

# **CHC Listings**

**May 2002**



# CHC LISTINGS

May 2002

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## **CHC Involvement in new patient representation structures**

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### **CHC Involvement in the new patient/public involvement structures 2002 (2)**

(Other than PALS and ICAS - analysed separately with questionnaires)

#### **1. Local Networks of the Commission**

##### **Northamptonshire North & South CHCs 01604 627722**

The two CHCs are undertaking a pilot project to test out the government's proposed arrangements for PPI. It will build on the CHCs' existing infrastructure and been adopted by the county's health community as part of their new health improvement and modernisation plan. The CHC staff will become the local CPPIH

ASSOCIATION OF COMMUNITY HEALTH COUNCILS FOR ENGLAND & WALES  
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# CHC Involvement in new patient representation structures

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## 2. Patients' Forums

### **Airedale CHC 01535 691913**

The CHC is spearheading the formation of shadow Patients' Forums in Airedale and Craven. Each local NHS provider trust will have a PF of about ten people. Initially, members of the forum will hold office for about twelve months. Members will inspect hospitals & health centres, undertake quality auditing, and collect up the views of the local community about the NHS services. The PFs are being set up as sub-committees of the CHC and include existing members.

### **Chichester CHC 01243 766011**

The CHC is proposing to convert their Acute Hospitals Working Group into a Shadow Patients' Forum, and they are awaiting a response from the local acute Trust. The Trust were initially proposing to set up their own Forum with CHC involvement, but members felt that it should be the CHC which sets up the Forum.

### **Doncaster CHC 01302 326215**

Since Autumn 2001 the CHC and Doncaster West PCT have been working together on a pilot project to develop a shadow patients' forum, as an independent body for local people. The results of this project are being shared with the Doncaster trusts, through representation on the steering group for the shadow patient forum, and through the Doncaster Collaborative on the New Measures for Patient and Public Involvement. Terms of reference for the Forum were agreed by the CHC and the PCT, and a broad recruitment campaign conducted. Events were held to inform local people about the role of the Forum. Applicants had to attend a group session and a brief interview. 10 members, including 2 existing CHC members were appointed. They are required to abide by the NHS Code of conduct for CHC members. The forum is operational from May 2002 until the legislation on PFs comes into effect. The project is being evaluated.

### **Kensington, Chelsea & Westminster CHC 0207 706 7100**

The CHC's projects for the coming year will be to work with their two acute trusts, and their two PCTs, to set up shadow PFs. The CHC will be committing some of its project funding to this work.

### **Northamptonshire North & South CHCs 01604 627722**

As a local pilot CPPIH they will have responsibility for establishing, servicing and co-ordinating the work of seven shadow PFs. They will also assume responsibility for the training of members of the Forums. They are also working with Oxfordshire CHC to establish a PCT PF. The 7 shadow PFs will serve as sub-committees of the two CHCs,



# CHC Involvement in new patient representation structures

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and will comprise the existing CHC members of that particular locality. They can also co-opt extra members. Each trust will be asked to nominate one of its existing NEDs to act as the PF nominee on the trust board.

## **Tower Hamlets CHC 0207 375 1555**

The CHC is part of the Project Implementation Group that is setting up a shadow PF for Barts and the London NHS Trust. This is part of the Trust's 'Enhanced Patient Involvement Programme' which aims to draw together existing activities (including a pathfinder PALS) and raise the level of patient involvement.

## **Winchester and Central Hampshire CHC 01962 863511**

The CHC has set up three Pathfinder Patients' Forums, which cover an acute trust, a specialist mental health and learning disability trust, and a primary care trust. In the PCT PF two sub groups have been set up to ensure that neither strategic nor provider issues are overlooked. The CHC are also working with other CHCs in Hampshire to set up a PPF for the Ambulance Services Trust. With Southampton CHC they a joint "modernisation officer" appointment. The PF for the acute trust is the most advanced, and has a well defined remit and work programme. The PF for the mental health trust will be rather different, given the existing active involvement of users. The PCT PF sub groups currently consist of CHC members, but hope to co-opt from local patient participation groups, and on the basis of individual skills.

## **3. Local Authority Overview and Scrutiny Committees**

### **Somerset CHC 01823 271618**

The CHC has been working with Somerset County Council for several months and a pilot OSC will begin work in early summer. A draft "terms of reference" was drawn up and the OSC is called "Action for Somerset's Health". The CHC is also planning on organising training for the members, and facilitating a workshop to develop the work programme.

### **Tower Hamlets CHC 0207 375 1555**

LB Tower Hamlets is considering its health scrutiny arrangements and is keen to build on and incorporate the knowledge, skills and expertise of the CHC. THCHC, with South Bank University, are currently surveying key local stakeholders to identify critical success factors in the transition of the health scrutiny function. Results of the survey and recommendations from the research group will be available at the end of May.



**Response to East Kent Hospitals NHS Trust's Consultation Document  
"Modernising Hospital Services in East Kent 2001-2005"**

*South East Kent CHC*

*Pages: 20*

When responding to the consultation document, "Modernising Hospital Services in East Kent 2001-2005", the views of the members of the general public and the members of South East Kent CHC have been taken into account. The CHC remains sceptical about delivery and adequate capacity for local hospital services. There is concern about the omission of community hospitals and the reliance on Private Finance Initiative.

