

NHS FREEDOM OF INFORMATION PUBLICATION SCHEME

Welcome to the Kingston Hospital NHS Trust Publication Scheme. The Publication Scheme is in three parts, as follows:

PART ONE: Introduction

PART TWO: The Classes of Information that we hold

PART THREE: Inspection and Monitoring Bodies and Useful Resources

(Version : January 2009)

PART ONE: Introduction

Welcome

- **What a Publication Scheme is**

This Publication Scheme is the Information Commissioner's Old Model Publication Scheme. It was designed to be a complete guide to all of the information that Kingston Hospital NHS Trust Routinely Publishes. In line with the Information Commissioner's 2009 New Model Publication Scheme, the information you find here, plus more, is being published across the Trust's website.

The Freedom of Information Act does not change the right of patients to protection of their patient confidentiality in accordance with Article 8 of the Human Rights Convention, the Data Protection Act and at common law. Maintaining the legal right to patient confidentiality continues to be an important commitment on our part. To help with this, we have appointed someone who is called a Caldicott Guardian, and who has responsibility to ensure the protection of patient confidentiality throughout the Trust in accordance with your legal rights. In Kingston Hospital NHS Trust, our Caldicott Guardian is:

Dr Colin Todd
Medical Director
Kingston Hospital
Galsworthy Road
Kingston upon Thames
Surrey
KT2 7QB

- **Information Management**

Information falling into the different Classes within this Publication Scheme will be retained in line with the Kingston Hospital NHS Trust's retention and disposal schedules, which comply with Records Management: NHS Code of Practice, gateway ref 6295 and The National Archives Guidance.

- **Feedback**

Any questions, comments or complaints about this Scheme should be sent in writing to:

Mrs Janice Sorrell McLeod
The Publication Scheme Co-ordinator
Kingston Hospital
Galsworthy Road
Kingston upon Thames
Surrey
KT2 7QB

or by E-mail to: FOInquiries@Kingstonhospital.nhs.uk

If you have a complaint about the operation of the Publication Scheme, or how Kingston Hospital NHS Trust has dealt with your request for information from the Scheme, please write to:

Ms Kate Grimes
Chief Executive
Kingston Hospital
Galsworthy Road
Kingston upon Thames
Surrey
KT2 7QB

- **Rights of Access to Information**

- At the present time, in addition to accessing the information identified in this Publication Scheme, you are entitled to request information about Kingston Hospital NHS Trust under the NHS Openness Code 1995. A link to this is available in Part 3 of the Scheme and hard copies are available free of charge from

The Department of Health
Richmond House
79 Whitehall
London
SW12NS

Sometimes, some or all of the information cannot be provided and we will explain the reasons why not when this happens.

- The Freedom of Information Act recognises that as a member of the public, you have the right to know how public services such as the NHS are organised and run, how much they cost and how you can make complaints if you need to. You have the right to know which services are being provided, the targets that are being set, the standards of services that are expected and the results achieved.

- From 1 January 2005 it has also required the Trust to respond to requests about the information which it holds and is recorded in any form and it has created a right of access to that information. The rights to request and access this information are subject to some exemptions, which the Trust has to take into consideration before deciding what information can be released.
- Under the Data Protection Act 1998, you are also entitled to access your clinical records or any other personal information held about you and you can do this by contacting:

Dr Colin Todd
Medical Director
Kingston Hospital
Galsworthy Road
Kingston upon Thames
Surrey
KT2 7QB

- New Environmental Information Regulations 2004 came fully into force in July 2005. These enable similar access to environmental information, as under the Freedom of Information Act 2000.

PART 2: The classes of information that we hold

The information is grouped into broad categories as follows:

1. **The NHS and how we fit**
2. **Who we are**
3. **Financial and Funding Information**
4. **Corporate Information**
5. **Aims, Targets and Achievements**
6. **Our Services**
7. **Reports and Independent Enquiries**
8. **Policies and Procedures**
9. **Public Involvement and Consultation**
10. **Regular publications and information for the public**
11. **Complaints**
12. **Human Resources**
13. **Communications with the Press and Media Releases**
14. **Environmental Information**
15. **This Publication Scheme**

We will state how you can obtain the information outlined within each Class. This will be either via the website or as a hard copy or other media as stated within each Class. The publications are all free unless otherwise indicated within each Class [£]. [Where information is provided at a cost the charges will be calculated as set out in Class 15].

The Trust's commitment to publish information excludes any information which can legitimately be withheld under the exemptions set out in the NHS Openness Code or the Freedom of Information Act. Where individual classes are subject to exemptions, the main reasons are e.g. the protection of commercial interests and personal information under the Data Protection Act 1998. This applies to most Classes within the Publication Scheme.

The Publication Scheme will be available in both hard copy and on our web site.

1. The NHS and how we fit

Kingston Hospital NHS Trust is part of the NHS. The Department of Health sets overall policy on all health issues and is responsible for the provision of health services through the NHS. Key national documents can be found on their web site: www.doh.gov.uk and include

- NHS Plan-
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationPolicyandGuidance/DH_4002960
- National Service Frameworks
- Priorities and Planning Guidance
- Improving Working Lives

The NHS is a very large part of the public sector and is divided up for management and governance arrangements into:-

- Strategic Health Authorities
- Primary Care Trusts (PCTs)
- Other Trusts

There are over six hundred NHS Trusts: a full list of these can be found at <http://www.nhs.uk/Pages/homepage.aspx>.

Kingston Hospital is an acute general hospital with links to Kingston University. We serve a population of about 320,000 in Kingston, Esher, Richmond, Roehampton, Putney and other parts of South West London. We provide a full range of diagnostic and treatment services and we have one of the highest levels of day surgery in the country - more than 80 per cent of waiting list patients are treated without being admitted. A full list of our services appears below in Class 6 of this publication scheme.

Our work as an acute Trust is based upon the strategic direction established by the Department of Health.

Our website shows how we fit into the NHS across the area we serve - www.kingstonhospital.nhs.uk. The London Strategic Health Authority (<http://www.london.nhs.uk/>) and the Kingston and the Richmond and Twickenham Primary Care Trusts are also useful sources of information about the wider NHS in our area (www.kingstonpct.nhs.uk and www.richmondandtwickenham.nhs.uk respectively).

2. Who we are

Kingston Hospital NHS Trust became one of the first NHS Trusts on 1 April 1991. A Trust is a self-governing public organisation with its own board of directors who are expected to define policies on the strategic direction of the Trust and translate national guidance into local plans. Trust boards usually comprise five non-executive directors, five executive directors and a non-executive chairman.

The **Trust Board** sets the direction for the Trust's activities. The Board aims to monitor and improve the quality of care for patients, maintain financial stability and probity, meet national and local performance targets, ensure a safe and secure environment for staff, visitors and patients, agree with partner organisations priorities for investment and maintain an open, efficient, caring culture. The Board also ensures that the executive carries out the agreed strategy and that they use available resources to achieve this.

The Board **Chairman** is accountable for leading the Board and delivering, through the Chief Executive, the functions of the hospital. The Chairman represents the Trust to other organisations, including higher levels of management within the NHS, and maintains close contact with local MPs, councillors, neighbouring trusts and local voluntary organisations. The Chairman is appointed by the Secretary of State for Health for a term of four years, as are Non-Executive Directors.

Non-Executive Directors are the independent directors on the Board and are not involved in the day-to-day operational management of the hospital. Their function is to offer an objective, detached view and to hold the executive to account by

questioning proposals and decisions. Non-Executive Directors are appointed from a wide range of backgrounds to offer a broad perspective.

Executive Directors hold management positions within the trust and their function is to carry out decisions made by the Trust Board. They contribute to the strategic vision agreed by the board and translate this strategic vision into operational reality. Members of the Trust Board are listed below and further details about each member can be seen on our web site [Kingston Hospital NHS Trust - Trust Board](#).

Board members

Christopher Smallwood	Chairman
Simon Ellen	Non-Executive Director
John Charlick	Non-Executive Director
Peter Thomas	Non-Executive Director
Cherill Scott	Non-Executive Director
Charles Carter	Non-Executive Director
Kate Grimes	Chief Executive
Andrew Seddon	Director of Finance and Information
Alan Pearse	Chief Operating Officer
Helen Dirilen	Director of Nursing and Quality
Colin Todd	Medical Director
Gren Collings	Associate Director

Other Directors who attend the Board are:

Ruth Lewis Director of Human Resources and Organisational
Development
Sylvia Kennedy Director of Strategy

The day to day management of the Trust lies with the Senior Management Team which at present comprises of the Executive Directors, Clinical Directors and Divisional Managers of our Clinical Divisions, and other senior managers.

The Hospital is organised on the basis of Clinical Divisions (CDs) and the central services directorates. The CDs are responsible for the direct management of patient services, manage their own budgets and hold indicative budgets for services from other internal departments.

There are four Clinical Divisions (CDs):

- Acute Medicine and A&E CD
- Surgery and Critical Care CD
- Clinical Services CD
- Women and Child Health CD

The Trust is able to provide the public with details of our organisational structure, including information about the Trust Board and sub-committees, through our Publication Scheme Co-ordinator, as detailed in Part 1 above. We are able to provide access to, or copies of, our:

- Register of Interests
- Establishment Orders
- Standing Orders
- Standing Financial Instructions

- Scheme of Delegation
- Codes of Conduct and other governance documents

All the minutes of public Trust Board meetings are available to the public, although we will withhold information that is exempt from disclosure under the Freedom of Information Act 2000 or is personal, confidential information about individuals and is protected under the Data Protection Act 1998. Again, all this information is freely available through our Publication Scheme Co-ordinator. In addition, copies of Board agendas, papers and minutes are available on the [internet](#) (www.kingstonhospital.nhs.uk).

Our main partnerships are with:

- Local NHS bodies – host PCT (Kingston) and other local PCTs + NHS London (Strategic Health Authority)
- Local Acute Hospitals
- Other NHS bodies, such as the South West London and St George's Mental Health Trust
- The 14 PCTs from outside our direct catchment area for whom we have agreements to provide some services
- Local Authorities – Kingston, Richmond and Wandsworth
- Voluntary and community organisations
- Specialist Clinical Networks
- St George's Medical School and Kingston University

3. Financial and Funding Information

Details of the Trust's finances are published in the Annual Report and Accounts, a public document which is available to view and download on the Kingston Hospital [web site](#). The document includes confirmation from the Audit Commission that the Summary Financial Statements are consistent with the statutory financial statements of the Trust.

The Finance Director, Andrew Seddon, has corporate responsibility for the oversight of the Trust's finances. He can be contacted via the Finance Department, Kingston Hospital NHS Trust, Argosy House, 31-39 Kingston Hill, Kingston Upon Thames, KT2 7PU or by telephone on 020 8934 3750.

The Trust Board receives monthly reports on the financial position of the organisation and makes decisions regarding the allocation of these resources. These are available from the Finance Director or from the [web site](#). The Trust is required to prepare an annual plan for a revenue break-even and achieve capital expenditure and cash limit financial targets.

How we purchase our equipment and supplies

The Trust follows the guidance established by the NHS Purchasing and Supplies Agency (PASA) whose website can be found at <http://nww.pasa.nhs.uk/PASAweb>. The PASA guidance sets out the standard terms and conditions that NHS organisations should follow in regard to purchasing our equipment and supplies. In the NHS we refer to this as procurement.

Our Head of Procurement, Janice Gaworska, reports to the Finance Director.

In line with mandatory requirements, the Trust advertises tenders for goods or services worth over £104,400 through the Official Journal of the European Community (OJEC) procedures. The website for OJEC is www.ojec.com. We use this Publication Scheme to publish some background information relating to the tenders sought and awarded by the Trust. Items not included will be those where a commercial or confidential issue is involved.

4. Corporate Information

The Trust routinely publishes information which includes:

Annual Report and Annual Accounts – can be accessed at:

<http://www.kingstonhospital.nhs.uk/kh2/UserFiles/File/AnnualReportAccounts-website220708.pdf>

Corporate Communications – copies of press releases are available on the Trust website at

http://www.kingstonhospital.nhs.uk/kh2/kingston_page.php?pageid=199

The following documents are available through the Publication Scheme Co-ordinator:-

- **2008/09 Business Plan** – identifies our top priorities (also available here



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n_and_budget_2008;

- **Trust Board papers** – agenda, supporting papers and minutes for the Trust Board (also available through the [website](#))
- **Corporate policies and strategies** – including Standing Orders, Standing Financial Instructions and the Scheme of Delegation.

Please contact the Publication Scheme Co-ordinator to access the information that you require.

Some information that is of a personal and confidential nature or otherwise exempt under the Freedom of Information Act 2000 or Data Protection Act 1998 will be excluded. This includes material relating to the health and safety of specific individuals, as to law enforcement or criminal or regulatory enforcement or audit issues may also be excluded from publication. There may be circumstances where material cannot be released because the appropriate officer of the Trust has taken the view that it may be prejudicial to the conduct of public affairs.

5. Aims, Targets and Achievements

See also Class 9 below.

