

Involve

OCTOBER 2017

Right here, right now

Getting it right for our
patients this winter

MORE DETAILS ON **P6** →

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Message from Deborah Lee

There is such a lot going on in the Trust at the moment that it can be quite difficult to know what to highlight in my monthly roundup.

I try to give an honest and fair picture of the main areas of focus, as well as highlighting those that you can read about in more detail in this issue. As ever, I welcome your feedback.

Last month I touched on our proposed changes to the way we organise our trauma and orthopaedic services over the winter period. In mid-October, we held the decision to proceed meeting to confirm our readiness to commence implementation and I'm pleased to say that we have started the project and initial signs are very encouraging. As we prepared to mobilise these changes in advance of Winter, the rumour mill began and I had emails from three local councillors who had heard that we were closing Cheltenham A&E on the 20th October... I'd just like to reiterate that there are NO changes to A&E operating hours at Cheltenham associated with this move!

"There are NO changes to A&E operating hours"

This is a huge milestone for the Trust, and not just because of the benefits it is intending to bring this Winter, but because of the pace with which we have driven the changes through and the level of involvement and engagement the project team has achieved along the

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<p>Elective surgery The majority of elective surgery including arthroplasty (joint replacement surgery) from 23 October</p>	<p>Elective surgery Some elective surgery moves from 23 October</p>
<p>Abstone ward Elective orthopaedics</p> <p>Dixon ward Elective orthopaedics from 23 October</p> <p>Ryeworth Ward 50% elective orthopaedics, 50% Care of the Elderly (COTE) (previously known as GOAM) from 27 October</p>	<p>Spinal, paediatric & short stay surgery remains</p> <p>Tower Block, Second Floor Ward 2A Nuff beds move to 3A on 19 October</p> <p>Ward 2A Becomes short stay trauma (21 Beds) on 19 October and Spinal Unit (8 Beds) to be created*</p> <p>Tower Block, Third Floor Ward 3A Becomes Nuff 30 Beds on 19 October</p> <p>Ward 3B Becomes fragility fractures (29 Beds) on 19 October</p> <p>Surgical Admission Suite (SAS) moves to Day Surgery Unit (DSU) on 20 October. *Spinal Unit is created from the old SAS on 20 October.</p>
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way. Read more about this on page 6.

One of the things that troubled me most when I joined the Trust was our mortality rating – put simply, more of our patients were dying than was expected (given the nature of our population and our services). The issue was fairly well understood due to the focus that the Board and leadership team had been placing on this concern. 12 months on, I am incredibly heartened that the numbers are starting to move in the right direction; I'm heartened not just because it means we are saving more lives but also because it shows what we can achieve when we focus in the way we have done on this issue. A concerted effort to understand the causes of this apparent 'excess of deaths' has led to a range of



improvement activities – the most notable of which has been the work done on fractured neck of femur, led by Peter Kempshall that I mentioned last week but also the work led by Emergency Medicine Consultant Christine Soare looking at the care of patients in our A&E who present with trauma and notably with head injury. As a result of all of this work, our 'in-hospital' mortality rate is back within the expected range, though efforts to drive it even lower must continue and I am certainly not complacent.

The flu vaccination season has got off to a great start with 41 peer (staff) vaccinators now trained and 30 or so more waiting to be trained. Since launch we have already vaccinated over 2000 staff which is amazing. Our target is close to 6,000 (by the end of March 2018) but we know that the more we do in the first month or so, the more flu and deaths we will prevent. Board members were vaccinated at the public board meeting this month and we were all proud to lead the charge - I cannot emphasise



enough how important it is to protect ourselves and patients as we head into flu season. This is particularly so after information from Australia and New Zealand, who are just coming out of their winter, having had a very difficult flu season where many of their hospitals have struggled to cope.

"They have had a very difficult flu season"

On a positive note, I am delighted with the news that the Trust has been selected by the Royal College of Surgeons to be just one of six Trusts nationally who will be piloting the new model of surgical training for junior doctors, hopefully from August next year. The programme, entitled Improving Surgical Training (IST), is aimed at enabling surgeons to gain more operating experience during their training by supporting juniors with advanced clinical practitioners who are trained and equipped to do more of the ward-based work currently undertaken by surgeons in training. The Trust has a very good reputation for training, currently under the dynamic leadership of Kim Benstead and her team of committed educational supervisors.

I can't let a month go without a mention of the money! Every

Continued on next page

Message from Deborah Lee

Chief Executive knows that car parking is likely to stimulate more discussion than almost any other topic they might choose to comment upon, so it was with significant trepidation that I reluctantly ventured into this space! You will recollect that as a result of our Financial Special Measures status, the Board took the decision that we could no longer justify the staff parking subsidy, which amounted to £400,000.

"We are finalising the changes following feedback"

Having spent time seeking views on the principles that we should apply when setting new rates, we reached agreement on the proposal and this was subsequently shared with our Staff Side representatives and the Medical Staff Committee. We are finalising the changes following feedback from staff and expect to introduce changes in December.

As usual, we have some successes worth acknowledging this month. Our Breast Screening Team had their Quality Assurance visit from Public Health England and NHS England. Initial verbal feedback was really positive, with recognition that this is a well-run programme by a strong team who have made significant improvements since the last visit. Congratulations and many thanks to all involved.

