

# Foundation focus



Dorset County Hospital NHS Foundation Trust Members' Newsletter

## Trust on the road to financial recovery

Dorset County Hospital   
NHS Foundation Trust

**Dorset County Hospital NHS Foundation Trust is making good progress in getting its finances back on track and looking towards a bright future.**

Members who attended the Annual Members' Meeting on 8 September 2010 heard that the end of year deficit for 2009/10 was better than originally predicted at £5.1million and the Trust is now on course for returning a surplus by the end of 2011/12 of £3.3million.

Full details are outlined in the Annual Report for 2009/10 available on our public website [www.dchft.nhs.uk](http://www.dchft.nhs.uk)

The Trust's Chairman Dr Jeffrey Ellwood said that the Trust was now in a strong position to get its finances under control and provide a secure future for patient services.

Dr Ellwood said: "It is no secret that it has been a tough year for the hospital, but there is also much to be positive about and I have every confidence that with the new permanent executive team in place we now have the skills and experience at Board level to take this organisation forward and build on the high quality services we provide for

our patients. We are currently concentrating on implementing a range of efficiency projects to enable us to make the best use of our resources and to ensure that our operational and clinical standards are in no way compromised. Examples include reducing the length of time patients have to stay in hospital, improving theatre efficiency and optimising the Trust's use of temporary staff."

Dr Ellwood introduced the new permanent members of the Trust Board to those gathered at the meeting in Poundbury's Brownsword Hall – Chief Executive Jean O'Callaghan, Director of Finance and Resources Bill Boa and Director of Human Resources Mark Power. Mrs O'Callaghan gave an overview of the issues facing the Trust and outlined her priorities for the year ahead. These include meeting or exceeding quality standards and performance targets, achieving recovery plan targets, improving staff engagement and morale, restoring confidence and reputation with the community and strengthening relationships with key commissioners and



agencies. The meeting also included reports from Mr Boa and Lead Governor Dr Peter Camm, and the chance for comments and questions from those present.

As part of a commitment to openness and transparency, the monthly Trust Board meetings will now be held in public. The dates can be found on page 4. You can see the agenda and papers for each meeting online at [www.dchft.nhs.uk](http://www.dchft.nhs.uk) or you can call for details on 01305 254645.

# Whither, the NHS?

Written by Jo Bowkett  
West Dorset Governor

**We are now acutely aware the day of reckoning has come concerning the future of the national economy and subsequent impact on all public services, including our hospitals**

We know that whatever the politicians say, the next few years are going to be much tougher. Unprecedented funding to the NHS during the last decade, by the previous Government, yielded disappointingly low productivity levels nationally. The NHS is now the biggest spending department, equivalent to defence and education combined, and yet productivity fell to 3.2% during the period 1997-2007. The new Government promises to protect NHS funding. But rising demand, increasing costs and a desire to improve quality mean that it will have to improve productivity on a scale that will dwarf past achievements. This means a radical rethink about ways to deliver care – the debate starts here.

We have an amazing health care system but the truth is, compared to what was originally envisaged in 1948, it is now a voracious behemoth. It will be pointed out, quite rightly, that in over 60 years there has been incredible progress and expansion of health service development and provision. Expansion has been accompanied by a growing workforce which, sadly, has been divided into 'frontline' and 'backroom' – the thinking goes something like this; 'frontline' good, 'backroom' bad. The perception is that the frontline is staffed by those who have direct contact with patients; the



backroom, by those who manage, administrate and facilitate the policies governing service provision. Yet without the latter, the frontline could not operate and, without the former, the backroom is superfluous. The truth is, both are important and both are required – the ongoing debate is, in what proportion?

Health accounts for a fifth of public spending and staff costs are the biggest expenditure item in the NHS, accounting for 70% of all NHS cost. As our hospitals are to operate within increasingly constrained budgets, the public will be required to face some searching questions. For example, are hospitals always the best place to treat people? Would it be better for patients (and NHS funds) to integrate hospital and community care? The overarching question is not how to do more with the same budget, but how to do things differently. Certainly it seems that some services may no longer be viable in one setting and therefore may need to be pooled, i.e. shared within

another hospital in the locality in order to ensure availability and better value for money. Much consultation, nationally and locally, is vital and the debate will continue. It's uncomfortable for everyone to be faced with such difficult choices; as, indeed, we experience in our individual domestic situations – there are things we know we need, there are things we would like to have and there are things we aspire to having. The difficult question for us is what, realistically, can we afford if we are to manage our finances wisely.

