Health Check4Life
Visiting your local community

Clinical strategy
Quality all the way

County Durham and Darlington NHS Foundation Trust
Your trust
Winter 2013/14
Welcome to your Winter 2013/14 issue of ‘Your Trust’.

We are pleased to bring news of developments at two of our hospital sites – the region’s first endovascular hybrid operating theatre at the University Hospital of North Durham, and a new cardiac scanning service at Bishop Auckland Hospital. Our Electronic Clinical Document Management project is now going live, improving patient care, confidentiality and efficiency, and we focus on our ‘Getting better sooner’ initiative which highlights how lifestyle changes can improve recovery after surgery.

Following our Annual General Meeting in September, our Annual Report and Accounts for 2012/13 is now available and can be viewed on our website at www.cddft.nhs.uk

And our medical director Professor Chris Gray shares the background to work on our clinical and quality strategy. The Trust is the largest provider of integrated health services in the North East, and the strategy provides us with a framework to address the current pressures on our services and to deliver a healthcare system, fit for the 21st century.

ECDM goes live

The Electronic Clinical Document Management (ECDM) project has now gone live across the North of the region, allowing staff at the University Hospital of North Durham, Shotley Bridge and Chester-le-Street community hospitals to access electronic patient case notes.

The ECDM project is a major initiative for the Trust, which scans and presents electronically the contents of current paper clinical notes in any of the sites across the Trust. It will provide a range of clinical benefits, in particular instant availability of the electronic record at the point of care and by multiple users simultaneously.

Diane Murphy, clinical director of service transformation for the Trust and project sponsor, said, “This is a fundamental change to how records are managed and will provide improvements in patient care, confidentiality and efficiency. It will put the Trust at the forefront nationally of electronic clinical document management, and provide a system that fits with modern day healthcare.”

Over 3500 members of staff have been trained in using the new system. Partner TNT Business Solutions, which is providing the records management and scanning service, is currently working around the clock to electronically scan over 900,000 patient records. It is planned to go live in the South of the region in December.

Urgent care services in Darlington

Work is underway to improve urgent care services in Darlington by integrating the service, currently provided at Dr Piper House, with the Emergency Department at Darlington Memorial Hospital.

The urgent care centre at Dr Piper House closes each day at 6.00pm. Between the hours of 6.00pm and 8.00am, urgent care services will be available at the Emergency Department at DMH.

Staff currently working in Dr Piper House will transfer to the new location and the urgent care service will have its own treatment areas.

This is the next step in the Darlington Clinical Commissioning Group’s long-term plan for unscheduled care. The Emergency Department and urgent care service will eventually be fully integrated and delivered completely from the DMH site.
The region’s first endovascular hybrid operating theatre is being built at the University Hospital of North Durham.

Expected to open in the New Year, it will include state of the art equipment to allow clinicians to treat patients with vascular problems in a more contemporary and efficient way.

At present, patients with blockages in their blood vessels, wherever possible, are treated using endovascular (X-ray based) ‘key-hole’ techniques. If this approach is not possible or fails, patients may require conventional open vascular surgery, which must be done at a later appointment in a traditional theatre setting. The new hybrid theatre will bring the facilities to carry out both endovascular techniques and conventional surgery together in one theatre – the first of its kind in the region – improving patient experience and outcomes.

Philip Davey, consultant vascular and endovascular surgeon, explains, “Using ‘key-hole’ techniques with X-rays is often a better way of managing vascular disease because it is less invasive and usually avoids a general anaesthetic. Consequently, patients typically need less time in hospital and their recovery should be quicker.

“The new hybrid theatre means we will have high-end X-ray technology co-located in a ‘clean-air’ operating theatre setting. Patients should be able, wherever possible, to have their treatment completed in one episode of care. If the less invasive endovascular X-ray route is not successful, we will have the ability if appropriate to convert immediately to open surgery to fix the problem – there and then. This option is not currently available at any other vascular centre in the North East. It will provide the patient with a world-class facility, a real improvement in the quality of care, and a more cost-effective service.”

The Trust is now offering a new test, based at Bishop Auckland Hospital, to help diagnose heart disease.

CT or body scans have been used for many years to diagnose a variety of health conditions. Recent advances mean that doctors are now able to see the coronary arteries as well. Using a form of X-ray, the CT scanner can pick up calcium deposits in the coronary arteries that may indicate narrowing of the coronary arteries or angina.

