



A message from Jonathan Montgomery, chair

As you are probably aware Gareth Cruddace, chief executive, has been on compassionate leave for some time and in view on the continuing uncertainty over Gareth's return to work, the Board has taken steps to secure the services of an interim chief executive.

I am pleased to be able to let you know that Richard Popplewell, chief executive of Stockport PCT, has agreed to join us for up to six months in the chief executive role.

Richard has been in the NHS since 1977 following an academic background in statistics and operational research. He is a very experienced chief executive and I delighted to welcome him.

Also having previously persuaded Hilary Tyler, director of finance, to delay her long-planned retirement, I have reluctantly agreed to her recent decision to retire from the NHS in the Autumn of 2009. Hilary was one of the very first people to join the Hampshire Primary Care Trust [PCT] in October 2006 and has been a driving force behind the improvement of both the organisation and health services for local people.

In May, we also saw the retirement of Jean Bradlow, director of public health. She joined NHS Hampshire in March 2007 and had a joint appointment between NHS Hampshire and Hampshire County Council. In her replacement Christine Jackson is acting up as director of public health.

When Richard Popplewell joined the PCT as interim chief executive on June 15, 2009 with Hilary reverting to her role as deputy chief executive her focus will be the delivery of system sustainability across the county. In order to avoid any disruption, Mike Fulford will continue to act up as director of finance for the PCT.

June 23, 2009

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Influenza A (H1N1)

Over the past month we have seen an outbreak of Influenza A (H1N1) in several countries across the world. The World Health Organisation (WHO) has declared Phase 6 of its pandemic alert system, which means that swine flu is now spreading in communities in several countries.

This decision reflects the geographic spread of the virus and not its severity. The move to Phase 6 does not trigger any material change to our response in the UK. Actions taken in the UK are based on the situation here and our preparations are well advanced.

The localised cases of Influenza A (H1N1) found in the UK have so far experienced mild symptoms and made a rapid and full recovery, and the spread has been limited. However, a small minority have been more severe.

The Department of Health is continuing to work to slow the spread of the disease. The UK strategy of providing anti-virals for those who have developed the disease and their close contacts, and using school closures where appropriate has so far been effective in slowing the spread of the disease.

We have been preparing for the possibility of a pandemic for a number of years and are among the most prepared countries in the world. The preparations we have in place and are continuing to make will help to ensure we respond well. NHS Hampshire's pandemic flu plan is available at <http://www.hampshire.nhs.uk/about-us/emergency-planning/291-nhs-hampshire-emergency-planning-a-pandemic-influenza>.

A national public health campaign is running with TV, print and radio adverts providing information about Influenza A (H1N1) with the simple message: CATCH IT. BIN IT. KILL IT. The TV and radio adverts can be viewed at www.dh.gov.uk/en/News/Media/DH_098663 and the leaflet is available at www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_098685 including translated copies.

If you are worried about Swine Flu Influenza A (H1N1) and would like further information please contact the Swine Flu Information Line on 0800 1 513 513 or visit the NHS Choices website on www.nhs.uk.

Also, people are being reminded that if they have returned from either Mexico, USA or any of the other affected countries (a list is available on www.nhsdirect.nhs.uk/SAT/Topics/ColdsAndFluWizard.aspx?SyndicationPartnerGuid=d19370ea-a100-407d-9695-b73407f701c7&TopicGuid=8c903315-a302-412a-bfae-9cb576d4b4cd) and have developed flu like symptoms within seven days of returning they should:

- Use the symptoms checker on www.nhsdirect.nhs.uk
- Phone NHS Direct on 0845 4647
- Phone their local GP



**SWINE FLU
INFORMATION**

0800 1 513 513

www.nhs.uk

www.direct.gov.uk/swineflu

Hampshire PCT has changed

You may be aware that in February, Hampshire Primary Care Trust split the commissioning arm of the organisation from the provider arm.

The commissioning arm is now known as NHS Hampshire and the provider arm as Hampshire Community Health Care (HCHC).

Separating the functions of the PCT this way will help patients and public understand the role of commissioners (buyers of health care) and raise the profile of community services – which provides vital health care services to people outside of large (acute) hospitals.

