The magazine for the UH Bristol community

p6-7 **1000th cochlear** implant is fitted at UH Bristol

Respecting everyone Embracing change Recognising success Working together Our hospitals.





ello and welcome to the May/June edition of Voices.

At May's Nurses' Day celebrations, it was truly inspiring to hear about the hard work and dedication of our nurses and midwives. So many of these staff go above and beyond their day-to-day duties to provide exceptional care to their

patients. See pages 10-11 for the full list of winners and those who were highly commended.

At the same celebrations we were delighted to introduce our new Trust film "We are proud to care" (page 15). Filming took place over several months at the beginning of the year, and features staff in both clinical and non-clinical roles. The short film gives an insight into the day-to-day workings of the Trust, and can be viewed on our website (www.uhbristol.nhs.uk) now.

On pages 6-7 you can read about The West of England Hearing Implant Programme, based at St Michael's Hospital. The service provides life-changing cochlear implants to children and adults, and the team moved into its new unit at the hospital last year. We chatted to consultant ENT surgeon and lead for the service, Philip Robinson.

Sleep packs, including eye masks and ear plugs, are being distributed to patients on numerous wards in the BRI to see if it helps patients to sleep better. The team leading the project has recently gathered initial feedback and you can find out more on page 16.

We are always keen to get your thoughts on the magazine. If you have any comments, please call 0117 342 3758 or email communications@uhbristol.nhs.uk.

I hope you enjoy this edition.

Fiona Reid Head of communications

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UH Bristol scoops awards



ongratulations to four members of UH Bristol staff whose work has recently been recognised at the Bristol Health and Care Awards, and Health Education England's Star Awards.

At the Bristol Health and Care Awards, Professor Ramanan, paediatric consultant, took home the Research Impact award, for his work on the Sycamore trial, which has tested a new drug in children with a sight threatening disease.

The Research Impact award was won by Andrew Freeman-Fielding, charge nurse in ITU, who supported the Critical Care Information System team to rollout the integrated critical care clinical information system, which enables teams to assess, plan, treat and evaluate patients.

Sue Brand, germ cell clinical nurse specialist, from the Bristol Haematology to win the award for Health Care Professional of the Year. Sue said: "I was overwhelmed to win this, especially with other finalists being clinicians held in high esteem. I am so pleased that I have made such a difference to the care and treatment of patients treated in the Bristol Testicular Cancer Service."

Health Education England's Star Awards recognised the best in education and training across the health sector in the South West. Congratulations to Andrew Levy, consultant, for winning the Inspiring Educator award on the evening. Andrew's nomination was selected from over 61 submissions. The judges were impressed with Andrew's commitment to student learning and boundless enthusiasm and energy. Andrew said: "I was incredibly surprised and really delighted by the win. I was so pleased to be nominated and feel so happy to have won this award."

and Oncology Centre, was thrilled

New director of strategy and transformation

Welcome to Paula Clarke, the Trust's new director of strategy and transformation.

Paula joined UH Bristol having previously worked as interim chief executive and director of performance and reform at Southern Health and Social Care Trust based in Craigavon, Northern Ireland, and brings to Bristol extensive experience in strategic development, partnership working and service redesign.

Paula said: "I am delighted to join the team at UH Bristol and to have the opportunity to work with teams across the Trust and the wider system to continue to sustain and improve care for patients and local people.





In brief

Trust introduces infographic posters

When moving around the Trust, keep an eye out for the Trust's new infographic posters, which are displayed on the walls of all of our hospitals.

Every hospital has its own poster highlighting interesting facts unique to each site.



• In 2014. the Bristol Royal Infirmary served 394,000 meals.

- In 2014 the dental hospital removed 5,000 teeth.
- Bristol Royal Hospital for Children is the major paediatric trauma centre for the South West.
- On average in 2015 there were 429 weekly attendances to A&E.
- 9,000 people a year use the cancer information and support centre at Bristol Haematology and Oncology Centre.
- At South Bristol Community Hospital. 60 beds are changed daily.
- 5.284 babies were born in 2014/15 at St Michael's Hospital.
- More than 35,000 medical records are in circulation at any given time around the Trust.

