



Best foot forward

A new year of challenges and celebration

MORE DETAILS ON P5

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BEST CARE FOR EVERYONE

Message from Deborah Lee

This joint winter edition sees the close of one year and the opening of another. It's been an eventful and challenging year and I have no doubt 2018 will see the same though I am confident that this is the year when many of our longstanding challenges will start to be addressed. What remains central from my perspective is the quality and commitment of our staff and the constant awareness of the privilege it is to be in my position. My commitment to serve the Board, our staff and our patients is as great as ever.

Early December saw a week of celebrations starting with the Trust's achievement of the A&E 4 hour standard for the month of November. We are still debating how many years it is since the Trust last achieved the standard for the month but it is several. Not only was it a cause for celebration within the Trust but positive ripples were felt across the system, which is only right given this is not just a whole hospital standard, it's a whole system standard.

Almost immediately afterwards, we were hit by the first really bad weather of the year, with Gloucestershire paralysed by snow in many parts through Sunday night into Monday. One of the things that has always troubled me and continues to, is when we have to cancel care. I'm very aware of the plans that patients make to come into hospital and the emotional investment that goes into every attendance and admission and so we will did our very best to make cancelling care a last



resort in the following week; crucial to this was maintaining staffing levels and the personal efforts of many staff to get into work were very much appreciated.

"A huge thanks to staff who battled their way in despite challenges"

We thanked all our staff who battled their way in despite challenges and an especially big thanks to those that weren't due to work but came in to help colleagues because they were able to walk, cycle or ski to work!

In the same week, it was confirmed that the Gloucestershire Flu Fighters hit the 70% target of patient-facing staff having had their vaccination by the end of November – the best performance ever recorded (by a mile) and simply fantastic as this not only means we will save lives but we will also get our CQUIN funding (quality incentive funding).

The Executive Team Away Day in December was heralded a success by all who attended and it was fantastic for me to have my future team together for the first time. It was great to see so many new members, working together so well and so early in the new team's development with both new and existing members working together incredibly well. The afternoon session was spent focusing on our priorities for quarter 4 (the first 3 months of this new year) and whilst each director had multiple, the four biggies that will need the whole team pulling together were agreed to be as follows:

- Financial recovery and getting as close to the £14.6m deficit plan as possible
- TrakCare recovery so we are able keep patients safe, fill our capacity and recover the income earned from 1st April 2018
- Operational recovery the latter reflecting maintaining some of the recent improvements in A&E and diagnostics but turning more attention and focus to cancer recovery and outpatient waiting times
- In keeping with looking ahead and maintaining our strategic focus, developing the service strategy and business case for the future configuration of services across our two main sites

We recognise that the success of our hospitals is built on the dedication and hard work of our staff and we know that we could not have achieved all we have over the last year without the continued commitment, professionalism and dedication of all of them. Don't forget that patients can nominate our staff all year round for our **Patient's Choice Award**, which is held in very high regard by staff who value

enormously every single nomination that they receive. Last year saw a record number of nominations, which each year are whittled down to five shortlisted candidates who go forward into our main staff awards ceremony. In recognition of each person or team's nomination though, they receive a certificate acknowledging the fact that a patient or their family took the time to celebrate the care that they provided. For those who haven't seen it, the film we made last year to celebrate this award is available <u>here on YouTube</u>.

One of the things our Trust has led the way on is developing nurses and, more recently, other allied health professionals to undertake roles often undertaken by medical staff BUT our approach has been somewhat 'organic'. What we do know is that where it has happened, we have some phenomenal models of care and practice and given the opportunities it affords for professional development, and the problems it can potentially solve in medical recruitment hot spots, we need to do more if it (but in a planned and strategic manner).

As services change and develop as we look to the future, we envision that there will be opportunities for those interested to develop their skills further as we plan to expand the number

of enhanced roles. To this end, Chief

Continued on next page

INVOLVE WINTER 2017/18

Message from Deborah Lee

Nurse and Director of Quality Steve Hams (working with colleagues in Education, Learning & Development) has started a piece of work to undertake a stock take of all advanced practitioners in the Trust with a view to creating a strategy for where we will focus the development of these roles and, alongside this, is now working with the University of Gloucestershire to develop a level 7 advanced practice masters programme to support staff in the Trust who might otherwise be moving on to neighbouring Trusts, to access these opportunities.

We are very fortunate in this country to know the NHS is there for us should we or our families need to call on our services. One patient commented recently: "Today in Cheltenham Hospital everyone was being treated patiently & courteously according to their need, regardless of their background or size of their wallet. I love the #NHS!" It is these core values that are the guiding light in the fantastic level of commitment that our staff demonstrate and I know that our patients are very grateful. It was amazing to see the activity on social media on Christmas Dav from staff and patients alike, celebrating the NHS. As Steve Hams tweeted on his own working day on 25th December: "I'm really heartened by the number of ward sisters and charge nurses working today, showing exceptional compassionate leadership" which was brilliant.

On January 2nd, one of the busiest days of the year, we ran a social media campaign designed to help keep A&E for patients who really need it. With support from staff at both emergency departments, our comms team operated a live social media campaign throughout the day. Traditionally one of the busiest days of the year, the idea of the social media takeover was not only to advise our patients how busy the departments are but also to give the public an insight into the working life of staff in A&E. What wasn't expected was the large numbers of posts from patients and local people heralding the great care they had from our services and expressions of admiration for our amazing staff.

I was delighted to hear just before Christmas that we have been shortlisted for the Patient Experience Network National Awards in two categories - for the Small Changes, Big Steps project and also for the Deaf Communication Cards project - congratulations to all those involved, it's great to be recognised for all the hard work involved and we're in very good company on the shortlist.



On the subject of improving patient experience, I was also pleased to end last year with two positive stories which really help to contribute to our strive for excellence. One of the things that has struck me since day one, is the willingness and ability of our staff and teams to innovate. However busy staff are, time and time again there is evidence of how staff have given thought to developing their service for the future as well as meeting the needs of the here and now.