NHS Hampshire and Hampshire Community Health Care are now operating as two separate organisations with their own values, strategic goals, brand identity and websites.

Both NHS Hampshire and Hampshire Community Health Care are still legally under the umbrella of Hampshire Primary Care Trust.

Hampshire Primary Care Trust



"NHS Hampshire invests in your health. We work with local people to help you live longer, healthier lives and to make sure that local health services are there when you need them. It's our job to make sure that everything about the local NHS, whether that's your local GP, community service or general hospital is of the highest standard and is available when and where you need it."

We know that Hampshire is one of the healthiest counties in England, but there are big differences in life expectancy depending on where you live. We are committed to closing this gap and making sure that everyone in Hampshire has the same opportunity to live a long and healthy life."

Our Values

- Putting people first
- Committed to quality
- Delivering results
- Speak well of ourselves and of others

www.hampshire.nhs.uk



Hampshire Community Health Care

Hampshire Community Health Care (HCHC) aims to bring health care closer to home. We provide many services that help people stay independent in their own homes, help reduce unnecessary admissions to large hospitals, provide support for patients after major operations and to children and their families.

We provide many community-based primary care services, smoking cessation and sexual health services as well as running Hampshire's community hospitals.

Our Values

- To offer value for money
- To always deliver results
- To provide patient-centred services
- To have pride in the services it provides
- To value success

www.hchc.nhs.uk

Local Authority Information

Update for partners and stakeholders of NHS Hampshire

Do you want to learn more about NHS Hampshire and its work as the organisation which commissions health services for the 1.25million people of the county? Would it be helpful to understand NHS Hampshire's relationship with the Strategic Health Authority, the hospitals and other trusts in Hampshire?

If you want to discover more about NHS Hampshire, then we would be happy to give a briefing to members and officers. Lasting 15-20 minutes, our NHS Hampshire briefing can be delivered just ahead of a council meeting or to a lunchtime session for key officers.

You can find out more or book a briefing by contacting Mel McKeown, Head of Communications and Engagement for NHS Hampshire – either email her at mel.mckeown@hampshire.nhs.uk or call her on 023 8062 7431.

Finance update

Month 12

The auditors are now reviewing our full year figures for 2008/09 and our submission shows a small under spend of £258,000 as the year end position for 2008/09. This is due to the management of referrals, commissioning contracts and reducing non-urgent spend.

This is an excellent figure to achieve as in September 2008/09 we were expecting an overspend of £14m. This was achieved by efforts from all Hampshire PCT staff to stay within budgets while still meeting commitments.

This year we have achieved many targets which have helped towards this figure and turning the focus onto the next financial year 2009/10, NHS Hampshire has a variety of targets to deliver to meet break even position next April.

Month 1

The PCT is reporting a £134,000 overspend for month one and a forecast £3.1m surplus outturn position for 2009/10 in line with the agreed plan.

No activity information is available from the acute providers relating to April and therefore those positions are reported as breakeven. For month one there was a slight overspend on primary care prescribing which was counter balanced by private providers; funded nursing care; and general primary care services.

In order to deliver the 2009/10 budget a cost reduction/demand management programme of £57.8m needs to be delivered. To achieve this we will:

- work with Hampshire Community Health Care to develop more efficient ways of delivering services
- reduce the amounts spent within the acute trusts where they are not operating as efficiently as the top 25% in the country
- provide care in the most appropriate setting

The PCT has not yet been notified of its capital allocation total for 2009/10. The spend for April was £0.8m, which is in line with the Board decision in March to continue to spend against already committed projects only. All other projects will be held, pending confirmation of the capital allocation.

Performance Update

In May, the PCT Commissioning Board received a summary of performance against the existing commitments and national priorities which form part of the Care Quality Commission's annual review of NHS organisations' performance – the Annual Health Check for 2008/09. Highlights include:

Diabetic retinopathy screening

98% of patients were offered diabetic retinopathy screening in Quarter 4 2008/09, against a target of 100%. This figure represents significant progress over 2008/09, and exceeds the 95% Annual Health Check target.

Access to Genito-urinary medicine (GUM)

99.82% of patients were offered an appointment within 48 hours of contacting the service in 2008/09, against the operational standard of 98%.

