



UPDATE

February 2005—keeping you up to date with the latest developments.

A special bulletin will be issued the week commencing 14th March 2005 to coincide with the special meeting of the Trust Board on 15th March 2005. This will provide information on the format of the meeting and the presentations and information discussed.

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SPECIAL MEETING OF SPERRIN LAKELAND TRUST.

A meeting will be held at 10.00 am on Tuesday, 15 March 2005 in the Resource Room, Technology Centre Omagh (opposite Omagh Library). The business will be to appraise members of the Primary and Community Care Infrastructure Phase 1 Outline Business Case and to approve Phase 1 Outline Business Cases for the local and acute hospitals.

Special Trust Board 1

THE MEETING IS OPEN TO THE GENERAL PUBLIC

EQIA 1

Standing Orders will apply. On this occasion, requests for speaking rights should be forwarded to the Chairman's office, Trust Headquarters, Strathdene House, Tyrone and Fermanagh Hospital, Omagh, Co Tyrone, BT79 0NS, no later than **Wednesday, 9 March 2005.**

Staff Vision 1

Project Update 2

EQUALITY IMPACT ASSESSMENT

- **Mental health Review**
- **Workforce Planning**
- **ICT Update**

In mid-January we sent out about 2300 questionnaires to staff at the Tyrone County and Erne Hospitals together with those working in Estates and support services. To date we have received just over 500 completed questionnaires and we'd like to thank everybody who took the time to respond.

Emergency Care Conference 3

We have not yet completed the analysis of the questionnaires so the full results will appear in a future bulletin. If you have any queries in regard to the Equality Impact Assessment please feel free to contact us at eqiadbs@slt.n-i.nhs.uk or ext 5966/5977.

Planning for Change FHN 4

STAFF VISION FOR THE FUTURE

- **What is FHN**
- **Forthcoming FHN Events**

"I envisage a 24-hour A&E Department, support by 24 hour CT scanning. Within the A&E department there will be a minor injuries stream or "See and Treat". The staff in this unit will rotate to Altnagelvin Area Hospital for CPD. The unit will be bright, modern and allow for separate waiting areas for children with fast tracking for elderly patient, disabled and children. A critical care unit will be adjacent to A& E and theatres. The Day Procedure Unit will facilitate a wider range of treatments including ophthalmology ."

Contact Details 4

(Linda Saunderson, Surgical Directorate)

THE MENTAL HEALTH REVIEW

The review team, as part of their examination of current and future needs for acute care needs across hospital and community, will advise on the location, design and number of acute psychiatric beds for adults and older people with Mental Health Problems. This information will directly inform and be included in the Trust's overall Developing Better Services planning process for hospital and community services. There are currently 54 acute psychiatric beds at the Tyrone and Fermanagh Hospital, which cater for the needs of the people from County Tyrone and Fermanagh.

It is envisaged that this number could be significantly reduced within the context of a well developed comprehensive community mental health services. A key objective of the review will be to propose the type of alternatives to hospital admission which will suit the needs, aspirations and circumstances of the local population.

DEVELOPMENT OF A WORKFORCE PLAN

Work has continued since the last update with further meetings being held with a number of nursing and clinical support departments. The first meeting to take forward the medical element of the plan took place on 22nd and on the 23rd February. The Facilities Management team held a workshop. Further work on these aspects of the Plan will be progressed when the Consultants visit the Trust again. Conrane Consulting are putting together the overall plan. Progress is in line with expectations. The group planning the local hospital lead by DR Russell will meet with Conrane Consulting again as well many of the other clinical teams at the end of March.

ICT SUBGROUP UPDATE

Progress is being made on the Outline Business Case (OBC) and it is set for completion at the end of March as a draft. Currently options are being finalised and outline costings are being drawn up. In the OBC we have identified 5 separate elements for implementation and have currently also identified 30 separate options for the delivery of these elements.

ELEMENT	DESCRIPTION
1	ICT Infrastructure – network /communications capacity within the new buildings
2	ICT Infrastructure – Personal Computers, printers, devices and desktop applications
3	Electronic Health and Care Record and communications
4	Business administration systems
5	Support and management services

The ICT subgroup is currently agreeing timetables and priorities of systems and applications, which can be developed and deployed before the inception of the new hospitals so that the Trust and stakeholders can start gaining and benefit as soon as possible. There will also be increased coordination between the Trust and SLT and Department of Information Services (DIS) to ensure a close correlation between the DBS project and regional strategy for new ICT systems in the forthcoming years.

Andrew Pattison joined the team in mid December as the ICT Project Manager for DBS. He was formally with Down Lisburn HSS Trust. Andrew currently is responsible for the completion of the OBC and will also be responsible for the implementation of any new ICT systems in the next few years. He will also start developing training and information sessions for staff across the acute sector to help enable smooth implementation of new applications before the implementation of the new hospitals. Andrew will be happy to come and talk to any groups of staff regarding the new ICT systems and infrastructure and looks forward to meeting as many of his colleagues as possible in the near future. Andrew is located at Cedar Villa at the T&F and can be contacted on 5137 or by email apattison@slt.n-i.nhs.uk.