Kingston Hospital aims to provide the best possible patient care. We do this by:

- Putting patients first
- Providing high quality, effective and timely treatment
- Employing professional, committed and caring staff
- Striving to be a good employer
- Making the best use of available resources
- Adopting modern methods, but keeping traditional values

Each year Kingston Hospital produces a **business plan 2008/9** which provides an overview of key corporate issues and the targets facing the Trust. It sets out key pressures that are expected to impact on our plans to meet national and local performance targets.

Local Delivery Plans (LDPs) are produced by Primary Care Trusts in association with the South West London Strategic Health Authority which outline the key developments in services for local residents. Kingston Hospital participates in the production of these plans and reflects these issues in the annual business plan.

For 2008/09 Kingston Hospital has identified a range of top priorities within its business plan. These are:

1. Continuing to improve the patient experience

- Continue to improve the quality of food and cleanliness of the hospital
- Reduce further hospital acquired infection rates
- Continue the programme for refurbishing wards
- Open the:
 - New Sir William Rous Unit
 - Refurbished sexual health clinic
 - Post natal bed expansion
 - Increase in neonatal cots
- Increase elective referrals through patient choice
- Continue to improve clinical GP engagement and redesign care pathways
- Improve the quality of services enabling improved patient and staff experience, reduce complaints and improve the reputation of the hospital.

2. Delivery of all key service targets and standards

- Sustain the delivery of targets for:
 - A planned financial surplus
 - Accident and Emergency access
 - Cancer services
 - Meeting the 18 week target for Referral To Treatment (RTT)
 - Sexual health services
 - Continue to meet the required performance for the core healthcare Commission Standards
 - Demonstrate good progress towards developmental standards
- Compliance with European Working Time Directive
- Ensure all staff have job plans and appraisals

3. Enabling further improvements in efficiency and productivity

- Continue to reduce length of stay for patients
- Further improve theatre utilisation
- Delivery of cross economy, transformation and cost improvement programme
- Refine and embed service line management

4. Implementation of three key projects

- Achieve Foundation Trust status through a properly resourced project team engaging with the whole organisation in the process
- Implement the Care Records Service to improve efficiency, productivity and patient and staff experience.
- Progress to a decision on partnership with the Independent Sector to run elective services.

Full details can be found in the business plan 2008/9 above.

Key national and local performance targets for the hospital are monitored and reported to the Trust Board on a monthly basis through a balanced scorecard. In addition, Kingston Primary Care Trust monitors the performance of the hospital to ensure progress towards meeting healthcare targets set by the government to improve the health of people within the Kingston area.

All performance and financial reports presented to the Trust Board are available from the Publication Scheme Co-ordinator or from the website.

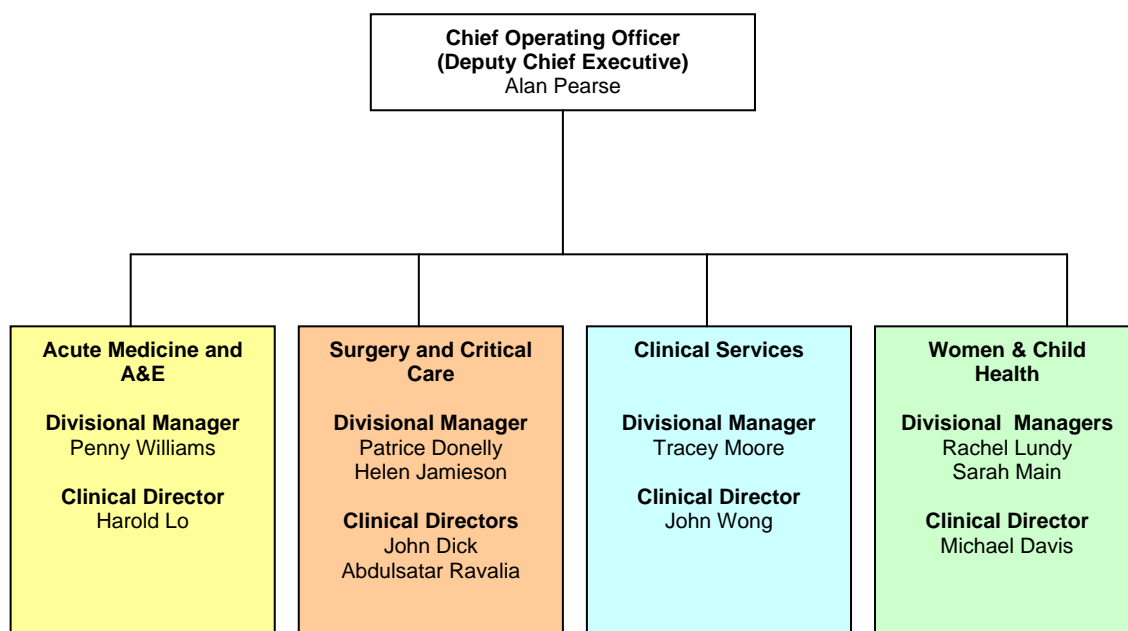
Also Annual Reports and Accounts are available identifying progress against the NHS Plan.

6. Our Services

Kingston Hospital NHS Trust is a single site hospital but also supplies consultants and clinical services to Queen Mary's Hospital in Roehampton.

The Trust's services are organised on the basis of four Clinical Divisions each of which has a core management group of a Consultant (Clinical Director), Senior Nurse and Divisional Manager. These are:

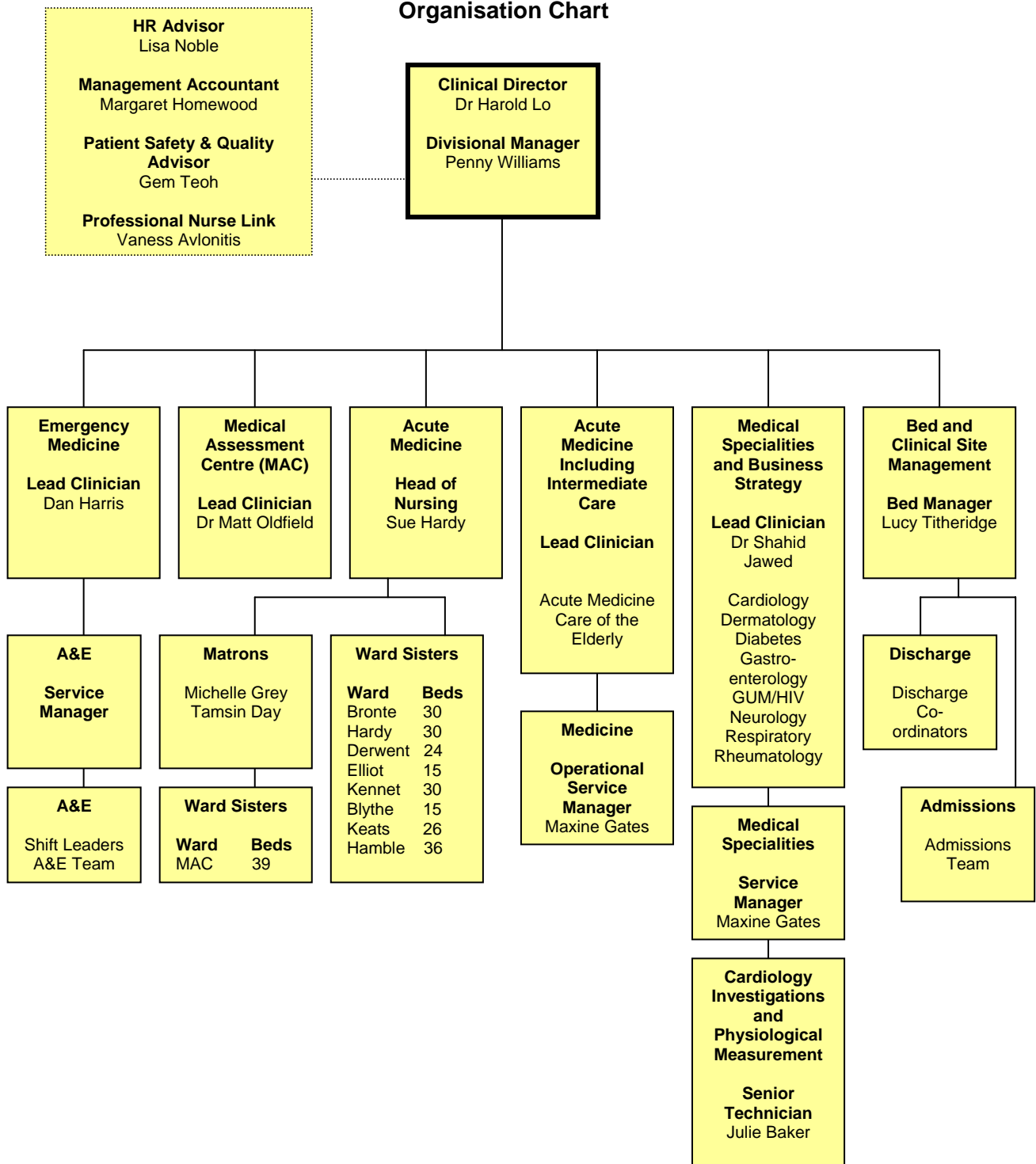
- **Acute Medicine and A&E CD**
- **Surgery and Critical Care CD**
- **Clinical Services CD**
- **Women and Child Health CD**



The Trust publishes a directory of consultant's specialities on its [website](#) and also a [directory of services](#).

6.1 Acute Medicine and A&E CD

Organisation Chart



The Division of Medicine provides a comprehensive in-patient and out-patient service for patients requiring any of the following specialities:

- ❖ cardiology
- ❖ dermatology
- ❖ diabetes/endocrinology
- ❖ care of the elderly
- ❖ gastroenterology
- ❖ genito-urinary medicine
- ❖ neurology
- ❖ outpatient renal medicine
- ❖ respiratory medicine
- ❖ rheumatology

The dermatology, gastroenterology and respiratory departments also participate in the Trust's Cancer Services.

The hospital has 254 medical beds, which includes 6 step-down cardiac beds, a 39 bedded Medical Assessment Centre (MAC) for all new admissions and a 6 bedded specialised stroke unit. The hospital has an additional capacity of 30 beds to help during periods of peak demand. The Division of Medicine benefits from the continued investment by the Trust including refurbishment of wards and the development of new services e.g. onsite cardiology services. A dedicated team of clinical and administration staff provide a professional and caring service to all patients.

6.1.1 Directory of Consultant Specialities	
Speciality/Consultant	Special interests
Cardiology	
Dr William Culling	Non-invasive cardiac testing, cardiac catheterisation and permanent pacing
Dr Arvind Vasudeva	Echocardiography, ischaemic heart disease and heart failure
*Dermatology	
Dr Claire Fletcher	General dermatology, skin surgery, pigmented lesions and phototherapy
Dr Klaus Misch	General dermatology
Dr Lucy Ostler	General dermatology
Diabetes/endocrinology	
Dr Matthew Oldfield	Complications of diabetes, obesity, PCOS and thyroid disease
Dr Mark Spring	General endocrinology including thyroid, pituitary, adrenal and calcium metabolism, diabetes, cardiovascular disease/hypertension and general medicine
Elderly (care of)	
Dr Chooi Lee	Care of the elderly, Parkinson's disease, stroke medicine, orthogeriatrics and falls prevention
Dr Harold Lo	General internal medicine and Parkinson's disease
Dr Robin McNabb	General internal medicine and stroke medicine
*Gastroenterology	
Dr Neil Galletly	Endoscopy (including interventional and ERCP), IBD and nutrition
Dr Tim Heymann	General gastroenterology and hepatology including reflux disease, inflammatory bowel disease, functional bowel problems, alcoholic liver disease,

	open access gastroscopy, colonoscopy, wireless capsule endoscopy and oesophageal service
Dr Christopher Rodrigues	Gastroenterology, inflammatory bowel disease, celiac disease and liver disease
Genito-urinary medicine	
Dr Allison Beardall	Genito-urinary medicine
Dr Gillian McCarthy	Infectious diseases, genito-pelvic pain, genital dermatology and sexual dysfunction
Dr Susannah McMorro	Genito-urinary medicine
Neurology	
Dr Ali Al-Memar	General neurology
Dr Salah Omer	General neurology, Parkinson's disease, headache, epilepsy and stroke
Dr Tim Von Oertzen	Sub-specialised in epilepsy (blackouts, syncope, fits, narcolepsy, and startle disease). Also seeing general neurology (including headaches and strokes etc.)
Renal medicine	
Dr Debu Bannerjee	Kidney dialysis
*Respiratory medicine	
Dr John Chingwundoh	COPD, asthma and lung fibrosis
Dr Geoffrey Knowles	All aspects of respiratory medicine
Dr Yee Ean Ong	Respiratory medicine
Rheumatology	
Dr Shahid Jawed	Osteoporosis, sports injuries, inflammatory back pain and general rheumatology
Dr Hugh Jones	Rheumatoid and inflammatory arthritis, soft tissue rheumatism, osteoarthritis, raised ESR with unknown causes
Emergency Medicine	
Dr Dan Harris	AE Consultant and Clinical Lead
Dr Helen Draper	Adult and Paediatric emergency patients
Dr Tim Patel (locum)	Adult and Paediatric emergency patients
*Also participate in the Cancer Services	

