



# Keeping In Touch

Issue 8 Summer 2011

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# 1000th member signs up to Foundation Trust

**Dr Stephen Montgomery has become the 1000th local person to join Cambridgeshire Community Services NHS Trust's membership scheme.**

A trained pharmacist, he is now a Publishing Editor of a number of journals produced by a scientific publisher based at the Cambridge Science Park. He is also a councillor at Landbeach Parish Council.

Dr Montgomery said: "I strongly support the Trust's plans to become a Foundation Trust. I signed up as a member because I think it's important the local community gets involved in the NHS, that way you get improved local accountability rather than top down, central government control".

Matthew Winn, Chief Executive, Cambridgeshire Community Services NHS Trust, added: "We're delighted that we've already recruited a thousand

members, which shows significant support for our ambitious plans to become one of the first community NHS Foundation Trusts.

"Central to our plans is a membership scheme mainly made up of local people and staff who will have a major influence on how we provide health and social care in the future.

"But the hard work has only just started. We need to ensure that our membership reflects the diverse communities we serve across Cambridgeshire, Peterborough, Luton and Suffolk, and eventually recruit up to 9000 people".



(Pictured left to right) are Matthew Winn, Chief Executive, Cambridgeshire Community Services NHS Trust; Dr Stephen Montgomery; and Graham Nice, Chief Nurse, Cambridgeshire Community Services NHS Trust.

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## Welcome to the latest issue of our *Keeping In Touch* newsletter.

This is the first to incorporate articles about the health and social care services we now provide across Cambridgeshire, Peterborough, Luton and Suffolk.

NHS staff from Luton and Suffolk transferred to the Trust as planned on 1 April, after the organisation successfully bid to run these services.

Contract negotiations between NHS Peterborough and Peterborough City Council continue with a view to transferring a range of adult, dental and unscheduled care services to Cambridgeshire Community Services NHS Trust. In the meantime, the Trust is providing these services on behalf of NHS Peterborough via a management agreement, while the contract negotiations are completed.

Inside this issue you find a host of features and case studies from these new locations. They include the sexual health teams in Suffolk, the work the adult speech and language therapy team in Peterborough is doing to help stroke victims and the young persons drugs service in Luton.

There's also an update on our plans to become a community Foundation Trust and a renewed call for you to join our membership scheme if you haven't already.

I want to finish by paying tribute to Victor Lucas, who has sadly announced his resignation as Chairman of the Trust. I'm sure that you will join me in wishing him all the best for the future.



**Matthew Winn**  
Chief Executive  
Cambridgeshire Community  
Services NHS Trust

## Chairman announces resignation

**Victor Lucas, Chairman of Cambridgeshire Community Services NHS Trust, has announced his resignation with effect from 31 July 2011.**

He said: "I am immensely proud to have led the organisation to become the first community services provider in the country to achieve independent NHS Trust status in April 2010.

"I have also welcomed being involved in successfully extending the geographical area to which we provide services to include Cambridgeshire, Luton, Peterborough and Suffolk, creating a more sustainable organisation for the future. The Trust is now well on its way to becoming an NHS Foundation Trust.

"As such it is the right time to hand over the reins to someone with more recent and significant commercial experience who can work with clinicians and managers to maximise the opportunities available to Foundation Trusts.

"I will of course continue to work with the Trust's Board until a new Chairman is appointed, to take forward the Trust's ambitious plans for the future. The new Chairman will inherit a committed and skilled workforce, which I know will continue to focus on what is important; providing high quality services that improve the lives of local people."

Matthew Winn, Chief Executive, Cambridgeshire Community Services NHS Trust said: "Victor's experience and expertise has been invaluable to the Trust in achieving all that it has in recent years. Whilst I completely understand his reasons for stepping down, I know the Board will miss his wise counsel and leadership.

"We look forward to welcoming the new Chairman and continuing to transform the specialist community based services we provide to achieve the very best outcomes for the communities we serve across Cambridgeshire, Luton, Peterborough and Suffolk."



## Consultation shows Foundation Trust support

**Cambridgeshire Community Services NHS Trust has received overwhelming support for its plans to become a Foundation Trust.**

Nearly 700 organisations and individuals responded to a public consultation which ran between 5 January and 30 March 2011. It shows that most people who replied support the Trust's vision, priorities for service development and the proposed membership scheme.

Matthew Winn, Chief Executive, Cambridgeshire Community Services NHS Trust, said: "I'm delighted that we've received widespread backing for our ambitious plans to become one of the first community NHS Foundation Trusts.

