

# penninepost

HEALTH NEWS AND ADVICE



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# letter from the chairman



Firstly I'd like to welcome our newly elected governors who have now joined our Council of Governors following the recent round of elections. At the same time, I would like to say a fond farewell to the former governors who have stepped down and inform you, with regret, of the sad passing of Jean Frankell. More information is included in the members' section of this issue.

We recently held a membership strategy workshop to discuss how we can develop and enhance the service we provide to our members. It was a lively session attended by a mixture of both public and staff governors, Board members, health improvement practitioners and corporate services colleagues. We focused primarily on membership engagement and involvement, looking at what it means and how we can strengthen it. We'll keep you updated as plans develop but if you have any ideas please contact our membership team.

Lastly, we had a great time at our membership lifestyles market in Stockport. It was the second in our series of events and involved teams from Pennine Care and a range of partnership agencies. It's a great opportunity for our members to access advice and support on a range of health and lifestyle issues, and I'd encourage you to attend our next members' event on 19 October at the Wheatshaf Shopping Centre, Rochdale from 11.00 am - 3.00 pm.

**John Schofield** Chairman



**Pennine Post is also available online at [www.penninecare.nhs.uk](http://www.penninecare.nhs.uk)**  
**Pennine Care NHS Foundation Trust is a provider of health services in Heywood, Middleton and Rochdale, Bury, Oldham, Stockport, Tameside and Glossop. Pennine Post is sent to all our Foundation Trust members.**

**Any comments ideas or suggestions? Please contact:**  
**The Communications Department, on 0161 716 3152 or email: [communications.penninecare@nhs.net](mailto:communications.penninecare@nhs.net)**

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# news

## An afternoon of musical madness

Service users recently had the opportunity to showcase their musical talents at a dazzling concert in front of over 100 members of staff, family and friends.

The performance took place at Broadwater Hall in Rochdale and was dubbed 'an afternoon of musical madness'. A highlight of the concert was the attendance of the Mayor of Rochdale and his wife, who were tapping their feet throughout. The Mayor commented, "I was blown away by the talent in the room."

The young men participated in 'The Backdoor Music Project', a Rochdale-based scheme set up in 2000, which engages with 13 - 25 year old aspiring musicians who have had a difficult start in life and who are passionate about performing, practicing and producing music. The project offers experience in lighting, stage production, DJ skills, and other areas of musical interest and visual creativity.



## More care closer to home



**Pennine Care's intermediate care facility, Butler Green House in Oldham, has been expanded to provide more specialist care to patients in the community so they don't have to go to hospital for treatment.**

An additional eight enhanced care beds have been opened at the unit to provide a higher level of care, such as when patients need intravenous antibiotics or fluids and more specialist nursing support. This means that patients can now be cared for safely in the community at Butler Green, instead of being admitted to hospital.

In addition to the eight enhanced beds, the facility also provides 20 intermediate care beds.

Since Pennine Care took over Butler Green in August last year, the service has cared for 271 patients who have either been transferred from the Royal Oldham Hospital or referred by their GP or health and social care professional.

Butler Green's expert nursing and therapies team work closely with social care and mainstream community teams, such as district nursing, to provide patients with an integrated package of care.

The team also visits patients at home to assess what type of care they need. This has resulted in 274 visits, with 79 patients being cared for at the unit, avoiding hospital admission, and the remaining patients being cared for in the community by specialist teams.



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# Leaders unite



**Health and council leaders from across the Rochdale borough have signed a commitment to the future of Rochdale Infirmary to transform and enhance health and social care services.**

The joint statement of intent agreement was signed by Heywood, Middleton and Rochdale Clinical Commissioning Group Clinical Chair, Dr Chris Duffy and Chief Operating Officer, Lesley Mort, as well as Pennine Acute Hospitals NHS Trust Chief Executive, John Saxby and Chairman, John Jesky, Pennine Care NHS Foundation Trust Chief Executive, John Archer and the Leader of Rochdale Council, Colin Lambert.

