## TRUST INDUCTION PROGRAMME

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.45am</td>
<td>Registration and photo ID badges</td>
<td></td>
</tr>
<tr>
<td>9.00am</td>
<td>Welcome</td>
<td>Management &amp; Interpersonal Skills team</td>
</tr>
<tr>
<td>9.15am</td>
<td>Achieving a successful partnership between UHS and <strong>you</strong></td>
<td>Management &amp; Interpersonal Skills team</td>
</tr>
<tr>
<td>10.05am</td>
<td>Looking after the whole person</td>
<td>Trust Chaplain</td>
</tr>
<tr>
<td>10.20am</td>
<td>Looking after yourself – Health and safety awareness</td>
<td>Health and safety representative</td>
</tr>
<tr>
<td>10.35am</td>
<td>Smoking cessation</td>
<td>Southampton Quitters</td>
</tr>
<tr>
<td>10.40am</td>
<td><strong>BREAK</strong></td>
<td>Attended by library and hospital charity representatives Photo ID badges</td>
</tr>
<tr>
<td>11.00am</td>
<td>Quality Governance</td>
<td>Governance representative</td>
</tr>
<tr>
<td>11.50am</td>
<td>Hand washing</td>
<td>Infection Control Nurse</td>
</tr>
<tr>
<td>12.25pm</td>
<td>Customer Care</td>
<td>Management &amp; Interpersonal Skills team</td>
</tr>
<tr>
<td>1.10pm</td>
<td>Final thoughts</td>
<td>Management &amp; Interpersonal Skills team</td>
</tr>
<tr>
<td>1.15pm</td>
<td>Lunch</td>
<td></td>
</tr>
</tbody>
</table>

**FOR all nursing, midwifery and ward based support staff**
(bands 2-4 housekeepers, HCA, SHCA, Associate nurse practitioner, bands 5-7 including research)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.50 - 3.00pm</td>
<td>Nursing session on code of conduct and professional standards</td>
</tr>
<tr>
<td>3.00 - 4.30pm</td>
<td><strong>E-learning session</strong> – to start on list below</td>
</tr>
</tbody>
</table>

**FOR all other staff**

<table>
<thead>
<tr>
<th>Time</th>
<th>E-learning session</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.50 - 4.30pm</td>
<td>IT skills assessment 5 mins, Fire 30 mins, Health and safety 45 mins, Manual Handling - non-clinical staff do not complete patient handling section 30 mins, Equipment - non-clinical staff do not complete medical equipment section 15 mins, Infection prevention 15 mins, Resus Services slide show 5 mins</td>
</tr>
</tbody>
</table>
Welcome to University Hospital Southampton NHS Foundation Trust

This folder aims to help you in the initial period of your employment with UHS by providing a checklist of information that is paced over your first three months.

It also includes a question and answer section that enables you to go into the Trust and find out information for yourself.

Your Manager or Supervisor will meet with you regularly to help you progress through the checklist.

Retain this record of your departmental induction for your records. Your manager/supervisor will require a photocopy for your personal file.