"If you haven't joined already, I would strongly urge you to complete the form on the back page of this newsletter."

A copy of the full consultation feedback report is available on request or at [www.cambscommunityservices.nhs.uk](http://www.cambscommunityservices.nhs.uk).

**Steve Barclay MP visits the Macmillan and Hudson Palliative Care Centre**

Steve Barclay, MP for North East Cambridgeshire recently visited

Cambridgeshire Community Services NHS Trust's Macmillan and Hudson Centre, met staff and patients, and signed up to become a member of its aspirant community NHS Foundation Trust.

Michelle Knight, Palliative Care Clinical Nurse Specialist at the Macmillan and Hudson Palliative Care Centre said: "We are delighted Mr Barclay visited our services. We were able to show him our day therapy, outpatient clinics for haematology and palliative care patients and our inpatient services.

"It was a great opportunity for staff to meet their local MP and talk about the services we provide to those with life-threatening illness and their families and carers."

Mr Barclay said: "I was thrilled to meet the palliative care team to see and hear how they provide an invaluable service to their patients and families. I also thoroughly enjoyed speaking with service users and volunteers at the unit.

"I would encourage Fenland residents to take up the opportunity to become a member of the Trust and get involved in their local community health and social care services."



Steve Barclay MP, with service user Edith Vargeson (known as June)

## Podiatry contract secured at HMP Whitemoor

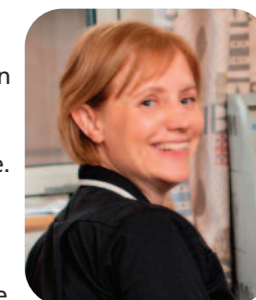
Cambridgeshire Community Services NHS Trust has been awarded the contract to provide podiatry services to the maximum security prison HMP Whitemoor, near March, Cambridgeshire.

The team of two podiatrists will provide nail surgery, bio-mechanical assessment and specialist support for high risk patients – those with underlying health conditions such as diabetes, rheumatoid arthritis and other long term conditions.

Podiatry is devoted to the study, diagnosis and treatment of disorders of the foot, ankle and lower leg.

## Community nurse receives national award

Community matron, Sophie Howson has been awarded the prestigious title of Queen's Nurse.



Sophie, who is based in Cambridge, was awarded the title for her commitment to high standards of patient care and continually improving practice.

The 'Queen's Nurse' title is given by community nursing charity The Queen's Nursing Institute.

Sophie said on receiving her award: "I am very proud to represent the Queen's Nursing Institute and to receive this very prestigious award.

"I am committed to helping and nursing people in the community who have complex long term conditions and I hope that in doing this I can enable them to manage their conditions more effectively."

Director of the Queen's Nursing Institute, Rosemary Cook CBE said:

"Congratulations are due to Sophie for her success. Community nurses operate in an ever more challenging world and our role is to support them as effectively as we can."

# News

## Wisbech Dental Access Centre joins British Dental Association's Good Practice Scheme

Every Dental Access Centre in Cambridgeshire is now a member of the British Dental Association's (BDA) Good Practice Scheme, after the clinic at Wisbech recently achieved accreditation.

Wisbech joins the clinics at Cambridge, Huntingdon and Ely run by Cambridgeshire Community Services NHS Trust to be endorsed by the BDA. Membership of the scheme shows the clinics are meeting nationally accepted standards of patient care.

Dr Maria Ross-Russell, dental clinical director, Cambridgeshire Community Services NHS Trust, said: "The scheme helps us to reassure patients that they can expect a high standard of dental treatment and care whichever Dental Access Centre or dental clinic we run.

"We're really pleased that Wisbech has been accepted for membership as it shows our commitment to the highest standards of dentistry across the county and reflects the hard work of our teams of dentists and dental nurses."

Dental practices can only join the scheme after a comprehensive assessment against up to a hundred performance standards in such areas as dental care and treatment, patient comfort, health and safety, infection control, and management systems.

The four Dental Access Centres across Cambridgeshire and Peterborough offer emergency appointments to people who do not have regular access to a dentist or experience an urgent dental problem. The Dental Access Centre at Peterborough is also a member of the scheme and was the BDA's Good Practice Scheme Practice of the Year 2009.

In addition, Cambridgeshire Community Services NHS Trust offers community dental care at Wisbech, Cambridge, Huntingdon and Ely, which are BDA accredited.