"Firstly, young Thomas was the first patient at our hospitals to join Harvey's Gang"

Firstly, young Thomas was the first patient at our hospitals to join Harvey's Gang (read more about it on page 16) a scheme where seriously ill children come to visit the pathology labs to see what happens to their blood when it's taken. Every year, approximately 1 million blood samples are collected from children for testing in the UK in what can be a traumatic experience for those involved. As well as being a positive experience for children, it was great to see staff from our children's team working with the scientists in pathology to make this a very special day for Thomas and his brother.

The second example which caught my attention is a development in our women's service (see page 19). Women suffering from Hyperemesis Gravidarum (HG) can now be looked after as day cases following an innovative move by the Trust designed

to improve patient

experience. Women with the condition can become quickly dehydrated and frequently need hospital treatment, but the new plans will see most of these women being treated as day cases on Ward 9A of the tower block at GRH, with just a few requiring overnight admission.

One of the things you will hear a great deal about throughout the year is that 2018 marks the 70th anniversary of the founding of the NHS. NHS England describes it as 'the perfect opportunity to celebrate the achievements of one of the nation's most loved institutions, to appreciate the vital role the service plays in our lives, and to recognise and thank the extraordinary NHS staff - the everyday heroes - who are there to guide, support and care for us, day in, day out'. As a Trust, we will be linking many of our news stories throughout the year to this celebration. I'd like to think that the occasion will give cause to be celebrating, rather than criticising, the NHS and we will be making every effort to ensure our local media partners have lots of rich material to tell a positive Gloucestershire story.

Here's to a happy and successful 2018.



fault reporting portal to adjust.

down a few degrees?

Can't we just turn the heating

are provided, however, we have an

Wherever possible, local heating controls

ageing building stock where installations have been completed against various

different standards and some areas do not have local controls and one thermostat

Doing things better, Doing better things:

Energy FAQ's

We frequently receive ideas about saving energy to our Ideas Inbox. Here are some of the most frequently asked questions:

Can we install solar panels to save money?

Whilst a good idea, there are currently no trust plans to install solar panels. The feasibility of this has been looked into as an energy reduction and cost saving measure but under the current government support arrangement for solar panels, the investment payback has declined and the payback period is typically 8-10 years with a high initial investment cost.

"£100.000 worth of LEDs have been installed in the Tower Block and further ancillary areas around the tower"

Could we introduce LED lighting?

We are currently in the process of rolling out LED lighting, targeting high hours of use areas, internal corridors, 24hr function rooms and theatres first. £100.000 worth of LEDs have been installed in the Tower Block and further ancillary areas around the tower on the Gloucester site. LED lighting is also being rolled out on the Cheltenham site.

Management Company, Bilfinger, are upgrading their lights to LED in their buildings for free.



off when not in use?

Regarding electricity savings, switching lights and PCs off when not in use is a fantastic idea.

Can we install sensor lighting?

Installing a sensor, especially retrofitting to existing lights, is fairly expensive, from £100 - £150 for one sensor and would take 10 years to pay back when used with LED lights. It is on occasion useful to install in areas with lots of lights, but not useful in smaller areas like toilets.

If you already have sensor lighting but think the timer interval takes too long – please contact the estates team through their intranet page on their

may control an entire building.

Some areas have heating provided via alternative methods than radiators and these provide complications in allowing local control. However, where possible, it would be beneficial to turn the heating down.

Avoidable damage

The Estates and Facilities Division (EFD) have identified numerous circumstances of repeated damages that are extremely costly and could easily be avoided.

These range from macerator blockages, to damaged doors and lift entrances where poor practice results in double doors not being opened fully and where equipment is impacting the doors. The damage and subsequent fixing of these items costs approximately £25,000 for the doors and £17,000 for lift entrances per annum.

"Damages like these are easily avoided and can make a real difference"

One of the most problematic areas for EFD is the drains. The team are constantly being called out to blocked toilets and macerators to find that the blockage is caused by clinical wipes. On multiple occasions, up to three packets of wipes have been found in a single WC.

It is essential that all staff and patients are aware that clinical wipes do not break down like toilet tissues and they should NEVER

be put down the macerators or toilets. Between July 2016 and 2017, over £25,000 was spent clearing drains with specialist outside agents.

With the current financial climate and the essential savings that need to be made in the trust, damages like these are easily avoided and can make a real difference.

Cost of clearing drains £25,000 per year

Cost of damage to doors

£25,000

per yea

Cost of damage to lift entrances



Trust goes live at A&E

We turned to social media on one of the busiest days of the year to help keep A&E for patients who really need it.

Our comms teams ran a live social media campaign from our A&E departments on Tuesday 2 January 2018. Updates included how busy A&E departments are, how staff care for patients and what role the public can play in ensuring that A&E remains free for people with serious or life threatening conditions.

"The aim of the campaign was to work more closely with the public in a way that helps them better understand how and when they should access A&E services"

Called #AandELive, updates were pushed out regularly throughout the day from 8am – 12 midnight which people could see by following the hospitals' Facebook and twitter accounts.

Professor Mark Pietroni, Emergency Care Consultant, explained: "The first day back after the festive Bank Holidays is traditionally one of the busiest days of the year for our A&E departments. We don't know exactly why that is although there appears to be a shift in mind set when the holiday period finishes.

"In anticipation of this we wanted to work closely with the public through our social media platforms to advise



and inform patients where their care needs can best be met."

There have been a number of research studies into A&E attendances including by the Royal College of Emergency Medicine which shows that up to 30% of patients attending A&E could be treated elsewhere.

Mark added: "We are not saying that patients should not access A&E – what we are saying is that we want patients to be able to get to the right person in the right place to meet their care needs as quickly as possible. A&Es should be used for serious or life threatening conditions or major accidents that require hospital care.

"There are a range of alternative services available where patients are often treated in a more timely and effective way.

