Outstanding efforts of GWH staff recognised at staff awards

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Welcome to the second edition of Horizon, the magazine for members (staff and public), GPs and anyone else with an interest in developments at GWH.

This edition incorporates our Annual Review—a look back at our performance and some of the highlights of 2009/10. In this edition you will find stories which demonstrate how we continue to improve the quality of care for our patients.

Many of you may be reading and listening to the reports about the NHS and may be concerned about how this will effect your healthcare. Whilst it is true that we are entering a period of financial constraint, we must continue to get the most out of every pound we spend, so that your local hospital continues to provide high quality care and we keep up with the latest developments in health.

We have recently set our clear strategy for how we will work together over the coming years and deliver our vision to “provide healthcare services that delight our patients and satisfy our commissioners”. The new Government’s plan to change the way our services are commissioned will be quite different and we look forward to working pro-actively with GPs, patients and our local Councils to improve clinical outcomes and the patient experience.

The Council of Governors, who represent you, have been active during the year in formal ways like appointing new auditors and contributing to the development of our Strategy. They also take a keen interest in the patient experience and having tasted the hospital food and reviewed signage around the hospital. They let the Trust know what is working well and what needs improving through an “eyes and ears” session at key meetings and act as ‘critical friends’ to the Trust. We are very lucky to have such dedicated volunteers and we pay tribute to their work.

In this issue you will see how over the past year we have been investing in new services such as bringing spinal surgery to Swindon to save patients having to travel further afield (see page 13) and investing in new technology including a £350,000 investment in a pharmacy robot (see page 11). You will also see examples of the outstanding work colleagues do on a daily basis and some of them have had their achievements recognised in our GWH Staff Excellence Awards 2010 (see page 6) which we held in July. We rely on the hard work and dedication of over 3,500 staff and volunteers and we thank all of them for their dedication. This year we have also appointed a number of new very high quality Doctors and Nurses who will develop services in stroke, in medical oncology and other areas and provide their expertise so that we can develop clinical services for the future.

We will be holding our Annual Members Meeting on Wednesday 8th September (full details on page 14) and plan to make this year’s event better than ever as we are hosting a health show at the Steam Museum with interactive stands on a range of topics. We hope that you will be able to attend so you can hear first hand about the excellent work we are doing at GWH, the meeting will also give you the opportunity to ask questions on any issue so please come along if you can.

This magazine is one of the main ways we want to keep all of our members—public and staff—informed about the Trust so thank you to those of you who have provided useful feedback on the first edition. We are pleased to see that Horizon has been well received and where possible we have taken your comments on board, please keep your suggestions for future articles coming in so that we ensure we are keeping you informed about the things that you are most interested in.

Bruce Laurie, Chair, and Lyn Hill-Tout, Chief Executive

Celebrating achievement with the GWH staff awards

In this issue

Editorial Group
If you have any ideas and suggestions about the magazine and would like to be part of a small editorial group, please contact comm@gwh.nhs.uk

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Earlier this week, Andrew Lansley, the Secretary of State for Health published a new NHS White Paper, setting out the coalition Government’s vision for the NHS. This White Paper is the first step towards the Government’s ambition for the NHS to achieve health outcomes and quality health services that are among the best in the world.

‘Equity and excellence: Liberating the NHS’ sets out proposals for the NHS to become a world-class service: a service that is easy to access, treats people as individuals and offers care that is safe and of the highest quality.

This puts patients at the heart of everything that we do in the NHS and gives them more information about the quality of clinical care so they can exercise informed choice. It also puts GPs in charge of local commissioning and sets health providers free from top-down targets. The key principle underpinning how care will be provided in the future is there will be “no decisions about me without me” for patients.

In order to achieve its vision for the NHS, the Government has proposed changes to the way the NHS is organised. It plans to create an independent National Commissioning Board for the NHS. The Board will allocate money to local GP consortia for them to use to commission local health services whilst Local Authorities will take on responsibility for health improvement, currently held by Primary Care Trusts (PCTs). As a result of these changes, the Government expect PCTs to cease to exist from 2013 in light of the establishment of GP consortia. It is also planned that Strategic Health Authorities will no longer exist from 2012/13.

For GWH there is nothing in the White Paper which means we will need to change structurally. Indeed there is a requirement for all Trusts to become Foundation Trusts, which we already are. What it does mean is that the local NHS landscape will change over the coming years and there will be a period of uncertainty as new organisations replace existing ones. During this time the good relationships that already exist between the Trust, local GPs and Local Authorities will be strengthened. During this time of change our absolute focus will continue to be on the quality of care we provide, building on what we already do well here in Swindon.

For Foundation Trusts (FTs) in particular, the White Paper details proposals to increase the freedom of FTs and giving NHS staff a greater say in their organisations. The paper also proposes removing the limit on private income which FTs can generate to reinvest in patient services.

The White Paper is the start of a national consultation that will take place over the coming weeks. A number of more detailed, supporting documents will be issued over the summer. These will cover the following areas:

- Commissioning for patients
- Local democratic legitimacy in health
- A review of Arm’s Length Bodies
- Freeing providers and economic regulation
- The NHS Outcomes Framework.

More information about the White Paper and details of how you can feedback your views as part of the consultation can be found at [www.dh.gov.uk](http://www.dh.gov.uk). We will be responding formally to the consultation and we hope you will feedback your views too.
At GWH we have created an Alcohol Liaison Team to support patients who consume too much alcohol or are dependent on alcohol.

In the United Kingdom, over the past 20 years, alcohol related deaths have more than doubled and one in 10 adult deaths are now related to alcohol. Evidence shows that one in six people attending the Emergency Department for treatment have an alcohol related injury/problem; this figure rises to eight out of 10 on a Friday or Saturday night.

The Alcohol Liaison Team is made up of two specialist nurses, Sarah Baughn and Debbie Smith, who offer intervention and support to patients over the age of 18 who arrive at the Emergency Department having consumed harmful amounts of alcohol. They use techniques to get individuals to think differently about their alcohol use. Sarah and Debbie provide advice and guidance to help patients reduce the amount of alcohol they consume. The team also assess and offer longer term support to patients who are alcohol dependant throughout their hospital admission and immediately after they leave.

Sarah Baughn, Clinical Nurse Specialist explains how the service works: “When we meet with a patient, we complete an initial assessment which includes a history of their alcohol use, and any other issues that may be having a negative impact on their alcohol use for example social support, mental and physical health, personal issues. “Following this assessment, we consider a number of options. Firstly we will provide brief advice to help the patient safely reduce their alcohol consumption and avoid harm. We then have a discussion with the patient about further support if we feel they need this level of help. Patients can receive additional support through follow up appointments with our service, via their GP, or through one of the statutory alcohol agencies around the area. We will also refer patients to other agencies if necessary for further support, for example the Community Mental Health team, Carer’s support service and Practice Counsellors.”

Sarah goes on to say that: “Since the service began in November 2009, we have completed over 350 initial assessments and over 200 follow up appointments. Each month, the number of patients we support is increasing. We accept referrals from any department in the hospital and are available from 8am to 7pm Monday and Tuesday, 8am to 4pm Wednesday, Thursday and Friday and 8am to 1pm on Sundays.”

Parents of children with diabetes now have greater choice for appointments at Great Western Hospital. Children’s Outpatients have introduced an evening clinic from 4–7pm on the third Thursday of the month. Dr Sanjay Rathi, Consultant Paediatrician suggested running an evening clinic which has been enthusiastically supported by the rest of the team of nurses and receptionists.

He explains: “We felt it would offer a better service and greater flexibility to working parents with school age children. Not only do children not miss school to come to the hospital but also it is easier for parents to park.”

The team are running one clinic a month as a trial for six months for children on insulin pumps. The evening clinics have received a positive response from parents. Stella Iles, whose son Zachary has diabetes said “I have four children so being able to attend a clinic in the evening is fantastic.”
Great Western Hospital (GWH) is one of the first Trust’s in the UK to offer women who have had surgery for breast cancer a clinical assessment to determine whether they are at risk of developing lymphoedema.