Our new Nursing Director Steve Hams attended the University of Worcester

Mentor Awards in October to see our staff recognised for their excellent work – congratulations to the GRH maternity ward who were winners in the Outstanding Practice Learning Environment Award and to Rowena Bulacan who won the Outstanding Mentor Award.

Women's and Children's Services are clearly on a roll and I was therefore delighted to hear of their recent very positive peer review of neonatal services. In my view, there is nothing more powerful or valid than being assessed by others practising in your field and as such reflections from peer review carry much weight in my mind – those who read regularly will know that our neonatal team won the Patient's Choice Award at this year's staff awards and this is another vindication of just how great this team is.

One highlight of the month was a trip out to Highnam Court, with our Chair Peter Lachecki, to meet the Chair and trustees of the Pied Piper charity. This locally-based charity was fundamental in raising funds for the original Children's Centre and over the years have gifted thousands and



thousands of pounds for equipment and other things that the NHS wouldn't typically be able to provide. We talked about how this line between the 'must haves and the nice to haves' has shifted over the years due to capital constraints in the NHS, and our Trust in particular, and I was very heartened by their flexibility in this regard.

The purpose of the visit was to explore their support for partnering us on a major appeal to enable us to redevelop aspects of the Children's Centre – driven by demographics and developments in paediatric care, we are seeing many more children than when the centre was built and simply put, we have outgrown it. I am delighted with the positive response we got from Pied Piper and also from the Trust's own charity who have agreed to look into funding the initial feasibility and design work.

The hugely positive contributions of charities to all areas of the Trust never ceases to delight and inspire me. Of those that has struck me this month is an incredibly simple but very powerful one. The End of Treatment Bells charity does exactly what it says on the tin - it provides (free of charge) bells for oncology units that help patients to mark the end of their cancer treatment. Originally developed for children's cancer units, they have now become more widespread and we have just rung in our new bell at Cheltenham.

The idea came from a patient who also happens to be a BBC journalist, and I'm pleased that we were able to get the bell

installed for her to make a very moving film to mark the end of her personal journey. Carly's story was filmed by the local BBC and has been watched by over 40,000 people, and she was full of nothing but praise for all the staff she encountered over the previous eight months. It's something that makes me proud, to hear the very genuine stories of how the kindness and dedication of our staff have had a profound and lasting effect on those who come to us for care.



Getting it right first time in T&O

The Trust and its partners are committed to delivering the very best care for every patient, but it has been apparent for some time that the way in which trauma and orthopaedic services (T&O) are organised across the county is preventing us from realising that vision.

With the support of NHS Improvement, we have changed the way our services are organised as part of this year's Winter Plan, to ensure that patients requiring routine orthopaedic operations such as hip and knee replacement are not disadvantaged during this period as they were last year. Our commissioners and the Health & Care Overview and Scrutiny Committee (HCOSC) are aware of and supportive of these changes.

"The winter plan describes these pilot changes"

The winter plan describes that under these pilot changes all orthopaedic acute & trauma patients requiring admission or surgical intervention will be treated at GRH while most elective surgery moves over to CGH. By piloting this new way of delivering services, we anticipate that many more patients will be able to be treated during the winter months and far fewer will be subjected to last-minute cancellations of care.

Many staff have been involved in the discussions about this project - which is part of Getting It Right First Time (GIRFT) under the guidance of Professor Tim Briggs, the national lead. Their positive contributions have been invaluable.

The benefits

- Improved patient experience with timely trauma surgery and reduced cancellations of elective surgery.
- Reduced pressure on GRH ED by expedited trauma pathways to the dedicated ward base and onwards to theatre.
- Increased efficiency in review, treatment and discharge of patients from the trauma site with the protected ward/theatre resources, thereby reducing length of stay for both elective and emergency patients.
- Enhance educational experience for trainee doctors and nursing staff.
- Creation of new roles – particularly advanced nursing/physician assistants.
- Efficiency of elective work will be improved by consolidation on one site and variation reduced.



Trauma & Orthopaedics winter plan 2017

Cheltenham General Hospital (CGH)

ED open (excluding paediatrics)

All orthopaedic acute & trauma patients requiring admission or surgical intervention will be moved to GRH from 20 October

Elective surgery

The majority of elective surgery including arthroplasty (joint replacement surgery) from 23 October

Alstone ward

Elective orthopaedics

Dixton ward

Elective orthopaedics from 23 October

Ryeworth Ward

50% elective orthopaedics, 50% Care of the Elderly (COTE) (previously known as GOAM) from 27 October

Benefits:

- ✓ Improved patient experience with timely trauma surgery and reduced cancellations of elective surgery.
- ✓ Reduced pressure on GRH ED by expedited trauma pathways to the dedicated ward base and onwards to theatre.
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Gloucestershire Royal Hospital (GRH)

Trauma Surgery

All orthopaedic acute and trauma patients requiring admission will be treated at GRH from 20 October

Elective surgery

Some elective surgery moves from 23 October

Spinal, paediatric & short stay surgery remains

Tower Block, Second Floor

Ward 2A

NoF beds move to 3A on 19 October

Ward 2A

Becomes short stay trauma (21 Beds) on 19 October and Spinal Unit (8 Beds) to be created*

Tower Block, Third Floor

Ward 3A

Becomes NoF 30 Beds on 19 October

Ward 3B

Becomes fragility fractures (29 Beds) on 19 October

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*Spinal Unit is created from the old SAS on 20 October.