There are two types of test available. The first is a calcium score which involves taking images of the heart in just a few seconds. Patients who do not have any calcium in their heart vessels are very unlikely to have heart disease. If calcium is detected in the coronary arteries, patients may proceed onto a CT coronary angiogram. This involves injecting a small amount of contrast or dye into a vein in the arm. This helps to visualise the blood vessels around the heart and gives a more detailed picture of any narrowing of the coronary arteries.

Consultant cardiologist Dr Jenifer Crilley says, “Heart disease due to a build-up of fat and calcium in the coronary arteries is a large public health problem in County Durham. Many patients do not have common risk factors such as smoking and diabetes. CT scanning will enhance the range of tests available to help us diagnose cardiac conditions. In particular, we will be able to identify patients who are at risk of heart attacks and make sure that they get the best treatment.”
Trust acts to improve emergency departments

Against a backdrop of concerns over the pressures on A&E departments nationally, the Trust is pushing ahead with its own initiatives to improve services at its two emergency departments at the University Hospital of North Durham and Darlington Memorial Hospital.

The ‘First Point of Contact’ initiative aims to streamline the patient journey from arrival, whether the patient walks in to the department or arrives by ambulance. Having redesigned processes to see patients more quickly, clinical teams are now testing the proposed new ways of working, and early results are encouraging.

For example, where previously around 44% of walk-in patients were treated within 30 minutes at Durham, this increased to over 70% during the trials. Rather than waiting, patients are greeted by a senior nurse (or ‘navigator’) who immediately determines whether they should be seen by a doctor or practitioner and they are guided through the department accordingly.

Lynn Hammal, service transformation lead, explains, “First Point of Contact is intended to improve patient flow through the department and avoid bottlenecks and delays.

By putting a consultant or senior doctor at the front of the process when people arrive by ambulance, patients are assessed, diagnosed, treated and hopefully discharged much more quickly. The new processes emphasise a team approach, and the new navigation roles ensure that the multidisciplinary skills of the whole team are used effectively to deliver rapid assessment and treatment.”

Other improvements

Work is also progressing to improve the speed and quality of diagnostics in A&E, standardising ordering protocols and reducing delays awaiting results.

The team is planning to refresh its workforce plan to ensure that everyone is equipped with the right skills to deliver the best possible care at every point in the patient journey.

In addition, senior nurses are planning to engage in a range of local improvement initiatives which are based on staff ideas and suggestions to improve the workplace.

Barbara Potter, A&E matron at Darlington Memorial Hospital, adds, “What is significant and exciting about these initiatives is that the A&E staff themselves are involved in and leading on these changes, supported by senior management. Patient and staff surveys have helped us to gain clarity on the direction of the service, how to manage the whole process, and how staff would deliver the improvements as a single team.

“Other initiatives, such as a shared vision, a team compact on acceptable behaviours, team and stakeholder events and better communications, are empowering staff and encouraging them to become engaged, gather evidence, and build the momentum towards a stronger and more efficient service.”

NHS chief turns NHS chef

Paul Baumann, NHS England chief financial officer, recently spent a day with catering, portering, A&E and ward nursing teams at Darlington Memorial Hospital to gain a valuable insight into the reality of life on the frontline of the NHS.

“I came away from my visit full of admiration for the exceptionally dedicated teams and for the very clear and coherent programme of action being undertaken to secure quality for patients and the wider community,” says Paul. “The prevailing impression I was left with was of a Trust with a determination to make things better for patients based on pragmatic innovation and down to earth “can do” attitudes.”
Quality all the way

Medical director Professor Chris Gray outlines the issues behind our evolving clinical and quality strategy.

We admitted 138,000 patients as emergency admissions in 2012/13, with an increasing proportion of frail elderly patients. We estimate the average age of the patients we admit to be 84 years.

We therefore need to design our services around the needs of the older patient. This will mean redesigning some services so that we can continue to deliver the majority of acute specialties across our two sites.

In the future, public and professional expectation is that we will deliver more weekend working in some professions and services, including support services, and opportunities for different patterns of working, such as fewer but extended days for some staff.

It will mean more care delivered directly by consultants, working closely with clinical colleagues in hospital and community. It will also mean developing new roles for nurses and other clinical professionals to carry out roles previously carried out by doctors.

In November, the Trust was chosen to be part of a national pilot for sharing good practice around 7 day working, and we want to maximise this opportunity for innovation locally.

Where this will deliver an improved service, specialist services should be delivered from a lead site within the Trust, with patients transferring between sites only if there is a clinical need to do so.

Some of the most specialist services and interventions will need to be centralised on one site, in order to ensure we have the critical mass of specialist staff and patients to ensure we meet nationally recognised quality standards.

