

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## Links and info

- Find out more about the NHS Constitution
- Read more about the Health Bill on the DH site

## NHS CONSTITUTION AND THE DH'S HEALTH BILL

# Securing the future of the NHS

**The NHS Constitution signals the beginning of a new relationship between staff and patients. Published in January, it sets out the principles and values of the NHS and is designed not only with patients in mind, but staff as well.**

### History in the making

The Constitution, the first in the history of the NHS, brings together a number of rights, pledges and responsibilities for staff and patients – the result of extensive consultations with staff, patients and the public – and reflects what matters to them.

For staff, the Constitution means an NHS-wide commitment to equipping them with the tools, training and support they need to deliver high quality care, while patients enjoy an improved experience including:

- a new legal right to receive recommended vaccinations
- a new right to choice, and an additional right to information to help them exercise that choice
- a new right to NICE-approved drugs and treatments when considered to be clinically appropriate
- a new commitment to provide access to an NHS dentist for all those who want it.

### Getting the staff perspective

Liz Hogbin from the critical care outreach team at Norfolk and Norwich University Hospital was involved in the consultation on the Constitution and attended the signing event on 21 January.

'I'm on the council of governors for nursing and midwifery and we were

given a copy of the draft Constitution to comment on, particularly around the issue of topping up of care,' she says.

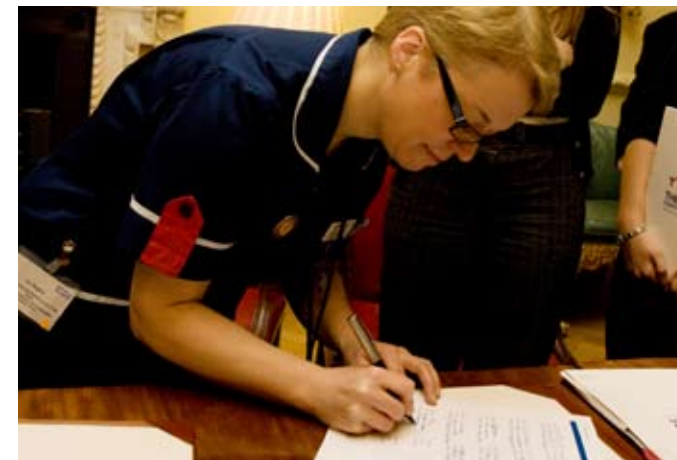
'As a group, we felt that depriving people of NHS care if they decided to seek private treatment would sit uncomfortably with us, and we spent quite a bit of time drafting our response on this for the Constitution team.

'It was a real honour for me and Karen Watts to represent our colleagues at the signing of the Constitution.'

### Call of duty

Subject to Parliamentary approval, all NHS bodies and private and third-sector providers supplying NHS services will be required by law to take account of the Constitution in their decisions and actions.

The Government will have a legal duty to



Liz Hogbin signs the Constitution at Downing Street

renew the Constitution every 10 years, but won't be able to change it – and, therefore, how the NHS works – without the full involvement of staff, patients and the public. The aim is that the Constitution will form the basis of a new relationship between staff and patients based on partnership, respect and shared commitment. Also published alongside

the Constitution are the *Handbook to the NHS Constitution*, the *Statement of NHS Accountability and the NHS Constitution: Government response to consultation*.

### Fitting in with the Bill

Like the Constitution, the DH's Health Bill, published on 16 January, will take

*Continued on page 2*

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- p4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## DEALING WITH DEMENTIA

# New dementia strategy to improve quality of care

**Dementia specialists and leads in care homes and hospitals, advisors working to provide more personalised care, better GP training and a network of memory clinics – they all form part of a landmark strategy, launched earlier this month, to transform services and support staff in caring for people with dementia.**

The DH is investing more than £150 million over the first two years of the strategy to increase dementia awareness, ensure early diagnosis and intervention, and radically improve the quality of care.

The draft strategy acknowledges the necessary balance

between hospitals, residential care and home care services to provide the appropriate support to patients and their families.