Do you have any interesting facts about your service that you would like to contribute? If you do contact communications@uhbristol.nhs.uk. For other interesting facts, look for the posters around the site or find them online here: www.uhbristol.nhs.uk/ about-us/key-publications/infographics/

Wrong Trousers Day is back!

Get your weirdest, wackiest and most wonderful trousers at the ready: Wrong Trousers Day is back!

Inspired by the classic Wallace & Gromit film, on Friday 24 June schools, offices, groups and individuals all over the South West will be donning "the wrong trousers" to raise money for The Grand Appeal the Bristol children's hospital charity.

It couldn't be simpler for your ward or department to take part: just pay £1 to ditch the dress code for the day. Anyone can join in and dress up in whatever you want, from sports kit and sequins to flares and fake fur even a tutu! On Wrong Trousers Day, it's right to look wrong!

The Grand Appeal is celebrating its 21st anniversary this year, and hopes its supporters help make Wrong Trousers Day bigger and better than ever!

Nicola Masters, director, The Grand Appeal, said: "Wrong Trousers Day is one of The Grand Appeal's best-loved fundraisers, and we hope a whole host of hospital staff join in the fun and wear some unusual uniforms on 24 June! Whatever you wear, make it right to look wrong and help us raise even more vital funds to support critically-ill children at Bristol children's hospital."

Wrong Trousers Day is sponsored by Nutricia Advanced Medical Nutrition, the UK's largest provider of specialist medical nutrition products.



Wrong Trousers Day fundraising p

Bristol children's hospital staff travel abroad to make a difference

Neil Muchatuta, consultant anaesthetist from Bristol children's hospital has returned from a trip to Madagascar after running two courses in the capital.

These course were developed by the Association of Anaesthetists of Great Britain and Ireland and the World Federal of Societies of Anaesthesiologists (WFSA), and aimed to support healthcare communities in the developing world to improve maternal outcomes and reduce maternal mortality: "When I informed Above & Beyond of my trip they generously donated a year's supply of magnesium sulphate to the country's main maternity hospital. This will be enough to treat up to 300 women with eclampsia, and has the potential to prevent 50 excess deaths in these mothers," said Neil.

During a separate trip, three clinical colleagues from the paediatric neurosurgical department travelled to a Tanzanian hospital in February, offering training and support to clinical staff in the management of infant hydrocephalus.

Vita Stagno, clinical fellow in paediatric neurosurgery, Natasha Clark, consultant neuro-anaesthetist and Jenny Sacree, advanced nurse practitioner, made the visit to Arusha Lutheran Medical Centre in Tanzania.

Miss Stagno said: "Infant hydrocephalus is the most common neurosurgical abnormality in sub-Saharan Africa. Paediatric neurosurgical patients are a vulnerable category. Unfortunately,





nurses and doctors in developing countries frequently do not receive specific neurosurgical education and post-operative morbidity and mortality rates are extremely high.

"The trip was a very positive experience for us and the Tanzanian team. They widely appreciated our time and were very kind to allow us to support them during the week."



Revolutionary equipment for Bristol children's hospital

The paediatric cardiac service has become the first centre in the UK to install equipment that will change the way children with abnormal heart rhythms are treated. Hannah Allen investigates.

ristol children's hospital has Decome the first paediatric cardiac centre in the UK. and the second paediatric centre in Europe, Middle East and Africa, to install the Biosense Webster Carto Univu system.

When treating abnormal heart rhythms, it is necessary to direct a catheter to the location that is causing the abnormal heart rhythm. This has conventionally been done using x-ray guidance; however this involves exposing the patient to small doses of radiation. The newer system does not require x-rays and so clinical staff get the benefit of seeing an x-ray picture superimposed on a 3D picture of the heart,

without exposing the patient to radiation.

