



2011 AWARDS

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Supplement editor
Rebecca Creamer
Writer
Greg Pitcher
Designer
Judy Skidmore
Sub editor
Amit Srivastava
Sponsorship
Jason Winthrop
Senior event manager
Paul Hewitt

FOREWORD

“We hope
and believe
the awards
winners can be
an inspiration
to light the
way ahead”



ALASTAIR MCLELLAN EDITOR

2011 has been the most difficult year the NHS has experienced for more than a decade. Confused and contradictory reforms have failed to ignite the service's enthusiasm and too many efficiency programmes have manifested as service cuts. For *HSJ* readers, the year has been particularly grim. We have all been to too many leaving dos.

But there is hope – and that hope is reflected in the entries for the *HSJ* Awards. The 2011 Awards attracted 1,060 entries, a 21 per cent increase on last year. The competition across all 18 categories was fierce, the shortlisted entries of the highest quality and the winners truly outstanding.

The innovation, energy and bravery demonstrated in scores of entries is a testament to the determination of *HSJ* readers – from all disciplines and professions – to deliver the best care in the most effective way. If the NHS were to adopt the best practice encapsulated in the awards entries, meeting the £20bn quality innovation productivity and prevention would feel much more achievable.

Once again we shall be publishing details of the shortlisted entries on the *HSJ* website, giving others the opportunity to learn from our finalists. Please visit www.hsj.co.uk/awards. Few will do so without learning something that they cannot use.

The *HSJ* Awards remains the largest celebration of health service excellence in the UK. This year it marks its 30th anniversary. As well as highlighting the quality of this year's winners, we would also like to honour the hundreds that have won *HSJ* Awards over the past three decades. Their combined contribution is responsible for many of the huge advances the service has delivered.

All working in and with the NHS will hope that 2012 will prove to be a more positive year than this one, while recognising the challenges of reform and productivity are set to become even sharper. We hope and believe the 2011 *HSJ* Awards winners can be an inspiration to light the way ahead. ●

SECRETARY OF STATE'S AWARD FOR EXCELLENCE

“The project is delivering better health outcomes and a positive experience for patients”

**WINNER OXLEAS FOUNDATION TRUST IN
PARTNERSHIP WITH THE LONDON BOROUGH OF
GREENWICH**
IMPROVING HEALTH IN GREENWICH THROUGH
INTEGRATING HEALTH AND SOCIAL CARE

Rt Hon ANDREW LANSLEY CBE MP SECRETARY OF STATE FOR HEALTH

Oxleas Foundation Trust's project, in association with the London Borough of Greenwich, is an excellent example of how services can work together to deliver better quality care for patients.

I was impressed with the multiprofessional approach to redesigning the pathway of care around what patients said they wanted. Their Integrating Health and Social Care project is delivering better health outcomes and a positive experience for patients, as well as productivity and efficiency savings through reduced length of stay, emergency admissions, readmissions and need for long-term care packages.

This project demonstrates what can be achieved with clinical leadership, supportive management, and by putting patients first. ●



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- Healthcare provision in secure establishments, including prisons and immigration removal centres
- Management of Braintree Community Hospital

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ACUTE AND PRIMARY CARE INNOVATION

FINALIST Cardiff and Vale University Health Board

FINALIST City Health Care Partnership

FINALIST Croydon Intermediate Gynaecology Service working in partnership with Croydon consortia

FINALIST Imperial College Healthcare Trust

FINALIST NHS East London and the City

FINALIST NHS Portsmouth

FINALIST Southern Health Foundation Trust



Winners: Southampton's Simon Bourne and Tom Wilkinson

JUDGES

- Ian Dodge, director, policy unit, Department of Health
- Elizabeth Wade, senior policy manager – commissioning, NHS Confederation
- Mike Farrar, chief executive, NHS Confederation
- David Kerr, professor of cancer medicine, Nuffield department of clinical laboratory sciences, University of Oxford
- Dr Mike Sadler, chief operating officer, Serco Heath

WINNER UNIVERSITY HOSPITAL SOUTHAMPTON FOUNDATION TRUST

SOUTHAMPTON CITY: FINDING THE MISSING MILLIONS AND REDUCING ADMISSIONS THROUGH MEDICAL INTELLIGENCE

A British Lung Foundation report found Southampton was a hotspot for chronic obstructive pulmonary disease due to high smoking rates and deprivation. It added that the disease, the fourth highest cause of death in the UK, was significantly under-diagnosed in the city.

University Hospital Southampton decided to try to push GP's diagnostic rates up from 1.5 to 2.25 per cent, with a resulting dip in hospital admissions.

The trust visited and educated every GP practice in its area as well as holding meetings and producing interactive CDs and a website. A dedicated respiratory nurse was employed to deliver the project along with a consultant.

An audit of hospital attendances was also carried out and all 34 patients who had been admitted more than three times in the previous year were visited at home. This home consultation ensured they were being given the best treatment and included a "discovery interview" to investigate the reasons for frequent hospital visits.

The project delivered a 50 per cent (1.5 to 2.27 per cent) increase in the diagnosis of patients suffering with COPD. Hospital admissions fell by a fifth, while readmissions within 30 days fell even more dramatically.

In the first year, the nurse cost £15,000 and the consultant time £3,200; the saving from cutting hospital admissions was £320,000.

Judges applauded the "outstanding features" of a project that had improved patient outcomes while saving money.

simon@soton.ac.uk

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BEST SOCIAL MARKETING PROJECT

HIGHLY COMMENDED NHS Lincolnshire and partners

HIGHLY COMMENDED St John Ambulance London (Prince of Wales's) District, British Heart Foundation, London Ambulance Service Trust, The Five London Medical Schools, NHS London and Mayor of London

FINALIST NHS Northamptonshire

FINALIST NHS Ayrshire & Arran – oral health promotion team

FINALIST The School Food Trust and North Somerset Council

FINALIST West Hertfordshire Hospitals Trust



Winners: Sarah Bird, Mat Edmunds and Ruth Dale

JUDGES

- Ray Jones, Head of Marketing and Communications, The Chartered Institute of Marketing
- Chris Lovitt, associate director of public health, Tower Hamlets
- John Bromley, director, National Social Marketing Centre

WINNER NHS DEVON – PUBLIC HEALTH, WITH EXETER COLLEGE LOVE YOUR SKIN: TEENAGE SKIN CANCER INTERVENTION

With the fourth highest rate of malignant melanoma in the UK – costing more than £500,000 per year to diagnose and treat – NHS Devon set out to tackle the root causes of skin cancer.

A pilot project aimed to cut the exposure of teenagers at Exeter College to ultraviolet light.