Lymphoedema is caused by damage or disruption to the lymphatic system and can occur following surgery for breast cancer and results in an accumulation of fluid in tissue in the upper arm. Women who are affected by lymphoedema can experience swelling, heaviness and pain which reduces their ability to use their arm and fingers and increases their risk of infection. This affects every day life and means that simple tasks such as picking up a cup of tea can be difficult.

Women who are diagnosed with breast cancer now have a good likelihood of beating the disease with over 80% of women likely to survive. At GWH, we see over 250 new breast cancer patients every year and most of these patients will have surgery.

Recognising lymphoedema and treating it early is the best way to manage the condition. The L-dex test is a simple, inexpensive test, similar to an ECG which takes about three minutes and produces reliable and reproducible measurements giving an immediate result.

Women who are diagnosed with breast cancer will have a pre-operative assessment using the L-dex machine to establish a baseline measurement, followed by assessments six months and one year after completion of treatment.

Consultant Breast Surgeon, Marcus Galea explains that “The majority of women are unlikely to develop lymphoedema and can be reassured to lead a normal life without having to take extra precautions to protect their arm. “For those who will develop lymphoedema, early detection allows us to provide treatment to help prevent the condition progressing. The introduction of this simple assessment will help improve the quality of life for women who have survived breast cancer.”

The L-dex machine is made by an Australian company and the Breast Team became aware of it after they were joined by Nathan Coombs, Consultant Breast Surgeon who had spent time working in Australia. The Breast Team bid for funding to buy an L-dex machine through the Trust’s Dragon’s Den, an initiative which gave staff the opportunity to bid for equipment for their department to improve services and care for patients. The team were successful in their bid and starting offering the assessment to patients in January 2010.

Over time, Marcus Galea expects to see fewer women with troublesome lymphoedema as the test enables the Breast Team to identify and then treat lymphoedema in the early stages.
Achievements of Great Western Hospital staff recognised at Trust Awards Ceremony

The outstanding efforts of staff at GWH were honoured at a special ceremony in Swindon in July. The GWH Staff Excellence Awards are in their first year and were set up to recognise and reward the dedication and commitment shown by hospital staff over the last 12 months.

Over 180 nominations were received across eight categories covering a wide range of areas of the hospital and on the evening 26 individuals, teams and projects were up for the awards.

The event was held in Swindon and attended by over 270 members of staff and local guests including the Deputy Mayor, PCT Chief Executive and the Editor of the Swindon Advertiser.

Lyn Hill-Tout, Chief Executive of GWH said: “These awards show how truly amazing staff working at GWH are. Staff have nominated colleagues who they believe demonstrate the highest professional standards and are motivated to go above and beyond the call of duty. I feel immensely proud and privileged to work with them.

“These awards demonstrate how small changes make a big difference to the lives of people, the finalists are all people who are improving patient care and experience, seen as a role model and a great colleague to work with, either through the way they provide care, their attitude and behaviours or their ambition to drive forward services. I know that we will all take inspiration from the nominees and the recipients of these awards.”

Inspirational Role Model Award.
This award is for those people who inspire others in their day to day work, setting an example and providing invaluable guidance and support for others.

Winner:
In this category there were two joint winners, Chris Pearce a Nurse Consultant in Gynaecology and Sara Forsyth in the Acute Physiotherapy Department.

Chris is one of only two Nurse Consultants in the hospital and her colleagues nominated her because of the way she works across multi-skilled teams to deliver the best for her patients. Chris was nominated by four of her colleagues, an indication of how good a role model she is for others. To read more about a typical day in the life of Chris read page 20.

Chris Pearce: “It is very gratifying to be nominated but an individual can only be as good as the team around them and I feel this is a reflection of all those individuals that I work with that make my role so enjoyable and fulfilling”

Sara was nominated by ten of her colleagues for the way she has stepped up to the position of team leader in the Department. The ease with which she has taken on this responsibility whilst maintaining regular contact with her team, continuing to be supportive and approachable at all times was recognised by the judges.

Sara Forsyth said: “I am just very flattered for being nominated by my team”.

All staff awards photos courtesy of the Swindon Advertiser
Team of the Year
Good care is provided by good teams and this award is all about the teams that have shown outstanding teamwork which has led to improved patient experience.

Winner:
Hospital Sterilisation and Decontamination Unit (HSDU).

The HSDU is responsible for the decontamination of the instruments used in the operating theatres and elsewhere in the hospital, a crucial part of the process of providing patients with safe care. The team in the HSDU were nominated for their tireless efforts behind the scenes to provide an outstanding service to clinical teams across the Trust which continues despite big increases in demand over recent years.

Carol Davies, Supervisor in HSDU said: “Without the work of the HSDU many of the departments within the Trust, especially the Operating Theatres, would not be able to do their work. We are delighted by the nomination as it is recognition for our work which sometimes goes unnoticed but is absolutely vital for patients.”

Unsung Hero/colleague of the year
This award is for members of staff who regularly go above and beyond the call of duty to provide the best service for patients, visitors and staff.

Winner:
David Fowler, Ron Aldred and Winston Moore, from the Car Parking Team.

With Car Parking at the hospital posing an occasional challenge, the Car Parking Team is on hand to ease those problems for patients, visitors and staff whatever the weather. They are regularly seen around the hospital helping expectant mothers into the Delivery Unit, the sick and injured into A&E and helping staff find spaces so they can come to work.

Winston Moore, Parking Attendant said: “I think it is a nice achievement just to be nominated. It makes you feel honoured that people consider we do a good enough job to nominate us. I just do my best to keep smiling and be cheerful to help people when they are stressed”.

Improved Patient Safety Award.
Patient safety is a top priority for GWH and this award recognises individuals and teams who have enhanced the quality and safety of patient care.

Winner:
The Aria Project.

The Aria Project was introduced in September last year with the aim of managing chemotherapy prescribing. This new system has helped reduce the chance of mistakes through transcription errors or lost charts and allows much better monitoring of the treatment for much safer delivery of chemotherapy.

Dr Sarah Green, Clinical Lead for the project said: “This has been an ambitious project, implementing an electronic chemotherapy booking and prescribing system across a Cancer Network with six hospital sites but we have all seen benefits.

“At GWH it provides us with a single system to book patients and prescribe their treatment. Uniquely within the Cancer Network we are recording administration of the chemotherapy electronically at the bedside, so we have a paper free system for day case chemotherapy.

“Implementing such a complex system has been challenging; the staff are proud of what they have been able to achieve and are delighted that the Trust has recognised the hard work that they have all put in.”
**Service Transformation and Innovation.**
This Award recognises an individual or team that has demonstrated innovative qualities and original thinking which has led to an improved service.

**Winners:**
In this category there were joint winners — Karen Braid and Alyson McSherry from the Productive Ward Team and the Breast Care Team led by Mr Nathan Coombs.

The Productive Ward Project aims to release more time for Nurses to spend with patients and less on things such as paperwork. This has resulted in a doubling on some wards of the time spent by nursing staff on direct patient care.

The Breast Care Team were recognised for their efforts in bringing together breast screening and symptomatic breast services onto a single site: The Swindon Breast Centre at GWH. The whole team has demonstrated an absolute focus on improving patient experience which means that over 75% of women will be fully assessed and discharged at this first visit.

Alyson McSherry said: “Implementing the Productive Ward initiative, working with Ward Managers and their teams and seeing changes which benefits both patients and staff alike ranks top of the tree with regards to job satisfaction.

“To receive an award for doing a job that we both feel so passionate about is quite literally the icing on the cake and to say we are pleased and honoured is an understatement.”