This will be essential if we are to maintain specialist care within County Durham and Darlington in the medium to long term.

We have set up a Clinical Steering Group which meets weekly to explore these themes more deeply. We will shortly be publishing a document giving the background to our evolving clinical and quality strategy, and key areas for action.

This will be available on the Trust website, www.cddft.nhs.uk.

“The Trust’s accident and emergency services are the third busiest nationally, seeing and treating 122,000 patients last year”
WORK UNDERWAY ON PIONEERING £1M PROJECT TO CREATE ‘DEMENTIA-FRIENDLY’ OUTPATIENT EXPERIENCE

WORK has started on a six-month project to improve the outpatients department at Darlington Memorial Hospital to make it more welcoming for people with dementia.

The Trust secured more than £1m from the Government earlier this year, following a successful bid for funding based on work and research into dementia by the King’s Fund, Stirling University and in partnership and consultation with the local branch of the Alzheimer’s Society. There was also engagement with staff and patients.

The pioneering interior design scheme in the medical outpatients area, for example, uses natural colours with a woodland theme, so the pictures on the walls will feature trees and meadows. By contrast the dental area will have a blue colour scheme, with seascape imagery.

Dr Richard Reece, clinical director for specialist medicine, said, “We’re very excited about the work getting underway and seeing the improvements take shape.

“The changes we’re making are relatively simple ones, using just design, dementia-friendly colour schemes, lighting and signage, but it will mean that anyone coming into the hospital for an outpatient appointment will find it welcoming and easy to find their way around – including those with dementia, so everyone has a better experience here.”

The work is being done in phases to minimise disruption to patients and staff.

Treetops chosen as Mayor’s charity

The Mayor of Durham, Councillor Pauline Charlton, visited the Treetops children’s ward at the University Hospital of North Durham, after announcing it as her official charity for the year.

The ward, which cares for children from birth to 16 years old, deals with a wide range of injuries and ailments, from incidents of tonsillitis and asthma, to meningitis and fractures.

During her visit, Councillor Charlton was introduced to some of the ward’s patients and experienced its facilities, including a new pain relief machine which helps children recovering from major surgery.

She also spoke to the Treetops’ play specialists, a team dedicated to working with children unsure or anxious about being in hospital, to help them understand their condition or the procedure they are having in hospital, in an uncomplicated way.

Ward manager, Colin Smith, said, “Our staff and nurses very much enjoyed welcoming the Mayor to the ward and introducing her to the fantastic, varied work that is done here. As part of one of the largest care providers in the country, we treat over 5,500 children a year, aged from the very youngest babies through to teenagers, playing a vital role in helping families from across the region.”

The Mayor of Durham, Councillor Charlton, said, “I am pleased to support the valuable work of the Treetops children’s ward. I chose the ward as my charity for the year in recognition of the excellent work that is done there, and I’m pleased to be able to support the ward in continuing to provide this service which is vital to the community.”
Health Check4Life bus coming your way

The Trust’s health improvement team are now on the road with their Check4Life bus and visiting local communities to help people to be healthier.

The initiative will see the brightly coloured bus visiting community venues across the county where access to healthcare services is limited or uptake is poor. Anyone who sees the bus is encouraged to get on board to have a Check4Life Health Check and talk to the team about their health, how they can move more, eat well, stop smoking, drink less and live longer.

Jacqui Deakin, health improvement lead for Check4Life, says, “The aim is to take our services out to communities, to provide Check4Life health checks for people who don’t traditionally engage with healthcare services, in accessible venues, such as community centres, shopping centres and at community events.

“The bus aims to increase access to health improvement and lifestyle services, and make every contact count, by promoting health and wellbeing to contribute to preventing poor health, increased life expectancy and quality of life and reducing the significant health inequalities in County Durham.”

County Durham has high levels of health deprivation with 71% of the population classed by the Department of Health as being within the most deprived nationally. Deaths from smoking and early deaths from cancer and from heart disease and stroke are all higher than the England average.

To find out where the Check4Life bus will be going, contact 0191 569 2860 or visit the Check4Life Hub at www.impact.cdd.nhs.uk. This is regularly updated with all Check4Life events and there is also the option to book an appointment online at one of our Check4Life Hubs across County Durham.
Yan Yiannakou is professor of neurogastroenterology and director of research and development at the Trust and leads on both the organisation’s innovative functional bowel service and fast-growing research department.

‘Your Trust’ caught up with Yan to find out why these services are doing so well.