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County flu campaign launch

We have been working with County Council and NHS partner organisations to launch a campaign earlier this month to encourage people who are eligible to get vaccinated against flu this winter.

This year the flu vaccine is being offered to children aged two to eight (as a nasal spray), people aged 65 and over, pregnant women and anyone who is living with a long term condition.

For most healthy people, flu is an unpleasant illness from which they recover within a week. However, some people are more susceptible to the effects of flu and are at increased risk of developing more serious illnesses such as bronchitis and pneumonia, or making existing conditions worse.

"Flu targets people who are weak and vulnerable"

Our Director of Quality and Chief Nurse Steve Hams said:

"Flu targets people who are weakened and vulnerable, so it's crucial that we do everything we can to keep the virus away from patients. By having our vaccinations we are protecting ourselves, our patients, our friends and our family.

"This year, we are doing more than just working to protect our staff, patients and pregnant women in our care by encouraging them to get the flu jab, but we are also helping to protect mums and babies in Africa.

"We hope that by taking part in the 'get a jab, give a jab' campaign, we will inspire even more of our colleagues to get vaccinated."



Steve Hams



Staff side flight flu

Our Board and staff side colleagues have joined the fight against flu at our hospitals by getting their jab.

RCN Lead Steward Dawn Cooper explains why she had hers this year: "After several years of not having the Flu jab for medical reasons I was encouraged by my colleague Lisa to have it last year because of the increased risk given my clinical role.

"I was encouraged by colleagues to have it last year"

"Having not had any reactions to the jab last year, as well as the potential for a significant outbreak this year I decided to have the flu jab. I would encourage others to do the same to reduce the risk to themselves and their families of catching the flu as it can be very debilitating and for some people the flu can be life threatening."

For our Staff Side's Karon Cross, getting the jab was a no-brainer: "Working as a Critical Care Nurse I see the devastation that flu causes not only to the patient but to family and friends. Vaccinate! Protect them!"



Dawn Cooper



Karon Cross

Combat Norovirus

We are supporting a county-wide NHS campaign to help stop the spread of Norovirus, protect vulnerable patients and support NHS services this winter and are preparing to formally launch the campaign next month.

We are asking members of the public to work with us and to follow advice shared on 'Combat Norovirus' banners,

posters and leaflets at hospitals and doctors surgeries across Gloucestershire.

Leaflets for relatives, explaining how to protect vulnerable patients will be handed out by healthcare staff and campaign information and resources are now available on NHS Gloucestershire Clinical Commissioning Group's website as well as our staff intranet from next month.

HEALTH & WELLBEING

Smoking successes

Our smoking cessation partner HLS Glos took a stand at GRH to mark the start of Stoptober.

New data published in October in a University College of London (UCL) report shows quitting success rates at their highest for at least a decade, up to 19.8% for the first six months of this year, significantly higher than the average for the last 10 years (15.7%).

Success rates among the less well off have for years remained consistently low, but in a major turnaround the sharp increase in success rates is being seen entirely among this group. For the first time, smokers in manual occupational groups have virtually the same chances of quitting as those in white collar jobs.

The report coincides with the launch of Stoptober quit smoking challenge, which has inspired over one and a half million quit attempts since 2012. The campaign is based on research that if you stop smoking for 28 days you are five times more likely to stop for good.

Hopefully most staff are now aware that HLS offer support to quit smoking and also tackle other lifestyle areas. Staff are reminded that they can access support at any time if they wish to quit smoking themselves, and can refer a patient either via the website hlsghos.org or through the HLS icon on every PC.

A good sign

We have recently launched a new set of smoking cessation signs around the site. Using staff members Marc and Hayley, the



new signs are designed to have a personal impact on those lighting up around the sites.

Vaping news

We have now amended our policies to allow people to vape outside our buildings (unlike smoking which is banned on all areas of our sites). Vapers are welcome to use their e-cigarettes in our grounds.

A new report says there's never been a better time to stop smoking, with e-cigarettes one of the key drivers.

E-cigarettes are the most popular quitting method in England and local stop smoking services are the most effective way to give up, with those who combine the two having some of the highest success rates.

Last year over half (53%) of all those taking part in Stoptober opted to use an ecigarette as a quitting aid. This year the campaign will feature e-cigarettes in the TV ad and will do more to encourage and support smokers who are keen to try e-cigarettes to help them stop smoking.

Professor John Newton, Director of Health Improvement at PHE said: "E-cigarettes are now the most popular way to quit in the country with half of all those taking part in Stoptober last year using an e-cigarette.

The evidence is clear - vaping is much less harmful than smoking - a fraction of the risk. Don't be put off if you've already made several attempts. Join in with Stoptober and benefit from free support direct to your phone, laptop or tablet via the Stoptober app, a daily email giving support or Facebook Messenger, free face-to-face support plus a raft of advice and information on the website. Search 'Stoptober' online and join the thousands of others who go smokefree once and for all this year.