Scoping work by the Peninsular Cancer Network suggested that teenagers would be more likely to respond to warnings about their appearance than their health, and that suggesting safe alternatives would be more effective than calling for a complete change.

Students were offered consultations that began with a UV facial scanner being used to reveal signs of overexposure. They were also shown how to apply fake tan as well as sun protection cream and handed free samples and information leaflets.

Marketing was via word of mouth and internal college communications, while beauty students designed a consultation resource to engage participating students.

Evaluation indicated the proportion of students intending to move out of the sun between 11am and 3pm jumped from 23 to 41 per cent as a result of the intervention. There were similar boosts to the proportions intending to avoid sunbeds and check for changes to skin.

The direct cost to NHS Devon of the pilot was less than £3,000 – meaning it would only have to prevent three skin cancers to be cost effective.

Social marketing meant the project was owned by its target audience, and judges said it had a clear behavioural focus.

They added: “The project is clearly replicable across the rest of the country and could have a major impact on the prevention of skin cancer among young people.”

ruth.dale@nhs.net

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CLINICAL SERVICE REDESIGN

HIGHLY COMMENDED Chelsea and Westminster Hospital Foundation Trust

HIGHLY COMMENDED London Trauma Office hosted by London Specialised Commissioning Group

FINALIST Birmingham Community Healthcare Trust

FINALIST Waltham Forest Federated Clinical Commissioning Group

FINALIST Nottingham University Hospitals Trust

FINALIST Southern Health Foundation Trust

FINALIST Stockport Foundation Trust

FINALIST The North West London Hospitals Trust



Winners: Mark Newton and Dr David Ratcliffe

JUDGES

- Dr Gillian Leng, deputy chief executive, National Institute for Health and Clinical Excellence
- Dr Clare Gerada, chair, Royal College of General Practitioners
- Rosamond Roughton, programme director, commissioning development, Department of Health

WINNER NORTH WEST AMBULANCE SERVICE PARAMEDIC PATHFINDERS PROJECT

With demand for emergency services growing every year, North West Ambulance Service looked to support staff who see patients before they reach hospital, so they could select the most appropriate destination for each patient. Evidence suggested that more than 30 per cent of patients taken to A&E could have been treated elsewhere.

The trust explored triage systems that would rely on symptom recognition rather than diagnosis and produced two pathfinder triage tools with destination outcomes.

The use of the pathfinder was honed by comparing how it worked against a “gold standard” outcome determined by clinicians, then training was given to 400 staff members across two pilot primary care trusts.

It is anticipated that patient outcomes will be improved with a genuine alternative to hospital admissions, freeing up resources for those that really need them. The use of ambulances for transporting patients could be cut by half.

Development costs were about £10,000 while a further £100,000 will be needed to train 2,400 frontline emergency staff. But significant savings will come from reducing hospital admissions.

The trust will now promote collaborative working with other services to cut ambulance journeys for repeat callers. It hopes this can provide a basis for expansion of its model across the region.

Judges described the project as “an inspirational initiative to redesign use of urgent care services”. They said it showed “drive, energy and commitment to engineer change across a range of service providers”.

press.office@nwas.nhs.uk

ACUTE HEALTHCARE ORGANISATION OF THE YEAR



Winners: South Devon trust. Below, on site at the trust, where judges talked of a “wow factor” in the way staff interact with patients

WINNER SOUTH DEVON HEALTHCARE FOUNDATION TRUST

With a vision for a fully integrated health and social care community, South Devon trust is striving for continuous improvement.

Last year South Devon published its five-year strategy, *Our future – improving quality through partnership*. Its governance framework was updated to ensure decisions will be made in line with the new strategy. Five strategic objectives were established: working in partnership; safest care; no delays; best patient experience; and better value through maximising staff, resources and finance.

Approaches to achieve partnership working include: clinicians and consultants meeting regularly with senior managers at a clinical executive group; consultants meeting GPs at a clinical cabinet; and foundation trust members undertaking patient surveys through the “Working with us” panel. The trust is also supported by one of the most successful League of Friends in the country.

Last year the trust was named as one of five NHS enhanced innovation sites. This year it became the second unit in the world to perform a day case laparoscopic nephrectomy. It was also reported by the Royal College of Surgeons as offering the best treatment of fractured neck of femur in the UK. An enhanced recovery programme that halved length of stay for patients needing major bowel surgery has now been rolled out to all specialities.

Acute physician-led multi-disciplinary board rounds have been established to ensure patients get to the right bed for their condition. A joint discharge team was put together with the local primary care trust to remove a gap in responsibility between organisations.

Performance targets met include those for 18-week referrals and four-hour waits in A&E, outpatients and day case surgery, and ambulance/patient handovers.

The trust has set up an innovation, education and research facility at Torbay hospital, called the Horizon Centre, to establish best practice and care for patients.

Other trusts and bodies regularly ask to visit Torbay hospital and examine the trust’s work.

Impressed by the motivated and flexible workforce, judges praised a “genuine culture of learning and improvement across the organisation” and the “wow factor” in the way staff interacted with patients and each other.

The judges were also impressed by the maturity of the organisation’s relationship with commissioners. They added: “This hospital’s commitment to working in an integrated manner with its partners across the health economy is authentic and embedded.”

paula.wakeham@nhs.net

HIGHLY COMMENDED

Airedale Foundation Trust

FINALIST South London Healthcare Trust

FINALIST University Hospital of South Manchester Foundation Trust

FINALIST West Midlands Ambulance Service Trust

FINALIST North Tees and Hartlepool Foundation Trust

JUDGES

- Jake Arnold-Forster, director, Carradale Consultancy
- Helen Bevan, director of service transformation, NHS Institute for Innovation and Improvement
- Nick Chapman, chief executive, NHS Direct
- Sophia Christie, director of alignment and co-ordination, Department of Health
- Andy Cowper, freelance reporter, *HSJ*
- Dr Mark Goldman, consultant, The Goldman Partnership
- David Peat, partner, David Peat Solutions and former chief executive, East Lancashire PCT
- Karen Taylor, director, Larkwood Advisors and non-executive director, Dartford and Gravesham Trust





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COMMISSIONING ORGANISATION OF THE YEAR