Originally from Kentish Town in London, Yan has been with the Trust since 2000. “I’ve trained all across the UK, including Scotland, Wales and the south east of England. I did my registrar training in Liverpool, research training at Guy’s Hospital in London and was also medical director at an Aboriginal hospital on Palm Island in North Queensland, Australia.”

The Trust’s functional bowel service covers conditions such as constipation, incontinence, chronic vomiting and abdominal pain. It’s a specialist regional service which sees some 50% of its referrals from outside of the Trust’s catchment area. Yan puts the success of the service down to three main reasons:

• A multi-disciplinary and holistic approach, using a wide range of therapies and innovative treatments, often at the same time rather than one at a time.
• An integrated service, working across all three care groups in the Trust and with community services.
• Close engagement with patients including a patient advisory group and feedback forms for every patient attending clinic.

Patients attending the service often have a severe level of symptoms that greatly affects their lives. Treatments in mainstream clinics are limited, but the Durham Functional Bowel Service provides patients with access to novel and innovative therapies, some of which have been developed by the team, and the outcome of treatments is carefully assessed in clinical trials.

“One of the most exciting things is starting to work together as a team right across the community,” explains Yan. “Our connection to patients is very important to us. We send out a newsletter to all our patients, run a patient advisory group and will be holding a conference next July for patients to attend. This helps us to develop integrated care pathways and hopefully will allow us to provide treatments closer to home.”

New clinical research unit
Yan is also director of research and development. Key to the growth in the Trust’s R&D work is the opening of a new clinical research unit this year.

The new £285,000 facility at Darlington Memorial Hospital, will see former offices transformed into a high-tech centre for research, looking at a range of health conditions.

The new unit reflects the Trust’s position in a national league table of organisations which carry out health research work, produced by The Guardian in association with the National Institute for Health Research (NIHR). According to the league table, the Trust is in the top 15 per cent of NHS organisations carrying out research.

When the clinical research unit opens its doors, it will include outpatient areas, a waiting room, space for inpatient research work, meeting rooms, as well as accommodation for office staff and research teams.

“The Trust is conducting a lot of research in a broad range of specialties,” says Yan, “and we now perform research in most of the main departments, with more than 35 consultants leading trials.”
“The research really falls into two categories. The first is drug trials for pharmaceutical companies, which is important in making sure these trials are done in a multi-centred way. It means patients here in the local area have the opportunity to access the latest drugs under development – which has obvious benefits.

“The other kind of research we do is our own, where we are driving the agenda, using our own ideas and innovations, which we have been very successful with and which attracts funding for the Trust. At the moment we have three large studies looking at GI disorders and breast cancer, which have attracted NIHR funding, demonstrating the high value of research being done here.”

Yan adds, “R&D work being done within the Trust is growing rapidly – we’ve increased research activity by an average of 38 per cent per year over the last five years. Last year, we had 2,735 patients involved in our research, and we recruited to 91 clinical trials – so the new CRU will be extremely busy.”

The Trust’s R&D department includes a dedicated team of managers, facilitators and administrative staff. There are around 30 research nurses, as well as pathology and pharmacy staff, working across the Trust’s sites in Durham and Darlington. The new CRU has been funded with income generated by the research already being undertaken by the Trust.

“It has been shown that departments offering research have better clinical outcomes and better patient experiences, so embedding research into practice has benefits that go beyond the research. It also means we can offer the latest treatments for our local population.”

The Trust has completed a major Department of Health research project with Swansea University into the role of healthy bacteria, known as probiotics, in the prevention of life-threatening infections, which affect the digestive system of elderly patients.

The £1.2m PLACIDE study was the largest of its kind in the world, and has the potential to save the NHS millions of pounds.

The study was designed to look at strategies to reduce the on-going increase in C. difficile infections across the NHS in elderly hospitalised patients. The findings of the project were so significant that the project has featured in the prestigious medical journal The Lancet and has also been commented upon in the British Medical Journal.

There were 17,414 reported cases in England in 2011, and new strains of the C. difficile bacteria have emerged, which tend to cause more severe infections, with symptoms including diarrhoea, high temperature and painful abdominal cramps.

Using patients at the University Hospital of North Durham and Darlington Memorial Hospital, as well as three hospitals in Swansea, the Trust’s R&D team screened more than 17,000 elderly inpatients between 2008 and 2012, and recruited around 2,900 patients to a randomised placebo study group.

Their research found that probiotics do not reduce the occurrence of C. difficile infections in elderly patients and the use of these products is unlikely to be cost-effective in preventing infections.