6.1.2 Medical Specialties

The Divisions main focus of direction for all medical specialties is to work with the PCT and local GP's through PbC teams to provide safe services which meet the needs of the local population and that:

- ❖ Can be provided close to home
- ❖ Can be provided through close working partnership between the Consultants at the hospital and the local GP's
- ❖ Can be provided by suitably trained clinical teams including primary and secondary nurse practitioners and GP's with specialist interests
- ❖ Can be provided as cost effectively and efficiently as possible
- ❖ Meet NICE and national framework guidance on care pathways
- ❖ Where guidance does not exist, to work with local GP practices to devise suitable care pathways which meet the needs of the patient and which are economically viable

Specialities	Services	Patient and Target Location	Referral Group
6.1.2.1 Cardiology	<ul style="list-style-type: none"> • To provide the local community with a “close to home” cardiac catheterisation service. To extend this service to a static purpose built unit and widen the catchment area to include patients from across South West London, Surrey and Middlesex. • To develop alternative non-invasive diagnostic techniques such as MRA. • To continue the provision of pacemaker services and expand on the current trans-oesophageal echocardiography (TOE) service. • To provide open access to cardiac diagnostic test for local GPs. • To expand the cardiac medical workforce so that patients are provided with a timely service provided by experts. • To further streamline the critical-care component of in-patient services by consolidating within the main cardiac ward. • To continue to provide a timely cardiac diagnostic service including echocardiography, 24 hour tapes and ETT. 	Adults	GP's from Kingston, Richmond and Twickenham, Surrey, Merton and Sutton, and Wandsworth PCT's
6.1.2.2 Dermatology	<ul style="list-style-type: none"> • To continue to work with local GP's to provide high quality service and expert resource for GPwSIs. • Using the funding already allocated establish a day care unit at Kingston Hospital to provide day care treatment for patients with difficult skin disease. • Improve access for patients with severe skin conditions to new biological treatments. • Expand specialist clinics in hyperhidrosis, including botox and iontophoresis, psoriasis, eczema and acne (isotretinoin). 	All ages	GP's from Kingston, Richmond and Twickenham, Surrey, Merton and Sutton, and Wandsworth PCT's
6.1.2.3 Diabetes/ Endocrinology	<ul style="list-style-type: none"> • To continue to develop cross economy services which meet the needs of both type 1 and 2 diabetic services • To develop the role of the Diabetic Nurse Specialist in providing a 	Adults and adolescents	As above.

Specialities	Services	Patient and Target Location	Referral Group
	<p>central source of expertise for training within GP practices.</p> <ul style="list-style-type: none"> • To continue the development of work shops for newly diagnosed type 2 patients and intensive training support for type 1. • To further develop services which meet the needs of antenatal and postnatal women with type 1 and type 2 gestational diabetes. • To continue the development of supporting clinical services such as clinical psychology and dietetics. • To build on the health promotion literature already available. • To further develop insulin pump therapy and focus future strategy on becoming the regional centre of excellence for this service. • To continue to specialise in the following areas: complications in diabetes, PCOS, obesity, thyroid disease, calcium metabolism, pituitary, adrenal, cardio-vascular disease and hypertension. 		
6.1.2.4 Care of the Elderly	<ul style="list-style-type: none"> • To work with the local health care community on the choice of care for older people including timely assessment and access to health services at home. • To build on the new acute stroke unit's good reputation and provide thrombolysis and outreach services to stroke sufferers. • To provide a comprehensive assessment service for older people. • To work within the MDT environment to design and source care plans for patients with complex medical and social problems. • To continue to develop sub-specialty services in Parkinson's disease, falls prevention and bone health, and orthogeriatric services. 	75yrs plus	As above
6.1.2.5 Gastroenterology	<ul style="list-style-type: none"> • To provide a top class gastroenterology and hepatology service specialising in inflammatory 	Adults	GP's from Kingston, Richmond

Specialities	Services	Patient and Target Location	Referral Group
	<p>bowel disease, alcoholic liver disease, IBS and functional bowel problems and coeliac disease.</p> <ul style="list-style-type: none"> • To continue to expand sector wide services such as wireless capsule endoscopy and oesophageal physiology services. • To continue the development of open access endoscopy services. • To introduce new services including ERCP. 		and Twickenham, Surrey, Merton and Sutton, and Wandsworth PCT's
6.1.2.6 Genito-urinary medicine	<ul style="list-style-type: none"> • To continue the development of the three tier model of services by working with the PCT and PbC's to provide appropriate community based services using specialist nurse expertise and developing knowledge base amongst local GP's. • To plan for the integration of specialist family planning services on site as a compliment to GP led services. • To expand the number of HIV clinics to accommodate newly diagnosed HIV patients. • To provide specialist clinics for HIV patients e.g. maternity. • To expand the psychology services to HIV and sexual health patients. • To play a key role in sexual health promotion particularly amongst young people and gay/bisexual men. • To explore the possibility of becoming the SWL centre for forensic and medical treatment of sexual assaults. 	All those who are sexually active	As above
6.1.1.7 Neurology	<ul style="list-style-type: none"> • To provide an inclusive neurology service by continuing to develop close links with tertiary centres • To develop further the care of patients with complex muscular disorders. • To improve access for all patients to neuro-diagnostics by developing plans for a neuro-physiology laboratory on site. • To continue to provide high quality expert services in epilepsy and MS. 	Adults	As above
6.1.2.8	<ul style="list-style-type: none"> • In joint working with St Georges 	Adults	As above

Specialities	Services	Patient and Target Location	Referral Group
Renal medicine	<p>continue to develop this service by increasing out-patient capacity at Kingston Hospital.</p> <ul style="list-style-type: none"> To build relationships with local GPs who are keen to see expansion of this service. 		
6.1.2.9 Respiratory medicine	<ul style="list-style-type: none"> To provide a first class patient friendly and convenient respiratory service to the local community in conjunction with GP colleagues. To increase and develop the role of the respiratory nurse specialists in support of early discharge and “at home” services for COPD and oxygen therapy. To increase nursing support to the tuberculosis services. To continue meeting lung cancer access targets while enhancing the speed and effectiveness of the diagnostics pathway. To establish a Respiratory Care Centre integrating the out-patient, diagnostic and supporting facilities in pursuit of a “one stop shop” service. To provide input to all inpatients with respiratory disorders supported by the development of more specialist services on the respiratory ward including HDU facility. To continue and expand working relationships and links with St George’s and the Royal Brompton as tertiary referral centres for specialist respiratory services. 	Adults	As above
6.1.2.10 Rheumatology	<ul style="list-style-type: none"> To continue to provide high quality general rheumatology services. To improve access for patients to state of the art biological treatment such as anti-TNF, anti B and T cell. To continue to expand the range of day case treatments available within the new day unit. To continue the development of nurse led services. To continue the development of osteoporosis services and the associated vertebroplasty procedures. 	12 years and upwards	GP’s from Kingston, Richmond and Twickenham, Surrey, Merton and Sutton, and Wandsworth PCT’s

Specialities	Services	Patient and Target Location	Referral Group
	<ul style="list-style-type: none"> To provide a prompt, direct access injection service to all local patients. 		

6.1.3 Accident and Emergency Department

Key Strategic Position

To be the main open access service for the Hospital attracting self referral and GP referrals from all the local PCT's and ensuring that the experience in this department will mean that patients will want to come back to this hospital for all their healthcare needs.

Speciality / procedure	Strategy	Patient and target location	Referral group
6.1.3.1 A&E	<ul style="list-style-type: none"> Modern department Staffed throughout the 24 hours with highly skilled clinicians able to manage all emergency and urgent problems Smooth interface with all other medical specialties via discrete assessment centres. Working alongside PCT to provide urgent care at the right time and in the right place by the right staff. Excellent local reputation for care of babies and young children Working towards the development of a "see and treat" model within minor injuries so patients are treated quickly and accurately. Expanding the skills of emergency nurse practitioner so they can release the doctors to see those more critically ill. 	<p>Conveniently situated for Kingston, Chessington, Esher/Surrey, Roehampton Richmond and Putney patients</p> <p>Excellent reputation for care of babies and young children.</p>	All ages

6.1.4 Bed Management

To provide day to day efficient management of all speciality beds including both planned (in-patient elective admissions) and unplanned (emergency) admissions. All patients are admitted within the established time limits laid down by the "NHS plan" and comply with privacy and dignity standards including the management of speciality, sex, infection control, special needs (such as confused) whilst ensuring the environment is both safe and quiet to aid recovery.

The team of bed managers and site managers are led by the Head of Admissions and operates for 365 days a year 24 hours per day. It is responsible for bed allocation in all the following specialities: general and specialty medicine, general and vascular surgery including breast and upper and gastro-intestinal surgery ,and gynaecology. They are also responsible for the management of the beds within intensive care, high-dependency and coronary care.

6.2 Surgery and Critical Care CD

Organisation Chart



The Surgery and Critical Care Division provides a comprehensive acute assessment, treatment and critical care service and is responsible for planned and emergency surgery across a board range of specialities, including:

- General Surgery
- Trauma and Orthopaedics
- Urology
- Ophthalmology
- Ear, Nose and Throat
- Oral, Maxillo Facial, Orthodontic and Restorative services
- Plastic Surgery
- Pain

In addition to surgical specialties, the Directorate provides Audiology services and Community Dental services as well as managing Main Theatres, Critical Care (including HDU and CDU), Anaesthetics and the Day Surgery Unit.

To support patient access, our outpatient clinics are held at number of sites, including, Kingston, Queen Mary's, Teddington and Molesey.

Routine Paediatric Audiology is offered at Emberbrook Health Centre, Oakhill Health Centre, Maple Children's Unit and in the home environment.

Detailed information about the individual services is provided below.

The Surgery and Critical Care Division aims to ensure all our patients receive timely access to high quality care. This aim is achieved by our commitment to:

- Deliver evidence-based and safe medical practice.
- Train staff in key competencies, including, clinical and customer care.
- Minimise risk, through, for example, training, shared learning, audit, protocolled practice, learning from incidents and complaints.
- Meet National NHS targets and good practice standards around, for example, waiting times, MRSA rates and length of hospital stay.
- Providing a high quality service by continually monitoring the standards of our service and acting on the results.

Key achievements, include, meeting national targets for outpatient, day surgery and inpatient appointments, managing MRSA rates through effective pre-screening and management policies, having a high proportion of operations – where clinically appropriate – being carried out as day cases, and where clinically appropriate, reducing patients' length of stay in hospital.

6.2.1 Orthopaedic Services

The orthopaedic department is staffed by 8 consultants and provides elective surgical services and a 24 hour 7 day a week trauma service. The department is also linked with the Elective Treatment Centre at Epsom and provides consultants to the unit to undertake hip and knee replacement operations. Outpatient services are provided on the Kingston hospital site and also at Queen Mary's Roehampton, Molesey and Teddington.

6.2.1.1 Orthopaedic Outpatient Department

The department provides outpatient service for patients referred from primary care for specialist advice and treatment and for patients following traumatic injuries.

6.2.1.2 Orthopaedic Pre-Assessment	The Pre Assessment service reviews patients a minimum of 2 weeks prior to their admission for Elective Surgery. Patients are reviewed by a doctor and a nurse to ensure they are fit for their forthcoming surgery. The assessment includes a Physical examination, blood tests and any other investigations as required. Patients are given information regarding their procedure and have an opportunity to ask questions.
6.2.1.3 Orthopaedic Wards	<p>The orthopaedic in-patient area is a 57 bedded unit that manages the care and treatment for trauma and orthopaedic patients.</p> <p>The unit provides high quality evidence based care to our patients.</p>
6.2.1.4 Canbury Ward (16 beds)	This is an elective orthopaedic and general surgical ward that provides high quality care for all our patients undergoing planned surgical operations. All patients admitted onto this ward are screened for MRSA prior to admission.
6.2.1.5 Cambridge Ward (30 Beds)	This ward received patients from Claremont Ward - the Trauma Assessment Unit. It is a 30 bedded ward that cares for patients following emergency trauma admissions.
6.2.1.6 Claremont Ward (14 Beds)	This is the Trauma Admissions Unit that admits all emergency trauma admissions from the Accident & Emergency Department or Fracture Clinic. Patients are transferred out of the unit to the trauma ward within 24-48 hours of their admission to Kingston Hospital.
6.2.2 General Surgery	<p>The department is staffed by 9 consultants who have specialist interests which include</p> <ul style="list-style-type: none">• vascular• upper gastrointestinal• hepato-biliary• colorectal• breast• and plastics surgery. <p>Elective inpatient and day case surgery takes place on the Kingston site for all specialities except plastic surgery inpatient cases. Outpatient services are provided on the Kingston Hospital site and Queen Mary's Roehampton. There is also a link to St George's Hospital for special treatments such as ERCP.</p>

6.2.2.1 General Surgery Pre-Assessment Service	The Pre Assessment service reviews patients a minimum of 2 weeks prior to their admission for Elective Surgery. Patients are reviewed by a doctor or a nurse to ensure they are fit for their forthcoming surgery on the new "Traffic Light" system for pre-assessment. The assessment includes a Physical examination, blood tests and any other investigations as required. Patients are given information regarding their procedure and have an opportunity to ask questions.
6.2.2.2 Isabella Ward (13 beds)	Isabella ward is an 18 bedded female ward specialising in Gynaecology and Breast surgery. They accept both emergency and elective cases. The nursing staff are experienced in looking after a range of Gynaecological and Breast conditions and are supported by the Medical staff. There are two gynaecology nurse specialists attached to the ward. There are also 3 Breast care nurses employed at the Trust who regularly review patients on the ward.
6.2.2.3 Astor Ward (25 bed)	Astor ward is a 24-bedded area specialising in Vascular surgery. It caters for both male and female patients in single sex bay areas. It receives emergency and elective patients. The nursing staff are experienced in looking after a variety of vascular conditions, as well as other surgical problems. The ward has strong links with the Tissue Viability Nurse Specialist.
6.2.2.4 Sycamore Ward (25 bed)	Sycamore ward is a 24- bedded ward specialising in Colorectal surgery. It has both male and female patients, cared for in single sex bays. It accepts both emergency and elective patients. The nursing staff are experienced in looking after a wide variety of colorectal conditions and support is provide to them by the Stoma Nurse Specialists and the Colorectal Nurse specialist.
6.2.2.5 Surgical Assessment Unit (5 beds)	
6.2.2.6 Colorectal and Stoma services	<p>There are 2 highly experienced Nurse Specialist's in Stoma Care and 1 in Cancer Support. The Stoma Care Nurses work 8am-4.30pm Mon-Fri. They offer advice, teaching and ongoing support to all patients with the prospect of a stoma, in both the hospital and community settings. They are available for teaching, talks and lectures on all aspects of stoma care to the public, PCT's, universities and hospital workers. They provide "drop in" clinic's at</p> <ul style="list-style-type: none">• Surbiton Hospital Outpatients Dept - 1st Monday of each month 9am-11am• Molesey Hospital Outpatients Department - 3rd

Wednesday of each month 2pm-4pm

- and by request at Kingston hospital by phoning 020 8934 2251.

