

News

New SHA directors of nursing

We speak to the newly appointed lead nurses at the reconfigured SHAs about their plans and aspirations.

NHS North East (www.northeast.nhs.uk) replaced Northumberland and Tyne & Wear; and County Durham and Tees Valley SHAs.

Lyn Simpson, Director of Operations and Regional Nurse (formerly Director of Nursing at Northumberland and Tyne & Wear SHA).

"I see nursing as a key component to support the delivery targets of the NHS for example the 18 week target, which will involve working closely with staff on new clinical pathways, building on current work around reducing hospital acquired infections and promoting public confidence through a professional approach to maintaining clinical standards.

Other important areas of work will include promoting partnerships and interagency working, for example around child protection, and promoting nurse leadership to ensure we make an effective contribution at Board level and all levels in the NHS."

NHS Yorkshire and the Humber (www.yorksandhumber.nhs.uk) replaced North and East Yorkshire and

Northern Lincolnshire; South Yorkshire; and West Yorkshire SHAs.

Dr Sue Proctor, Director of Nursing and Patient Care (formerly Director of Nursing for West Yorkshire SHA).

"I want to support nurses to really fulfil their potential and will be establishing a professional network for nurse directors. There are also some important opportunities to build stronger partnerships with other regional organisations."

NHS West Midlands (www.westmidlands.nhs.uk) replaced Birmingham and the Black Country; Shropshire and Staffordshire; and the West Midlands SHAs.

Peter Blythin, Director of Nursing and Development (formerly clinical adviser to the Department of Health reform team).

"The great thing about this post is its scope and the fact that nursing and midwifery is at its heart. I am looking forward to working with staff from organisations across the West Midlands to improve services for patients."

NHS East Midlands (www.eastmidlands.nhs.uk)

replaced Leicestershire, Northamptonshire and Rutland; and Trent SHAs.

Catherine Elcoat, Director of Nursing and Patient Care (formerly Executive Chief Nurse at the University Hospital Birmingham)

"I am delighted to have been given this exciting opportunity to work with nurses, AHPs and clinical scientists at all levels across the East Midlands. I believe passionately in clinical leadership and know that together we can ensure that patients are at the centre of all that we do."

NHS East of England (www.eoe.nhs.uk)

replaced Bedfordshire & Hertfordshire; Essex; and Norfolk, Suffolk & Cambridgeshire SHAs.

Lindsay Macintyre, Director of Provider Development and Chief Nurse (formerly Deputy Chief Executive of Norfolk, Suffolk & Cambridgeshire SHA).

"The establishment of PCT nurse directors working in partnership with Trust nurse directors provides an opportunity to develop and harness nursing leadership and potential. I am really looking forward to working

with colleagues to maximise the contribution that nurses can make to meeting the challenges and ensuring high quality care for patients across the East of England."

NHS South West (www.southwest.nhs.uk) replaced Avon, Gloucestershire and Wiltshire; Dorset and Somerset; and the South West Peninsula SHAs.

Liz Redfern, Director of Patient Care and Nursing (formerly Director of Nursing at Taunton and Somerset NHS Trust).

"I see this strategic leadership role as a great chance to improve the patient experience by providing a strong clinical voice in decision making at this level. The professional contact with nurse executives in all fields of nursing will provide a sound basis for developing nursing even further in the South West."

NHS South Central (www.southcentral.nhs.uk) replaced Thames Valley; and Hampshire and the Isle of Wight SHAs.

Katherine Fenton, Director of Clinical Standards/Chief Nurse (formerly Director of Nursing and Quality at Barts

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Have your say —

This bulletin is tailor-made for nurses and midwives across the NHS. It aims to cover the main news and developments every month.

We would like to hear your views on the content and design of the bulletin. Please send your comments to Susan Frade at CNO-Bulletin@dh.gsi.gov.uk

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and the London NHS Trust).

"This is a fantastic opportunity to ensure that the information Boards receive is balanced and puts patient outcomes and experience at the heart of their business. I have every intention of getting out in the patch as much as possible to understand the issues as they are seen by staff."