Dr Anjan Dhar, senior lecturer in gastroenterology and consultant gastroenterologist at the Trust, said, “We are very proud of this study – it is the largest study so far in the world looking at the role of probiotics in the prevention of these infections in NHS hospitals.

“Our findings are likely to have a major impact in clinical practice and will save the NHS a lot of money in terms of non-effective treatments. The study has also helped the Trust to consolidate its own C. difficile prevention and management policy. This shows that as a large Foundation Trust delivering high quality care, we are also able to invest in science for the benefit of our own patients. We are very grateful to the patients who participated in the study – we couldn’t have done it without them.”
The benefits of a male midwife

Traditionally, midwifery has been thought of as a female profession. However, the Trust is pleased to have one of a very few male midwives across the region working in our hospitals. As part of a series looking at men in jobs traditionally associated with women, midwife Jamie McDade recently gave an interview to BBC Radio Tees.

Jamie decided to train as a midwife after his youngest son was born, moving from a career as an electronics engineer in the Royal Air Force.

Jamie said, “When my youngest son was born, Justin, I just knew it was what I wanted to do. I toyed with the idea for a few years, put up with a lot of stick and eventually figured that life was too short and I still had those really, really strong ambitions, so I followed it. I did my training at Gateshead and then from qualifying I started work with the Trust.

“I’ve never been conscious of the fact that I’m different to anybody else I’m working with and I can count on one finger the amount of times I’ve had a negative reaction straightaway. A lot of the women I’ve cared for have said afterwards they were really shocked to have had a male midwife walk into the room, but have said afterwards they wouldn’t have had anybody else.

“I enjoy being able to sit and talk to a couple right through their whole birth experience, even if its ante-natal, post-natal or during labour that I get to bond with that couple and I see them as a couple, I like the dads to get involved as well.”

It’s this added perspective which Allison Metters, maternity matron at University Hospital of North Durham also comments on. “Jamie adds that difference to support the dads as well, a male perspective. Whilst the focus remains on the women, there’s that sort of engagement with the fathers and the fact that he is a dad, that’s brought a lot of positive.”

So, what would Jamie say to other men thinking about midwifery as a profession? “I’d say go for it to other men as well, if it’s a desire, if it’s an ambition then absolutely do it. I’ve never faced any animosity. The challenges are massive but that counts whether you’re a man or a woman - if it’s a desire and something you want to do, go for it. It’s the most rewarding career in the world.”

MAGICAL TIME FOR CHARLOTTE

Dreams really can come true and Charlotte Jones, who works for the Trust at Darlington Memorial Hospital, has the best-selling book to prove it.

‘The Enchanted Grandfather’s Clock’ is Charlotte’s first novel and it achieved ‘bestseller’ status on Amazon within days of its release in August earlier this year.

The book is the first in the ‘Chronicles of Gnoble’ series about the adventures of a young boy, Jamie, who discovers the magical Land of Bong through an old wooden Grandfather’s clock. Written for children but appealing also to older readers, the story includes characters such as the Time-Keeper, the time-keeping Watchers, and the evil Time-Taker.

Charlotte is from Darlington and has worked at Darlington Memorial Hospital since school, including roles in education and as a senior sister in surgery.

“When I was ten years old, I was fascinated by a magnificent old Grandfather’s clock at a friend’s house and in that moment created all these wonderful characters and tales,” says Charlotte. “I attended a writer’s circle in Darlington as a teenager and was encouraged to write the stories. For years they sat on my PC but were read out loud as favourite bedtime stories to my daughter Parisa.”

Charlotte’s daughter is the Illustrator of the book series, and produced many illustrations of the characters as a child.

Charlotte adds, “It was Stephanie Hale, the well-respected author of ‘Millionaire authors’ secrets’, who changed everything for me in a single moment. We met at a conference earlier this year and she took me under her wing, believing in my stories.

“I’m really proud of Darlington and the Trust. Colleagues have been tremendously supportive, and there’s been a huge amount of interest locally as Darlington is mentioned in my books.”

Crown Street, Darlington library has now launched the annual ‘Lottie Writes’ Award (Charlotte’s pen name) which encourages children to be imaginative by creating their own book titles and book cover designs.
Improvements in sexual health service

Exciting times for the Trust’s Sexual Health Service which has recently started the transition to a bespoke InTouch electronic data collection system for the county wide integrated service, including genito-urinary, contraception and chlamydia screening.

This first development will pave the way for the next phase where the service will benefit from electronic patient records and the electronic management of pathology requests.