The Cancer Nurse Specialist is available for telephone consultations on 020 8934 3069 and gives support to in-patients with a diagnosis of cancer.

6.2.3 Urology Services

The department is staffed by 5 consultants who have specialist interests in stones, incontinence and paediatric work. Elective inpatient and day surgery work takes place on the Kingston Hospital site. The outpatient service is provided both at Kingston Hospital and as part of the Action on Urology Rapid Access clinic at Queen Mary's Roehampton which provides a one stop service for generic urological problems.

6.2.3.1 Alexandra Ward (20 bed)

Alexandra Ward is a 23-bedded Urology ward. It has both male and female patients, cared for in single sex bays. It accepts emergency and elective patients. The nursing staff are experienced in looking after a wide range of Urology conditions and are well supported by the Urology Nurse Practitioner and the Urology Nurse Specialist.

6.2.3.2 Urology services and Urodynamics

The Urodynamics Unit and Urology Nursing Team provide a service to both in-patients and out-patients (adults). They accept direct referrals from Primary and Secondary practitioners. A wide range of diagnostic investigations such as prostate assessment and cystometrograms are performed, along with treatments and care in areas such as bladder chemotherapy and continence assessments, to name but a few. The Team consists of the Urology Nurse Specialist, Ward Based Urology Practitioner, Urology Sister for Urodynamics Unit and Erectile Dysfunction and two senior urology staff nurses.

6.2.3.3 Urology Pre-Assessment

The Pre Assessment service reviews patients a minimum of 2 weeks prior to their admission for Elective Surgery. Patients are reviewed by a doctor and a nurse to ensure they are fit for their forthcoming surgery. The assessment includes a Physical examination, blood tests and any other investigations as required. Patients are given information regarding their procedure and have an opportunity to ask questions.

6.2.4 Royal Eye Unit

Ophthalmology and ophthalmic surgery is provided within the Royal Eye Unit. The service is led by 4 Consultants specialising in

- glaucoma
- cataract surgery
- medical retinal surgery
- photodynamic therapy
- paediatric ophthalmology and strabismus

	<ul style="list-style-type: none"> (squint) • plastic ophthalmic surgery. <p>The service is supported by specialist ophthalmic nurses and a team of trained orthoptists.</p>
6.2.4.1 Ophthalmology Pre-Assessment	Patients are pre-assessed for cataract surgery to determine their fitness for surgery. 45 – 50 patients are reviewed each week, Monday - Friday.
6.2.4.2 Ophthalmology accident and emergency service	A specialist emergency service is provided in the Royal Eye Unit, Monday to Friday 9am – 6pm and at the weekends in the main A&E department from 10am – 1pm.
6.2.4.3 Ophthalmology surgical service	Specialist Ophthalmic Theatres are located within the Royal Eye Unit. Consultant Ophthalmic Surgeons operate Monday – Friday with the support of a specialist anaesthetic team, theatre practitioners and nursing staff.
6.2.4.4 Ophthalmology outpatient service	Clinics are held every morning and afternoon Monday to Friday in the Royal Eye Unit. Orthoptic services run alongside the clinics. Laser treatment, photodynamic therapy and minor-operations are all carried out within the outpatient service.
6.2.5 Princess Alexandra Wing	
6.2.5.1 Oral Surgery and Maxillofacial	Oral/Maxillofacial receive patients from General Dental/Medical Practitioners and other health professionals for the advice and treatment for minor surgery, oncology and facial trauma under the care of three Maxillofacial Consultants.
6.2.5.2 Orthodontics	Receive patients from General Dental and Medical Practitioners and other health professions for the advice and treatment of correction of severe dental and facial abnormalities.
6.2.5.3 Restorative Services	Receive patients from General Dental/Medical Practitioners and other health professionals for advice on Prosthetics, Oncology reconstruction, Endodontics, and Implantology under the care of the Restorative Consultant.
6.2.6 Ear Nose and Throat Service	<p>The ENT service provides both day case and outpatient facilities. The department is staffed by a team of nine otolaryngologists who provide patients with a wide variety of services and treatment programs for diseases of the ear, nose, throat and neck, including:</p> <ul style="list-style-type: none"> • Hearing impairment • Dizziness • Ringing in the ears (Tinnitus)

- Nasal, sinus and voice complaints
- Snoring
- Cancer of the throat
- Reconstructive and cosmetic surgery of the head and neck

The Audiology department provides integrated services to individuals with hearing and balance disorders. Outpatient clinics are held at Kingston Hospital, Queen Mary's Hospital and several community clinics within the area. The team comprises audiologists, assistant audiologists and an educational audiologist who provide hearing screening, audio-vestibular assessment, aural rehabilitation and a specialist Bone Anchored Hearing Aid service. Patients are referred from a number of sources across the sector.

Service wide modernisation was achieved in December 2004 in accordance with the national Modernising Hearing Aid Services programme. This has resulted in an increase in the amount of rehabilitation time allocated per patient and to routinely fit digital hearing aids.

6.2.7 Anaesthetic Department

There are three specialisms within the field of anaesthetics:

▪ Anaesthesiology for surgery

The department provides anaesthetic services to nearly 50 major surgery sessions, 40-day surgery sessions, 10 ophthalmic sessions and 10 obstetric theatre sessions per week. The team consisting of 22.5 WTE Consultants and 22 junior medical staff also cover out of hours emergency work in surgery, orthopaedics and obstetrics.

▪ Intensivists

Kingston hospital has a team of 6.5 WTE Consultants who specialise in the treatment of critically ill patients on the intensive care unit.

▪ Pain Relief

Relief for acute pain on the wards is provided by an acute pain nurse specialist, supported by 2 Consultant Anaesthetists. Chronic pain also has a dedicated multidisciplinary team. Referrals are accepted both from GPs and from other hospital consultants. A team of 3 Consultant Anaesthetists works alongside 3 clinical psychologists, 2 specialist physiotherapists, an acupuncturist and Alexander Technique Teacher. Treatments offered include a comprehensive range of injections and nerve blocks and medication for pain relief, as well as acupuncture and psychological treatments aimed at improving disability and distress.

There is also an 8-week outpatient Pain Management Group Programme. Pain services are also provided on the Queen Mary's site.

6.2.8 Main Theatres (8 main theatres)

There are eight main theatres including two laminar flow theatres for major joint surgery. Each theatre team consist of Nurses and Operating Department Practitioners (ODP) specialising in the fields of anaesthetics, sterile/scrub and recovery. The range of surgery undertaken includes general, vascular, gynaecological, orthopaedic, trauma and emergency surgery.

6.2.9 Day Surgery

The Trust is justifiably proud of its position as a national leader in day surgery. It has one of the highest levels of day surgery in the country with more than 85% of patients treated as day cases. There are four theatres and two Endoscopy suites supported by a 37-bedded ward, undertaking over 14,000 procedures per year. The teams of nurses cover anaesthetic, scrub and recovery within theatre as well as running the ward, Pre-assessment clinics and the Endoscopy service, it is also one of the few Day Surgery Units that provides a paediatric service. Recently the Unit began running Nurse-led Endoscopy sessions, with Nurse Endoscopists, to support the Clinicians. The teams are proud of the care they give as recent statistics show that only 1% of patients feel unable to go home on the same day. In 2004/05 the unit became the first day surgery to be awarded the highly acclaimed HQS quality standard.

6.2.10 Critical Care Unit (12 beds)

The Critical Care Unit consists of three areas, Intensive Care, High Dependency and Coronary Care. Ten of the beds are divided between Intensive Care and High Dependency:

The Intensive Care Unit treats patients with multi-organ failure. The beds are for critically ill patients who require nursing on a one-to-one basis. Many of the patients are on ventilators. The highly trained nurses who care for them are able to adjust medication rates and, where appropriate, initiate weaning patients off the machine. Complex equipment and treatments are used in the Intensive Care Unit.

The High Dependency Unit is for patients who no longer require Intensive Care or for patients whose condition may deteriorate to the point where Intensive Care is needed. These beds are used for patients who have just been through major operations or for those who have a serious medical condition. The ICU/HDU also has an isolation room with negative/positive air pressure for patients who have a known infection or for patients with a suppressed immunological system.

The ICU/HDU also offers patients a "follow up" clinic, after they have been discharged from hospital. Patients are able to discuss their experience whilst on the unit, with members of the team. The clinic is run by Unit nursing and medical staff, a physiotherapist and a member of the Outreach team. Patient feedback is invaluable to help us improve the care we provide.

Coronary Care (further 2 beds)

The coronary care unit admits patients who have cardiac conditions requiring close monitoring and specific cardiac treatment. The nursing staff are trained to recognise changes in cardiac rhythms which need immediate emergency treatments, such as thrombolysis or cardiac pacing.

Outreach Team

The outreach team of 4 highly qualified and experienced nurses visit the medical and surgical wards to assist the regular ward staff to manage patients who are at risk of deteriorating. The team is trained to quickly recognise and rapidly treat the symptoms of deterioration thus reducing the need for patients to be transferred to ICU or HDU.

6.2.11 Sterile Services

The Sterile Services Department provides sterile dressings and singly-wrapped surgical instruments for use in wards or departments; or large trays of instruments and drapes which are used in the operating theatres for various procedures.

In addition to Kingston Hospital, the department provides a service to a number of community hospitals, clinics and G.P. Centres.

It operates in compliance with the Medical Devices Directive 93/42/EEC and holds ISO 9001:2000 and ISO 13485:2003 certificates.

6.2.12 Surgical Appliances

A surgical appliance is defined as an externally applied device used to modify the structural or functional characteristics of the neuro-musculo-skeletal system. All are intended to help a deformed or weakened part of the body. Patients needing surgical appliances range from those with a slight disability to the chronically disabled.

Orthotic clinics are held each week for the measuring, designing, fabricating, assembling, fitting, adjusting of appliances such as:

- Callipers
- AFOs ankle foot orthosis

- Braces - knee, hip, spinal
- Surgical & lumbar corsets/jackets
- Orthopaedic shoes & boots
- Insoles & shoe raises
- Stockings

Nurse led Lymphoedema clinics and Breast prosthesis clinics are also held weekly for the provision of these appliances.

6.2.13 Waiting Lists

Work is ongoing in the division to meet the 18 week milestones to ensure that national targets for inpatients, day surgery and outpatients are achieved by March 2008.

Surgery including day surgery

Currently the waiting times for surgery within the surgical services directorate are within the national target of 6 months. There have been no reported breaches of this target since it came into effect in October 2005. Previously the trust was working to the national target of 9 months.

Hospital Cancelled Operations

The directorate is committed to achieving the national target for rescheduling of cancelled operations within 28 days of cancellation and are please to report that there have been no breaches of this target.

Partial and Full booking

All patients requiring inpatient and day surgery within the directorate are booked either using partial or direct booking methods meaning that the patient has negotiated the date for their surgery either on the day of referral or at the point that they reach the top of the waiting list.

All patients requiring outpatient appointments within the directorate are booked either using partial or direct booking methods meaning that the patient has negotiated the date for their surgery either on the day of referral or at the point that they reach the top of the waiting list.

The department is working hard to ensure that clinics are made available to GP using the new Choose and Book system which enables the patients to negotiate their appointment at a time suitable to them at the point of referral with their GP.