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**WEEK ONE**

<table>
<thead>
<tr>
<th>Activity</th>
<th>✓/x</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reception</strong></td>
<td></td>
</tr>
<tr>
<td>New employee welcomed</td>
<td></td>
</tr>
<tr>
<td>Introduction to Department Manager</td>
<td></td>
</tr>
<tr>
<td>Shown Agenda for Change Terms &amp; Conditions on Staffnet</td>
<td></td>
</tr>
<tr>
<td>Introductions to the team/department</td>
<td></td>
</tr>
<tr>
<td>Receipt of identity badge</td>
<td></td>
</tr>
<tr>
<td><strong>Section or Department</strong></td>
<td></td>
</tr>
<tr>
<td>Tour of Department</td>
<td></td>
</tr>
<tr>
<td>Cloakroom and toilet facilities and Lockers</td>
<td></td>
</tr>
<tr>
<td>Fire Exits</td>
<td></td>
</tr>
<tr>
<td>System for raising alarm</td>
<td></td>
</tr>
<tr>
<td>First aid points – if applicable</td>
<td></td>
</tr>
<tr>
<td>Staff Restaurants and nearby refreshment facilities</td>
<td></td>
</tr>
<tr>
<td>Uniform arrangements and appearance policy</td>
<td></td>
</tr>
<tr>
<td>Notice boards and communications, e.g. Team Meetings, Core Brief, Connect</td>
<td></td>
</tr>
<tr>
<td>Telephone facilities and use of phone card to make personal calls</td>
<td></td>
</tr>
<tr>
<td>Transport arrangements and Travelwise</td>
<td></td>
</tr>
<tr>
<td>Access to Trust IT systems including Staffnet</td>
<td></td>
</tr>
<tr>
<td>Governance structure and named leads in your area</td>
<td></td>
</tr>
<tr>
<td>Complaints procedure</td>
<td></td>
</tr>
<tr>
<td>Local handover policy for clinical and non-clinical staff</td>
<td></td>
</tr>
<tr>
<td><strong>The Department</strong></td>
<td></td>
</tr>
<tr>
<td>Outline of new employee’s role within the team</td>
<td></td>
</tr>
<tr>
<td>Management and Divisional and Care Group structure</td>
<td></td>
</tr>
<tr>
<td>Colleagues - buddy and sources of help and advice identified with their contact details</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td></td>
</tr>
<tr>
<td><strong>Conditions of Employment</strong></td>
<td></td>
</tr>
<tr>
<td>Contract of employment, hours of work including overtime, lunch and tea breaks, notice period</td>
<td></td>
</tr>
<tr>
<td>Outline limitations and constraints of job</td>
<td></td>
</tr>
<tr>
<td>Time of payment, pay slip explained</td>
<td></td>
</tr>
<tr>
<td>Income Tax, National Insurance and other deductions</td>
<td></td>
</tr>
<tr>
<td>Holidays and local arrangements for leave</td>
<td></td>
</tr>
<tr>
<td>Managing Attendance Policy and how to report sickness including special leave policy</td>
<td></td>
</tr>
<tr>
<td>Occupational sick pay and sick pay scheme</td>
<td></td>
</tr>
<tr>
<td>Medical screening and occupational health department</td>
<td></td>
</tr>
<tr>
<td>Pension scheme booklets received</td>
<td></td>
</tr>
<tr>
<td>Procedure for completion of travel claims and timesheets</td>
<td></td>
</tr>
<tr>
<td><strong>Development and Training</strong></td>
<td></td>
</tr>
<tr>
<td>Introduction to Appraisal process and Knowledge and Skills framework</td>
<td></td>
</tr>
<tr>
<td><strong>Health and Safety</strong></td>
<td></td>
</tr>
<tr>
<td>Fire, Health and Safety Induction from group leaders</td>
<td></td>
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<tr>
<td>First Aider - local contact name and number</td>
<td></td>
</tr>
<tr>
<td>Personal security</td>
<td></td>
</tr>
<tr>
<td>Reporting of Adverse Incidents and Risk Management – local trigger events</td>
<td></td>
</tr>
<tr>
<td>Emergency protocols – cardiac arrest, needle stick</td>
<td></td>
</tr>
<tr>
<td>Infection control and hand washing</td>
<td></td>
</tr>
<tr>
<td>Trained in relevant equipment and procedures</td>
<td></td>
</tr>
<tr>
<td>Major Incident Awareness Training</td>
<td></td>
</tr>
<tr>
<td><strong>HR Policy and Procedures</strong></td>
<td></td>
</tr>
<tr>
<td>Location of HR Policies and Procedures on Staffnet</td>
<td></td>
</tr>
<tr>
<td>Single Equality Scheme Policy</td>
<td></td>
</tr>
<tr>
<td>Disciplinary procedure</td>
<td></td>
</tr>
<tr>
<td>Performance management policy</td>
<td></td>
</tr>
<tr>
<td>Managing Attendance Policy</td>
<td></td>
</tr>
<tr>
<td>Special Leave policy including work break schemes and job share register</td>
<td></td>
</tr>
<tr>
<td>Alcohol and Drugs Policy</td>
<td></td>
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<tr>
<td>Smoke-Free Site Policy</td>
<td></td>
</tr>
<tr>
<td>Appearance Policy</td>
<td></td>
</tr>
<tr>
<td>Flexible Working Policy</td>
<td></td>
</tr>
<tr>
<td>Email and Internet Security Policy</td>
<td></td>
</tr>
<tr>
<td>Confidentiality issues / Data Protection Act</td>
<td></td>
</tr>
<tr>
<td>Grievance / disputes procedures</td>
<td></td>
</tr>
<tr>
<td>Eliminating Bullying and Harassment what to do if harassed or bullied by a member of staff, patient or visitor – explanation of Dignity at Work Advisors</td>
<td></td>
</tr>
<tr>
<td>Location of Health &amp; Safety &amp; Security Policies</td>
<td></td>
</tr>
<tr>
<td>Guidance to staff on raising concerns / whistle blowing including Counter Fraud policy</td>
<td></td>
</tr>
<tr>
<td>Other (please list here additional points to be covered of a local nature)</td>
<td></td>
</tr>
</tbody>
</table>
### MONTH ONE

<table>
<thead>
<tr>
<th>Activity</th>
<th>✓/✗</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Development and Training</strong></td>
<td></td>
</tr>
<tr>
<td>Attendance at Trust Induction</td>
<td></td>
</tr>
<tr>
<td>Content of local and Trust wide training programmes</td>
<td></td>
</tr>
<tr>
<td>Training booking system via OLM on the Staffnet</td>
<td></td>
</tr>
<tr>
<td>Training Records / progress sheets/portfolios</td>
<td></td>
</tr>
<tr>
<td>Further education facilities e.g. Health Services Library/Cyber Centre/Education Centre</td>
<td></td>
</tr>
<tr>
<td>Statutory and Mandatory + Medical Equipment Training discussed</td>
<td></td>
</tr>
<tr>
<td><strong>Personal Development</strong></td>
<td></td>
</tr>
<tr>
<td>Review of job description</td>
<td></td>
</tr>
<tr>
<td>Appraisal to set objectives and review against Knowledge and Skills Framework (KSF) outline</td>
<td></td>
</tr>
<tr>
<td><strong>Employee involvement and communication</strong></td>
<td></td>
</tr>
<tr>
<td>Team meeting and Core Brief</td>
<td></td>
</tr>
<tr>
<td>Role of Staff Partnership Forum - local representative</td>
<td></td>
</tr>
<tr>
<td>Trade Union/Professional Organisation recognition</td>
<td></td>
</tr>
</tbody>
</table>

### MONTH THREE

<table>
<thead>
<tr>
<th>Activity</th>
<th>✓/✗</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Personal Development</strong></td>
<td></td>
</tr>
<tr>
<td>Review of Induction procedure – Trust induction and local induction</td>
<td></td>
</tr>
<tr>
<td>Review of activities outstanding from first three months and action plan to address them</td>
<td></td>
</tr>
<tr>
<td>Appraisal with Line Manager discussing achievement of KSF outline and career development</td>
<td></td>
</tr>
<tr>
<td><strong>Additional local information not already covered:</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Training Required</th>
<th>Date</th>
<th>Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customer care</td>
<td></td>
<td>Completed via Trust Induction day presentation</td>
</tr>
<tr>
<td>Equipment training</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
<tr>
<td>Governance including complaints handling &amp; incident reporting</td>
<td></td>
<td>Completed via Trust Induction day presentation</td>
</tr>
<tr>
<td>Fire safety</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
<tr>
<td>Health and safety</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
<tr>
<td>Hand hygiene</td>
<td></td>
<td>Completed via Trust Induction day presentation</td>
</tr>
<tr>
<td>Hazardous substances</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
<tr>
<td>Infection prevention and PPE</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
<tr>
<td>Moving and handling theory</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
<tr>
<td>Slips, trips &amp; falls</td>
<td></td>
<td>Should be completed via Trust Induction day e-learning</td>
</tr>
</tbody>
</table>