Professor Gina Radford, Deputy Chief Medical Officer, said: "The battle

STOP TOBER IS BACK

Search **Stoptober** for help and support to quit smoking.

BECAUSE THERE'S ONLY **ONE YOU**

against smoking is far from over—it is still the country's biggest killer, causing 79,000 deaths a year. And for every death, another 20 smokers are suffering from a smoking-related disease.

"It's never too late to give up—any smoker, no matter what their age, will feel the health benefits within months."

**We want fresh air.
Don't make us
breathe your smoke.**

LIVE WELL. BE SMOKE FREE
FIND OUT MORE INFO AT WWW.HLSGLOS.ORG

NHS Gloucestershire Hospitals
NHS Foundation Trust

Cheltenham and Gloucester hospital charity

STAFF AWARDS 2017



Awards ceremony 2017

The winners of our annual Staff Awards were announced on 21 September at a ceremony held at Hatherley Manor Hotel.

Teams and individual members of staff were presented with excellence awards after being nominated by colleagues and patients for their contributions to our services.

Shortlisted candidates for each category attended, with winners announced on the night. Our Staff Awards aims to thank staff for their hard work, their innovation and for the outstanding care they provide for patients in the county.

"Every single day our staff do quite incredible things that profoundly impact on people's lives"

The very popular Patient's Choice award took place for the sixth time this year. This award is open to nominations from patients all year round at <http://www.gloshospitals.nhs.uk/en/News/Staff-Awards-2017/Patients-Choice-Award-2017/>

In addition, other members of staff

were presented with Long Service Awards recognising their commitment to the NHS over 25 years.

We were fortunate again to have attracted sponsors for the awards. This year sponsorship was kindly managed by the Cheltenham and Gloucester Hospitals Charity. Their involvement allows us to create links with local businesses and gives them the opportunity to attend the evening and hear at first hand some of the wonderful things our staff have done over the year.

Chief Executive Deborah Lee said: "Every single day our staff do quite incredible things that profoundly impact on people's lives. What motivates staff working in our hospitals is the ability to make that difference. The annual staff awards is our way of recognising and thanking those dedicated, hard-working individuals who go above and beyond their jobs to provide our patients with extraordinary care, every day."



THE WINNERS

Healthcare professional of the year

Winner: Tildy Gwilliam

Healthcare team of the Year

Winner: Day Surgery Unit, GRH

Support services ambassador

Winner: Abi-Marie Mulhern

Exceptional Contribution to Safety

Winner: Lisa Prior-Cox

Exceptional Contribution to Research

Winner: Kate Claxton

The Nursing Development Award

Winner: Gallery Ward Team

Healthcare Scientist of the year

Haematology department

Volunteer of the Year

Winner: Barry Lefevre

Exceptional Contribution to the Patient Experience

Winner: Jean Tucker and Ward 7A

Outstanding Clinical leader of the year

Winner: Dr Ewoud Vorstman

Outstanding Non-Clinical leader of the year

Winner: Sam Taylor

The Learning and Development award

Winner: Kayzia Bertman

Learner of the Year

Winner: Andrew Higley

Apprentice of the Year

Winner: Georgia Hale and Edie Stone

Lifetime achievement award

Winner: Maggie Arnold, Nursing Director

Patient's Choice Award: Winners

Winner: Neonatal team

The Innovation & Service Improvement Award

Winner: Julian Phelps

Unsung Hero

Winner: Chris Finch

Staff stories: Healthcare Science series

Focus on Vascular Scientists

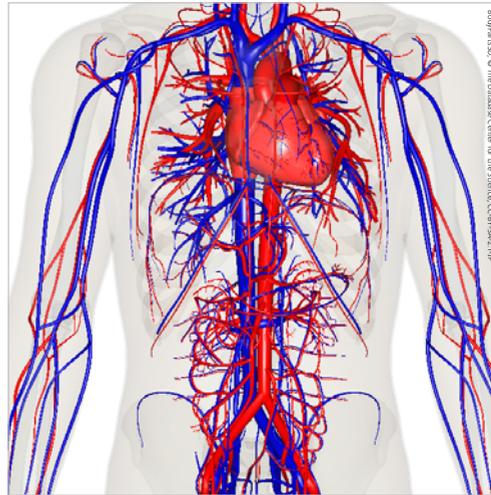
The role of the Clinical Vascular Scientists is an unfamiliar profession to most.

Vascular Science is the non-invasive study of arteries and veins. It has been estimated that there are 60 - 100 thousand miles of arteries, veins and capillaries, and the heart pumps approximately 7,200 litres of blood every day. That's a complex system and when things go wrong it can be serious.

"We can interpret scans and create reports for our surgery team"

The team uses specialised ultrasound and pressure testing to diagnose vascular problems. They undertake 10,000 investigations a year in two main labs and community clinics. They see a complete cross section of the community with 25% as inpatients and urgent cases, so it is fast paced as Clinical Vascular Scientist Kate Harvey explains:

"The vascular laboratories are small, but 14 strong including secretaries, HCAs and trainees alike. All essential and excellent, and much appreciated by myself and Clare Wakely, with whom I have had the pleasure to have worked with for over 20 years. We have managed laboratories before and after merging services, through good times and bad. We have come from very different routes and now



support the National Scientific Training Programme for Clinical Scientists.