As an elected Governor and a hospital user, I am as much involved in the debate as the people who elected me a year ago. Recently, Governors have sought to meet with people at community surgeries to hear their views and concerns about individual hospital experiences. These sessions have been invaluable in informing contributions to the Council of Governors/DCHFT Trust Board meetings where the new Chairman and Trust Board give **(continued on page 3)**

**(continued from page 2)**

careful consideration to collective observations. The past year has been a very difficult and turbulent time for everyone involved with the Dorset County Hospital Foundation Trust. The often alarmist press headlines have undoubtedly fuelled strong feelings; they sell newspapers, but such headlines do not necessarily accurately reflect the complex and wide ranging factors that contributed to that regrettable period. However, it should be emphasised to patients, staff and the local community that we now have a fresh management team in place with vision and, critically, the leadership to move forward. The

new Trust Board has established clear accountability measures, and is working tirelessly towards financial recovery demonstrating greater transparency and openness. The new ethos is encouraging and reassuring to Governors. At a time when the Trust is making good progress towards financial stability and maintaining care quality, it is important that we have the support of patients, staff and the local community. One of the results of sensational press headlines is the negative effect it has upon staff morale and the increase in public anxiety. May I make a plea to everyone? If you care about our local hospital, if you value the service and care it

provides, will you please join with us in our endeavour to overcome the past difficulties and face with us the challenges ahead.

We can work together to make Dorset County what it is – a great local hospital.

The Trust will shortly be undertaking a public consultation survey. The purpose is to hear the community's views on healthcare provision which will assist in establishing the future Strategic Plan for our area. It is my hope that as many people as possible will participate so that future service provision may be indicative of the West Dorset population's considered priorities.

## New cancer unit to be created

**A dedicated unit for inpatients being treated for cancer is to be created at Dorset County Hospital.**

Patients and staff have been keen to establish a cancer unit for a number of years but finding a suitable space in the hospital has proved difficult.

Now, following a thorough review of the bed capacity of all the wards, plans are in the pipeline to form a cancer unit, although the location within the hospital is yet to be finalised.

As well as the creation of the cancer unit, the review will lead to other changes within the hospital which are aimed at

ensuring all patients receive care delivered by staff with the right skills in the right specialty area. Director of Nursing and Operations Alison Tong said:

“This is great news for patients as it means they can be cared for in the most appropriate environments by dedicated staff.

“These plans incorporate a number of priorities for the Trust to further improve the patient experience and the efficiency of our services to secure their long-term future.”

Other changes under the plans include:

- Moving the medical day unit (Casterbridge Unit), which was

situated in a separate building near the Children's Centre, back into the main hospital in the area known as Evershot Ward;

- Relocating the Pre-assessment Unit from the Short Stay Unit to the space currently occupied by the Chronic Pain Service;
- Moving the Chronic Pain Service to a more suitable environment in the building vacated by the Casterbridge Unit;
- Designating 10 beds on Ridgeway Ward as a recovery area for short stay surgical patients to support increasing numbers of day case procedures.

## Save money with NHS Discounts

**All registered members of NHS Foundation Trusts are entitled to access the NHS Discounts website.**

This website provides exclusive discounts for NHS staff and registered Foundation Trust members from leading retail

brands that will save you money. There are no one-off fees or subscriptions. The facility currently covers the following, but is constantly being updated:

- Gas & Electrical Bills
- Insurance
- Holidays and Travel
- Meals Out

- Everyday Shopping
- Days Out
- Printable Vouchers
- Electrical Goods
- Cars and Motoring

You can access NHS Discounts at [www.nhsdiscounts.com](http://www.nhsdiscounts.com) and register online.

# Vision for a healthier Dorset

## **NHS Dorset is the Primary Care Trust serving the population of Dorset (excluding Bournemouth and Poole).**

It commissions all the health services for local residents including GPs, dentists, opticians and community pharmacies as well as community based services such as mental health, sexual health, community nursing and children's services. It also commissions secondary care from a number of acute trusts that provide services to its population, which includes Dorset County Hospital NHS Foundation Trust. NHS Dorset has a clear vision of 'A Healthier Dorset' and key to this is an essential change of emphasis from treating people when they are ill to keeping people healthy. The strategy aims to support people to look after their own health with specific targeted initiatives for those with greatest need, helping promote a healthier lifestyle and prevent illness, for example lung disease, stroke, diabetes and heart disease. Most people will need health services at some time and

the plan is to ensure that our population have access to the services they require, in a timely manner and are seen by the most appropriate health professional in the most appropriate setting. In addition people will be offered more choice and a greater say in their treatment. Following wide involvement NHS Dorset has set four goals:

- Helping you live a longer and healthier life;
- Delivering care when and where you need it;
- Care delivered in a way that you would expect;
- Achieving the best value for money for you and your community.

The NHS continues to improve services and this will include developing services closer to people's homes. NHS Dorset will continue to depend on its key partners including Dorset County Hospital NHS Foundation Trust to develop robust, safe and effective delivery systems. A copy of the Strategic Plan for a Healthier Dorset 2010 - 14 can be



accessed under the publications section of the NHS Dorset website:

**[www.dorset.nhs.uk](http://www.dorset.nhs.uk)**

Information on public events, health networks and how to get involved in future consultations can also be found online under the Get Involved section.

## Meetings open to the public

### **Dorset County Hospital NHS Foundation Trust Board of Directors are now holding their monthly meetings in public.**

These meetings are listed here and are published on our website at [www.dchft.nhs.uk](http://www.dchft.nhs.uk) where you will also find agendas and papers for each meeting.