**Stat and mand training to complete as part of LOCAL induction**

<table>
<thead>
<tr>
<th>Training Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood transfusion</td>
</tr>
<tr>
<td>Child protection</td>
</tr>
<tr>
<td>Conflict resolution</td>
</tr>
<tr>
<td>Equality and diversity</td>
</tr>
<tr>
<td>Information Governance</td>
</tr>
<tr>
<td>Medical devices</td>
</tr>
<tr>
<td>Mental capacity</td>
</tr>
<tr>
<td>Resus basic</td>
</tr>
<tr>
<td>Safeguarding adults</td>
</tr>
<tr>
<td>Venous Thrombo Embolism</td>
</tr>
</tbody>
</table>

This learning log must be used as part of the Appraisal Process and must be presented at meetings with your appraiser.
USEFUL NUMBERS AND CONTACTS

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
<th>Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operator</td>
<td>100</td>
<td>Bleep operator</td>
<td>1010</td>
</tr>
<tr>
<td>Cardiac Arrest and other</td>
<td>2222</td>
<td>Dial a bleep</td>
<td>15</td>
</tr>
<tr>
<td>emergencies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire</td>
<td>2222</td>
<td>Health and Safety</td>
<td>8484</td>
</tr>
<tr>
<td>Hospital Chaplain (Secretary)</td>
<td>8517</td>
<td>Occupational Health</td>
<td>4156</td>
</tr>
<tr>
<td>Outside line</td>
<td>9</td>
<td>H.R. Department</td>
<td>6304</td>
</tr>
<tr>
<td>Security Control Room</td>
<td>4122</td>
<td>Security Emergency</td>
<td>3333</td>
</tr>
<tr>
<td>Travelwise</td>
<td>4133</td>
<td>Uniform queries</td>
<td>6278</td>
</tr>
<tr>
<td>Uniform room</td>
<td>4463</td>
<td>British Medical Association</td>
<td>01962 856760</td>
</tr>
<tr>
<td>RCN Representative</td>
<td>07669 177436</td>
<td>UNISON Office</td>
<td>6870</td>
</tr>
<tr>
<td>Your extension</td>
<td></td>
<td>Your manager’s extension</td>
<td></td>
</tr>
</tbody>
</table>

**Trust Strategy 2020 Vision:**
“Our goal is to be the country’s leading centre of clinical and academic achievement within ten years and to establish a world-class reputation by 2020. We will constantly improve patient care and foster innovation in an organisation that exceeds the expectations of patients and meets the needs of its purchasers and providers… We will offer a more attractive place to work, learn and research than any of our competitors and be rated by our customers as consistently excellent in everything we do.”

**Strategic Objectives:**
- Delivering for tax payers
- Trusted on quality
- Excellence in health care

**Trust values:**
- Patients first
- Working together
- Fresh thinking
Your hospitals at a glance

We own and manage two hospitals located on a large campus in the Hollybrook area of Southampton. The campus is also home to several University of Southampton departments that undertake leading edge research into the prevention, diagnosis and treatment of disease.

Southampton General Hospital

This large hospital, which houses the majority of our departments, services and facilities including:

- Specialist services allied to strong research programmes:
  - Cancer Care
  - Cardiothoracic services (heart and lung)
  - Neurosciences (brain injury and neurological illness)
  - Respiratory Medicine (lung conditions including asthma)
  - Upper and lower gastrointestinal services

- Services for the critically ill including:
  - Adult and paediatric intensive care
  - Neurosciences intensive care
  - Cardiac intensive care
  - Medical and surgical high dependency units

- Specialist children’s services including:
  - Cancer
  - Digestive disorders
  - Hearts
  - Brain injuries and neurological conditions
  - Haematology (blood disorders)
  - Ear, Nose and Throat
The Princess Anne Hospital

On a site adjacent to Southampton General Hospital this hospital offers a range of services based on its outstanding reputation for women and children's services including:

- Obstetrics
- Foetal medicine (babies in the womb)
- Neonatal medicine (newborn babies) including intensive care
- Early pregnancy unit
- Ultrasound department
- Southampton and Salisbury Breast Imaging Unit
- Breast surgery
- Clinical genetics
- Gynaecology
- Fertility

Countess Mountbatten House

We own and manage this large hospice on the outskirts of Southampton in which we provide a palliative care service, mainly to cancer patients.

Working in the community

We run a number of services including dermatology, audiology and outpatient clinics at the Royal South Hants hospital in Southampton and undertake outpatient clinics at the Lymington New Forest Hospital. Our midwives provide a community midwifery service for the City of Southampton and surrounding area.
Your future hospital – our service vision

As a hospital with an exciting future we have made some bold plans to expand and develop our world-class services in Southampton.

We want you to share our vision for the future and help us achieve our aims. Please take this opportunity to read about our plans and comment on them. Your views will be taken seriously.

Defining Services
We plan to develop six of our strongest services into centres of excellence. Staff from different disciplines will work together in these centres to care for patients, develop leading edge treatments and train the next generation of health professionals.

We will offer these specialist services to patients beyond the Southampton area, and invest in building larger teams that can offer the highest standards of care.

Our defining services will be a beacon for the hospital and they are:

- Heart disease and circulation
- Respiratory medicine
- Brain injury and disease
- Women and children’s services
- Cancer
- Gastrointestinal medicine

These services will be supported by the development of extensive critical care facilities that will enable us to care for the most complex and seriously ill patients in the region.

Local Services
At the same time we will continue to deliver services for local people who have a long history of using our hospitals.

Working with our NHS partners, we will develop co-ordinated and innovative services for the care of common chronic diseases such as diabetes, heart failure and respiratory conditions like asthma.