Outpatients waiting times

The directorate is meeting the national target for outpatient appointments which currently stands at 17 weeks, the directorate is currently booking all patients to 13 weeks in preparation for the reduction in the national target which impacts on the 1 of January 2006.

The pain clinic meets the performance target of 18 weeks for all Outpatient consultations. This was reduced to 13 weeks at the end of 2005.

6.2.14 Patient Information Leaflets

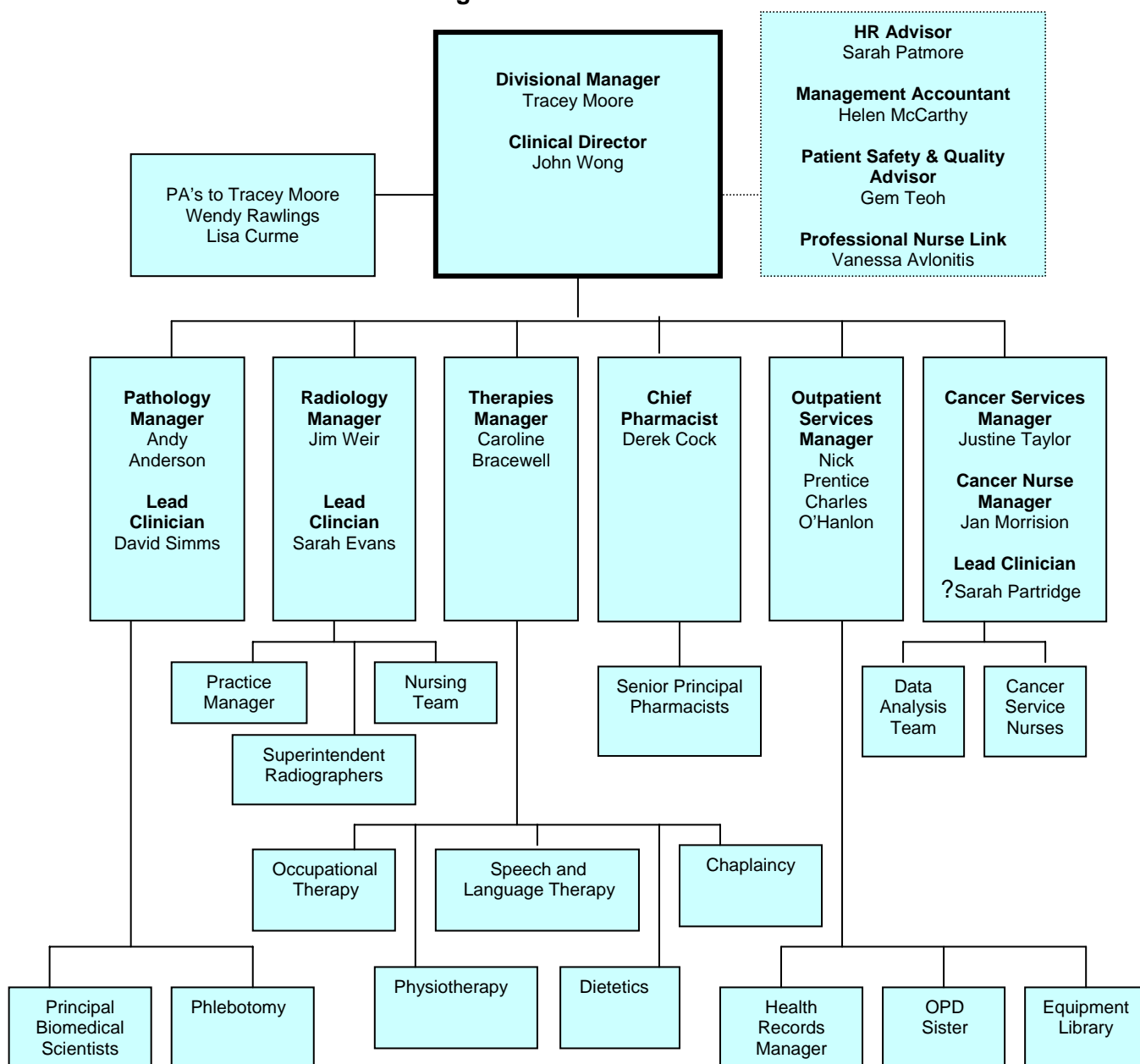
Elective Surgical information leaflets in:

- Abdomino-Perineal Excision of the Rectum
- Abdominal rectopexy
- Anal Fissures
- Anal Warts
- Angiogram/Angioplasty
- Anterior Resection of Rectum
- Axillary clearance
- Axillary surgery
- Breast Cancer Support (The role of the Breast Care Nurse)
- Delormes procedure
- Excision of a breast lump
- Glyceryl Trinitrate 0.2% Ointment (GTN)/Diltiazem 2% Gel
- Having a Mastectomy
- Hernia repair
- Haemorrhoidectomy
- Haemorrhoids
- Laparoscopic Cholecystectomy
- Lateral Anal Sphincterotomy
- Left Hemicolectomy
- Pruritus Ani
- Rectal Cancer
- Right Hemicolectomy
- Sentinel node biopsy
- Surgery for Small Bowel Crohn's Disease
- Tests for Bowel Problems a guide to help you
- Thyroidectomy
- Ulcerative Colitis
- Varicose Vein repair
- You and Your Anaesthetic
- Total or Partial Hip replacement booklet
- MRSA Factsheet
- ACL Reconstruction Treatment Guidelines
- Ms. Kendall's Ankle Arthroscopies, Post-op Foot Surgery & Metatarsal Osteotomy
- Mr. Davey's Hand Surgery
- Laparoscopic Cholecystectomy Leaflet
- Hernia Repair Leaflet
- Thyroidectomy and Thyroid Lobectomy Leaflet
- Varicose Vein Surgery Leaflet
- Arthroscopic Subacromial Decompression Guidelines Leaflet
- You and your anaesthetic Booklet
- General Oral Health/Orthodontic leaflets

This list is not exclusive and provides examples of the leaflets that are currently available. All leaflets are reviewed regularly to ensure they provide the most up to date and comprehensive information.

6.3 Clinical Services CD

Organisation Chart



This Directorate comprises of Radiology, Pathology, Pharmacy, Therapies, Cancer Services and Outpatients (including health records).

The Directorate aims to support all clinical areas of the Trust and Primary Care in a range of diagnostic and clinical services. During the last 12 months the Directorate has been successful in reducing waiting times in radiology and outpatient services, introducing innovative ways of working, e.g. musculoskeletal physiotherapy practitioner services and in recruiting and retaining difficult to recruit staff.

- 6.3.1 Radiology
- The Radiology team provides a radiology service at Kingston, Surbiton, Queen Mary's, Tolworth and Molesey Hospitals. The main site is at Kingston Hospital where a range of modalities are available at the request of General Practitioners and hospital medical teams and where a 24 hour service is available. Diagnostic and interventional radiology is provided. The modalities include obstetric and non-obstetric ultrasound, CT, general x-ray, mammography, fluoroscopy and nuclear medicine. A MRI unit is situated on the Kingston Hospital site and is managed by a private company in collaboration with the hospital department. Direct access services for GPs include plain x-ray, ultrasound, bone densitometry, CT, ultrasound and MRI.
- 6.3.2 Pathology
- The primary objective of the Division of Pathology is to provide a high quality diagnostic and clinical service that contributes to the high quality of care provided by health care professional based in this Trust, community outlets and GP Practices. A UKAS recognised body Clinical Pathology Accreditation (UK) Ltd (CPA) accredits the Division of Pathology for the quality of service it provides.
- 6.3.3 Pharmacy
- The Pharmacy Department provides a dispensary for outpatients requiring immediate treatment. It also supports the provision of an effective medicine management service. This includes advice on prescribing, the dispensing and supply of medicines and participation of pharmacists as integral members of the clinical teams.
- 6.3.4 Therapies
- The Therapies Department includes physiotherapy, dietetics, occupational therapy, speech and language therapy and chaplaincy services
- The physiotherapy service has recently relocated to a brand new facility in the new Kingston Surgical Centre and supports patients requiring treatment before or after attendance in the outpatient clinic or as an inpatient. Extended scope physiotherapy practitioners at Kingston Hospital have supported the consultant orthopaedic surgeons in the development of a musculoskeletal service. They are now able to offer this at other sites in the community – e.g. Molesey Hospital.
- The Department of Nutrition and Dietetics provides a complete range of services dealing with all aspects of nutrition in both health and disease to patients in the hospital and community.
- The Occupational Therapy Service supports the acute assessment and discharge planning of inpatients for adults and children. Support for children with disabilities is provided by the Maple Children's Unit team.
- The Speech and Language Therapy Department provides a service to adults and children presenting with acquired communication and swallowing disorders.

The Chaplaincy Service offers spiritual, religious and pastoral care to staff, patients and their visitors.

6.3.5 Cancer Services

The Cancer Services Department provides administrative and specialist nursing support to the full range of clinical cancer services in the hospital. This includes breast, urology, lung, gynaecology, colorectal and upper GI. The department is responsible for ensuring that the systems are in place to enable clinicians to provide multidisciplinary support to patients and that national cancer standards are met.

Oncology services at Kingston Hospital are provided by the Royal Marsden Hospital. Patients requiring oncology treatment currently attend the RMH at either the Sutton or Chelsea sites. On completion of the Sir William Rous Unit in 2008, chemotherapy will be provided at KH.

6.3.6 Outpatients (including health records)

The hospital provides a full range of surgical and medical outpatient services. These services are supported by medical teams, administrative and clerical staff, nurses and therapists. The majority of these are based in the outpatients department which has easy access for radiology and phlebotomy services.

The Health Records Department supports inpatient and outpatient work. It is responsible for the storage and retrieval of health records, the provision of appointments and receptioning of outpatient clinics.

6.3.7 Waiting Lists

Please see links under Useful Information

6.3.8 Patient Information Leaflets

Cancer

- Breast
- Colorectal
- Gynae
- Haematology
- Lung
- Palliative Care (patient leaflet/staff leaflet)
- Skin (plus separate ones on basal cell, lymph node checks, malignant melanoma and squamous cell carcinoma)
- Urology
- Cancer BACUP - site specific leaflets
- Macmillan Cancer Relief (the Cancer Guide, Help with the Cost of Cancer)
- Royal Marsden - Radiotherapy, Chemotherapy, Cancer of the Prostate
- Cancer Resource Centre - How to Reduce your Cancer Risk (Gujurati, Urdu, Punjabi)

Pathology

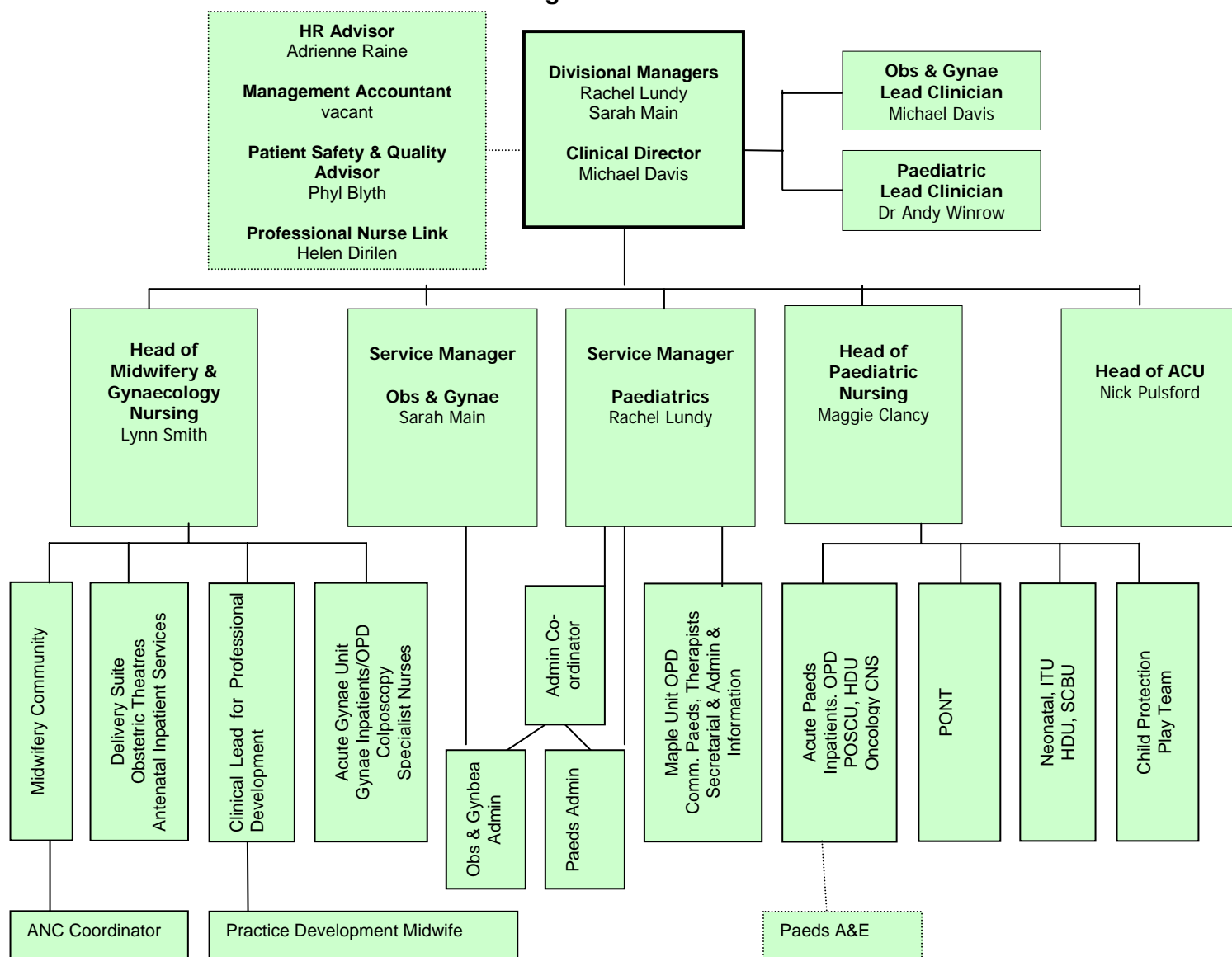
- Instructions For Collection of 24 Hour Urine Sample
- Instructions For Collection of 24 Hour Urine Sample – 5HIAA
- Instructions For Collection of 24 Hour Urine Sample – Bottle Containing a Preservative
- Instructions For Collection of an Early Morning Urine Sample
- Instructions For Collection of 24 Hour Urine Sample
- Instruction For The Collection of Semen Samples
- Instructions For Patients Having a Fasting Blood Test