"Throughout the day we gave our followers up to date information, demonstrate the kind of patients who should be attending A&E and encouraging the public were appropriate to use alternative services where patients are often seen in a more timely and effective way."

Social engagement

Many of the public added their thoughts to our posts:

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"Keep up the great work. Over the last few years various members of my family have needed treatment at both local hospitals and, despite being under pressure, the care and support for the patient and family members has always been professional and caring. Thank you all"

"My son had a car accident on 27th December. He was seen in under 5 minutes at CGH and after referred to GRH & seen in under 10mins. Your staff are amazing and work very hard. I am very grateful for the care my son received. Thank you"

"You are all such amazing people. Where would we be without you? My husband got out of hospital yesterday after spending nine days being ministered to by the likes

of you. Very grateful."

"Took my son into CGH ED just before Christmas - he was treated so well, quickly, efficiently, professionally and kindly. Couldn't have been better and the after care has been faultless as well. We shouldn't knock the NHS - it is fantastic!"













Staff stories: Reaching our community

Meet our new BBV nurse

Outline went to meet Helen Gornall, who is our new Blood Borne Virus (BBV) Specialist Nurse.

Helen has returned to the trust after some years nursing elsewhere in the county. She is employed by the Trust but funded by Gloucestershire County Council in this role that sees her working alongside drug and alcohol services (including Change Grow Live [CGL] and the Nelson Trust) and the outpatient services here.

Blood borne viruses remain a very under-diagnosed group of infections - it is estimated that a quarter of people with HIV and two-thirds of people with Hepatitis (Hep) C are unaware of their infections. Hepatitis C is a virus that infects the liver. If left untreated, it can cause serious and potentially life-threatening damage to the liver over many years.

Many patients with Hep B and C have been infected through intravenous drug use and belong to traditionally hard to reach groups. If people are diagnosed earlier, treatment is often more successful and onward transmission could be prevented.

"Blood borne viruses remain a very under-diagnosed group of infections"

Helen works to identify patients with Hepatitis B and C as well as HIV. She

says: "Hepatitis C is a focus as Public Health England are looking for us to drive figures down by 2020 and 2030. CGL are able to do a finger prick test in their hubs and if positive I go out to do a full blood profile, bring the bloods back to our Labs and then refer them into our Hepatology Services." Patients with HIV are referred into Hope House.

Helen went on to explain that part of her role is also to dispel myths around Hep C - traditional treatment was by injection, not always effective, with tough side effects. Our Trust is the only facility in the county that offers direct acting oral Hep C treatment. Chronic hepatitis B patients are treated with suppression therapy and monitored long term.

New drugs are now available for Hep C which have totally changed the treatment landscape for the eight patients each month who are eligible and they can now look forward to an estimated 97% cure rate. Overcoming old prejudices and an attitude that 'l'd rather not know' are hard to tackle but Helen's message is that it's better to know and to be treated.

Both education and control are a big part of Helen's role. She says "Both Hep B and C can live outside the body and in water - so it's not just needles which can infect - crack pipes and cocaine straws, nonsterile tattoos and piercings can pass on the infection." Helen explains that at least 50% of IV drug users are infected with Hep C, and that many people are surprised to learn that there are up to 2000 IV drug users in our county. Hep C can remain asymptomatic for several years before liver damage is detected, which could be cirrhosis or liver cancer, so the screening for the virus is absolutely key as 90% of hepatitis C is attributed to PWID (people who inject drugs)

The group of patients who Helen works with can be challenging to deal with and also suspicious of authority. Helen has worked hard to establish trust and mutual respect with her patients, supporting them and trying to make sure that they are able to attend their appointments. Many of them may lead more chaotic lives, so they can need support and encouragement to come to scheduled appointments. It can be difficult to manage when many of the patients may DNA (do not attend) for appointments on more than one occasion, so Helen works hard (together with community partners) to ensure that the patients don't simply disappear off our radar.

"I have had to learn to think outside the box and to use all my communication skills. This has been a new group of patients for me to deal with and I have learned a lot through meeting them.

"My role is not to judge at all, and to ensure that I try my very best to get every patient a route into the treatment that they need"

"I have to accept their lifestyles and be understanding of the fact that their choices in life may have been limited or dictated by a wide range of factors that are often beyond their control. Helen advises that with this patient group, she has to ask them very in-depth and personal questions about previous health problems, any current health problems, addiction issues, mental health problems and their alcohol intake. She has been surprised by their honesty and clarity but also understands that some of their interactions with health professionals have been difficult in the past.

"My role is not to judge at all, and to ensure that I try my very best to get every patient a route into the treatment that they need. In turn, the patients have learned to trust me."

Partnership working - with CGL, the Nelson Trust and the Homeless Healthcare Team in the community has been vital to Helen's role. She says that she has learnt a huge amount from them and that information sharing has been key.

It is hoped that Helen will be able to achieve a significant increase in the uptake of testing and screening by service users. Not only will this enable individuals to get specialist support and treatment, it will also have a significant public health benefit.

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Mentors get recognition

Mentors from our hospitals were recognised for the outstanding contribution they make to University of Worcester students' learning and training at an annual award ceremony last week.

The Mentor Awards, held in October in Worcester, acknowledged the fantastic support and advice being offered by hospital staff to university students in training.

"We're proud of our staff and the way they all support student learning"

Gloucestershire Hospitals NHS Foundation Trust's nurse in recovery at GRH, Rowena Bulacan won the award for Outstanding Mentor after being nominated by student nurse Danielle Parker who described her as: "...an amazing mentor, not only is she extremely knowledgeable, she wants to share that knowledge. She ensures that you meet all your learning outcomes to a high standard and encourages bespoke placements to meet these and to get the most out of practice placement. She goes the extra mile and every shift I worked with her has helped to ensure I am becoming the best I can be."