NHS South East Coast (www.southeastcoast.nhs.uk) replaced Kent and

Medway; and Surrey and Sussex SHAs.

Sue Webb, Director of Clinical and Workforce Development (formerly chief nurse at South East London SHA).

"I will be working with directors of nursing, AHP and medical leaders across the region to ensure that clinicians are fully engaged and influencing how we achieve a patient led NHS."

NHS North West (www.northwest.nhs.uk) replaced Cumbria and Lancashire; Cheshire and Merseyside;

and Greater Manchester SHAs.

A permanent appointment for this post will be made shortly.

NHS London (www.london.nhs.uk) replaced North Central; North East; North West; South East; and South West London SHAs.

A permanent appointment for this post will be made shortly.

Voicepiece —

Chief Nursing Officer Chris Beasley welcomes the new SHA directors of nursing and outlines their role in improving nurse practice and patient care.

I am pleased to say that eight out of ten SHA directors of nursing have been appointed. I am delighted as they are all high quality, high calibre nurses and I am confident that they will provide excellent leadership not only in nursing but also in their wider responsibilities including, for example, quality and workforce issues. I thought it would be helpful to introduce them in this edition of the bulletin and will include more from them in future editions as their roles develop.

I met with them all for the first time last month when Health Secretary Patricia Hewitt spoke about their new roles.

She took the opportunity to listen to what the SHA nursing directors identified as their key challenges. Amongst other issues, she shared with them her commitment to providing support for the commissioning

role of nurse directors in the new PCTs, ensuring employment opportunities for student graduates and providing opportunity for nurses to move between hospital and community settings.

As well as meeting the SHA nursing directors, I was pleased to welcome the Health Secretary to attend the autumn CNO business meetings, when she launched *Modernising Nursing Careers: Setting the direction* and thanked nurse directors for their continued commitment to patient care.

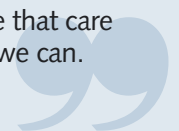
During this time of change, I want to make sure that I continue to have strong links with nurses across health and social care at all levels. It is a great privilege to meet and observe nurses in a variety of settings and I am impressed by their commitment to patients and patient care.

Through my visits to trusts across England, I am

aware of many examples of good practice where nurses lead on the reform agenda. I have visited services and seen first-hand where patients are receiving excellent care. Many more of you have contributed by sending me examples of good practice that you are providing locally, others are working to improve care through your own professional networks and areas of practice.

For example, in this edition of the bulletin there is news from a network of consultant learning disability nurses highlighting the needs of this vulnerable group.

Whether we are on a ward, in a patient's home, in a university, in out-patients or a surgery, on the board or at the Department of Health, we are all responsible for taking nursing forward, accountable for providing high quality patient care and using our influence to improve that care wherever we can.



At-a-glance

- nurses use PBC to meet needs of local patients with new respiratory service
- service encourages community based care
- developed by a multi-professional partnership with input from frontline staff.

Nurses meet local needs with respiratory service

Sharon Haggerty, Assistant Director of Nursing and Clinical Excellence at Hartlepool PCT, has seen first hand the devastating effect of respiratory disease on the health of local communities.

Using the opportunities offered by practice based commissioning (PBC), she decided to do something about it.

A MORI poll in 2001 showed that 40 per cent of adults in Hartlepool smoke – 51 per cent more than the national average. Inevitably, this means high levels of respiratory disease. Spotting the need for a specialised service, Sharon worked with Linda Watson, Director of Nursing and Operations, to gain support for a Community Respiratory Assessment and Management Service (CRAMS).

The new service will provide home support to ensure that, wherever possible, patients' symptoms are managed in their own homes. The aim is to reduce reliance on secondary care and provide more services in the community – a key focus of the PBC system.

CRAMS will also help to educate patients and practitioners, as Sharon explains. "The service will allow patients to make informed choices about their care, and will increase public and professional awareness that respiratory disease is not inevitable and can be managed effectively."

Under the new service, primary care clinicians will also have access to more information about respiratory disease as well as epidemiological data about the respiratory disease profile of their patients.