General Information Leaflet For Patients

- Information Leaflet For Patients – Oral Glucose Tolerance Test
- Information Leaflet For Patients – Pancreolauryl Test
- Information for Patients – Haemoglobinopathy
- Information for Patients – Anticoagulation Services

6.4 Women and Child Health Clinical Directorate

Organisation Chart



The Women & Child Health Directorate employs approximately 424wte staff with a budget of nearly £24 million. The directorate serves the population of Kingston as well as providing some services to surrounding Primary Care Trusts.

The directorate management team have created a supportive and inclusive culture in which staff can thrive, working to give a very high quality service to women, children and other stakeholders. The team works collaboratively to maintain, develop and improve its services to patients in Kingston and other local areas.

The directorate takes an innovative and ambitious approach to developing and delivering services to a very high standard whilst meeting all service plans and maintaining a balanced budget. The wide variety of service delivery points include these main areas:

- Children's Outpatients Department
- Ambulatory Care Unit
- Children's Inpatients
- Paediatric Outreach Nursing Team
- Neonatal Unit
- Community Paediatrics
- The Maple Children's Centre
- Gynaecology
- Maternity Services
- Assisted Conception Unit
- Support for Children's A&E

6.4.1 Acute Paediatrics

The Acute Paediatric Consultant team provide a range of services to children in the main Children's Outpatient Department and Ambulatory Unit as well as caring for children on the children's ward. The department also contains a level 2 Neonatal Intensive Care Unit with admissions of 300 - 350 babies per annum. The Acute Paediatric Department provides major input into the Children's A&E Department that cares for approximately 25% of all A&E attendees. The department also provides care for children at home via the Kingston Paediatric Outreach Nursing Team (PONT) as well as interfacing with the children's community nursing team for Richmond and Twickenham. The Paediatric Department provides shared care for children with cancer both in hospital and at home coordinated by a clinical nurse specialist. Acute physiotherapy staff and dieticians also support the team.

Acute Consultant Paediatricians:

Dr Andrew Winrow, Dr Eman Jorges, Dr Titi Ayeni, Dr Selma Al Wahab, Dr Dwight Lind, Dr Andrea Beaton, Dr Vinay Pai

6.4.1.1 Children's Out Patients

This is a dedicated department within paediatrics providing general and specialist outpatient services to children. To ensure a high quality service with continuity of care, all routine general paediatric clinics are provided by consultants. As well as general paediatric clinics there are specialised multidisciplinary clinics for children with feeding problems, cancer, epilepsy, neonatal follow up or continence issues as well as clinics attended by external visiting specialists predominantly from tertiary centres in London including endocrine, renal, cardiology and neurology clinics. There are an increasing number of therapists' clinics such as dietetics and hip scan as well as nurse-led clinics e.g. diabetes. Specialist registrars supervised by a nominated consultant, staff a weekday emergency clinic (4 weekdays). Services also include an investigation clinic that incorporates a phlebotomy service for children under 7 years of age and some outreach clinics.

6.4.1.2 Ambulatory Care Unit (Dolphin Ward)

The unit assesses and treats children who do not require admission for inpatient care. Children are referred from A&E, the community nursing teams, consultant paediatricians and some children with chronic illness have direct access status. Opening hours are 8am - 8pm Monday to Friday and 10am - 6pm at weekends. The unit is staffed

by experienced paediatric nurses who will lead the care and discharge of patients with the support of an Associate Specialist doctor. Analysis has shown that the Ambulatory Care Unit has contributed to a reduction in hospital admissions and facilitated the improving A&E waiting times. The Unit provides chemotherapy and blood product administration, by an oncology clinical nurse specialist, to the large number of shared care oncology patients within the department.

6.4.1.3 Children's Inpatient Area (Sunshine Ward)

Sunshine is a 24 bed children's ward providing inpatient care and treatment for young people under 16 years or 18 yrs if in full time education. The ward includes a single paediatric high dependency bed (shortly to increase to 2 beds) and is supported by a dedicated team of nurses and play therapy staff. 80% of admissions to the ward are via A&E, the remainder are elective admissions for surgery, investigations or direct access patients with chronic illness. The ward benefits from a twice-daily consultant ward round on weekdays and a single consultant round over the weekend days. Surgical and orthopaedic patients are cared for on Sunshine Ward.

6.4.1.4 PONT – Paediatric Outreach Nursing Team

The team provides nursing care to children in their home or school environment within the Kingston area in liaison with hospital multi-disciplinary teams and primary healthcare professionals. The team is based within the hospital, allowing members to meet and discuss home care before a patient is discharged. The team also provides support, education and advice for families and carers to empower them to meet their child's health needs.

6.4.1.5 Paediatric Diabetes Team

The Paediatric Diabetes Team provide treatment, education and support for children with diabetes. The team consists of a paediatric consultant, two diabetes clinical nurse specialist, dietician and play specialist.

6.4.1.6 Neonatal Unit

The level 2 unit provides intensive care, high dependency and special care to babies from 24 weeks gestation. We have four intensive care cots, two high dependency cots and 14 special care cots.

The neonatal unit continues to operate the milk bank, which collects expressed breast milk for premature babies. Our milk bank is one of the few remaining in the country.

6.4.2 Community Paediatrics

The consultant team provides specialized secondary and some tertiary level services to specific groups of children, including assessment and diagnosis, medical treatment, ongoing management and participation in multi-disciplinary, multi-agency forums including child protection services and the Healthcare of Children with Special Educational Needs.

Working to provide statutory services required by the relevant legal frameworks, the team looks after the health of vulnerable children, covering physical, communication and learning disabilities, sensory impairment and behavioral problems. The team also provides paediatric input to short-term care within the Maple Children's Centre and health promotion activities.

Community Consultant Paediatricians:
Dr Claire Scott, Dr Selladurai Kamalanathan, Dr Alison Pearce

6.4.2.1 Maple Children's Centre

The Maple Children's Centre is the base for the local Child Development Team providing services for children and young people who have a range of developmental and special needs. Located on the Kingston Hospital Site with its entrance in Wolverton Avenue, it comprises two departments, the Outpatient Department and the Short Term Care Unit.

Staff working at Maple have specialist skills and work together as a Multidisciplinary Team to meet the individual needs of each child. We aim to create a friendly atmosphere where families can feel welcome. We work in close partnership with the parents and where appropriate liaise with other agencies, including education, other therapists, social services, etc.

There are plans currently being developed to integrate much of the Maple Centre into a new Children's Trust led by the Royal Borough of Kingston.

6.4.3 Obstetrics and Gynaecology

The department offers general gynaecology and specialist services such as:

- Acute gynaecology unit including early pregnancy
- Assisted conception unit with IVF provision
- Laser Colposcopy
- Joint urogynaecology clinic
- Gynaecology oncology service
- Treatment of endometriosis
- Minimal access surgery

The department operates both a main and day surgery list and includes a very busy outpatient department and inpatient ward consisting of 13 acute beds.

The department has developed an integrated gynaecological service including inpatients, day surgery, acute service and outpatient procedures. Ultrasound scans are also available to women with problems early in pregnancy.

Consultant Gynaecologists:
Miss Jane Wilson, Mr Andrew Pooley, Mr Mike Davis,

	Mr Nick Anim, Mr Carl Chow, Miss Kate Panter, Mr Onsy Morris, Miss Rowena Bevan, Miss Florence Wilcock (Obstetrics only), Miss Ifat Atallah (Obstetrics only)
6.4.4 Maternity Services	Kingston Hospital is at the forefront in midwifery and obstetric care. Our purpose-built maternity unit and neonatal unit opened in 1995.
	Prior to moving into the new unit our deliveries were approximately 2,500 a year. This increased in 1995 to 3,200. Following the closure of Queen Mary's University Hospital maternity unit in 1997, our deliveries rose to 4,500 and over the past few years to 5,000. Due to the increase in the birth rate, our deliveries are now rising to 5,500 per year.
	<p>The main areas in Maternity include:</p> <ul style="list-style-type: none"> • Delivery suite with high-dependency area • Two maternity theatres • Midwifery-led unit • Antenatal and postnatal areas • Community services • Antenatal clinic and ultrasound dept at Kingston and Queen Mary's University Hospital • Day Assessment Unit
6.4.4.1 Delivery suite	We endeavour to provide one-to-one care for all women in established labour. Within the delivery suite we have a high-dependency area for women following a Caesarean section (CS) or acute episodes of compromise (e.g. Pre-eclampsia, DIC, PPH).
	The suite includes 12 delivery rooms.
6.4.4.2 Maternity Theatres	We have two operating theatres and elective Caesarean Sections (CS) are booked on a daily basis, excluding weekends.
6.4.4.3 Antenatal and postnatal care	There is a dedicated antenatal ward area to provide care to women in early labour and those with pregnancy related issues.
	A transitional care unit has been developed where midwives and nurses will provide care for babies receiving IV antibiotics, haemocues and phototherapy. Additional postnatal care, generally for women following a CS is provided in a satellite postnatal area.
6.4.4.4 Community Midwifery services	Antenatal care, bookings and postnatal care are a major part of the community midwives' role, therefore reducing the attendance at the hospital antenatal clinic and reducing the length of stay in hospital. There is close liaison with the GPs and Health Visitors in order to provide an efficient service and continuity of care to the mother and her family. Over 50 community antenatal clinics are held weekly.

Parentcraft education classes are provided in each area. These include afternoon and Saturday workshops.

Identification of child protection concerns is of paramount importance to enable a plan of care to be made in order to ensure the well-being of the mother, baby and staff. This includes social problems, drug and alcohol abuses and previous children on the child protection register.

6.4.4.5 Antenatal clinic

Consultant antenatal care is provided at both Kingston Hospital and Queen Mary's Hospital. In addition community midwives' booking clinics and midwives' antenatal clinics are held.

Advice and counselling (if appropriate) is given prior to and following antenatal screening tests including nuchal scan and anomaly scan.

There is a weekly specialist antenatal clinic for women with medical disorders in pregnancy. We also provide a counsellor for those women who have had a miscarriage or termination.

6.4.4.6 Day Assessment Unit

The unit is open Monday to Friday 8 a.m. to 6 p.m. and Saturday from 9 a.m. to 3 p.m. The DAU is a point of referral by the community midwives, GPs and self referring women.

6.4.5 Assisted Conception Unit

The assisted conception unit has been operating at Queen Mary's for 12 years and continues to enjoy many successful pregnancies. The department offers many and various treatments including IVF and has contracts with three local PCT's as well as providing for private treatments. The unit works in close collaboration with The Bridge Centre, a leading private facility who provide embryology services for us. The service is consultant led.

The unit was relocated to the new Queen Mary's Hospital Building.

Consultant Lead: Miss Rowena Bevan
ACU Manager: Nick Pulsford

6.4.6 Waiting Lists

Surgery (including day surgery)

We are pleased to be meeting all of the national targets for treating patients within appropriate timescales

Hospital Cancelled Operations

The Division is committed to rescheduling all hospital cancellations within 28 days of the original date for surgery.

Out-patients waiting times

The Division is meeting all of the national waiting time targets for seeing new outpatients and in many cases, exceeding these targets.

The Division has worked hard to make all of our clinics available to the national Choose and Book system by which patients can agree a new outpatient appointment whilst with their GP.