Meanwhile, our Trust also received the Outstanding Practice Learning Environment award for the Maternity Ward at Gloucestershire Royal Hospital. The team was nominated by Student Midwife Mia Wallace who said:

"Overall, Gloucestershire is an excellent place for midwifery placements. I have had an amazing time and looked forward to each day working on the Maternity Ward.





All midwives are very accommodating and supportive of students."

Executive Director of Quality and Chief Nurse Steve Hams joined Professional Education Facilitator Deborah Slade, Rowena and the Maternity Team on the night as they picked up their awards. He said said: "We're proud of our staff and the way they all support student learning and on behalf of the Trust on our journey to excellence. I would like to say thank you to all our mentors who make such a difference to the students they work with and offer our congratulations to this year's winners."

Deborah added: "All our mentors work so hard to provide a good learning experience for students, it's so nice to see such hard work acknowledged and celebrated."

Anti-bribery statement

Our Board and senior management team are committed to implementing and enforcing effective systems throughout our hospitals to prevent, monitor and eliminate bribery.

Our Chief Executive Deborah Lee has signed an 'Anti-Bribery and Corruption Statement' developed with our Counter Fraud Service which highlights our organisation's commitment to applying the highest standards of ethical conduct and integrity in our business activities.

Bribery is defined as a financial advantage or other reward that is offered to, given to, or received by an individual or company (whether directly or indirectly) to induce or influence that individual or company to perform public or corporate functions or duties improperly.

"Bribery does not have to involve cash or an actual payment exchanging hands and can take many forms such as a gift, lavish treatment during a business trip or tickets to an event."

Employees and others acting for or on behalf of the organisation are strictly prohibited from making, soliciting or receiving any bribes or unauthorised payments and is a criminal offence that may result in up to 10 years' imprisonment and/ or an unlimited fine for the individual and an unlimited fine for the organisation.

As an organisation, we have developed key policies on preventing fraud and bribery including the Counter Fraud, Bribery and Corruption policy, Standards of Business Conduct and the Speaking Out Policy. These policies are available on the staff intranet and apply to all employees as well as temporary and agency workers, management consultants and contractors acting for or on behalf of our hospitals.

Head of Counter Fraud Lee Sheridan: "Every employee and individual acting on behalf of Gloucestershire Hospitals NHS Foundation Trust is responsible for maintaining the organisation's reputation and for conducting the Trust's business lawfully and professionally. All staff are required to familiarise themselves with the policy to ensure the Standards of Business Conduct Policy is not breached when accepting hospitality and gifts from third parties."

"In signing the statement, the Trust is reasserting that bribery will not be tolerated by staff, contractors or third parties and that we are committed to working alongside the Counter Fraud team to eliminate and eliminate bribery in accordance the Bribery Act 2010."

Employees are encouraged to use internal reporting procedures as set out in the Speaking Out Policy and the Counter Fraud, Bribery and Corruption policy. However, employees can also report their concerns externally as an alternative to internal reporting procedures if they wish to remain anonymous to the Local Counter Fraud Service on ghn-tr.fraudaccountmailbox@ nhs.net or call 01452 318 842/826, or via the NHS Fraud and Corruption Reporting Line on Freephone 0800 028 40 60 or by filling in an online form at www. reportnhsfraud.nhs.uk This provides an easily accessible route for the reporting of genuine suspicions of fraud / bribery within or affecting the NHS. All calls are dealt with by experienced caller handlers.

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Patient experience: **Maternity insight**

Understanding families' feedback

As part of a series of articles about improving patient experience, this month we're looking at the Maternity Insight Project, which has been running since June 2017.

The aim of the insight project is to improve maternity services through enhanced patient feedback.

Project Lead Jean Tucker explains: "The project uses FFT feedback as its starting point, but we ask additional guestions through an SMS messaging service sent within 48 hours of women leaving hospital. It's a fully automated service. so it doesn't involve any additional work for the midwifery staff.

"After the compulsory questions, women are asked if there was a member of staff that they thought went the extra mile to make their experience special and if so, they are encouraged to name the member of staff and say why they thought they had received such good service from this member of staff."

"These certificates have been very well received by our staff"

Conversely, the patients are also asked if there was a member of staff who they thought could have done things differently to improve their experience.

Jean adds: "Over 30 women a month

Tell us about your care for our 2017 Maternity **Insight Project.**

We are currently undertaking a project looking at the experience of women using our maternity service.

The aim of our project is to support improvements to the maternity service by understanding your experience of care.

We will contact you once you are home to give you the opportunity to tell us about the care you have received. You will also be able to tell us about any members of staff who you feel went the extra mile to make your experience even more special.

Taking part in this project is voluntary nswers will be confidential

If you choose to take part and would like to speak to someone about your experience, you will be given the opportunity to provide your contact details (these will remain confidential).

If you require any further information or if you wish to op out of taking part please contact: lean Tucker, Insight Project Manager: 0300 422 5735

are feeding back to us with the vast majority naming staff positively.

"By collecting feedback from women, we will better understand their experience of care and where improvements could be made, as well as celebrating good practice."

Positive comments are fed back directly to the staff member and can be used to meet revalidation requirements. All members of staff who are mentioned by name in the feedback are given a certificate of appreciation and a letter quoting the feedback that they can use during their revalidation if they so wish.

On average over 25 certificates are sent each month to midwives across all three sites. These certificates have been very well received, with staff saying: "Thank you. What a lovely thing to hear" and "Thank you so much! This has literally made my day".

Three members of staff (one from each of the sites) will be offered the opportunity to attend a training course of their choice for either personal or clinical development, with the cost met by the project. The criteria for this award has not vet been finalised but will be based on those who a panel believe have been shown to go the extra mile to improve the experience of the women they supported.

"All women are given the opportunity to talk to a senior member of staff"

Jean explains that where lessons can be learned by us, the process is carefully managed: "Constructive feedback highlighting where a woman's experience could have been improved is managed by their line manager and an opportunity for coaching is then be offered to them if this is necessary.