If you would like more information about the Dental Access Centres please contact Cambridge Dental Access Centre on 01223 723093, Huntingdon Dental Access Centre on 1480 363760, Wisbech Dental Access Centre on 01945 465919, or Peterborough Dental Access Centre on 01733 295854.



In the dentist chair: Wisbech has joined the BDA Good Practice Scheme

## Jane Speaks Up for International Recognition



Cambridgeshire Community Services NHS Trust's paediatric speech and language therapy team in Cambridgeshire is gaining international recognition thanks to research being carried out by Jane Speake, lead practitioner.

As well as conferences in the UK, Jane has presented her findings in Oslo, Norway. The study looks at children who face persistent problems with speech intelligibility – the struggle to make themselves understood.

She has been working with a group of children between 7 and 8 years old to record their ability to communicate before and after therapy.

Jane said: "I'll be submitting my final thesis in the autumn, but the initial findings indicate that three out of four children showed improvement."

## Waiting times for Cambridgeshire children who need speech and language therapy dramatically reduced



Jacqui Martin, senior specialist, with Lewis

Waiting times for children in Cambridgeshire who need specialist speech and language therapy have been dramatically reduced in the last 12 months, thanks to innovative changes to the service.

No child in the county is now waiting more than the 18 week national target for starting treatment with Cambridgeshire Community Services NHS Trust's paediatric speech and language therapy team, compared to over 400 children in May 2010.

The average waiting time is now less than six weeks, down from nearly 29 weeks in May 2010. The team supports more than 2500 children at any one time, and receives around 1600 new referrals each year.

The team put the success down to a series of measures they've introduced since last year, including referral drop-ins for pre-school children (except those with complex needs) and closer links with schools.

They also launched a project called Speech Circles to support families to take a more active role in developing their child's speech. Parents are offered practical training and support, with the therapist working alongside them to run games and activities which aid their child's development.

The team now plans to introduce a single point of access for referrals, increase the number of drop-ins and review administration to look at how efficiency could be further improved.

## Diabetes partnership features in NHS Alliance film

A ground breaking partnership between Cambridgeshire Community Services NHS Trust and Cambridge University Hospital NHS Foundation Trust has featured in a new film for GPs.



The NHS Alliance has produced the short film to explain how specially trained hospital and community diabetes specialists joined forces for a pilot scheme to develop a single point of access for people in East Cambridgeshire and Fenland with diabetes.

The NHS Alliance brings together GP Consortia, primary care trusts, clinicians and managers in primary care. The aim of the film is to explain to GPs in an interesting and informative way how the service was developed and commissioned, following Government plans to hand over the NHS budget to them.

Helen Hollern, diabetes specialist nurse facilitator, Cambridgeshire Community Services NHS Trust, who features in the film, said: "We're delighted that the NHS Alliance chose to feature us as an example of best practice to GPs, which reflects the innovative work we've been doing".

Diabetes is a condition where the amount of glucose in your blood is too high because the body cannot use it properly. This is because your pancreas does not produce any insulin, or not enough, to help glucose enter your body's cells – or the insulin that is produced does not work properly (known as insulin resistance).

# In focus

## Sexual health support high on the agenda

In this special feature we focus on the wide range of sexual health services provided by Cambridgeshire Community Services NHS Trust in three new locations – Suffolk, Peterborough and Luton.

In Suffolk we look at the sexual health teams working across the county. In Peterborough we talk to two teams – HIV/AIDS and the Sexual Assault Referral Centre. We also highlight the success of the Chlamydia screening programme in Luton.

### Your Guide to Suffolk Sexual Health Services Genito-urinary (GUM) clinics

People concerned that they might have a sexually transmitted infection can get help at two clinics located at Ipswich and Bury St Edmunds.

More than 10,500 people visited the clinic in Ipswich in the last 12 months, and another 6300 visited the clinic in Bury St Edmunds.

The multi-disciplinary teams at both locations comprise consultants, doctors, nurses and health advisors. Specialist management and treatment of sexually transmitted infections and HIV care is also provided from these locations and the Ipswich team runs sexual health clinics in four Suffolk prisons.

Val Cooke, lead nurse, at the clinic located at Ipswich Hospital, said: "There's a myth that we only see young people, but people of every age group come through our doors.

"The over 40s aren't immune from sexually transmitted infections after all. Suffolk can be an insular place, particularly in rural areas where everyone knows everyone else, so the confidentiality of our patients is critical.