### Strategy initiatives include:

- clear and effective clinical leadership for every general hospital and care home
- improved access to community mental health teams to assess patients in care homes to minimise use of anti-psychotic medication and improve care management
- a network of memory clinics across the country to ensure early diagnosis and intervention
- better education and training for

- professionals to recognise, manage and support people with dementia
- more focused research on the causes and treatment for dementia
- better information for people with dementia and their carers after diagnosis
- a public information campaign to help remove the stigma attached to dementia.

Read the [Voicepiece](#) for Christine Beasley's thoughts on how the strategy impacts on nursing.

### Links and info

- Read more about the strategy on the DH website

*Continued from page 1*

forward proposals in Lord Darzi's report *High Quality Care for All*.

The Bill provides a framework for putting the NHS Constitution into action and places a legal duty on providers and commissioners of NHS services to have regard to the Constitution.

### The key elements of the Bill include:

- more choice for patients and greater control over the care they receive, and improvements to the quality of health services
- stricter tobacco control to protect

children and young people from the harmful effects of smoking

- direct payments will, where appropriate, allow some patients with complex health needs to receive money to arrange and pay for their own services, within clear guidelines
- quality accounts have been proposed to provide patients, clinicians and managers with information that will help drive improvements to the quality and performance of health services.



### Links and info

- Read the Bill and explanatory notes

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- p4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## VOICEPIECE – IMPLEMENTING THE DEMENTIA STRATEGY



**This month saw the launch of *Living well with dementia: a national dementia strategy*, which sets out a range of objectives to improve outcomes and the quality of life for people with dementia and their families, says CNO Christine Beasley.**

The strategy was developed through a wide-ranging consultation with patients and their families, carers and key stakeholders – including contributions from nursing leaders across the country. It sets out three key areas where we will focus our work.

The first is about developing a better knowledge of dementia. Greater understanding will also help reduce the stigma associated with the illness. The second involves ensuring that people with dementia are properly diagnosed so that they receive the appropriate treatment and intervention as early

as possible, and their families get the appropriate support. Thirdly, the range of services for people with dementia and their carers must be developed so that it fully meets their changing needs over the duration of the illness.

In just 30 years, the number of people with dementia is expected to double to 1.4 million. That is why we need to build on the progress we have made in delivering high quality care, bringing together and promoting approaches we know are effective in making improvements in care.

Dementia is not an

inevitable consequence of the aging process – something we can do nothing about. We know that nurses drive improvements; they influence and lead at all levels, across all agencies and in all sectors.

Locally, nurses will play a key part in commissioning services. Many nurses already work across service boundaries in acute, primary and community care, and, where needs become more complex, across specialist mental health and social care services, end of life and palliative care services.

We need to learn from and build on this

work of developing care pathways through mainstream services, linking acute care with residential care and more specialist services. These may include, for example, improving systems of mental health consultation-liaison and ‘in-reach’ mental health services, along with end of life care that supports people with dementia and their families throughout the final stages of the disease.

I am sure there are many more examples of approaches to care that bring together different areas of practice, incorporating a variety of nursing perspectives and

specialist input into assessment, care planning, ongoing care and discharge planning for people with dementia across acute general hospital settings and care homes.

Regular forums for discussion between nursing staff, GPs, mental health teams and nurses skilled in end of life care is one way the evidence shows we can improve the quality of care. Identifying further ways of providing dementia-specific approaches will support the implementation of the strategy and help us all to meet the challenge ahead.

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## LEARNING DISABILITY NURSING

# Caring about quality

**There are four principles that underpin *High Quality Care for All*: co-production, subsidiarity, system alignment and strong clinical leadership.**

Here's how registered learning disability nurses (RLDNs) have understood the principles and examples of how they are putting them into practice.

For RLDNs, **Subsidiarity** means forming partnerships to develop local services to support people with mental health problems, helping to reduce costlier out-of-area placements, which can alienate people from their communities. A project chaired by Dave Ferguson, Consultant Nurse in Hampshire Partnership NHS Trust, is developing recommendations to do just that, as well as clarify staff roles and responsibilities. 'The recommendations are being developed from the various localities' self

assessments, and user and carer interviews. We are focusing on protocol development between services, person-centred practice and delivering training to mental health colleagues.'