18 weeks (admitted and non-admitted) and Audiology Referral to Treatment Times

The PCT achieved all three targets by end of December 2008. Performance continues to be maintained in 2009/10.

Incidence of Clostridium Difficile (Cdiff)

The PCT achieved its year end target of 1,042 by a considerable margin, with a total number of only 808 Cdiff infections in patients aged two years and above.

A&E four hour waiting times

98.45% (national standard 98%) of patients waited no more than four hours in Accident and Emergency (A&E).

Other performance issues:

Breastfeeding at 6-8 weeks

Performance on breastfeeding coverage (recording of feeding status) at Quarter 4 was 53.7%, against a target of 85%. This figure represents a significant improvement on Quarter 3 (33.9%); however this improvement needs to continue if we are to meet the more challenging targets for 2009/10.

Ambulance response times

All three ambulance targets underachieved at year end. The assessment is based on performance for South Central Ambulance Service (SCAS) and South East Coast Ambulance Service (SECAMB).

Proportion of people who spend at least 90% of their time on a Stroke Unit

The PCT reported an underperformance against this target in Quarter 4, achieving 45.88% against a year end target of 65.22%. Only one of our main acute providers was unable to provide data for quarter 4, therefore the data for this trust was estimated. Further assurance is required for 2009/10.

Actions to address areas of underperformance are in place, and will continue to be monitored through NHS Hampshire's internal performance management processes. For a full update on the progress of performance and performance monitoring, go to www.hampshire.nhs.uk/about-us/key-documents/310-board-papers to view the latest board paper. The Annual Health Check results will be published on October 15, 2009.

Women and Children's Services are on the move

As of June 30, 2009 all Maternity services currently based at St Mary's in Portsmouth, including the Birth Centre currently known as The Mary Rose Birth Centre, will be based at Queen Alexandra (QA) Hospital, Portsmouth. The new unit at QA is due to open its doors for the first time at 10am on June 30.

To facilitate the needs of women living in the Portsea Island area, a stand alone birth centre is due to be built on the St Mary's hospital site in 2010.

All other Women and Children's Services move from St Mary's as follows:

- Gynaecology services move on June 30, admitting patients from 9am at QA, the breast surgery unit formally housed at Haslar Hospital will then be incorporated into the Gynaecology ward to provide a women centered unit. Some Gynaecology outpatients will remain on the St Marys site.
- Neonatal Intensive Care Unit moves on the June 30.
- Paediatric services move on July 2, taking admissions from 11am at QA. Paediatrics will retain some Outpatients on the St Marys Site.

For more details on the new centre at QA Hospital please contact Abbie Aplin, project manager, at abbie.aplin@portshosp.nhs.uk.

Meet the Commissioner

Name

Philippa Bates

Job Title

Assistant Contracting Manager

Background

I worked as a veterinary nurse for 10 years prior to joining the NHS. Three years ago I began working for an agency with placements within hospitals and then NHS Hampshire. I became a permanent member of staff in March, 2009.

Roles and responsibilities

I am responsible for liaising with and funding voluntary sector organisations as well as co-ordinating the grants process for NHS Hampshire.

Current goals and priorities

I have two main aims: one is to continue building a positive relationship between NHS Hampshire and the voluntary sector. The second is to help create a joint funding process with Hampshire County Council.



What do I like to do outside work?

I enjoy running but had to take a break recently due to an injury. I like to try new things, for example I have recently tried Nordic Walking and over the next couple of months I am planning to skydive, start a course in boxing and climb Mount Snowden. I'm also contemplating belly dancing!

How would your friends describe you?

A little mad, lots of fun and will try anything once.

Ideal holiday destination

Thailand

Interesting fact people wouldn't know about you

I have walked barefoot over 20ft of hot coals.

Favourite film

The Rocky Horror Picture Show

Gosport War Memorial Hospital Inquests

The inquests by HM Coroner into the deaths of ten patients at Gosport War Memorial Hospital (GWMH) from 1996 – 1999 concluded on April 20 when the jury returned its verdicts.

The jury consisting of five women and three men found that in all ten cases the drugs administered to the patients were given for therapeutic purposes.

In five of the ten cases the jury found that the medication used to treat and relieve their symptoms did not contribute to their deaths. In two verdicts the medication was found to have been appropriately given, but did contribute to the patient's death.