"The women concerned can also be offered an opportunity to speak to a trained member of staff about their experience so that we can learn where we could have done things differently."

Head of Patient Experience Suzie Cro: "The women's personal comments about what 'going the extra mile' looked like and felt like will inform us for the strategic objective of being rated outstanding





in the Caring domain by CQC.

"We want to use an appreciative enquiry model for our improvement work and their narrative will shape this work on our journey to #J20."

Following on from this project, the Birth Unit in Gloucester is now starting the Small Steps project (taken from the successful Ward 7A project) which encourages staff to introduce small steps of change that can have a big impact on the experience of those women who use our services.

The Patient Experience team are also inviting a group of women who have used the service recently to join an Experience Based Co-Design project which will begin in January. This will bring together the women and the staff involved to talk about what it is like to give birth in our hospitals.

INVOLVE WINTER 2017/18

OUR PATIENTS

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Patient stories: Harvey's Gang

Thomas joins Harvey's Gang at GRH

Six year old Thomas was the first patient at Gloucestershire Royal Hospital to be part of Harvey's Gang when he visited our pathology labs with his brother Lewis and mum Lorraine on 20th December.

The Gang is named after Harvey Buster Baldwin, who passed away on October 6, 2014. First diagnosed with acute myeloid leukaemia at just six years old, over the next 20 months his battle with cancer saw him spend many weeks in hospital at Worthing, and much of his care concerned the delivery of life-saving blood products for which he and his family would have to wait while they were processed. Harvey was curious about what happened to his blood once it was sent to Pathology, so the children's ward arranged for Harvey to visit the haematology laboratories.

"This simple act has precipitated a remarkable chain of events"

That simple act has precipitated a remarkable chain of events that sees seriously ill youngsters enjoying trainee scientist tours with their families at hospitals across the country, wearing special mini lab coats with personalised badges made by hospital staff that explain they are part of 'Harvey's Gang'.



Lead Nurse for Paediatric Oncology Claire Harrison said: "I am really excited about Harvey's Gang coming to GRH, it is a great opportunity for our patients to see and understand exactly what happens to their blood every week. It's also a great opportunity for me to get to know the staff in our pathology lab who work so hard in processing the blood samples I take from children and young people with cancer and leukaemia in Gloucestershire."

The scheme provided a great opportunity for staff from different groups to meet and come together to make this happen for Thomas. Although Thomas' visit was the first, another one was scheduled for the same afternoon and others already booked in for the first half term holiday of the new year. Every year, approximately 1 million blood samples are collected from children for testing in the UK. As well as being a positive experience for children, the Harvey's Gandg website advises that the tours also have a dramatic impact on the scientists at work, reminding them that every vial of blood they process represents a child or a patient in need of their help.

Nikki Price, Senior Biomedical Scientist commented: "I am so pleased Harvey's Gang has started in Gloucestershire. Such an amazing legacy to join that hopefully will take away the mystery of where blood samples go to and why it is so important for us to test them. My colleagues and I are really excited to make a positive difference to children's experience of hospital visits and I hope that we pique their interest in science too!"

Thomas' Mum Lorraine added: "Thomas really wanted to visit the lab and meet the people who his blood samples are sent to. The tour of the labs was great and it's such a lovely thing to have on offer for young patients - getting to see him enjoy himself really meant a lot to me and it helps Thomas too. The staff were all lovely and spent their valuable time making this a day Thomas and his brother Lewis won't forget."

About Harvey's Gang

Harvey's Gang invites youngsters with cancer and other serious illnesses to become trainee biomedical scientists for the day and tour pathology laboratories with their families.

The project is now taking place in NHS hospitals throughout the UK and beyond.

http://harveysgang.com/









The lights are on

Parking provider Indigo are investing in LED lights throughout the multi- storey car park at Gloucestershire Royal Hospital, as well as installing calming blue LED lights on the roof level of the MSCP.

Research from Japan indicates that there was an 84 percent decrease in suicides at railway stations where blue lights had been installed. The exact reason why the lights are effective isn't known, but some researchers theorise that it's related to the apparent positive effect of light on mood.

"Blue light has a psychologically calming effect for those in distress"

In the UK blue light is used both at public transport hubs and in buildings as it is now acknowledged to have a psychologically calming effect for people in distress.

This new measure has been shared with the local suicide prevention partnership, who we work closely with to minimise risk with regard to the car park.

All the new lights apart from the roof level have sensors which will turn the lights on once movement is detected, then go off again after a pre-determined time, which will cut down on our carbon footprint and prevent light pollution.

While work is underway, there will be a short-term effect on staff parking as bays are reduced in order to accommodate the works. Indigo apologise for any inconvenience caused.







Good news for HG patients

Traditionally women with severe nausea and vomiting in pregnancy are admitted to Gynaecology ward as inpatients for hydration with intravenous fluids and anti-sickness medications.

Following an innovative move by the Gynaecology Department designed to improve patient experience, women suffering from Hyperemesis Gravidarum (HG) can now be cared for as day cases in a new facility within the Gynaecology Ward.

HG is a complication of pregnancy characterised by extreme levels of nausea and vomiting starting in early pregnancy and sometimes persisting for many months.

Consultant Nurse Karen Easton said: "Women with HG can become guickly dehydrated and frequently need hospital treatment. Between 50 and 70 women each year in the county are admitted to hospital with the condition, with an average length of stay of 2-3 days.

"The new plans will see most of these women being treated and well enough to go home the same day"

"The new plans will see most of these women being treated with a programme designed to have them well enough to go home the same day, with a very few requiring overnight admission."

The HG Day Unit aims to treat women with rapid IV rehydration and anti-emetic regimes in recliner chairs, resolving symptoms rapidly and allowing them



to return guickly to family life.

There is a criteria and protocol for management. The referral pathways involve GPs. Midwives and A&E staff referring as per the criteria on the poster to the Gynae on call team in daytime hours.