"We can interpret scans and create reports for our vascular surgery team (eminent representatives for Gloucestershire in the vascular world) for potential surgery. We also provide services for stroke, renal, radiology, diabetology, leg ulcer and other teams, and we are proud to work with them all.

"Our passion for our work is shown through the compassion and enthusiasm of our staff for best outcomes and experience for our patients. It all sounds very cliché but that, and the interesting, challenging and varied job, is why we do what we do. If you are interested, please contact us and we can tell you more."

Kate went on to tell us a little more about what the vascular scientists do:

The science

Ultrasound can give us a picture of soft tissues, depending on their reflectivity. We can see arteries and veins easily as they don't reflect very well and look black on the screen. We can measure things, and look at anatomy. When something is moving (in our case - blood) sound waves bounce off differently. This is the noise change you hear when a car goes past, and is called the Doppler effect (the frequency change to be precise). These changes can be translated into flow presence, direction and speed in the form of colour and waveform.

What We Look At

Blockages: If a major artery is blocked anywhere in the body the tissues beyond will die. This is a serious condition called ischaemia. If left untreated, this would lead to amputation. If a deep vein is blocked with a blood clot it can potentially break off and get trapped in the lungs causing pulmonary embolism or PE (60,000 deaths annually in the UK). We can see the presence and extent of blockages, and how recently it has happened for urgent treatment to begin.

"If a major artery is blocked the tissue beyond will die"

Narrowing, furring up, or plaque on the inside of artery walls, is known as 'atherosclerosis' - I still struggle pronouncing it quickly! Symptoms can be caused by narrowing itself, or, if debris breaks off, it can block the artery completely. This can happen anywhere, but narrowing in the arteries of the neck, feeding the brain, can cause strokes. There is one stroke



every 5 minutes in the UK. Approximately 40% will die and the rest can have devastating disabilities costing the NHS £1.7 billion a year. We can help predict this so that treatments can prevent stroke.

Widening weak artery walls can expand (aneurysms) and burst. This is often fatal in the aorta (main artery of the abdomen). By monitoring these, the weakened area may be replaced before rupture. All men of 65 get this test, as part of a national screening programme.

Access Dialysis: this is the process of cleaning blood for people with kidney problems. Without dialysis patients cannot survive. There needs to be a place in the body (access) where the blood is taken and replaced. The best way is through a fistula (an artery and vein joined together). We can map and monitor these so that they work properly.

Other stuff we do!

Diagnosing the cause of varicose veins and ulceration, blood leaks, bypass graft functioning, congenital diseases, entrapments and syndromes also enrich our daily working life!

Positively speaking



Positive patients

We get reviews and messages every week on both social media and via the NHS Choices website. This is just a selection of those received in October. If you recognise a team or colleague who's included, please pass these wonderful comments on to them.

NHS Choices:

Anon: We have attended the A&E at Cheltenham several times with our son as well as the Ambulatory Dept via his GP where a wonderful Doctor arranged a CT scan there and then - thank goodness the scan showed no damage.

"The care and concern shown by the doctor and emergency clinician was wonderful"

Our son came yesterday to see the A&E yet again as he had lost vision in one eye and as usual your poor dept was rammed, but the care and concern shown by the Doctor and the Emergency Clinician was wonderful and they even arranged for him to see the Eye Clinic after consulting with the eye specialist - wonderful service and

patience from all the very hard working and dedicated staff you are so lucky to have.

Well done to all your staff; we have been involved with both Cheltenham and Gloucester hospitals with various members of our family and your staff always try their very best.

Chris: As a result of an event where I suspected at TIA, I was referred by my GP to the hospital and had an appointment with the TIA and Stroke Service unit on 4th October 2017. I can only say that from the moment of my arrival until my departure I felt cosseted and cared for. Both the volunteer who took me under their wing, the nursing staff in the various units I visited, and the Consultant could not have done more to put my (at the time understandably somewhat anxious) mind at rest and look after me. Full marks to all of them.

Anon: I had to have a C-section due to baby being breech. From the moment we checked into the birthing centre I felt so relaxed. All the midwives and theatre team were so friendly and professional. Once baby arrived we stayed on the maternity ward and my husband and I were so impressed with the care I and our baby received. I was keen to

breast feed and was given so much help from midwives and assistants. We were also encouraged to stay as long as we needed to ensure I was confident with feeding. I can't rate my stay highly enough. Thank you.

Anon: My wife woke at 5am with severe chest pain. Though this went away after about 30 minutes, I took her to A&E after breakfast. We were seen quickly and spent 5 hours at the hospital while various tests were done. Temporary heart spasm was finally diagnosed rather than a full-scale heart attack and she was discharged with follow-up tests to be provided as an out-patient.

"We were very impressed with all those involved in our care"

We were very impressed by the speed, courtesy, friendliness and professionalism of all the medical staff and indeed by all those involved – porters, nurses, doctors and consultants. Full marks to the NHS! And many thanks for your help.