"People will often not want to visit their GP, but they can self-refer and drop in to any of our clinics in a completely confidential way."

### Reproductive health

Nearly 17,000 people have sought the advice of community based reproductive services – run from ten locations across Suffolk and one in Norfolk – in the last year.

The service has a full time consultant, with many of the outlying clinics run by specialist nurses.

Services include support and advice on issues like contraception, sexually transmitted infections, pregnancy, as well as termination referrals and close links with Chlamydia screening for under 25s.

### Psychosexual therapy

Suffolk has one of the few NHS funded psychosexual therapy services in the country which helps people with sexual dysfunction – the term for a wide range of difficulties such as loss of desire, problems with arousal or orgasm, and related emotional problems.

Liz Stolls, psychosexual therapist, is one of two therapists providing expert counselling to individuals and couples to

identify the problem, its underlying causes and possible solutions.

She said: "People usually have six therapy sessions following a referral from their GP. Counselling is not a quick and easy solution, but we look at what they're going through and how it might be addressed.

"This can range from emotional problems related to a loss of sexual interest following an illness or operation, while others have been affected by difficulties conceiving or a loss of fertility."

There is also medical input into the service where appropriate, such as urology and gynaecology.

### HIV/AIDS

More than 300 people living in Suffolk have been diagnosed HIV positive, according to the most recent figures.

With advances in medication HIV is considered a long term condition, with acute phases. The Community HIV Service supports people following diagnosis, with care continuing for many years, enabling them to live as well as possible with the illness.

Kathy Masoli, team manager and clinical nurse specialist, explained: "People with HIV are now living longer than before, but often need long term support from health and social care services. We take a holistic approach to care by offering advice and support as well as monitoring their health, and referring to other services if required."

The team see patients in hospital-based clinics and at home, as well as facilitating support groups for both people with HIV and their carers. They also have an educational role, raising awareness of HIV among health and social care professionals, such as GPs, dentists, the police and hospice staff.



Kathy Masoli, HIV team manager and clinical nurse specialist.

## Living with HIV

Cambridgeshire Community Services NHS Trust's HIV social work team in Peterborough not only provides social care for people with the virus, but also supports their wider needs.

Maureen Adams, team leader, explained: "Medical research in HIV/AIDS treatment has redefined the virus to a chronic, lifelong illness, but manageable in most cases. However, with longer, healthier lives has come complex social needs and sometimes hardship. This can have an adverse affect on people's well-being, which is where we come in.

"Unfortunately, there is still a lot of stigma attached and many people do not understand all the ways HIV is transmitted, how it can be prevented, the reality of living with HIV today, or the fact that the number of people diagnosed with HIV has been increasing in the UK".

Here we shed some light on what it's like for one person living with HIV in Peterborough. We've changed his name to protect his identity.

### Case study

Tom is in little doubt that without the support of the HIV/AIDS social work team in Peterborough he would be dead by now.

Diagnosed HIV positive in early 2000, he suffered from a period of serious depression around three years ago and admits that he had lost all sense of purpose and was self-harming.

He said: "HIV is a very lonely condition and there is still great stigma attached to it. You have to really trust someone to tell them you have the virus. I come from a large, Irish Catholic family, who know about my HIV status, but it's not something we can comfortably talk about.

"It's all too easy to think that no-one cares, but the team has helped me to turn my life around. They visited me every day in hospital when I was unwell and I wanted for nothing when I was well enough to return home.

"I know that I can pick the phone up to them at any time and that they will always be there to listen. It makes a big difference to know that I'm not on my own. Nothing is too much trouble and they won't stop until they get the help for people they need."

Tom explains that HIV is no longer a death sentence and that with the right medication and support people can live near normal lives.

He added: "Learning that I was HIV positive turned my world upside down overnight, but the support I've received from the social work team has been brilliant, I'm taking my medication and am living my life."

## No excuse for sexual violence

More than 300 people who've been the victims of rape or serious sexual assault in Cambridgeshire have been supported by the Sexual Assault Referral Centre in Peterborough since it opened in January 2010.

A partnership between Cambridgeshire Police, Cambridgeshire Community Services NHS Trust and Rape Crisis, known as the Oasis @ Rivergate, the confidential service supports victims with emotional and practical help.

This can include forensic medical examination, emergency contraception, advice and screening for sexually transmitted infections, pregnancy testing and longer term support.