In three cases: Elsie Devine, Robert Wilson and Geoffrey Packman the medication was found to have contributed to the patient's death and was deemed to be inappropriate for their condition.

Richard Samuel Director of Performance and Standards, NHS Hampshire said:

"It is a matter of regret to the NHS that three verdicts indicate that in the mid/late 1990s the medication administered to five patients at Gosport War Memorial Hospital was found to have contributed to their deaths. On behalf of the NHS we have apologised to the families concerned for any treatment or care which was found to have contributed to the deaths of their loved ones".

The ten deaths have already been the subject of three police investigations and an investigation by the Commission for Health Improvement (CHI).

"We are reassured that none of the findings related to issues that hadn't already been resolved as a result of the CHI report in 2002," continued Richard Samuel.

"Patient safety and quality of care is at the very heart of everything we do at NHS Hampshire and we are confident that the quality of care provided at Gosport War Memorial Hospital today is of the highest standard."

Should you have any questions regarding the inquests, please contact NHS Hampshire's Communications Team on 023 8062 7434.

NHS Hampshire's new website

On April 1, NHS Hampshire launched our new website – www.hampshire.nhs.uk. The website is full of information about what NHS Hampshire does, how you can get involved, information on local services and much more.

The website is constantly evolving and changing to suit the needs of the users. To do this we are encouraging every one to have a look and give us feedback on areas for improvement or information that you think needs adding. To enable you to comment and feedback each page has been designed with a comments box at the bottom of the page.

The new website has lots of new functionalities including the opportunity to join forums and to Sign Up to NHS Hampshire.



Appointment of Non-executive director

Hampshire PCT is pleased to announce the appointment of Non-executive Director Trevor Spires.

Following his training as an engineer with Rolls-Royce Aero Engines, Trevor Spires joined the Royal Navy. After a long and varied career he recently retired, having spent the last five years as the Chief Executive of the organisation responsible for HR support, including pay and pensions, to all current and former members of the UK armed forces. Areas of particular expertise that he brings include service delivery, finance, change and risk management, and training. Trevor and his wife live in Hedge End and their two grown-up children also live in Hampshire.

The appointment was made by the Appointments Commission and will run for four years from March 3, 2009 to March 2, 2013. The remuneration for the post is £7,765 per annum.

All Non-executive Director appointments are made on merit and political activity plays no part in the selection process. However, in accordance with the original Nolan recommendations, there is a requirement for appointees' political activity (if any declared) to be made public. Trevor Spires has not declared any political activity in the past five years and does not hold any other ministerial appointments.

The appointment of the Non-executive Director has been made in accordance with the OCPA Code of Practice.

New NHS musculoskeletal service to launch in north east Hampshire

NHS patients in north east Hampshire will soon benefit from a new musculoskeletal (MSK) service launched in April.

NHS Hampshire has awarded the contract to Hampshire Health, a partnership between family doctors in the local area and Assura, a leading healthcare provider. Hampshire Health will develop and deliver the new service.

The service means patients with musculoskeletal conditions, such as lower back pain, joint problems and repetitive strain injuries of various sorts, will benefit from assessments by specialists including GPs with a special interest in orthopaedics, consultant surgeons and extended scope practitioners (physiotherapists and podiatrists with expertise in assessment and diagnostics).

During their assessment, the patient and clinician will agree a treatment plan and if the patient needs to have further tests, such as X-rays or blood tests, physiotherapy or a surgical procedure then these will be arranged.

The service expects to see about 12,000 patients a year, with the first being seen towards the end of April. It will be based in three venues in the north east Hampshire area, starting in Chase Hospital in Bordon and Aldershot Centre for Health, followed closely by Crown Heights in Basingstoke.

The service is for NHS patients, and access to investigations will be via GP direct access referral.

Going Further on Cancer Waits

Going Further on Cancer Waits (GFCW) is a government programme to improve cancer services, aiming to be among the best in the world by 2012. As part of this programme a new process for collecting cancer waiting times data was introduced on January 1, 2009, with the first official data under the new reporting system available in May.