The agreement acknowledges the important heritage of Rochdale Infirmary and the issues local people have about the services that have moved out of the hospital. Going forward, plans are focused on what services could be provided at the hospital and in the community with the help of local feedback.

The type of services that could be provided at the infirmary, or in the community, would allow multi-agency teams to deliver:

- **A single point of contact**, so that people are directed quickly to the services they need.
- **Mental health and wellbeing services**, bringing together physical health, mental health and social care.
- **Elderly and frail patient services**, providing more specialist care.
- **Services for people with long-term conditions**, using technology and equipment to support patient care.
- **A range of healthy lifestyle and wellbeing services.**

**Above (from left to right): John Jesky, Lesley Mort, Colin Lambert, John Archer, Chris Duffy and John Saxby**

## Trust plans to invest in more health visitors

**Pennine Care plans to employ 63 more health visitors over the next three years as part of a £2.7m investment.**

Commissioners from NHS Bury, NHS Oldham and NHS Heywood, Middleton and Rochdale have provided the funding to Pennine Care in response to the government's drive to expand and strengthen health visiting services.

Pennine Care has already started the recruitment drive and will have 13 new health visitors trained and in post by this September, with a further 13 in place by this time next year. The remaining posts will be in place by 2015.

## \* The votes are in...

**The latest round of elections to the Council of Governors took place in June 2012. Thank you to all our members who took the time to vote.**

The newly elected governors commenced in post on 1 July 2012, and their first engagement with the Trust was to attend a welcome event on 5 July followed by formal induction sessions during July and August 2012.

**Find out more about your governors on page 8.**

# Summer survival guide

Follow our simple steps to learn how to treat common ailments at home, saving yourself time and helping GPs and NHS services have more time to treat patients with serious problems.



this is particularly important for young children, older people and if you have another illness or chronic condition.

### Sunburn

During summer, it is sensible to protect your skin using a high factor sunscreen. If you do burn however, you can still treat it at home by cooling the skin with cold water, drinking plenty of fluids, using aftersun to help moisturise your skin and taking paracetamol if it feels painful.

### Prickly heat

Prickly heat usually develops when a person sweats more than usual, such as during hot or humid weather. Avoid the heat by staying in the shade, wearing loose cotton clothing and applying calamine lotion to soothe the affected area of the skin.

**This guide gives you basic advice on common summer complaints and the essentials you need to treat them.**

### Hayfever

Hayfever is a common allergic condition that affects up to one in five people at some point. Use over the counter medication such as antihistamines when you first notice symptoms or when you know there is going to be a high pollen count. A decongestant nasal spray can help to relieve a blocked nose and eye drops can be used to treat red, itchy or sore eyes.

### Insect stings

There are more bugs flying about during the summer and a bite can be itchy and painful. If you've been bitten, clean the area carefully with soap and water and avoid scratching it to prevent infection. Paracetamol, ibuprofen, antiseptic cream and antihistamines can also help to treat a nasty bite.

### Sickness and diarrhoea

If you get a bout of sickness or diarrhoea make sure you drink plenty of water to prevent dehydration –

**If your symptoms persist or become worse, you can:**

- **Speak to your local pharmacy staff.**
- **Look online for advice at [www.nhs.uk](http://www.nhs.uk)**
- **Phone your GP for advice.**
- **Speak to your healthcare professional such as a district nurse or health visitor.**

# Multi-million pound investment to improve community care

**Health leaders in Bury, Oldham and Rochdale have committed to a £3m investment to improve local health services and prevent more patients from ending up in hospital.**

A partnership between Pennine Care NHS Foundation Trust and the newly-formed GP Clinical Commissioning Groups (CCGs) will see more care provided to patients at home or in the community instead of having to go to hospital for treatment.

Over the next three years, the Trust will work with GPs and key partners such as local councils to develop and build on existing services and improve integration between health and social care, reducing bureaucracy.

Plans include helping more people to lead a healthy lifestyle by providing education to help them look after their own health; bringing together physical health, mental health and social care for a more integrated approach to care; using technology and equipment to support patient care at home and providing more specialist nursing care to patients who are unwell or unable to manage their illness.