Mark Walsh, congenital cardiology consultant at Bristol children's hospital said: "UniVu has really transformed how we manage our electrophysiology cases. It permits better visualisation of the heart by combining x-ray and the latest 3D mapping technology. This means that we can dramatically reduce the dose of x-ray that a patient is exposed to.

"Another advantage with UniVu is that it provides us with an advantage for difficult cases, for instance, especially when it comes to imaging small blood vessels attached to the heart

Case study: Rio Davies

Dio Davies, aged seven, was on his way Nhome from Disneyland Paris when he suffered an out of hospital cardiac arrest.

His mother, Marcelle Davies, recalls the moment her son stopped breathing: "We were getting on the coach following a stop at a service station, on the way back from our holiday. As we got back on the bus Rio complained of a belly ache and within moments of reaching our seats collapsed on the floor. It was following a second seizure that he then stopped breathing in the car park.

"It was by chance that a man who replenishes the first aid boxes at the services was there to give CPR. It took three attempts with a defibrillator to get him back, after 10 minutes of not breathing."

Rio was diagnosed with a condition called Wolff-Parkinson-White (WPW) syndrome; a relatively common condition in children. This condition causes the heart to beat

abnormally fast for periods of time, caused by an extra bit of muscle that connects the top and the bottom chambers of the heart. Rio had experienced a very rare complication from WPW; a cardiac arrest.

When Rio was stabilised he underwent a catheter ablation in France. The procedure involves clinicians placing small wires inside the heart and burning blood vessels that sometimes cause abnormal heart rhythms.

"A private plane was organised to fly us back to Bristol, with two doctors on board. He was transferred by ambulance to Bristol children's hospital where he was put into the care of the cardiac team.

"Mr Walsh carried out another cardiac ablation on the left side of Rio's heart, weeks following his cardiac arrest in France. Rio continued to live life normally, returning to school. We returned to Bristol children's hospital in January of this year for a check-up. Despite him



that sometimes contain areas where the heart rhythm is abnormal."

Since the installation of the CartoUnivu model in January 2016, Bristol children's hospital has successfully treated 25 paediatric patients. The system has enabled cardiologists at the hospital to treat conditions such as Wolff-Parkinson-White syndrome which is a common condition which has the potential to cause dangerous fast heart rhythms and cardiac arrest in young children.



making good progress, his ECG showed a change so Mr Walsh requested Rio stay in hospital to undergo a third ablation. This time the team used the new system which has proven successful. He was transferred back to the hospital ward straight after the procedure and discharged a couple of days later."

SPOTLIGHT

West of England Hearing Implant Programme

The West of England Hearing Implant Programme was established in 1995 as the regional centre for the South West. The service provides life-changing cochlear implants to over 100 patients a year. Marcella Pinto visited the recently opened adult unit at St Michael's Hospital and sat down with the team that provides sound to the profoundly deaf. Philip Robinson, consultant ENT surgeon and director of the hearing implant programme in theatre; and below, Philip unmasked

A cochlear implant is a surgically implanted electronic device that provides a sense of sound to a person who is severely to profoundly deaf. Cochlear implants consist of an external device that sits behind the ear and a second portion that is placed under the skin. They are different to hearing aids; instead of amplifying sounds to damaged ears as hearing aids do, cochlear implants bypass the damaged areas of the ear and stimulate the auditory nerve.

"The service originally launched in 1995 at Southmead Hospital with adult patients. We treated our first child in 1999, and in April 2013 we moved from North Bristol NHS Trust to St Michael's Hospital," said Philip Robinson, consultant ENT surgeon and director of the Hearing Implant Programme. In October 2015 the service opened a new adult unit at St Michael's Hospital, and treated its first adult patient in the new department in November. In February 2016 the team celebrated its 1000th implant since the service began in the 90s.