Nathan Coombs, Consultant Breast Surgeon said: “I am privileged to be part of an excellent Breast Team and proud of their hard work, which together with the team’s ‘can-do’ attitude makes for a great team spirit. I see this nomination as recognition of the team’s hard work, as a result of which now allows the majority of our patients to have their breast cancer surgery as a day case, returning to their own home on the evening of surgery. This nomination will further encourage the team to develop breast cancer services to try to make this the best Breast Centre in the country”.

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**Go the extra smile...for patients**
This award recognises outstanding commitment to providing an excellent, professional and caring service for our patients.

**Winner:**
Louise Ackrill, Clinical Administrator in the Booking Centre.

Louise was nominated by a number of colleagues who wanted to recognise Louise’s ability to help others, even in high pressure situations, which makes her a great person to work with for her colleagues.

Louise said: “When I found out that I had been nominated it was a pleasant surprise and it is a great feeling to be recognised by my colleagues for the work I do.”

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**Learner of the Year Award.**
Learning is vital to the NHS and to our patients. It is through learning that members of staff can develop new skills to improve the way care is provided meaning our patients can get the best care possible. This award recognises members of staff who have a passion and commitment for learning.

**Winner:**
Sandra Rekowski, Outpatient Clerk in the Wiltshire Cardiac Centre at GWH.

Sandra has shown great enthusiasm and motivation for learning which has inspired other colleagues in her team to take up courses themselves. Sandra has successfully completed an NVQ level two and, demonstrating a real commitment to improving her own skills, immediately booked on to the level three NVQ.

Sandra said: “I was surprised as I’ve worked in the Trust for 30 years and had previously been involved with clerical work and hadn’t completed any training. Now I have completed both my NVQ level 2 and 3 and it’s just very nice to get recognition for your efforts.”
The Pennies and Pounds Award.
We know that the need to make the most out of every pound we spend continues to rise. This award is all about good ideas that have saved money and improved services.

Winner:
Susan St George, Medical Lab Assistant in Histopathology.
Sue is a Biomedical Support Worker in Histopathology and she has the knack of being able to spot waste and work out how to do things more efficiently. Sue is someone who is keen to take on new roles and extend her skills, taking on jobs that the Biomedical Scientists do.

On hearing she had been nominated Sue said: “Shock was my first feeling! It was quite a surprise in the beginning and it’s nice to be appreciated. I just do the same as I do at home really and try to help save a few bob here and a few bob there!”

60 seconds with Andy Beale
Hosting the awards on the evening was Andy Beale, Consultant Radiologist. Here we find out what makes him tick.

What is your job at GWH?
I’m a Consultant Radiologist and the clinical lead for chest and cardiac imaging. I work closely with the chest team and cardiologists and regularly speak to GPs. I am also Treasurer of the British Thoracic Imaging Society.

If you weren’t a Consultant Radiologist what would you have been?
I’d have been a vet or an actor. I did lots of acting at university but wasn’t good enough to make it a career. My brother Simon Russell Beale is a professional actor who has recently been on stage at the National Theatre.

Why did you choose to work for Great Western Hospital?
My family come from Avebury and the advert at Great Western Hospital came up at the right time so I took the opportunity to move closer to family. I’d previously been working in London and San Diego.

What’s the best thing about your job?
I enjoy the intellectual challenge of a difficult x-ray and I get a great sense of satisfaction from the fact that patients appreciate what I do, for example, the relief a patient will get when an abscess is drained.

What’s the toughest thing about your job?
A busy workload which means not having enough time to sit back and take stock. Research, teaching and my own education usually take second place.

What do you most enjoy doing at the weekend?
Playing golf and hockey. I’m a part of the Marlborough thirds hockey team (there’s only three teams!). I also enjoy cooking and spend a lot of time ferrying my three children to various events.

What is your favourite film?
“Some Like It Hot”.

If you were stranded on a desert island what two luxury items would you take?
I’d take a sand-wedge (I’m presuming there’s a large bunker) and a ukulele.

What is the most important lesson life has taught you?
Gossip is fun but it can backfire.

What’s your claim to fame?
I’ve met lots of famous actors back stage after my brother’s performances: Jeremy Irons, Felicity Kendall, Michael Gambon and Ralph Fiennes."
GWH is receiving national recognition for the work taking place at the hospital which is supporting carers and people with learning disabilities when they come into the hospital.

The work, led by Carole Crocker, Deputy Director of Nursing and Donna Bosson, Senior Matron and involving staff from across the directorates, has led to a number of invitations to national events where we have been asked to showcase what we are doing in this field.

The focus on supporting people with learning disabilities to help remove barriers to accessing high quality care is the Trust’s response to a national MENCAP report, ‘Death by indifference’ published in 2007. The report showed how in some hospitals people with Learning Disabilities are experiencing poor healthcare due to discrimination.

It has also been recognised in the NHS for sometime the pressures carers face are significant and GWH was keen to make improvements which supported them in their role.

As a result of the work taking place, GWH has been cited as an area of best practice for the way we are working across the health and social care system with a range of different agencies to improve the way the NHS supports both groups of people.

Carole Crocker explains what improvements have been made: “It is a sad fact of the way healthcare is provided that people with learning disabilities can often feel lost in a big system with no one looking out for their best interests. Carers and people with learning disabilities have different needs to other patients and we want to make sure that the care we provide is tailored around them. As a result of the work we are doing we are starting to make things better and this is being noticed by other Trusts and national agencies who are keen to learn what we are doing here in Swindon.”

“One of the ways we have helped make the way we provide care for both carers and people with learning disabilities is by developing a toolkit called ‘My Health in Hospital’. The toolkit has been developed in partnership with the Learning Disability Community Team and people with learning disabilities. It provides both groups with the chance to set out what is important to them, what they like and what they don’t like so in effect they have a personal care plan which meets their needs and respects their wishes.”

At GWH we are also supporting carers and people with learning disabilities by ensuring that every inpatient area in the hospital has a link member of staff who is able to champion their needs and wishes and ensure there are no barriers to them accessing services.

The focus on making improvements for these two key groups of patients is not standing still as Donna Bosson, Matron, Unscheduled Care explains: “We are working with NHS Swindon which has been chosen as one of two demonstrator sites in the country to take part in a 12 month research project to evaluate the National Carers Strategy.

“We also have plans to develop the waiting room in the Betjeman Centre into an information point, and we have secured funding to enhance the way we display information for carers in the centre along with a dedicated carer information area. But we recognise we can’t do this work alone and that is why we are working closely with colleagues from NHS Swindon.”

The Trust was also actively involved in National Carers Week and People with Learning Disabilities Week which took place in June. A range of events, including a coffee morning, display stands and ward visits took place to raise awareness of the needs of these groups. In November the Trust will host a conference in collaboration with MENCAP to bring together a range of key groups to discuss learning disability issues.

As part of the recognition of the work that we are doing at GWH Carole Crocker and Donna Bosson met with the Princess Royal Trust in July for Trusts role in supporting the research that the Princess Royal Trust have been doing to review hospital support for carers.
Two new employees have joined the 3,300 staff working to provide high quality care at GWH: Wall-E and Eve, the pharmacy robots.

The new robots are part of a £350,000 programme to improve pharmacy services and reduce the waiting time for patients to receive their prescriptions.

Leading the project, Sarah Davis, Pharmacy Operations Manager said: “The idea behind installing the new robots is to speed up prescription discharge times and free up time for pharmacy staff to go onto wards and support direct patient care where they are needed.”

The two robots use a sophisticated infra-red scanning system linked to their Pharmacy IT software, similar to a bar code system, to log and store the pharmacy drugs. When a patient or member of staff brings a prescription to the pharmacy the Pharmacy staff request the item from the robot via the Pharmacy IT system and the robot scans the code and is able to immediately locate where on its shelves it has stored the drugs. A robotic arm then moves to pick up the drug before it is placed on a conveyor belt and sent across to the Dispensary ready for dispensing and checking by a member of staff.

