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TOP NEWS

Modern matrons raise standards

Matrons in charge of accident and emergency departments will share a new £2 million fund to raise standards of cleanliness, hygiene and care.

Existing and new matrons will receive a minimum of £10,000 as part of the Government's drive to improve the NHS patient experience.

A&E matrons will be able to spend their budget as they want including on extra cleaning; improving children's play areas and redesigning reception areas to make them more patient-friendly.

This was announced at a national seminar for modern matrons earlier this month – the same day a report *Modern Matrons – Improving The Patient Experience* was published.

The report describes the key responsibilities of a modern matron and how their roles will develop. It also includes examples of good practice. Modern matrons started to be re-introduced two years ago with a new set of responsibilities far removed from the stereotypical perception of the 'Hattie Jacques' character of 30 years ago.

Matrons have been praised for helping to improve the essence of care, ensuring that patients have privacy and dignity, quality food and nutrition, and benefit from high standards of cleanliness on wards.

They have helped cut the number of pressure ulcers and reduced formal complaints about standards of care.

Introducing the new modern matrons report, Chief nursing officer

Sarah Mullally said: "Modern matrons were introduced to provide strong leadership on wards and be highly visible and accessible to patients.

They are there to lead by example, to drive up standards of clinical care and empower nurses to take on a greater range of clinical tasks to help improve patient care. Crucially, they were given the power to get the basics right for patients – clean wards, good food, quality care.

"It is clear that the range of functions matrons perform, and the ways they can improve the patient experience, is even greater than originally foreseen. The report shows just some of the ways modern matrons are modernising NHS services. This report's aim is to act as a catalyst for improving and spreading best practice among matrons as we develop and strengthen the role in years to come."

More than 50 matrons from across the country and most specialist fields attended the event and provided excellent feedback about their successes, the obstacles they had encountered and overcome and their aspirations for the future.

Modern Matrons – Improving The Patient Experience is at www.doh.gov.uk/modernmatrons/improvingthepatientexperience.htm

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This month chief nursing officer Sarah Mullally talks about the relationship between strong leadership and improving the patient experience.

There is a huge debate about the role of nurse leaders in the NHS. It demonstrates that nurses are extremely passionate about their work and their roles in the NHS.

No nurse should be under any doubts that their contribution is not valued. Indeed, it is critical that nurses, at all levels, show leadership to transform patient care.

The vast majority of contact the patient has with the NHS is through the nurse so nurses need to ensure they enable patients to voice their needs and expectations.

To lead the modernisation of the NHS, each and every nurse needs to work with patients to change the way services are delivered.

The outcome we are looking for is quite simple. Unless the NHS improves the quality of the patient experience, we could end up hitting every target – but missing the point.

My role as both the CNO and as the Department of Health's director of patient experience is a clear recognition that nursing and the quality of patient care are intrinsically linked. It places all nurses in a significant and influential position to drive forward change, working in close partnership with other colleagues.

I was delighted that the NHS Modernisation Board's annual report highlighted the crucial role nurses play in delivering improvements across the NHS. And this has been complemented by two further reports – one reviewing the development of older people's services and the other appraising the role of modern matrons. (See page 1)

My priority is to ensure that nurses can build on these successes – because it is these successes that are leading to better patient experiences.

It is important to understand that leadership is required at every level. It is not just about titles and status but about the way nurses work with others and engage with colleagues and patients. Being able to influence and inform change is what matters and having a voice at all levels is vital.

I hope to support nurses to meet both their personal and organisational objectives and that's why it is important to take stock of the opportunities that already exist for nurses.

The NHS Leadership Centre has already made it possible for more than 40,000 nurses to develop their roles over the past two years. There are now well over 2,000 modern matrons and more than 800 consultant nurses. Nurses are making a difference and it is my goal to ensure that nurses are leading change at every level, on every ward, in every practice and throughout the community.

Modern matrons – a case study

Continued from page 1

Modern matrons Shirlene Jones and Julie Day are convinced their roles were crucial in restoring confidence in the accident and emergency department at Whipps Cross Hospital, London.

Waiting time has been cut by almost 60 per cent and the trust has been very successful in complying with the four-hour targets.

"Today we are nowhere near where we were a year ago. We have changed the culture within the department and other people's perception of us," said Julie, who heads the major injuries section.