Coast to coast bike ride for children’s epilepsy

Four amazing staff members have raised £570.00 for the children’s epilepsy service by cycling coast to coast. L to r, post man Graeme Bell, support officer Lindsey Bell, teaching assistant Sabrina Barlow, and post man Andrew Mundell, cycled 139 miles in two days in August, starting at Workington and finishing, via Penrith and Allenheads, at Roker in Sunderland by dipping their wheels in the sea.

Sue Lewis, paediatric epilepsy nurse specialist at Bishop Auckland Hospital, said, “We are thrilled with the donation and will buy some recordable baby monitors and books about epilepsy for all age ranges. Our thanks also go to everyone who sponsored the ride.”

Trust highly commended at prestigious HSJ awards

Staff and volunteers at Healthworks, a healthy living resource centre in Easington, are celebrating after their work was highly commended at the recent Health Service Journal Awards.

The team were finalists in the Primary Care and Community Service Redesign Category. The judges commented, “Inspirational and transformational, Healthworks is its community.”

Hosted by Jon Snow, presenter of Channel 4 News, the Health Service Journal (HSJ) Awards are some of the most sought after in the health sector. This year there were 1,101 entries – the largest number ever received in the awards’ 32 year history.

The Trust co-ordinates Healthworks, in partnership with Durham County Council and Northumbrian Water. The Centre acts as a community focal point, offering more than 80 health and community services, information and activities for all ages.

Recovering cancer patient makes donation

A recovering cancer patient is donating £1,300 to the team of medical professionals on ward 32 at Darlington Memorial Hospital who treated him.

Mr Ian Mavin, 53 from Crook was diagnosed with colon cancer in December last year. He came into hospital to undergo surgery in January under the care of consultant, Mr Thanesan Ramalingam.

Mr Mavin said, “The care I received was excellent, I couldn’t fault it. From the nurses to the cleaning staff on the ward, everyone was caring and friendly but especially Mr Ramalingam, who was fantastic. I actually had a heart attack on the operating table and nearly died so while I was recovering I knew I wanted to do something to stay healthy and get fitter. I decided to do a sponsored walk and set a date as something to aim towards.”

In June, Mr Mavin and two friends completed a 21 mile walk from Tow Law to Willington, visiting the Masonic Halls along the route. The group raised £1,300 and Mr Mavin has also lost four stone in the process.

He said, “I wanted to give something back to the hospital and Mr Ramalingam and was delighted to raise so much. We have now decided to make the walk an annual event.”
Iain Bain, divisional director for surgery and consultant general surgeon, said, “We speak to lots of patients who are understandably worried about the risks associated with surgery and their recovery afterwards.

“The Getting Better Sooner project highlights the benefits of making key lifestyle changes. The online videos feature testimonials from patients who have been helped to prepare for surgery by our Health and Wellbeing team and had fantastic results. Not only do these changes help our patients during surgery and recovery - if they’re maintained, they’ll have a lasting benefit for years to come.”

One such patient is Andy Woodward, pictured, who was diagnosed with bowel cancer in June 2010. Andy, a professional sports coach, had been training for the Great North Run when he was given the devastating news.

“I was diagnosed with the early stages of bowel cancer in June which was a massive shock,” said Andy. “The doctors were fantastic though, and put me at ease straight away.

“I was booked in for surgery in August. I had a pre-op test the day before which showed I had a good resting heart rate. I had my operation on Thursday, was up and about in hospital on Saturday, and discharged on Monday. It was a really fast turnaround, which I put down to my physical fitness at the time, my body might not have coped so well with the surgery if I was overweight or if my organs weren’t used to working so hard.”

Anyone having pre-planned surgery at one of the Trust’s hospitals will be given information on the project and invited to visit the website at www.cddft.nhs.uk/gettingbettersooner for help and advice.
Local GPs have now taken responsibility for commissioning a wide range of health services across County Durham and Darlington. Since April this year, three new GP-led Clinical Commissioning Groups (CCGs) are making sure that people living in the area have access to the healthcare they need.

Dr Stewart Findlay, chief clinical officer for Durham Dales, Easington and Sedgefield CCG said, “Clinical commissioning means that GPs now have greater opportunity to use their knowledge about healthcare to develop services that meet the needs of patients.”

CCGs are committed to working closely and in partnership with local people and organisations, including patients, carers, hospitals, local authorities and voluntary and community groups.

Dr Neil O’Brien, chief clinical officer for North Durham CCG added, “As health professionals, we see patients and providers of health services every day. We are committed to making changes that will improve the health and experiences of people who live locally.”

CCGs are keen to ensure that more local people get involved in decisions about health services. Contact your local CCG to find out more about their work and how you can have your say.