The new adult department, located adjacent to the paediatric unit, allows both teams to work collaboratively and across services. "This is an exciting time for our service. Being next door to the children's hearing centre means that our multi-disciplinary team is capable of sharing and working together on cases. Previously, this wasn't possible. This has resulted in an improvement for our patients, and the new unit here provides all the necessary space and equipment for our patients," explains Sara Plowright, consultant speech and language therapist and service lead.

The programme treats both adults and children, who have to undergo rigorous testing prior to being offered a cochlear implant: "Initially we have to establish that they have a severe to profound deafness and that it is amenable to surgery. We are able to treat babies born deaf who are implanted early and preferably before their first birthday and adults who lose their hearing in later life. Unfortunately it is not possible to treat adults who have been deaf since birth or for many years because we have to stimulate the brain soon after losing their hearing or after birth in order to lay pathways down," explains Philip. Patients return four weeks after their operation to have the external speech processor switched on. "The day of switch on can be emotional for patients and their families," explains Julia Hood, lead audiologist for the adult team. "The speech processor is tuned to a comfortable sound level prior to activation. Initially the sound may not be meaningful and can be described as 'robotic'. Sometimes the difference to patients is instantaneous, but often it can take time to adjust to the hearing changes. Switch on marks the beginning of a period of rehabilitation; ensuring patients receive maximum benefit from their implant. We are privileged to share in each patient's journey and witness changes that can be life changing."

Philip explains that he is most excited about the difference that the implants are currently making to the elderly: "With our older patients, we really notice the difference that implanting this device can make. It takes away their loneliness, improves cognitive function, and opens up a whole new world of possibilities again." Louise – the 1000th cochlear implant patient at St Michael's Hospital



Louise's cochlear implant is turned on for the first time

Louise Windsor from Wellington in Somerset has been mostly deaf since birth. In February she became the 1000th patient to be treated by the West of England Hearing Implant Programme, based at St Michael's Hospital.

Louise learnt to lip read when she was young, and her deafness has meant that she has only been able to hear sounds as loud as a low-flying aeroplane.

Louise was initially nervous when she was offered the operation but was equally excited at the prospect. Philip Robinson operated in February and Louise returned to St Michael's Hospital four weeks later for her implant to be switched on for the first time.

"At first the sounds she could hear were only very subtle," explained Louise's husband Mark, "but when she combined her single implant with her hearing aid in her other ear, she could immediately hear the difference. The cochlear implant has definitely changed our lives. Louise can now pick up more high-pitched sounds and is now able to hear our voices. She is having to adjust to her change in hearing and most recently she heard the sound of birds singing for the first time. That was really special."

7

Extra help for expectant mums with extreme sickness

Many mums-to-be experience sickness during their pregnancy, but for an unfortunate few extreme nausea and excessive vomiting become a debilitating part of what should be the most exciting time of a woman's life. Steph Feldwicke finds out how St Michael's Hospital is helping these women.

Hyperemesis Gravidarum (HG), which hit the headlines after the Duchess of Cambridge suffered from it during both of her pregnancies, affects about one in 100 women. Far more extreme than 'morning sickness', some sufferers of HG can be sick up to 50 times day, leading to dehydration and exhaustion that may need hospital treatment.

At St Michael's Hospital a new treatment unit has been opened to help expectant mums with HG get the help they need more quickly.

The new unit, called the gynaecology treatment lounge, opened in April and has been designed to treat patients with hyperemesis so they can avoid having to stay in hospital. Fitted with two reclining treatment chairs, the unit is located away from the busy ward environment, in gynaecology outpatients.

Women with hyperemesis, who are six to 20 weeks' pregnant and planning to have their babies at St Michael's, can seek treatment at the unit and the nurse-led



service is available Monday, Wednesday and Friday, 10am to 4pm.