Consultant Jothi Doraiswamy advises: "Since the launch of this service on Dec 1st we have at least 10 women through this pathway with excellent feedback so far.

"This innovative move is aimed to improve patient experience and enhance the patient flow through A&E and reduce bed occupancy with improved efficiency savings for the trust."

Hyperemesis Gravidarum

Day case management at Gloucestershire Royal Hospital 8:30 am to 8:30 pm every day

Is your patient suitable?

Inclusion criteria

- Less than 16 weeks pregnant
- Ketonuria 3+ or more
- Not tolerating oral antiemetics
- Inability to maintain hydration at home

Exclusion criteria apply

- >16 weeks
- Haematemesis High Blood glucose +/- Ketonuria
- Failed outpatient management x 3

Positively speaking



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 December.

Twitter:

Nigel: Today in Cheltenham Hospital everyone was being treated patiently & courteously according to their need regardless of their background or size of their wallet. I love the #NHS.

Noeleen: Thank you to all the hard working staff on ESAU @ gloshospitals for the excellent care of my daughter over the past 2 days X

Richard: @NHSMillion @NHSGlos after visiting my GP I spent an unscheduled afternoon and whole evening at Gloucester Hospital - I received outstanding care and wonderful support from my GP and the Hospital staff - massive THANKS

Agger: @gloshospitals Thank You to all those in the Edward Jenner Clinic for dealing with me quickly, efficiently, and respectfully this morning. Well done and once again a big THANKYOU Vivienne: I watched in awe as your teams went about their work yesterday. I really do want them to know how very much their patients and their families appreciate everything they do.

Karen: HUGE thanks to the staff at Cheltenham General @gloshospitals who helped my elderly neighbour after a nasty fall. He was very disorientated & not himself, but he was treated with respect & compassion #NHSMillion

Joe: If I was a billionaire we couldn't have had a finer service than the one we got from @gloshospitals last week. A thousand thanks

Gir: Massive thanks to @gloshospitals for the excellent quality of care given to my 18 month old today. Excellent out of hours and PAU staff

Facebook:

Steven: A big Thank you to the NHS at Gloucester Day Surgery Unit yesterday. I was in for a small op and straight back home. From Martin, who directed us to the ward, the Nurses, Anaesthetists, and Surgeons, all were polite, professional, efficient and a smile on their faces. Wendy: Just had a baby on Wednesday, the most traumatic day of my life so far! Everyone who's part of the Woman's Department who was involved in the whole process was amazing. Having had two babies in The Royal Gwent some years back and hating every second of their service, the Gloucestershire Royal Hospital was amazing. Highly recommended.

This department does you proud with a very professional team who looked after me and baby fantastically. Thank you very much.

Christine: Reception, triage and x-ray staff in A&E were all wonderful, although busy. You all do a great job

Sally: I went to the surgical day ward with my grandson who has autisum. The care we received was outstanding, from the nurse's to the surgeon and anaesthetist who allowed me to go with him to his op and after to sit with him. Much is said about the bad bits, but we need to celebrate the hard work and dedication of out NHS staff

Lucy: I've spent the night in Gloucester A & E with my mother. She's recently broken her leg and was having difficulty breathing. I would like to say 'out loud' what a magnificent job all the staff do!

It's easy to moan and also abuse the brilliant service we get in this country. Whatever you think, regardless of wealth or status, nobody in the UK is ever refused medical help or a bed in a hospital. Not all first world countries can say that.

Thank you Gloucester Royal, my mum's doing well and can go home where as you guys are still on shift. Thanks you again!!

NHS Choices:

Tony: I've had three previous surgeries at Gloucester and praise everyone, no matter their position. My nasal operation is due in early January 2018. My surgeon who sadly I am not allowed to name here is a fantastic Specialist who is exceptional in every way.

The person who arranges the operation dates has been wonderful and personally kept my notes on their case files so they could liaise with me at every stage of the process.

Well done Gloucestershire. I could not have asked for more if going private. As a Trust, I believe they are truly Safe, Caring, Responsive, Effective and Well-Led. Well done all and for every bad work day you have, like us all, think of all the good work you do and how I and others appreciate you.

Mr Allen: My 3 year old son stopped breathing after choking. We called 999 and the operator was superb, an ambulance arrived within 10 minutes and the paramedics were outstanding.

We were rushed to GRH A&E. The Doctors and nurses here were exceptional, they cared for our son with great professionalism. The nurse in particular went above and beyond to ensure my son was comfortable and not scared.

My son was moved to PAU and again the medical and nursing staff were brilliant. Thank you from the bottom of my heart for your brilliance.

Share the love! Follow us: @gloshospitals on twitter and @gloshospitals on facebook.

Website Transformation Project update

Following some delays in the technical build of our new website and intranet, work has now started on the huge task of moving content from our current sites to the new ones.

Starting with the website, we have already built many of the new service pages, reducing much of the content along the way to make our sites easier to manage in the future, while retaining the key information we know that users are looking for.

"We're sharing the information we've created with the relevant teams as we go"

We're sharing the information we've created with the relevant teams as we go to make sure that everything is accurate and nothing is missed before we go live. Being true to our project principles, however, we know we won't get everything right first time and we're aiming for good first before iterating and improving after we go live.

Our go live date is now likely to be after April 2018, as we have been asked to wait until then so that some key functionality on the current intranet has time to move to TrakCare.

However, this gives us more time to move the content, train web editors and ensure we've tested our new sites with real users to make sure it works for them. We will be doing this work the next few months. If you're interested in testing our new intranet please get in touch with Alison.warren2@nhs.net

If you'd like a reminder about our project and an overview of what we've set out to achieve take a look at our blog:



www.medium.com/@mrswarrentoyou

JUYI - joining up your information

Work to create a shared care record system for patients in Gloucestershire is progressing with the release of Phase 1 taking place in Spring 2018.