We will also develop our emergency service into a leading centre for complex emergencies and support the development of community services for minor emergencies. Our diagnostic services will grow so that treatments can begin more rapidly.

We will also continue to provide services for the people of Southampton who would prefer to come to us for routine surgery or treatment. However, we will work with family doctors to encourage patients to be treated in a community hospital, GP surgery or in their own home where it is safe and appropriate to do so.
What does the NHS Constitution do?

- Brings together in one place what staff, patients and taxpayers can expect
- Forms the basis of a new relationship between staff and patients
- Describes everyone's responsibilities staff, patients and the public
- Confirms that the NHS belongs to us all
- Details all existing rights for staff, patients and the public
- Sets out for the first time new rights for patients the right to make choices about their care
- Sets out principles and values

The NHS Constitution sets out a vision in which all staff should be trusted, be actively listened to and have the confidence to act in the interests of patients.

- The NHS Constitution sets out a commitment to engage staff in decisions that affect them and the services they provide.
- It commits the NHS to providing staff with clear roles and responsibilities, rewarding jobs, personal development and training for their jobs.
- It confirms a commitment to providing high-quality working environments that promote health, well-being and safety.
- It introduces The Statement of NHS Accountability, which clarifies roles and responsibilities within the NHS.
- The NHS Constitution publishes a clear statement of what the NHS will do for Patients.
- It establishes a set of NHS-wide values.
- It lists specific patient responsibilities, that provide a basis for relationships between staff and patients that are fair and effective.

Additional information can be found under NHS constitution www.nhs.uk or www.dh.gov.uk
Wellbeing and Support

Childcare Nurseries       Creche
Holiday play scheme       Flexible working
Annual leave planning    Pensions scheme
Career support service   Library
Annual appraisal         Training & development
Active workplaces – fitness for staff
IT access via cyber centre & cyber zones
  Occupational health department
  Employee assistance programme
  Chaplaincy support
Catering to suit all tastes
Charity events & fun runs Lottery
  NHS Discounts website
  Southampton City Quitters
  Key worker living opportunity
  Bikes for work tax-free scheme
Other benefits on staffnet under Staffroom

Staff Information
Core Brief – monthly briefing from Chief Exec
Staffnet – internet site for all staff
Connect magazine – general interest magazine for staff & patients
Quitters - Smoking Cessation Training

Facilitator(s) Lisa Hodges & Hazel Agombar

Target Audience
This session is for all staff working with patients at University Hospital Southampton.

Learning outcomes
To enable you to confidently raise the issue of smoking status with your patients, to identify and support smokers who are motivated to quit, to know how to refer to Southampton Quitters and to briefly explain what patients can expect from Southampton Quitters.

Programme details
This course provides you with the knowledge and skills to raise the issue of smoking with your patients, support those who are motivated to quit and to understand how to refer to the local stop smoking service, Southampton Quitters.

It highlights the importance of smoking cessation as the most cost effective clinical intervention which produces better health outcomes for patients and saves NHS resources.

The session will explain what your patients can expect from Quitters and outline the stop-smoking medications that are available.

*************** FREE Refreshments at this session ***************

‘Stop Smoking’ Drop-In for all staff members
Every Wednesday 11am – 1pm
The Spice of Life (B Level)

For more information call 023 8051 5221 or just drop in!
UHS communications team

The communications team is part of Trust HQ and deals with press enquiries, promotes the good work of the Trust, develops the Trust's website and intranet, manages internal communications such as Connect and Core Brief, engages the hospital's members, has responsibility for consultation and managing the Trust's corporate identity.

For full details see http://staffnet/Departments/TrustHQ/Communications/Communications.aspx

Please do not deal with their enquiry yourself. Ask them to contact the press officer on 023 8079 8756.

Media calls outside normal office hours should be directed to the duty manager.

We will only carry out condition checks if the reporter has the full name of the individual patient concerned, and these requests must be referred to the press officer.

Under no circumstances may interviews, filming or photography be carried out on or around Trust sites without the prior permission of the communications team.

A note about corporate identity

The Communications team has responsibility for managing the Trust’s corporate identity, including use of the logo.

For advice in the meantime email sarah.cole@uhs.nhs.uk or ring ext. 8773.

Where can you find out more?

To find out more about the communications team and all of the above ways we communicate with you, plus how you can share your news with us, see our pages on Staffnet http://staffnet/Departments/TrustHQ/Communications/Communications.aspx
UHS Structure

Division A
- Surgery
- Cancer care
- Critical care & Theatres

Division B
- Emergency Medicine
- Specialist Medicine
- Ophthalmology
- Radiology
- Pathology

Division C
- Women & Newborn
- Child health
- Support services
- Clinical Support including Pharmacy, Medical Physics
- Non-clinical support including Portering, Security, Medirest, Patient and Catering Services

Division D
- Cardiovascular & Thoracic
- Neurosciences
- Trauma & Orthopaedics

Headquarters
- Bereavement Care
- Chaplaincy
- Communications
- Corporate Affairs
- Cost Improvement
- Estates & Capital Development
- Finance
- Governance
- Human Resources
- Training and development
- Information Management (IM&T)
- Litigation & Insurance Services
- Patient Support Services
- Research & Development
- Strategy
UHS Trust Board Members

John Trewby, Chairman
Joined the Trust in April 2008 as Chairman, appointed by Trust Board.

Mark Hackett, Chief Executive
Mark joined the Trust as Chief Executive on 2 August 2004.

Jane Hayward, Chief Operating Officer

Michael Marsh, Medical Director

Judy Gillow, Director of Nursing

Alastair Matthews, Director of Finance & Deputy CEO

Members Council

The Members’ Council is the collective body through which executive and non-executive directors explain and justify their actions. It works closely with the Trust Board to make sure services are meeting the needs of the local community.

The Members’ Council consists of 23 members who will gather the views of the hospital's members and give them a voice at the highest level of the organisation. These representatives have certain roles and responsibilities and must carry out statutory duties.

All staff within the Trust are automatically members of the hospital and belong to a constituency unless they opt out.

