



PRIMARY CARE
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Winter 2017

Welcome!! It's already time for Edition 2 of the PCDC Newsletter!

*Since our last mailing, we are delighted to announce that we have provided over **59** courses and trained **1,035** professionals across Nottinghamshire, Derbyshire, Lincolnshire & South Yorkshire!*

That's a huge volume of personnel to pass through the PCDC and we hope these individuals are currently utilising their enhanced skills to their advantage.



John Krafts – Kraft HR Consulting

Alongside our clinical offerings, we continue to offer courses for managers working in HR and we are delighted to introduce John Krafts of Kraft HR Consulting who is going to share with us a Case Study on Sickness Absence Management.



Kraft HR Case Study – Sickness Absence Management at Greenwood & Sneinton Family Surgery

Background: Kraft HR were engaged in December 2016 to work with the Practice Management Team to improve their sickness absence rates. The Practice knew that they were high and had purchased a costly insurance policy to help manage the costs related to their high sickness. The Managers at the Practice were willing to engage with a sickness management process but have since admitted that they did not believe that it would make a great difference. They said that over the years they had become more unsure of what they can, and cannot do, for fear of breaching any HR rules.

Method: Kraft HR began by undertaking a full analysis of the sickness in the Practice in the preceding 3 years. This analysis showed that the problem was getting worse and that in the six months prior to January 2017, the Practice had lost 496 staff days to sickness. 35% of staff took between 5 and 20 days off during this period. There were also some unmanaged long-term sickness problems.

Kraft HR summarised the data into a report for the GP Partners and Management Team which illustrated the scale and extent of the problem. From here the commitment to act, with the full support of the Partners, was secured.

The Practice was allocated a named Associate, our Principal Associate Gary Ward, to support the Management Team through the sickness management process. The Practice used the Kraft HR Sickness Management process from the Kraft HR Tool Kit. Gary supported the Management Team in:

- Meeting with staff to explain the problem and the new sickness management scheme
- Setting out Action Plans for each member of staff
- Providing template documents for sickness use
- Providing a Manager's Guide to Sickness Management
- Holding meetings with each member of staff to discuss their absence. In cases of good attendance, the member of staff was thanked. In cases of poor attendance, the management of their sickness was commenced.
- Actively, managing long term sickness

- Giving advice to the Managers in their day to day management of sickness and attendance.

Results: As a result of the management of attendance the Management Team report that sickness absence has improved to such an extent in 12 months that the only sickness that they have experienced has been relating to planned operations, which the Practice is happy to support employees through. There has been no single day sickness in the Practice for 6 months. One of the employees, identified as being one of the most likely to take short term sickness absence, often taking 2-3 days a month, is about to be signed off their caution, having demonstrated a massive improvement in their attendance.

Practice Feedback: Deputy Practice Manager, Yvette Madams, said that the Practice agreed to be used as a case study because "It would be a shame not to share the results that we have had – we are really pleased."

We asked Yvette what had been particularly useful to her and she said:

- The statistics were really useful in establishing the reasons and support for action
- The Action Plans were very good and extremely effective
- Having template documents with the proper wording gave us confidence to use them
- The support of Gary made all the difference – he supported us through the process and coached us to be confident to manage on our own.
- Gary's help in understanding sickness management and also how to respond to last minute leave requests was really good and helped us learn more about how we can manage difficult circumstances.

We asked Yvette what her staff thought of the new approach to sickness management and she said:

- It was a bit of a shock to begin with but....
- The majority of staff welcomed a process that saw those regular absentees being challenged and a new process installed which would in turn relieve their burden of providing cover.
- Staff are watching the process to see that it is fair and applied to everyone – which highlighted the need for Gary's input whenever we were unsure.



- The huge reduction in sickness is making it easier to cover the rotas – it is now unusual to

be asked to work extra shifts and this is making a huge difference.

Support from Kraft HR:

Advice and Support regarding Sickness Absence Management is available from Kraft HR in the following ways:

- Provision of Absence Management documents and templates accompany our Kraft HR Handbook which costs £1 for an annual subscription.
- Support in implementation of sickness absence programmes – contact liz@khrconsulting.co.uk
- Support in individual sickness management – contact liz@khrconsulting.co.uk
- Training in sickness absence management available through the PCDC – contact info@pcdc.org.uk



Flu season is upon us once again....

So it's almost Christmas and once again we're in the middle of 'flu immunisation season. I have been fortunate to meet some fantastic staff from primary care whilst delivering the immunisation training this year. I appreciate the hard work from all the primary care team, that goes into not only the 'flu vaccination programme but the administration of the national immunisation programme.

This year the target groups for 'flu vaccination remained very similar to previous years, except that morbidly obese (BMI >40) service users can now be vaccinated and practices will receive payment.

Uptake of the 'flu vaccine still needs to be encouraged amongst all the target groups, but in particular, during pregnancy, young children and front-line health care workers.

Whilst this year has had very few changes to the immunisation schedules, the latest change to the childhood programme was the introduction of the

new Hexavalent vaccine for all babies (born after the 1st August 2017) from the age of 8 weeks.