As recommended in the *Our health, our care, our*

say White Paper, this project has been driven by an assessment of local needs. In the words of Sheila Dilks, nurse advisor at the Department of Health: "This initiative is a great example of how nurses can drive forward the commissioning agenda at the PCT level, with GP commissioners' support, to redesign services that better meet the needs of their patients."

The National Service Framework for Chronic Obstructive Pulmonary Disease (COPD), currently in development, is expected to recommend more primary care-based services for this patient group, so the CRAMS project is ahead of the game.

"Guidance about the management of COPD

also stipulates a need for a multidisciplinary team approach," said Sharon. "Historically, the primary care part of the team has been absent. CRAMS will rectify this situation in Hartlepool and ensure that patients with respiratory diseases are managed by the most appropriate person, in the right setting at the right time."

Partnership working is a key part of the CRAMS approach. The plan is to develop a respiratory faculty, and talks are currently underway with stakeholders including representatives from the acute sector, primary care, social services, and pharmaceutical companies.

Hartlepool's PBC success

Over the last year, Hartlepool PCT has supported practices in the development of PBC with a local incentive scheme similar to the directed enhanced services (DES) scheme. The PCT's commissioning and performance team has also provided support and a facilitator has helped to develop commissioning intention plans and business cases.

A local PBC group meets monthly, comprising representatives from each practice, nurses, allied health professionals and staff from adult

and children's services, together with patients and members of the public. The respiratory proposal was developed with the input of frontline staff and, when presented to the group, it received full support.

Dr Carl Parker, professional executive committee chair at Hartlepool PCT, said of the CRAMS service: "This shows what can be achieved when nursing, general practitioner and secondary care colleagues all work together to improve the delivery of care."

Links and info

- For more details, contact sharon.haggerty@hartlepoolpct.nhs.uk

At-a-glance

- independently produced document highlights the roles of learning disability nurses and sets out a vision for the future
- recommendations include encouraging mainstream services to meet the needs of people with learning disabilities
- local dissemination programme in progress.

Links and info

- View *Shaping the Future*
- View *Valuing People*
- View *The Disability Rights Commission report, The Equal Treatment: Closing the Gap – A formal investigation into physical health inequalities experienced by people with learning disabilities and/or mental health problems.*

Spotlight on learning disability nursing

Consultant learning disability nurses across the UK have collaborated to produce a new vision for the future of learning disability nursing.

The publication, *Shaping the Future*, emphasises the need for learning disability nurses to carry out specialist care while also integrating patients into mainstream services, as recommended in 2001's *Valuing People* White Paper.

Anne Kingdon, consultant nurse in learning disabilities at Cheshire and Wirral Partnership NHS Trust and one of the report's editors, explains. "Learning disability nurses should play a lead role in enabling mainstream services to respond to the needs of people with learning disabilities, while also continuing to develop the specialist skills they need to work directly with people who develop behavioural challenges, including those

with the most complex needs."

The document suggests various ways for learning disability nurses to educate and influence their mainstream colleagues, including using networks, and thinking and acting strategically.

"Mainstream services may need to make some changes to ensure that people with learning disabilities receive the same level and quality of service as other patients," said Anne. "This could include communicating in a different way or recognising different patterns of health needs."

As well as providing a vision for future services, the document offers practical resources for nurses, and evidence about the differing

levels and patterns of health needs of people with learning disabilities. It recommends that the following core themes should be at the centre of all learning disability nursing practice:

- consent and best interests
- anti-discriminatory practice
- behavioural practice
- access to healthcare
- public health.

Consultant learning disability nurses across the country are now working to disseminate the document's recommendations. See the plan of the nurse consultant group for your area at www.nnldn.org.uk

● For more information, email christine.hutchinson@prestonpct.nhs.uk or anne-marie.kingdon@cwptn.nhs.uk

At-a-glance

- CNO conference for senior nurses
- focus on leadership in changing NHS
- interactive masterclasses covering wide range of topics.