HIGHLY COMMENDED NHS North
East Essex

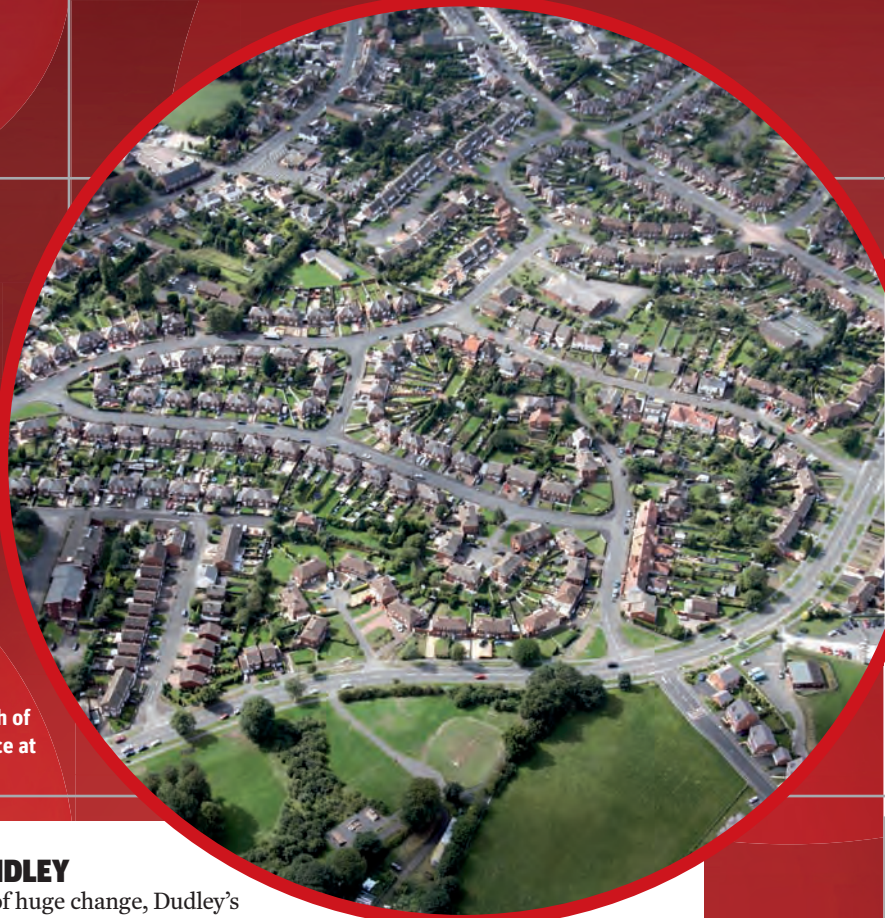
FINALIST NHS Tees

FINALIST Primary care psychology
service in Swindon and Wiltshire,
Avon and Wiltshire Mental Health
Partnership Trust

FINALIST Warrington Health
Consortium

FINALIST Wirral GP Commissioning
Consortium

**Winner: Judges were
impressed by the breadth of
commissioning excellence at
NHS Dudley**



JUDGES

- Greg Quinn, health policy manager, Boehringer Ingelheim
- Julie Gaughan, managing director, Boehringer Ingelheim
- David Stout, deputy chief executive, NHS Confederation
- Jill Matthews, deputy director of commissioning, NHS Midlands and East
- Professor Steve Field, chair, NHS Future Forum

WINNER NHS DUDLEY

Against a backdrop of huge change, Dudley's commitment to commissioning excellence has not wavered.

NHS Dudley set out to improve stroke services, launching a clinically led stroke and transient ischaemic attack implementation group. This group involved clinicians from several bodies including primary and secondary care; community rehabilitation; commissioning; the voluntary sector; the cardiovascular network; the primary care trust and the ambulance authority.

The group defined service specifications, as well as patient pathways that were scrutinised to ensure they worked. In collaboration with acute and community providers an early supported discharge model was developed. This required investment of £75,000 but the reduction in bed days and inappropriate TIA admissions has led to savings of more than £225,000. This programme has also resulted in a 10 per cent drop in the mortality rate in the past two years, and improved community services.

NHS Dudley managed to maintain engagement in the project through a period where its GP consortium gained pathfinder status. It attributed this to enthusiastic primary care clinicians and the translation of their drive through the rest of the organisation.

The trust has now shared evidence and supported joint working through the Black Country Cardiovascular Network and the Black Country Cluster Clinical Senate. Patient engagement and support is available across the whole service pathway and strong links have been forged with social care providers.

Judges were impressed by the breadth of commissioning excellence, and the sophisticated understanding of local health needs. They praised the way the organisation led all stakeholders towards an integrated improvement strategy, targeting those with the greatest needs. "NHS Dudley showed real leadership across the community implementing the emerging commissioning reforms," they said. "It is excellently placed to deliver best outcomes across the population."

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DATA AND INFORMATION MANAGEMENT

HIGHLY COMMENDED Torbay Care Trust

HIGHLY COMMENDED University Hospitals Birmingham Foundation Trust

FINALIST NHS Blackpool

FINALIST NHS East London and the City

FINALIST North East London Foundation Trust



Winners: Martin Schweiger, Ruth Gelletlie and Chakib Kara-Zaitri

JUDGES

- Tim Straughan, chief executive, NHS Information Centre
- Geraint Lewis, senior fellow, Nuffield Trust
- Veena Raleigh, senior fellow, health policy, The King's Fund
- David Flory, director general of NHS finance, performance and operations, Department of Health
- Mike Singer, managing director, Civica

WINNER HEALTH PROTECTION AGENCY DEVELOPMENT AND NATIONAL DEPLOYMENT OF HPZONE

The Health Protection Agency – which protects public health by supporting other public bodies – set out to develop a web-based decision support system for communicable disease control. The idea was to help the management of outbreaks in real time, allowing for a faster, more coherent response.

HPZone, developed by a group of health consultants and a local IT firm in West Yorkshire, went live in Leeds in 2003 with a risk assessment model for prioritising actions. Project leaders then showed the system to colleagues across the UK and Ireland and implemented their feedback.

Once evaluated externally and approved for use across the HPA, the management team developed a robust plan for deployment of the new tool. Champions and user groups were established across the country. Although 18 months was allowed for deployment, the process only took 18 weeks.

HPZone ensures the latest guidance is available to staff, helps them make decisions and allows them to see what is happening in real time to enquiries, cases, contacts and outbreaks.

Many routine elements of case management are now safely dealt with automatically or by more junior staff, leaving senior professionals to take on more complex work.

Most importantly, prompt recognition of an outbreak is allowing quick interventions that can save lives. HPZone is now in use in Holland and Germany, facilitating more international cooperation.

Judges hailed the project as “innovative and pace-setting”. They said it could be a model not just for the NHS but abroad, and were impressed by the “incredibly rapid” deployment.