Senior staff nurse Sally Stacey said: "We are very fortunate to be opening this unit to patients with hyperemesis. For those who suffer with the condition, this time can be very unpleasant which is why we aim to reduce any added stress with a comfortable environment, away from the busy ward, for treatment.

"Women can be referred to the service via a GP, midwife, early pregnancy clinic or through an A&E admission. Once patients have come to the unit, they can then self-refer, which allows open access to the unit if ongoing treatment is required."

Gynaecology matron Jennifer Anstey added: "Patients coming to the unit can be treated in a short period of time with rapid

 rehydration, medication and advice to take home about living with hyperemesis.

> "Going home on the same day is particularly beneficial to patients who work or have other children and family at home.

"To ensure patients are not alone during treatment, the room can accommodate one visitor per patient. The room also has a radio, donated by a previous patient of the Trust, and televisions funded by Above & Beyond, the local charity that raises funds for St Michael's and the other Trust hospitals.

"The hyperemesis unit is the result of a huge team effort here at St Michael's. We're very excited to open this new facility to patients and are confident this will improve our patient experience."

Some women who have had HG have

following symptoms in addition to the

• Extremely heightened sense of smell

• Headaches and constipation from

• Pressure sores from long periods of

• Episodes of urinary incontinence, due

to vomiting combined with pregnancy

• Excessive saliva production, known as

reported having some or all of the

main symptoms listed to the left:

ptyalism

dehydration

time in bed

hormone relaxin.

Hyperemesis Gravidarum (HG) is much worse than the normal nausea and vomiting of pregnancy, or 'morning sickness'.

Signs and symptoms of HG include:

- Prolonged, severe nausea and vomiting

 some women report being sick up to
 50 times a day
- Dehydration not having enough fluids in your body because you can't keep drinks down. If you're drinking less than 500ml a day, you need to seek help
- Ketosis a serious condition that results in the build-up of acidic chemicals in the blood and urine. Ketones are produced when your body breaks down fat, rather than glucose, for energy
- Weight loss
- Low blood pressure when standing.

Unlike regular pregnancy sickness, HG may not get better by 14 weeks; it may not clear up completely until the baby is born, although some symptoms may improve at around 20 weeks.

Dedicated to Control of the Control

The Trust falls steering group won the 'quality champion' award at UH Bristol's annual Recognising Success ceremony. This award is for exceptional work to improve the quality of care we provide to patients. Heather Price chatted to the group to find out about the work they have been doing to reduce the number of inpatient falls.

Falls and fractures are a common and serious problem affecting older adult inpatients, with over 240,000 falls reported each year in hospitals across England and Wales. At UH Bristol, the Trust falls steering group is working hard to reduce the number of patient falls. The group, chaired by deputy chief nurse Helen Morgan, comprises of a range of clinical staff from across the Trust including matrons, representatives from allied healthcare professionals, manual handling and fracture liaison, clinical leads (Scott Allan and Dr Rachel Bradley), and dementia and falls lead Rachel Price.

"Our target for the year was to achieve fewer falls than the average 5.6 per 1,000 bed days," said Rachel Price, "After we achieved this for 11 consecutive months in 2014/15 the patient safety group agreed to lower the target to 4.8 per 1,000 bed days for 2015/16, and we have consistently remained below this figure."

However, this is not simply a target; it is vital for patients' quality of care and experience, given that falls can have profound – and sometimes life-changing – effects. As well as physical effects such as bone fracture, a fall can affect a person's confidence, making them prone to further falls. Falls also have an impact on relatives, and for some patients, a fall can have serious financial implications.

One reason for the reduction in falls is the development of multi-faceted training available to staff. Falls awareness is now part of the Trust induction for everyone, e-learning is available, and ward teams are offered bespoke training. Falls training now also includes awareness on related health issues. For example, approximately a third of patients who fall have a cognitive impairment, so falls training now incorporates dementia and delirium awareness and management, and vice versa; falls training is incorporated into dementia training.