Facebook:

Catherine: Amazing staff on the GRH endoscopy ward. I was very scared and they really looked after me, so thank you so much.

Valerie: Thank you to the staff on Lilleybrook ward for looking after my husband Chris. I am impressed by the care he was given and how much the ward has improved over the last few months. Chris has been in and out frequently and I have watched this improvement with interest.

Twitter:

Niki: Big thanks to all teams @gloshospitals seeing me through my gynae op last week, esp anaesthetist #makingadifference #NHS #proud #thankful

Candace: Thanks @gloshospitals Day Surgery unit. Although you were very busy you always had a smile and a kind word for us patients #compassionatecare

Ben: A big thank you to the cardiology team at @gloshospitals who are taking good care of my Grandad Peter. Doing a great job. #Gloucester

OUR PATIENTS: in their own words

My husband had to see the liver specialist nurses in the medical day unit yesterday.

Both Debbie and Gabby couldn't have treated us any better, they were very friendly and helpful with information and put me at ease immediately!

The reception staff and HCA (Dave) were very welcoming too. Thank you.

New sensory equipment



Bev and Kirsty testing the equipment

The Ella Bear Charity has donated sensory equipment which will be used for young people who require it when they have transitioned to adult care (16+).

Kirsty, the mum who runs the charity, brought the equipment to hand over to Bev Farrar who is one of our learning disability liaison nurses.

Bev applied for the equipment through the charity following a conversation with the mum of a patient who had recently transitioned to adult care and who had benefited from sensory equipment while under the care of children's services.

Bev advises that it will be stored in the equipment library for use with patients over 16 with learning disabilities or who may benefit from sensory equipment.



Bev and Kirsty



Sing when you're winning

Our Children's team at Gloucestershire Royal Hospital sang their way to second place in national competition to celebrate National Play in Hospital Week

The week which is supported by Starlight Children's Foundation, a national charity that provides entertainment in hospitals and hospices across the UK and grants wishes for seriously and terminally ill children, aims to raise awareness of the benefits of play and recreation for hospitalised children.

Hospitals and hospices were encouraged to enter the competition with a digital or physical display that illustrates the 'power of play'. The Children's Centre wrote a song about the power of play which was performed by the play team and included the lyrics 'don't be stressed it will help you cope / use the power of play to give you hope'.

"We're so made up to have come second in the competition"

Laura Thomas, Play Specialist at Gloucestershire Royal, said, "Everyone values play on the ward and we hope the song demonstrates just how important play is.

"Tim, the son of one of the ward sisters, helped us write the song and can be seen in the video playing the guitar. The kids were going to perform it with us but as soon as we started filming they suddenly became camera shy! We're so made up to have come second in the competition. It's really nice to be recognised and help highlight the importance of play."

As well as writing a song, the ward



created a cut-out superhero display board wearing a play specialist uniform to remind play specialists that they have the power of play and can be superheroes.

Liz Cubbins, Play Specialist who helped design the board, said, "The kids have absolutely loved the display. They've helped us come up with our superhero powers and haven't mentioned having to go for treatment once. It's helped unify everyone and really makes us realise the importance of what we do as play specialists and the positive impact this has."

The ward has won a £100 voucher for The Entertainer which they plan on using to buy arts and crafts for the children.

Victoria Seaman, Children's Services Manager at Starlight Children's Foundation, said, "Starlight is delighted to support National Play in Hospital Week for the seventh year running. We hope the week's activities bring many hours of fun and distraction to hospitalised children."

GSQIA: Focus on our academy

Improving services for BSL users

Our Patient Experience team's Disability Equality Manager Carol McIndoe started a project aimed at ensuring all deaf British Sign Language (BSL) users have a BSL interpreter in attendance at their outpatient appointments as she explains:

"My aim is for 100% of Deaf BSL-users to have a BSL interpreter in attendance at their outpatient appointments and for this rate of success to be achieved by the end of November 2017 within 6 months of the start of the project."

Working alongside the Gloucestershire Deaf Association, a deaf BSL user, and interpreter and staff in Outpatient Departments, Information Governance, Smartcare and in Admin and Clerical teams, Carol developed ideas on how to achieve her aim.

"A notice will be displayed on reception counter-tops"

"Meaningful communication needs alerts on TrakCare. The terms 'Deaf BSL-user' and 'Hearing impaired with speech' will be entered into TrakCare as alerts, which are easily and quickly accessed from the clinic list screen. Further details will be included in the 'communication needs' section of the patient's home-screen.



"The data will be transferred from the Gloucestershire Deaf Association client database (with appropriate permissions).

"Having this data clearly visible to booking office and reception staff will enable them to share the patient's needs with other staff due to interact with the patient.

"My second change idea was to develop a bespoke patients' letter template for BSL users in plain English which will be available on TrakCare for staff to issue. The key information is emphasised in a text box with a pictogram further attracting the reader's attention. Further information is kept short, succinct and bullet-pointed for readability."

The third idea was to develop a Reception Counter top notice: "A notice will be displayed on ED and OPD reception counter-tops, prompting Deaf BSL users to present their Deaf Communication Card to the

reception staff. The card and the notice have the 24 hour GDA telephone number for them to arrange an interpreter."

