

Your LINK for improving health and social care

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a LOCAL INVOLVEMENT NETWORK

The Kent LINK Consolidated Work Programme 2009 / 2010
(Projects and issues raised with the LINK)

ID Number	Project / Issue	Activities	Lead	Start	End	Status / Progress
P01	<p>Hygiene, Disinfection and Patient Experience in Hospitals (Project 1):</p> <ul style="list-style-type: none"> To determine the policy on the use of hand hygiene for both East and West Kent To establish a compliance standard To make unobtrusive observations of the use of selected dispensers To make observations on a number of occasions throughout an agreed period. 	<p><u>Determine policy of usage</u></p> <ol style="list-style-type: none"> Consult Infection Control departments in East and West Kent trusts Make an appointment with the head of Infection Control Compliance standard; decide what constitutes effective hand cleaning. Suggest both hands - not one handed <p><u>Unobtrusive observations</u></p> <ol style="list-style-type: none"> Plan to make observations where the potential users of hand hygiene are not aware of the recorders Make observations on occasions Main hospitals in both East and West Kent ie Maidstone and Tunbridge Wells, Pembury, William Harvey, Kent & Canterbury and Queen Elizabeth Queen Mother Hospitals Decide how many hand hygiene points to be monitored Decide how often monitoring is done Decide the time period for monitoring Monitoring done by two observers Monitoring time 30 minutes at each point - at least five points at each hospital per visit - chosen points to include one nearest to hospital entrance. 	CB	01/09/09	31/12/09	<ol style="list-style-type: none"> Project Group established Hand Hygiene policies obtained from: <ol style="list-style-type: none"> East Kent NHS University Hospitals Trust Maidstone and Tunbridge Wells NHS Trust Dartford and Gravesham NHS Trust South East Coast Ambulance NHS Trust FOI Act requests issued to: <ol style="list-style-type: none"> Medway NHS Foundation Trust Kent and Medway NHS and Social Care Partnership Trust Quotes obtained for testing kits Recruitment of LINK visitors commenced.

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P02	<p>Hygiene, Disinfection and Patient Experience in Hospitals (Project 2):</p> <ul style="list-style-type: none"> To discuss with Infection Control departments their policies on the issues listed To investigate frequency of deep cleaning, concentration of available chlorine in the made-up buckets, methods of making up the chlorine disinfectant and the frequency of renewal, monitoring surfaces for MRSA, monitoring the use of micro fibre cloths and mop heads and efficiency of micro fibre cloths. 	<p><u>Determine Policy</u></p> <ol style="list-style-type: none"> Meet with head of Infection Control and determine the Trust's policy When and where is chlorine used? How frequently are Wards deep cleaned? What is the procedure for making up chlorine and how is this monitored? What is the policy regarding the use of micro-fibre clothes and mops? Who is responsible for maintaining standards? Are any cleaning processes microbiologically monitored? <p><u>Measurement of Available chlorine in disinfectant buckets</u></p> <ol style="list-style-type: none"> Samples taken from made up buckets; sampler to wear disposable gloves and 25ml sample taken into a McCartney tube. Label data to include location, time since make-up, appearance Samples to be sent to analytical lab as soon as possible together with a positive control sample <p><u>Measurement of MRSA or SA</u></p> <ol style="list-style-type: none"> In order to determine the efficacy of disinfection tests of efficacy should be done. These can be done in various ways Investigate ways of doing such tests and find which laboratories would process the samples. 	CB	01/09/09	31/12/09	<ol style="list-style-type: none"> Two training sessions for LINK visitors held Visits commenced
P03	<p>Hygiene, Disinfection and Patient Experience in Hospitals (Project 3):</p> <ul style="list-style-type: none"> To carry out a survey of all LINK participants on their experiences of hospital cleanliness in Kent hospitals. 	<ol style="list-style-type: none"> Contact all LINK participants and find out which have been in hospital recently and would be willing to fill in a questionnaire on their experience with hospital hygiene. Points to be covered in the questionnaire are in the work plan In the absence of a good response from LINKs participant's alternative ways should be found in order to get 	CB	01/09/09	31/12/09	<ol style="list-style-type: none"> Questionnaire drafted, to be piloted to individuals who are visiting the hospital