Not only will this free up staff to go onto the wards but it has other benefits too, as Sarah explains: “The Pharmacy robot is helping reduce waste by improving stock control and reducing the costs of expired drugs, and also helps us minimise any prescription errors. As with any process in a hospital there is small risk of human error. The robot reduces this by sorting and retrieving the drugs using the bar code technology, followed by dispensing and checking by trained staff, so it helps makes the whole process even safer.”

By reducing the time patients wait for their prescriptions it means they can often be discharged from hospital more quickly, instead of them spending unnecessary time on wards they can be at home. This is part of a wider ward based discharge initiative which is helping to reduce the length of stay of patients in the hospital releasing time and money. Pharmacy staff are able to facilitate discharge of some patients directly from the ward, without the need for a prescription to come down to Pharmacy.

Pat Lancelotte, Pharmacy Assistant said: “When I heard that we were going to have a robot installed I had no idea of what to expect. We have had to get used to a different way of working, but I think that the robot has made the whole dispensing process easier and much more efficient. There is also less chance of dispensing errors. Thanks should go to Sarah for her tireless efforts to ensure that the transition process went as smoothly as possible with the minimum disruption to patients, hospital and pharmacy staff.”

The robots were named Wall-E and Eve after competition amongst pharmacy staff to come up with names for the newest members of their team. The winning names were suggested by Sarah Cotton, Senior Clinical Trials Pharmacist following stiff competition!
A team at Great Western Hospital has won a national award for its work in reducing the number of work days lost due to musculoskeletal injuries to the back, neck, shoulders or hands.

The award, for Excellence in Improving Employee Health and Well-being, was announced at an event in London in June as part of the national Excellence in Human Resource Management (HRM) Awards 2010. Targeting musculoskeletal injuries over the past 18 months has resulted in a 25% reduction in sickness absence related to back, neck, shoulders and hand injuries. To support the improvements, which involved enhanced training to make staff aware of how to avoid getting injured, the Trust appointed two ergonomics specialists from Honda who provided expert advice on avoiding and reducing these types of injuries. Other improvements made as part of the project include identifying any ‘hot spot’ areas in the hospital where there was increased risk of staff being injured and awareness training on handling which now forms a central part of the induction all staff go through on joining the Trust.

Oonagh Fitzgerald, Director of Workforce at GWH said: “This award is great news for staff and patients. It is all due to the fantastic work that the Occupational Health and Safety Team have been doing with managers and staff over the past 12 months. We are delighted to be seen as the best Trust in the country on this issue as we are absolutely committed to improving the health and well-being of every single one of the 3,300 people who work at the hospital.”

The idea behind the project came from a bid in a ‘Dragon’s Den’ style pitch when the Trust provided staff with the opportunity to bid for funds for ideas that would improve patient care and staff well-being. In the national awards, the team at GWH faced stiff competition for the award from hospitals across the country and the panel of judges praised the Trust’s highly effective approach to reducing injuries. They also praised the way in which the project had created an appetite within teams to take control of their environment and to make real changes for the better.

Mark Hemphill, Health and Safety Manager said: “Injuries sustained to the back and neck from poor manual handling practices are big problems for employers across every industry. Because of the type of work we do in hospital the chances of picking up an injury are that bit greater than some other jobs, so we wanted to make improvements to the way we support staff in the workplace.

“Every day our staff make beds, and push trolleys and wheelchairs, all of which can cause an injury if they are not done properly. This can lead to a significant period off work which can mean fewer staff are available for patient care. For staff working in these areas we have provided additional support, training and treatment and as a result the number of cases of sickness absence caused by these types of injuries has fallen by a quarter in under two years, something we are extremely proud of. This equates to about 7.5 extra nurses a month available for patient care and we want to improve even further so we have now set ourselves the target of reducing these cases by a further 20% by April next year.”

The GWH team at the HRM Awards. Oonagh Fitzgerald (second from left, back row) and Mark Hemphill (third from left, back row).
New ward timetables for GWH

It is well known that visiting friends and relatives in hospital can give a welcome boost to those who have to spend time in hospital and each year we have thousands of visitors through our doors. With such large numbers of people it can be a challenge for ward staff to accommodate visitors throughout the day at the same time as ensuring patients’ mealtimes are protected and privacy and dignity is maintained for patients when care and treatment is being provided.

To overcome this challenge, since July, the majority of wards at GWH introduced a consistent ward timetable as part of the Productive Ward programme. This move follows a trial in four wards (Neptune, Linnet, Kingfisher and Woodpecker) last year.

Commenting on the introduction of the ward timetable, Carol Black, Matron in Planned Care and Project Lead said: “By introducing a consistent ward timetable not only are we able to protect mealtimes for patients, making sure they are eating regularly to help with their recovery, but we are also able to make sure that the cleaning of the ward takes place at times that cause as little disruption as possible to mealtimes and patient care. Defined visiting hours also promotes improved concentration on the medicine rounds for the nurses and is better for confidentiality during bedside handover between nursing shifts.

“Visitors are important for our patients as there is a wealth of research which shows they can help people recover much more quickly. But sometimes patients can be so busy with their visitors that they forget to eat, meaning they don’t get the nutrition they need.”

Across the hospital, 13 wards now have a consistent ward timetable which means:
- Protected mealtimes – Breakfast: 7.30am – 8.30am, Lunch: 12noon – 1.00pm and Dinner is 5.00pm – 6.00pm.
- Visiting hours are now 2.30pm – 5.00pm and 6.00pm – 8.00pm.
- Cleaning takes place 8.00am – 8.00pm every day
- Another nine wards, such as the Children’s Ward, Delivery Unit and Dove Unit have their own local timetable to better suit the needs of their patients but the aim of protecting mealtimes remains.

“The feedback amongst staff from the early trial has been positive.” says Carol, “And whilst not every ward has the same timetable, overall this consistency means patients and visitors know what to expect and mealtimes are protected which is vital for patients.”

New developments in spinal surgery at GWH

Patients who needed complex spinal surgery as part of their treatment for cancer, no longer have to travel to Oxford or Bristol. The Orthopaedic Team at Great Western Hospital has been joined by Neil Orpen, a consultant spinal surgeon who specialises in complex back surgery. Whilst he has expertise throughout the spine, Neil has a specific interest in minimally invasive and microsurgery to the spine, adult spinal deformity and complex spinal problems.

Since he joined GWH, Neil has worked with the Orthopaedic Team to develop the spinal service. He explains the approach: “We have worked to improve access to spinal surgery and streamline the process of patient diagnosis to treatment in the management of spinal conditions and surgical management of back pain.”

“The Trust has invested in specialist operating equipment, operating tables and microscopes for theatres to enable us to perform more complex spinal surgery and the Radiology team had additional training to perform specialist x-rays. We can now surgically manage patients who are suffering from pain and compression of the spinal cord as a result of metastatic tumours.”

Cancer in the spine can lead to paralysis. “These patients used to have to travel to Oxford or Bristol for treatment which is a long way when you’re not feeling well. It is fantastic that we can now treat local people in Swindon,” said Neil.

As well as minimally invasive microsurgery, the Trust now offers newer surgical options such as disc replacement surgery and can effectively manage painful osteoporosis fractures.

Patients have an understandable fear of spinal surgery but they can be reassured by the new techniques available. Neil explains: “Spinal surgery has become much more sophisticated over the last few years. We use modern techniques to take a minimally invasive approach. Patients experience better outcomes and recover much quicker”.