You will be seeing counter-top notices appearing at various Outpatient receptions. These are aimed at encouraging deaf patients to show their 'Deaf Communication Card' and let us know that they need a British Sign Language (BSL) interpreter.

"For most Deaf people, BSL is their first language and without an interpreter communication can be extremely difficult. In a hospital setting it is vital for patients and staff to have effective communication. Patients need to understand information being given to them for their wellbeing and for consent purposes, while staff need to understand how the patient is feeling, answer any questions and provide reassurance.

"Most Deaf BSL users will have a pre-booked interpreter with them for Outpatient appointments, but in an emergency



an interpreter can be in attendance within 1-2 hours, thanks to the efforts of Gloucestershire Deaf Association."

Action on smoking!

New smoking signage is going up around our sites, with a personal appeal from staff members and their family not to smoke on our grounds.

Find out more at www.hlsglos.org

A couple of great fundraisers

Ward 6a sent in a message about this successful fundraising for their ward. The suggestion came from a couple of volunteers who were also shortlisted at this year's staff awards - David and Do Rolley.

Sister Andrea James said: "We are very fortunate on ward 6a to have a wonderful married couple who volunteer on the ward.

"They are the ones who informed us of a quiz that they attend which raises money for different causes. They spoke with the organiser who agreed to raise money for our ward as we were looking to purchase some corridor seating in order for our more elderly visitors to sit more comfortably whilst waiting for visiting time on the ward to start.

"We were delighted to attend as a table of four to a packed hall"

"We were delighted to attend as a table of four to a packed out village hall of 22 tables! We were welcomed by the organiser and a few words were said about the type of ward we are and then we got down to the nitty gritty of the quiz and raffle to win a prize from the many donations.

"Suffice to say that we did assure them that we are much better nurses than we are quizzers!

"We were astounded and extremely grateful for all the effort and contributions which amounted to a staggering £795.00.

"We plan to get the corridor seating and



Do and David



Andi James

hopefully some other new equipment for the patients and a plaque will be positioned to explain who donated the money.

"Once again grateful thanks to all and keep quizzing!"

Chemotherapy in the community

We celebrated Chemotherapy in the Community Week in early October.

We are working alongside charity Hope for Tomorrow to raise awareness of the Mobile Chemotherapy Unit (MCU) Project as a whole.

During the week, we took the opportunity to encourage our patients to speak to their Chemotherapy nurse to ask them if it would be suitable to have their chemo in a mobile chemotherapy unit (MCU) after the standard first couple of treatments in hospital.

The MCU was parked at the Gallagher Retail Park and outside our Oncology Centre as an encouragement for visitors to come on board and see the MCU and talk to both nursing staff and the Hope for Tomorrow Team. There was also a display in our Chemotherapy Outpatient Department during the week for patients, visitors and staff.

"The friendly environment reduces stress for cancer patients"

They are highlighting that it's an intimate, friendly environment which reduces the stress for cancer patients and their loved ones of driving long distances and enduring waiting times for chemotherapy treatment at main Oncology Centres

There are 11 MCUs operational across the country, including the original ones which serve our patients. The charity estimates that since the launch of the first MCU in 2007, the Units have saved patients travelling over 2,000,000 miles!



A patient who uses the MCU in Tewkesbury told our Practice Development Nurse (Oncology/ CNS Chemotherapy) Sarah Simmons: "The environment is 'intimate'. It is a nice drive in good weather, easy parking with friendly, one-to-one care. Treatment is on time with no delays."

A wide range of different cancers are treated on board our MCUs and the week offered people the chance to find out more about how they or their loved ones can be helped by the services our staff provide on board.

Our charity

Walk for wards a spectacular success

Our third annual Walk for Wards took place at Cirencester Park with over 200 patients, supporters and staff walking together in support of their local hospitals.

Walkers supported the ward or area of their choice to give their support for areas as diverse as Jaundice meters to safeguard newborn babies from serious illness to improving the environment for patients with dementia and specialist equipment for local people fighting cancer.

Lord Bathurst and Henry Trinder, Patrons of Cheltenham and Gloucester Hospitals Charity, led the walk out on the day, with walkers enjoying the spectacular scenery of Cirencester Park.

"We were so delighted with the walk, it was a great success"

Senior Fundraiser Karen Organ: "We were so delighted with the walk, it was a great success. Last year we raised over £10,000 to support different wards and areas of Cheltenham General and Gloucestershire Royal Hospitals. So to nearly double the amount of walkers this year was incredible."

Watch this space for updates on the final amount raised this year.



Lord Bathurst and Henry Trinder with Peter Lachecki and Tony Foster



ARAG staff get on their bikes for Focus

Staff from legal insurance provider ARAG in Bristol raised over £3,000 through a static cycle ride, with more than 40 staff cycling 510 miles to cover the equivalent distance from the company's UK Head Office to its parent company HQ in Düsseldorf.

"It's a fun way for the staff to help a charity that really needs our help," comments ARAG MD, Tony Buss. "We may have presented a bit of a spectacle for passers-by, but

we have a colleague who has benefited from the fantastic support that FOCUS provides, so everyone is really up for the challenge, and determined to reach ARAG Platz by the end of the working day."