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The JUYI shared care record will allow health and social care professionals in Gloucestershire secure access to up to date information about a patient, taking information from a care record held by other organisations and sharing it in one place.

"Once fully live, JUYI will bring together seven care providers using nine different systems"

Once fully live, JUYI will bring together seven care providers using nine different systems. Via TrakCare, staff in our emergency departments, ACUs, AECs, pharmacy and paediatric assessment teams will be able to view a range of data held by other care organisations in Gloucestershire. Patients have been asked to opt in or out, giving them a chance not to allow their record to be shared.



The roll out of JUYI will be a gradual phased process. The first go live will enable primary care and Gloucestershire Care Services community care data to be viewed by 2g urgent care services. Further releases will take place during 2018. You can find out more about the JUYI project at www.juyigloucestershire.org

Action on smoking!

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

As a staff member, do you know the pathway to refer patients? Find out more at www.hlsglos.org

MDU festive coffee morning

The Medical Day Unit at GRH held a festive coffee morning for patients.

With the help of some young relatives, patients were offered mince pies and other goodies as well as some festive cheer!

Senior Liver Specialist Nurse Debbie Durrant said: "We were happy to come in on Saturday to spread some festive cheer to our patients!"

Sad news

One of our Learning Disability Hospital User Group (HUG) members was sadly knocked over and killed after attending a HUG meeting just before Christmas.

Marilyn caught the bus back to the Forest and was knocked down as soon as she got off. On the day that she was killed, she had made a particularly large contribution to the HUG as she talked in front of a room full of LD champions as well as other HUG members.

Marilyn's contribution to the group has been hugely valued and will be missed.

Why I had my flu jab



Sylvia Morris, Specialist Respiratory Nurse

"I had it the first day it was offered this year because I wanted to protect myself and I work in Respiratory medicine and that is why I have it every year.

"I have actually had it every year for the past twelve years and have not had a reaction.

"I usually ask my colleagues if they have had it and always question my patients and will keep doing so until February because it is important."

100% for Library Services!

We are pleased to announce that our Library Service has achieved 100% in the Library Quality Assurance Framework, this is the national quality assessment for NHS Libraries in England.

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They are also only one of two libraries in the whole of the HEE South region to achieve this score.

This year the assessment focused on 5 areas:

- working with other organisations across the health community to develop services
- demonstrating the positive impact of library services
- supporting clinical and management decision making
- supporting information provision for patients and/or the public
- involved in the creation, capture, sharing, utilization, or reuse of knowledge

"We could easily evidence activity in all the measured areas" said Lisa Riddington, Library Services Manager, "we have trained public librarians on patient information resources, had 8 case studies accepted on the HEE national library impact database, supported decision making by providing evidence for example the new scalp cooling treatment and the promotion of



twiddlemitts and we find, organise and share the research our staff publish."

"They are one of two libraries in the whole of the HEE South region to achieve this score"

Lisa said: "I have a great team who deserve this recognition, they are passionate about their work, they are not afraid of change and willing to go out of their comfort zone, I am very proud of them."

Helping the homeless

In the cold weather, staff have been reminded offer spare clothes to homeless people and anyone else who needs them. The clothes are stored in a cupboard off AMU at GRH. And please, do donate any clothes you can spare.



Our charity

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Sky ceilings installed in radiotherapy

Cancer patients receiving radiotherapy in Gloucestershire now find it easier to take their mind off their treatment thanks to the fundraising efforts of staff at Clarkson Evans.

Two state-of-the-art virtual 'sky ceilings' were installed in the radiotherapy department at CGH after staff at the leading electrical contractor raised more than £9,000 for our Charity.

The specialist 'sky ceilings' were shipped from the USA and will help cancer patients feel calmer and more relaxed when receiving their daily treatment. Radiotherapy treatment rooms can have no natural daylight and so virtual LED ceilings, depicting images of trees in blossom and cloud formations, offer a high-tech alternative.

The sky ceilings have transformed the environment for local cancer patients. They are providing a welcome distraction for patients who look up to an inspiring backlit scene of blossoming trees with a summer sky. We are very grateful for the amazing support from Clarkson Evans which has made this possible.

"Our staff were highly motivated to make a difference for Cheltenham & Gloucester Hospitals Charity, especially when they realised that all the money raised was going to be used to support local cancer patients," said HR & Training Director Lindsey Young.



"As well as supporting the charity financially our staff have also offered support in kind using their marketing, graphic design and videography skills to help the charity widen awareness of its work," added Mrs Young.

Chairman Steve Evans and Managing Director Nathan Evans visited Cheltenham General Hospital for the official unveiling of the first 'sky ceiling' meeting patients and staff benefitting from the new facility.

The daughter of one cancer patient, receiving treatment for throat cancer said: "My mum has recently finished six weeks of radiotherapy for throat cancer. The new sky ceiling has made what was an awful experience better. She came home and said they were beautiful. She couldn't quite explain what it was but said that the ceiling gave her something to focus on during a really traumatic time."

Grant to help county's babies

Cheltenham and Gloucester Hospitals' Charity appeal to fund vital treatment equipment for babies with Jaundice has secured a grant of £1,000 through Persimmon Homes Severn Valley's Community Champion scheme.

The donation will go towards funding brand new technology to enable community midwives to take an instant reading of a baby's Jaundice level, and respond at the earliest possible opportunity where there is a risk of serious illness such as brain damage.

Cheltenham and Gloucester Hospitals' Charity applied to Persimmon Homes Severn Valley with the chance of becoming one of their monthly Community Champions, and was selected to receive the donation as part of the match-funded scheme.

"We are very grateful to Persimmon Homes for this generous donation"

Richard Hastilow-Smith, Head of Fundraising at the charity, said: "We are very grateful to Persimmon Homes for this generous donation. Our charity aims to create the best possible experience for patients and their families by funding state of the art equipment and improvements to facilities over and above the NHS.

"This donation will go towards helping us to equip midwives with state of the art equipment which can transform the lives of babies and families in and around Cheltenham.