One of Neil’s first patients at Great Western Hospital was Clare Emerton. Clare fell down the stairs and fractured her neck. She wore a halo collar and was in rehabilitation for a number of months before she was well enough to be seen by Neil who reconstructed her neck. Clare said “Being able to be treated locally was so much better as my partner could visit easily. I am really pleased with the surgery.”
This will give all Trust members (staff and public) a chance to hear first hand about developments at GWH and ask questions. If you have a question which you would like to be answered at the meeting, please let us know by Wednesday 1st September 2010, via:

- foundation.trust@gwh.nhs.uk
- FT Membership, The Great Western Hospital, FREEPOST (RRKZ-KAYR-YRRU), Swindon. SN3 6BB

Please let us know if you would like to attend the meeting. We will make arrangements for any particular communication, accessibility or dietary requirements you have. To reserve a place please contact the Trust Membership Officer on:

- 01793 604185
- foundation.trust@gwh.nhs.uk

Members will also have the opportunity to tour the museum for free and light refreshments will be provided.
A Year in Review
2009/10

The year in numbers:

- The total turnover for GWH was £200m.
- Our Outpatients Department saw 356,524 people—33% of which were first appointments.
- Our Pharmacy provided 14,665 discharge prescriptions involving 117,968 items and a further 88,834 items for inpatients.
- The Pathology Department analysed 1.6 million blood samples—more than 4,380 every day!

£1.1m
The Trust’s surplus which will be used to invest in new equipment and services in the future.

- 66,444 people attended our Emergency Department an increase of almost 6% on the previous year.
- 29% of these patients arrived by ambulance.
- 97.4% were seen within four hours.
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64km²
Floor space cleaned daily—that’s the equivalent of nine football pitches!

- The Trust had 49 cases of Clostridium Difficile—far below the threshold for the year of 69.
- 6,343 litres of alcohol gel was used in the hospital at a cost of over £35,000. This is the same amount of alcohol gel as the amount of water used for 80 baths.
- Over 19,000 planned operations and 2,600 emergency operations were performed.

Trust costs at a glance

£16m Staff costs
£10m PFI (building)
£12m Drugs
£17m Other
£19m Supplies

What a typical treatment costs the NHS

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<tr>
<th>Cost</th>
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<td>£200</td>
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<td>£1,324</td>
<td>Birth by normal delivery</td>
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April

GWH wins £150,000 HCAI Technology Innovation Award to invest in new technology which will help enhance the infection control work already taking place at the Trust. Amongst other things, this money has been used to invest in:

- Bladeless fans across the Trust which are much easier to clean preventing a build up of dust.
- Same day Norovirus testing for patients where previously test results would take up to three days.
- Talking signage encouraging good hand hygiene on the entrances to wards across the hospital helping limit the spread of harmful germs.
- ATP monitors to check the standard of cleanliness of hospital equipment.

May

In May the Trust reached a landmark in its history by holding our first ever Council of Governors constituency meeting. This development was a major step in improving accountability of the Trust through the Council of Governors which represents all of our members—staff and public included.

June

Following feedback in the 2008/09 staff survey £700,000 was invested in additional nursing staff and a similar amount in additional doctors. This means that more staff are available on the wards to provide patients with the best care possible.

July

Lyn Hill-Tout signs a Certificate of Commitment on behalf of the Trust in its first step towards gaining international recognition from the UNICEF (United Nations Children’s Fund) Baby Friendly Initiative. This is part of our efforts to increase breast feeding rates.

August

Consultant spinal surgeon Neil Orpen joins the Trust and GWH starts to offer complex spinal surgery to patients meaning patients no longer need to travel further afield for their treatment.

See page 13 for more details on this example of how we are bringing services back to Swindon.

September

The Annual Members meeting was held at Steam Museum Swindon with over 100 members attending.

Demonstrating our commitment to continuously enhancing patient safety, the Trust achieved NHSLA Level two Risk Management Standards for Acute Trusts. These standards are set out by the NHS Litigation Authority (NHSLA) and look at 50 risk management standards across the following five areas:

- Governance
- Competent & Capable Workforce
- Safe Environment
- Clinical Care
- Learning from Experience

October

We opened our doors to Trust members and the local community at an Open Day. The event proved popular with hundreds of people from the local area attending. The day gave people the chance to look behind the scenes at the hospital.

Andrew Lansley MP, then Shadow Secretary of State for Health, visited GWH to see the work taking place at the hospital. Andrew visited A&E, Theatres and Saturn Ward.

Due to popular demand, a second Annual Members Meeting was held to enable more Trust members to hear about developments at GWH and share their views.
November

This month saw the Maternity Unit at GWH being given a national award for innovation in antenatal care for women with complex pregnancies. The Shine Award came with £75,000 to evaluate the improvements and could mean hospitals elsewhere in the country will adopt the improvements made here in Swindon.

December

GWH went to Christchurch for the annual Christmas service. The annual event, led by the Trust Chaplain Steve Henderson, involves a traditional Christingle service open to patients, staff, visitors and the public.

The newly elected Governors were formally appointed the Council of Governors. Marcus Galea, Consultant in General Surgery was appointed as a Staff Governor. The role of the Governors is to be the ‘eyes and ears’ of all Trust members and influence the direction of the Trust.

January

During the worst winter of 30 years, the Trust brings in Land Rovers, driven by volunteers, to transport staff to and from work through the snow to allow services to run as normal. Whilst many neighbouring hospitals had to stop providing some services, through the dedication and professionalism of staff and volunteers at GWH, we were able to continue to provide care for local people during this time.

GWH starts to offer clinical assessments to breast cancer patients to assess their risk of lymphoedema—swelling of the arm following surgery. The Trust is one of the first in the country to routinely offer this service to all patients. For more information on this development see page 5.

February

Ann Keen MP, then Parliamentary Under Secretary of State for Health Services, visited GWH in February to look at how the Trust is enabling nursing staff to spend more of their time with patients. Ann saw first hand how the Productive Ward programme is benefiting patients and making the ward environment better for staff.

March

In March, a brand new state of the art CT scanner was opened at GWH by Comedian, Rory Bremner. The £1.2m investment means it is now much quicker for patients to get a CT scan.

This month also saw the launch of a new scheme by the Dietetics Team working with volunteers to provide patients with support and assistance at mealtimes. This is part of our drive to improve nutrition for patients which helps with their recovery. Volunteers have been trained and are providing hands on support on a number of wards in the hospital.

By March 2010, the Trust membership had grown to over 9,000 members

Staff Survey results show that GWH is in the best performing 20% of Trusts for staff satisfaction. The survey results are a key tool for the Trust in understanding how staff feel about working at GWH and they show that improvements in recent years are having a positive impact on staff satisfaction.
Notice of Election
For the Council of Governors of Great Western Hospitals NHS Foundation Trust

The Trust gives notice that it will hold elections to the Council of Governors of the Great Western Hospitals NHS Foundation Trust.

Elections are to be held for the following positions:

Three Public Governors in the following constituencies:
- Swindon (one vacancy)
- Wiltshire (one vacancy)
- West Berkshire, Gloucestershire and Oxfordshire (one vacancy)

One Staff Governor

Nominations
Nominations forms to stand for election to these positions can be obtained from the Returning Officer at the address shown here.

All Nomination papers should be received by the Returning Officer, Christy Gerould, at the address shown here by 12 noon on Monday 27th September 2010.

Electoral Reform Services Limited
The Election Centre
33 Clarendon Road
London. N8 0NW
Tel 0208 889 9203

Faxed or emailed nominations will not be accepted.

Should any nominee wish to withdraw their nomination, they must put this in writing to the returning officer by 5pm on Thursday 30th September 2010.

Ballot papers will be distributed to qualifying members on Friday 15th October 2010.

Completed ballot papers must be received by the Independent Scrutineer by 12 noon on Thursday 4th November 2010.

The regulations governing this election can be obtained from Electoral Reform Services Ltd (address as above).

The Independent Scrutineer for these elections is Electoral Reform Services Ltd (address as above).
Dates for your diary

Council of Governors/ Joint Board of Directors and Council of Governors Meetings

All Council of Governor meetings and Joint Board and Council of Governors meetings are public meetings and everyone is welcome.