**Co-production** means working together to match patients to the right healthcare professionals at the right time, and to help patients adjust to services. As part of its learning disability governance strategy, the Royal Cornwall Hospital Trust has employed acute liaison learning disability nurse Zoe Wood. Lead Nurse Sandra Arnold says: 'This has ensured patients' complex health needs are met and previously unidentified health issues are now highlighted and handed over to the appropriate primary care and specialist teams.' Nurse Consultant Sue Denny adds: 'Historically, people with learning disabilities

haven't always received quality care in acute settings. The liaison nurse role has been very well received by patients and their carers, and Zoe has been phenomenal in working with a number of different agencies.'

For RLDNs, **System alignment** is about sharing knowledge to help patients take responsibility for their health, and help health and social care colleagues provide appropriate care. In North Staffordshire, strategic health facilitators are training primary care staff, improving access, and supporting people who have learning disabilities and family carers in maintaining their health.

'A six-month project for vulnerable people has been commissioned, including people with learning disabilities, mental health needs, autism and older people with mental health needs,' says Judi Thorley, Modern Matron and



Valuing People Regional Health Lead, East Midlands.

'All staff will be doing training and completing a questionnaire before and after to determine how beneficial it has been. Feedback from patients, family carers and staff will help to identify gaps in service. We will then recommend and implement 'reasonable adjustments' to improve the patient experience and a service will be commissioned based on our findings.'

**Strong clinical leadership** is motivational, inspirational

and collaborative and is key to transforming care for people with learning disabilities. Chair of the UK consultant nurse forum for RLDNs, Phil Boulter, says that the focus for consultant nurses this year is on pre and post registration education, which was an area identified in the 2006 Consultant Nurse Vision. 'A group of learning disability nurses has produced a benchmark of best practice using all 15 headings in the *Good Practice in Learning Disability Nursing* document, to help RLDNs identify what they should be looking for in assessing performance in practice, and areas for development in pre and post registration education. Nurses are being encouraged to use the benchmark to enhance practice and support change. We will also be looking at how we can compare performance across the networks and share best practice.'

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## IMPROVING PERFORMANCE

### Standardising records to improve safety

**Medical records are integral to ensuring quality patient care, and the Royal College of Physicians has partnered with NHS Connecting for Health to develop new record keeping standards.**

By standardising the information held on hospital patients, *The Clinicians' Guide to Record Standards* aims to reduce missing

information at admission, handover and discharge and, with it, the likelihood of mistakes.

While this new guide focuses on hospital based medical records, all nurses – hospital based or otherwise – have a part to play in keeping records updated in whatever setting a patient receives care. *The Essence of Care – Benchmarks for Record Keeping* is designed to improve the quality of

care and provides seven benchmarks of best practice for maintaining records:

- 1** patients can access all their current records if and when they choose to, in a format that meets their needs
- 2** records show that patients have been actively involved in continuously negotiating and influencing their care
- 3** patients have a single

record that is used across professional and organisational boundaries to deliver integrated care

- 4** a single set of records is maintained for life
- 5** evidence-based guidance detailing best practice is available and reviewed regularly
- 6** records demonstrate that patient care follows evidence-based guidance
- 7** patients' records are

safeguarded through explicit measures, which are reviewed regularly.

#### Links and info

- Read *The Clinicians' Guide to Record Standards*
- Order a hard copy from NHS Connecting For Health
- Read *The Essence of Care*

### Preventing deaths from VTE

**Nurses are at the centre of a national strategy to reduce deaths from Venous Thromboembolism (VTE).**

In September 2008, the DH published the first national VTE risk assessment template for use in hospitals, which has been described as a 'world first'. It is estimated there are around 25,000 deaths from VTE each year

in hospitals in England – many of them avoidable.