		the views of at least 100 patients.				
P04	Transport to Hospital Project: <ul style="list-style-type: none"> To find out what systems trusts have in place to minimise transport problems for their patients, particularly to the use of innovative approaches to addressing these problems, including working with partner organisations To see what level of consistency exists between trusts in the provision they make for patient transport, car parking, patients who are stranded at A&E, links with community transport schemes and the quality of travel information given out to patients To initiate a debate across Kent and Medway with a view to identifying best practice and promoting improved access to health services across the community of Kent. 		LM	01/09/09	31/12/09	Information is currently being gathered on transport and travel plans held by all NHS Trusts across Kent and Medway. Approximately 18 participants have expressed an interest in being involved with this project although at this stage they are just being kept informed of progress.
P05	Training and Supervision of Care Assistants Project: <ul style="list-style-type: none"> To find out what contracting and commissioning practices exist in Kent in relation to the provision of social care in people's homes To compare those 		EO	01/09/09	31/12/09	

	practices with best practice in this field.					
P06	<p>Stroke Services in Kent Project:</p> <ul style="list-style-type: none"> To find out what is being done in Kent and Medway to address shortfalls in stroke service provision To raise awareness within the LINK of current initiatives underway to improve stroke services To identify any barrier there may be towards achieving those aims 		EO	01/09/09	31/12/09	1. Initial research carried out, contact made with relevant people in the trusts, initial meetings held
P07	<p>NHS Trust in Kent and Medway Project:</p> <ul style="list-style-type: none"> To monitor acute trusts, specifically East Kent University Foundation Trust, to ensure patients are not compromised as a result of Foundation Trust status being awarded To review the operation of foundation trusts in Kent to ensure staff and patient complaints and views are taken into account – following the report into incidents in Mid Staffordshire. 		CB	01/09/09	31/12/09	
P08.1	<p>Getting the LINK involved in the commissioning arrangements for health and social care (Project 8.1):</p> <ul style="list-style-type: none"> To work with a range of user groups in the NHS Eastern and Coastal 		LM	20/07/09	29/08/09	1. Completed, report placed on LINK website.

	<p>Kent area with a view to influencing the NHS 'Vision' for commissioning community services to 2014</p> <ul style="list-style-type: none"> • To use focus group methods • To host, in conjunction with NHS Eastern and Coastal Kent, a wash-up event with the purpose of defining the 'Vision'. 					
P08.2	<p>Getting the LINK involved in the commissioning arrangements for health and social care (Project 8.2):</p> <ul style="list-style-type: none"> • To work with KCC's Adult Social Services in developing their Older Person's Strategy. In particular, to do so in relation to contracts the KCC has with Age Concerns in West Kent. In this context to examine the extent to which people are encouraged to be independent, are treated with dignity and respect, feel safe and secure and are encouraged to stay healthy • To use focus group methods to obtain the views of service users • To adopt mystery shopper technique to assess existing services provided at Age Concern Day Centres. 		EO	27/07/09	30/09/09	<ol style="list-style-type: none"> 1. Stage I complete – eight focus groups held and report placed on LINK website. 2. Stage 2 commenced – mystery shoppers given brief and visits to take place as soon as possible, having been hampered by bad weather. 3. Stage 3 – questionnaire drafted and piloted. Will be re-worked and distributed to a wider distribution shortly.