**Putting Patients First: response to modernising hospital services in East Kent  
Consultation 2001 -2005**

*Canterbury & Thanet CHC*

*Pages: 23*

The CHC rejects the current four options as presented. The CHC requires greater flexibility and mix in the level of services.

**Heart of the Matter: users' views of nurse led coronary heart disease clinics in  
the Dales Primary Care Group**

*South Durham & Weardale CHC*

*Pages: 21*

The survey was undertaken to ascertain the views of patients on the introduction of a nurse led coronary heart disease clinics in the Dales Primary Care Group. The Dales has one of the highest rates of coronary heart disease in the country. Most patients were satisfied with the information they received from the clinic, but a much smaller proportion had adopted a healthier lifestyle.

**Hospital Discharge Procedures: 100 patients talk to Mid Downs CHC during  
February 2002**

*Mid Downs CHC*

*Pages: 17*

Patients were asked for their views regarding communication with hospital staff, the information they received to date and discharge planning. This report provides a snapshot of patient experience. It highlights problems caused by delayed transfers of care and possible solutions.

**Report on Facilities for New Build Psychiatric Unit at the William Harvey Hospital Site**

*South East Kent CHC*

*Pages: 34*

Report and opinion poll of people who use mental health services, their carers and staff, on facilities that should be included in the new build psychiatric unit at the William Harvey Hospital site.

**Reflections - Users of the Child & Adolescent Mental Health Service in Gloucestershire**

*Gloucestershire CHC*

*Pages: 30*

CHC members expressed concern at the long waiting times experienced by people referred to the Child & Adolescent Mental Health Service. A study was undertaken by the CHC to find out users' views of the CAMHS in order to make suggestions to improve and develop the Service.

**Listening to You: Survey of the views of Dorset residents on local health services 2001/02**

*East Dorset CHC*

*Pages: 58*

This report summarises the views of people living in Dorset on their local NHS services. Many people commented on the quality of services in Dorset.

**'Out on a limb?' provision of prosthetics and wheelchair services in Cornwall**

*Cornwall CHC*

*Pages: 35*

The right equipment is key to disabled people achieving equality. This report highlights the problems people are experiencing with various aspects of getting equipment, also the anger and frustration often felt by disabled people and their families, as well as by professionals, at delays before receiving equipment, at the difficulties in getting information and the cost of obtaining equipment. The report has focused on wheelchairs and prosthetics as of particular concern and the CHC have welcomed the 'Modernising Community Equipment' initiative that is concerned with improving the supply of other types of aids and appliances. This is an attractively produced report, with many appropriate images, and a useful resource section.

**Patient Partnerships with Older People**

*North Staffordshire CHC*

*Pages: 21*

In North Staffordshire the NHS family has clearly signed up to public and patient participation in health care. However, that commitment has to translate into real



experience for patients. The aim of this small qualitative survey is to consider patient involvement for a specific group of older service users, with a further aim of considering at what level that involvement works: being informed, being consulted, or being a partner in decision making. One of the findings is that patient involvement is not yet at a real partnership level for older service users

**Post mortem procedure and the removal and retention of organs and tissue--a public consultation exercise**

*Association of Welsh CHCs*

*Pages: 33*

There has been considerable public and media concern over post mortem examination procedures and the retention of organs and tissue. The National Assembly for Wales established an Organ Retention Advisory Group, and this consultation exercise was instigated by members of that group. This document represents the only report of formal consultations with the public to gather their views on these topics and to summarise their recommendations for changes in procedures.

**You and Your Doctor -- The general practice assessment survey (GPAS)***Southampton & SW Hants CHC*

*Pages: 22*

The age-old system of a professional elite deciding how medical service should be delivered has changed and the new ethos is that the perception of both carers and patients should influence such provision. 23,000 patients have been asked to express an opinion about their GP's professional competence. This report sets out the manner in which the perceptions of patients have been sought and just what views they hold about the care being provided by GPs in the Southampton & South West Hampshire Health Authority area.

**Going Home: Rehabilitation Services for Older People**

*Aylesbury Vale CHC*

*Pages: 17*

Report by Aylesbury Vale CHC on rehabilitation services for older people who had undergone an episode of acute care. The work looks at services across all disciplines in the acute, primary and social care sector and includes the views of users of services. The findings conclude that all rehabilitation services should be managed by one organisation with common protocols to overcome the fragmentation which currently exists. The report recommends that case notes should follow the patient throughout the care pathway.

**Accident and Emergency Survey: Kettering General Hospital NHS Trust, 14 & 25 January 2002**

*Northamptonshire-North CHC*

*Pages: 10*

Report of survey carried out over two separate days in January of this year in the A&E department at Kettering General Hospital NHS Trust, Northamptonshire.

**Quality Audit Report: Patient Notice Boards at Airedale General Hospital**

*Airedale CHC*

*Pages: 1*

Twenty three wards were visited, and the quality of their public information notice boards analysed.

**Outpatients survey at St Albans and Hemel Hempstead Hospitals**

*North West Herts CHC*

*Pages: 17*

This survey was carried out during a 3-4 week period from 8th October 2001 in the outpatients' departments of two hospitals, part of the West Herts Hospital Trust. Recommendations are made for access and environment; administration; patient care; and staff/management issues.