The new system allows all cancer patients to be monitored, following the success of previous standards for specific cancers. This improved monitoring not only brings benefits to a wider range of patients for a faster diagnosis but is also in line with 18 week standards.

It is important to note that to the casual observer, the introduction of these new standards may appear to have a negative effect on the overall performance of cancer care. The reality is that there is no reduction in care or treatment. In fact the opposite is true as the reporting is now targeting every cancer patient and measuring the performance of their care and treatment. It is a statistical change in measurement parameters that creates the impression of a reduction of service provision.

For more information on cancer waits please go to www.hampshire.nhs.uk/about-us/how-we-are-doing/332-going-further-on-cancer-waits..

Improving access to GP services

The Secretary of State for Health, Alan Johnson, has written to all MPs to update them on how access to GP services is improving for patients. For more information please go to www.dh.gov.uk/en/News/Recentstories/DH_084995 to read a copy of his letter.

Young girls offered protection against cervical cancer

The human papillomavirus (HPV) vaccine gives girls years of protection against the commonest cause of cervical cancer. It's a national programme that's already been introduced successfully in America, Australia and Germany and it's being carried out in stages in Hampshire, starting with girls aged 12 to 13 and 17 to 18. It will be extended to other age groups from this coming autumn.

The vaccine for the 12 to 13 year old age group is being offered in schools by the school nurse team and 17 to 18 year olds will be invited to have their vaccination by their GP surgery. All girls need to complete a course of three injections over six months to make sure that they are fully protected.

Noeleen McFarland, Immunisation Co-ordinator for NHS Hampshire said: "Cervical cancer affects young women and can have devastating effects on families. This is a very important vaccine as it protects against the two most common types of cervical cancer. By encouraging all parents to have their daughters vaccinated we have the opportunity to help prevent a very serious disease that affects about 2,000 women every year in the UK and potentially save up to 400 lives."

NHS Hampshire's Board decisions and discussions March 26, 2009

The PCT Board met on March 26, in the Princes Hall, Aldershot. Among other key decisions, the Board:

- Approved the Hampshire Strategic Service Development Plan for Solent Community Solutions (South East Hampshire LIFT company)
- Approved the PCT Estates Strategy (2009 refresh) and delegated authority to the Commissioning Board and Hampshire Community Health Care (HCHC) Board for the operational implementation of the strategy in accordance with agreed ownership and arrangements
- Approved the PCT's Sustainability Development Management Plan and delegated authority to the Commissioning Board and HCHC's Board for the operational implementation of the plan
- Approved the Pandemic Influenza Plan for Hampshire PCT
- Noted the update on the progress made towards the final Declaration on Standards for Better Health 2008/09
- Approved the Information Governance (IG) Toolkit assessment, in order that it can be finalised and submitted to Connecting for Health
- Noted that the PCT complies with Information Governance Statement of Compliance (IGSoC)
- Noted that the Information Governance Steering Group will identify the key priorities for the IG Workplan for the forthcoming year
- Approved the Terms of Reference for the PCT Audit and Compliance Committee – Addendum
- Noted the use of the PCT's Seal in the period January 1 to February 28, 2009
- Noted and ratified the Policies of the PCT, approved by the Commissioning Management Committee during the last two months
- Received the minutes from Committees of the Board

The NHS Hampshire Commissioning Board also met on March 26, at the same venue and:

- Noted the World Class Commissioning Assessment for NHS Hampshire 2008/09 and that the Action Plan arising from the assessment is incorporated in the PCT's Organisational Development Plan
- Noted the Month 11 financial position and the risks which need to be managed to deliver the year end break even forecast
- Received the Commissioning Performance and Assurance Report
- Received the NHS Hampshire Commissioning Board Strategic Risk Report
- Noted the draft 2009/10 Operating Plan, pending the finalisation of acute contract negotiations
- Noted the draft budgets for 2009/10 Revenue Expenditure pending the finalisation of acute contract negotiations and noted the indicative budgets for 2010/11
- Noted that the Capital Resource Limit for 2009/10 has not yet been approved by the Department of Health and only expenditure on previously committed schemes will be undertaken until a plan is approved by the Commissioning Board
- Approved the development and implementation of the Collaborative Operating Model for the nine Primary Care Trusts in NHS South Central and delegated authority for the deployment of the 0.25% investment pool to the PCT Alliance through the Chief Executive and the proposed governance structure outlined in the paper
- Noted the Surrey and Borders Partnership NHS Foundation Trust public consultation 'Our Future, Your Say For Hospital Services' and noted the response of NHS Hampshire to the consultation, following stakeholder engagement.
- Approved the Terms of Reference for the Commissioning Audit and Compliance Committee and the Governance and Healthcare Assurance Committee
- Received the minutes from Committees of the Commissioning Board

The papers for the PCT Board and Commissioning Board are available at www.hampshire.nhs.uk.