Justin.McCracken@hpa.org.uk

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ENHANCING QUALITY AND EFFICIENCY IN SERVICES FOR CHILDREN AND YOUNG PEOPLE

HIGHLY COMMENDED Walsall Healthcare Trust

FINALIST The IV Team, Alder Hey Children's Foundation Trust

FINALIST The Strategic Network for Child Health and Wellbeing in the East of England

FINALIST Rotherham, Doncaster and South Humber Foundation Trust

FINALIST South London and Maudsley Foundation Trust



Winners: Deborah Christie and Rebecca Thompson

JUDGES

- Sheila Shribman, national clinical director for children, young people and maternity services, Department of Health
- Fiona Smith, adviser in children and young people's nursing, Royal College of Nursing
- Kathryn Pugh, children and young people's IAPT (Improving Access to Psychological Therapies) project manager, DH

WINNER UNIVERSITY COLLEGE LONDON HOSPITALS FOUNDATION TRUST **MAKING EVERY CHILD AND YOUNG PERSON WITH DIABETES MATTER**

Diabetes in children is increasing, and clinical outcomes in England are worse than in many European countries. So University College London Hospitals Foundation Trust set out to develop and deliver a quality, timely and responsive diabetes service.

It conducted a series of listening exercises to understand what patients and carers wanted from the service, as well as assessing its existing processes against several benchmarks.

Two care models were implemented. In the first, the trust added value to every step of the care process using standard operating procedures; in the second it facilitated exchanges between professionals and patients in a non-hierarchical manner. A Patient Relations Management system was developed with Microsoft UK, incorporating clinical guidelines, and a diabetes management team was created with a flat management structure.

Data shows that, in 2010, a third of the trust's children and young people achieved the recommended level of glycemic control, compared with a national average of 16.9 per cent. There were improvements in the patient experience with more face-to-face clinic time and positive carer feedback.

The PRM system was funded by Microsoft and NHS London and no other NHS resources were used on the initiative. The system is expected to save a quarter of full time administration posts.

Judges hailed a "very influential comprehensive service" and added that "meaningful processes and engagement with young people and families were apparent, focused on outcomes and evaluation".

bella.talwar@uclh.nhs.uk

GOOD CORPORATE CITIZENSHIP

HIGHLY COMMENDED NHS Cornwall and Isles of Scilly PCT

FINALIST Avon and Wiltshire Mental Health Partnership Trust

FINALIST Hywel Dda Health Board

FINALIST University College London Hospitals Foundation Trust



Winners: Will Clark and Nigel Burchett

JUDGES

- Sonia Roschnick, operational director, NHS Sustainable Development Unit
- Jane Marshall, interim director of health system reform, NHS North West
- Chris Naylor, fellow, King's Fund

WINNER SUSSEX COMMUNITY TRUST

SUSTAINABILITY PROGRAMME

Sending zero waste to landfill by 2015, and a reduction in carbon footprint of 25 per cent by the same date are among the goals of Sussex Community Trust's five-year sustainable development management plan, which aims to provide the foundations for long term sustainability.

The plan received board approval in July 2010, when two major challenges were identified: keeping sustainability on the agenda against competing priorities; and embedding carbon literacy in the culture of the organisation.

A steering group, chaired by the trust's finance director, oversaw development and implementation of the plan. A carbon footprinting and key performance indicator reporting tool was developed to allow measurement of performance.

The result is that more than 1,000 tonnes of carbon dioxide have been saved; energy efficiency has increased by a third; and recycling is significantly up.

Importantly, the programme has also delivered savings of £140,000 in its first year. The trust is reinvesting in spend-to-save initiatives, and all projects funded to date are expected to show a return on investment within five years.

Judges said the Sussex project stood out in a strong field. They were particularly impressed by its demonstration of "substantial, tangible results at a time of transition and considerable organisational change".

will.clark@nhs.net



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FINALIST Bupa Care Services

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FINALIST Lancashire Care Foundation Trust

FINALIST NHS North West London

FINALIST Serco in partnership with NHS Forth Valley and Forth Health

FINALIST Stockport Foundation Trust



Winners: Dr John Havard and Nerinda Evans

JUDGES

- Professor James Barlow, chair in technology and innovation management, Imperial College London
- Sir John Oldham, national clinical lead for quality and productivity, Department of Health
- Dr Ian Denley, chief executive, System C

WINNER SAXMUNDHAM HEALTH

ADVICE LETTER LISTING PROJECT

When discussions with consultants revealed that some GPs were referring patients without regard to agreed protocols, East Suffolk Federation created the Advice Letter Listing system, which uses existing technology to get consultant advice on referrals.

Fundamental changes in GP and consultant mindsets have been required as referrals to hospital no longer exist. Instead consultants are asked for advice about managing patients and one of the options is for the consultant to offer an outpatient assessment.

Referrals are sent to a dedicated hospital advice clinic, ensuring clinical consistency in the provision of consultant appointments.

The project has been self financing and led to a drop in hospital admissions, with 20 per cent of patients managed in the community. Patients appreciate a consultant considering their cases, while GPs are reassured by a second pair of eyes. The technology is already paid for and consultants have been freed up to help manage patients in the community.

The project is being rolled out to all clinical specialities and the organisation is developing pre-referral guidance for subjects from rheumatology to lipid clinics. Future work will include supporting community management of more complex cases.

Judges said the project was a “simple, cheap solution providing potentially huge value for money”. They also praised the “great cooperation” between GPs and consultants.

john.havard@homecall.co.uk

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INNOVATION IN MENTAL HEALTH

HIGHLY COMMENDED Greater Manchester West Mental Health Foundation Trust

HIGHLY COMMENDED Surrey and Borders Partnership Foundation Trust Early Intervention in Psychosis Team

FINALIST 5 Boroughs Partnership Foundation Trust

FINALIST Cornwall Partnership Foundation Trust

FINALIST NHS Lothian

FINALIST NHS Northamptonshire



Winners: Ruth Briel and Keith Appleby

JUDGES

- Dr Andrew McCulloch, chief executive, Mental Health Foundation
- Jan Hutchinson, director of programmes and performance, Centre for Mental Health
- Lisa Rodrigues, chief executive, Sussex Partnership Foundation Trust
- Dr Jonathan West, consultant psychiatrist and clinical director, complex needs directorate, Oxleas Foundation Trust

WINNER TEES, ESK AND WEAR VALLEYS FOUNDATION TRUST QUALITY IMPROVEMENT SYSTEM

In a bid to reduce wasteful activities and focus on the things that make a difference, Tees, Esk and Wear Valleys adopted a version of the renowned Toyota production system, adapted for healthcare by Virginia Mason Medical Centre in Seattle.

The trust's board established a dedicated team to lead the work. More than 60 certified leaders were trained across the organisation, including directors and senior managers. Intensive week-long workshops were held, along with a number of shorter events.