**Breast Care Services Survey**

*Harrogate & District CHC*

*Pages: 58*

600 questionnaires were mailed to people who had recently used the breast care service at the Macmillan Dales Unit, Harrogate District Hospital. 209 were returned. This survey covers an entire episode of care from first GP referral to hospital cancer therapy. Each stage is discussed separately, and recommendations made. Generally satisfaction with the service is high.

**A Survey of Cleaning & Catering at Ashford & St Peters Hospitals NHS Trusts**

*North West Surrey CHC*

*Pages: 13*

The CHC carried out a survey of patients' meals at Ashford & St Peter's Hospitals NHS Trust in September 2001. It also included questions about cleaning on the wards. Additionally, in November, the catering supervisor at St Peter's met and accompanied 2 representatives from the CHC while they observed the midday meal service on several wards.

**Antenatal Parent Education Survey – 2001**

*North West Surrey CHC*

*Pages: 14*

Each health visitor was given a number of questionnaires to distribute and asked each 'new mum' to complete on the first new birth visit. Generally, maternity



services were good. Issues were raised around accessibility to classes; understaffing of the the maternity unit; and help with breast feeding.

**Head Start : report on paediatric acute neuro-rehabilitation services in Greater Manchester**

*Salford CHC*

*Pages: 20*

Report by Salford CHC which reflects priorities and concerns raised by families of children with acquired brain injury about neuro-rehabilitation services. This work was done with the support of Manchester Children's Hospitals, in response to a draft outline business case for a paediatric neuro-rehabilitation service for children in North-West England. This was to try to ensure that the concerns of children and their families were considered seriously as part of the proposed development. The report suggests six main areas of concern for inclusion in any plans and specifications for the development of paediatric acute neuro-rehabilitation services.

**Partnership of Care Survey, Paediatric Ward, Colchester General Hospital**

*North East Essex CHC*

*Pages: 22*

Survey undertaken by the CHC to find out parents' understanding of the ward routine and the part they can play in the care of their children

**.All the King's Horses: Falls in Hospital Study**

*Caerphilly CHC*

*Pages: 7*

The purpose of this study is to identify the scale of the problem of falls involving patients in local hospitals, and to ensure that local NHS Trusts are addressing the issue and have policies and procedures in place to reduce the incidents.

**Mount Vernon Cancer Centre Patient Survey**

*Hillingdon CHC*

*Pages: 29*

The survey took place over 14 days in November 2001 in the Mount Vernon Cancer Centre. Participants were contacted in the waiting room of the Chemotherapy Suite, the Lynda Jackson Macmillan Centre and the Paul Strickland Scanner Centre.

**Quality Service for new patient enquiries: "Mystery Shopper" audit**

*Doncaster CHC*

*Pages: 24*

The aims of the study were to examine the quality of information and service given to new patient enquiries, and to examine the quality of practice leaflets. It was a joint project between the CHC and Doncaster Medical Audit Advisory Group.



## **Public Involvement in the development of a Complaints Organisation**

*Dewsbury District CHC*

*Pages: 38*

The aims of the survey were to assess the local population in North Kirklees and establish their level of knowledge of the NHS complaints procedure; to determine the type of help and support they think they would need when making a complaint and the type of resolution expected as a result of this; to identify how accessible the complaint service has to be to meet the needs of the local population. In addition Dewsbury CHC decided that it would be beneficial to establish whether previous complainants who have used the CHC would have pursued their complaint without their help. The main finding was that knowledge of the complaints system was very poor.

## **Northumberland Smoking Cessation Services: Users' Views**

*Northumberland CHC*

*Pages: 28*

Smoking cessation services were set up in 1999 to operate over a 3-year period initially. They were established in the 26 Health Action Zones, including Northumberland, and in all Health Authorities from April 2000. The service teams offer a variety of approaches to helping people to stop smoking, following Department of Health guidelines, and they are required to monitor their own effectiveness. The CHC was asked to conduct a qualitative project exploring users' views in a series of focus groups.

## **Patient Satisfaction Survey: Royal Berkshire & Battle Hospitals Trust**

*West Berkshire CHC*

*Pages: 4*

This survey of the Wards of the Royal Berkshire Hospital & Battle Hospitals was carried out over the period 17th to 30th September 2001. The survey did not include paediatrics, intensive care units, the maternity unit or day bed units. A total of 746 questionnaires were sent to all other inpatients discharged during this period. Issues raised included provision of information; mixed sex wards; cleanliness; and avoidable noise at night.

### **Obtaining CHC Publications**

If you want *copies of any CHC publications*, could you please  
**contact the relevant CHC directly** (details in the directory)  
and **not** ACHCEW

## **NHS Performance Indicators: Acute NHS Hospital Trusts**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH.

Tel: 08701 555 455

These indicators cover services such as treatment for heart disease, cancer and mental health. They also include indicators such as waiting times for hospital admission, trolley waits, complaints and cleanliness. The data show improvements across most indicators. There has been a marked improvement in rates of cataract removal and joint replacements, death rates following surgery and death rates from circulatory diseases, but indicators for vacancy rates and cervical cancer screening show a small decline in performance. The overall picture is one of progress but there remains considerable and unacceptable variation in performance.

## **NHS Performance Indicators: Health Authorities**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH.

Tel: 08701 555 455

The indicators show some of the improvements made and also areas where health authorities need to target action. They cover services such as treatment for heart disease, cancer and mental health. They also include indicators for primary care management, public health and access to GPs.