People don't have to report the incident to the police, but the centre will support them to do that if they choose. People can also ask for any forensic evidence to be securely stored, should they later decide to contact the police.

Kay Elmy, centre manager, Cambridgeshire Community Services NHS Trust, said: "Since we opened we have seen a ten per cent rise in the number of reported cases of rape and sexual assault, which we think reflects the confidence that people have in the support we provide.

"There is no excuse for sexual violence, so we reassure them that it's not their fault and work with them to agree what they want to do next."

A crisis worker will be assigned to help the individual through the initial process, and an independent sexual violence advisor (ISVA) will get in touch to offer longer term support.

## Chlamydia Testing Success

Figures just released show that Cambridgeshire Community Services NHS Trust's Chlamydia Screening Service in Luton is one of the best performing in the eastern region.

The team has carried out more than 11,000 tests among 16-24 year olds in the last 12 months. Of those, nearly 300 were found to have the infection.

They put much of their recent success down to the recruitment of four outreach workers at the start of the year, who have been working in the community to raise awareness and encourage young people to get tested – particularly in schools, colleges and the University.

They've also held regular screening sessions in the Mall Luton, the town's largest indoor shopping centre, which have proved extremely popular. Under 25s can also request a free home testing kit via the teams dedicated website [www.c-sure.org.uk](http://www.c-sure.org.uk)

Lorraine Law, Chlamydia screening co-ordinator, said: "Chlamydia is really easy to treat, but only if young people know they have it. Under 25s can get a free, confidential test, while over 25s need to get in touch with their nearest GUM clinic, which is also free and totally confidential".

# About you

## Helping stroke survivors on the road to recovery

Every year around 150,000 people in the UK have a stroke.

Because a stroke often strikes suddenly and unexpectedly, it can be a frightening experience – for them and for those close to them. A stroke happens when the blood supply to part of the brain is cut off, due to a bleed or blockage, which kills or damages brain cells.

A person may become numb, weak or paralysed on one side of the body. They may slur their speech and find it difficult to find words or understand others. Some people lose their sight or have blurred vision, others become confused or unsteady. They may also have difficulties swallowing.

Cambridgeshire Community Services NHS Trust's adult speech and language therapy team in Peterborough has developed a specialist post to help stroke survivors in the community.

Kay Martin, speech and language therapist helps people whose communication skills have been damaged. She also helps with swallowing problems, which can lead to chest infections, choking and affect their ability to eat and drink.

She has worked closely with stroke survivors to develop new ways of working in Peterborough, much which has been led by patients themselves. This has resulted in major changes to the service, with health, social care and voluntary organisations working together more closely.

She explained: "We now work along side community support workers from the Trust's home care team. They carry out an initial home visit and provide information about stroke and speech, with signposting to other services.

"They also help us to triage patients, particularly highlighting any concerns from family or carers. People can feel isolated when they return home, so they help them access community activities, such as going to a group or even helping them catch a bus."

The team has also worked with stroke survivors to campaign for a new

Communication and Long Term Conditions post at The Stroke Association, which has enabled a series of support groups and projects. These include:

- Continuing the Peterborough stroke group which meets every month to support people, their family and carers. Fundraising with the Peterborough Lions charity has enabled the group to purchase laptops and software, which people can use to practice their communication skills
- Development of a weekly conversation group to improve people's communication skills and build their confidence
- Training volunteers as 'conversation partners' to give people one to one conversation practice
- A rolling education programme.

Other examples of joint working include teaming up with a local counselling service to enable people to access counselling and funding from the Anglia Stroke and Heart Network, which has also enabled the team to buy communication aids used to demonstrate the technology available.

Kay added: "Many people tell us that the most difficult aspect to come to terms with is being unable to have a conversation. Stroke survivors have been instrumental in developing services and together we're trying to break down the barriers between organisations to ensure people get the help they need".



Using symbols to support communication

### Case study

Art Dodd (68) from Peterborough admits he's lucky to be alive.

Born in upstate New York, he came to the UK more than forty years ago as a military policeman based at RAF Alconbury, Cambridgeshire, married a local girl and raised a family.

But in 2008 he suffered a massive stroke which left him paralysed down his right side and unable to speak. He was undergoing treatment for another condition at Addenbrooke's Hospital at the time and so was immediately rushed to intensive care.

Six weeks later he was well enough to return home and has slowly regained movement so that he only needs the aid of a stick to walk, is driving again and with the help of the speech and language therapy team his communications skills are much improved – although his speech can still be difficult to understand.

