



Issued monthly, NPAG News provides information on recent events and forthcoming NPAG activity. Please forward NPAG News to all of your colleagues who may have an interest in any of our activities.

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PERFORMING RIGHT ISSUES FOR THE HEALTHCARE SECTOR

In the previous issue of NPAG News - Issue 26 July 2008 - an item was included on 'Performing Right Issues for the Healthcare Sector'. We now understand that this item provided incorrect advice. The Performing Right Society has provided the following correct information: -

"The advice cites section 67 of the CDPA. This section only applies to the rights relating to sound recordings not to the public performance of the original musical work. These sound recording rights are separately licensed by PPL (Phonographic Performance Ltd).

PRS licenses the public performance of original musical works however performed (live or otherwise) on behalf of the composers, writers and publishers of music. Entirely separate to this, PPL licenses the public performance of sound recordings on behalf of record companies and the musicians on the recording.

For reference, the distinction between these two different types of work is drawn in the 1988 Act at: s.1(1)(a) and s.3; and s.1(1)(b) and s.5A.

If a premises is using recorded music, licences from both PPL and PRS may be required. For live music, only a licence from PRS may be required.

Section 67 does not apply to PRS licensing. I can confirm that NHS premises require a licence from PRS under the provisions set out in the CDPA. You are, of course, free to confirm this with independent legal advice.

However, PRS chooses not to charge for its licence in some circumstances, at its discretion. In hospitals, it has long been PRS's practice not to make a charge for background music use in patient areas of hospitals. So no charge is made for music played in certain areas of hospitals such as treatment rooms, patient day rooms and on wards (except where a specific charge is made to the patient for use of, for example, TV or radio).

Hospitals would still require a licence to cover music use in other areas, such as restaurants, visitor waiting areas, staff only areas and staff clubs."

The NPAG apologises for any inconvenience caused. The original information was provided in good faith. We are pleased to provide the following contact details at the Performing Right Society for your reference on this item: -

Email music.licence@prs.co.uk or via telephone on **08000 68 48 28**

NPAG News

PATIENTLINE UK LIMITED ACQUIRED BY HOSPEDIA

The following press release was made on 25 July 2008: -

“PATIENTLINE UK LIMITED ACQUIRED BY HOSPEDIA APPOINTMENT OF ADMINISTRATORS TO PATIENTLINE PLC

Patientline UK Limited, the UK's largest provider of hospital bedside telecommunications and entertainment and Patientline plc's principal trading subsidiary, has been acquired by the newly formed Hospedia Limited. The new company will provide an ongoing service to hospitals and patients in the UK, under the long term contracts which Patientline UK Limited holds.

Patientline plc itself today announces its decision to enter Administration and has applied to have its shares immediately suspended from listing on the Official List of the UKLA and from trading on the London Stock Exchange. Deloitte & Touche LLP are Administrators of the Company. The Administrators have effected the sale of Patientline UK Limited to Hospedia Limited.

The sale to Hospedia Limited marks the end of a detailed review of options to restructure Patientline plc's debt position and is designed to bring financial stability to Patientline UK Limited. The transaction has the support of Patientline plc's banking syndicate.

Commenting on the announcement, Nick Winks, Patientline plc CEO, said: “After many months of working to turn around Patientline and exploring many potential options, I am convinced that this transaction is in the best interests of our customers, staff and banks.

“We have also put in place the basis for a transformation of the whole industry, making it much more stable. As part of the new Hospedia company, Patientline UK Limited will be in a position to focus on delivering the highest standards of service to NHS Trusts across the UK.”

An email from **Tim Sherwood, Chairman, Hospedia Group Ltd on behalf of Patientline UK Ltd**, which carried the press release to customers, included the following information: -

- * A newly formed company, Hospedia Ltd, has acquired Patientline UK Ltd this morning (25th July 2008) and with the support of the banking syndicate that have financed Patientline, their existing debt has reduced by over £35m.
- * Hospedia group will also acquire Premier Telesolutions Ltd (“Premier”), another provider of bedside entertainment and telephony services, subject to approval by the Office of Fair Trading.
- * The restructured debt gives much needed stability to the business, allows for the delivery of new innovative services and gives a real opportunity to begin to improve value for money.
- * Up to 10 million patients a year can now expect to see lower inbound call charges, innovative new services and the provision of more reliable equipment as a result of the change.
- * Subject to the acquisition of Premier, Hospedia group will also receive £12m of additional investment from the existing Patientline banking syndicate. This will allow for outdated Patientline bedside units to be replaced and start to allow inbound call prices to be reduced.
- * Hospitals (in your Trust) will also benefit from new lower cost bedside systems and additional services developed aimed at helping them in their daily operations. Services include Cleaning Tracker Systems to help combat the risk of hospital acquired infections such as MRSA and Patient Survey Systems to promote a better patient experience.
- * I appreciate that this will raise questions, but wanted to assure you that it is business as usual for the day to day operations of Patientline UK Ltd. Further information can be found at the Hospedia group website www.hospedia.co.uk
- * I would also like to stress that the day to day operations of Patientline UK Ltd for your Trust will continue uninterrupted and will not therefore change the current concession agreements.