If you do not have access to the internet, agendas are available from Trust HQ, Dorset County Hospital, Williams Avenue, Dorchester DT1 2JY, 01305 254645, and papers will be available on the day of meetings. Registered members are also

welcome to attend the Council of Governors' meetings that are open to the public and these meetings are also noted here.

Members who wish to raise questions at either of these meetings should send their questions to the appropriate Governor who represents their constituency no later than seven working days prior to the meeting date. Governors can be contacted using the details published within the Governor profile section of this newsletter or as published on our website. You can also send your questions to [foundation@dchft.nhs.uk](mailto:foundation@dchft.nhs.uk)

### **Trust Board Meetings:**

- 2 November 2010, Boardroom, Trust HQ, Bridport Road
- 7 December 2010, Boardroom, Trust HQ, Bridport Road
- 4 January 2011, Children's Centre, DCH, Damers Road
- 1 February 2011, Children's Centre, DCH, Damers Road
- 1 March 2011, Children's Centre, DCH, Damers Road

### **Council of Governors Meetings:**

- 2 December 2010, Brownsword Hall, Pummery Square, Poundbury
- 3 February 2011, Brownsword Hall, Pummery Square, Poundbury

# Hospital launches 24/7 thrombolysis



**150,000 people in the UK have strokes every year. Of these, 67,000 people die and many thousands are left disabled.**

Across the county of Dorset, about 1,500 people will have a stroke each year and of these about one third will die and one third will have some disability, while the remaining third are left severely disabled. More than 10,000 people in Dorset are living with the long-term consequences of stroke.

Clot-busting drugs must be given within three hours of stroke symptoms starting to give people the best chance of recovery, and they can only be given to people who have had certain types of stroke. This is called thrombolysis.

Every year approximately 350 people in West Dorset will be admitted to Dorset County Hospital having had a stroke and for the last four years the Stroke Team has provided a Monday to Friday 9am to 5pm thrombolysis service. Now the team has launched a round the clock 24 hour thrombolysis service so that

people in West Dorset can get this treatment closer to home no matter what time of day or night they have their stroke.

The Dorset Cardiac and Stroke Network (a partnership of local NHS trusts, stroke patients and support groups) have led the developments of the thrombolysis service across all hospitals in Dorset and have provided training for doctors and nurses, and supported the Diagnostics Team at DCH in training all of the on-call radiographers in carrying out CT scans for stroke patients. These scans can now be seen on a laptop by the stroke consultant to assist in accurate diagnosis of the type of stroke. The installation of a telemedicine system in the DCH Emergency Department means that a stroke consultant can now be contacted any time via a laptop link which allows them to see and talk to the patient and emergency team without actually being present in the department.

The launch of the new 24 hour thrombolysis service will dramatically improve the chances of recovery from a

stroke for those who are eligible to receive it. These clot-busting drugs need to be given as soon as possible after a stroke, ideally in the first hour, so it is vital that people recognise and respond to the signs of a stroke quickly by dialling 999.

DCH Consultant Stroke Physicians Dr Rob Williams and Dr Harald Pröschel emphasise the importance of speedy treatment.

Dr Williams said: "Every minute that passes after symptoms start, two million brain cells die. This clot-busting treatment can help to reverse the damage caused by stroke."

Dr Pröschel added: "The earlier it is given, the more effective the treatment is, so I urge people to learn the FAST check."

**F**ace - Can the person smile?  
Has their mouth or eye dropped?

**A**rm weakness - Can they raise both arms?

**S**peech problems - Can you understand what they are trying to say?

**T**ime to call 999 if you spot any of these symptoms

The role of the local ambulance service is also vital in getting patients to hospital as fast as possible. South Western Ambulance Service has been at the forefront of developing better stroke care, leading work on a national level. Deputy Clinical Director Adrian South commented: "This fantastic development at Dorset County Hospital means that Dorset is now the first county in the South West where thrombolysis is available 24/7. I would encourage everyone to learn the FAST test and remember that stroke is a medical emergency."

# New faces on the Trust Board



**Chief Executive Jean O'Callaghan** joined us from Bedford Hospital NHS Trust where she was CEO for five years. Under Jean's leadership Bedford moved from a financial deficit to a surplus position and from a 'weak' rating in the Annual Health Check to 'good'. The hospital won a National Health and Social Care Award for capacity planning in 2009 and is now meeting all key targets. Jean joined Bedford from New Zealand where she was Chief Executive of the Canterbury District Health Board. She is a nurse by background and has extensive experience in managing change. She is a strong advocate for open communication and is committed to quality patient care.

**Director of Finances and Resources Bill Boa** is an experienced financial manager with significant board experience in a wide range of NHS sectors and a proven track record in financial recovery. He is the Former Deputy Director of Finance at NHS South West and has led the financial recovery of two challenged organisations in the region. Bill has strong links with networks within the NHS nationally, in the South West and within Dorset in particular. He was responsible for the development of the NHS South West financial strategy and financial planning in the short, medium and long-term, and contributed to national policy through the National Strategic Health Authority Directors/Deputy Directors of Finance meetings.