Valuing health, valuing care, inspiring confidence: the CNO conference

Senior nurses will have the opportunity to gain insights from leaders in the health service, the voluntary sector and the business world, as well as listening to patients' perspectives, at this year's Chief Nursing Officer's Conference.

The conference – from 1 to 3 November in Manchester – is designed to provide senior nurses with the confidence to lead effectively in the changing NHS.

Activities will include one-to-one sessions and a series of interactive masterclasses. Delegates will be encouraged to share the knowledge gained with all colleagues on their return.

The masterclasses include:

Practice based commissioning (PBC)

- an insight into the potential benefits of PBC and the opportunities it gives to

nurses

- case studies will include nurse-led Personal Medical Service PBC practice and nurse-led PBC Commissioned Outreach Service.

Offenders' health

- improving offenders' health and life opportunities through effective provision and commissioning of healthcare services
- explore the unique contribution that healthcare professionals can make to both offenders' health and life opportunities through the provision and commissioning of services.

Social enterprise

- how social enterprise models in health and social care can lead to innovative community services
- principles of social enterprise and the benefits it can deliver in health and social care settings.

Making every child matter

- focus on the integration of health and social care to achieve *Every Child Matters* outcomes
- using Children's Trusts, joint commissioning, and better career pathways to improve children's services.

Links and info

- For further details contact the conference team at cno2006@eventregistration.com

At-a-glance

- nurses moving with their services from hospitals into the community will require support
- workshop identified new skills and training
- Modernising Nursing Careers programme to follow up recommendations.

Links and info

- View the MNC document

From hospital to home – supporting nurses to make the transition

Thanks to advances in clinical practice and technology, more and more nurses will soon be working wholly or partly outside the traditional hospital environment, meeting the needs of patients closer to home.

As services move into community settings, the nurses responsible for delivering them need help to adapt their skills so they can continue to offer high quality, safe and effective care.

“Though the core values of nursing remain constant, the context of care does impact on the way it is practised,” said Chris Beasley, Chief Nursing Officer. “Nursing in the community is different from that in institutional settings. There are additional skills

and aptitudes that need to be developed, not least the ability to make complex decisions, sometimes in difficult circumstances, away from colleagues and team members.”

In July, Chris Beasley addressed these issues at a workshop with senior nurses from trusts, professional organisations and other bodies. The group agreed a series of actions designed to identify the new skills needed and how best these could be acquired. Some

of this work will be taken forward as part of the plans laid out in the recently published *Modernising Nursing Careers (MNC)* document. In addition to supporting hospital nurses to develop their careers in non-acute settings, the MNC project is appraising the roles and training for all nurses in the community who will be affected by health reforms.

Updates on the MNC project will be provided in future bulletins.

At-a-glance

- infection control surveillance system rolling out across Manchester
- system identifies HCAI outbreaks and minimises risks to patients
- nurses have more time to care for patients.

Links and info

- View Essential steps to safe, clean care

Alert to infection

A new surveillance system is helping nurses across Manchester to track and manage healthcare associated infections (HCAIs).

The infection control surveillance system (ICSS) is being rolled out across Greater Manchester, helping infection control nurses (ICNs) identify HCAI outbreaks and minimise risks to patients. It is designed to reduce costs and bed days, and help meet the MRSA targets in *Essential steps to safe, clean care*.

ICSS is a data collection and processing tool that gives infection control teams (ICTs) real-time data to infection outbreaks and trends. Explaining how it works, Sue Langley from NHS North West Clinical Support, said: “Whenever a swab or blood test is sent to the lab for analysis, the ICSS matches this data with a historical database of results. If ‘alert organisms’ or ‘alert conditions’ are identified, the ICSS notifies the ICT within

20 minutes.”

The ICSS is connected to the local patient administration system, so the movement of infected patients through a hospital can be tracked, helping prevent further outbreaks. The system also produces trend reports, which help with strategic planning.

Sue said: “The ICSS means nurses spend more time caring for patients rather than managing data. Previously

ICNs had to look up patients’ infection histories and collate data manually. The system relied on a number of people passing on separate pieces of information and there was often duplication of work.”