P08.3	<p>Getting the LINK involved in the commissioning arrangements for health and social care (Project 8.3):</p> <p>This Kent LINK project will be commissioned by NHS Eastern and Coastal Kent:</p> <ul style="list-style-type: none"> To seek to establish a competition to celebrate the contributions that local voluntary and community groups are making to healthcare. 	<p>1. This would involve:</p> <ol style="list-style-type: none"> Inviting nominations from LINK participant organisations Setting a deadline for receipt of nominations Establishing a Panel and criteria for making the award. 	LM	01/08/09	30/09/09	<p>1. Project complete, panel decided on winners and prizes awarded at Eastern and Coastal Kent Primary Care Trust Annual Meeting.</p>
P09	<p>Annual Check by Care Quality Commission for Health and Social Care Project:</p> <ul style="list-style-type: none"> To work with the community and voluntary sector on arrangements for the next Care Quality Commission's Annual Health Check to enable the LINK to comment. 		ALL LDW s	01/10/09	31/03/10	<p>12/10/09 Proposals invited from local universities. 28/10/09 GH met Prof West, Greenwich University 17/11/09 GH met Prof Ruston, Christchurch University 20/11/09 Meeting with representatives of the Care Quality Commission</p>

ID001	Shortcoming in pain control services in Kent	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Panel queried whether to pursue or not and needed further information 3. Letter to the two PCTs asking about: 4. Availability of pain services across the county 5. 800 Members' experience 6. Public knowledge / awareness of where to get help for pain control 7. Patient returning from hospital re service available 8. Royal College of Anaesthetists - ask re ratio of patients to pain consultants across the county 9. Royal College of Anaesthetists - ask what options should be given to patients in pain (alternative to surgery) 10. PCTs – what options are given in Kent? 	GH	27/07/09		<p>09/09/09 To Priorities Panel 28/09/09: <u>Letters sent to:</u></p> <ol style="list-style-type: none"> i. Ann Sutton, Chief Executive, NHS Eastern and Coastal Kent ii. Steve Phoenix, Chief Executive, NHS West Kent iii. Marion Dinwoodie, Chief Executive, Chief Executive, NHS Medway iv. Chief Executive The Royal College of Anaesthetists v. Copies to Dr Meradin Peachey, Director of Public Health. <p>27/10/09: Response from Steve Phoenix 29/10/09: Response from Ann Sutton and Royal College of Anaesthetists 08/01/10 Contact made with referrer to advise of responses from trusts and to invite feedback</p>
ID002	Proposal to set up a primary angioplasty service in West Kent	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Panel had general support / interest in 3. Action agreed write to: <ol style="list-style-type: none"> i. Chris Thom; specialist view (bit more thinking). Obtain more info – stroke (letter to Judy Hunt) ii. Phyllis / Glynis Holt; cardiac. Applies to 'poor service' in West Kent, not East Kent (quality good) iii. Refers to HOSC; disparity of 	GH	05/08/09		<p>09/09/09 To Priorities Panel 29/9/09: <u>Emailed:</u></p> <ol style="list-style-type: none"> i. Emma Cain, Public Liaison Officer, NHS West Kent Primary Care Trust <p>29/09/09 Response from Emma</p>

		services across East and West Kent.				Cain 04/01/10 Email sent to Dr Thom 05/01/10 Response from Corrine Stewart regarding proposal
ID003	Withdrawal of physiotherapy and occupational therapy services	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Panel agreed action: <ol style="list-style-type: none"> i. Find out what the situation is for other users, eg involving Mencap, People with Down's Syndrome - ask participants and groups ii. What services are available generally in community - PCT, area by area iii. What are the patients entitled to and what are they receiving? iv. What about particular course of treatment for people with long-term conditions? v. Can each PCT commission from private sector and probably take with ID 004? 	GH	02/08/09		09/09/09 To Priorities Panel 28/09/09 <u>Letters sent to:</u> <ol style="list-style-type: none"> i. Ann Sutton, Chief Executive, NHS Eastern and Coastal Kent ii. Steve Phoenix, Chief Executive, NHS West Kent iii. Marion Dinwoodie, Chief Executive, Chief Executive, NHS Medway. 28/10/09 Response from Ann Sutton 30/10/09 Response from Steve Phoenix 05/01/09 Letter sent to Ann Sutton 06/01/10 Advice to referrer
ID004	Shortage of physiotherapy services in Swale	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. See item 003 above for action 	GH	27/07/09		As above
ID005	Recognition for Swale (West) users	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Draw the issue to the attention of PCT re concerns of group 3. Ask where Swale group sits within their user network 4. Find out what PCT doing to communicate with the residents of Swale. 5. Advise referrer can, of course, liaise with their local elected representatives and also to the HOSC. 	GH	30/07/09		09/09/09 To Priorities Panel 06/01/10 Advice to referrer.
ID006	Impact of green paper	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 	GH	11/08/09		09/09/09