Corporate supporters recognised

The Local Business Charity Awards recognise local companies and staff who go the extra mile to make an impact for charities, and two of the finalists at this year's awards were chosen because of the committed support they give the hospitals.

Clarkson Evans were finalists in the Jelf Award, the company have been raising funds and also using their skills and knowledge to make an impact for the hospitals.

"We chose the Hospitals Charity because their work touches the lives of so many local people, both young and old, and were over the moon when they put us forward for the award", says Lindsey Young, HR & Training Director at Clarkson Evans.



Tessa Falzon, Account Manager at Colour Connection was also a finalist in the Individual category for the support which she and the company continue to give to the hospitals charity.

Our charity

cheltenham
and gloucester
hospitals charity



Breast cancer patients benefit

Local breast cancer patients will now benefit from an improved treatment technique thanks to an incredible £15,000 donation by The Rotary Club of Gloucester Severn.

The club decided to make an impact for local patients by directly funding Vacuum Biopsy equipment which will help Gloucestershire's surgical breast cancer team to begin treatment of cancer at the earliest possible stage.

Breast Cancer is the most commonly diagnosed cancer in the UK, and the local breast cancer team work with over 7,000 local patients and see an increasing number of new breast cancer cases every year.

The Rotary Club raised the funds by organising a Sporting Dinner held in Gloucester, with guest appearances by snooker's Dennis Taylor, rugby ref Wayne Barnes and compered by sports presenter Jill Douglas.

"The appeal raises funds for extra care and specialist equipment"

Their President, Steve Markham, said "We are delighted and proud to be supporting the Cheltenham and Gloucester Hospitals Charity in this purposeful way. The new machine will help many patients in the future in our County, and as our Sporting Dinner originated in memory of one of our Club member's wives, who



sadly died through breast cancer, it is an entirely fitting and poignant donation we have made, and one we hope will prove helpful in the years to come."

The Breast Cancer Appeal, run by Cheltenham and Gloucester Hospitals Charity, raises funds for extra care and specialist equipment over and above that funded by the NHS.

Richard Smith, Head of Fundraising: "Vacuum Biopsies will enable our team to identify as quickly as possible whether a lump is cancerous, and avoid the need for open surgery where patients are identified as having benign tumours.

"We are extremely grateful to the Rotary Club of Gloucester Severn, and to everyone who supported the Sporting Dinner; their gift will make a direct impact for local breast cancer patients."

Joining up your information

The Joining Up Your Information (JUYI) project, which will enable our staff to view elements of a patients' health and social care record, is progressing well.

The project will introduce a secure online shared care record system, giving health and social care professionals access to the most up-to-date information about a patient.

Phase 1 of JUYI will be delivered in a series of releases and, once live, our staff will be able to access JUYI via TrakCare and view a range of data regarding patients in our care. For the initial go live, the date for which is still to be determined, TrakCare users will be able to view primary care and community care data, including:

- › Demographics
- › Diagnoses
- › Medication
- › Risks & warnings
- › Procedures
- › Investigations
- › Examinations
- › Events
- › Referrals
- › Attendances



The design of the system is underway and a JUYI Specific Information Sharing Agreement finalised for all partner organisations to sign.

Read more about JUYI at www.juyigloucestershire.org, email juyi.gloucestershire@nhs.net or call 0800 019 3276.

OUR PATIENTS: in their own words

My 88 year old mum has just been discharged from Ward 9a after a hysterectomy.

Superb care from admission suite through theatres recovery and the ward. Thank you to everyone concerned for their fantastic care.



New Nurse Associates



In December 2015 the Government announced a plan to create a new nursing support role.

The new Trainee Nurse Associates are now in place and are working alongside care assistants and registered nurses to deliver hands-on care, focusing on ensuring patients continue to get the compassionate care they deserve. Its introduction has the potential to transform the nursing and care workforce. Crucial to its development is a clear entry and career progression points.

The Shape of Caring review recommended developing this role because of a need in the NHS - from patients, trainees and the service.

Senior Education Practitioner Adam Curtis explains: "In Gloucestershire, we have been part of an exciting project to recruit and support a total of 30 Trainee Nurse Associates made up of employees from our Trust, 2gether, GCS and the CCG. We have 13 Trainee Nurse Associates in our hospitals who were all selected from our existing workforce.

"There was a phenomenal number of applicants resulting in over 100 submitted applications, so clearly our workforce

recognised this great opportunity to develop their potential and further their career.

"This is an exciting project that aims to develop our loyal, hard-working and caring HCA workforce as well as providing one of a range of solutions aiming to increase our nursing workforce.

"They are wearing aqua coloured tunics and navy trousers"

"So that they can be clearly recognised, they are wearing aqua-coloured tunics and navy trousers. Our 12 TNA's will be commencing their second placement soon so please welcome them on to your wards if they are joining you and congratulate them on their success so far."



The big picture

The Wally Rogers team from GRH at Gloucester Dragonboat Regatta.

Involve

OCTOBER 2017

Thanks to all of the amazing staff at Cheltenham Gen for looking after me so well. I owe you a great deal. Xx

Carly, Twitter, 13 October 2017