NHS Darlington Clinical Commissioning Group represents all 11 family GP practices in the area, covering a population of around 100,000. The CCG is committed to engaging with and listening carefully to the voices of the voluntary and community sector, patients, carers and the general public to ensure that as many people as possible are involved in decisions about local health service.

Dr Piper House, King Street, Darlington DL3 6JL
Tel: 01325 364271
Email: DARCCG.contact@nhs.net
Website: www.darlingtonccg.nhs.uk

NHS North Durham Clinical Commissioning Group serves around 243,000 people living in Derwentside, Durham and Chester-le-Street. All 31 GP practices in the North Durham area are members of the CCG and together they make decisions about new and existing services.

The Rivergreen Centre, Aykley Heads, Durham DH1 5TS
Tel: 0191 605 3248
Email: nduccg.northdurhamccg@nhs.net
Website: www.northdurhamccg.nhs.uk

NHS Durham Dales, Easington and Sedgefield Clinical Commissioning Group consists of up to 40 member practices and covers a total population of around 272,000 over a large and diverse geographical area. The CCG comprises three localities: Durham Dales, Easington and East Durham, and Sedgefield. These localities have worked closely together as commissioners of local healthcare services for many years.

Sedgefield Community Hospital, Salters Lane, Sedgefield TS21 3EE
Tel: 0191 371 3222
Email: ddesccg.enquiries@nhs.net
Website: www.durhamdaleseasingtonsedgefieldccg.nhs.uk

GPs THE NEW COMMISSIONERS

FESTIVAL OF REMEMBRANCE

On Saturday 9 November, the Trust was proud to be represented at Durham Cathedral’s Festival of Remembrance by Jane Howarth, RIACT manager and community matron Jill Parkinson.

Jane (pictured right) said, “From arriving at the Cathedral at 2.30 till the end of the Festival at 10.30 was an amazing and humbling experience. Jill and I met many different people and felt proud to be able to represent CDDFT in the parade alongside the armed forces and other representatives from the emergency services. It is an experience I will not forget.”

While Jill commented, “The whole day was an amazing and moving experience. We managed to keep our places and perform on cue quite well, even marching as though we’d been taught to do it all along!”

“The music was fantastic and the sound of the drum followed by the bagpipes still makes the hairs on the back of my neck stand up even thinking about it, plus the whole setting and atmosphere of a very special cathedral. I would most definitely recommend the experience to any of my colleagues and one I’m glad I was able to squeeze in before my retirement on the 19th of December.”
CONSTITUTIONAL CHANGES: MEMBERS’ VOTE

This year’s AGM saw an exciting new addition to the proceeding, in the form of a ‘members vote’.

Members attending the AGM were invited to take part in a vote to agree changes required for the Trust’s constitution to meet the provisions of the new Health and Social Care Act (HSCA). In particular, under the HSCA, Trust members have to agree any changes to the way in which the Council of Governors works.

Mr John Short MBE, public governor for Wear Valley and Teesdale and chair of the Audit and Governance Committee, spoke at the AGM on behalf of the Council of Governors. John confirmed to the members present that all changes to the Trust’s constitution had been reviewed and approved by the Council of Governors’ Audit and Governance Committee and thereafter were discussed and agreed by the Trust Board of Directors and Council of Governors on 22 May 2013.

The Trust Members present at the AGM formally voted, resulting in 96% voting in favour of the changes. This majority vote in favour of the changes ensured that the proposed constitution was formally ratified. A copy of the revised constitution can be found on the Trust’s website: www.cddft.nhs.uk or by contacting the Foundation Trust (FT) Office, email: foundation@cddft.nhs.uk or tel: 01325 743625.

GOVERNOR ELECTIONS

As a Foundation Trust, County Durham and Darlington NHS Foundation Trust has a Council of Governors, comprised of thirty-nine governors, the majority of whom are publicly elected governors. The elections take place annually and governors are usually elected for a three year term but this can vary and governors may apply to be re-elected for further terms.

To ensure impartiality, the Trust elections are run by independent election agents UK Engage. The election process commences with the Notice of Poll, which was posted out to public members mid-October. Members who were interested in becoming a Trust governor, then applied to the Returning Officer (UK Engage) and requested a nominations pack.

Following completion of the nomination process, UK Engage issued ballot papers to public members who live in constituencies where there is more than one candidate applying to become a governor for that area. Members are invited to vote for the candidate they want to have as a governor. The winning candidate is the one who receives the majority of votes from members in their constituency.