However, not all falls are avoidable. "The hard thing to manage with falls is that they can be for any reason," said Rachel. "It can be hard to spot a pattern." In order to learn from falls, the group has introduced a new approach - the SWARM document – where the whole multi-disciplinary team comes (or 'swarms') together to analyse a fall. The



patient is treated appropriately at the time, and then staff come together to analyse what happened, including what the patient was doing, and what the environment and staffing levels were like.

"SWARM is helping us to identify what we can learn from a fall and what could have been done differently," said Rachel. "Sometimes there will be key actions where we think 'we must learn from that', and changes are made to stop it happening again. Other times, we come to the conclusion that it was unavoidable. The SWARM gives everybody that information and feedback, which we can share with the patient and their family."

Helen Morgan said: "Falls can have a devastating effect. The group understands this, which is why the members are committed to reducing them. It helps enormously to have support from the Trust Board, which takes a great interest in the work of the group. The whole group was delighted to win the quality champion award, which we believe reflects the hard work from everyone across the Trust over the past few years."

Nurses nurses page 10 and 10 a



ach year UH Bristol celebrates its nurses and midwives with the Nursing and Midwifery Awards. This year, the ceremony was held on 12 May, Florence Nightingale's birthday and the official 'Nurses' Day' which is recognised around the world. Nurses' Day is a chance to celebrate the difference that nursing staff make every day.

During the special event, the Trust acknowledges the vital work of nurses and midwives to the Trust, and its patients. This year hundreds of staff attended the ceremony to watch the awards being presented.

The event is supported by hospital's charity Above & Beyond. Sarah Talbot-Williams, chief executive of the charity, said: "It's very special to read through the nominations every year and also to see the exciting projects put forward for the scholarships that are being awarded. At Above & Beyond, we are all very proud to sponsor the Nursing and Midwifery Awards in recognition of such inspirational people who endlessly strive to affect change and improve services and facilities."

The awards were presented by Bonita Norris, the youngest British woman to reach the summit of Mount Everest at the age of 22 from May 2010 until May 2012. Bonita is a patron for the White Lodge Disability in Surrey and in 2011 and 2012 she led the charity fundraising teams to the summit of Kilimanjaro.

UH Bristol chief nurse Carolyn Mills said: "National Nurses' Day is an occasion to acknowledge the work of nurses in our Trust and around the world who every day go the extra mile for their patients. Nurses' Day is the chance for me to say thank you to them all for the work that they do to make nursing great at UH Bristol. The nominees and winners are individuals and teams who have been recognised for their contribution to delivering outstanding care to patients and their families, delivering initiatives that improve outcomes and providing strong professional leadership for nurses and nursing. These awards recognise excellence and also raise the profile and understanding of how nursing is at the centre of all patient care."



inspirational talk to the Nurses' Day audience

Rising star

WINNER: Imogen O'Toole, senior staff nurse, ward C808, Bristol Heart Institute. Imogen qualified as a registered nurse in February 2015. She has been working on ward C808 and was promoted to a senior staff position in September 2015. Imogen embraces change and introduces new ideas to improve patient experience and safety on the ward. She works enthusiastically to create a positive ward environment for patients and staff.

Highly Commended: Alicia Cohen, ward sister, ward A518, BRI and Jon Greenwood, charge nurse, ward C805, Bristol Heart Institute.



Registered nurse of the year

WINNER: Helen Simmons, sister cardiac surgery theatres, Bristol **Royal Hospital for Children.** Helen's work is of exceptional quality, her knowledge and competence is outstanding and she is always capable of finding solutions to problems. She is very calm and controlled during complex operations. She is a delightful colleague who is approachable, caring, very thoughtful, humble, and honest.

Highly Commended: Karen Barton, ward sister, ward C808, Bristol Heart Institute and Jennie Papps, registered nurse, ward 78, St Michael's Hospital.