Processes were streamlined and waste eradicated both in clinical and non-clinical areas. A dozen clinical pathways have been developed. Space is being used more efficiently and buildings have been designed more effectively.

The project has cost £472,000 to date in training staff, running improvement events and staffing a dedicated team. However, four years in to the 10-year project, the trust is already generating significant savings.

Around £7m has been saved by cutting bed numbers after reducing lengths of stay in adult and older people's services. This has allowed reconfiguration and investment in new services and businesses.

Non-clinical services have seen savings, too. For example, £80,000 was saved by using different printer cartridges.

Patient outcomes have also improved, with the length of time from referral to treatment in children and young people's services falling from 162 days to 35.

Judges declared themselves "most impressed by the board-to-ward engagement".

They added: "We loved the linkages between improving the patient experience and value for money."

sarah.everett@tewv.nhs.uk

PATIENT SAFETY

HIGHLY COMMENDED Wrightington, Wigan and Leigh Foundation Trust

FINALIST Bradford District Care Trust

FINALIST Guy's and St Thomas' Foundation Trust

FINALIST NHS Cornwall and Isles of Scilly

FINALIST NHS Diabetes

FINALIST NHS Western Cheshire



Winners: Anne McDonald and Emma Vaux

JUDGES

- Kate Beaumont, nurse director, The Learning Clinic
- Caroline Lecko, patient safety lead, National Patient Safety Agency (seconded from Royal College of Nursing)
- Peter Carter, chief executive and general secretary, Royal College of Nursing

WINNER ROYAL BERKSHIRE FOUNDATION TRUST 30 DEGREES PREVENTS THE WHEEZE: ZERO TOLERANCE FOR HOSPITAL-ACQUIRED PNEUMONIA

Hospital-acquired pneumonia was the cause of death in, on average, 6 per cent of mortality cases reviewed by Royal Berkshire. So it decided to introduce zero tolerance of the illness.

The project aimed to identify a baseline measurement for HAP; review patients with HAP to identify contributing factors; set up a quality improvement project plan to introduce small changes in behaviour; and implement relevant interventions from the "Saving Lives" ventilator-associated pneumonia care bundle.

Titled "30 degrees prevents the wheeze", the programme included the introduction of two key steps.

In December 2010, the angle of each patient bedhead was raised to at least 30 degrees. The average number of patients developing HAP on the pilot wards fell by more than 50 per cent with no increase in pressure ulcers.

In April 2011, oral hygiene was boosted by the use of 0.2 per cent chlorhexidine mouthwash twice a day. Again, the numbers suffering from HAP fell.

The main investment in the project was in doctor time, with mouthwash costing just £16 per week. The fall in incidents will free up beds as well as saving lives.

Judges said the project had "huge potential to change the way patients are nursed, both in and out of hospital, and to save significant cost in bed days and antibiotics, as well as many lives".

hester.wain@royalberkshire.nhs.uk



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MANAGING LONG TERM CONDITIONS

HIGHLY COMMENDED Helen Sanderson Associates

FINALIST NHS South East London, Bexley Business Support Unit

FINALIST NHS Blackpool

FINALIST Bolton Foundation Trust

FINALIST NHS Sefton / South Sefton CCG

FINALIST University College London Hospitals Foundation Trust

FINALIST The Community Gateway CIC

FINALIST Imperial College Healthcare Trust



Winners: Andrew Stelden and Scott Hamilton

JUDGES

- Stuart Bain, chief executive, East Kent Hospitals University Foundation Trust
- Dr Mashkur Khan, consultant physician and honorary senior lecturer, Epsom and St Helier University Hospitals Trust
- Rebecca Rosen, senior fellow, Nuffield Trust
- Carole Nossiter, regional business director, Sanofi Aventis

WINNER NHS NORTH WEST LONDON

INNOVATIVE INTEGRATED CARE FOR ACUTE AND PRIMARY CARE IN NORTH WEST LONDON FOR PEOPLE WITH DIABETES AND AGED OVER 75

NHS North West London's integrated care pilot project for people with diabetes and patients over 75 years old aims to raise care quality while making better use of resources.

To overcome traditional barriers to integrated care, the trust decided providers should share accountability, clinicians should agree on shared guidelines and a governance structure should be designed so all organisations had the same objectives.

Clinically led working groups designed standardised care pathways, aiming for all diabetics and half of patients over 75 to get care based on these.

A web portal was developed to give a view of patient interactions with health and social care. Care plans were generated by the IT tool, including work lists for providers. High risk patients were identified using population segmentation and risk stratification.

Multi-disciplinary teams were set up including representatives from primary, community, mental, social, voluntary and acute care. Clinicians were trained to prepare them for working in multi-disciplinary environments.

An investment of £2.5m was needed up front, but the trust calculated that the prevention of one emergency admission per participating GP per month would save £14m in one year.

The pilot suggested acute trusts would see a drop in numbers of patients and lengths of stay, while patients would experience more seamless care.

Judges said it was a "very impressive project" and spoke highly of its "well integrated approach with very clear metrics".

nick.worner@nw.london.nhs.uk

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PATIENT CENTRED CARE

HIGHLY COMMENDED Leeds Community Healthcare Trust

HIGHLY COMMENDED Salford Royal Foundation Trust

FINALIST Helen Sanderson Associates

FINALIST Leeds Community Healthcare Trust and NHS Leeds

FINALIST Leicestershire Nutrition and Dietetic Service (Leicestershire Partnership Trust) and the University of Chester

FINALIST NHS Southampton City and Solent Healthcare

FINALIST Northumbria Healthcare Foundation Trust

FINALIST South Tyneside Foundation Trust



Winners: Susan Ikin and Andrew Wilson

JUDGES

- Penny Woods, chief executive, Picker Institute Europe
- Dr Andrew Murrison, MP
- Ben Page, chief executive, Ipsos Mori
- Keith Nurcombe, managing director, O2 Health

WINNER SOUTH CHESHIRE HEALTH AND VALE ROYAL CLINICAL COMMISSIONING

GP CARE HOMES PROJECT

Last December, three Cheshire care homes were identified as having above average numbers of ambulance call-outs and non-elective admissions. The objective of this project was to try to reduce non-elective admissions from these homes in the first three months of 2011.

A working group was established with representatives from the care homes, the four GP practices involved, hospitals, commissioners and the medicine management team.

One GP practice mentored each care home, and carried out weekly rounds. GPs worked with pharmacy technicians to review residents' medication.

The result was that attendances at accident and emergency wards from the three care homes were 46 per cent lower in the first quarter of 2011 than in the same period the previous year.

Patients' relatives were also pleased with the changes, saying they valued the opportunity to discuss care plans with a doctor.