"The matron's role has had a significant impact. It is unique in that it is both clinical and strategic and bridges that gap between nurses and management. Now everybody is moving in the right direction together and that has had a major impact on the department. Because the role is both clinical and corporate we are in touch with the people who are doing the job and raise their profile by being their advocates."

The team was strengthened and staff have refocused the way they work on patients. Other departments, where knock-on effects of A&E can be felt, have been involved to ensure continuity throughout the hospital.

Director of nursing Eileen Sills added: "Our achievements have happened because all 19 modern matrons across the trust have worked together. Our priorities are not just around targets but around improving the real fundamentals of care, so the trust has gone right back to basics and the modern matrons are driving that agenda."

HAVE YOUR SAY

The CNO Bulletin is written for you and we welcome your views about this newsletter.

The CNO Bulletin is tailor-made for nurses, midwives and health visitors across the NHS. It aims to cover the main topics of interest every month. Let us know about the information that you want to see included. We also want to hear your views on the subjects covered in the bulletin.

Please send emails to us at:

CNO-Bulletin@doh.gsi.gov.uk or write to The CNO Bulletin at Richmond House, 79 Whitehall, London, SW1A 2NL. We'll use your feedback to develop and shape future bulletins. It will also contribute to understanding better the views of nurses, midwives and health visitors on current issues. Please be assured that all feedback is confidential and that any opinions quoted will be featured anonymously.

Essence of care

A new *Essence of Care* benchmark focusing on communications between nurses, patients and their carers has been launched this month.

This new communication benchmark has been added to the existing eight sets and is closely related to record-keeping and privacy and dignity benchmarks.

Essence of Care has proved to be a popular and practical toolkit for nurses since it was introduced in February 2001. It highlights core and essential aspects of care that matter so much to patients and their carers.

The toolkit has been instrumental in raising the quality of patient care and the patient experience in both primary and secondary care. This has been due to the commitment from all nurses and the active participation of patients, service users and their carers and representatives. The benchmarks

have been widely tested and endorsed and there is evidence nationally that they have become an integral part of the clinical governance review process in demonstrating best practice within the delivery of patient care.

New documentation for *Essence of Care* will also be launched this month, which takes account of the feedback the Department of Health has had from those using the toolkit.

The format of the original benchmarks has now been simplified but benchmarks of the best practice and poor practice remain the same.

The new documentation and benchmark was launched by chief nursing officer Sarah Mullally on 11

April at the NHS Leadership Conference 2003 *Leadership at all levels in the NHS – Revolution, Evolution, Resolution*. Following the conference the new documentation will be distributed to all organisations

Implementation of *Essence of Care* became the responsibility of the NHS Modernisation Agency last year, in partnership with the agency's leadership centre and the clinical governance support team. John Badham was appointed as the national co-ordinator.

Further information is available at www.doh.gov.uk/essenceofcare

Contact John Badham on 0161 237 2052 or e-mail johnb@nursingleadership.co.uk

Child-friendly hospitals standard launched

The first stage of the new *Getting the right start: National Service Framework (NSF) for Children* has been launched to raise standards of care for children and young people when they are in hospital.

This national standard was promised in advance of the full NSF following the inquiry into children's heart surgery at Bristol Royal Infirmary in 2001.

The new standards mean NHS hospitals should consider introducing dedicated children's units in accident and emergency departments; specialist training for staff dealing with children; designated play areas for young children; and private areas for adolescents.

The hospital standard has three distinct sections – child-centred hospital services; the quality and safety of care provided; and the quality of the setting and the environment.

Child-centred services are those that consider the 'whole child' and not simply the illness being treated. They should treat children as children and young people as young people.

The quality and safety of care means having clinical governance systems in place that give an explicit focus to the different needs of children and young people. And it means staff treating and caring for children have the right education, training, knowledge and skills to

Neonatal intensive care boost

A £70 million investment in neonatal intensive care facilities has also been announced, following a review of these services. The review has been published and is subject to a three-month consultation period.

The review recommends a more structured, collaborative approach to caring for newborn babies by hospitals working closely together in managed networks. It also suggests definitions of categories of care and the designation of units that would provide the various levels of care. The review also makes proposals about staffing skills, information and support to parents. The review can be found at www.doh.gov.uk/nsf/neonatal.htm
Contact: john.rutherford@doh.gsi.gov.uk or 020 7972 4139

provide high quality care.