## **NHS Performance Indicators: National Figures: February 2002**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH.

Tel: 08701 555 455

The indicators give a summary of what is going on across the NHS. They cover services such as treatment for heart disease, cancer and mental health. They also cover other issues such as waiting times, hospital cleanliness, and access to GPs. Improvements include longer life expectancy; lower death rates for cancer, heart disease and stroke; and improved cancer survival.

## **Implementing NICE Guidance: a practical handbook for professionals**

*National Prescribing Centre*

**Availability:** Radcliffe Medical Press Ltd, 18 Marcham Road, Abingdon, Oxon, OX14 1AA.

The handbook includes numerous examples from those in the NHS involved in implementing clinical guidance, especially from NICE. It also contains checklists and aids that can be tailored to specific circumstances.

## **Building a Safer NHS for Patients**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH

This document sets out the Government's plans for promoting patient safety following the publication of the report 'An Organisation with a Memory' and the commitment to implement it in the NHS Plan. It places patient safety in the context of the Government's NHS quality programme. Central to the plan is the new mandatory, national reporting scheme for adverse health care events and near misses within the NHS.

## **National Care Standards Commission (Registration) Regulations**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH

This consultation document contains the proposed draft National Care Standards Commission (Registration) Regulations to be issued under the Care Standards Act 2000. The regulations set out the requirements to be placed on all providers who are required to be registered under Part 11 of the CSA.

## **Care Standards Act 2000 (Commencement No. \_\_ (England) and Transitional and Savings Provisions) Order 2001**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH

This consultation document contains the proposed draft Transitional and Savings Provisions Commencement Order, to be issued under the Care Standards Act 2000. It sets out the transitional arrangements for different groups of providers who will be registered under Part 11 of the CSA.

## **Frequencies of Inspection and Regulatory Fees: a consultation paper**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH

The Care Standards Act 2000 received Royal Assent on 20 July 2000. The National Care Standards Commission (NCSC) starts its main operational activities in April 2002. This Consultation Paper outlines how the Commission will regulate health and social care, the cost of this, its funding and fees. This paper starts by considering proposals for the registration and inspection resources to be allocated to each regulated area of health and social care, taking account of the risks and complexity involved.

## **Principles for Best Practice in Clinical Audit**

*National Institute for Clinical Excellence*

**Availability:** Radcliffe Medical Press Ltd, 18 Marcham Road, Abingdon, Oxon, OX14 1AA. (ISBN 1-85775-976-1) £19.95 for NHS staff & organisations, £29.95 for those who do not work for the NHS

The book aims to support NHS staff by detailing the methods, tools, techniques and activities related to each stage of clinical audit. It contains sections on preparing for audit, selecting audit criteria, measuring levels of performance, and making and sustaining improvements in care.

**Beta interferon and glatiramer acetate for the treatment of multiple sclerosis**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, WC2N 5HR

On the balance of their clinical and cost effectiveness neither beta interferon nor glatiramer acetate is recommended for the treatment of multiple sclerosis (MS) in the NHS.

**Guidance on the use of irinotecan, oxaliplatin and raltitrexed for the treatment of advanced colorectal cancer**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, WC2N 5HR

On the balance of clinical and cost-effectiveness, neither irinotecan nor oxaliplatin in combination with 5-fluorouracil and folinic acid (5FU/FA) are recommended for routine first-line therapy for advanced colorectal cancer.

**Guidance on the use of trastuzumab for the treatment of advanced breast cancer**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, WC2N 5HR

**Management of type 2 Diabetes: Retinopathy -- screening and early management**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, WC2N 5HR

**Management of type 2 Diabetes: Renal disease -- prevention and early Management**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, WC2N 5HR

**Patient Focus and Public Involvement**

*Scottish Executive*

**Availability:** The Scottish Executive, Health Care Division, St Andrew's House, Regent Road, Edinburgh, EH1 3DG. Tel: 0131 244 2346

This paper provides a framework for change for a patient-focused NHS Scotland. Action is already underway to achieve patient focus and public involvement, but much remains to be done. The framework covers: building capacity and communications; patient information; involvement; and responsiveness. The section on involvement looks at Health Councils, and plans for a consultation on their new role and structure.

**Guidance on the use of etanercept for the treatment of juvenile idiopathic arthritis**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, EC2N 5HR

**Guidance on the use of etanercept and infliximab for the treatment of rheumatoid arthritis**

*National Institute for Clinical Excellence*

**Availability:** NICE, 11 Strand, London, WC2N 5HR

**Investigations Completed August - November 2001: part 1 - summaries of investigations completed**

*Health Service Ombudsman*

**Availability:** The Stationery Office Ltd, PO Box 29 Norwich NR3 1GN. £9.95

These are the results of 76 investigations completed by the Health Service Ombudsman's office. The issues included clinical, nursing and maternity care and treatment; diagnosis; discharge; psychiatric assessments and the removal of patients from GPs' lists. Prominent themes were: communication with patients and families; delays in diagnosis in response to changing symptoms; and complaints handling.

**Independent Health Care: National Minimum Standards, Regulations - Consultation Document**

*DoH*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH

This consultation document sets out proposed regulations and national minimum standards against which the National Care Standards Commission will regulate independent health care providers from April 2002.