Wed 8th September 2010, 1–4pm
Joint Board of Directors and Council of Governors meeting
Steam Museum, Kemble Drive, Swindon, Wiltshire, SN2 2TA

Mon 29th November 2010, 2:30–5pm
Council of Governors
Seminar Room 1, The Academy, Great Western Hospital

Governor Constituency Meetings

Your Governors hold local constituency meetings to update you on the work they do on your behalf, to answer questions and to listen to your views. The meetings will be held on:

Wed 29th September, 6–8pm
Swindon Constituency Meeting
Lecture Hall 1, The Academy, Great Western Hospital

Wed 13th October 2010, 6–8pm
Wiltshire Constituency Meeting
Lecture Hall 2, The Academy, Great Western Hospital

*Please note that the scheduled West Berkshire, Gloucestershire and Oxfordshire Constituency meeting on 8th November 2010 will no longer be held as it has been merged with the Swindon Governors Constituency Meeting. Governors from both constituencies will be present.

Get Involved

We want as many members of the local community as possible to get involved with the Trust. If you would like to register to become a member, please contact the membership office or join online at members.gwh.nhs.uk

How to contact your Governors

You can contact your Governors via the Membership Office:

01793 604185
foundation.trust@gwh.nhs.uk

Foundation Trust Membership Office, Trust Management, 2nd Floor
The Great Western Hospitals NHS Foundation Trust
Marlborough Road
Swindon, Wiltshire SN3 6BB
A Day in the Life of... a Nurse Consultant

Chris Pearce is one of two Nurse Consultants at GWH. Chris was a joint winner of the Inspirational Role Model Award in the GWH Staff Excellence Awards this year (see page 6) and here she describes a typical day in her role.

7am
This is my ‘golden hour’ when I respond to e-mails and phone messages from the day before I also review the notes of any patients that the team are concerned about that have attended EPU/EGU (Early Pregnancy/Emergency Gynaecology Unit) and ensure management plans are in place.

8am-1pm
I am the on call member of staff for gynaecology with the support of a registrar. I visit and review all the patients on Beech ward putting management plans in place or agreeing discharge. I also see any emergency admissions and if I have a quiet five minutes, I check e-mails and answer routine queries.

As a Nurse Consultant, I perform tasks that are usually undertaken by doctors. The Nurse Consultant role was introduced into the NHS about ten years ago as part of the health service modernisation, helping to provide services which are fast and convenient. It’s also a great development for nurses as it adds to the career options available.

To become a Nurse Consultant, you have to be an experienced registered nurse and have completed a Masters degree. After I qualified in 1975 I worked in the Emergency Department and Gynaecology and then decided to specialise in Gynaecology as it was here that I believed I could make the bigger difference.

I progressed through the role of staff nurse becoming a ward manager in 1993. I stayed in this post for 10 years enjoying every minute. The post of Nurse Consultant then evolved and I applied as it seemed that whilst maintaining patient contact I could also be involved in improving the service for women.

1-2pm
I Chair the Directorate Audit Committee which meets alternate months; I grab a sandwich to take with me as this is a working lunch.

2pm
I perform an Abnormal Bleeding Clinic. All of the women who are referred to the clinic will have an ultrasound immediately before attending clinic. If necessary, I will perform an endometrial biopsy and a hysteroscopy to investigate their symptoms further. In negotiation with the patient we will put in place a plan to improve their symptoms. This may include medication as I am also a prescriber or listing for surgery.

The Trust supported me to train as a Nurse Hysteroscopist as hysteroscopies were traditionally performed by doctors. The course is a Masters level course affiliated to Bradford University. It took two years to complete and I was mentored at the Trust by Kevin Jones, Consultant Obstetrician and Gynaecologist.

The aim of many of the clinics is to provide a ‘one stop’ service for women to prevent them having to re-attend which makes it much more convenient for them.

5pm
Just before I leave I respond to any urgent e-mails and speak with staff on Beech Ward and the EPU/EGU to check all is well before I head off home.
Patients are being seen more quickly and a backlog cleared following a major £1m redevelopment of the Endoscopy Unit at GWH. The new unit which includes an upgraded decontamination facility has received glowing praise from staff and inspectors.

The new unit is the result of the tireless effort of the Endoscopy Team in driving forward improvements in patient care in the Unit over recent years. Since GWH opened in 2002 as a brand new hospital we have always tried to stay at the forefront of patient care which includes the latest technology. The redevelopment of the Endoscopy Unit is another example of the investment being made in providing high quality patient care.

The investment in the redeveloped service stems from the Trust wanting to overcome the challenge of increased demand for endoscopy services. The Endoscopy Unit has seen a 75% increase in workload during the last five years. Over 6,400 patients are seen in the Unit every year and up until recently did not have sufficient capacity to deal with the number of cases being seen which resulted in a backlog. Recognising this we have invested £1m in a redevelopment of the Endoscopy Unit and installed a first class decontamination facility to reprocess flexible endoscopes used during the procedures.

Alison Hayman, Endoscopy Nurse Manager (pictured third from right) said: “We had wanted to redevelop the Unit for some time to provide patients with quicker access to these procedures. As a result of the changes we have made we have now completely cleared the backlog and patients are being seen more quickly which is much better for them.”

Sandra Rankin, Acting Unit Manager during the building works said: “We also wanted to offer better facilities in response to patient feedback. Phase one of the building project involved extending the recovery area to provide extra recovery beds and additional toilet facilities. These measures have vastly improved patient privacy and dignity and improve patient flow. Clinic areas and the waiting areas were also redesigned. Once reconfiguration of the recovery area was completed Phase two of the project was then to improve the Unit’s decontamination facilities.”

The new decontamination facilities, in use since December 2009, received national accreditation from the Joint Advisory Group (JAG) in November 2009. The JAG is the body responsible for maintaining standards in Endoscopy and through their accreditation process they ensure that Units, like the one at GWH, meet exacting standards for gastrointestinal endoscopy in the UK. On visiting the new decontamination facilities the JAG representative remarked that they were amongst the best they had seen. This is a tribute to the Unit staff and the members of the Project Team.

Alison added: “The department continued to work throughout the redevelopment of the Unit with little or no impact on patient services, which is a real credit to all of the Team. It has been fantastic to work on such a big project and now see that we are able to deliver an even better service for our patients.”
You will be aware that whilst the coalition Government have given assurance that NHS funding is ring fenced for the next four years, there is still a significant challenge for all NHS organisations to deliver savings in the region of £20 billion over this period. Whilst this sounds like a daunting task, teams at GWH have already started working with colleagues from other NHS organisations to deliver our contribution under the heading Service Change Programme.

This work is part of the national QIPP (Quality, Innovation, Productivity and Prevention) agenda, and as the title indicates, what we need to ensure is that the quality of the care that patients have every right to expect, is sustained and improved over the coming years.

The areas that the QIPP agenda is focusing on are listed below and there are a number of projects underway at GWH to support this work. We have selected examples from Urgent Care and Non Clinical Efficiencies to give you a flavour of work that we are doing:

- Urgent Care
- Elective Care
- Long Term Conditions
- Medicine Management
- Improving Primary and Community Care
- Mental Health
- Learning Disabilities
- Non Clinical Efficiencies.

**Urgent Care**

**Reducing the Length of Stay**

This project, led by the Associate Medical Director and General Manager in Unscheduled Care, Elizabeth Price and Jane Rowland, is looking at ways we can reduce the length of time patients stay in hospital so that patients do not have to spend more time in hospital than is necessary. Whilst work has been done on this previously, there is an opportunity to do more by ensuring that all patients have an estimated date of discharge which every member of their care team is working towards; that the hospital works with the community team to assist with a timely and safe discharge; and that those people who do not need hospital care are kept in the community where they can receive the most appropriate care for their condition.

Did you know the Trust's current length of stay for emergency and elective patients is 4.1 days?