'Evidence suggests that receiving a VTE risk assessment on admission to hospital, followed by appropriate prophylaxis, has the potential to significantly reduce death from VTE,' says Tim Brown, policy advisor to the chief medical officer's VTE Implementation group. 'Nurses are key

to this process because in many hospitals they are the ones carrying out initial risk assessments.'

This assessment provides a simple guide to patient evaluation and a clear outline of the risk factors. It is not intended for use on pregnant women – these cases should be referred to the Royal College of Obstetricians and

Gynaecologists (RCOG). Nurses can also access *Thromboprophylaxis during Pregnancy, Labour and after Vaginal Delivery (37) January 2004* from the [RCOG website](#).

Later this year, NICE is expected to publish clinical guidelines for all hospitalised patients. Regional initiatives are also being organised to support the national strategy.

#### Links and info

- Get the risk assessment
- Read the CMO's VTE expert working group's full recommendations

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## NURSES ON THE FRONTLINE

# Nurses fight the measles threat

**Nurses in Central and Eastern Cheshire PCT have administered a mass MMR vaccination at more than 200 schools in the wake of a measles outbreak. The trust had 75 reported cases, 20 of which were confirmed by laboratory tests.**

Nursing teams gave the job to more than 2,500 at-risk children and younger school staff over two weeks at the beginning of December last year.

Beryl Jackson, Deputy Team Leader, School Nursing, was one of the 40 nurses who toured local schools throughout the two weeks. This was the first outbreak she has encountered while working in school nursing.

'The campaign went very well, although it was time consuming,' she says. 'We often had to revisit schools to



Job well done: some of the nurses involved in the mass MMR vaccination in Central and Eastern Cheshire PCT

immunise children who were absent or whose consent was received late – and some of the rural schools only had two or three pupils who needed to be vaccinated.'

It was a great achievement for nurses in the PCT, who were already busy with the HPV (cervical cancer) vaccination programme

for Year 8 pupils. New measles cases in the PCT are now declining, but parents with concerns can still contact the School Nursing Service for continued support and advice.

'Parents were happy for their children to be vaccinated in school, but some had concerns about the vaccine and its safety,'

says Beryl. 'They often asked what our opinions were, and if we would give the vaccine to our own children. We provided them with information and evidence so that they could make an informed decision.'

A nationwide MMR catch-up programme launched in August last year, urging PCTs and GPs to identify individuals not up to date with the vaccination and to offer immunisation to reduce the risk of a measles epidemic – which could result in up to 100,000 cases across England.

### Links and info

- Visit the DH website for more on the measles catch-up campaign

## It's time to change perceptions

**Nine out of ten people with mental health problems have been discriminated against or stigmatised, but a new programme is working to break the stereotypes.**

Time to Change aims to lower reports of discrimination by five percent by 2012. A nationwide press and TV campaign launched in January, with support from all three main political parties – led by Prime Minister Gordon Brown and Secretary of State for Health Alan Johnson.

Advertising will be supported by 28 local community projects across England by Mind and Rethink. A campaign toolkit is also available to support national activity.

- Visit the [Time to Change website](#)

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## Links and info

- Change4Life guidance for health care professionals is available on the DH website
- Visit the Change4Life website

## CHANGE4LIFE

# Getting the nation moving

**Read the news on any given day and you're likely to find at least one story dispensing health advice.**

But many people have trouble putting that knowledge into practice – which is why healthcare professionals across England are being asked to support Change4Life, a national movement launched by the DH to encourage everyone to be more active, eat better, and ultimately live longer.

Change4Life is aimed at tackling obesity, which is rising at an alarming rate around the world. The main focus is on families and supporting parents to instil healthier behaviours in children that will serve them well as they grow up.

To achieve its goal, the

DH is spending £75 million on Change4Life over three years. The movement involves partners, such as supermarkets, the media, other government departments, charities and, at local level, health professionals, schools and community groups.

### Why is it so important?

Currently in the UK, two thirds of adults and one third of children are either overweight or obese, costing the NHS £4.2 billion per year and the wider economy £16 billion per year.