He said: "If I'd had the stroke at home I may not have survived, but since then I've got a little better day by day. The team have helped my rehabilitation with exercises which help me to pronounce words and remembering to talk more slowly so that others can better understand me.

"If I can't think of the right word or am struggling to pronounce it, they've told me to think of another similar word, and if I get really stuck I keep a notepad and pen so I can write the word down."

Art has also regularly attended the support group run by the team, which he says has been a great help.

Editor's note: Art was interviewed with his wife, Barbara, who has helped with these quotes.

## No stigma, just confidential drugs support and advice

There is no single reason why young people take drugs.

Peer pressure, depression, anxiety, bereavement, eating disorders, abuse, and trauma can all trigger risky behaviour, which can sometimes lead to dependency and criminal behaviour.

The Underground, previously known as the Young Persons Drugs Service, was set up by the NHS in Luton in 2003 to offer confidential advice, support and treatment where appropriate, free from stigma or judgement.

The service is open Monday to Friday where young people can drop in, self-refer or be referred by professionals, such as GPs, teachers and social care. This can involve comprehensive assessments, one-to-one support, outreach programmes to schools and hostels, drug awareness training, counselling, group work and complimentary therapies.

Debbie Liverpool, service manager, said: "We work with young people who experiment with drugs, use them recreationally, problematically or self-medicate.

"Luton has similar drug problems to other urban areas. Cannabis and alcohol are the most common drugs taken by young people here, although a small number use opiates.

"We can support young people in the short term which may be enough for them to become drug free, but others will be with us for some time and experience many highs and lows".

When young people first attend the service a key worker will be assigned to carry out a comprehensive assessment to look at their needs and how they can reduce or stop their drug use, and so reduce the associated harm.

Louise Thirkettle, young persons drug and alcohol worker, said: "We look at their drug use, what causes it, and what would motivate them to change their behaviour. We will also carry out a health assessment, which may include prescribing medication if it's needed.

"We take an holistic approach as drug taking can impact on every part of someone's life, so we also offer advice and signpost on issues like sexual health, diet, housing, education, employment and the criminal justice system."

Because drug taking is often linked to behavioural, emotional and mental health issues the team also provides expert counselling.

Helena Baxter, counsellor/psychotherapist, explained: "Every young person is unique and the reasons they take drugs is individual to them, so that determines what approach we take.

"Drugs can be a means of escapism and an emotional substitute. We offer therapeutic treatment depending on their needs, which can involve group and individual counselling. I will usually see people on a weekly basis, but sometimes more often."

Reena Devi, emotional well-being drugs and alcohol worker, added: "Growing up can be stressful, which can cause some young people to lead chaotic lives. I offer support with their emotional well-being and also run a 'highs and lows' group.

"I look at their triggers, which can include self-harm and eating disorders, and help them employ better coping mechanisms to gain more control over their behaviour.

"We will always see young people who drop in to the centre in crisis immediately and never turn anyone away. We're not here to judge anyone, we're focused on providing confidential support based on their individual needs."



Helena Baxter, counsellor/psychotherapist.

### Case study

Simon had been taking illegal drugs since he was 13 years old.

He started on cannabis, but made the transition to harder drugs before getting hooked on heroin just two years later. His elder brother, who had used heroin in the past himself, saw the signs and suggested he went to the Underground before it was too late.

Simon said: "It was a lifestyle thing really. Lots of my friends were into drugs and once I got started I kept looking for new highs.

"Going to the Underground with my brother seven years ago was the best decision I've ever made though. I was assigned a key worker and attended counselling sessions. They also prescribed methadone, which helped me to stop taking heroin."

Now 24 years old Simon has been off heroin for four years, and is trying to get his life back on track, but admits it's a constant battle.

He explained: "I'm trying to get work to be able to afford my own place, but it's not easy in the current climate and with my background. I'm off the harder drugs, but I know that I drink too much, so I'm still in regular touch with the team."

*We've changed his name to protect his identity.*

# What do they do?

## Smoothing the path to adult health and social care services

The journey from children's to adult health and social care services can sometimes be a bumpy one.

That's because the way the NHS is set up paediatric and adult services are usually provided by different teams and sometimes different NHS organisations. Plus there's not always an equivalent adult service.

So when young people with complex health needs celebrate their 18th birthday, they and their families will wave goodbye to paediatric doctors, nurses, social workers and other health professionals – some of whom they will have known from a very early age.