The third part of the standard involves the environment – making sure that the child or young person is treated in the most suitable location and one that is safe, healthy and 'child-friendly'.

New standards for other health and social care services for children are still being developed but the emerging aims and vision have also been published alongside the standards for hospital services.

National clinical director for children Professor Al Aynsley-Green said: "The children's NSF provides for the first time an outstanding opportunity to improve the lives and

health of our most precious resource.

"The NSF should not be seen to be the 'end' in itself – it is a means to an end. It will set out a 10-year direction of travel and acknowledge that there are difficulties in achieving rapid change, not least because of the shortage of skilled staff in disciplines supporting children, young people, parents, families and carers. Moreover, effective change will only happen through the active engagement of all staff at the local level."

The standard for hospital services and the emerging findings are available at www.doh.gov.uk/nsf/children/gettingtherightstart.htm

Older people's services

Nurses have found the *National Service Framework for Older People* an invaluable tool for driving forward change to patient care.

The NSF was launched two years ago and set out, for the first time, national standards for better, fairer and more integrated health and social care for older people.

A report has now been published looking at the progress that has been made raising standards.

Nurses have been highly influential in many key areas of progress, including the:

- growth of intermediate care (an extra 3,300 beds since 1999-2000)
- reduction of delayed discharges by four per cent
- rise in intensive home care to an extra 5,000 people
- creation of specialist stroke units in three out of four hospitals.

In many services, it is nurses who are spearheading change, stamping out age discrimination, ensuring person-centred care and forging effective partnerships with other colleagues in health and social care.

Modern matrons and nurse consultants have been supported by the NHS Leadership Centre older people programme which

is helping nurse leaders to become vocal and visible in delivering change for older people's care.

Lorraine Coyle, a participant in the nursing leadership programme, said: "It has given me greater insight into how to utilise and further enhance my leadership skills in line with the developments occurring within the national agenda. The added opportunity of meeting with peers enables everyone to learn from each other's current practices and share future projects."

And Jane Slack, a nurse consultant for the care of older people at United Bristol Healthcare Trust, said: "The NSF is extremely useful, as a catalyst and a focus. It is a key tool for me in my role as a nurse consultant in changing practice."

The full progress report is available at www.doh.gov.uk/nsf/olderpeople/publications.htm

A special bulletin on delivering the older people's NSF was published in November last year. It is available at www.doh.gov.uk/cno/bulletinspecialnov02.htm

Extra investment paying dividends

Better pay and more staff are helping to transform the quality of care provided by the NHS.

Delivering the NHS Plan – Expenditure Report says a cash increase of 10 per cent boosted total NHS spending during 2002-2003 to nearly £55 billion.

The money has been used to improve access to and quality of services, invest in the future and ensure pay levels are sufficient to attract and retain staff.

More than £2.2bn of the increase has been spent on recruiting new staff, increasing prescribing and buying more goods and services. Hospital inpatient activity is likely to rise by 4.5 per cent and outpatient activity by 2.5 per cent, accompanied by significant reductions in waiting times.

Investment in training, capital and research within the NHS is expected to rise by almost £1bn this year.

Around £1.6bn has been invested in pay and this is having a direct impact on staff numbers, which are expected to rise significantly, especially among nurses.

The rise in the prescribing of drugs to tackle heart disease and conditions such as diabetes is saving more lives and preventing premature deaths. For instance, the number of statins prescribed has risen by a third and is estimated to be saving 6,000 lives a year.

Delivering the NHS Plan – Expenditure Report is available at www.doh.gov.uk/nhsplanexpenditurereport/index.htm

Patient care advisers

Feedback from more than 2000 patients who have benefited from the patient choice pilot which is enabling long waiters for heart operations to choose to travel elsewhere for faster treatment has highlighted the vital role played by senior cardiac nurses acting as patient care advisers (PCAs).

Patients, family and carers have praised the way in which PCAs have provided support and advice to patients, ensuring continuity of care, constancy of information and

Nurses Day – 12 May

The website www.learnaboutnursing.org/ has been updated with learning resources and lesson plans for teachers to use with children aged between seven and 11-years-old and a new *Verse for a Nurse* competition. School teachers have been offered the opportunity to request a nurse to visit their school to help children gain a deeper understanding of modern nursing.