**Director of Human Resources Mark Power** joined us from Portsmouth Hospitals NHS Trust where he was Deputy Director of Workforce and HR and Head of Workforce Performance and Information. He is an experienced HR professional whose record of achievement covers all aspects of HR and organisational development activities. This experience has been gained through a range of challenging roles within the NHS, the private sector and the Royal Navy.

## National clinical audit award win

**Dorset County Hospital NHS Foundation Trust has won one of the Healthcare Quality Improvement Partnerships (HQIP) prestigious Clinical Audit Awards.**

There were over 100 entries for this year's competition and Dorset County Hospital was joint winner in the 'Creating and Improving Efficiencies' category.

The award-winning audit was undertaken in the Emergency Department (ED) last year to examine the ordering of blood tests within the department. The audit showed that the processes could be improved and resulted in training for staff and a reduction in the number of unnecessary tests for patients. Pamela Ellis, Chair of the

Clinical Audit Committee, said: "It was a real honour to accept the award on behalf of the Trust. This was a fantastic audit that made a real impact both financially and on clinical care. It puts Dorset County Hospital on the map as a Trust that is striving to make our services efficient and improve patient care."

# Mums praise maternity services

**Dorset County Hospital's maternity unit has again received high praise from mums for the excellent care given to them and their babies.**

Patient satisfaction surveys and national reviews have regularly placed the unit among the best in the country.

The latest survey, conducted by the Picker Institute, questioned mothers who gave birth in February 2010 and covered all aspects of care through pregnancy, birth and after the birth in hospital and at home.

DCH scored significantly better than other Trusts on the majority of questions and scored the highest results out of all the Trusts surveyed on a number of areas, including offering home birth as a choice, providing pain relief during labour and involving women in decisions about their antenatal care.

Sixty-four other units throughout the country were surveyed by Picker and the results will feed into the Care Quality Commission's survey of maternity services. The response rate for DCH was 59.3% (147 questionnaires completed).

100% of respondents said their overall care received during labour and birth was good, very good or excellent, and 95% said the care



received after birth was good, very good or excellent. Other areas where DCH scored highly were in patients having trust and confidence in their midwives, the cleanliness of the ward and being treated with respect and dignity. The only area highlighted where there is room for improvement

was the provision of antenatal classes, and this is something the unit will be looking at. Dorset County Hospital Chief Executive Jean O'Callaghan said: "I am delighted to receive this feedback on what mothers think about our services. It is very important to us and attests the quality of our maternity staff."

## Winning the war against infection

**Dorset County Hospital has reached a significant milestone in its efforts to combat 'superbugs'.**

The infection prevention team has just reported there have been no hospital acquired MRSA bacteraemia infections at DCH for a whole year (Sept 2009 – Sept 2010). A team effort from staff throughout the hospital has

improved and maintained the very high standards of cleanliness and infection prevention.

Measures introduced have included the refurbishment of patient areas, the installation of hand washing stations outside wards, MRSA screening for emergency as well as elective patients, the early isolation of patients and a strong focus from the matrons on hand hygiene for

all staff. The hospital's Director of Nursing Alison Tong said: "The team effort to support the improvement of infection prevention practice, led by the infection prevention team, has been remarkable.

"Every member of staff has a part to play in safeguarding our patients. They are all to be congratulated."

# Your Council of Governors

**The Council of Governors represent your views and interests within the Foundation Trust and comprises 10 Appointed Governors and 22 Elected Governors.**

The Appointed Governors are representatives of stakeholder organisations allied to Dorset County Hospital NHS Foundation Trust, e.g. NHS Dorset, SW Ambulance Service Trust and Dorset County Council or charitable organisations that work closely with us, e.g. Friends of DCH, Weldmar Hospicecare, Dorset Kidney Fund and Age Concern. We also have one Governor representing education i.e. Weymouth College. Elected Governors are elected by

our registered members. There are 4 Elected Staff Governors who represent all the staff and not one particular discipline/occupation, and 18 Elected Public Governors who are representatives of members living in particular constituencies based on local authority boundaries.

All registered members who have an interest in the Council may stand for a Governor position at an election. Members are notified of all elections when they are due. The latest election in May 2010 resulted in a tremendous 55.7% turnout of membership votes in the West Dorset Constituency. Other constituencies were uncontested, where the number of Governor nominations were either

equal to, or less than, the number of vacancies up for election.

Three constituencies still have vacancies i.e. 1 Elected Staff Constituency vacancy, and Elected Public vacancies in South Somerset and Purbeck. A fourth vacancy has occurred due to a Governor stepping down.