Without action now, NHS expenditure could increase to £50 billion by 2050 and 90 percent of adults – that's today's children – will be overweight or obese and at risk of serious illnesses such as diabetes, heart disease and cancer.



### What can you do?

A toolkit is available to help anyone keen to support Change4Life at a local level.

It includes the Change4Life Local Supporters Guide, which outlines what you can do and how to talk to parents about the movement.

The toolkit also includes a selection of posters, and can be downloaded from the Change4Life website for NHS staff. Accessed

via the main DH website, the site includes the latest news on the movement, and is designed to help staff get involved.

Nurses can also direct patients to the Change4Life website for members of the public, which has information on living healthily and Change4Life initiatives in their area.

- Visit the Partners & Supporters pages on Change4Life website

### Change4Life in action

The campaign launched with its first national television commercial on 3 January, encouraging viewers to take up the Change4Life challenge. And, at the end of January, ITV screened *The Feelgood Factor*, the first of a series of one-hour specials devoted to healthier living.

Change4Life also launched a national questionnaire this month called 'How are the kids?'. Over 11 million families with children throughout England will receive a copy of the survey, which is designed to give a picture of children's typical daily diets and activity levels. It can also be completed online at [www.howarethekids.com](http://www.howarethekids.com)

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- p4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## Links and Info

- Visit the NMC website to find out more about the roles available

## CAREER DEVELOPMENT



Emergency nurse Grant Williams benefitted from his role on the NMC

## Support your profession: join the Council

**If one of your resolutions for 2009 was to develop your career or just get more involved in your profession, The Nursing and Midwifery Council (NMC) needs you.**

The Council is looking for nurses and midwives from all levels and backgrounds to help regulate, govern and support the nursing and midwifery professions. The roles are an opportunity for staff development and can

be undertaken alongside full-time nursing commitments.

Grant Williams, 43, an emergency nurse from Bridgend, held the position of Registrant Nurse Council Member (Wales) for two and a half years.

'I'd always had an interest in the legal, professional and regulatory aspects of nursing, so when the NMC post was advertised I decided that I would apply,' he says.

'As a council member, I

would spend approximately 35 days a year helping to set the agenda for the NMC. It was a good trade off between my employer recognising the value I could bring to public protection and them supporting my commitments for those days.

'Personally speaking, it's so rewarding to be part of something that will have an impact on nursing. No one should ever feel that they are too small to make a difference.'

## Leading the way

**Following a successful pilot, the DH has commissioned a series of leadership development programmes for infection prevention and control practitioners.**

The programmes will launch throughout February and will be delivered by Warwick University. Each programme will run as a series of five one-day workshops spanning several months, in which teams of practitioners will work on an improvement project they have identified.

Participants will gain particular insight into clinical systems improvement tools and techniques, enabling them to challenge their current ways of working and increase the impact they have both within their teams and across their organisation.

The programmes are open to teams of practitioners working within infection prevention and

control, including nurses, and each team needs an executive director to sponsor them throughout the project. Applications are already under way – [to secure your place apply online.](#)

### Developing tomorrow's leaders

Leadership will be the key to achieving *High Quality Care for All* and, says NHS Chief Executive David Nicholson, making quality the organising principle of the NHS is going to require a different set of skills and leaders who can help staff to deliver transformation. To ensure this happens, new guidance is available to develop NHS talent and leadership plans.

[Access the guidance](#)

### Links and Info

- Apply to the development programme
- Read more about leadership initiatives on page 11

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## Links and info

- Questions? Email [aic@mhra.gsi.gov.uk](mailto:aic@mhra.gsi.gov.uk) call the hotline on 020 7084 3080, or speak to a team member on 020 7084 3128

## RECOGNISING PERFORMANCE

### Celebrating dignity in care

#### Is your team among the many who go the extra mile when providing patient care?

Nominations are under way for the new People's Award for Dignity in Care, which recognises teams and individuals who have provided care with dignity, compassion and respect.