Schools can register their interest in having a nurse visit through the website. For further details contact Robert Tunmore on 020 7210 5079 or e-mail CNO-Bulletin@doh.gsi.gov.uk

Nurses Day is celebrated in different ways around the world. For 2003 The International Council of Nurses has developed resources on the theme *Nurses: Fighting AIDS Stigma, Caring for All*. The International Nurses Day Kit is available at www.icn.ch/index.html The RCN is publishing ideas for how to celebrate Nurses Day at www.rcn.org.uk

effective pre-operative support and rehabilitation. In many services PCAs have also played an important role in improving the way that lists are managed and in supporting surgical teams in the introduction of more patient centred services.

The London Patient Choice Project (LPCP) has been extended to cover three new clinical specialties – orthopaedics, ear nose and throat and general surgery.

Further information on PCAs and the patient choice initiative is available at www.doh.gov.uk/extendingchoice

Complaints reform

The new Commission for Healthcare Audit Improvement (CHAI) will become responsible for independent reviews of health service complaints.

The report NHS Complaints Reform – Making Things Right says there should be increasing support and information for complainants through local patient advice and liaison services and independent complaints advocacy services. It also stipulates there should be customer care training for NHS staff.

The reforms also aim to help the two per cent of NHS complainants who request an independent review of their cases – many of whom think the current system is not impartial.

The document is available at www.doh.gov.uk/complaints

Contact: dani.lee@doh.gsi.gov.uk

Staff protection

Good progress in protecting NHS staff from violence in the workplace has been made, although more work needs to be done.

The National Audit Office (NAO) reported that around 95,500 incidents of violence and aggression against staff had been recorded in 2001-2002 and only one-fifth of trusts had met the Department of Health's national improvement target of a 20 per cent reduction by April 2002.

The zero tolerance zone campaign has raised the awareness for staff to

report incidents but the NAO had identified the need for additional work in key areas.

The NHS needs to do more to establish partnerships with the local police, Crown Prosecution Service, social services and the media to ensure there is a consistent approach to dealing with violent individuals and incidents.

Effective staff training is also crucial for tackling violence and aggression.

Trusts are urged by the Department of Health to toughen action against people who threaten, intimidate or assault health care staff.

More than 50 individuals have been prosecuted by trusts over the last eight months following the issue of new guidance to the NHS in 2002.

A nationwide poster campaign for GP surgeries has been launched to support the zero tolerance campaign in primary care.

On 1 April the responsibility for tackling violence against NHS staff was taken over by the new Counter Fraud and Security Management Service.

More information at www.nhs.uk/zerotolerance or by contacting: Eileen.calline@doh.gsi.gov.uk

New delayed discharges system

The Community Care (Delayed Discharges etc) Act has been passed and will come into effect in October.

The act will introduce a system of reimbursement for delayed hospital discharges and removes local authorities' ability to charge for community equipment and intermediate care.

The new act places a duty on NHS trusts to notify local authorities as soon as it becomes apparent that a patient in acute care may require community care services on discharge.

This new duty will start in October but no charges for delays will be made until January.

The Government is committed to ending widespread delayed discharges by 2004 and investment and reform of older people's

services will help to achieve that.

More information is available at www.doh.gov.uk/jointunit/delayeddischarge/index.htm

Severe Acute Respiratory Syndrome (SARS)

The Department of Health and Public Health Laboratory Service (PHLS) issued information and advice on management and reporting of suspected cases, to all GPs, trusts and public health professionals through the rapid Public Health Link system on Thursday 13 March. The Department of Health also issued advice to the public and travellers to South East Asia about SARS.

The department and PHLS continue to monitor the situation.

Full information and advice has been kept up to date on the PHLS website www.phls.co.uk/topics_az/SARS/menu.htm

Programme for primary care and mental health

This programme provides practical support for frontline practitioners and includes initiatives on staff development, commissioning, implementing new workers and research and development.

Early priorities will include a series of events across the country on developing confidence and capability in commissioning mental health services and raising awareness about new primary care workers coming on stream in 2004. Further information at www.nimhe.org.uk/priorities/primarycare.asp

Education quality

Two contracts have been awarded to the Quality Assurance Agency for Higher Education.

The agency will now carry out a three-year review of about 150 NHS-funded education programmes for nurses, midwives and allied health professions.

The second contract involves developing an agreed 'overarching health professions framework' and up to six new profession-specific benchmark statements for healthcare education.