If you have any queries in the meantime please contact me via info@hospedia.co.uk or alternatively members of my team on their usual email addresses.” **Tim Sherwood.**

NPAG News

ACHIEVING A RESILIENT ORGANISATION

How resilient is your organisation? Could you survive a Major Incident – whether external or internal? Pandemic Influenza, fuel shortages, terrorists activity or loss of your networked IT systems and the critical operations they support – is your organization able to survive all or any of these threats? Do you have a Major Incident Plan? A Business Continuity Plan or a Pandemic Flu Plan?

These elements are the basis of the **Resilient Organisation**. The NPAG has developed an 'Achieving a Resilient Organisation' workshop, an interactive training session designed to engage delegates in the process that will keep services running in an emergency, or at worst, expedite service recovery.

The first of these highly participative events, with the opportunity for delegates to take part in tabletop exercises, has been organised for Thursday 11th September 2008 in London.

The course leaders are Brian Dobinson, Essex Health Emergency Planning Adviser and John King, NPAG Associate Consultant. Both Brian and John have extensive experience of Emergency, Contingency and Business Continuity Planning.

For full details, please visit the NPAG website: www.npag.org.uk or email: Gemma Bergamini on gemma@npag.org.uk

CURRENT AND FUTURE POLICY/REGULATION RELATED TO THE MANAGEMENT OF HEALTHCARE WASTE

This conference, held in London on 22nd July 2008, was a joint NPAG and University of Northampton promotion that gave delegates the opportunity to hear presentations from DEFRA, Department of Health, Environment Agency and Health & Safety Executive on management of healthcare waste issues. These presentations were supported by speakers from Imperial College Healthcare NHS Trust and the Sanitary Medical Disposal Services Association, giving the perspective from the NHS and industry.

Sponsored by Grundon, SRCL and SharpSmart, the event attracted 70 people, who had the opportunity to contribute to the current update process of guidance document – 'HTM 07-01: Safe Management of Healthcare Waste'. Although a guidance document, delegates were advised that, 'You know it makes sense' to implement the recommendations made.

It appears that the most significant waste related issue within the health sector is still waste segregation. The success of this across the NHS varies tremendously. Whilst cost savings can be made, potential legal proceedings can be avoided and accidents can be reduced, it appears that the benefits of safe management of healthcare waste are not fully understood in many trust boardrooms.

The NHS is responsible for some 35% of the public sector's carbon footprint. With 1.3 million staff, the NHS has a significant opportunity to contribute to sustainability in the future.

SAFETY NOTICE

The Lift and Escalator Industry Association (LEIA) has issued the following safety notice: -

'Accidents on Escalators involving Soft Plastic Sandals

Travelling on an escalator is one of the safest methods of transport – they are designed with little or no need for interaction between the user and the machine.

However there is a growing awareness of incidents where ultra-light soft plastic shoes are worn which can become trapped and cause injury. Mainly involving young children such incidents have been reported in the UK and worldwide including such countries as the USA and Japan.

It appears the soft polyethylene resin compound from which such shoes are made can adhere to the front of the escalator step, become deformed and subsequently drawn into the comb at the top of the escalator.

When travelling on escalators it is important attention is drawn to the need to keep feet clear of the front and side edges of the step, and this applies particularly to young children. To further highlight this point the industry is working to produce appropriate signage.'