**Fostering Services: national minimum standards, regulations. Consultation document.**

*Department of Health*

**Availability:** Department of Health, PO Box 777, London, SE1 6XH

This consultation document contains the draft Fostering Services Regulations and National Minimum Standards for fostering services. It also contains a partial regulatory impact assessment, which discusses the benefits and costs of implementing these new regulations and standards.

**Guide to the Technology Appraisal Process**

*National Institute for Clinical Excellence*

**Availability:** [www.nice.org.uk](http://www.nice.org.uk)

This document is one of a set of five, which describe the process the Institute uses to undertake technology appraisals and provide guidance to the organisations invited to contribute to these appraisals. When a submission to the Institute is being

considered or prepared, the statement of process should be read in conjunction with the guidance documents referred to. All five documents are available on the Institute's website.

**Guidance for Appellants**

*National Institute for Clinical Excellence*

**Availability:** [www.nice.org.uk](http://www.nice.org.uk)

**Guidance for Patient/Carer Groups**

*National Institute for Clinical Excellence*

**Availability:** [www.nice.org.uk](http://www.nice.org.uk)

This document is one of a set of five, which describe the process the Institute uses to undertake technology appraisals and provide guidance to the organisations invited to contribute to these appraisals. The Institute is committed to involving patients/carers in its decision-making.

**Guidance for Healthcare Professional Groups**

*National Institute for Clinical Excellence*

**Availability:** [www.nice.org.uk](http://www.nice.org.uk)

**Guidance for Manufacturers and Sponsors**

*National Institute for Clinical Excellence*

**Availability:** [www.nice.org.uk](http://www.nice.org.uk)

**Guidance on the use of topotecan for the treatment of advanced ovarian cancer**

*National Institute for Clinical Excellence*

**Availability:** [www.nice.org.uk](http://www.nice.org.uk)

**Drug Prevention 2001 Resource Pack**

*Department of Health*

**Availability:** DoH Tel: 08701 555 455 Price £20 reference 25539

The Government's 10-year strategy for tackling drug misuse (Tackling Drugs to build a better Britain) seeks to shift the emphasis away from reactive drug treatment to proactive drug misuse prevention measures. As part of this process Government is investing significant new resources into drugs education and prevention. These publications are distributed to aid this process and ensure that relevant drug prevention information is available to health organisations and their partners. It is not a comprehensive guide to drug prevention, but it is intended to be a helpful resource for those with a responsibility to commission drug prevention services, both in the NHS, Social Services and other agencies.



# General Publications

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## **Age Discrimination and Equality**

*Anthony Lester*

**Availability:** Help the Aged, 207-221 Pentonville Road, London, N1 9UZ.

Tel: 020 7278 1114; Fax: 020 7278 1116;

E-mail: [info@helptheaged.org.uk](mailto:info@helptheaged.org.uk)

Lord Lester QC calls for a radical overhaul of existing anti-discrimination legislation, and for a single Equality Bill.

## **Access to Healthcare Seminar**

*British Medical Association*

**Availability:** BMA House: [www.bma.org.uk](http://www.bma.org.uk)

Report on a meeting of representatives from the medical profession and patient groups to discuss ways of improving access to health care..

## **Improving Health and Well-being in local communities**

*Democratic Health Network (DHN)*

**Availability:** DHN, 22 Upper Woburn Place, London, WC1H 0TB.

Tel: 020 7554 2820; Fax: 020 7554 2802. Price: £15 for each set up to 10 sets, £13.50 for each set between 10 & 25 sets. (DHN members, half price)

This is a series of briefings for non-executive directors in primary care, and local authority councillors, working at the interface between health and local government. The first two cover the primary care system, and local government and health.

## **A healthy outlook: local authority overview and scrutiny**

*Audit Commission*

**Availability:** Audit Commission Publications, PO Box 99, Wetherby, LS23 7JA.

Tel: 0800 502030. Price £15.

This paper aims to help local authorities to develop and implement health scrutiny in their areas. It also aims to inform local NHS bodies about the new role, and to encourage them to become involved in how it works locally.

## **Volunteering: a Code of Good Practice**

*Home Office Compact Working Group*

**Availability:** Home Office, Advice Community Unit, Room 235, Horseferry House,

Dean Ryle Street, London, SW1P 2AW. Tel: 020 7217 8400;

E-mail: [Pulbic\\_enquiry.acu@homeoffice.gsi.gov.uk](mailto:Pulbic_enquiry.acu@homeoffice.gsi.gov.uk)

Set out an agenda of undertakings for both the government and voluntary sector in England on good practice for volunteering.

## **National Sentinel Caesarean Section Audit Report**

*Royal College of Obstetricians and Gynaecologists*

**Availability:** RCOG Bookshop, Tel: 020 7772 6275; Fax: 020 7724 5991;

E-mail: [bookshop@rcog.org.uk](mailto:bookshop@rcog.org.uk)

Concerns about the rise in the number of caesarean sections and possible variation in rates between maternity units have been a matter of public debate.



The Department of Health commissioned the National Sentinel Caesarean Section Audit to accurately determine the current caesarean section rate, factors associated with variation in the rate and quality of care. The audit findings have been disseminated to individual NHS trusts to inform discussion and possible strategies for further improvements in quality of care and service provision for maternity care.