NHS Hampshire's Board decisions and discussions May 28, 2009

The PCT Board met on May 28 at The Octagon Room, Ferneham Hall, Fareham. Among other key decisions, the Board:


- Noted the Month 12 finance position and the achievements of the 2008/09 financial targets
- Noted the pre-audit position of the PCT 2008/09 accounts, year ending March 31, 2009 and delegated the responsibility for approval of the Annual Accounts and Directors Certificates to the PCT Audit and Complaints Committee
- Noted the submission of the Standards for Better Health Declarations 2008/09 for NHS Hampshire and Hampshire Community Health Care
- Noted the next steps in the Annual Health Check process and the possibility of the inspection by the Care Quality Commission during June-July this year
- Noted the progress made on the separation of the PCT into two autonomous organisations
- Received the minutes from Committees of the Board

The NHS Hampshire (Commissioning) Board also met on May 28, at the same venue. Among other key decisions, the Board:

- Noted the draft Public Health Annual Report for Hampshire 2008/09 and supported the recommendations for action
- Noted the Hampshire's Children and Young People's Plan 2009- 2012
- Approved the Primary Care Commissioning Strategy
- Noted the report from the South Central Specialised Commissioning Group, which details the governance arrangements in place, performance in 2008/09 and the plans/budget for 2009/10
- Approved the 2009/10 Operating Plan
- Approved the draft Budget for 2009/10 Revenue Expenditure pending the finalisation of acute contract negotiations and noted the indicative budgets for 2010/11
- Noted that the Capital Resource Limit for 2009/10 has not yet been approved by the Department of Health and only expenditure on previously committed schemes will be undertaken until a plan is approved by the Board
- Noted the performance against the 2009/10 financial targets in Month 1 and noted the risk to the year end forecast currently identified
- Received the report on performance against the existing and new national targets for 2008/09, which form a part of the Care Quality Commission's annual review of NHS organisations' performance (Annual Health Check)
- Noted the development of the NHS Hampshire's approach to commissioning performance and assurance reporting for 2009/10
- Received the NHS Hampshire's strategic risks and be assured that appropriate actions are in place to mitigate the risks
- Noted the outcome of the engagement period and supported the proposed model of care and the proposed changes to the care pathway for Older People's Mental Health services within the Andover area
- Noted the Commissioning Workforce Report
- Received the minutes from Committees of the Commissioning Board

The papers for the PCT Board and Commissioning Board are available at www.hampshire.nhs.uk. The next meetings will take place on Thursday July 23, 2009 at The Princes Hall, Aldershot.

NHS Hampshire meets local employers

On April 8, 2009 'Sign Up' moved into a new phase when we started to target big local employers in Rushmoor. The first of these employers is BAE Systems employing over 3,500 people in Farnborough alone. The event was organised in conjunction with BAE Systems occupational health team. 

Katherine Johnson senior occupational health nurse said: "we are always looking at new ways to get our messages across and this event is just one of the ways to do that". The event featured a display of healthy eating options from the Farnborough Aerospace centre canteen, Boots the pharmacy, Frimley Park Foundation Trust and the Quit4life service were also on hand to offer help and advice to those thinking of quitting smoking.

To find out more about the 'Sign Up' scheme or how to get involved go to www.hampshire.nhs.uk or email the sign up team signup@hampshirepct.nhs.uk.

Or if you'd like us to bring our health messages to your workplace call James Nicholson on 023 80 7578.

Provision of Primary Care Services to the Homeless in Hampshire

NHS Hampshire is currently reviewing the provision of primary care services to the homeless population of Hampshire, as existing services are very scarce and may not address the needs of the population.