Public Elected Council Members
13 from Southampton City, New Forest, Eastleigh and TestValley, Isle of Wight and Rest of England

Staff Elected Council Members
4 from Medical & Dental, Nursing & Midwifery, Other Clinical and Non-Clinical Support

Appointed Members
6 from local stakeholders including the Council, PCTs, University and local business

Members’ Council Meetings
• Full Members’ Council Meetings held every three months
• Sub-groups on:
  o patient experience
  o staff experience
  o strategy
- membership and engagement strategy
  - For meeting dates see Website or contact Head of Corporate Affairs on 023 8079 6829
  - If you have any issues to raise please contact your Council Member

Full Members’ Council meetings are held every three months, and all the meetings are open to the public – including staff.

Who are your Council Members?

Medical and dental - Brian Birch

Nursing and midwifery - Pat Kemish

Other clinical staff - Kieran Hand

Non-clinical and support staff - Gordon Kemish

Each Council Member is willing to help staff with any issues that affect the way that the hospital works as a foundation trust. They can be contacted through Staffnet and Outlook.

All staff Council Members sit on the Staff Experience Group. Elections for the Nursing and Midwifery and Non-Clinical and Support Council Members will be held in the summer of 2013 and we hope that those constituent members will put themselves forward for election and participate in the voting. Elections for the Medical and Dental and Other Clinical Council Members will be held in 2014.
Welcome to UHS

At UHS we have an active staff side who are committed to true Partnership working and aim to keep our members informed about what is happening within the Trust and the NHS.

Our monthly meetings are well attended by nominated representatives of all unions, and a bi-monthly meeting with management at Staff partnership Forum ensures good communications.

Please consider joining a union and supporting staff side. All of the unions listed below have accredited representatives in UHS;

- BAOT (British Association of Occupational Therapists)
- BDA (British Dental Association)
- BIOS (The Association of Biochemists)
- BMA (British Medical Association)
- BOS (British Orthoptic Society)
- CDNA (The Community and District Nursing Association)
- CSP (Chartered Society of Physiotherapy)
- FCS (Federation of Clinical Scientists)
- GMB
- HPA (Hospital Physicist's Association)
- RCM (The Royal College of Midwives)
- RCN (The Royal College of Nursing)
- SoCP (The Society of Chiropodists and Podiatrists)
- SoR (The Society of Radiographers)
- UCATT (Union of Construction, Allied Trades & Technicians)
- Unison
- UNITE
- USDAW (The Union of Shop, Allied and Distributive Workers)

To speak to a union representative about joining or for other information please contact the Trade Union Office on ext 6870, mail point 404, SGH.

You could also become a Union Learning Rep (ULR) if you are interested in helping your colleagues learn new skills and feel you would like to make a difference by encouraging other workmates into learning. If you are interested please contact the Trade Union Office on ext 6870, mail point 404, SGH.
Some HR Policies you should be aware of

- Alcohol & Drugs
- Appearance
- Business Conduct
- Complaints
- Data protection
- Development Reviews (appraisals)
- Eliminating Bullying and Harassment
- Disciplinary Rules
- Education and Learning
- Flexible Working
- Fire Safety
- Fraud
- Gateways policy for Development Reviews (appraisals)
- Grievances and Disputes
- Health & Safety
- Managing Attendance
- Maternity Leave and Pay
- Pay and Employment Conditions Protection of
- Raising Concerns - Whistle blowing
- Retirement
- Single Equality Scheme
- Smoke Free Site
- Staff Induction
- Special Leave
- Trust Travel
- Violence & Aggression Prevention

Policies are available on Staffnet under Working Here and HR Policies.
Trust Phone Cards

Phone cards are the **ONLY** way of making **personal** telephone calls or sending personal faxes from the hospital telephones. **All staff** should have one as you never know when you may need to use the telephone – even if you have a mobile your battery may be flat or you may not wish to pay the high call charges. Judging by the amount of outgoing calls to banks, catalogue companies, theatres and travel companies we all need one!

These phone cards can be used from **any** phone with the hospital or outside as well!

Phone cards are simple to use – no hidden charges – no bills – no VAT – no forms to fill in – a £5.00 card buys £5.00 worth of calls – what you pay is what you get!

The phone cards can be topped up using major credit cards and can be used by staff, relatives and visitors.

The phone cards are available from switchboard in core hours only and at the RSH cashiers office.

**Trust volunteer interpreting service**

Voluntary services are also looking for more members of staff to sign up as interpreters and are particularly keen to hear from Polish and Portuguese speakers. The University of Southampton runs a 12-week course at the General Hospital, for anyone wishing to become a volunteer interpreter.

**Regular courses are held**

For an information pack on volunteer interpreters, please contact **Kim Sutton on 4688 or email kim.sutton@uhs.nhs.uk**

Staff should only book a paid service if there is no appropriate interpreter available, and they must obtain authorisation from a senior manager. The first choice paid service is Access to Communication, followed by Language Line and finally Lingland Interpreters if the others are unable to help.

Please also be aware that only trained interpreters should be used. In the interests of accuracy, accountability and confidentiality, family members and friends should not be used as interpreters.
Confidentiality & Data Protection

Staff Code of Conduct

Information for All Staff

Everyone working for the NHS has a legal duty to keep information about patients and clients confidential and to protect the privacy of information about individuals.

In the course of your work you will be called on to handle and see person-identifiable information whether it be stored on paper or on computer. You are responsible for safeguarding the confidentiality of all personal and Trust information, transmitted or recorded by any means. You must not discuss or disclose such information except to authorised personnel.

If you are found to have made an unauthorised disclosure of personal information it is a disciplinary offence, you could also face prosecution. If you are in doubt as to which disclosures are unauthorised, check with your manager.

This leaflet is designed to help you understand the regulations and your responsibilities to maintain confidentiality.

All Staff

All staff should be aware of the principles outlined in the Data Protection Act 1998 and the requirements placed on them by the common law ‘duty of confidence’ impact on their work.