Providing people with care in the community rather than hospital can ensure better quality of care and improved patient experience.

**John Archer, Chief Executive for Pennine Care NHS Foundation Trust commented:** "Our plans will look at all of our services that provide care to patients, from birth right up to end of life. It is also an opportunity to bring together our expertise on both physical and mental health, so that we can provide patients with a comprehensive package of care, looking at all aspects of their health, lifestyle and wellbeing.



"It is important that our services are tailored according to the needs of each local population so we will work with local GPs and key partners to ensure that we provide services at the right time, in the right place. A large number of patients who end up in hospital could actually be cared for in the community with some additional support, and so we want to ensure that patients only spend time in hospital if they really need to."



**Dr Ian Wilkinson, local GP and Accountable Officer for NHS Oldham Clinical Commissioning Group, said:** "We know from talking to our patients that they would prefer not to have to go into hospital for their treatment. Treating people in the community, rather than in hospital, can also provide better quality of care, a better overall experience for the patient and is less expensive, so we are keen to make sure people can be seen in the community whenever possible.

"This initiative will provide support for vulnerable people and provide more co-ordinated care. It's a real example of health and social care organisations in Oldham working well together to improve the health of local people, the care they receive, their experience of it and to deliver best value for money by using resources effectively. While the initiative will be rolled out across the three areas, we will make sure that any changes in Oldham meet local people's needs."

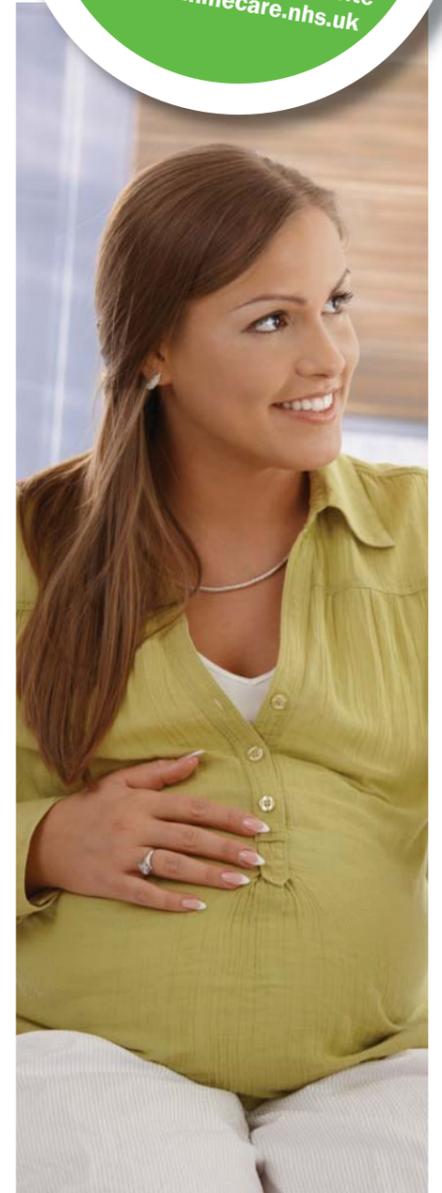
**Dr Kiran Patel, GP and Bury Clinical Commissioning Group Chair, said:** "The investment offers an exciting opportunity to develop and improve community services for local patients. The approach will lead to more convenient quality care delivered closer to where patients live and in some cases, in a patient's own home. Ultimately this will lead to improved access and an enhanced patient experience, through a more integrated local service which takes a holistic look at a patient's needs."



**Dr Chris Duffy, NHS Heywood, Middleton and Rochdale Clinical Commissioning Group Clinical Chair, said:** "We recently announced plans to work with the public and our stakeholders to design a different and sustainable future for health services in the borough, including community services and Rochdale Infirmary. This new strategy of bringing more care closer to home will support this aim, providing us with a real opportunity to develop integrated services that meet the needs of our patients."