	'Sharing the Future of Care Together' for those on benefits	<p>2. Action:</p> <ul style="list-style-type: none"> i. Keep a watching brief or LINK can respond to consultation; ii. Priority Panel can respond to consultation; inform participants can get involved and can respond iii. Refer to LINK Governors re LINK responding to the consultation and how and may incur resources and cite some of the actions already being taken iv. Advise there is a consultation and can feed in views into that but also see 1 above v. Ask Priorities Panel members re personal experience. 				<p>To Priorities Panel 17/09/09 Referred to Governors' Group 10/11/09 Debate held at LINK Quarterly Event in Folkestone 12/11/09 Governors' Group approve LINK response for despatch to Department of Health 13/11/09 LINK response despatched to Department of Health and placed on LINK website Completed. NFA.</p>
ID007	Population growth and impact on services in Edenbridge	<ul style="list-style-type: none"> 1. Refer to Priorities Panel 2. Write to Practice to ask what their plans are in the area. 3. Write to the PCT as a general case re ratio of GPs to population. 	GH	24/07/09		<p>09/09/09 To Priorities Panel 05/10/09 <u>Letters sent to:</u> i. Dr T R L Bayley and Partners ii. Action outstanding re letter to PCT; awaiting response from GPs. 21/10/09 GH discussion with Dr Bayley. Report of discussion to next P/P meeting Completed. NFA.</p>
ID008	X-ray services in West Kent	<ul style="list-style-type: none"> 1. Refer to Priorities Panel 2. Complaint - advise referrer of correct procedure. 	GH	24/07/09		<p>09/09/09 To Priorities Panel 21/09/09 i. Letter to referrer. Completed. NFA</p>
ID009	Financial abuse of self funders and other vulnerable adults	<ul style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ul style="list-style-type: none"> i. LINK make referral to Kent and Medway Adult Protection - contact the team (part of social services) 	GH	04/09/09		<p>09/09/09 To Priorities Panel 17/09/09 i. Referral to Governors' Group</p>