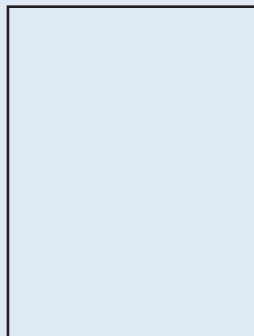
The new Governors that have joined the Council of Governors are: Staff -Tracy Glen and Susan Browne, Public - Wendy Nightingale and Malcolm Shakesby, Appointed - Mark Robson and Andy Cooke. Governors have statutory responsibilities as laid down by the NHS Act.

**(continued on page 10 ...)**

## Public Governors:



**Colin Dann**  
North Dorset  
01747 822256  
thedanns@  
hotmail.co.uk



**Vacancy**  
North Dorset



**Paul Nelson**  
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**Wendy Nightingale**  
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**Francis Biley**  
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**Jo Bowkett**  
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**Vicky Iveson**  
West Dorset  
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**Patrick Jeffery**  
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**David Reason**  
West Dorset



**Derek Julian**  
Weymouth & Portland  
01305 787390



**Michel Hooper-Immins**  
Weymouth & Portland



**Andy Hutchings**  
Weymouth & Portland  
01305 784332



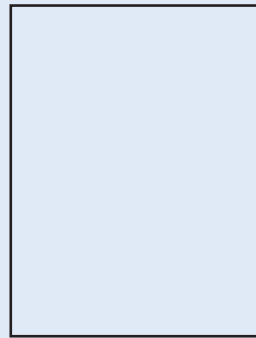
**Bill Mitchell**  
Weymouth & Portland



**Sue Bruce-Payne**  
Weymouth & Portland



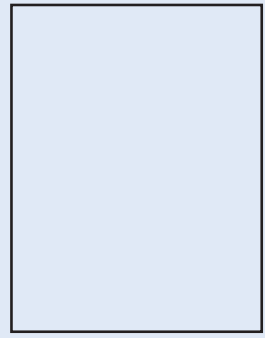
**Peter Coghlan**  
East Dorset,  
Christchurch,  
Bournemouth and Poole



**Vacancy**  
South Somerset



**Malcolm Shakesby**  
Purbeck



**Vacancy**  
Purbeck

### Staff Governors:



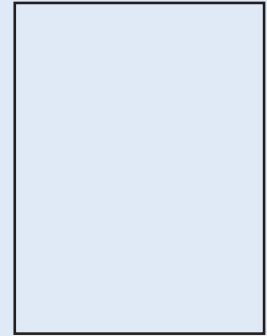
**Duncan Farquhar-Thomson**



**Tracy Glen**



**Sue Browne**



**Vacancy**

### Appointed Stakeholder Governors:

**Fran Leaper** - Weldmar Hospicecare

**Andy Cooke** - Dorset County Council

**John Weir** - Age Concern Dorchester

**Mark Robson** - South Western Ambulance NHS Trust

**Amanda Gallaher** - NHS Dorset

**Ross Kay** - Weymouth College

**Nigel Pennington** - Friends of Dorset County Hospital

**Dr Peter Camm** - Dorset Kidney Fund

**University** - Vacancy

(... continued from page 8)

The Governors, who are unpaid, have not only attended their own meetings but have observed various main committees which provides them with additional opportunities to appraise the performance of the Trust. A number of public engagement meetings have been held by Governors at Dorchester United Church and Sherborne Cheap Street Church, as well as the Dorset County Show, and they have also spoken to a number of interest groups such as the Over 50s Club. Further engagement meetings are in the planning stage which will also include the Bridport and Weymouth areas. The Appointed Governor for Age Concern is also planning a similar meeting. During the initial days of

DCHFT's financial crisis, a number of Governors were actively communicating with local and national MPs in support of the Trust.

Governors have performed cleanliness spot checks at DCH on a periodical basis and have provided the Foundation Trust with independent assurance reports. According to the inspection reports, the cleanliness of the hospital overall has been excellent and staff have worked tirelessly to maintain standards. Cleanliness and infection prevention are important subjects and it is pleasing to report that during the year Sept 2009 to Sept 2010 there have been no hospital acquired MRSA cases (full story page 7). Monitor (the Independent Regulator for NHS Foundation

Trusts) has requested that each FT nominates a Lead Governor. DCHFT's Council of Governors elected Dr Peter Camm as the Lead Governor for the length of his Governor appointment. The Lead Governor's role provides an independent link between the Governors and Monitor where issues cannot be internally resolved.

A number of development and networking events across the South West have been attended by our Governors. DCHFT has also joined the Foundation Trust Governors Association.