Medication use was reduced, freeing up staff time for other duties, while care home managers reported better relationships with GP practices.

Mid Cheshire Hospital Foundation Trust funded the £15,000 cost of the initiative. But with 52 fewer A&E attendances and 77 fewer non-elective admissions, the project is estimated to have saved more than £50,000 overall.

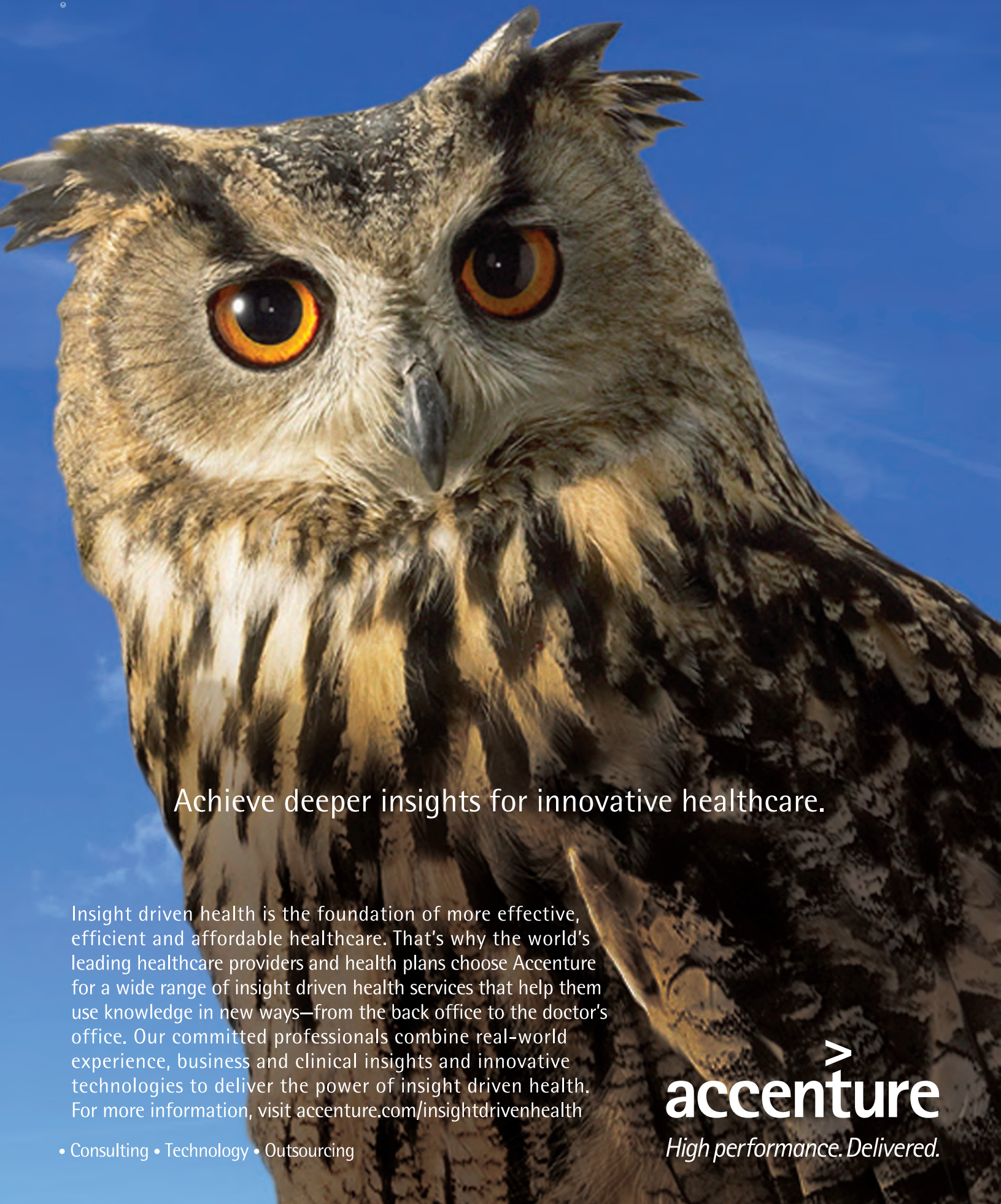
The project is now being rolled out across all nursing homes in Vale Royal and South Cheshire GP commissioning groups.

Judges commended the project's "innovative solutions to well defined problems" that "produced excellent quantifiable results".

susan.ikin@cecpct.nhs.uk

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PROCUREMENT INITIATIVE OF THE YEAR

HIGHLY COMMENDED The Strategic Projects Team at NHS Midlands and East

FINALIST Great Ormond Street Hospital

FINALIST Healthcare Commissioning Services

FINALIST NHS CPC

FINALIST Royal Orthopaedic Hospital

FINALIST Tameside Hospital Foundation Trust



Winners: Jane Pearson and Scott Cooper

JUDGES

- Beth Loudon, national QIPP procurement workstream programme manager, Department of Health
- Mark Patterson, vice president, NHS Supply Chain
- Melanie Hall, managing director patient care, NHS Supply Chain
- Philippa Slinger, national QIPP procurement lead, and chief executive Berkshire Healthcare Foundation Trust
- Simon England, director, Accenture UK Health

WINNER NHS BLOOD AND TRANSPLANT DESIGN AND PRODUCE A NOVEL DONATION CHAIR AND TRANSPORT SYSTEM

People who donate blood currently do so in beds bought 10 years ago that are at the end of their working lives. After several attempts to secure an off-the-shelf replacement failed, NHS Blood and Transplant launched a project to create a chair for donors.

It used the NHS National Innovation Centre five-step model to: develop a clinical statement of need; commission a designer to produce a prototype; bring that model through testing and validation; use a blueprint for low volume; and then engage in full scale manufacture and distribution.

Staff at all levels were involved and a test centre was built to test the prototype before validation was carried out using 180 donors.

NHSBT has now ordered 935 chairs and 135 sets of transport trolleys that will be rolled out across sites in England and North Wales.

Donor safety is the biggest winner, with reduced risk of faints in the chairs both during and after donation as well as increased speed of recovery from minor faints. Donors also found the chair more comfortable and dignified than the beds, while staff safety is also improved.

The internal project has led to a contract award of £2.25m on essential equipment. There is no financial payback but the project team worked to maximise interest in the tender. Most importantly, the introduction of the chair will have a profound impact on the work of the blood teams.