		<ul style="list-style-type: none"> because it is financial abuse and this is the rightful place for an investigation to take place ii. Help the referrer make the referral iii. Ask the LINK Governors if such an issue is within the LINK remit? 				<p>17/12/09</p> <ul style="list-style-type: none"> i. Governors' Group to write letter to KCC to draw attention to issue
ID010	Planning mental health services in West Kent	<ul style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ul style="list-style-type: none"> i. Ask Kent and Medway Partnership Trust why they have not responded to the referrer. 	GH	04/09/09		<p>09/09/09 To Priorities Panel 19/10/09</p> <p><u>Letters sent to:</u></p> <ul style="list-style-type: none"> i. Letter to Erville Millar, Chief Executive, Kent and Medway NHS and Social Care Partnership Trust. ii. Copy to Loretta Kavanagh, Director of Commissioning, Mental Health <p>04/11/09</p> <ul style="list-style-type: none"> i. Response received from Erville Millar <p>09/12/09</p> <ul style="list-style-type: none"> i. Email to Elayne Oxley to invite comments from referrer
ID011	Adverse health impacts on black and minority ethnic groups (BME)	<ul style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ul style="list-style-type: none"> i. Write to PCTs – what are they doing about it? ii. Service of check ups for people so NHS is doing it. 	GH	27/07/09		<p>09/09/09 To Priorities Panel 05/10/09</p> <p><u>Letters sent to:</u></p> <ul style="list-style-type: none"> i. Dr Meradin Peachey, Director of Public Health. <p>09/11/09</p> <p>Response received from Ann Sutton on behalf of Dr Meradin Peachey</p>
ID012	Improving audiology services in West Kent	<ul style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ul style="list-style-type: none"> i. Watching brief ii. Letter to Trust asking: iii. How many patients on the waiting list? iv. How long is the wait, ie GP 	GH	04/09/09		<p>09/09/09 To Priorities Panel 19/10/09</p> <p><u>Letters sent to:</u></p> <ul style="list-style-type: none"> i. A Horne, Chief Executive, Medway NHS Foundation

		<p>referral to finished treatment?</p> <p>v. Follow up with the patient.</p>				<p>Trust. 27/10/09 Response from A Horne 17/12/09 Contact made with referrer to set up meeting with A Horne</p>
ID013	Assisted help with service provision for young carers	<p>1. Refer to Priorities Panel</p> <p>2. Action:</p> <p>i. Sympathetic support letter</p> <p>ii. Letter to PCT raising the issue</p> <p>iii. Money is not ring-fenced, but is base lined and each PCT decides how to spend this. East Kent has decided but West Kent not to spend on carers</p> <p>iv. There are alternatives: European funding, lottery funding</p> <p>v. What is KCC's strategy re carers?</p> <p>vi. Ask the LINK participants if can add to it and defer to the next meeting.</p>	GH	04/09/09		<p>09/09/09 To Priorities Panel 18/11/09 Letter to Steve Phoenix, Chief Executive, NHS West Kent 24/11/09 Letter received from Steve Phoenix 15/12/09 Further response received from Steve Phoenix 13/01/10 Letter to Oliver Mills, Director of KASS</p>
ID014	Diabetic services, Maidstone	<p>1. Refer to Priorities Panel</p> <p>2. Action:</p> <p>i. Write to Chief exec of PCT expressing concern about the situation, copy to CQC; in letter state that the LINK is aware of the considerable issues and pressures in the area (Maidstone Hospital and C. diff) and ask if there are areas that are being affected because of this, ask why funding has been reduced and has the funding been reduced in other areas</p> <p><u>Urgently visit:</u></p> <p>ii. diabetic nurses clinic; ask endocrine specialist (PA) who best to visit and when to see service across the whole spectrum (all ages)</p> <p>iii. Undertake a LINK project / visit:</p> <p>iv. speak to service user(s) / carers</p>	GH	15/05/09		<p>22/09/09 To Priorities Panel 19/10/09 - Referral to Governors' Group</p> <p>i. Discussed with Chair of Governors re LINK project</p> <p>ii. Agreed to meet on 22/10/09 and prepare recommendation to Governors as an urgent referral prior to their next meeting which isn't until 5 / 6 November</p> <p>iii. Agreed letter be sent to PCT and to Dr Hobday, Chair, Local branch of BMA. 19/10/09</p> <p>iv. Letter to Steve Phoenix, Chief</p>