6.4.7 Patient Information Leaflets

Colposcopy:

- Cervical Screening THE FACTS
- Hysteroscopy & Endometrial Biopsy
- Hysteroscopy/D&C Information Note
- Information following colposcopic treatment of the cervix by Loop diathermy or laser
- Laparoscopy Information Sheet
- The colposcopy examination

Maternity:

- A guide for young mums and dads
- A New Guide to childhood immunisations
- Action on Pre-eclampsia
- Antenatal Screening
- Are you a young mum or mum to be?
- BabyGroe
- Blood Tests at the antenatal booking clinic
- Breastfeeding
- Bumps & Babies
- Feeding your new baby
- Free milk for pregnant women
- Give up Smoking
- Group B strep support
- Health & Domestic Violence
- Healthy eating during pregnancy
- How to register a birth
- I am going to have my baby by Caesarean Section
- JoJo Mamanbebe
- Malden Suite Information sheet
- Maternity Services Guide
- MMR the facts
- Money for Teenage Parents 2005
- Overseas visitors information request

Delivery Suite:

- About the Miscarriage Association
- For Family & Friends - How you can help
- Information for parents about post mortem examination of babies & children at St George's
- Late miscarriage
- Mainly for fathers
- Men & Miscarriage
- Preparing for your next baby
- Support for you when your baby dies
- The hidden grief
- The loss of your grandchild
- The next pregnancy: Guidance for parents
- We are sorry that you have had a miscarriage
- What has to be done?
- Why did it happen to us

Neonatal:

- Born too soon club for families
- Breast is Best
- Breastfeeding
- Childhood Immunisations
- Expresser
- Have your say!
- How to Register a Birth
- Neonatal Percutaneous BCG Immunisation
- Parents Information
- Receiving a Blood Transfusion
- Reduce the Risk of cot death
- Seat Belts & Child Restraints
- Sterilising baby feeding equipment
- The best fed baby book
- Welcome to Kingston Neonatal Unit
- What is Meningitis?
- Your premature baby

Paediatric Sunshine Ward – advice sheets:

- Ametop cream
- Appendicectomy
- Asthma advice sheet
- Bone scan

- Pre-Eclampsia support & information
- Pregnacare
- Protecting babies and children from secondhand smoke
- Reduce the Risk of Cot death
- S is for smoking & pregnancy
- Testing for Down's syndrome in pregnancy
- There's £250 waiting for your baby
- Twins, triplets and more - Information for you
- Twins, triplets and more - The First Year
- Vertbaudet
- Why blood pressure & urine are checked in pregnancy
- You, your baby & the RhD factor
- Young Mum's Guide
- Bronchiolitis
- Care of an intravenous cannula
- Care of pin sites
- Croup
- Diarrhoea and vomiting
- Febrile convulsions
- Glue ear and grommets
- Head injury
- Head lice
- Henoch-schonlein purura
- Hernias
- High temperature.
- Idiopathic thrombocytopenic purpura
- Kawasaki disease
- Magnetic resonance imaging (mri)
- Plaster of paris
- Pyloric stenosis
- Tonsillectomy
- Undescended testes
- Urinary tract infection

7. Reports and Independent Enquiries

Part 3 of this Publication Scheme contains a comprehensive list of bodies which are involved in the monitoring and /or inspection of our services.

All NHS bodies are subject to statutory regulation. The key body is the **Healthcare Commission** (formerly the Commission for Health Improvement (CHI)) (<http://www.healthcarecommission.org.uk/homepage.cfm>): The Healthcare Commission is the independent, inspection body for the NHS. It publishes reports on NHS organisations in England and Wales. They highlight where the NHS is working well and the areas that need improvement.

The Healthcare Commission's work includes:

- routine inspections (clinical governance reviews)
- investigating serious service failures
- reporting on key issues, such as coronary heart disease
- publishing performance ratings
- publishing data on staff and patient surveys
- joint inspections with other bodies
- managing the clinical audit programme

By publicly identifying where improvement is required and sharing good practice within the service, the Healthcare Commission helps the NHS to raise standards of patient care.

The Trust was assessed by the Healthcare Commission and their 2007/08 Report and the Trust's action plan are available from their web site –

http://2008ratings.healthcarecommission.org.uk/informationabouthealthcareservices/overallperformance/searchfororganisation.cfm?cit_id=48825&widCall1=customWidgets.content_view_1

Scores were awarded on a four point scale: weak, fair, good, excellent. We awarded ratings as follows:

Quality of services: Good
Use of resources: Excellent

In 2006/07

Quality of services: Good
Use of resources: Good

In 2005/06 the scores were as follows:

Quality of services: Good
Use of resources: Fair

Until 2004/2005, ratings for NHS trusts were awarded using the star ratings system - which focused on the way trusts spend money and manage resources. Scores were awarded on a four point scale from 0 stars to 3 stars. Our ratings were:

Performance rating 2005: **
Performance rating 2004: **
Performance rating 2003: **

8. Policies and Procedures

Corporate Policies in use within the Trust cover the following broad areas:

- Clinical
- Corporate
- Emergency
- Finance
- Health and Safety
- Human Resources
- Information Management and Technology

The Corporate Policies may be obtained from our Publication Scheme Co-ordinator. These include our Records Management Policy which includes our retention and destruction of records schedule.

In addition there are a number of procedures in use within the Trust. These include, but are not restricted to, human resources, prescribing and prescription, health and safety, and clinical procedures.

9. Public Involvement and Consultation

We have a statutory duty to involve service users, carers and the public in the work of the Trust. We will use this Publication Scheme to inform the public of any proposed service changes or variations in accordance with our duties under section 11 of the Health and Social Care Act 2001. This Act can be found at <http://www.opsi.gov.uk/acts/acts2001/20010015.htm> .

In September 1999 the Department of Health launched its "Patient and Public Involvement in the new NHS" policy to guide health organisations in involving patients, users, carers and the public in health and health services. The Trust is committed to the PPI principle and is very active in creating ways to involve the public in its activities.

PPI at Kingston Hospital

Central to our patient and public involvement, on April 15th 2002, the Trust launched the Patient Advice and Liaison Service (PALS). The PALS is a frontline service that aims to provide patients, their families and carers with someone to turn to when they have concerns or require more information on any aspect of their care. It

- provides information about local health services and puts people in touch with relevant voluntary organisations and support groups
- aims to resolve problems and concerns quickly before they become serious
- informs people of the complaints procedure and puts them in touch with specialist, independent advocacy services when they wish to complain formally
- acts as an early warning system for the Trust and Patients Forums by monitoring problems arising, highlighting gaps in services and staff training and submitting anonymised reports for action by both the Trust and Patients' Forums

- operates in a network with other PALS in the area to ensure a seamless service for patients who move between the different parts of the care system

The PALS department continues to take on more and more complaints at an informal level and have had to review the way data is collected in order to manage their workload effectively. Currently, only the most labour intensive or complicated cases are entered onto the database as time pressures do not allow all PALS contacts to be entered.

During the period 1st April 2007 - 31st March 2008, 2230 cases were logged onto the database, of which 11856 were concerns, 255 requests for information and the remainder requests for advice, referrals to relevant staff members and expressions of gratitude.

As well as resolving the individual patient's concerns wherever reasonable, a number of improvements have been made as a result of PALS concerns being raised including improved patient information letters, appointment administration, results letters, telephone access to departments, internal referral systems and facilities. Most concerns are dealt with quickly and comprehensively with only around 2.4% becoming formal complaints.

Other PPI

The Trust's Patient Involvement Strategy was approved by the Board in May 2003.

PPI is led at Trust Board level by Jane Gear, Trust Board Secretary and Head of Corporate Affairs.

Membership

In preparation for becoming a Foundation trust, we are now recruiting "members". These are patients or local residents who live in our catchment area and are interested in supporting their local hospital. Increasingly, members will have a strong role in helping us shape our services and will be a major part in our PPI strategy. More details about membership (which is free) and how to join can be found on our website http://www.kingstonhospital.nhs.uk/kh2/kingston_page.php?pageid=60

Overview and Consultation

Since January 2003 all local authorities with social services responsibilities have had the power to scrutinise health services. This contributes to their wider role in health improvement and reducing health inequalities for their area and it's inhabitants.

Further information can be obtained from the Publication Scheme Co-ordinator at the address in Part One.

Influencing the Trust

Formal consultation is normally carried out if major service changes are anticipated, and is managed by the lead Primary Care Trust. Where the service change is so

significant or covers several Primary Care Trust boundaries the Strategic Health Authority (London SHA) will lead consultation.

Overview and Scrutiny Committees have the statutory power to review service change.

10. Regular publications and information for the public

The Trust's Annual Report and Accounts, together with the Business Plan provide information on how well the Trust is doing and that we have achieved over previous years.

Our web site (<http://www.kingstonhospital.nhs.uk/>) provides information for the public, including current vacancies, our directory of services and a section on useful information about the hospital (for example maps and directions for how to reach us).

The Trust recognises the importance of providing information to patients to back up the information they receive direct from clinicians. The Trust has a wide range of patient information leaflets, and continually reviews these to ensure a consistency of style and that they are easy to read and understand.

We have an interpreting service. For in-patients please advise the hospital of any interpreting needs you have, or if an interpreter has not been booked, contact the Admissions team on 020 8546 7711 ext 3071.

Copies of individual leaflets can be obtained from the Publication Scheme Co-ordinator.

11. Complaints and Improvements

We aim to provide a high quality service to all patients and the public who use the hospital's services. We appreciate that things can go wrong and people will on occasion want to complain and have their complaint investigated. We also value people's views so that we can take these into account when planning future services.

The Trust has a well-established complaints procedure which follows the processes described in the NHS Complaints Procedure. We treat all complaints seriously and will listen carefully and sensitively to what complainants have to say. We will investigate your concerns thoroughly, confidentially, fairly and quickly and will aim to give a prompt response.

The Chief Executive is designated as responsible for responding to complaints received within the Trust, and can be contacted by writing to:

Ms Kate Grimes
Chief Executive
Kingston Hospital NHS Trust
Galsworthy Road
Kingston upon Thames
Surrey
KT2 7QB

The Complaints and Legal Services Department provides a centralised service to the Trust for the registration of complaints and compliments. The department undertakes a number of important functions, including:

- Promoting good customer care practice;
- Co-ordinating the recording, acknowledging, investigation and response to all formal complaints within the organisation;
- Ensuring that learning and improvements occur as a result of complaints;
- Providing help, support and training for all staff;
- Monitoring trends and analysis of complaints producing reports and data as required.

The Complaints and Legal Services team includes:

- Complaints Manager
Tel: 020 8546 7711 extension 2250
- Claims Manager
Tel: 020 8546 7711 extension 2062
- Complaints Analyst
- Claims/Legal Clerk

The department is based in Regent Wing, Kingston Hospital and you can email us on enquiries@kingstonhospital.nhs.uk

The Trust handles all complaints in line with the statutory requirements of the 1996 NHS Complaints Procedure, updated by the NHS(Complaints) Amendment regulations 2006, and the Trust Complaints Policy is reviewed regularly to reflect any change in requirements. Copies of the policy are available on request from the Complaints and Legal Services department.

All complaints are logged centrally on the Trust's database system, and acknowledged. Enclosed with the acknowledgement letter is information on how the complainant can pursue the issue should they remain dissatisfied with the outcome. The Legal Services and Complaints Manager and the Chief Executive check the final draft before it is signed and sent to the complainant.

The department produces quarterly and annual reports on the number of complaints and compliments received and an analysis of trends/issues. These are then reviewed by the relevant service areas and by the Governance Committee. Copies of these reports are available on request from the Complaints and Legal Services department.

Training is given to staff on complaints handling and customer care, and a leaflet is available to both staff and patients, which gives information about how to make comments, compliments and complaints. A copy of this leaflet is embedded here.



z_Complaints Leaflet
2008.pdf

If a complainant requires some external support to help with their complaint, they can contact the hospital's Patient Advice and Liaison Services (PALS) on 020 8934 3993 (for further information on PALS, please refer to section 9 'Public Involvement and Consultation'), or their local Citizens Advice Bureau who will be able to give details about the Independent Conciliation and Arbitration Services (ICAS).

12. Human Resources

12.1 HR Management and Strategy

The Director of Human Resources and Organisation Development, Ruth Lewis, is responsible for the Human Resources service, which comprises Recruitment, Medical Staffing, operational and employee relations, Occupational Health Service, Training and Development, Volunteers, Library and Pensions.

The Trust has developed a Recruitment and Retention Strategy, which is available from the Director of HR or Publication Scheme Co-ordinator.

12.2 Pay and Pensions

Pay administration is carried out by the Payroll Department, Argosy House, Kingston Hospital. Staff are able to join the NHS Pension Scheme. The Scheme has the full support of NHS Trade Unions and professional bodies. Further details are available from the Pensions Manager.

12.3 Communicating with Staff

The Trust communicates with staff using a wide variety of both verbal and written methods. We communicate with staff through the Trust's "Keyhole" magazine, monthly email bulletins, daily email bulletins, notice boards and via the HR intranet site. We also communicate with staff through formal and informal briefings at Clinical Division (CD) and team levels. Staff are also involved in internal working groups and sub-committees of the Trust at all levels. Monthly "Clinics" are run by all HR Managers within service areas.

The Trust has a Trust Partnership Forum (TPF), which is also used to communicate formally with staff and to develop policies in consultation with staff-side representatives.

12.4 Equality and Diversity

The Trust is very active in the area of Equalities and Diversity and feedback from staff is that the Trust is perceived to be a fair employer, with the majority of staff feeling valued and supported. The Trust is a ✓✓ employer and has an active Diversity Group.