If you belong to a professional group e.g. nurse, doctor, physiotherapist, you are subject to the confidentiality clauses of your professional Code of Conduct. You should ensure that you are familiar with the specific responsibilities of your professional code.

Personal Data

Personal data is any information which can be used to identify a living person or facts about them, including opinions or intentions towards them.

Data Protection Act 1998

The Data Protection Act has eight Data Protection Principles, which cover the use of "personal data". The Data Protection Act sets standards, which must be satisfied when obtaining, recording, holding, using or disposing of personal data.

Personal data must be:
1. Processed fairly and lawfully
2. Processed for specified purposes only
3. Adequate, relevant and not excessive
4. Accurate and up-to-date
5. Not kept for longer than necessary
6. Processed in accordance with the rights of data subjects
7. Protected by appropriate security
8. Not transferred outside the European Economic Area

Consent to Use Personal Data

Patients have generally consented for their personal information to be used in connection with the provision of direct healthcare. Use or disclosure of patient information for other purposes such as research or education cannot be assumed and individual consent should normally be sought from the patient to use personal information for non direct care purposes.

If a patient wishes to restrict the disclosure of their personal information in any way their wishes should be respected.

If in doubt about using personal information in any way, please consult the Data Protection office for advice.
Disclosure of Personal Data
Unauthorised disclosure of personal data constitutes a serious breach of discipline and could lead to dismissal. Staff should ensure personal information is only disclosed for legitimate purposes and to those authorised to receive it. Particular care should be exercised when disclosing personal data on the telephone or considering the release of personal data to a third party outside the NHS.

Keeping Personal Data Secure
Personal data should be kept secure at all times. All staff have duty to ensure any personal information they hold on paper or digital form is protected from loss or accidental disclosure at all times.

When transferring personal data by any means Trust guidelines on secure communications should be followed. The use of NHS mail as a means of securely sending personal data within the NHS is recommended.

Subject Access to Personal Data
Individuals have a right under the Data Protection Act 1998 to view or obtain copies of information held about them by organisations. Patients inquiring about their right of ‘subject access’ should be advised to contact the Health Record Information Team, Patient Advice and Liaison Service (PALS) or consult the Trust public website for information and advice. Trust staff should apply to the Human Resources department in respect of personal information held by the Trust about them.

Health Records Information Team: 02380 748005 or 02380 794885
Trust PALS: 02380 798498
Trust Public Website: www.uhs.nhs.uk

Breaches of Confidentiality
If you think that a breach of confidentiality has taken place please report it as a non-clinical incident using the Trust incident management reporting mechanism.

Caldicott
The Trust is required to have a Caldicott Guardian to safeguard and govern the uses made of confidential patient information.

The Trust Caldicott Guardian is:
Director of Nursing and Patient Services

Remember
• You have a legal duty to keep any personal data you handle secure at all times and to ensure it is not released without appropriate consent
• The use of personal data for purposes other than direct care may need specific consent from the patient
• Health Records belong to the Secretary of State and the Trust. It is a disciplinary offence to access your own, family or others records
• There are monitoring facilities in place that can identify individuals who access information on the Trust systems inappropriately
• To follow the guidance contained in the Trust Confidentiality and Data Protection Policy and keep up to date by completing the training offered as part of the Trust Mandatory Training programme.

If you have any queries on confidentiality or Data Protection issues please contact:

The Data Protection Office: Extn 5079
Hampshire and Isle of Wight Counter Fraud Service

Fraud: recognise it, report it and stop it!

It is important that everyone working in the Trust understands the risks of fraud and what the Trust is doing to tackle the problem. The cost of fraud to the UK is currently estimated at £73 billion per year of which losses to the NHS are thought to be at least £3 billion. Whatever the true figure, it is not a victimless crime; your taxes help to fund the Trust, as an employee your department's budget could be affected and it could mean fewer resources for patient care.

When are someone's actions fraudulent?

A person must be behaving / have behaved dishonestly with the intention to make a gain or to cause a loss by lying about something. It doesn't matter whether the lie is verbal or written down. The person committing fraud doesn't have to be successful so long as the intent exists.

What is the Trust doing to tackle fraud?

The Trust has appointed a Local Counter Fraud Specialist who undertakes a range of duties to minimise the impact of fraud on the organisation. This includes work to make it difficult to commit fraud, efforts to deter fraudsters and investigating concerns when they are raised. The Trust actively promotes an 'anti fraud culture' by creating an environment where it is safe to raise genuine concerns and where we all work together to send a clear message that fraud will not be tolerated.

Test your knowledge (answers overleaf):

What should you do if you have a concern?

1. Confront the suspect
2. Wait and see what happens
3. Contact the Local Counter Fraud Specialist
4. Tell a colleague or manager

How much information do you need before you raise a concern?

1. One piece
2. A reasonable suspicion
3. No information
4. A 'gut feeling'
Answers:

If you have a concern, contact the LCFS immediately.
The LCFS will determine who else should be informed e.g. Human Resources. Please don’t confront someone, it may put you at risk and could jeopardise an investigation. Waiting to see what happens could allow fraud to become worse. By telling a colleague or a manager risks giving someone else who may be involved an opportunity to disguise their actions. Collusion is rare, but it does happen.

You can raise a concern if you have a reasonable suspicion.
The Trust is legally obliged to support a person’s right to raise a concern where it is genuinely founded. (The Trust will always take appropriate measures to protect people from malicious allegations).