The ICSS system was developed with the help of local staff, who attended a workshop to consider the best ways to improve data flow between labs and ICN teams, and the type of strategic reports that teams required.

Online infection control training

Nurses and midwives can access an online training tool for the NHS Infection Control Programme at www.infectioncontrol.nhs.uk

The tool, launched by the Chief Nursing Officer,

is expected to be a big success as it becomes a part of organisations’ induction processes. It is free to use and designed for use by both clinical and non-clinical staff.

A modern role for school nursing

Increasing the number of school nurses and defining their roles are also key priorities in promoting children's health.

To take forward the *Choosing Health* White Paper's commitment to develop a modern role for school nursing, the Chief Nursing Officer led a series of stakeholder groups. These resulted in the guide *Looking for a School Nurse?* and the *School nurse: practice development resource pack*. Both publications identify the range of public health skills used by school nurses to support health improvement and tackle inequalities.

Another commitment in the White Paper involved increasing the number of school nurses, 'to have at least one full-time, year-round, qualified school nurse working with each cluster or group of primary schools and the related secondary school, taking account of health needs and school populations'.

The spending allocations, while not ring-fenced, identified £20,000 for school nursing in 2006/07 and £22,000 for the following year. The recent workforce census indicates a small rise in numbers, and the Department of Health, Department for Education and Skills and other stakeholders are continuing to work collaboratively to support the increase in numbers.

We present a round-up of the latest Department of Health initiatives designed to improve the health of children.

Making schools more healthy

School nurses and other specialist public health nurses are being encouraged to play a part in helping schools achieve Healthy School status.

New guidance issued last year introduced a more rigorous approach towards the healthy schools programme. In order to gain Healthy School status schools now have to meet the criteria in all four core themes:

- personal, social and health education, including sex and relationship education and education on drugs (including alcohol, tobacco

'Key to the success of the programme is the partnership of health professionals and colleagues in education.'

and volatile substance abuse)

- healthy eating
- physical activity
- emotional health and wellbeing (including

bullying).

Key to the success of the programme is the partnership of health professionals and colleagues in education. Babs Young, nurse advisor at the Department of Health (DH), is now working with the Healthy Schools delivery unit in the DH to promote and develop the role of school nurses and public health nurses in the programme.

The Government wants every school to be participating in the programme by 2009, with 75 per cent achieving full Healthy School status.

Reversing childhood obesity

Nurses' contributions will play a critical part in the success of a new programme of work designed to reduce childhood obesity. The programme was developed by the DH and is overseen by the cross-government Obesity Programme Board.

Reports continue to identify the alarming rise in obesity amongst children, indicating that we could have a population of

children who are outlived by their parents due to the impact of obesity related diseases. The new *Forecasting obesity to 2010* report predicts that more than 12 million adults and one million children in the UK will be obese in four years' time if current trends continue.

The *Choosing Health* White Paper committed to 'halt the year-on-year rise in obesity among children

under 11 by 2010 (from the 2002-04 baseline) in the context of a broader strategy to tackle obesity in the population as a whole.'

To meet this target, nurses need to build on the successful work already underway and develop more strategic planning. This should involve proactive engagement with patients, capitalising on time spent with them to assess, identify and deliver effective preventative messages.

School meal investment

In another move to tackle childhood obesity, the Government is implementing a multi-million pound package of measures to improve school meals. The measures, which support new nutritional standards in place from this

academic year, include:

- £240 million to subsidise healthy ingredients until 2010/11, after the current £220 million fund runs out in 2007/08
- £2 million to establish regional centres of excellence for training school cooks
- entitlement to cookery courses for all secondary schools pupils from 2008.

Links and info

- See the Healthy Schools website
- Read the obesity report
- View the guidance for measuring childhood obesity
- View *Looking for a school nurse?*
- Access the school nurse resource pack
- View the school meal standards

Choosing Health update

Nurses are playing a vital role in taking forward the key commitments of the *Choosing Health* White Paper.