This work has been commissioned by the Department of Health, alongside the Nursing and Midwifery Council, the Health Professions Council and NHS workforce development confederations.

A paper summarising the quality assurance in health care education project and its conclusions to date is available at www.doh.gov.uk/hrbulletin/streamliningqa.htm

Contact: Vicky.jamieson@doh.gsi.gov.uk

Child protection

The first stage of a three-part audit of child protection arrangements in every NHS organisation is due to be completed by the Commission for Health Improvement (CHI) by the end of the month.

The audit is part of the response to the Victoria Climbié inquiry and subsequent recommendations and the first stage deals primarily with the responsibilities of trust boards.

It will collect information about the arrangements organisations have in place for the protection of

children and the results will give senior managers and board members a clear picture of their effectiveness.

The audit is compulsory for all NHS trusts and strategic health authorities and emphasis is placed on the key role played by board members in ensuring that the safety of children is a high priority.

CHI director of nursing Liz Fradd said: "Child protection is not an optional extra in the NHS – it is fundamental to the work of every trust.

"For that reason we have the clout to ensure child protection issues are embedded in the trusts' policies, procedures and working practice."

The audit tool is available at www.chi.nhs.uk

Department of Health restructuring

An 18-month programme of change is now underway to remodel the Department of Health in line with the Government's drive to decentralise power from

Whitehall to the frontline.

NHS chief executive Nigel Crisp said: "The aim is to have a Department which has a productive set of relationships across the whole health and social care system, with strong links with all its leaders and a shared goal of improving health and services for patients, service users and the public."

A briefing pack is available at www.doh.gov.uk/dh_change_programme/index.htm

Waiting times update

The total number of patients waiting for a hospital operation has fallen by almost 26,000.

At the end of February, there were only 6,700 patients waiting over 12 months for inpatient treatment, 2,800 fewer than last month and 19,100 fewer than the same period last year. The overall inpatient waiting list fell by 25,800 during February.

All NHS waiting time statistics are available at www.doh.gov.uk/waitingtimes

Diary

Events

National Breastfeeding Awareness Week – 11-17 May

National Breastfeeding Awareness Week, promoted by the National Network of Breastfeeding Co-ordinators, is part of the Department of Health's commitment to promote breastfeeding as the best form of nutrition for infants.

A range of resources has been produced to support the campaign including posters, a calendar, bookmarks, pens and key rings. More details can be found on the website www.doh.gov.uk/nbaw2003

Allergy UK seminars

Allergy UK is holding four seminars for midwives and health visitors throughout the country – 'Prevention and management of allergy and nutrition in infants and young children – a practical approach'. The first seminar will be held in London on the 16th May. Further information from Raegan Chambers on 0208 298 6926.

NADG meetings – 25 June, 17 September, 3 December

The newly-formed Nursing Advisory and Development Group (NADG) is meeting in Bristol on 25 June, Birmingham on 17 September and Manchester on 3 December. Each meeting will start with an open forum where local mental health nursing issues can be raised. Further information at www.nimhe.org.uk or contact carol.bavington@doh.gsi.gov.uk or the department's director of mental health nursing Rachel.munton@doh.gsi.gov.uk

The Digest

Did you see the news about...? If you missed an announcement or new development of interest to you, the chances are it could be listed in The Digest.

Help the Aged falls prevention update

The newly-launched *Avoiding Slips, Trips and Broken Hips* campaign is a national falls prevention programme which sees Help the Aged working with health, housing and social care professionals to develop essential resources for older people and their carers.

Further details at www.helptheaged.org.uk/adviceinfo/slips+trips.htm

Older people – abuse of vulnerable adults

The Community and District Nursing Association (CDNA) has launched a useful practice guide for nurses working in primary care.

Responding to Elder Abuse provides useful information about recognising signs of abuse and helpful information to support intervention. The Department of Health is forming an expert external reference group to support continued work following on from the publication of *No Secrets* in 2001. The CDNA guide can be accessed at www.cdna.tvu.ac.uk

PCT support for implementing the older people's NSF

Counsel and Care held a seminar for non-executive PCT champions for older people in March 2003. At this event they launched a quarterly newsletter to help PCTs be effective in their key role in implementing the NSF.

Further information and the newsletter at www.counselandcare.org.uk

Direct payments for all

Important new regulations requiring councils to offer direct payments to all adults in need of social services are being introduced this month.