**Modernising Maternity Care: a commissioning toolkit for primary care trusts in England.**

*Maternity Care Working Party*

**Availability:** National Childbirth Trust, Alexandra House, Oldham Terrace, London W3 6NH.

Aims to help Primary Care Groups and Trusts update themselves with current thinking in maternity care provision, and to explore options for improving local services, and the contribution they make to maternal and infant health.

**Delivering Improvement together: Audit Commission strategy 2001-2004**

*Audit Commission*

**Availability:** Audit Commission, 1 Vincent Square, London, SW1P 2PN.

Tel: 020 7828 1212; Fax: 020 7976 6187;

Website: [www.audit-commission.gov.uk](http://www.audit-commission.gov.uk)

There have never been greater demands on, or expectations of, public services. Revitalising them is at the top of the agenda for the public, for service providers and for central government. As an independent watchdog, the Audit Commission provides assurance on standards and on the use of public money.

**Evaluation of NHS Direct first wave sites: Final report of the phase 1 research**

*James Munro and others*

**Availability:** Medical Care Research Unit, University of Sheffield, Regent Court, 30 Regent Street, Sheffield, S1 4DA

The third in a series of reports on first wave NHS Direct sites by the Medical Care Research Unit of the University of Sheffield. Their overview to date is that NHS Direct is a well-used and rapidly developing service which is appreciated by callers and has not been unhelpful to other services.

**Research: The role and responsibilities of doctors**

*General Medical Council*

**Availability:** GMC, 178 Great Portland Street, London, W1N 6JE. Tel: 020 7580 7642; Website: [www.gmc-uk.org](http://www.gmc-uk.org)

This guidance sets out the standards expected of all doctors working in research in the NHS, universities and the private sector or other circumstances. It develops the general principles and standards on research set out in other GMC guidance documents and should be used in conjunction with them.



## **Future of the NHS - A framework for debate**

*King's Fund*

**Availability:** King's Fund, 11-13 Cavendish Square, London, W1G 0AN;  
Website: [www.kingsfund.org.uk](http://www.kingsfund.org.uk)

Debate about the future of the NHS is imperative, as unprecedented funding increases combine with calls for radical change. This paper brings together ideas from a group chaired by Lord Haskins, which seek to create a more appropriate balance of control and accountability between parliament, government, central management, local NHS purchasers and providers, and patients. Central to this would be the creation of a NHS corporation, working at arms length from government..

## **Recognition, prevention and therapeutic management of violence in mental health care: a summary**

*United Kingdom Central Council for Nursing, Midwifery and Health Visiting*

**Availability:** UKCC, 23 Portland Place, London, W1N 4JT. Tel: 020 7637 7181;  
Fax: 020 7436 2924; Website: [www.ukcc.org.uk](http://www.ukcc.org.uk)

The report focuses on in-patient mental health care, including acute wards, psychiatric intensive care and forensic units. It sets out the Council's recommended components of training and employers' policies in the management of violence. The full report of the project and of the literature review are available on the Council's website at [www.ukcc.org.uk](http://www.ukcc.org.uk)

## **National Service Frameworks: Involving patients and the public**

*Christine Hogg*

**Availability:** The Patients Forum, Riverbank House, 1 Putney Bridge Approach, London, SW6 3JD. Tel: 020 7736 7903; Fax: 020 7736 7932;  
E-mail: [info@thepatientsfourm.org.uk](mailto:info@thepatientsfourm.org.uk);  
Website: [www.thepatientsforum.org.uk](http://www.thepatientsforum.org.uk)

National Service Frameworks were launched in 1998 to set national standards and define service models for service or care groups based on the experiences of patients and carers, and to put in place strategies to support implementation and decrease variations between trusts and between different parts of the country. This study looks at how patients and the public, in particular hard to reach groups, have been involved in National Service Frameworks (NSFs) to date. A further study is planned to look at how users have been involved in the implementation of NSFs.

## **Action Evaluation of Health Programmes and Changes: a handbook for a user-focused approach**

*John Ovretveit*

**Availability:** Radcliffe Medical Press Ltd., 18 Marcham Road, Abingdon, Oxon. OX14 1AA. Tel: 01235 528820; Fax: 01235 528830;  
E-mail: [contact.us@radcliffemed.com](mailto:contact.us@radcliffemed.com); Website: [www.radcliffe-oxford.com](http://www.radcliffe-oxford.com)



## General Publications

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Action evaluation focuses on the evaluation user's needs and designs the evaluation to answer their questions within the resources and time available. This book describes this user-focused action evaluation approach for evaluating health programmes, policies and changes. It shows that evidence for making decisions can be gathered using a broader range of methods than is usually recognised in healthcare.



## Forthcoming Events

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### **Carers week 2002 Taking Care**

Six million people in the UK care part-time or full-time for relatives, friends, partners or children, who are frail, disabled, or chronically ill; and who cannot manage without their help. Carers Week is seven days when carers are both making themselves heard and enjoying themselves.