This honour is one of many in the Health and Social Care Awards – but it's the only one

that is publicly nominated, reflecting the importance of placing dignity and respect at the heart of care.

An [online PR guide](#) is available to help you promote the awards at your workplace and in local media. Posters and leaflets are available by calling 020 7972 4007 or emailing [dignitywebsite@dh.gsi.gov.uk](mailto:dignitywebsite@dh.gsi.gov.uk). The closing date for nominations is 6 March 2009.

### Play it safe

#### The Medicines and Healthcare products Regulatory Agency (MHRA) is responsible for making sure that all medical devices are fit for purpose.

But it can only do this accurately if staff report adverse incidents.

For a start, medical devices are not just high tech

machines like MRI and CT scanners – syringes and needles count too. A medical device is any piece of equipment used as intended by the manufacturer:

- for the diagnosis, prevention, monitoring or treatment of a disease, injury or handicap
- to control conception
- to modify anatomy or a physiological process.

### Keeping up standards

The Royal College of Nursing (RCN) has been championing dignity through the *Dignity: at the heart of everything we do* campaign, while benchmarks for best practice in providing privacy and dignity have been laid out in *The Essence of Care*.

#### These focus on:

- the attitudes and behaviour of staff

- providing an environment that respects personal identity
- respecting patients' personal boundaries and space
- the manner in which staff communicate with patients
- maintaining the confidentiality of patient information
- care that promotes privacy, dignity and modesty
- the availability of an area of complete privacy.

## Links and info

- Visit the Dignity in Care website
- Read more about the RCN's dignity campaign
- Read *The Essence of Care* guidance

#### How you can help

Got five minutes? That's all it takes to report an adverse incident related to a medical device on the MHRA's website. All incidents warrant further investigation, including everything from surgical instruments that break mid-operation to issues created by poorly written instructions.

#### What does the MHRA do with this information?

The agency will contact the manufacturers to pinpoint the cause. These reports can be used as leverage to encourage manufacturers to modify their designs and update instructions.

The DH issues Medical Device Alerts whenever a

risk is found, and has the power to remove faulty products from use.



- [Report an adverse incident](#)

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- P4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## QUIT SMOKING RESOURCES

# Giving smokers a helping hand

### Did you know that you can change a smoker's life in just 30 seconds?

Research shows that offering brief advice doubles the likelihood of a successful attempt to quit, and the DH has launched the *Very Brief Advice Guide* to help healthcare professionals provide support to patients who are trying to do just that.

It sets out the 3As approach: three short steps to raise the issue of smoking, even if there isn't time for a lengthy consultation. These are:

- ASK and record the patient's smoking status
- ADVISE the patient of the health benefits of quitting
- ACT on the patient's response, including referral to their local NHS Stop Smoking Service.

The guide is supported by a new website for staff – the [NHS Smokefree Resource Centre \(www.smokefree.nhs.uk/resources\)](http://www.smokefree.nhs.uk/resources) – that includes fact sheets, case



studies and promotional materials.

A campaign illustrating the dangers of smoking during pregnancy to mothers and their partners was also launched on 2 February. It highlights why it's so important for pregnant women who smoke to quit, and explains how they can get the free specialist NHS support they need to quit successfully.

A toolkit is available for midwives, containing the 3As guide, flashcards to help guide them through the

conversation and a Q&A booklet covering commonly asked questions about smoking in pregnancy.

### Links and info

- Visit the [Smokefree Resource Centre](http://www.smokefree.nhs.uk)
- Order the free *Very Brief Advice Guide* online or by calling 0800 731 9036
- Order the free midwives' toolkit online or by calling 0800 731 6427

# New Year honours

### Congratulations goes to a number of our nursing colleagues who made the 2009 New Year Honours List...

- Dame Commander of the Order of the British Empire (DBE): Liz Fradd for services to nursing
- Commander of the Order of the British Empire (CBE): Professor Anne-Marie Rafferty (Dean of the Florence Nightingale School of Nursing and Midwifery, Kings College, London) for services to healthcare.
- Order of the British Empire (OBE): Dr Kuldeep Bharj (School of Health Care, Leeds University) for services to healthcare and to the community in Leeds.
- Members of the Order of the British Empire (MBE): Dawn Chapman (Nurse Consultant, Cambridge University