**You can contact your Governor through the individual contact details listed or via the membership office on 01305 254114 or [foundation@dchft.nhs.uk](mailto:foundation@dchft.nhs.uk)**

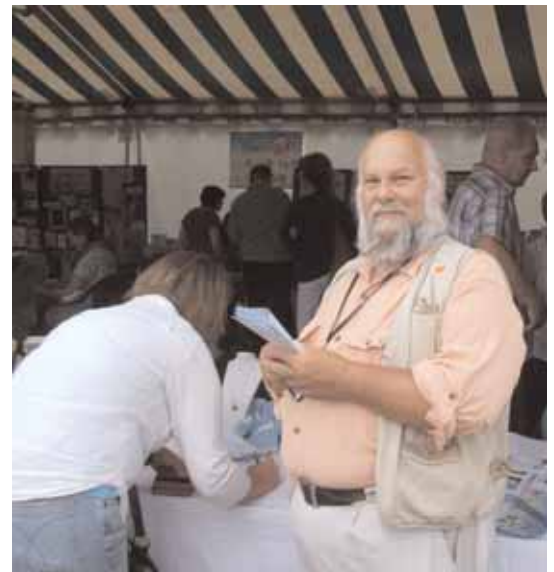
## Working to increase our membership

**During the last year, membership has been reducing. In June 2009 we had 6,707 members - by June 2010 that had dropped to 6,592.**

We are keen to encourage more young people to register. Only 38.33% (1,303) of the public membership have given us their email address to enable us to communicate electronically with them. This certainly helps us to cut down on communication costs and if you are able to provide that information we would certainly appreciate it. Either complete the form on page 4 of this newsletter or email [foundation@dchft.nhs.uk](mailto:foundation@dchft.nhs.uk) Naturally with the current financial deficit position of the Foundation Trust and the concerted efforts to reverse our financial position into a financial surplus of £3.3m by 2011/12, staff recruitment has been restricted which has reduced the staff membership. Public membership has steadily increased as a result of Governors engaging with the public, the introduction of Governor surgeries

for membership at various places around the county, as well as using their local contacts and meeting the public at the Dorset County Show.

Ideally for the membership to be representative of the community we serve, ie the West part of Dorset, Weymouth and Portland, North Dorset and the Purbecks, we should have in the order of 22,000 - 25,000 members against a population of 218,000. Naturally this size of membership would have financial implications in respect of communicating with the members, especially if they do not possess an email address - so we have set ourselves a modest target of 7,000 members by the end of this financial year and we would like all of our members to help us achieve that planned goal by encouraging as many of their family and friends who are over 16 years of age to register as a member. It is



**Weymouth and Portland Governor Bill Mitchell recruiting members at the Dorset County Show**

incumbent on this Trust to increase its membership. A membership application form is included on page 4 of this newsletter and can be returned free of charge via the address on the form. Alternatively, you can register on our website at [www.dchft.nhs.uk/foundation](http://www.dchft.nhs.uk/foundation), telephone the membership office on 01305 254114 or email [foundation@dchft.nhs.uk](mailto:foundation@dchft.nhs.uk)

# New vision for the NHS

On 12 July 2010 the Coalition Government's health White Paper 'Equity and Excellence - Liberating the NHS' was published.

It sets out a radical new vision for the health service in England and has at its heart three key principles:

- Patients at the centre of the NHS
- Changing the emphasis of measurement to clinical outcome
- Empowering health professionals, in particular GPs

## Putting patients and public first

Patients, whatever their need or background, will be placed at the heart of the NHS, through an information revolution and greater choice and control. Patients will have access to the information they want, to make choices about their care and there will be shared decision making between the clinician and the patient. The collective voice of patients and the public will be strengthened through arrangements led by local authorities, and at national level through a powerful NHS Commissioning Board that will commission specialist care and set commissioning guidelines and standards.

## Improving healthcare outcomes

The service must be focused on outcomes and the quality standards that deliver them. The Government's objectives are to reduce mortality and morbidity, increase safety, and improve patient experience and outcomes for all. The NHS will be held to account against clinically credible and evidence-based outcome measures, not process targets. Targets without clinical justification will be removed.



## Autonomy, accountability and democratic legitimacy

The Government's reforms will empower professionals and providers (NHS Trusts), giving them more autonomy and, in return, making them more accountable for the results they achieve, accountable to patients through choice and accountable to the public at local level. The Government will devolve power and responsibility for commissioning services to the healthcare professionals closest to patients: GPs and their practice teams working in consortia will form statutory bodies and come into being in 2012/12 but not operational until April 2013. To strengthen democratic legitimacy at local level, local authorities will promote the joining up of local NHS services, social care and health improvement.

## Cutting bureaucracy and improving efficiency

The NHS will need to achieve unprecedented efficiency gains, with savings reinvested in front-line services, to meet the current financial challenge and the future costs of demographic and technological change. By 2014 the NHS will release up

to £20 billion of efficiency savings which will be reinvested to support improvements in quality and outcomes. The Government will reduce NHS management costs by more than 45% over the next four years, freeing up further resources for front-line care. There will be a radical shift in NHS functions through simplifying and streamlining the number of management layers within the NHS including the Department of Health. Strategic Health Authorities will be abolished on 31 March 2012 and Primary Care Trusts will be abolished from April 2013.

## Conclusion: making it happen

The White Paper is the long-term plan for the NHS in this Parliamentary term and beyond. It is a challenging and far-reaching set of reforms which requires primary legislation and is subject to Parliamentary approval.