**Pennine Care has appointed Dr Neil Snowden to act as Clinical Director for the initiative. Dr Snowden, a Consultant Rheumatologist and former Clinical Director at the Pennine Acute Hospitals NHS Trust, will play a valuable role in bringing together community services with primary (GPs) and secondary care (hospitals), ensuring high quality and safety whilst supporting best practice.**

As the programme develops we will be looking at ways in which we can involve our members, patients, service users and carers in shaping health services for the future. Look out for more information on our website [www.penninecare.nhs.uk](http://www.penninecare.nhs.uk)



# Introducing your new governors

Following our recent elections, we would like to welcome our new governors and congratulate those who were re-elected. Find out more about who has been elected in your local area...

## Heywood, Middleton and Rochdale

### William Uttley

"My interests lie with older people's services and closer links with other partner organisations providing care provision."



## Stockport

### Geoff Lucas

"My previous experiences as a service user have provided me with a real insight into mental health issues and a passion to ensure that ordinary people can have their say in how services are delivered."



This is Geoff's third term of office.

## Bury

### Sue McKenzie

"Being the link between the public, service users and the Trust is paramount to the governor role and I will use the wealth of my personal professional experience to represent the borough."



This is Sue's second term of office.

### Dr S Lal

"I will use my experience assisting the Trust in fulfilling its obligations for the care of physically and mentally ill clients in the community, and ensure the Trust sets goals to the highest possible standard."



### Jan Caldwell

"I am interested in client welfare and will endeavour in ensuring quality care is developed. With your support we can move forward and sustain the services of the community."



## Oldham

### John Starkey

"I bring enthusiasm, an open mind and a keen eye for detail. I will ensure local community views are considered in decisions about how money is spent and services are developed."



This is John's second term of office.

### Norma Bewley

"Having so many dealings with the NHS as a carer, I feel I have a reasonable overview of many services and want to give something back, which is why I became a governor."



### Brian Beedham

"I want to represent the views of the community on the relevant medical and social services, so that a more efficient and effective service can be provided."



## Tameside and Glossop

### Mary Allen

"I believe passionately in the NHS and its preservation. I also believe that caring, ordinary people can make a difference."



### Stephen Moss

"I want to play my part in supporting Pennine Care in providing services that meet people's needs at the time they need them and where they need them."



### Bob Muir

"My promise to you as a governor is to attend meetings, learn everything I need to support you, listen to what you have to say and be your consistent representative in the midst of great change."



## Nursing

### Dawn Hobson

"I am focused on providing and overseeing high quality patient care, whilst embracing staff wellbeing. I believe that my role as a governor will enhance my ability to ensure the Trust's principles are at the core of service delivery."



## Rest of England

### Pauline Barnett

"With complete commitment, I will take every opportunity to keep up-to-date with the priorities, decisions and changes concerning all future planning made within the Trust."



## Corporate and Support

### Lynzi Shepherd

"I am committed to developing better processes for a healthy flow of communication at all levels, especially during such progressive changes within the Trust."



This is Lynzi's second term of office.



The next meeting of the Council of Governors will be held on **Monday, 10 September 10.00 am – 12.30 pm at Open Door Church and Conference Facility, Horse Carrs, Shawclough Road, Rochdale, OL12 6LG**

This is a public meeting, which Trust members are welcome to attend. To confirm your attendance or request papers for this meeting, please contact **0161 716 3374**.



If you would like to contact any of the governors within your constituency or class, email: [governors.penninecare@nhs.net](mailto:governors.penninecare@nhs.net)

## A date for your diary

The Trust's Annual General Meeting is taking place on Wednesday 10 October 2012 at Ashton Town Hall.

Doors open – 4.00 pm  
Meeting begins – 4.30 pm

As a member of our Foundation Trust you are welcome to attend the Annual General Meeting, where you will be able to find out more about what the Trust has achieved over the last financial year and its priorities for the next. The input of our members is very important to us, so please do come along and get involved.

The meeting is also the occasion when the Annual Report and Accounts, and Auditors Report on the Accounts, are formally presented to the Council of Governors.

If you would like to attend the meeting, please contact the Membership Office on **0161 716 3960/3374** or email [ftmembership.penninecare@nhs.net](mailto:ftmembership.penninecare@nhs.net).