**Putting patients at the centre of care**

**Joint Front Door**

This is a really exciting project where staff in our Emergency Department (A&E) are coming together with colleagues in the Clover Centre (a walk in centre run by NHS Swindon) to create a new model for how urgent care is delivered on site at GWH. A successful pilot was carried out in May, and teams from both services are working up the next stages of this development.

The new approach will make it simpler for patients to access urgent care at Great Western Hospital as patients will go to a central reception area near the Emergency Department before being assessed and given the care they need by skilled staff helping to reduce unnecessary A&E admissions and reduce the number of inappropriate attendances in A&E meaning resources can be directed to those in most need.

**Saving money to invest in better patient services**

**Estates and Facilities Team**

The hugely varied activities of a hospital like the Great Western requires well planned support services and the Estates and Facilities team at GWH work tirelessly behind the scenes to keep the hospital running. They are also tasked with finding new ways of working to improve efficiency, productivity and quality and they have come up with 11 ideas so far where they believe they can make changes.

Examples of these are: using standby generators on site which could be used to sell unused energy back to the National Grid helping generate income to the Trust; plans to install automatic light switches into non-clinical areas which will switch lights on automatically when they detect body heat; through better use of electronic mail and second class post where appropriate. The team believe they can make substantial savings on the £250,000 spent annually on postage costs.

We plan to bring you further updates on how this work is progressing in a future edition of HORIZON, but if you have any ideas that you think could improve the quality of the care that we offer, or make us more productive, or you have some innovative ideas, email it to: goodideas@gwh.nhs.uk (22 Autumn 2010)
One stop clinic for children with insulin pumps

The children’s diabetes team now offer a one-stop clinic for children with insulin pumps. Each child is offered a half hour appointment and is seen by a Consultant Paediatrician, Paediatric diabetes specialist nurse and dietician. Usually there is a representative from the insulin pump manufacturer as well for these clinics. Dr Sanjay Rathi, Consultant Paediatrician says: “We set up the clinics in response to patient feedback. We have received positive feedback from parents and children and this format ensures that children have more time with a specialist team to support their complex condition”.

Insulin pumps mimic the pancreas and mean that children do not have daily injections. Children who are suitable for a pump are identified and thoroughly assessed by the children’s diabetes team. Each child and family receives pre-pump training and detailed information about pump therapy and offered a pump trial before they are fitted with a pump. “We want to continue to provide services that meet our patients’ needs and we welcome feedback and suggestions from patients”, says Sanjay Rathi.

New service to support treatment at home

A new PICC (Peripherally Inserted Central Catheter) service is now available at Great Western Hospital. Our team of specialist nurses insert PICC lines and provide support and advice to patients to help them manage their PICC or tunneled central venous catheters.

Nurse Practitioner, Ellen Starling who leads the team explains the benefits: “A PICC provides safe and reliable intravenous access to drugs for patients in the community who require continued therapy. For example patients may have an infection and require a 6-12 week course of antibiotics or patients with cancer may have chemotherapy via a continuous pump and have difficulty with venous access because their veins react to the chemotherapy and become inflamed.

“Our service means that patients can be discharged from hospital earlier and have treatment in the comfort of their home. It may reduce their worry about treatment if there has been difficulty finding good veins in the past.”

The PICC team enables patients and clinicians to have more choice and help select the most appropriate central venous catheter for chemotherapy, nutrition given intravenously and intermediate to long term antibiotic therapies.

The team of three includes Nurse Practitioner Ellen Starling and Specialist Nurses Marcus Brown and Chanelle Meyer. They can be contacted by e-mailing PICC.Service@gwh.nhs.uk
The cancer clinical trials team was established at Great Western Hospital in 2001 with the aim of supporting cancer research in a clinical setting. The team forms part of the adult oncology clinical nurse specialist group and supports patients at all stages of their treatment.

Helen Winter, Lead Cancer Research Practitioner explains the importance of our research: “Research is essential as it helps us develop better plans of care and treatment options and forms an integral part of patient care. The team strives to provide a range of clinical studies that offer choice to patients and clinicians when considering treatment options.

“The portfolio of studies we offer are developed following consideration of existing treatment options and local facilities to ensure that any new study compliments those already open to patients. No study provides patients with anything less than what is already considered to be best practice, but most studies provide additional treatment options and access to drugs that would not normally be available to patients being cared for under the NHS.”

Providing a balanced portfolio of clinical trials and ensuring that high quality patient care is central to all their work, has contributed to the team’s ongoing success. The team now has over fifty-five national and international studies available and has been cited as one of the best performing teams within the Thames Valley Cancer Research Network (TVCRN) for the last four years. At the most recent peer review (March 2010), the Director of the TVCRN praised the team, saying “The team at Great Western Hospital has grown so much in strength, breadth and skill over the years, it’s wonderful to see”.

Further development of the team has involved the setting up a nurse-led clinical trials gastrointestinal clinic. This involves assessing patients who are participating in a gastrointestinal trial prior to chemotherapy and following treatment. The Nurse Practitioner performs physical assessments and is able to prescribe supportive medication, which provides patients with a more streamlined service that is fully supported by the Oncology consultants. The clinic has received extremely positive feedback from patients.

Ensuring that patients are happy with our service is essential to help us identify any further areas of development or areas of best practice that can be shared with other Trusts. Since 2001, the team has successfully recruited over one thousand cancer patients into an approved clinical trial, supporting patients and their families through complex and difficult decision making processes which are part of clinical trials. We are planning a patient satisfaction survey to help us assess the experiences of all patients entering a cancer study.

Helen Winter is proud of the achievements of the team saying: “We have grown and developed over the last nine years, establishing a service that provides both clinical and educational support to patients, carers and health care professionals. We have also developed educational programmes to support nursing staff working with patients who are having treatment and taking part in a clinical trial. The team has developed strong working relationships with colleagues across the Trust to ensure that patients have a positive experience of taking part in a trial.”

Focus on clinical trials
The GWH cancer research team has an excellent reputation for organisation and data management, and has participated in studies that are not offered by other hospitals in the TVCRN.

DRIP – risk prediction model for chemotherapy related nausea and vomiting trial
Nausea and vomiting during and after chemotherapy is an unpleasant side effect of treatment that can affect any patient. Developing a risk prediction tool that can help staff identify patients who are at particular risk is essential to improving patient experience. GWH is participating in the DRIP trial which is looking at developing a risk prediction model for chemotherapy-related nausea and vomiting. This questionnaire based study is led by nurses and involves patients completing a questionnaire before starting chemotherapy and then a questionnaire following each of their first three courses on days one and four. Although not complex in terms of design, this study aims to provide invaluable clinical data that will be used to inform future practice and improve the experience of patients having chemotherapy.
Patient perspective: what is it like taking part in a clinical trial?

"After being diagnosed with bowel cancer in March 2009, I was offered the opportunity of taking part in a clinical study known as Quasar2. My answer was anything I can throw at my disease the better. The trial drug was Bevacizumab taken at three weekly intervals for twelve months. Before commencing treatment, my wife and I had all the probabilities, as far as side effects, explained to us. For my first treatment I was on a bed (in case of any adverse reactions) for 90 minutes, but subsequent treatments were for 30 minutes in an arm chair.

We were also told that at any time, no matter what stage we were at in the trial it was entirely my decision as to whether I continued the trial or not. This was regularly emphasised and at no time did I feel under any pressure to continue. All staff, without exception, were extremely conscientious, caring and dedicated and always ready with a smile.

"We have found throughout the year that any problems we may have had, however minor, one telephone call to Helen or her staff has always been dealt with in the minimum amount of time. Nothing is too much trouble for them. As for improving the system at Great Western Hospital Swindon, I can honestly say I can think of nothing to improve the way things are dealt with at this time."
We value your feedback

We are always pleased to hear feedback from patients and relatives about the care and support they received at GWH. Around the hospital we have feedback forms for patients to let us know about their experience. Here is just some of the positive feedback staff received recently:

**Children’s Unit**
The whole team was very professional and friendly especially Trina. All nurses on duty during Sophie’s care were exceptional, Thanks.