An internal workgroup has been formed to assist in the review of appropriate primary care (medical) services to the homeless, if and where needed. The group aims to:

- Review existing services including bespoke and routine GP services
- Engage with current and potential services users
- Engage with key stakeholders and liaise with partners

Once the consultation is complete the workgroup will make appropriate commissioning recommendations to the Primary Care Commissioning Group, ensuring that future services are offered in priority of need when viewed across the whole of Hampshire.

More information about how to get involved will be available in the next update.

Partners work together to raise stroke awareness

NHS Hampshire has joined forces with The Stroke Association, Portsmouth Hospitals NHS Trust, Portsmouth City Teaching Primary Care Trust and Portsmouth City Council to spread the message to act FAST if you suspect someone may be having a stroke.

Coinciding with the Department of Health's national stroke awareness campaign, we are working together to continue to raise local public awareness of acting FAST.

FAST is a simple test to help people recognise the signs of stroke and highlight the importance of getting help quickly:

Stroke - Act F.A.S.T.



If the person fails any of these tests it's important to call 999 right away, as stroke is a medical emergency. The faster people get treated the greater their chances of a full recovery, while delay could lead to disability, memory loss, paralysis or even death.

Stroke is the third largest cause of death in the UK and risk factors include smoking, inactivity, heavy alcohol intake, a diet high in salty or fatty food, high blood pressure, diabetes, cardiovascular problems and genetic inheritance. Many of these risks can be reduced through healthy eating, moderate exercise and managing weight.

NHS Hampshire has developed a new stroke strategy to educate more people about the symptoms of stroke and how to prevent them. We also want to get specialist help to stroke patients more quickly and are constantly working to improve the care patients receive after a stroke.

For more information please contact Tracey Gwyther at tracey.gwyther@hampshire.nhs.uk or on 01962 763976.

NHS Hampshire supports Government scheme to improve Dementia care

People with dementia and their carers will receive improved quality of care thanks to a government initiative supported by NHS Hampshire.

The new national strategy called 'Living well with Dementia' aims to increase awareness about Dementia to enable early diagnosis and improved care.

"We are working with Hampshire County Council and partners to ensure we have the correct plans in place to address the needs of people with dementia and their carers. A joint commissioning strategy for Older People's Mental Health has recently been published which was consulted on extensively during 2007/8," said Diane Wilson, associate director of adult care, NHS Hampshire.

"We are now working on the priorities derived from the consultation including: promoting independence, achieving a balance between specialist and mainstream services and developing our partnerships for co-ordinated responses. We are also taking forward the recommendations of the recently published National Dementia Strategy to build on the work already occurring in Hampshire, all of which will provide a basis and additional support to the Living Well with Dementia government initiative."

For more information on Living Well with Dementia please go to: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_094058.

Building Healthy Partnerships

NHS Hampshire in collaboration with Community Action Hampshire, held its second event with the voluntary sector on April 2 at Winchester Family Church.

Seventy voluntary and community sector representatives attended the day to get a better understanding of NHS Hampshire's priorities for 09/10 and to discuss how to work together to achieve these. A lunchtime marketplace also took place so project leads at NHS Hampshire and voluntary sector organisations could discuss key projects and gain a better understanding of current activity taking place across the county. Stands displayed material from public health, primary care, practice based commissioning, contracting, strategy and system reform teams as well as NHS Hampshire's Sign Up scheme (see page 12).

Following a presentation on community contracts from the Department of Health in the morning, discussions were also held around grant funding to establish how to move forward in this area. Feedback from the event and group discussions is now being collated to draw up an agreed set of future actions. A further workshop will also be planned around grant funding mechanisms over the coming months.

For more information please contact either Hannah O'Neil at NHS Hampshire on 023 8062 7472 or hannah.o'neil@hampshire.nhs.uk or Christine Pattison at Community Action Hampshire on 01962857350 or christine.pattison@action.hants.org.uk.

Solent Surgery Update

The Solent Surgery Committee has been working hard to secure a suitable provider to take over the running of Solent Surgery in the future with support from NHS Hampshire.

As a result local GP practices interested in taking on Solent Surgery provided a full application for the role. On March 5, 2009 the committee met to review the applications and receive a presentation from the practices. Following this they scored all information received using an agreed set of criteria to ensure the best solution was found.