For further information regarding immunisations, visit:

'Immunisation against infectious diseases'- the Green Book

<https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>

Immunisation enquiries should be emailed to ENGLAND.SCRIMMS@nhs.net

Subscribe to vaccine update to receive your monthly updates directly to your inbox.

<https://www.gov.uk/government/collections/vaccine-update>

For resources (posters, leaflets, guidance, etc.) to help with health campaigns, visit www.gov.uk

Linda Petch - RN, RM, Cert Ed. Ba(Hons). QACTI



The National awareness of the over use of antibiotics has raised many concerns with HCP's and Dr Vivienne Weston of Empath has developed and ran the below new course in order to address this. -

Antimicrobial Guidelines – Addressing Non-Medical Prescribers.

Locally, nationally and internationally over the last decade there have been increasing concerns raised about the threats posed by antimicrobial resistance to the future of our day to day medicine. The very real threat of having no suitable antibiotics to treat infection was highlighted in the Chief Medical Officer's report (2013) and the national AMR strategy 2013-18. The government commissioned a review on antimicrobial resistance in 2014 and it identified that whilst the threat of antimicrobial resistance might seem distant and an abstract risk to some, if it is known at all, it identified that across Europe and the US alone at least 50,000 lives were already being lost each year due to antimicrobial resistance and highlighted the considerable human and economic cost that could result from any inaction.

It identified that system wide engagement and action will be needed to reduce the threat posed by antimicrobial resistance, and the workforce needs to be adequately equipped to help tackle this threat.

In Nottinghamshire a whole health economy Antimicrobial Stewardship group was set up and identified local priorities to help promote antimicrobial stewardship in addition to the systems already in place for local guideline development and promotion. The group identified that whilst clinicians involved in prescribing are expected to remain up to date with emerging evidence on resistance and appropriate antibiotic usage, whilst there is teaching on microbiology and antimicrobials with update sessions available for GPs and signposting to national resources

there is little coverage of this area for non-medical prescribers. Therefore 2 sessions have been developed specifically for non-medical prescribers, an update session and a longer more in-depth session covering the following areas

- *Spectrum of activity of antibiotics*
- *Adverse effects of antimicrobials*
- *Principles of antimicrobial prescribing with common infection examples*
- *Antimicrobial resistance*
- *How to safely reduce antibiotic use-antibiotic stewardship*

Dr V. Weston

Consultant Microbiologist and Community Infection Control Doctor



Are you ready for the *change in law* coming into force in May 2018? Here *Paul Couldrey from Act Now Training* gives a general overview of why this is so important.



Accountability and Demonstrating Compliance

The GDPR, which was approved in 2016 and comes into force on 25th May 2018 will be directly applicable as law in the UK. It will replace the Directive that is the basis for the UK Data Protection Act 1998, which will be repealed or amended. It is expected that the provisions of the GDPR will remain in force post-Brexit, and for the foreseeable future. Although in general the principles of data protection remain similar, there is greater focus on evidence-based compliance with specified requirements for transparency, more extensive rights for data subjects and considerably harsher penalties for non-compliance.² The GDPR introduces a principle of 'accountability'. This requires that organisations must be able to demonstrate compliance. The key obligations to support this include:

- the recording of all data processing activities with their lawful justification and data retention periods
- routinely conducting and reviewing data protection impact assessments where processing is likely to pose a high risk to individuals' rights and freedoms

- assessing the need for data protection impact assessment at an early stage, and incorporating data protection measures by default in the design and operation of information systems and processes
- ensuring demonstrable compliance with enhanced requirements for transparency and fair processing, including notification of rights
- ensuring that data subjects' rights are respected (the provision of copies of records free of charge, rights to rectification, erasure, to restrict processing, data portability, to object, and to prevent automated decision making)
- of personal data security breaches to the Information Commissioner
- the appointment of a suitably qualified and experienced Data Protection Officer. Some of these requirements should be established good practice. Organisations that are performing well in their information governance toolkit scores should have a good baseline to work from.

However, these legal requirements require organisations to take specified actions, and have evidence to demonstrate that they have done so. By establishing or adjusting governance arrangements to comply with the GDPR, organisations will be confident not only that they are respecting the law and data subjects' rights but also that they are mitigating risk appropriately and have a defence in the event of a breach.

Under the GDPR, the fines available are significantly increased and may be imposed for any infringement of the Regulation, not just data security breaches. ² There are two tiers: up to 10,000,000 Euros e.g. for security breaches and up to 20,000,000 Euros e.g. for breaches of the principles, data subjects' rights or international transfer restrictions.

Upcoming Training Events



Continue with 'Wound Care, Tissue Viability & Infection Control' Part 2 of 3 with Nottingham CityCare
Jan 16th 2018, Mansfield.



Its nearing appraisal time.... get updated on our 'Clinical Appraisals & Leading a Team' event – Jan 11th 2018, Derby



Delve deeper into dementia with our course on 'Dementia Planning – Advanced'
Jan 22nd 2018, Belper.



Keep up to speed with those vital skills –
'Emergency First Aid at Work'

(inc. certification)

Jan 26th 2018, Nottingham



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