The Trust has an agreed Race and Disability Equality Scheme in place. A copy of the Scheme is available from the Publication Scheme Co-ordinator.

12.5 Work Life Balance and Flexible Working

The Trust is committed to improving the work-life balance of staff and our Flexible Working policies incorporated within a "good management guide" provides a comprehensive range of options for staff including provision for carers leave, parental leave, adoption leave, term-time only working, annualised hours and career break schemes.

The Trust has a childcare strategy which is linked to the South West London Childcare Strategy. The Trust offers 24 subsidised on-site nursery places. The Trust also has links with local providers offering discounts and preferential rates for Trust

staff. Further information can be obtained from the Trust's Staff Support Manager, HR Department.

12.6 Healthy Workplace

The Trust's strategy on the management of violence and aggression and principles of managing violence sets out how staff should deal with situations of violence and abuse. This policy was developed with staff, managers and trade union representatives and can be obtained from the Publication Scheme Co-ordinator.

In addition, the Trust has a policy on managing stress in the workplace and is establishing a Health at Work Group. The Trust also has a Psychological Well-Being Service for staff. Policy available from the HR Department or from Publication Scheme Co-ordinator.

From 31st December 2005 the Trust has become smoke-free. From this date smoking is not permitted inside the hospital buildings or anywhere on the hospital grounds. This applies to all staff, patients and visitors. This is part of the Government's Public Health White Paper. The NHS became smoke-free by the end of 2006, with London having taken the lead in becoming smoke-free at the end of 2005.

12.7 Training and Development

The Trust is committed to training and developing all its employees including temporary staff and all staff are encouraged to take responsibility to develop and participate in lifelong learning. Staff participate in the annual personal development review and planning process.

The Training and Development Team deliver training programmes and induction to staff and lead on developing policies and guidance for learning and development. The Trust is developing a range of policies to support training and development activities. The Training and Development Centre is used for in-house and external training activities and bookings are managed through the Education Centre.

12.8 Recruitment and Retention

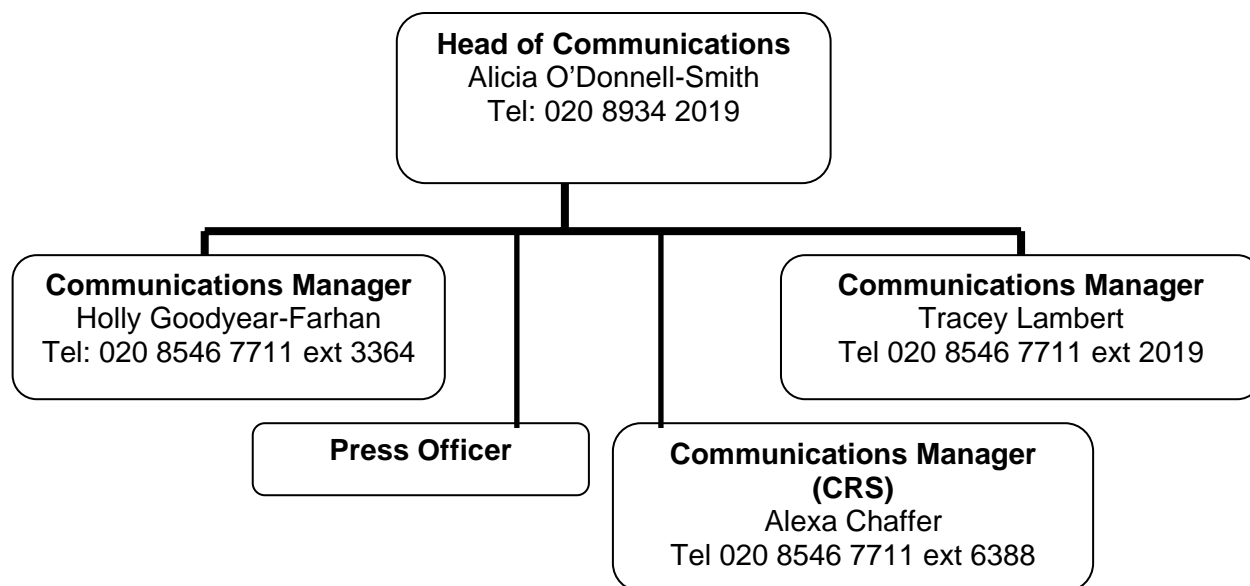
The Recruitment Bureau within the Human Resources Directorate is responsible for the recruitment and selection of staff. Details of current employment opportunities are available from the Recruitment Bureau or at www.kingstonhospital.nhs.uk (Jobs section).

12.9 Aggression in the Work Place

The Trust's policy on "Withholding Treatment from Violent and Abusive Patients" and the "Strategy for the Management of Violence and Aggression in the Workplace" sets out how staff should deal with situations of violence and abuse. These policies were developed with staff, managers and trade union representatives and can be obtained from the Publication Scheme Co-ordinator.

Some of this information is of a personal and confidential nature and will be excluded as will any other confidential material. Material relating to the health and safety of specific individuals, as to law enforcement or criminal or regulatory investigative material or audit issues may also be excluded from publication.

13. Communications with the Press and Media Releases



The press and communications team is a unit that provides media handling, public relations and communications services for Kingston Hospital. We are responsible for promoting the services provided by Kingston Hospital along with our successes and achievements to our local community (public) and staff, through the local media, staff and public specific publications and publicity materials.

The outcomes we wish to achieve from our communications activity are:

Public

- Public participation in the planning, delivery and improvement of services
- A public which is informed about health, able to maintain and improve health and make informed choices
- Public understanding of the services we offer and how they can be accessed
- Easy access by the public to information about all the elements of our services
- Proactive, timely and positive media liaison
- Accurate information

Staff

- Staff involvement in the planning and delivery of services
- All staff to be able to participate effectively by being informed about the Trust, its plans and progress
- Staff to understand national policy
- Staff to understand the Trust's direction, aims and policies and procedures
- Staff to have the information necessary to do their jobs
- Staff to be ambassadors for the Trust
- Successes to be celebrated
- Mistakes to be used as a means of learning and improvement

Publications

- "Keyhole" magazine for staff and various interested parties
- Monthly Staff Newsletters by global email
- Daily Global Emails to staff
- Media Policy and Guidelines for Staff

- Communications Strategy
- Press Releases are available on our website at www.kingstonhospital.nhs.uk

14. Environmental Information

Kingston Hospital is a single site hospital although it leases two buildings nearby for office type activities (space within Hanover House and Argosy House)

The Director of Finance and Information, Andrew Seddon, has overall responsibility for the hospital estates and services.

The Trust recognises that, through our day-to-day activities, we can affect the natural and built environments. As such, we endeavour to act with integrity in all matters concerning the environment and prevent pollution wherever possible.

Our minimum standards are to meet all relevant UK environmental legislation and regulations, and we work towards continual improvement in environmental performance.

In general, our environmental impacts result from waste generated through clinical and estates management activities, the use of energy, transport (staff, patients and visitors) and use of natural resources (such as paper and water). We will, therefore, place particular emphasis on energy, waste, natural resources and green transport, all under the guidance of the Estates and Facilities Departments.

The Trust continues to work towards "healthy transport policies" such as cycling or walking to work, car sharing and the promotion of public transport. We will work, through our Procurement Department, with our suppliers to reduce environmental impacts resulting from the supply chain. We will also consider the views of stakeholders when identifying environmental issues relevant to the Trust.

The patient environment within all hospitals is measured regularly by an external Patient Environment Assessment Team (PEAT) to establish standards against the many key criteria that affect a patient's experience at the hospital. The assessed criteria range from car parking facilities to signage, from cleanliness and tidiness to internal decoration. The PEAT audit findings are available on the NHS Estates website (<http://www.nhsestates.gov.uk>). These standards are reviewed annually.

If you have questions about the Trust's use of the natural environment please contact the Publication Scheme Co-ordinator.

15. This Publication Scheme

In this class we will publish any changes we make to this Publication Scheme, the criteria on which our information management policies are made and a referral point for all enquires regarding information management generally in the Trust. We will also publish any proposed changes or additions to publications already available.

Cost of Information

For the most part, we will charge you only for hard copies or copying onto media (e.g. CD ROM). Some information is available free, but for others there may be a charge. The charges will vary according to how information is made available. Charges are as follows:

a) Via the Trust's Web Site – Free Of Charge, although any charges for Internet Service provider and personal printing costs would have to be met by the individual.

For those without Internet access, a single print-out as on the website would be available by post from:

Mrs Janice Sorrell McLeod
Publication Scheme Co-ordinator
Kingston Hospital
Galsworthy Road
Kingston upon Thames
Surrey
KT2 7QB

However, requests for multiple printouts, or for archived copies of documents, which are no longer accessible or available on the web, may attract a charge for the retrieval, photocopy, postage etc. We will let you know the cost and charges that will have to be paid in advance. We will not provide printouts of other organisation's websites.

b) Leaflets and brochures on, for example, services we offer to the public will be free of charge. Contact the Publication Scheme Co-ordinator.

Information which is not available on the website which only exists in printed form will be provided by hard copy by post. We may charge you the cost of copying and posting the document, especially if it's large.

c) If a "Glossy" or other bound paper copies, or in some cases a CD-ROM, video or other mediums, are not available in their original format, then a single photocopy will be supplied. Pre-recorded material such as video/CD-ROM or other mediums will incur a charge which reflects the cost and reproduction subject to copyright.

d) E-mail will be Free Of Charge unless it says otherwise

The charges will be reviewed regularly.

Please note, we will not provide multiple copies.

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<http://www.opsi.gov.uk/advice/crown-copyright/copyright-guidance/index.htm>

or contact:

Office of Public Sector Information
Information Policy Team
St Clements House
2-16 Colegate
Norwich
NR3 1BQ
Tel: 01603 621000
Fax: 01603 723000
e-mail: HMSOlicensing@cabinet-office.x.gsi.gov.uk

PART THREE: Bodies involved in inspection/monitoring, Index to the Publication Scheme and Useful Resources

The bodies involved in the monitoring and/or inspection of our services:

- Audit Commission (www.audit-commission.gov.uk)
- British Psychological Society (www.bps.org.uk)
- Child Protection Teams
- Healthcare Commission
(<http://www.healthcarecommission.org.uk/homepage.cfm>)
(http://2008ratings.healthcarecommission.org.uk/informationabouthealthcareservices/overallperformance/searchfororganisation.cfm?cit_id=48825&widCall1=customWidgets.content_view_1)
- Confidential Inquiry into Suicides and Homicides
- Coroner's Offices
- NHS Business Services Authority – Counter Fraud and Security Management Division (<http://www.nhsbsa.nhs.uk/fraud>)
- District Audit (www.district-audit.gov.uk)
- Environmental Health offices
- General Medical Council (<http://www.gmc-uk.org/>)
- Health and Safety Executive (www.hse.gov.uk)
- Health Service Ombudsman (<http://www.ombudsman.org.uk/>)
- Health Professions Council (www.hpc-uk.org)
- Home Office Mental Health Unit (www.homeoffice.gov.uk)
- Medicines and Healthcare Related Products Agency (www.mhra.gov.uk)
- Medicines Control Agency (www.mca.gov.uk)
- Mental Health Act Commission
(<http://www.mhac.org.uk/>)
- National Clinical Assessment Authority (www.ncaa.nhs.uk)
- National Patient Safety Agency (www.npsa.nhs.uk)
- NHS Estates (www.nhsestates.gov.uk)
- NHS Litigation Authority (www.nhsla.com)
- Nursing and Midwifery Council (www.nmc-uk.org)
- NHS London (www.london.nhs.uk)
- Royal Borough of Kingston upon Thames (<http://www.kingston.gov.uk/>)
- London Borough of Richmond Upon Thames (www.richmond.gov.uk)
- National Confidential Enquiry into Patient Outcome and Death (NCEPOD)
(<http://www.ncepod.org.uk/>)
- Royal Colleges eg of Surgeons/Physicians, Midwives
- Patient Environmental Action Team

Useful Resources

Web sites:

www.informationcommissioner.gov.uk

This is the Information Commissioner's web site

www.dca.gov.uk/

This is the Department of Constitutional Affairs web site

www.justice.gov.uk

This is the Ministry of Justice Website which took over from the Department of Constitutional Affairs

www.foi.nhs.uk

This is the NHS Freedom of Information web site

<http://www.nhs.uk/England/AboutTheNHS/WaitingTimes/Default.cmsx>

Waiting List Times across the UK

<http://www.drfooster.co.uk/>

The Doctor Foster Guide to Waiting Lists and the Doctors that might be treating you.

<http://www.lho.org.uk/>

London Health Observatory – monitoring health and healthcare in the capital

Publications

- NHS Openness Code-
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4050490
- FOI Act 2000 – <http://www.opsi.gov.uk/acts/acts2000/20000036.htm>
- FOI Act 2000 Explanatory Notes -
http://www.ico.gov.uk/for_organisations/freedom_of_information_guide.aspx
- Code of Practice under Section 45 FOI Act 2000 - www.dca.gov.uk
- Code of Practice under Section 46 FOI Act 2000 – www.dca.gov.uk