Following this a preferred applicant was selected and informed and meetings are now occurring between NHS Hampshire and the preferred practice to discuss specific details. NHS Hampshire is still aiming for a transfer of services to the new provider on July 1, 2009.

Please contact Hannah O'Neil on 023 8062 7472 or at hannah.o'neil@hampshire.nhs.uk for any further information.

Think young carer

Who looks after the patient you saw this morning? There are over 3,000 young carers in Hampshire. These children and young people look after family members with illness, disabilities, mental illness or substance misuse. Many of these children help with personal nursing care and administration of medication as well as household tasks and care of younger siblings. Inappropriate levels of caring can impact on a child's own emotional and physical health, educational achievement and life chances.

Whether you work in the hospital or community, with adults or children, you may be the only person who is able to ask the right questions to find out that a child is taking on caring responsibilities. Timely intervention could prevent a child undertaking inappropriate levels of care.

The Children's Society's Include Project, commissioned by Hampshire County Council Children's Services Department, promotes best practice for young carers and their families. The Include Project can offer your department training and resources including information packs and posters.

For information on Hampshire and national work and a free online resource, 'The Whole Family Pathway' to support and signpost young carers and their families, see the website www.childrenssociety.org.uk/youngcareers. Or contact Christine Slatcher at Christine.slatcher@childrenssociety.org.uk or alternatively call 01962 711511

Home from Hospital

The British Red Cross provides short-term care and support in the home for people after an accident or illness, giving them the confidence to continue their daily lives. This service can be provided following a stay in hospital or to prevent unnecessary hospital admissions.

In a recent analysis of the service, 76% of people asked said the service was 'excellent', with a further 21% voting it 'good'. 77% of people said the service was 'excellent' or 'good' at boosting their confidence, and 52% said the service was 'excellent' or 'good' at helping them to regain independence. Home from Hospital operates at Royal Haslar Hospital, Queen Alexandra Hospital and St Mary's Hospital in Portsmouth. For more information, and to find out about other services such as skin camouflage, please visit www.redcross.org.uk/banch.asp?id=483 or contact 01962 865 174.

Drug and Alcohol Support from Step by Step

Step by Step, the charity for homeless young people in and around Rushmoor and Hart, has reported record success rates from its “D’n’A” programme providing drug and alcohol support.

Last year, 85 young people were supported. 87% of them progressed or stabilised in terms of their drugs or alcohol usage, and nearly all showed a *significant* positive change in their substance use.

Residents graduate to increasingly independent housing as they progress through the charity’s personal development programme, which is also open to drop-in clients. The programme, which also covers basic living skills and training for work, focuses heavily on courses which improve health and well-being including sexual health education as well as drug and alcohol support.

Step by Step’s “dry” policy recognises that it is impossible to motivate people if they are high or drunk. D’n’A enables young people to address addiction issues and go on to make progress in other areas of their life. One client said:

“With the help from the D’n’A project I have reduced my narcotics use and the counselling sessions have given me advice on coping with my past and how I can improve my future and self well-being. By the help given to me by D’n’A, and Step by Step, I have progressed from sleeping rough to my own flat! Something I would not have believed this time last year.”

High attendance and success rates are down to the fact that case workers are based at Step by Step and seen as part of the trusted environment where clients feel comfortable, and that the service is visible and accessible. For more information visit www.stepbystep.org.uk or call 01252 312364.



Eyes Right Project

Working in collaboration with the RNIB, Open Sight is running an important pilot project called Eyes Right across Hampshire between March 1 and August 31 2009. The aim of the work is to encourage people to get regular sight checks which can detect early eye diseases such as Glaucoma and Diabetic retinopathy. The emphasis of the work is prevention.

As well as the general population of people aged 60yrs or more the project is also aiming to reach people from the black and minority ethnic community, low income and rural groups.

It involves giving a simple sight check on a laptop which takes no longer than five minutes. We are also advising people about discount vouchers if they are on benefits. We are looking for suitable venues and places our target groups may meet.

If you can suggest groups and venues, or you would like more information about the project, please contact Evelyn Archenhold on 023 8064 1244.

For more information on anything in this issue contact
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