"Most babies experience some Jaundice in their first weeks at home, it is often naturally resolved, however in unfortunate circumstances it can have the potential to lead to more serious conditions. Thanks to the generosity of individuals and businesses like Persimmon Homes, we are one step closer to reaching our overall fundraising target."

Carly Spear, head of sales at Persimmon Homes Severn Valley, said: "No one can imagine the trauma of watching a child suffer in this way and we were instantly drawn to supporting this worthy cause. This life-transforming equipment will make a huge difference to the hospitals and the lives of those affected.

"It is a pleasure to support the hospitals and people within the communities we are building in."





Lodders Solicitors get behind their local hospitals!

Solicitors at the Cheltenham office of law firm Lodders have raised over £3,500 for the Cheltenham and Gloucester Hospitals Charity by giving their time for free in the charity's first-ever Make a Will scheme.

Lodders' team of private client solicitors wrote 44 Wills as part of the Make a Will fundraiser, in return for a donation to the charity by clients supporting the scheme.

Our Charity (CGHC) raises money to create the best possible experience for patients and their families by funding extra care and equipment over and above that provided by the NHS.

Lodders' Jessica Beddows and Natalie Smith presented the £3,550 cheque to Richard Smith, Head of Fundraising, at Cheltenham & Gloucester Hospitals Charity, who said:

"To have raised £3,550 is incredible, and we are very grateful to Lodders and everyone who took part in Make a Will Month"

"Lodders has been fantastic to work with; we have had very positive feedback from people who took part, and we really appreciate this amazing support."

Jessica Beddows, a Partner in Lodders'



Private Client team explained: "We were delighted to support our local hospitals with the Cheltenham and Gloucester Hospitals Charity's first-ever Make a Will month fundraising scheme, and thrilled to have raised so much money."

Private Client solicitor Natalie Smith added: "It is important to have a professionally written and up to date Will to ensure that your wishes are carried out and to guarantee that there are no issues for loved ones if you should die without a Will, or one that is not valid and up to date.

"It is also a good opportunity to consider causes that are close to your heart, and we are so pleased to have played a part in making CGHC's first Make a Will Month such a fundraising success."

Richard added: "Support like this makes a real impact on our work, helping to create the best possible experience for patients and their families by funding extra care and equipment in our local hospitals.

January health and wellbeing

Staff taking on a wellbeing challenge in January have been offered the opportunity to fundraise at the same time to make an impact for patients across the hospitals.

Whether they're renouncing chocolate, avoiding alcohol, quitting smoking or taking on a running or walking challenge, they can raise sponsorship for the ward or department of their choice via Justgiving

Join the lottery

With a top prize of £25,000 every week, our Lottery is a great way to get behind your local hospitals!

Every year the Hospitals Charity helps to improve the experience for thousands of local patients and their families, and for just £1 a week you can support our work and have the chance to win a cash prize every Saturday. Every player will be allocated a six digit lottery number which is theirs for as long as they play.

It's really easy to join the lottery – you can sign up online at: <u>www.gloshospitals.</u> <u>nhs.uk/charity</u>, through one of our Lottery leaflets around the Hospitals or call the charity team on 0300 422 3231.

OUR PATIENTS: in their own words

A huge thank you to chelt Gen A&E & ACUC staff @gloshospitals and ambulance crew @swasFT for their help with my elderly dad's emergency admission yesterday morning after his fall. Jess & Rhian in particular #amazingNHS #excellentcare #14hourshifts&still smiling #verygrateful



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or with a printed sponsorship form.

Find out more at Cheltenham and Gloucester Hospitals Charity website www.gloshospitals.nhs.uk/charity or contact the fundraising team on 0300 422 3231, ghn-tr.fundraising@nhs.net



Macmillan Specialist Nurses recognition

Our Specialist Nurse for Teenagers and Young Adults (TYA) with Cancer, Megan Willsher, is part of a project which has been recognised nationally at the recent MacMillan Professionals Excellence Awards earlier last month.

The IAM Portal Project Team, which works within hospitals across the South West, scooped the Innovation Excellence Award for their work to improve the cancer journey for teenagers and young people by making their voices central to their care.

Megan explains: "This award was for our Holistic Needs Assessment for patients and how we use it to structure our Multidisciplinary team (MDT) meetings."

"This award was for our Holistic Needs Assessment for patients"

Patients complete an innovative digital holistic needs assessment on the portal, and the results form the backbone of MDT discussions about their needs. Users can also utilise the portal to find a comprehensive range of age-appropriate information, and to contact their medical team with any concerns. The third component of the portal is SWIMMS – a bespoke MDT management system which allows professionals across the region to register young people with the TYA service; provides a way to manage and record MDT meeting activity, including the generation of a care plan; and the production of activity data reports for service management purposes. The portal, which was jointly funded by Macmillan and Teenage Cancer Trust, is now being taken forward nationally.

"We wanted a simple framework for good conversations within MDTs," says Jamie Cargill from the team. "There wasn't anything already out there, so we had to develop something of our own. We wanted to create a digital platform that offered access to good advice, particularly around psychological and social support, and that allowed patients to contact the team and tell them what they're worried about."

"Because the self-assessment element of the portal is central to MDT discussions, many clinicians have told us that it's made them think differently about engaging with young people. They realise that they should be talking about their patients' wider needs and not just about drugs and surgery. It's been fantastic to see people change their practice as a result of the portal."

The big picture

Blue lights on the top floor of the multi-storey car park at GRH.

Blood donation appeal

Could you give blood? NHS Blood and Transplant are appealing for blood donors throughout the winter period to donate at the Gloucester Donor Centre at 59 London Road. To book an appointment, visit blood.co.uk or call 0300 123 23 23.

Involve WINTER 2017

I watched in awe as your teams went about their work yesterday. I really do want them to know how very much their patients and their families appreciate everything they do.

Vivienne, Twitter, 10 December 2017