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EMISSIONS RELATED CONGESTION CHARGING (Co₂ Charging) IS CANCELLED

As the announcement on 08 July 2008 by the Mayor of London, Boris Johnson, set out, CO₂ Charging will not proceed. The effect of this is to CANCEL the planned introduction of the following changes to the Congestion Charging scheme, which were due to commence from 27 October 2008:

- A higher £25 daily charge for those cars and extended-cab dual purpose pickups that emit 226g/km or above of CO₂, or that have an engine size over 3,000cc
- A 100% discount from the Congestion Charge for those cars and extended-cab dual purpose pickups that emit no more than 120g/km of CO₂ and that meet the Euro 4 standard for air quality
- The removal of the 90% Residents' Discount from the Congestion Charge for those residents who drive a car or extended-cab dual purpose pickup that emits 226g/km or above of CO₂, or that has an engine size over 3,000cc
- The closure of the current 100% Alternative Fuel Discount (this discount will continue)
- A time-limited reduced rate Congestion Charge of £6 for the drivers of lorries and heavier vans that meet the Euro V standard for air quality.

Vehicles entering the Congestion Charging zone will continue to be subject to the standard £8 daily charge (or the appropriate discount/charge depending on whether they are fleet customers, residents etc) regardless of their CO₂ emissions

The primary aim of Congestion Charging remains to tackle congestion and encourage drivers to shift from private vehicles to public transport, walking and cycling. The boundary of the Congestion Charging zone, and charging hours, 07:00 to 18:00 Monday-Friday excluding bank holidays, remain the same.

Should you have any queries or you would like to arrange a meeting to discuss this further, please email CChargeConsultation@tfl.gov.uk

SNIPPETS

Care Quality Commission Chief Executive appointed

Cynthia Bower, NHS West Midlands chief executive has been appointed chief executive of the Care Quality Commission. Ms Bower takes up her appointment on 1st August 2008. The Care Quality Commission will take on the regulatory role of the Healthcare Commission, the Commission for Social Care Inspection and the mental Health Act Commission. The Care and Quality Commission will launch in a shadow form in October 2008 and go live in April 2009.

New CBI report on building a stronger NHS

The CBI has published its new report *A healthy choice: Building a stronger NHS*, which looks at how an NHS driven by consumer choice means the role of commissioners needs to change radically into one of market managers - ensuring information is spread widely across the NHS and that the market is able to respond to changing needs and medical developments. The report coincides with the health minister Lord Darzi's NHS review report, which proposes the requirement for hospitals to publish data on the clinical effectiveness and outcomes of some services and creates a legal right for patients to choose services. Policy contact: james.fothergill@cbi.org.uk

NHS trusts to be scrapped in Wales

NHS trusts and local health boards will be scrapped in Wales under radical plans to transform the way the health service is structured and managed. Health Minister Edwina Hart has announced plans to replace the current 22 local health boards (LHBs) and seven acute NHS trusts with just seven new organisations which will provide both community and hospital-based health services. If the plans are accepted - a further consultation period will start in the autumn - Wales will follow the same system adopted in Scotland and Northern Ireland. Plans for a new NHS national board, which would allocate funding and ensure that the Assembly Government's health policies are delivered by the NHS have been widely backed. Mrs Hart is expected to announce further details about the board in the autumn.

Revised guidelines issued for the prosecution of those who are violent towards NHS staff

A revised Memorandum of Understanding between the CPS and the NHS Security Management Service (NHS SMS) came into effect on 21 July 2008. Its aim is to ensure the effective prosecution of cases involving violence and abuse (physical, verbal or sexual) against any member of NHS staff, including for the first time, NHS volunteers. The revised Memorandum of Understanding is available from <http://www.cps.gov.uk/publications/agencies/mounhs.html>

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WiPP completes its programme of work

The Working in Partnership Programme (WiPP), which was set up in 2004 under the nGMS to support general practice with capacity building resources and strategies, formally completed its pioneering programme on 30th June 2008. WiPP has delivered on thirteen initiatives, engaged with over 100 NHS pilot sites and created several national senior level steering groups. The WiPP website, www.wipp.nhs.uk, will remain live until March 2009.

Recycling benefits

Current UK recycling of paper, glass, plastics, aluminium and steel is estimated to save more than 18 million tonnes of carbon dioxide per annum through avoiding primary material production – which is the equivalent to the annual use of 5 million cars!

'Unicorn Born in Italy'

A roe deer with a single horn in the middle of its head has found fame as the "Unicorn" of Tuscany. The 10-month-old deer was born in captivity at the Centre of Natural Sciences, a nature reserve near Prato. While single-horned deers have been spotted before, this particular buck has a uniquely central horn, thought to be the result of a genetic flaw. "This is a demonstration that the fabled unicorn, which we all know from icons and legends, probably was not just a fantasy. It was probably an animal like this one, with a natural anomaly," said Gilberto Tozzi, the director of the centre. The mother of the deer was brought to the park several years ago after being hit by a car in the Apennine Mountains.