You can find out more about the plan on the Department of Health website at:

[www.dh.gov.uk](http://www.dh.gov.uk)

# News from our fundraisers



**It is an exciting time for DCH Charity. Despite the doom and gloom of the current economic climate, we have slowly been investing in our fundraising office.**

About 16 months ago the Charity employed a full-time fundraising manager. We now have a new look for our Hospital Charity and a strategy that will help grow a development model to maximise opportunities and therefore continue to help fund a wealth of important extras, care and equipment for DCH Trust, staff and patients.

Thank you to all those individuals and groups who have taken on various fundraising activities in support of our hospital charity. Here are some of the things our dedicated fundraisers have been up to ...

**Charity Walk** - Hannah Thorn and Mia Fuller stepped off Portland to walk the 16.5 miles or 33,234 footsteps that would lead them to the doors of Dorset County Hospital approximately six hours later - all in aid of raising money for the Hospital Charity. With the sponsorship and support of friends and family behind them these two friends raised £215.55 which they have chosen to give to the Maternity and Kingfisher Wards at the hospital. The two friends also donated a large box of toys and a book filled with messages of support to the hospital staff from other friends who have had children at the hospital. Pictured are, from left to right, Christine Voce (Head of Midwifery), Hannah Thorn, Mia Fuller, Alison Bryan (Matron for SCBU) and Dr Rollo Clifford (Paediatrician).



**Equipment Donated in Memory of Rotarian** - Members of The Rotary Club of Christchurch met at Dorset County Hospital's Renal Satellite Unit in the Royal Bournemouth Hospital. The group donated £14,500 to Dorset County Hospital Charity for the purchase of a new haemodialysis machine to be added to the Unit in memory of a respected fellow Rotarian.

Pictured are Sister Gloria Willey, David Richardson - the Rotary Club President for Christchurch; Dr Jo Taylor, Martin Hurrell, Mrs Anne Hurrell, Terry Broadfield, Dr David Rogers.

**Mongol Rally** - Lots of press arrived to photograph and interview 'The Dorset Invaders' taking part in the Mongol Rally. Henry Comyn and Lewis Hinch left on July 24 from Goodwood Racecourse with all cars doing a lap of the track before setting off. Six weeks later they were back home with many adventures to tell. Thanks to all who sponsored and supported them throughout this fantastic challenge to raise funds for our hospital.



Contact the fundraising office on 01305 255419 or [fundraising@dchft.nhs.uk](mailto:fundraising@dchft.nhs.uk) or visit [www.dchft.nhs.uk/fundraising/home.html](http://www.dchft.nhs.uk/fundraising/home.html)



**Fundraising Footballers** - Congratulations to Weymouth Football Club Youth who became the winning Stableford team at the Dorset County Football Association's inaugural Charity Golf Day. We are so grateful that they have donated their winnings of £1,050 to DCH's Special Care Baby Unit. DCFA Finance Director Chris Charlton and Weymouth Youth FC Captain Mark Rogers are pictured presenting the cheque to SCBU Sister Helen Hutchinson.

**Charity Golf Day** - An amazing £1,727 was raised when teams of four joined in on a day of golf (and a delicious buffet) at Knighton Heath Golf Club. Many thanks to the organisers for all their hard work seeing this sociable competition of 18 holes reach its sixth year! Pictured are the winning team with event organiser Paul Nelson and John Downing from main sponsors Medical Insurance Consultants who donated £1,500 to the event. Photo by Ben Hensel of Fotografica.



**High Flying Fundraiser** - A really big thank you to Laurence Davis who raised nearly £400 in a sponsored skydive for the Hospital. He took to the skies at Dunkerswell Airfield.



**Hospital Charity Ball** - DCH Charity held a black tie Charity Ball in September to raise awareness. We were so lucky to be offered the beautiful gardens of Mapperton House as our venue. The DCH Ball Committee worked tirelessly to ensure the event was a success, and the most striking factor to them was the enormous enthusiasm within Dorset and beyond for the County Hospital. Individuals and the business community rallied round in support which encouraged the committee to create an evening which sparkled with fun from start to finish and has raised thus far £16,500.



## Be a regular giver and make a difference

Regular donations are very important to a local charity - it provides an opportunity to plan and maximise the impact of our supporters' gifts. This method of supporting a charity is practically effortless for you (simply complete the Direct Debit form that has been provided at the end of the newsletter). Once the form is completed and sent back to the charity, whatever amount you decide

upon will be taken from your bank account monthly with nothing for you to do except feel good about the difference you are making.

If you also Gift Aid the donation, we can collect from HM Revenue & Customs the equivalent of the basic tax that you would have paid, which increases your donation by a further 28%.

# Appeal to sign up more organ donors



## Transplant donor Renuka Coghlan spoke of her experiences to mark National Transplant Week.

The Dorset County Hospital transplant team joined Renuka in the hospital's restaurant to encourage people to sign up as donors and raise awareness of live donation. More than 10,000 people in the UK currently need a transplant. Of these, 1,000 die each year as there are not enough organs available. To find out more, and to register on the UK Organ Donor Register, visit [www.uktransplant.org.uk](http://www.uktransplant.org.uk)

Pictured are Transplant Nurse Specialist Chris Lawrence, donor Renuka Coghlan, Specialist Practitioner for Organ Donation Chris Chalker, Intensive Care Consultant and Clinical Lead for Organ Donation Dr Andy Ball and Transplant Nurse Specialist Ruth Lale.