Judges branded the scheme “a superb example of highly innovative, collaborative procurement”.

randle.derbyshire@nhsbt.nhs.uk

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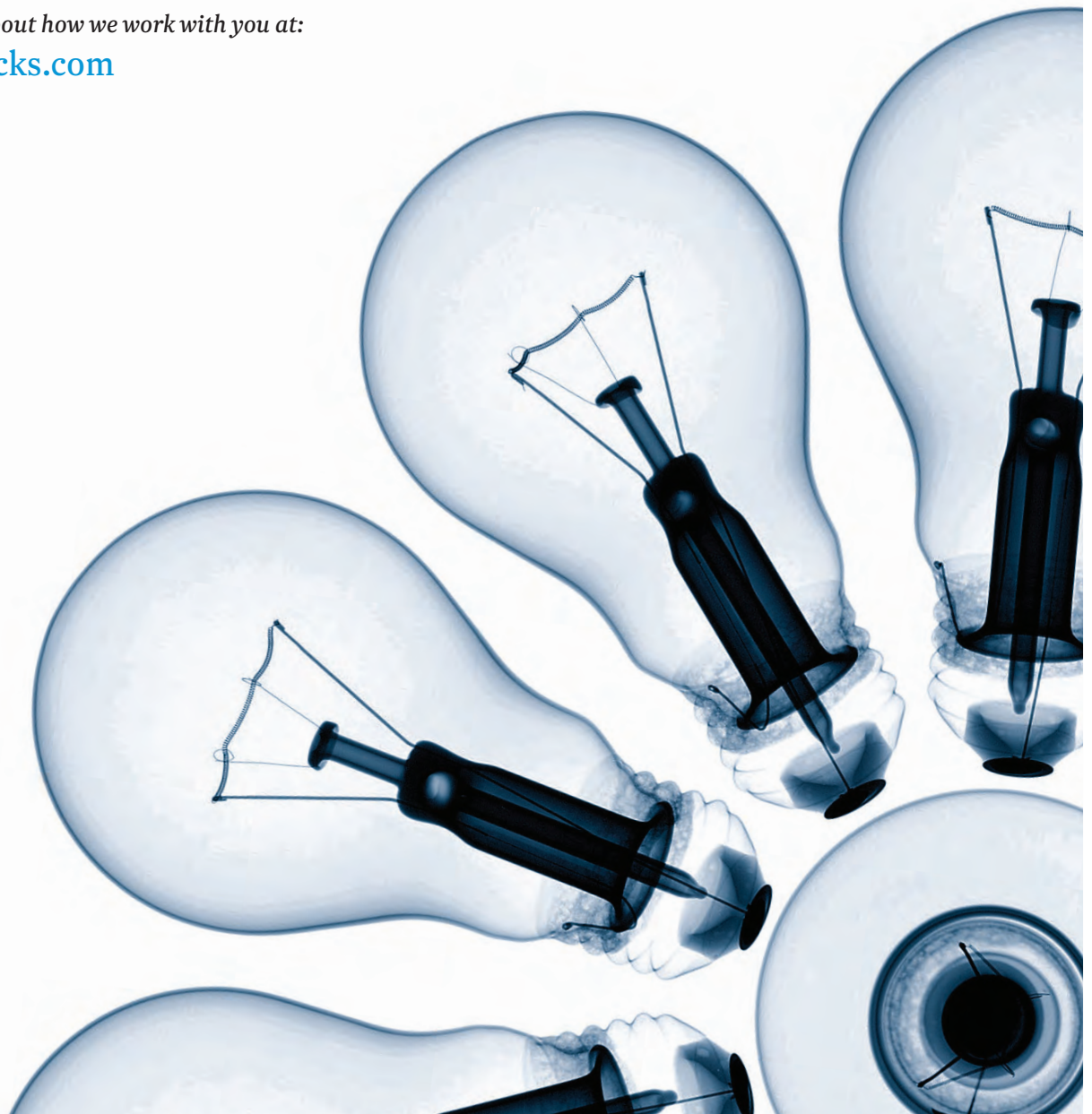
The HSJ Awards are in recognition and celebration of the excellence, enthusiasm and sheer hardwork that exists throughout the healthcare profession.

We would like to take this opportunity to congratulate the winner of the Quality & Productivity Award, NHS Knowsley with Liverpool Heart & Chest Hospital NHS Foundation Trust for Clinical Commissioning in Action – Community Cardiovascular Service, and indeed, all those who won or were shortlisted for an award.

Having worked within the health and social care sector for 30 years, we appreciate and applaud the huge effort and professionalism of those that work within it.

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HIGHLY COMMENDED Aintree University Hospitals Foundation Trust

FINALIST The IV team, Alder Hey Children's Foundation Trust

FINALIST Croydon Intermediate Gynaecology Service working in partnership with Croydon consortia

FINALIST NHS Halton and St Helens on behalf of Mid Mersey QIPP

FINALIST NHS Kent and Medway

FINALIST NHS Wirral / Wirral Clinical Commissioning Groups

FINALIST The Christie Hospital



Winners: Dianne Johnson and Dr Joe Mills

JUDGES

- Melanie Ogden, associate director, NHS North of England
- Samantha Riley, director of information and service improvement, NHS South of England
- Jane Cummings, director of performance, nursing, quality and performance, NHS North West
- Peter Edwards, senior partner, Capsticks

WINNER: NHS KNOWSLEY WITH LIVERPOOL HEART AND CHEST HOSPITAL FOUNDATION TRUST

CLINICAL COMMISSIONING IN ACTION – COMMUNITY CARDIOVASCULAR SERVICE

Knowsley's cardiovascular disease death rate was 22 per cent higher than the national average. The trust set out to deliver services that were quicker to access, patient focused and closer to home by shifting care from hospitals to the community.

A steering group was used to build up a comprehensive picture of CVD services from needs assessment to outcomes. Existing services were found to be fragmented and unequal – not all hospitals invited patients to rehabilitation.

A radically different clinical model emerged. An outcome-based contract was developed to ensure value for money.

Consultant cardiologists now deliver CVD services as a community service rather than as outreach from the hospital. Patients can now access consultant services closer to home within 10 days of referral and undergo ECG, echocardiogram and 24-hour tapes in a single appointment.

GPs receive an automatic letter within 48 hours of an appointment. Hospital activity has reduced and non-elective admissions have fallen. Patients and GPs have responded positively to the new service.

The trust spent £100,000 on the project but saved £760,000 in 2010-11 from reduced admissions and attendances.

Judges hailed the “use of the commissioning process to take out costs while improving quality”. They added that there was “impressive integration across the patch” and “real leadership from commissioners and clinicians”.

dianne.johnson@knowsley.nhs.uk

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“97% of the public think the
NHS should support research
into new treatments”

Ipsos MORI poll June 2011

*Commissioned by the Association of Medical Research Charities,
the Breast Cancer Campaign, and the British Heart Foundation*

The chance to take part in clinical trials matters to patients. It's what the polls tell us, and it's what patients and their families tell us too.