NPAG ACTIVITY PROGRAMME

TRAINING WORKSHOPS Programme of forthcoming NPAG training workshops (CPD Approved): -

- **Clinical Professional Development for Occupational Health Nurses**

A series of six practical training modules over 6 months, commenced April 2008: –

- Spirometry
- Sickness Absence Management Referrals
- Health and Safety
- Management of Physical Hazards
- Pre Employment Clearance
- Audiometry

For further information, please contact Gemma Bergamini: gemma@npag.org.uk

- **Business Continuity Plans**

- Tuesday 26th September 2008: Durham, Beamish Hall (Stanley)

For further information, please contact Gemma Bergamini: gemma@npag.org.uk

NATIONAL EVENTS Programme of forthcoming NPAG events (CPD Approved): -

- **Implementing WEEE Legislation in the NHS**
Autumn 2008
- **Sustainability- Workshop 4**
Autumn 2008
- **Emergency Preparedness Development Network – Workshop 4**
Autumn 2008
- **From Waste to Resource Management in the NHS: Opportunities and Challenges**
November 2008
- **Waste Management– Meet the Contractors**
January 2009
- **Evaluating Treatment Technologies for Healthcare Waste**
March 2009
- **National EBME Conference**
March 2009, Birmingham

For further information on all NPAG events please e-mail: marie@npag.org.uk or gemma@npag.org.uk

NPAG News

BENCHMARKING

Many NPAG Best Value Groups are conducting national benchmarking surveys to identify areas for potential improvement and financial benefits. If you are interested in participating in any of the following exercises, please contact the named BVG Facilitator.

TOPIC	BVG	CONTACT
Catering Costs & Trust Profiles	Catering	fwj60@hotmail.com
Restaurant Prices	Catering	fwj60@hotmail.com
Transport Costs	Non Patient Transport	fwj60@hotmail.com
Health & Safety/Risk Management	H&S/Risk Management	john.king@npag.org.uk
Domestic Service /Cleaning	Facilities	bill.plumb@npag.org.uk
Catering	Facilities	bill.plumb@npag.org.uk

BEST VALUE GROUPS

NPAG facilitates a series of national benchmarking clubs/best value groups within the NHS. Each programme of meetings enables peer groups of like-minded managers to have the opportunity to network; benchmark and compare services; review processes; provide networking opportunities; share experience; identify innovative and good working practice; and continuously develop and improve their services.

April 2008 to June 2008 meeting calendar: -

	7 th August 2008:	Waste Management Meeting 3 of 4 (2008 round)
	4 th September 2008:	Sterile Services Meeting 2 of 4 (2008/09 round)
	9 th September 2008:	Shared Services Development Network Meeting 2 of 4 (2008/09 round)
	10 th September 2008:	Facilities Meeting 4 of 6 (2008/09 round)
NEW	10 th September 2008:	Facilities (North) Meeting 1 of 3 (2008/09 round)
	17 th September 2008:	District Nursing Meeting 3 of 4 (2008/09 round)
	18 th September 2008:	Security Services Meeting 2 of 3 (2008/09 round)
	18 th September 2008:	EBME (South) Meeting 2 of 4 (2008/09 round)
	23 rd September 2008:	Health & Safety/Risk Managers Meeting 4 of 4 (2007/08 round)
	23 rd September 2008:	Telecommunications Meeting 2 of 4 (2008/09 round)
	25 th September 2008:	Estates Meeting 3 of 4 (2008 round)
	24 th September 2008:	National Patient Transport Modernisation Group Meeting 5 of 6 (2008)
	9 th October 2008:	Portering Services Meeting 4 of 4 (2008 round0
	16 th October 2008:	Bank & Agency Nursing Meeting 4 of 4 (2008 round)

For further information please e-mail: gemma@npag.org.uk or marie@npag.org.uk

NPAG MEMBERSHIP

Full details of NPAG Membership options and fees can be obtained from gemma@npag.org.uk or marie@npag.org.uk or telephone **01245 544 600**.

Murphy's Law: You will remember that you forgot to take out the trash when the rubbish truck is two doors away.

Telephone enquiries to: 01245 544 600

Fax: 01245 544 610

The NPAG (National Performance Advisory Group) is an NHS organisation that promotes benchmarking and best value within the NHS, throughout the UK. The NPAG operates as an NHS self-financed, trading organisation, hosted within the East of England Ambulance Service NHS Trust. If you would prefer not to receive future copies of NPAG News, please reply to this e-mail and write **REMOVE** in the header.