Direct payments are a key step in the drive to promote independence and freedom of choice, enabling people to make day-to-day decisions about the care that best fulfils their needs.

Policy and practice guidance and further information on criteria for bids will be available at www.doh.gov.uk/directpayments – by the end of April.

Child and Adolescent Mental Health Services (CAMHS) nurse consultant forum

There are now 21 nurse consultants working in CAMHS. They have been closely involved in establishing a national vision for CAMHS nursing. For terms of reference or to contact the chair of the forum e-mail Tim.McDougall@cwprnt.nhs.uk

National Autism Plan for Children

New guidelines for professionals working with children with autism spectrum disorders have been produced by the royal colleges for paediatrics and child health and psychiatrists.

The National Autism Plan for Children (NAP-C) has been published through the National Autistic Society (NAS).

The guidelines include templates of good practice for families to help overcome differences in local service provision.

The plan can be found at www.autism.co.uk

To read the section of The National Service Framework for Children which covers autism visit www.doh.gov.uk/nsf/children/externalwgddisabled.htm

Maternal and child health

The National Institute for Clinical Excellence (NICE) has launched a new merged body to investigate deaths of mothers and children up to one year after delivery.

The Confidential Enquiry into Maternal and Child Health (CEMACH) was formed by combining the Confidential Enquiry into Maternal Deaths (CEMD) and Confidential Enquiry into Stillbirths and Deaths in Infancy (CESDI).

The new body will lead inquiries into the deaths of mothers, babies and children and aims to help improve maternal, neonatal and paediatric care.

Contact: CEMACH chief executive richard.congdon@nice.nhs.uk

Prison health

In September 2002, ministers announced the decision to transfer the budgetary responsibility for prison health from the Prison Service to the Department of Health with effect from 1 April 2003.

A work programme has been drawn up to ensure the transfer process is managed effectively and efficiently between now and April 2006, the deadline for devolving full commissioning responsibility to PCTs in England. A second briefing note summarising the key points identified in the work programme is now available at www.doh.gov.uk/prisonhealth

Contact Richard Bradshaw, director of nursing prison health, on 020 7972 4767 or Richard.Bradshaw@doh.gsi.gov.uk or Annie Norman, assistant director of nursing prison health, on 020 7972 3931 or Anne.Norman@doh.gsi.gov.uk

Statement from Royal College of Nursing – prison nurses

The special edition of the RCN Bulletin 26 March – 1 April 2003 says 'if you work in

the prison service you will be employed by the NHS from 1 April 2003....'. This is incorrect. Funding responsibility for prison health services will transfer from 1 April 2003 but not staff. Prison nurses may transfer to the NHS at a later stage but this would be carefully phased and would be subject to detailed consultation including with the RCN. The RCN apologises for this mistake and for any consternation the mistake has caused.

Further information on the transfer is at www.doh.gov.uk/prisonhealth

Making change happen – learning disability

A report highlighting improvements to services for people with learning disabilities has been published.

Making Change Happen is available at www.doh.gov.uk/learningdisabilities

Contact: debra.moore@doh.gsi.gov.uk

Seeking consent: working with people with learning disabilities

This booklet and the pamphlet *Consent: A guide for people with learning disabilities* are available from Department of Health Publications, PO Box 777, London SE1 6XH, Fax 01623 724524, e-mail doh@prolog.uk.com and the website at www.doh.gov.uk/consent/guidance.htm

The booklet is also available in Braille or in large print, on request and the website also includes details of guidance and publications on consent for different groups including children and young people, relatives and parents.

Obesity management

The Health Development Agency (HDA) has been approached to develop guidance on the identification, prevention and management of obesity, as well as the prevention of accidental injury outside the home.

HDA will shortly publish an evidence briefing on preventing accidental injuries in children and older people, which will also feed into the development of guidance.

Information on existing guidance is available at www.HDA.nhs.uk

Copying letters to patients

Information and choice are integral components of the drive to improve patients' experience.

Accountability to individual patients needs to be strengthened through delivery of the commitment in *The NHS Plan* (paragraph 10.3) that letters between clinicians about patients will be copied to the individual concerned as of right. You

can access the copying letters webpage on www.doh.gov.uk/patientletters/issues.htm

Good practice guidelines will be posted on the website later.