Hospitals NHS Foundation Trust) for services to Cambridgeshire

- Judith Cottam (Nurse Consultant, Stoma Care, Bedford Hospital NHS Trust) for services to healthcare in Bedfordshire
- Lynda Coulter (Senior Neonatal Nurse, Countess of Chester NHS Foundation Trust) for services to healthcare, Chester, Cheshire
- Alison Finch (Ward Sister and Senior Nurse, University College London Hospitals NHS Foundation Trust) for services to healthcare, Kingston-upon-Thames, Surrey.



## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- p4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## NEWS IN BRIEF

### NHS carbon reduction strategy

The NHS has pledged to become one of the leading low-carbon, sustainable organisations in its Saving Carbon, Improving Health, the NHS Carbon Reduction Strategy. Published on 27 January, the strategy sets out how the NHS will achieve the Government's target of an 80 per cent reduction in carbon emissions by 2050. It's up to each NHS organisation to decide how they will reduce their carbon footprint, using the strategy for guidance on setting targets. The Low Carbon award at the Health and Social Care Awards recognises commitment to achieving reductions in carbon emissions in operations of health and social care. Applications close on 6 March 2009.

- [Download the strategy](#)
- [Apply for the Low Carbon award](#)

### New resource for ECT nurses

A website has been set up for mental health nurses who work in electroconvulsive therapy (ECT) clinics. The site, created by the National Association of Lead Nurses in ECT (NALNECT), provides related news items, details of the NALNECT committee and information on regional special interest groups in England and Wales. Nurses can also contact members of the NALNECT committee direct through the contacts page of the website.

- [Go to the website](#)

### Cleanliness tops patient wants

Results of the national patients' choice survey for July 2008 have identified hospital cleanliness and low infection rates as the top factor – selected by 74 percent of referrals – when it came to choosing a hospital. The report took into account around 93,000 responses, and matched or bettered the last set of results

in May 2008. Of all hospital referrals, 66 percent were able to go to the hospital they wanted.

- [View the statistics](#)

### AHP Leadership Challenge

Moving on from the great success of last year's *Nursing Times: Nursing Leadership Challenge*, which involved teams of nurses from across all SHAs, the first DH-led AHP Leadership Challenges are due to take place throughout April and May in SHAs, with the final in London in June. Through co-production between the DH and the AHP and Leadership Leads in SHAs, these events will offer an opportunity for individuals and teams to develop their leadership potential in order to improve efficiency and effectiveness for service users.

- [Email the challenge team on ahplc@dh.gsi.gov.uk](mailto:ahplc@dh.gsi.gov.uk)

### Developing new leaders

Guidance has been

published to help SHAs identify and develop talent and leadership locally – considered the essential to achieving the goals of *High Quality Care for All*. It is based on feedback from SHAs and best practice across the NHS, and sets out how best to assess current leadership talent, demand, and ways to close the gaps. All SHAs will be expected to have set out measures for fostering talent at regional level by July.

- [Read the guidance](#)

### NHS Leadership Awards

A new NHS Leadership Award Scheme will acknowledge leadership and quality throughout the NHS. Leaders will be recognised in seven categories, including leader of the year, quality champion of the year, innovator of the year and change leader of the year. Nominations open on 1 March.

- [Find out more](#)

### Increasing stroke awareness

A year on since the DH published its National Stroke Strategy – setting out how stroke services will be improved over the next 10 years – a campaign is reminding people to act FAST: Face, Arm, Speech, Time to call 999. The campaign, which launched on 9 February, will promote stroke awareness to the public and health and social care professionals and, over three years, £12 million will be spent on advertising, public relations and direct marketing communications. Improving stroke services is a top priority for the NHS because it's the third leading cause of death in the UK and the biggest cause of adult disability in England.