Becoming a governor is an exciting opportunity to get involved in the work of County Durham and Darlington NHS Foundation Trust and represent your community. The Trust’s governors work together as the Council of Governors and carry out a number of statutory duties including the appointment (or removal) of the Trust’s chairman and non-executive directors.

Governors also appoint the Trust’s auditors, approve changes to the constitution of the Trust and are active in the development of the Trust’s strategies and its annual plan. Most importantly, they scrutinise the Trust’s Board of Directors’ management of the Trust, holding the Board to account.

Further details on becoming a governor and elections can be found on the Trust’s website: www.cddft.nhs.uk or by contacting the Foundation Trust (FT) Office, email: foundation@cddft.nhs.uk or tel: 01325 743625.
Foundation Trust Membership – Frequently Asked Questions

1) What does being a member mean?

Being a member of County Durham and Darlington NHS Foundation Trust is absolutely FREE and means that:

- you receive a FREE quarterly copy of ‘Your Trust’ magazine;
- you are given an option to attend FREE membership and information events;
- you can vote in governor elections to choose a governor to represent your area;
- you have an option to stand in an election to become a governor of the Trust;
- you receive a personal invite from the Trust chairman to attend the Annual General Meeting and talk directly to our Board members and Council of Governors; and
- you can take part in members’ votes, such as those required to change the Trust Constitution.

Being a member does not mean you have to attend meetings or take part in surveys or elections if you don’t want to. It’s entirely up to you as to how involved you would like to be. You may simply wish to receive your free copy of ‘Your Trust’ magazine to keep up to date with the latest news on our Trust’s services. Alternatively, some members may be happy to get more involved so they can air their views on changes to services, attend meetings and even stand as a governor. The choice is yours as to what suits you and your lifestyle.

2) How do I make a difference and why is membership so important?

The Trust greatly values ALL of its members. Your views are important in determining how the Trust is run and members can influence the services we provide. The more diverse the membership the better, as we need members of all age groups, abilities and disabilities, so we are able to provide the right services for everyone.

The Trust’s Council of Governors is elected by members. Governors represent the members of their constituency, influencing the Trust’s annual plan and the general running of its hospitals and services.

3) I’ve been a member of the Trust for a few years but I’m quite elderly now and not very active after having a stroke last year. Should I give up my membership so someone else more active can join?

Definitely not! Having had a stroke means that you will have a personal insight into what’s needed when it comes to stroke treatments and hospital care. You may also find the information provided at one of our ‘Medicine for Members’ events of interest to you personally. We have no limit to the number of members we can have and indeed need as many members as possible from all walks of life to ensure we provide the right services for all within our local area.

Want to know more?

For more FAQs go to www.cddft.nhs.uk, or if you have any questions regarding membership, or would like to know more, then please don’t hesitate to contact the FT Office: email: foundation@cddft.nhs.uk, or tel: 01325 743625, or why not write to us at: Foundation Trust Office, Executive Corridor, Darlington Memorial Hospital, Hollyhurst Road, Darlington DL3 6HX.
TRUST ANNUAL AWARDS – WHO WILL YOU NOMINATE?

The Trust’s Annual Awards Ceremony will take place on Tuesday 18 February 2014 at Hardwick Hall Hotel, Sedgefield.

This is your chance to nominate a team or individual who is helping the Trust to provide the very best services for patients, service users and colleagues.

Nominations are now open for the following awards. Download details from StaffNet or from the internet at www.cddft.nhs.uk/working-for-us.

MAKING YOU FEEL BETTER AWARD -

to a team or an individual who has been nominated by way of compliments received from a patient, member of the public or colleague.

Last year’s ‘Making you feel better award’ winner, Jackie Thompson, physiotherapist at Bishop Auckland Hospital

The Shining Star Award – for an individual who goes the extra mile for patients, clients, colleagues, public or the organisation.

Prevention First, Public Health and Health Improvement Award – for finding innovative and sustainable ways to improve the health of local people.

Making a Difference behind the Scenes Award – for clearly demonstrating the delivery of a first class service.

Leadership for Change Award – for clearly demonstrating high quality leadership during an identified change.

Award for Quality and Innovation – for challenging the traditional provision of services and delivering a sustainable transformation.

Chief Executive’s Award – for a team which shows loyalty and pride in the organisation and actively promotes the Trust.

Learner Award – for study completed (with the exception of Essential Training) in the previous year November 2012 to December 2013.

Chairman’s Quality Award – This award is chosen from the winners of each of the above categories and will be announced on the evening of the ceremony.

www.cddft.nhs.uk