Return to practice evaluation study

A national study was carried out by recruitment and retention manager Lorna Goree at Trent Workforce Development Confederation, with the support of the Department of Health, to investigate how many people, completing return to practice programmes, return to work and are retained in the NHS. It aimed to explore what the issues have been for returners rejoining the workforce.

The study included nurses, midwives, allied healthcare professionals and health care scientists and technicians.

NHS Careers has information on return to practice at www.trentconfed.nhs.uk or email Lorna.Goree@trentconfed.nhs.uk

Health Protection Agency

The national Health Protection Agency (HPA) is now formally established to research and organise planning for biological, chemical and health emergencies.

It will combine public health functions that were previously the responsibility of bodies including the Public Health Laboratory Service, Microbiological Research Authority and the National Focus for Chemical Incidents.

Further information at www.doh.gov.uk/cmo/hpa/index.htm

Modernising Health Visiting and School Nursing Practice

This publication gives an account of the making public health approach a reality (PHAAR) programme in Central Derby PCT. The report summarises and discusses the main issues arising from a programme designed to facilitate change in the professional behaviour and service delivery of health visitors and school nurses in an inner city primary care trust. Copies can be obtained from Sharon Martin, Central Derby PCT, Derwent Vourt, Stuart Street, Derby DE1 2 FZ. Or e-mail sharon.martin@centralderby-pct.nhs.uk The report is also available in PDF format from www.southernderbyshire.nhs.uk

Allergy UK

Allergy UK now offers fact sheets on *What is Allergy and Allergy Testing, Asthma, Eczema and Rhinitis* in Urdu, Punjabi, Bengali, Gujarati and Hindi. Copies of

posters advertising this service are available from Allergy UK, 30 Bellegrove Road, Welling, Kent, DA16 3PY on 0208 303 8525 or e-mail info@allergyuk.org

NICE to appraise new treatments

The National Institute for Clinical Excellence (NICE) has been asked to develop guidance on several new topics by the Department of Health.

Among other subjects it will be examining the best ways to treat eczema, the management of dementia, supporting parents of children with conduct disorders and new drugs for Alzheimer's.

Details of the timetables for these topics will be published on the institute's web site before the end of May at www.nice.org.uk

Performance indicators – mental health and primary care

Performance indicators are now available for mental health and primary care trusts which will be used for the first time to assess their star ratings for 2002-2003. They are designed to tell patients, the public and NHS staff how well their local services are performing.

The indicator lists are available at www.doh.gov.uk/performance/2003

New guidance to reduce medication errors

New guidance for the design of medicines labelling and packaging, aims to reduce medication error. The *Best Practice Guidance on the labelling and packaging of medicines* sets out factors to be considered when designing medicines labelling. These include layout, size of text and colours used. In addition, although 15 different pieces of information are legally required to appear on a label, users need rapid access to only five key pieces of critical information – the name of the medicine, strength, route of administration, dose and warnings. The guidance advises that these should be brought together on the pack for ease of access.

The new guidance took effect from 1 March 2003. A copy of the full guidance document is available at www.mca.gov.uk

Inspirations – a calendar celebrating recovery

Working with an educational grant from Pfizer, National Institute for Mental Health in England (NIMH[E]) sent all local implementation teams in the country a disposable camera in autumn 2002 for

people who use services to make a record of recovery to share with others. The photographs in this calendar are a selection of the hundreds received, along with inspiring messages explaining people's pictures. For copies contact divina.davidson@doh.gsi.gov.uk

Health action zones: a celebration

An event celebrating the achievements of second and third wave Health Action Zone (HAZ) Fellows was held at the end of March.

The fellowship scheme was launched to underpin the Government's health inequalities and social inclusion agenda, with health professionals working in close partnership with disadvantaged communities.

Fellows have been encouraged to share their experiences and innovative practice across the NHS. The Department of Health's assistant chief nursing officer Kate Billingham said that fellows had been proactive in driving change locally and outlined the benefits of continuing this work.

One example of this is in the Hull and East Riding HAZ, where Anita Parker worked as a heart failure nurse practitioner. She introduced a successful project to improve patient education and empowerment through the development of nurse-led clinics for heart failure patients. She is now continuing these clinics within secondary care with a long-term view to having a team of heart failure nurses working within primary and secondary care.

More information on HAZ Fellowships is available at www.doh.gov.uk/pricare/haz.htm