for patients admitted with Acute Kidney injury (AKI) and other renal associated presentations. Dr Mark Wright and Dr Liz Garthwaite will still continue to visit the Trust

as before maintaining the existing strong links with the tertiary centre at Leeds.

Dr Ali completed both his foundation and core medical training in Leeds following which he worked across Yorkshire in the four renal units at Leeds, Hull, York and Bradford as a specialty trainee registrar.

It is his second time at the Trust after working here as a nephrology registrar in 2009/10



Student Alice King
Training day

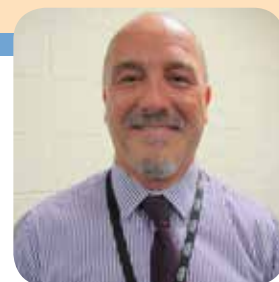


Student Chiraag Thakrar at the training day

The Trust welcomed its third group of 4th year medical students from Leeds University. The training day focussed on suturing, above left, and laparoscopy, above right, and these events are proving very popular.

Well done to...

... all staff who helped the national Christmas Jumper Day raise more than £1m for Save the Children earlier this month, right.
... and all staff who took part in November. Pictured are Tim Jackson (centre) and Wayne Dean (far right).



Waiting times update

Waiting Times Snapshot as at 31 December 2014

SPECIALTY	FIRST O/P	DAY CASE	ELECTIVE I/P
General Surgery	13	9	8
Urology	8	13	10
Trauma and Orthopaedics	10	10	12
Ear, nose and throat	10	11	13
Ophthalmology	12	10	10
Oral Surgery	12	10	N/A
Plastic Surgery	6	12	9
Pain Management	13	10	N/A
Gen.Med (Diab)	7	6	
Respiratory Med	8	Bronchs – 9	
Gastroenterology	9	8	
Haematology	5		
Cardiology	8	Angiography – 6 Pacemaker – 6	
Dermatology	9		
Nephrology	7		
Medical Oncology	1		
Neurology	9		
Rheumatology	7		
Elderly Medicine	5		
Paediatrics	8		
Gynaecology	6	6	9

Radiology waiting times

as at 31 December 2014

	CROSS SITE PATIENT GIVEN THE FIRST AVAILABLE APPOINTMENT	CRH ONLY PERFORMED AT THIS SITE	HRI ONLY PERFORMED AT THIS SITE
MRI	6 WEEKS		
CT	1-2 WEEKS		
US MSK VASCULAR	3 WEEKS 2 WEEKS 3 WEEKS		
FLUOROSCOPY			
UPPER GI ENEMAS		4 WEEKS	4 WEEKS 3 WEEKS
NUCLEAR MEDICINE			
BONES CARDIAC OTHERS			3 WEEKS 10 WEEKS 6 WEEKS
Mammography		0 WEEKS	0 WEEKS
DEXA SCANS			3 WEEKS

Key to main waiting times update

FIRST OP = GP referred (routine) first outpatient attendance. Times shown are maximum wait times (in weeks) as at end of December 2014.

DAY CASE AND ELECTIVE INPATIENT

Times shown are average wait times (in weeks) from referral to treatment (i.e. they include the outpatient wait time within them) for end of December 2014 admissions.

Key contacts

Children, Women and Families

Divisional director
Mr Martin DeBono
01422 223946
Assistant divisional director Kristina Arnold
01422 223523

Surgery and Anaesthetics

Divisional director
Julie O'Riordan
01484 347037
Assistant divisional director Julie Barlow
01484 347159

Medical Division

Divisional director
Dr Ashwin Verma
01422 223121
Assistant divisional director Sajid Azeb
01422 222945

Diagnostic and Therapeutic Services

Divisional director Dr Sal Uka
01484 347115
Assistant divisional director Emma Livesley
01484 355059