Many NHS Trusts have already made great strides in developing their research capability - and we wanted to recognise these achievements. This year, for the first time, the NIHR Clinical Research Network joined with Health Services Journal to sponsor an award to recognise the achievements of NHS organisations in fostering a "research culture" where research activity thrives.

The **HSJ Research Culture Award** was open to NHS Trusts that could demonstrate that they are embracing clinical research as "core business". Thank you to all those who entered.

Congratulations to our winners!



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RESEARCH CULTURE

HIGHLY COMMENDED Portsmouth Hospitals Trust

HIGHLY COMMENDED United Lincolnshire Hospitals Trust

FINALIST Bradgate Surgery, Bristol

FINALIST Chelsea and Westminster Hospital Foundation Trust

FINALIST NHS Suffolk

FINALIST Royal Liverpool University Hospital Trust

FINALIST University Hospitals Coventry and Warwickshire Trust



Winners: Joe Reilly and Hilary Allan

JUDGES

- Helen Crisp, assistant director, The Health Foundation
- Helen Campbell, portfolio manager for Department of Health research networks, cancer research and clinical research facilities
- John Sitzia, chief operating officer, National Institute for Health Research Clinical Research Network

WINNER TEES, ESK AND WEAR VALLEYS FOUNDATION TRUST

The research operation at Tees, Esk and Wear Valleys has expanded from a cottage industry to be a national research partner of choice. The key development at the mental health and learning disability trust has been the establishment of a mental health research centre in partnership with Durham University's school of medicine and health.

When the initiative began three years ago, the trust's research and development team consisted of three members of staff and two clinical studies officers. It was participating in three National Institute for Health Research studies and a handful of home grown projects. The NIHR funded the recruitment of a group of clinical studies officers, and work for the institute has been prioritised. Regular principal investigator development seminars have been held to reach out to research-active clinicians.

The trust has moved into interventional studies of increasing complexity with more than 400 participants engaged across 27 large-scale multi-site studies.

Local users have gained access to new treatments and interventions following trials, while the benefits are also flowing through to the wider NHS with research findings appearing in publications including the *British Journal of Psychiatry*.

Judges commended the trust for "impressive work in a challenging field and across a wide geographical area". They added that the initiative was a "clear demonstration of clinical and management leadership and effective infrastructure and support".

Hilary.allan@tewv.nhs.uk

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Chris Taylor

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STAFF ENGAGEMENT

HIGHLY COMMENDED Bolton Foundation Trust

HIGHLY COMMENDED University Hospital of North Staffordshire Trust

FINALIST Nottingham University Hospitals Trust

FINALIST Salford Royal Foundation Trust

FINALIST Tameside Hospital Foundation Trust

FINALIST Darlington Dementia Collaborative

FINALIST West Hertfordshire Hospitals Trust

WINNER
SECRETARY OF STATE'S AWARD
SEE PAGE 3



Winners: Jane Wells and Jay Stickland

JUDGES

- Elisabeth Buggins, chair, NHS West Midlands
- Christina McAnea, national secretary for health, Unison
- Jon Restell, chief executive, Managers in Partnership
- Gail Adams, head of nursing, Unison

WINNER OXLEAS FOUNDATION TRUST IN PARTNERSHIP WITH THE LONDON BOROUGH OF GREENWICH **INTEGRATING HEALTH AND SOCIAL CARE**

With a need to improve outcomes for vulnerable older people, an integration project between Greenwich Community Health Services intermediate care and local authority social care sought to create a more accessible, responsive and flexible service.

Social and health professionals jointly mapped current pathways to identify gaps and blockages before redesigning the model themselves. They started with the premise that anything was possible and maintained a focus on user experience. A joint governance board was established, including commissioners.

The model they came up with was based on: a single point of access; a joint emergency team to prevent hospital admissions; speedy discharge; and community rehabilitation.

More older people are now able to live at home, and the number of emergency hospital admissions has dropped, as has the number of people in long-term care. There has been a rise in intermediate care bed occupancy and a drop in lengths of stay in intermediate care.

An investment of £10,000 was needed to facilitate the staff engagement sessions but there was an immediate financial benefit to the trust including a reduction of more than 600 hours in intermediary care at home in June 2011 alone.

Judges praised a "wonderful example of true collaboration across organisational boundaries". They said the project brought "significant improvement in services to vulnerable adults and clients" and urged the trust to pass on its learning.

jane.wells@oxleas.nhs.uk

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WORKFORCE DEVELOPMENT

HIGHLY COMMENDED Liverpool Community Health

HIGHLY COMMENDED The Practice

FINALIST Aintree University Foundation Trust

FINALIST Cardiff and Vale University Health Board

FINALIST Calderdale and Huddersfield Foundation Trust

FINALIST Dudley Primary Care Trust

FINALIST North Tees and Hartlepool Foundation Trust



Winners: Sara Jaskiewicz and Sharon Welch

JUDGES

- Josie Irwin, head of employment relations, Royal College of Nursing
- Alastair Henderson, chief executive, Academy of Medical Royal Colleges
- Deborah Jamieson, cross government head of health, work and wellbeing, Department for Work and Pensions
- Janet Davies, director of nursing and service delivery, Royal College of Nursing
- Dame Carol Black, national director for health and work, Department of Health

WINNER HEART OF ENGLAND FOUNDATION TRUST

ENGAGING COMMUNITIES, DELIVERING BENEFITS

As part of a long term vision to grow a workforce representative of its local community, Heart of England Foundation Trust set out to widen participation in its apprenticeship scheme.

The trust launched the Healthcare Careers Development Unit, which developed an initiative called Step in Work that used recruitment methods based on attitudes, behaviours and values.

Local trainees were given knowledge and experience of healthcare through a pre-employment training programme and bespoke induction. After a six-month contract, trainees are employed on an agenda for change contract.

Alongside this, all staff in bands one to four were encouraged to do an apprenticeship framework qualification to support future employability and meet the needs of the trust.

The process has helped the trust attract talented staff and a more diverse workforce. With a 3 per cent rise in apprenticeship starts by people of Asian origin, a 5 per cent boost to the number of men in the scheme, and many more young people, the trust's workforce is beginning to more accurately reflect the population it serves.

All costs associated with the programme have been matched by savings from using training contracts for six months

Apprentices described the programme as unlocking doors, while managers say it has delivered the right people for the job.

Judges praised the "well thought through strategic approach" and said the project "clearly demonstrated a breadth and scope worthy of the award".

sara.jaskiewicz@heartofengland.nhs.uk



2011 AWARDS