## Membership Application and Change of Circumstances Form

You must complete sections marked with \* Other sections are optional

Title: \* .....  
 First name: \* .....  
 Last name: \* .....

Date of birth: DD  MM  YYYY   
 Gender: Male  Female

### Ethnicity:

White British	<input type="checkbox"/>	White Irish	<input type="checkbox"/>	White Other	<input type="checkbox"/>
Black Caribbean	<input type="checkbox"/>	Black African	<input type="checkbox"/>	Black Other	<input type="checkbox"/>
Asian Indian	<input type="checkbox"/>	Asian Bangladeshi	<input type="checkbox"/>	Asian Pakistani	<input type="checkbox"/>
Asian Other	<input type="checkbox"/>	Other Chinese	<input type="checkbox"/>	Other Not Stated	<input type="checkbox"/>
Mixed White & Black Caribbean	<input type="checkbox"/>	Mixed White & Asian	<input type="checkbox"/>	Mixed White & Black African	<input type="checkbox"/>
Mixed Other	<input type="checkbox"/>	Unknown	<input type="checkbox"/>		

Address \* .....  
 Postcode \* .....  
 Telephone .....  
 E-mail ..... Signed .....

- \* I am over 18 years of age and would be interested in standing for election to the Council of Governors
- \* I give consent to DCHFT to process my information for membership registration

The data you supply will be used only to contact you about the Trust, membership or other related issues and will be stored in accordance with the Data Protection Act. Full details available on request.

**Please return this form by Freepost (No Stamp Required) to:**  
 Freepost RRAY-BKJZ-KBTY, Trust HQ, Dorset County Hospital, Williams Avenue, Dorchester, DT1 2JY

# Volunteers celebrate first anniversary

**A dedicated group of volunteers are making a big difference to stroke patients on Dorset County Hospital's Hardy Ward.**

Thanks to their support, patients enjoy regular lunchtime social events, which greatly boost their confidence before they leave hospital.

The programme celebrated its first anniversary in June and the volunteers are keen to hear from anyone who would like to join them. Co-ordinator and Senior Physiotherapy Assistant Jan Negus said patients really appreciate the chance to sit around a table and have a relaxing meal.

"Having held sessions with the stroke patients it was suggested that they would like to go to the day room on a regular basis and eat their lunch at a table with other people," said Jan.

"Some of our patients have difficulty feeding themselves. They felt sitting around a table with others on the unit would give them the confidence to eat out in public with their family and friends once they have been discharged from



hospital." Lunchtime volunteers Val Atkinson and Sally O'Shea sit and chat with the patients, help cut up their food if asked and generally make it a pleasant interlude to a hospital stay.

Volunteer Marylyn Holehouse holds cookery sessions with the patients. Another of the volunteers, James Taylor, is a college student who plans to become a doctor. He comes in during his holidays to chat with the patients and help with group activities in the stroke unit's

therapy garden. Jan said: "The volunteers are such an asset to the patients and to the ward staff. It's a year since we started the lunchtime sessions and it really has worked well."

Anyone interested in joining the lunchtime volunteers should contact Jan Negus on the stroke unit on 01305 255164 or email [jan.negus@dchft.nhs.uk](mailto:jan.negus@dchft.nhs.uk) Volunteers Val Atkinson and Sally O'Shea are pictured with Jan Negus and patients on the stroke unit.

## Hospital reaches a watery milestone

**You might not be aware of it, but much of the water used at Dorset County Hospital comes from its very own borehole.**

Over the summer its total output hit 200 million litres of water. At today's water prices this will have saved the Trust over a quarter of a million pounds.

The borehole began production in 1998 and now satisfies 25 to 35% of the hospital's requirements. Borehole water is used throughout the main hospital complex to provide hot and cold water supplies to washbasins, sinks, showers, toilets and baths. It is not currently used as drinking water,

although it would be perfectly safe to drink.

Head of Estates Keith Butler came up with the idea of drilling for water when Phase Two of the hospital was being built.

He said: "I'd been told that there was a chance we'd be able to tap into an aquifer comprising fissures in the chalk below the site. The trouble was there was no way of definitely knowing whether we were drilling in the right spot. Advice from a local expert company ensured we got it right first time.

"At the time it was unique for a hospital in the South of England to have its own water borehole

supply. However, more NHS hospitals now have their own boreholes because they often work so well and after the privatisation of the water industry in the 1990s, water became a much more expensive utility. Once the borehole is approved and an abstraction licence issued by the Environment Agency you can use water from it free of charge, apart from the cost of the licence and the treatment plant."

The borehole and its treatment plant are situated on the grassed area outside Damers Restaurant near the border with Bridport Road. It is 160 metres deep with a diameter of 200mm.