Spearhead PCTs are to receive £7 million to build on the successes of a pilot project, which successfully employed lead mental health nurse practitioners to improve the health of people with mental illness. The role of nurses in the programme is explained in a new commissioning framework, *Supporting the physical needs of people with severe mental illness*, which also offers case studies of best practice. Currently, people with mental illnesses such as schizophrenia and bipolar disorder are at increased risk of a range of physical illnesses and conditions.

Sports centres and youth clubs will be offering health advice and information to teenagers from November, as part of a pilot scheme to interest adolescents in their own health. Health professionals trained to meet the needs of young people will be on hand to address the issues that concern teenagers such as pregnancy, social and emotional development, obesity, drugs and smoking. The £3.5 million teenage health demonstration sites programme will run at four sites – Bolton, Hackney, Northumberland and Portsmouth – for two years.

- [View the commissioning framework](#)
- [Read details of the teenage programme](#)

Protected mealtimes questionnaire

The National Patient Safety Agency is asking directors of nursing and

others to complete a short questionnaire about protected mealtimes. The survey is designed to identify barriers to uptake and help trusts implement this initiative.

- [Access the questionnaire](#)

PBC ahead of target

PCTs exceeded the targets for implementing practice based commissioning (PBC) in July, according to the latest monitoring data from SHAs. The figures show that 57 per cent of PCTs (173) had attained universal coverage of PBC – ahead of a target of 56 per cent. Universal coverage occurs when a PCT has implemented the necessary arrangements to facilitate PBC. Plans are in place to achieve universal coverage in all PCTs by December.

- [View more details](#)

New role for pharmacists

Experienced pharmacists are to be given the chance to train as an accredited pharmacist with special interest (PhwSI), qualified to manage medicines and offer treatment to patients with conditions such as diabetes or heart disease.

The new *National Framework for PhwSIs* provides details of the new role, which will involve working closely with other health professionals such as GPs. The framework supports the move of patient care into the community as outlined in the *Our health, our care, our say* White Paper.

- [View the framework](#)

PEAT scores

New data from Patient Environment Action Teams (PEATs) show standards of hospital food, cleanliness and maintenance of

patients' privacy and dignity are continuing to improve.

The proportion of trusts rated as good or excellent increased as follows between 2005 and 2006:

- patient environment – from 55 to 64 per cent
- food – from 83.9 to 91.6 per cent
- privacy and dignity – from 86 to 91.5 per cent.

The scores are an annual assessment of every inpatient healthcare facility in England with more than ten beds.

- [View more details](#)

Reducing infant mortality

The Department of Health (DH) is looking for examples of good practice in reducing health inequalities in infant mortality.

The DH will use the examples in a review of the delivery of the Public Service Agreement (PSA) target on reducing infant deaths in low-income groups. The review team has visited areas of the country with high rates of infant mortality and is seeking examples of best practice that could be reproduced across the country. Email examples to hiumailbox@dh.gsi.gov.uk

- [View more about the PSA](#)

Activity strategy

A new strategy to increase fitness and activity levels has been launched as part of the nation's preparations for the 2012 Olympic games. Health minister Caroline Flint has taken on the new role of Physical Activity Minister to develop the cross-governmental strategy in partnership with bodies such as Sport England.

Crackdown on violence

An agreement to tackle assaults against NHS staff has been signed by the

NHS Security Management Service and the Association of Chief Police Officers.

The agreement commits the police and NHS to:

- investigate every reported incident of violence and abuse
- put pressure on the courts and the CPS to ensure tougher sentencing
- caution offenders only following arrest and in discussion with the victim.

Official figures released in June showed that 60,385 NHS staff (one in 22) were physically assaulted by patients or patients' relatives last year.

- [Read the agreement](#)

Emergency planning consultation

The Department of Health is seeking comments on new guidance about critical care contingency planning for major incidents where demand outstrips capacity. These could include accidents, infectious epidemics, natural disasters, and acts of terrorism.

The document forms part of the materials underpinning the *NHS Emergency Planning Guidance 2005* and is open for consultation until 14 November.