THE EMERGENCY CARE CONFERENCE– 26TH JANUARY 2005

Access to good quality, safe emergency care for all the people of our community is one of the major challenges now facing the Health Service in Northern Ireland. This was the theme of a workshop held in Omagh on Wednesday 26 January 2005. The workshop was aimed at health and social services professionals from the Western Health and Social Services Board, the Department of Health, Social Services and Public Safety, local Trusts, the NI Ambulance Service and Primary Care together with political representatives and others. The focus of discussions was on how emergency services in the Western area should be developed within the context set by Developing Better Services.

The main speaker at the workshop was Sir George Alberti who is the National Director for Emergency Access for the NHS in England.

One of Sir George's aims is to help the Health Service rethink the way access to emergency care is delivered. In his opening remarks, Sir George said that good quality, safe care has to be paramount in thinking about emergency services. He also called on all those involved in the planning and provision of emergency care to remember that the needs of the patient must be the primary focus at all times.

Sir George said that solutions best suited to the Western area must come from those who know and

understand the area and the needs of its population. However, he felt that his experience in England provided some pointers to the kind of issues which need to be addressed. These included the need to shift the focus of emergency care away from the traditional model of Accident and Emergency Departments in hospitals and towards a much more integrated model of emergency care ranging from self-care at home through community-based approaches and new ways of meeting urgent and emergency needs across a range of different settings.

At the core of his message was the need for integrated planning and integrated working and this will mean breaking down the barriers between professions and building skills and competencies so that staff can take on new roles.

Sir George gave a detailed account of the kind of approaches being taken forward in England and following a Question and Answer session, he asked participants to always keep in mind that services must be based around the needs of the patient and that we must always be honest with the public about what we can and cannot do. There is a significant work programme emerging from the workshop that took place at the conference plans are in place to start taking forward this work, particularly in developing a ten year plan for emergency care across the western area.

HOW STAFF FOUND THE CONFERENCE!!

A wide range of organisations were represented and contributed to the workshop. Senior clinicians and managers from Sperrin Lakeland, Foyle and Altnagelvin Trusts alongside local politicians and health service planners fruitfully discussed and debated future models for emergency care services in the Western Board Area.

A few of the many important messages from the day included the absolute need for services to be patient centered with whole systems planning and development, the essential role of clinical networks and the importance of openness and honesty from all stakeholders regarding the development of new services. The conference concluded with the agreement that a ten-year action plan is required to provide the definite framework and direction for emergency care services in the area. This would be undertaken in the next three to six months.

(Garrett Martin)

“PLANNING FOR CHANGE”-PRIMARY CARE COMMUNITY CARE OUTLINE BUSINESS CASE

Each board has been asked by the DHSSPS to prepare an Outline Business Case, detailing future developments required to support and enhance primary and community care services. Work is ongoing to complete this task and a draft document is now available. A workshop with board members took place on the 23rd February 2005 to discuss the proposals and present a “whole system” picture in the Outline Business Case for primary and community care; the acute hospital; the local hospital and seek approval to move to the next stage of the business case process.

FUTURE HEALTHCARE NETWORK.



HOSPITAL VISITS– FARNHAM 12TH JANUARY

A visit had been planned by the Future Health Care network to Farnham hospital and Centre for Care on the 12th January 2005. However due to the adverse weather conditions the flights from Northern Ireland had to be cancelled. Another date has been scheduled to facilitate participants that were unable to attend for the 17th May 2005. Presentations from the original date are available.

If you would like a copy please feel free to contact Tracy at ext 5974 who will email or post them to you.

WHAT IS THE FUTURE HEALTH CARE NETWORK?

The Future health care network aims is to support members to help them plan today, to ensure services and facilities meet the needs of tomorrow's patients

The aim of FHN is to provide support to its members to help them understand and respond to the factors driving change, connect to leading edge practice, share information and to develop services that are fit for the future, which take account of:

- New models of care – particularly the integration of primary and secondary care
- The changing workforce
- New thinking in building design
- Information, communications and other technologies
- Links to the social care agenda
- The need to create effective public-private partnerships

FORTHCOMING FUTURE HEALTH CARE NETWORK

- **7 April:** Visit to West Berkshire Community Hospital– Newbury
- **15 April:** Master classes– Children's Services Developments– London (Blair Sadler from San Diego Hospital)
- **21 April:** Master Classes– Mental Health Developments– London
- **10-13 May:** Healthcare Buildings in Norway
- **17 May:** Visit to Farnham Hospital and Centre for Care

If you would like further information on any of the above proposed Future Health Care Network visits, please contact Tracy on ext 5974 or alternatively email tmcgillion@slt.n-i.nhs.uk.

DBS TEAM - CONTACT DETAILS

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FEEDBACK

Should you have a query relating to the DBS Project please contact Mary Maguire, Project Director or Tracy Mc Gillion, Communications Support Officer who will arrange for a response to be forwarded to you as soon as possible.