Further information will be posted on the Trust website:  
[www.penninecare.nhs.uk](http://www.penninecare.nhs.uk)

**It is with regret that we inform you of the sad passing of one of our former governors Jean Frankell on 25 June 2012.**

It was clear Jean was very popular and well thought of, not only by her friends and family but many of the people she served in Oldham. Our thoughts are with the family.

## Farewell to our former governors

On Wednesday 18 July, the Trust held a farewell lunch to formally thank Margaret Stoneman, Kathryn Holly, Bill Jennings, Joseph Dowthwaite, Heather Barker and Elizabeth Hartley, who stepped down from their governor roles on 30 June 2012.

The Trust would like to take this opportunity to thank the governors for the time they gave to Pennine Care, to wish them good luck and good health for the future and note their valued support to the Trust.



A special thank you to Margaret Stoneman (above) for her commitment to the Trust over the years.

The Trust is currently recruiting for volunteers. If you would like to get involved call us today on 0161 716 3178

## Stockport lifestyle event

The second lifestyle event for members took place in Stockport at Tiviot Dale Church Hall.

Services from Pennine Care and partner agencies were on hand to provide visitors with healthy lifestyles advice including blood pressure checks, weight advice, stop smoking support and information for carers. Starlight Performing Arts also gave fun taster sessions of zumba dancing, belly dancing and rockahula.

The next members' event will be held on 19 October at the Wheatsheaf Shopping Centre, Rochdale from 11.00 am – 3.00 pm.



# Bipolar disorder

Most people have heard of bipolar disorder through the media or personal experience. The condition, which used to be called manic depression, affects one to two out of every 100 people, but what does the diagnosis really mean?

Everyone's mood can go up and down, so what is different about someone with bipolar disorder? As the old term suggests, people with bipolar tend to have episodes of being really high (mania) or low (depression).

People with depression feel very down and despairing to the point where they may start to withdraw from their loved ones, have problems with motivation and stop enjoying their favourite activities. To others, a depressed person may look like they just can't be bothered with life and they may have poor self-esteem.

When someone is high, they might feel really happy with loads of energy and enthusiasm and have elevated self-confidence. This might sound like a positive experience, but these feelings can have serious consequences such as spending money you don't have or making dangerous decisions. From the outside, a person who is manic might come across as very sped-up in their thoughts and actions, not all of which make sense, and have an inflated sense of their own importance which might make them angry when challenged.

During a severe episode, people may start to have unusual beliefs

or experiences. Usually, these tend to suit the mood, for example a depressed person might believe that they have done something very wrong and hear voices criticising them, whilst a manic person might think they have special skills or powers and believe they are communicating with God.

Whilst everyone may recognise some of these experiences, the difference is in the number, intensity and duration of the mood changes which can last for weeks or even months. Everyone's experience of the disorder is different. People may remain well for years, or have one episode after the other. There are also different kinds of bipolar disorder, depending on how many episodes you have and how severe they are.

Unfortunately we don't know what causes bipolar, but it seems to run in families, so those people with affected relatives such as parents or siblings are at increased risk. Some people think that stressful life events or illicit drugs can trigger an episode.

There are lots of different ways of dealing with bipolar disorder. These include making sure there is enough support available from friends, family and healthcare staff, trying to keep physically active and managing stress. There are also medication and psychological interventions. Medication falls into two sorts, the first is to bring mood 'back to normal', for example an antidepressant. The second is a mood stabiliser, such as lithium which is taken longer-term to prevent episodes.

If you recognise these symptoms in yourself or others, it is important to speak to your GP. Most people with bipolar are involved with mental health services, and have a community psychiatric nurse and a psychiatrist to support them.