What types of offence have been investigated at the Trust?
- People claiming payment for work they haven’t done
- Employees taking time off work due to sickness but working elsewhere
- Patients forging prescriptions
- Job applicants lying about qualifications or experience
- Contractors submitting invoices for work which wasn’t undertaken

Who should I speak to if I have concerns?
You should contact the Local Counter Fraud Specialist (LCFS) who is Jennison Baskerville.
Jennison can be contact on:
07881 954851 (mobile)
01962 876668 (landline)
jennison.baskerville@hampshire.nhs.uk

Need further information?
Read the quarterly “Fraud Matters” newsletter on the Staffnet (search for ‘fraud’) Visit a drop-in session on the next education rolling half day (select the Staffnet front page dropdown menu item ‘your development’) Visit the fraud team’s website www.hampshire.nhs.uk/fraud
Remember, fraud isn’t a victimless crime; by being aware and referring any concerns you can help to make a real difference and protect the Trust.
Waste Disposal Information

Total cost is £100,000 on Domestic disposal & £600,000 on Clinical = £700,000

This Trust produces approximately 1200 tonnes of clinical waste and 1400 tonnes of domestic waste each year.

Disposal costs
Clinical waste is separated into:

- clinical sharps/ medicinal glass bottle waste @ £612/tonne and
- clinical waste as in yellow clinical waste bags @ £419/tonne

Domestic waste £98 tonne

UHS spends £700k on waste (clinical and domestic combined). If we could reduce the amount of clinical waste by segregating properly and not contaminating this waste stream with inappropriate waste such as cardboard, paper, plastic or recyclables or domestic waste, it would be a huge saving to the Trust and more environmentally friendly.

Currently we are negotiating with our local Council to have our recyclable glass taken away for FREE and recycled and used under road surfaces. If this were not sent for recycling it would go into the costly clinical waste stream at £612/tonne, so your glass bottles would be gratefully received!

Currently the Trust has two waste streams for cardboard recycling; larger cardboard items are collected and flattened by the ward areas, placed in a green cage and sent to the waste management area. Here is it bailed and sent to a company for recycling. We currently receive a rebate of £30/tonne via this recycling avenue.

Waste Segregation
Segregation of waste is essential to ensure that all waste is disposed of correctly and safely and in the most cost effective way. For example a clinical waste bag filled with domestic waste will be charged as clinical waste. Research shows that 40-50% of waste found in clinical bags is domestic waste. Please think of the cost difference.

Clinical Waste
Ensure everything clinical goes into a yellow bag. This includes any items that have been in contact with body fluids such as dressings, gloves, aprons and sanitary towels.

Sharps
Sharps must be placed in the yellow sharps bin with a secure lid - Never put needles/sharps in a yellow bag. This is important to reduce injury and cross infection to staff.

Domestic Waste
All other non-clinical waste that cannot be recycled including packaging, food waste, paper towels etc must be placed into the black domestic waste bags.
Other Waste

Mixed recycling bins will take: plastic bottles, cans, tins, milk cartons, packaging from clinical areas. This has helped segregate from domestic waste and inadvertent clinical waste. Recycle as you would at home but please remember NO FOOD or containers with food debris on them. Please rinse cans or cartons such as soup cans or milk cartons, Crush milk containers and remove the lids. The lids do not recycle in this area nor yoghurt pots due to polymer content and high cost of recycling such items. Office papers – put in a blue paper recycling paper bin and inform waste when full and it will be collected and then recycled.

Confidential waste - must be double bagged in black bags and marked confidential and the Waste team will collect. They have a regular pick up day for every area.

Put crushed cardboard in cardboard bin in your area. This will be collected, bailed on site sent to a company for recycling. For small cardboard items such as glove boxes, medicine packets please crush and put in orange mixed recycling bin if you can't get to large green cage.

Glass can be recycled. Put your rinsed glass in a thick brown sack marked 'Glass for Recycling' and place by Domestic bin in Kitchen areas or sluice. Please ensure it is only glass and not china or other contaminants in the bag. Call Waste Management ext 4490 when the bag is half full. It may be heavy if overfilled. For broken china or other items use a brown sack and label accordingly.

Used batteries - preferably use a smallish box lined with a plastic bag. If a large box is used this may cause a health and safety issue regarding weight. Waste will collect if you give them a call. They are sent to Europe by a company, dismantled and recycled.

Furniture - the waste team will collect within 1 week and recycle. (Please ensure that a label is put on furniture for disposal, saying for disposal otherwise it will not be taken and leave in a safe place not in a main corridor)

Ink and toner cartridges - the Waste team will also collect these as they are sent to stores and recycled.

Computers - need to be reported to the IT department so that they can decide whether they can be re-used or disposed of.

If you need any further information or resources contact Andrew Hatcher ext 4490 bleep 9209 or via outlook.

If your bins are full please phone ext 4490 /bleep 9216 for waste collection.
Energy Efficiency at UHS

University Hospital Southampton employs 9000+ staff with an energy and water bill of £6.13 million therefore a small change in the way we use energy could make substantial cost and carbon emission reductions.

Taking a few simple actions by all of us could make substantial savings, in the region of hundreds of thousands of pounds. Remember the saying “every little bit helps”

Energy efficiency is a large if not the largest weapon against climate change.

British Government Carbon reduction targets (Climate Change Act 2008)
80% reduction in greenhouse gas emission from 1990 levels by 2050
34% reduction in green house gas emissions from 1990 levels by 2020

NHS Carbon reduction Targets
10% reduction in Greenhouse gas emissions from 2007/2008 by 2015/16
Hefty financial penalties exist should we fail to meet these targets.

How can we reduce CO2 emissions/energy?

Lighting
• Switch off lights that are not needed
• Make maximum use of daylight
• Don’t leave lights on in unoccupied areas
Lighting an office overnight wastes enough energy to make 1000 cups of tea!!
The trust has converted 95% of its lighting to low energy lights saving 70% of the electricity used.

Computers and office Equipment
• There are around 4500 PCs and 500 laptops in the SGH which use approximately £225,000 worth of electricity per year.
• 66% of the power consumed by a computer is in the screen.
Always switch off the screen when leaving the computer and shut it down if you leave it for any length of time. (Screen switch normally in the bottom right hand of the screen frame)
• Ensure all laboratory and office equipment is switched off when not in use and particularly over the week ends.
• When photo copying use the double side option whenever possible to save paper.
• Effective management of office equipment can reduce its energy consumption by up to 70%.
A photocopier left on standby overnight wastes enough energy to make 30 cups of tea.
The annual energy consumption of the lifts at UHS would power a housing estate of 300 houses for a year. Use the stairs whenever possible which is good exercise also.