- [Access the consultation](#)

New Workforce Director

Clare Chapman has been appointed as the new Director General of Workforce at the Department of Health, responsible for workforce issues in NHS and social care. Currently the Group Personnel Director of Tesco, Clare has more than 20 years' experience working in human resources. She will take up the post from the beginning of 2007.

Continued from page 7

Changes to complaints procedure

Amendments to the NHS complaints regulations intended to make the system more responsive have come into force, following a White Paper commitment to develop a single comprehensive complaints procedure across health and social care by 2009. The new rules impose a duty of cooperation across NHS and social care organisations, helping patients with cross-service complaints.

● [View more details](#)

Tackling malnutrition

Consulting older patients about their meal preferences is one of the recommendations for nurses in a new report from Age Concern about malnutrition among older people in hospitals.

Patients aged over 80 are five times more likely to be malnourished than those under 50, and the report makes several recommendations that could help lower the figure. These include assessing older patients for malnutrition on admission and at regular intervals during their stay, and introducing protected mealtimes.

The Chief Nursing Officer and National Director for Older People are to hold a summit of nursing leaders in the autumn to address issues raised in the report.

● [Read the report](#)

Safety checks for maternity units

The Healthcare Commission has renewed its call for robust safety checks in maternity units after

publishing its second report into the deaths of 10 women who gave birth at Northwick Park Hospital, West London, between 2002 and 2005.

The new report recognises that services at the hospital have improved since the hospital was placed under special measures in 2005, but criticises the quality of care given by the trust in nine out of 10 cases.

● [Read the report](#)

PFI developments

Six new NHS hospital private finance initiative (PFI) developments, worth close to £1.5 billion, have been given the go ahead and are expected to open from 2010. The developments are a mix of new and refurbished buildings, with more than half of the beds located in single rooms.

The Department of Health has reviewed the schemes to check that they are cost-effective and financially sustainable in the long term.

The schemes will bring the combined investment in new hospitals to more than £10 billion since 1997.

● [See a list of the new buildings](#)

Outpatients miss appointments

A new report by the Information Centre (IC) for health and social care reveals that patients missed one in 10 of the 45 million outpatient appointments recorded by the NHS in England in 2004/2005.

Men aged 15 to 44 were most likely to miss appointments, not showing up for around 14 per cent of all first appointments and 19 per cent of follow-up appointments.

● [Read the full report](#)

Bereavement support

The Government has published *Help is at Hand*, an advice and information booklet to support people who have been bereaved by suicide or other sudden deaths. Copies are available by calling 08701 555 455.

● [View Help is at Hand](#)

Major incident training

New training for nurses, on how to deal with emergencies such as burns, blasts and major incidents is available online at www.doctors.net.uk/nap

The site has been commissioned by the Health Protection Agency, and nurses can access it for free by entering personal details and their NMC number.

● [View the training](#)

Diary

PBC events – 3, 11 and 24 October

These three events, to be held in different locations in England, are designed to support the development of practice based commissioning (PBC).

The events are organised by the National Association for Primary Care and the Primary Care Contracting Team and are aimed at both PCTs and practices. They will highlight examples of implementation from across the country and offer delegates the chance to have their questions answered.

● [View details and book](#)

Turning the Pyramid: Redesigning Community Services to Care for People with Long Term Conditions – 22 January 2007

Chief Nursing Officer Chris Beasley will open this conference, hosted by Croydon PCT to showcase its approach to care for people with long term conditions. The programme will feature the new combined predictive risk modelling tool developed with Health Dialog and the Kings Fund.

Attendance at the conference costs £50 + VAT.

● [Further information is available at \[www.croydon.nhs.uk\]\(http://www.croydon.nhs.uk\) or contact Gail Murray on 0208 274 6238.](#)

Joining Forces to Deliver Improved Stroke Care – 19 October 2006

The National Audit Office is holding a conference on shaping the future of stroke services at the QEII Conference Centre, London.

Keynote speakers include Health Minister Rosie Winterton and National Clinical Director for Stroke Professor Roger Boyle.

● [View more details](#)