As a result of the Golden Jubilee celebrations Volunteers' Week and Carers Week overlap this year and so they have teamed up. Volunteers' Week is 7-13 June, whilst Carers Week takes place on 10-16 June

♦ Date 10-16 June 2002

**For further information please contact: Paul Matz. Tel: 020 7566 7619;**

**Fax: 0207490 8824; E-mail: [mail@carersweek.org](mailto:mail@carersweek.org)**

### **The First NHS National Strategy for Sexual Health and HIV – The Implementation Challenge**

This important strategy sets out to fundamentally change the way services are provided, and its implementation will present major challenges for all those working in the field of sexually transmitted diseases, especially in primary care. In order to implement the strategy successfully, services will have to be integrated much more closely, access dramatically improved and the provision of information and advice substantially extended.

♦ Date Tuesday 11 June 2002

♦ Venue Harrogate

♦ Costs £381.88 inc. VAT Public sector & Independent Healthcare providers  
£233.83 inc VAT Voluntary organisations, CHCs & Charities

**For further information and booking contact: Bookings Administration Dept:**

**Tel: 01423 506611; Fax: 01423 531166; E-mail: [info@hmc.co.uk](mailto:info@hmc.co.uk)**

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# Forthcoming Events

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## **Freedom of Information Conference for Health and Social Services**

The Freedom of Information Act received Royal Assent on 30 November 2000, and the Lord Chancellor published his first report on implementing the Act in November last year. The Act will be fully implemented by January 2005 and will require major cultural change with some provisions already in force. The new legislation will transform the way in which the public sector in this country works and a number of initiatives are in place to help the process, including a series of regional seminars.

- ◆ Date            Friday 21 June 2002
- ◆ Venue          One Birdcage Walk, London SW1H
- ◆ Costs          £287.87 inc. VAT public sector & charity organisations  
                    £135.12 inc. VAT individual & small voluntary organisations  
                    £351.32 inc. VAT independent organisations

**For further information and booking contact: Customer Services, Pavilion, FREEPOST (BR458), The Ironworks, Cheapside, Brighton BN1 4ZZ. Tel: 01273 623222; Fax: 01273 625526; E-mail: [info@pavpub.com](mailto:info@pavpub.com) Online booking at: [www.pavpub.com](http://www.pavpub.com)**

## **Who's 'Right' is 'Right'? The Human Rights Act (and other 'rights') and Maternity Services**

The aim of this meeting is to highlight issues around the Human Rights Act and to explore ethical matters relating to maternity services, professional practice and the right to information.

- ◆ Date            Monday 24 June 2002
- ◆ Venue          Royal College of Obstetricians and Gynaecologists, London
- ◆ Costs          Vary

**For further information and booking contact: Conference Office, Postgraduate Education Dept., Royal College of Obstetricians & Gynaecologists, 27 Sussex Place, Regent's Park, London, NW1 4RG. Fax: 020 7772 6388**

## **Improving Patient and Public Involvement – Delivering quality through new ways of working**

The commitment of the NHS Plan to put patients at the centre of care, means that all organisations must consider the way in which they involve and work with both patients and the wider public. This must not be just a tokenistic move but one brought into reality, and bound by a legal duty. Through the first wave Pathfinder PALS and examples of good practice, this timely one day event will be the ideal opportunity to share innovative ways of working, and how to feed back meaningful information onto providing quality services.

- ◆ Date            Tuesday 25 June 2002
- ◆ Venue          Scientific Societies Lecture Theatre, London
- ◆ Costs          £325 + VAT @ 17.5% NHS/Public Sector, Ind. Hospitals Delegates

**For further information and booking contact: Emma Woodward, Bookings Dept. IBC UK Conferences, Informa House, 30-32 Mortimer Street, London, W1W 7RE. Tel: 01932 893852; Fax: 01932 893893; E-mail: [cust.serv@informa.com](mailto:cust.serv@informa.com); DX: IBC DX122100 Mortimer Street**

# Forthcoming Events

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## **Translating Policy into Practice – HSMC Primary Care Learning Set**

As if the introduction of *The NHS Plan* in 2000 was not enough stimulus to the NHS, the introduction of *Shifting the Balance of Power* in the summer of 2001 has galvanised the entire system in a way that almost no other reorganisation in the past 30 years has done. Almost without exception, NHS organisations have been affected by the strategy outlined in this document, and staff throughout the system are having to rethink their role, remit and development needs.

- ◆ Date 25-26 June 2002
- ◆ Venue Health Services Management Centre, University of Birmingham
- ◆ Costs £1,995

**For further information contact: Jonathan Shapiro or Judith Smith. Tel: 0121 414 7054; E-mail: J.A.Shapiro@bham.ac.uk or J.A.Smith.20@bham.ac.uk**

## **The Law and Confidentiality in Health Care 2002**

There is a great need for all healthcare professionals to be aware of the law and practice of patient confidentiality. Trust is at the heart of the health care professional's relationship with their patients, yet many practitioners find themselves in situations where they are torn between their duties and the patient's confidentiality. Knowledge of the law is important as it assists health care professionals in resolving problems and dilemmas.

- ◆ Date Thursday 27 June 2002
- ◆ Venue Institute of Physics, London
- ◆ Costs £225 inc. VAT

**For further information and booking contact: CRS Special Events and Groups dept. Tel: 020 8577 1001; Fax: 020 8577 6446; E-mail: se.groups@crsltd.org**

## **Where Now? Radical change in emergency care**

Brings together leading practitioners as well as the key ministers and civil servants in charge of implementing health policy in this field. Delegates will benefit from the opportunity to examine emergency care issues from both a strategic and an operational viewpoint.