One way Cambridgeshire Community Services NHS Trust is tackling the issue in Cambridgeshire is with a dedicated new role which aims to ensure the transition to adult health services is as smooth as possible.

Mark Slade, health transitions co-ordinator, brings together the county wide children's community nursing team and the social care transitions team to ensure young people continue to get the help they need into adulthood.

He explained: "When young people leave children's services, there aren't always equivalent adult services and it can be unclear who will provide them.

"My job is to signpost professionals involved in their care to the appropriate adult health services. If these don't exist, then hopefully over time we can look at developing new services or improve the links between existing ones."

Mark is also raising awareness with local GPs to develop clearer guidelines to ensure that the transition from paediatric to adult services like physiotherapy, occupational therapy and speech and language therapy is more seamless.

He explained: "The onus is on Cambridgeshire Community Services NHS Trust because we provide many of these



Growing pains: making the transition to adult services easier

community based services, but we also need to raise awareness among GPs, partly because they won't necessarily have had a great deal of direct contact with the young person over the years".

One of Mark's first tasks has also been to work with special needs school nurses to collect more detailed information about young people's health needs, which will help with transition assessment and support plans when they turn 18 years old.

In the longer term he plans to develop a comprehensive A-Z of the most common health conditions, the related children's

and adult services in the county, and how to access them.

He added: "As we've set up a new service from scratch, my role is mainly a strategic and advisory one at the moment, but over time I hope we can develop a more comprehensive, hands on approach.

"Young people have wider needs which involve lots of different agencies. The eventual aim is to ensure that everyone approaching adult life will have a holistic transitions plan, which can include housing, education and social care, as well as health."

## A Day in the Life of Sarah Watts, Health Visitor

Sarah Watts is one of a 27-strong team of health visitors who work with children under five years old and their families across Luton, Dunstable and the surrounding villages. She talks about her case load supporting families and her managerial role as a team leader of the service. She says there is no such thing as a typical day, so we've included times to give an indication only.

### 9am

I check my email, telephone messages and catch up with colleagues. I'm one of two team leaders, so I also go over the rota. This can involve looking at cover arrangements due to sickness absence for example and I may need to provide cover myself.

### 9.30am

I usually see my first patient of the day in their own home. We mainly support pre-school children and their families. We assess a child at key milestones in their development at primary birth visit, 6-8 weeks, three months for weaning, and then 7-9 months, and two years old. By then many of them start nursery or pre-school.

### 10am

My first contact with a baby, called a primary birth visit, usually takes place 10 to 14 days after the child is born. This will last around 45 minutes and is an opportunity to introduce myself to the family, if I don't already know them, assess their health needs and put together a care plan.

### 11.30am

Routine, follow-up visits usually last about 20 minutes. It doesn't sound long, but we want families to become independent and to access our service, as required, until their child attends school.

We offer advice and support on many issues such as breastfeeding, formula feeding, weaning and post-natal depression. We also offer health promotion and child behavioural management, such as sleeping and toilet training.

### 1pm

We also have child protection and domestic violence responsibilities. This is one of the toughest parts of the job and the role of health and social care professionals in dealing with these difficult cases can receive national media attention.

We also provide more extensive support to those families with extra or complex needs, working with our partner agencies such as schools, nurseries, children centres, education, social care and midwifery.



Sarah Watts, health visitor

### 2.30pm

As team leader I'm responsible for the operational management of health visiting in Luton, so I'm involved with audits, staff training, co-ordinating annual leave and cover arrangements, peer supervision and supporting newly qualified staff.

At the moment we're recruiting student health visitors, so it's important we attract the right calibre of staff.

We're also taking part in a mobile working pilot scheme, which will enable health visitors to record patient notes on laptops while they're on a visit. If that proves successful then it could free up more time to spend with families.

### 4.30pm

Being team manager means that I also have an important strategic role. There is a national implementation plan for health visiting in England, so I support that locally with action plans.

### 5pm

I try to leave on time as I get in trouble with my nine year old daughter if I work late. She does let me work on my laptop at home though!

I've been a health visitor for 13 years. It's so varied that it's never boring. We have lots of challenges in Luton such as a high birth rate, safeguarding issues and language barriers, but I still really enjoy the job.

We have a high caseload, but it's very much a team effort. I try to spend two days a week on clinical work and three days a week on my team leader responsibilities, so some days I'll be out of the office all day.

Providing a lifetime of care



Are you interested in the future of your local community health services?