		<p>experience of service generally</p> <p><u>Ask professionals:</u></p> <p>v. Is the service adequate?</p> <p>vi. Has service changed in the last year and, if so, in what way?</p> <p>vii. Have they been promised changes that have now been withdrawn?</p> <p>viii. Ask GP practices / consortium of GPs in the area (Maidstone) or Local Chair of BMA (Paul Hobday at Sutton Valance), what their experiences are.</p>				<p>Executive, NHS West Kent</p> <p>19/10/09</p> <p>v. Letter to Dr Paul Hobday, Chair, Maidstone Branch, BMA</p>
ID015	Privacy and dignity, Gravesend Hospital	<p>Action:</p> <p>i. Visit to check facts</p> <p>ii. Ask referrer to go along on visit and to talk to staff</p>	GH			<p>Awaiting availability of LINK "authorised" visitor.</p>
ID016	Restorative Justice in Prisons	<p>1. Refer to Priorities Panel</p> <p>2. Refer to Governors Group to decide if activity is within LINK remit</p>	CB			<p>26/11/09</p> <p>To Priorities Panel</p> <p>17/12/09</p> <p>Governors' Group reached decision not to proceed</p>
ID017	Lack of investment in community hospitals in Kent	<p>1. Refer to Priorities Panel</p> <p>2. Action:</p> <p>i) Write to PCTs to find out what actions have been taken to apply for central funding under the scheme to develop more community hospitals</p> <p>ii) Copy in Strategic Health Authority</p>				<p>26/11/09</p> <p>To Priorities Panel</p>
ID018	Hearing aid replacement – difference in East Kent and West Kent	<p>1. Refer to Priorities Panel</p> <p>2. Action:</p> <p>i) Letter to West Kent PCT suggesting need to simplify referral route as in East Kent</p> <p>ii) Copy to Ear Nose and Throat Specialists</p>				<p>26/11/09</p> <p>To Priorities Panel</p>
ID019	Unfair treatment of Kent Health Service Staff	<p>1. Refer to Priorities Panel</p> <p>2. Action: not within brief, no action to be taken</p>				<p>26/11/09</p> <p>To Priorities Panel</p>
ID020	Failure of NHS West Kent to allocate the funding it has been given to provide carers with short breaks	<p>1. Refer to Priorities Panel</p> <p>2. Await response from NHS West Kent regarding original request (ID013)</p>	EO			<p>26/11/09</p> <p>To Priorities Panel</p>

ID021	Eligibility for Continuing Care and Concerns over Neglect	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action <ol style="list-style-type: none"> i) Advice to referrer regarding relevant complaints procedures, Independent Complaints Advocacy Service, Care Quality Commission and Protection of Vulnerable Adult procedures. ii) Find out current eligibility criteria 	EO			26/11/09 To Priorities Panel
ID022	Access Audit of Trust premises to ensure Dartford and Gravesham NHS Trust continues to meet the DDA	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ol style="list-style-type: none"> i) Place item in next Bulletin to come forward to assist with this 	EO			26/11/09 To Priorities Panel Awaiting availability of visitors
ID023	Ethnic Groups not registering with GPs	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Defer to next meeting 				26/11/09 To Priorities Panel
ID024	Insufficient quality of Retinal Screening Service	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Defer to next meeting 				26/11/09 To Priorities Panel
ID025	West Kent Enhanced Dementia Crisis (or Emergency Support Service)	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ol style="list-style-type: none"> i) Use Bulletin to promote opportunity for LINK participants 				26/11/09 To Priorities Panel
ID026	Inadequate mental health provision to support rough sleepers and homeless people	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Defer to next meeting 	EO			26/11/09 To Priorities Panel
ID027	Restorative Justice in Prisons	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. See ID 016 for action 	CB			As ID 016
ID028	Estuary Surgery, Whitstable	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Action: <ol style="list-style-type: none"> i) Contact Practice direct regarding issues 				26/11/09 To Priorities Panel 17/12/09 Visit to Practice to discuss issues
ID029	Genito Urinary Medicine	<ol style="list-style-type: none"> 1. Refer to Priorities Panel 2. Visit services to check facts 	CB			26/11/09 To Priorities Panel Complete - NFA

Key:

(ID number) P a project identified and agreed at the LINK's Annual Meeting held on 28 May 2009

(ID number) ID an issue received by the LINK and referred through