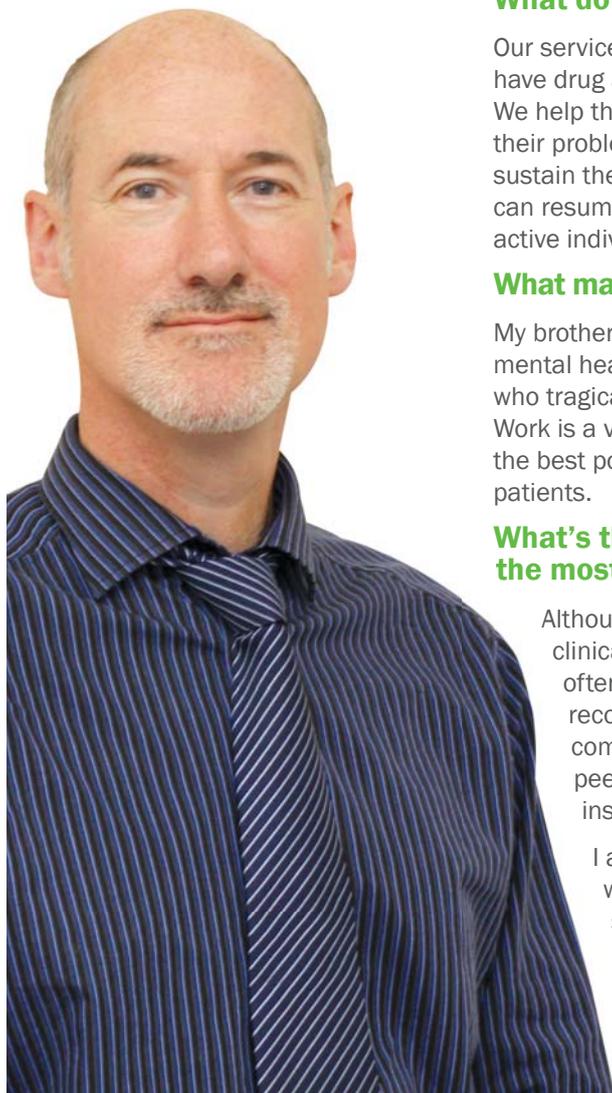
Further information is available on the following websites:

[www.nhs.uk](http://www.nhs.uk)  
[www.rcpsych.ac.uk](http://www.rcpsych.ac.uk)  
[www.mind.org.uk](http://www.mind.org.uk)



# ...of a drug and alcohol service manager

To help you get to know more about the range of services we offer, we profile a different service within each edition of Pennine Post. This time we caught up with Drug and Alcohol Services Manager, Simon Morton, who works in the Tameside and Glossop borough.



## Name

Simon Morton

## Position

Service Manager

## Location

Drug and Alcohol Services,  
Tameside and Glossop

## Time in post

Five years

## What do you do?

Our service works with people who have drug and/or alcohol problems. We help them try to overcome their problems, and to achieve and sustain their recovery, so that they can resume their lives as healthy and active individuals.

## What made you want to do it?

My brother was a long-term user of mental health and addiction services who tragically committed suicide. Work is a vocation for me. I want the best possible outcomes for our patients.

## What's the thing you enjoy the most?

Although I don't engage in clinical work anymore, I often see patients who have recovered in their roles as community champions and peer mentors, which is inspiring.

I also love partnership working because, as the saying goes, "I can't do it alone, together we can."

## What's the hardest thing?

Unfortunately, the risks of active addiction, particularly heavily drinking alcohol heavily, or injecting drugs, are serious and sometimes fatal. It's very sad to lose a patient you've known for many years.

## What sort of patients do you see?

We see any adult who has a problem with alcohol or drugs. Increasingly we see people who have problems with alcohol, cannabis and cocaine combinations as well as heroin. A significant number of patients are offenders and revolve through the doors of our prisons.

## What is the most rewarding aspect of your job?

Seeing the happiness of family members who have regained and 're-found' their sons, daughters or loved ones. An ex-patient of my service is now a national champion of self-managed recovery training.

He told me that he recently paid his mum a surprise visit and found her gardening. She looked up startled, and rather than looking fearful as she used to, she beamed at him.

## How do you unwind after a tough day?

Watching football with my nine year old son Sam. I'm a red, and he's a blue. How did that happen?

## What did you want to be when you were younger?

I wanted to be a factory inspector.