Heating
• A 1% rise in heating temperature increases the cost by 8%
• Offices should be heated at about 18/19°C and wards 21/23°C.
• Report any heating problems to ext 8321.
• Air conditioning an office for 1 hour a day uses enough energy in a month to power a TV continuously for a year.

Boiling water
• When boiling water only boil amount required, no more no less
**Myths**
Leaving a water tank heater on continuously will save energy!!
Smaller water heaters should be left on in busy periods however they should be switched off when not in use and after hours to save energy and money.

**Fridges**
Keeping at a lower temperature setting will save energy because it will not have to switch on and off so much.
All fridges will use more electricity to achieve lower temperature settings. Fridges can safely store food at around 5°C

**Equipment on Standby**
When an appliance is left on standby—it is switched off.
Electrical products continue to consume power when on standby, and should be switched off at the mains.

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**Energy saving Quiz**

1. What should you do if you feel too warm in winter in your office?
   a) Open windows   b) Turn up air conditioning   c) Turn heating down   d) Tell your manager

2. It is better to leave Fluorescent lights on all the time as they use a lot of energy when starting
   True    False

3. Climate change will give the UKs weather a warmer Mediterranean like climate!
   True    False

4. How much electricity generated in large power stations is lost before it reaches you?
   a) 20%   b) 50%   c) 65%   d) 70%

5. Putting an office printer in sleep mode when not in use and turning it off overnight will save energy and carbon emissions.
   True    False

6. On average how many litres of water per day does each person use in the UK?
   a) 80L   b) 100L   c) 120L   d) 140L

7. What is the annual cost of energy and water at UHS?
   a) £4.12M   b) £3.2M   c) £6.13M   d) £7.46M

8. What is the Government target from a 1990 baseline for reducing carbon emissions that are created by burning fossil fuels by 2050?
   a) 20%   b) 60%   c) 70%   d) 80%

**Answers**
Q1.c  Q2.False  Q3.False  Q4.c  Q5.True  Q6.d  Q7.c  Q8.d
Medication Safety
Annual Update

Introduction

This update is intended to highlight the priorities for education and training in medication safety for 2011. The general information contained in this update will be useful for non-clinical staff who come into contact with medicines at any time. Being aware of the issues highlighted in the update will help to prevent medication errors.

All staff who encounter medicines in any way should read the update including:

- Porters
- Ward Clerks
- Managers
- Non-clinical Staff

The use of medicines in the trust is covered by the medicines policy which can be found on Staffnet under “medicines”

Medication Errors

A medication error is any unintended or unexpected error which could have or did lead to harm from the use of a medicine.

Safe and Secure Medicines

It is vital that medicines are kept safe and secure at all times. This is to prevent the medicines getting into the wrong hands and potentially resulting in patients taking the wrong medicines. Some medicines are extremely expensive and if they get lost time is wasted looking for them or they have to be re-dispensed.

Please remember;-

- When delivering medicines make sure you inform a member of ward staff.
- Hand controlled drugs and refrigerated items to a member of ward staff directly.
- If you receive medicines make sure they are stored securely in the correct location.
Mistakes

The most common problem reported are omitted and delayed doses due to drugs not being available on the ward. There are a few simple steps that everyone can do to avoid this.

- When collecting charts to take to pharmacy make sure they have the correct ward on them.
- When transferring patients to a new ward make sure their medicines go with them.

Out of hours there is an emergency cupboard and the on-call pharmacist can be contacted for advice via switchboard.

Controlled drugs

Controlled drugs (CDs) are drugs such as morphine and pethidine which, by law, must be accounted for. The trust has rigorous policies and procedures relating to CDs. The policy is part of the medicines policy.

- Orders for controlled drugs must be sent to the pharmacy by 11am on weekdays only.
- Order books can be posted into the pharmacy on C level out of hours.
- Records of all issues must be kept in your CD record book.
- Any discrepancies must be investigated immediately and reported to your line manager and on a trust incident form.
- CDs must not be transferred between wards and departments.

Current medication Safety Work

There is much work occurring medcation safety in the trust if you want to find out more about specific subjects see the links below.

Omitted and delayed doses -
http://staffnet/MissedDoses

Drug administration workbook
http://staffnet/Governanceandquality/Patientsafety/Medicationsafety/Drugadministrationandmedicationsafetyworkbook.aspx

Insulin –
http://staffnet/Governanceandquality/Patientsafety/Medicationsafety/Insulinhelpandadvice.aspx

Medication Safety Update 2011/12 produced as part of medication safety training.
Medication safety team

For more information contact Andy Fox – Medication Safety Pharmacist
To access E-learning from home

Go to the Trust’s public website:
http://www.uhs.nhs.uk/home.aspx

Click on the Education link near to the top of the page

Click on Induction on the left hand side of the page.

Click on the link to Trust Induction e-learning

Scroll down to the blue buttons near to the foot of the page

Click on the appropriate button

To access the Fire, Manual Handling, Equipment, Hazardous Substances and Slips, Trips and Falls training, click on the blue Login to Trust Induction E-learning button – a new window will open. Scroll down and click the grey button.

On the next page, enter training as the Username and training as the Password, then click the Log-in to Induction Training button

To access E-learning from UHS

Go to the Staffnet homepage and click on Education on the right hand side.

In the new window, click on Induction on the left hand side of the page.

Click on the link to Trust Induction e-learning

Scroll down to the blue buttons near to the foot of the page

Click on the appropriate button

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E-learning rooms

Cyber Centre – B level, East wing next to Spice of Life restaurant

Learning Support Training room – A level, south academic block in Learning Support

IM&T Training room 1 & 2 – in Trust Management offices entrance level 1 (Old nurses home) by side of multi-storey car park