- ◆ Date Monday 17 June 2002
- ◆ Venue Shaw Park Plaza Hotel, London
- ◆ Costs Vary

**For further information and booking contact: Events team, NHS Confederation, 1 Warwick Row, London SW1E 5ER. Tel: 020 7959 7260; Fax: 020 7959 7273.**

## **Modernising Patient Complaints-Meeting the challenges of the NHS Plan and NHS Modernisation**

The Government's emphasis upon patient centred care, highly publicised news stories and increased patient awareness have led to huge changes within the NHS and important ramifications in the area of Patients' Complaints. There have already been many changes but there are more to come.

- ◆ Date Wednesday 26 June 2002
- ◆ Venue Scientific Societies Lecture Theatre, London
- ◆ Costs £325 + VAT @ 17.5% NHS/Public Sector/Independent Hospitals

**For further information and booking contact: Emma Woodward. Tel: 01932 893852; Fax: 01932 893893; E-mail: cust.serv@informa.com; DX: IBC DX122100 Mortimer Street**

# Forthcoming Events

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## **Managing Complaints in the NHS: Ensuring Consistency and Good Practice Throughout the Process**

The changing climate in the NHS is placing greater emphasis on risk management, clinical governance and learning lessons from adverse events. With all NHS organisations required to have efficient complaints procedures in place, this workshop will guide participants in showing how this can be achieved.

- ◆ Date            Monday 17 June 2002; Wednesday 3 July 2002
- ◆ Venue          Central London; Birmingham (resp)
- ◆ Costs          £340 + VAT @ 17.5% Public Sector

**For further information and booking contact: Sujata Haria. Tel: 020 7960 7722;  
Fax: 020 7222 4952.**

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## ACHCEW

### Consultation Documents Received

Making Decisions: Helping People who have Difficulty  
Deciding for Themselves

LCD

09/07/01

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## ACHCEW

### Responses to Consultations Received

ACHCEW response to 'Local Authority Health Overview and Scrutiny: A Consultation  
Document, January 2002'

DoH

26/04/02

## **Men's Health Week 2002**

The Men's Health Forum is planning its new major initiative, *Men's Health Week 2002*, and invites you and your organisation to become involved. The *Men's Health Week* is to be held from 10<sup>th</sup> to 16<sup>th</sup> June 2002 and will be led by the Men's Health Forum, the leading advocate for men's health. The forum will take a lead role in organising the Week with the support and collaboration of partners and sponsors from the public, private and voluntary sectors. For further information contact Allan Johnstone, The Men's Health Forum, Tavistock House, Tavistock Square, London, WC1H 9HR. Tel: 020 8684 1045; Fax: 020 7388 4477; E-mail: [mhw@menshealthforum.org.uk](mailto:mhw@menshealthforum.org.uk) General E-mail: [office@menshealthforum.org.uk](mailto:office@menshealthforum.org.uk); Web: [www.menshealthforum.org.uk](http://www.menshealthforum.org.uk)

## **Vigabatrin/Sabril**

Wolferstans Solicitors act for numerous claimants in the multi-party action investigating a causal or link between the anti epileptic drug Vigabatrin/Sabril and visual field defects which have occurred in allegedly 30% or more of patients. Their investigations are well advanced and to obtain the full benefit any claimant should join the multi-party action at this time. They are attempting to reach as many claimants as possible and accordingly advise them of action. For further information please contact Mr Tim Roper on: 01752 663295

## **Coeliac Disease/Dermatitis Herpetiformis**

Messageboards/chat room for people with Coeliac Disease/Dermatitis Herpetiformis are as follows:

The Welfed gluten free site:

<http://members2.boardhost.com/glutenfree/>

Supplementary board

<http://pub70.ezboard.com/bsupplementarycoeliacboard>

The msn chatroom/messageboard requires you to register (have 'passport' and give reason to join)

[http://communities.msn.co.uk/Coeliacs/\\_whatsnew.msnw](http://communities.msn.co.uk/Coeliacs/_whatsnew.msnw)



# Directory Amendments

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## New E-Mail addresses:

Bassetlaw	chc@bassetlawchc.f9.co.uk
Camden	either nick or geoff@camdenchc.co.uk
Canterbury & Thanet	chiefofficer@canterburyandthanetchc.co.uk
Central Notts	chc@centralnottschc.f9
City & Hackney	cityhackney.chc@talk21.com
Doncaster	information@doncasterchc.f9.co.uk
Kingston	chiefofficer@kingstonchc.plus.com
Mid Surrey	chief-officer@ms.midsurrey-chc.sthames.nhs.uk
Newham	newham-chc@clara.co.uk
S Derby	chc@sderbychc.f9.co.uk

## **Please note the correct address for North & Yorks Regional Association:**

N&Y	shiela.ogilvie@ms.regcni-chc.northy.nhs.uk
not regonl as listed in the directory	

## New Chief Officers:

Lancaster	Acting Chief Officer:	Nancy Ireland
	Acting Chief Assistant Officer:	Kate Ashton
Hammersmith	Acting Chief Officers:	Angela Slaherty
		Amanda Morris
Huntingdon	Deputy Chief Officer:	Judith Nithsdale

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Manchester Central Chief Officer should read: Nik Barstow

The deadline for the next issue of CHC Listings is 27 June 2002
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