Then join up as a Member now!

Cambridgeshire Community Services NHS Trust:  
providing services across Cambridgeshire,  
Peterborough, Luton and Suffolk

**Who are we?**

Cambridgeshire Community Services NHS Trust provides:

- community health services for children and adults across **Cambridgeshire**, as well as social care for older people
- community-based health services for children and adults in **Luton**
- sexual health services in **Suffolk**, in partnership with Suffolk Integrated Healthcare
- adult health and social care services, including community dental services, in **Peterborough**

That's a budget of some £180 million on services ranging from your health visitors, district nurses, rehabilitation services, specialist end of life care and much more.

**What's changing?**

We are seeking to become an NHS Foundation Trust in 2012 which – as a public benefit corporation - will make us accountable to local people and staff.

Whilst remaining firmly within the NHS, becoming a Foundation Trust will give us greater freedoms to decide, with our Members, what's important locally for our services.



**Why should you become a Member?**

Your support is vital if we are to fulfil our ambition to make a real difference to the lives of those that use our services.

Becoming a Member is free and you can spend as much or as little time as you want, from receiving a regular newsletter to actively participating in focus groups, or putting yourself forward as a Governor. Simply complete and return this form, or join online at [www.cambscommunityservices.nhs.uk](http://www.cambscommunityservices.nhs.uk)

If you would like further information, please contact us on:

Telephone: 0800 013 2511  
or 01480 308 216

Email: [FT@ccs.nhs.uk](mailto:FT@ccs.nhs.uk)

or visit our website at: [www.cambscommunityservices.nhs.uk](http://www.cambscommunityservices.nhs.uk)

We look forward to working with you in the future!

Please return your completed form to: Freepost R5AE-ELUT-RHCL  
CCS NHS Trust, The Priory, Priory Road, St Ives, Cambs PE27 5BB



**Membership Form**

**A call for Members: be part of our future**

In accordance with data protection legislation your membership details will be used solely for the purposes of your membership of the NHS Foundation Trust. By law we are required to maintain a public register showing only Members' names and constituencies. Please tick this box if you do not wish to be included in the public register

**Your details**

You must be at least 16 years old (\* these fields are mandatory).

\* Title (eg Mr, Mrs, Miss, Ms, Dr.)

\* First name

\* Surname

\* Full address

\* Postcode

Telephone  Mobile

Email

We would prefer to send you information by email. If you would prefer to receive this by post, please tick here

We want to build a membership that is representative of the community we serve. The following information will help us know if we have achieved this:

**Gender**  Male  Female

**Age** Date of birth dd/mm/yyyy

Age range

16-35 years  36-50 years  51-65 years  66-80 years  81+ years

**Disability**

Do you consider that you have a disability?  Yes  No

**Ethnicity**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> White British           | <input type="checkbox"/> Mixed Other                  | <input type="checkbox"/> Caribbean                    |
| <input type="checkbox"/> White Irish             | <input type="checkbox"/> Chinese                      | <input type="checkbox"/> African                      |
| <input type="checkbox"/> White Other             | <input type="checkbox"/> Indian                       | <input type="checkbox"/> Black or Black British other |
| <input type="checkbox"/> White & Black Caribbean | <input type="checkbox"/> Bangladeshi                  | <input type="checkbox"/> I'd rather not say           |
| <input type="checkbox"/> White & Black African   | <input type="checkbox"/> Pakistani                    | <input type="checkbox"/> Any other ethnic group       |
| <input type="checkbox"/> White & Asian           | <input type="checkbox"/> Asian or Asian British other | <input type="text"/>                                  |
- (please state)

**Getting involved**

**I would be interested in** (tick one or more)

- Receiving regular information about the services provided by the Trust
- Attending meetings or events
- Taking part in or helping with surveys, consultations and questionnaires
- Becoming a volunteer
- Taking part in discussion groups

I would like to register my interest in becoming a Governor (note: we will undertake the required checks of elected or appointed Governors to make sure that they are not a risk to children, staff or the integrity of the NHS Foundation Trust)

**I confirm that the information provided on this form is accurate, that I am at least 16 years old and that I have not been:**

- involved in the previous five years in an act of assault, violence or harassment against any Trust staff or registered volunteers of the Trust
- convicted of offences against children or vulnerable adults

\* Date (must be dated)

\* Signature (must be signed)

Thank you for applying to become a Member of our NHS Foundation Trust. We look forward to working with you in the future.