- [Read more about the campaign](#)

### Improving cleanliness and infection control

There is now a compendium of good practice examples from the National Deep Clean Programme to help

## THIS MONTH

- p1** NHS Constitution
- p2** Dealing with dementia
- p3** Voicepiece
- p4** Learning disability nursing
- p5** Standardising records  
Preventing deaths from VTE
- p6** Nurses on the frontline  
Time to Change: the mental health stigma
- p7** Change4Life
- p8** Career development
- p9** Recognising performance
- p10** Quit smoking resources
- p11** News in brief
- p12** News in brief  
About this bulletin

## NEWS IN BRIEF

the NHS. *From Deep Clean to Keep Clean – Learning from the Deep Clean Programme* is available on the DH website. The top five priorities in the Operating Framework 2009/10 for the NHS – based on what matters most to our patients, public and staff – include improving cleanliness and reducing healthcare associated infections. Action is now needed to embed deep cleaning into routine NHS activity, as many organisations already do, so that we can maintain the momentum that the national programme created.

- [Download the compendium](#)

### Patients to rate hospitals

A new web tool is allowing patients to rate their hospital experience in a bid to improve quality across the NHS. The [NHS Choices website](#) allows people to review the services they receive and share their comments with others,

empowering them to influence the quality of care and make the NHS more patient-led, which are key elements of *High Quality Care for All*.

### Tackling *C. diff* in the community

*C. difficile* infections continue to fall – keeping the NHS on track to achieve an annual reduction of 30 percent by 2010/11. The latest quarterly statistics from the Health Protection Agency (HPA) show there were 8,947 infections between July and September last year – 33 percent down on the same quarter last year. To achieve its target, a reduction of at least 30 percent needs to be sustained over four consecutive quarters. The DH has published new expert guidance on managing *C. difficile* in hospitals, emphasising that infections need to be tackled across the whole health community, not just hospitals.

- [Download the guidance](#)
- [Access the figures](#)

### The King's Fund shares lessons learned

*Sharing Success* covers 47 environmental improvements in mental health and learning disabilities trusts in England. *The enhancing the healing environment programme* – a nurse led initiative – enables multidisciplinary teams to improve the physical environment and has a positive impact on care delivery and outcomes. These schemes are the result of considerable hard work and dedication by many clinical and specialist local staff who have worked in partnership with service users and carers to deliver these inspirational projects.

- [Find out more](#)

### QNI report on district nursing

The Queen's Nursing Institute has launched a major new report, *2020 Vision – focusing on the future of district nursing*, into district nursing in the United Kingdom. It concludes that 'it is

necessary to reinstate district nursing, recognising its centrality and expertise in a key arena for healthcare over the next decade: the patient's own home'.

- [Find out more](#)

### Diary Spring CNO business meetings 2009

**Date:** 27 April in London and 29 April in Leeds

Directors of nursing will receive a personal invitation to these events.

### The Autumn CNO Business Meetings

**Date:** 23 September in Leeds and 24 September in London

### The CNO Summit 2009

**Date:** 11-13 November in Newcastle

## ABOUT THIS BULLETIN

### Web links

You can access the bulletin online at [www.dh.gov.uk/cnobulletin](http://www.dh.gov.uk/cnobulletin)

### Subscribe

To subscribe, nurse directors should email [bulletin.subscriptions@dh.gsi.gov.uk](mailto:bulletin.subscriptions@dh.gsi.gov.uk). All other nurses, midwives and health visitors should email [dh\\_cno\\_subscription@etdsolutions.com](mailto:dh_cno_subscription@etdsolutions.com). Please provide your name, job title, the full name of your organisation, your address and phone number.

### Changes to contact details

Nurse directors should send changes of contact details to [bulletin.subscriptions@dh.gsi.gov.uk](mailto:bulletin.subscriptions@dh.gsi.gov.uk)

All other nurses, midwives and health visitors can send changes to [dh\\_cno\\_amendments@etdsolutions.com](mailto:dh_cno_amendments@etdsolutions.com)