**Mercury Ward**
They all provided good care, right down to the cleaners. I think all members of the green team were fantastic along with everyone else but especially nurse Andrew.
  
  Staff nurse Andrew Penfold and all the staff took time to explain and reassure me at all stages.

**Day Surgery**
After care recovery team were very good and explained everything.

**Cherwell Assessment Unit**
Valerie Mortimer was very helpful in explaining information. John Murphy who did the Blood Test was a really nice man.

**Beech Ward**
Unable to single out one person, all without exception were excellent.

**Car parking**
The very helpful, cheerful, grey-haired car park attendant who did his very best to help me when and where a space became available.

**Hazel Ward**
Everyone was excellent but Sandy in Delivery Suite was fantastic to put our minds at rest when I was rushed in.

**Here are some of the letters we have received by post and email**

The Aldbourne Ward was very busy yet the nurses were always very attentive, kind, thorough and reassuring. I’m immensely grateful to them and all of the staff, including Mr Smith the Surgeon and Dr Ester (a junior doctor whose surname I never knew) for their skill and kind attention. I am delighted with my experience at The Great Western Hospital.

*J.Charlton*

I want to tell you about my daughter Frances’ trip to A&E and then to the Children’s unit. It was a really difficult time but everything which was done for her throughout the whole experience was marvellous. What a lovely bunch of people, I can’t tell you how grateful I am to them all. Can you let them know that we noticed and really appreciate all of it.

*J.Lund*

From the moment my sister was committed to your care and the fact that you operated so promptly that same day, including the follow up by yourself and the hospital staff it all contributed to her excellent recovery. Quite simply thank you for all that you have done.

*J.Turner*

Everyone whom I came into contact—ambulance staff, porters, cleaners, absolutely everyone in Linnet Ward, the physiotherapy team, doctor Krishnamurthi (GP) and Medisetti (Osprey) and not forgetting both Macmillan and Prospect specialists—acted with great professionalism and kindness. The burden of being unwell was substantially eased, and I’m glad to say I’m back on my feet and feeling not only well, but very well looked after.

*K.Newton*

I would like to inform you that I did so appreciate the care and kindness of your staff, particularly in Ampney Ward.

*A.Spearey*
Voluntary services at The Great Western Hospital

Do you know that the Great Western Hospital is extremely fortunate to have a large team of committed and enthusiastic volunteers?

Each volunteer gives us a minimum of three hours a week of their time for a period of at least six months and they can be seen across the hospital befriending patients, assisting them at mealtimes, helping nursing staff by making beds, replenishing hand gels running general errands and working in the WRVS shop and Hospital Radio, to name but a few areas.

In 2009/2010 our Trust volunteers alone helped us for 19,327 hours which equates to an average of 43 full time members of staff per month. They come from all walks of life and range between 17 and 87 years old and we have 306 working to support patient care, with an additional 80 in the Trust volunteer recruitment process.

Once a year we invite all of our volunteers to a Long Service Award presentation where we take the opportunity to thank each and every one of them for their contribution to the hospital. The event this year was held at the National Trust on Saturday 5th June, during National Volunteers Week. It was particularly gratifying to be able to mark the contribution of the following volunteers:

- 5 Years Service: Beryl Bowles, Wendy Hutchinson, Pam Mullin, Jo Surma
- 10 years Service: Nikki Bennett, Angela Carter, Cherry Jefferies, Marie Mills
- 15 Years service: Sylvia West
- 25 Years Service: Ron Lawton

Most of the volunteers are exceptionally modest about what they do. At this event I had to escort most of the award winners from the back row to the front, so they could collect their certificates, pens and badges!

Angela Carter, one of the volunteers who has been coming in two afternoons a week for us as a Wayfinder, for 10 years said: “I did not expect a certificate or any fuss for coming in to do a role I thoroughly enjoys. I just like to help people”.

I am always amazed and humbled by the generosity of our volunteers, in giving their time to help others. They make a positive difference to our patients, carers and staff.

If you would like to know more about having volunteers in your part of the hospital or you want to know more about volunteering at GWH, please contact either Carol Orrow or Vickie Hayes, Fundraising and Voluntary Services Co-ordinator on 01793 605647/605648.

Carol Orrow
Voluntary Services Manager

GWH long service volunteers with their awards.

Staff influence the future direction of GWH

Our vision at GWH is “to provide healthcare services that delight patients and satisfy commissioners by meeting, or exceeding, all local and national standards and providing convenient local services.”

As with most vision statements getting the words right is the easy bit; the challenge is to identify the right values, culture, behaviour and skills to deliver the vision so that every person working at GWH provides patients with the same high quality of clinical care and customer service.

To help make this vision a reality, in May this year we sent out an invite to all staff to apply to join a small group to influence the future direction of the Trust. Staff on the group come from a broad range of professions and areas of the hospital and in July and August we held two sessions where the group began identifying the things that we already do well and can build on and those areas that may be a barrier to us achieving the vision.

This work is part of our commitment to engaging with staff and is part of a three year programme at GWH, and all members—staff and public—will hear more about what the project as it progresses. Those people who joined the group shared one common aim, to use their expertise to improve the way care is provided at GWH. Jacqueline Parry, Senior Sister in the Cath Lab said: “I joined the influencing group in order to help patients who are treated at the GWH and the staff who work at GWH, to have a better experience within our environment.”

More detail on the project will be featured in the next edition of Horizon.
The Arts For Health Group

‘Fiddleman’ by James Castle
We are delighted to announce the arrival in the main reception of a fine bronze sculpture generously donated to the hospital by local sculptor, James Castle. We wanted to find some suitable way for visitors to donate to the hospital’s Arts for Health Group and James’s piece, ‘Fiddleman’ now sitting on top of a collection plinth in the main reception area will serve just this purpose. It will also act as an excellent meeting place and will join Daisy the Cow (standing in our soon to be named Memorial Garden) in our growing sculpture ‘menagerie’.

Commissioned Work, The Children’s Educational Unit
The Children’s Educational Unit has recently taken delivery of a new commission that is now hanging beside the entrance on the second floor opposite the entrance to Trust HQ.

“We wanted to produce a piece of art work that would make the entrance to the Children’s Unit more inviting and so we commissioned artist Susan Brown to work with the children to produce an original piece. It has been fantastic for the young patients to have the opportunity of working with a professional artist, exploring new techniques and gaining new skills. It has enriched their experience of being in hospital and given them ownership of a permanent piece of art work that will be admired by everyone who enters the Children’s Unit.”

Megan Brown, Assistant Headteacher, Hospital and Home Education Service.

The Memorial Garden
Work has been completed on the path around the pond in our Memorial Garden. It is now possible to walk all around the pond with the existing benches re-positioned to make the most of the different aspects. We still have not found a name for the Garden yet and take this opportunity remind everyone that we will give a prize to the person who comes up with the best idea. All entrants to dws@contemporary-art-holdings.co.uk

Photographic Competition
In the hospital’s main gallery space (the corridor on the ground floor) can be seen some of the results of our photographic competition (which has run for almost a year now). We invited members of the public (and staff at GWH) to submit landscape based photographs taken within the catchment area of the Hospital. The results were impressive and we have chosen what we consider to be the best fourteen for display in the Gallery. They are also available to purchase (£37.50 each) with a donation going towards The Arts For Health Group. If you are interested in purchasing one please e-mail dws@contemporary-art-holdings.co.uk

A selection of images from this exhibition will be included in a calendar due to be produced later in the year. Funds from the sale of this calendar will go towards the development of further arts projects within the hospital.

Private healthcare at the Great Western Hospitals NHS Foundation Trust
All income from private treatment is used to support the Great Western Hospital

caring about every detail and every individual

Great Western Hospital, Malborough Road, Swindon SN3 6BB

The Shalbourne Suite