Above & Beyond award

WINNER: Bethany Crabb, senior staff nurse, ward D603, Bristol Haematology and Oncology **Centre.** Beth is an outstanding senior staff nurse and fantastic asset to the team. She shows compassion and support to all members of the team including students and newly qualified nurses. She is very approachable and her knowledge of oncology is outstanding.

Highly Commended: Judith Bowell, ward sister, ward A524, BRI and Emily Madge, registered nurse, PICU, Bristol Royal Hospital for Children.



Inspirational leader of the year

WINNER: Helen Bishop, deputy head of nursing, medicine division. Helen is a strong leader within a division that has undergone many changes over the last two years. Throughout ward moves Helen has engaged with staff and patients, to make sure the small details that matter were considered. Helen communicated and engaged with staff so they felt part of the project and worked together to deliver the results.

Highly Commended: Rachel Hughes, clinical operational lead, women's and children's division.



Special Recognition award

WINNER: Elizabeth Brookes, nursing assistant, ward D603, **Bristol Haematology and Oncology Centre.**

Lizzie is a great example of a nursing assistant who goes above and beyond in her role. She is always approachable, helpful and compassionate. Lizzie is an excellent role model and someone who champions excellent standards of patient care, and care delivery.

Team award

WINNER: Acute medical unit nursing team, BRI. The acute medical unit nursing team have faced a large amount of change within the team in the last year yet they continue to perform to a very high standard. They provide excellent care and compassion to their patients.

Highly Commended: Ward 35 nursing team. Bristol Royal Hospital for Children and intensive care unit nursing team, BRI.





Nursing/Midwifery Assistant

WINNER: Zuwane Thomas, nursing assistant, outpatients, Bristol Royal Hospital for Children. Zuwane has been a valuable asset to the outpatient team and has worked within the Trust for nine years. She is motivated, flexible and a dedicated individual who is always willing to support her team members.

Highly Commended: Carol Chivers, nursing assistant, ward A609 STAU, BRI; Laura Newman, nursing assistant, rheumatology centre, BRI; and Gabrielle Rumbold-Russe, nursing assistant, C705, Bristol Heart Institute.



The Davison Nursing and Midwifery Scholarship Award

WINNERS: Emyleah Newbury and Rebecca Morgan.

Rebecca, practice development midwife at St Michael's Hospital, was awarded the scholarship for her project to set up a workshop for women wanting a vaginal birth after caesarean section.

Emyleah, nursing assistant on ward 32 at Bristol children's hospital, was presented with the scholarship for her project to improve breastfeeding promotion and support for mums on ward 32.





£500,000 to raise by summer

bove & Beyond are the local hospital's Acharity and with your donations, fundraising and time we are able to fund above and beyond what the NHS has the means to do in Bristol's city centre hospitals. We're so close to our Golden Gift Appeal target of £6million and hope you can all join us on one last push to raise the final £500,000 by the end of summer.

You've done so much already to help fund gold-standard care, high-tech kit and facilities, enabling us to fund so many vital projects including:

- A new information system in A&E to reduce violence and aggression by better informing patients and carers of their journey and anticipated treatment times.
- Free WiFi in the new BRI development enabling patients to keep in touch with family and friends and the outside world.
- Inspiring artwork in the older people's assessment unit to improve the environment but also to stimulate mobility and encourage conversation.

Play the new Above & Beyond lottery

and you could win up to £25,000! At

go to support Bristol's hospitals so it's

a lottery worth playing. Draws take

place every week and prizes range

from £10, £25 and £1,000 to the

Visit our website for more

information, or pick up a

lottery leaflet from the Above

Monday to Friday, 10am to 5pm.

& Beyond fundraising hub (next to

M&S) inside the BRI welcome centre,

least 50p from every £1 played will

WIN up to £25,000!



summer

✓ A sponsored 500 metre swim

✓ Cycle 500km with friends Challenge someone to do a

sponsored silence for 500 minutes (8.3 hours!)

However, there are still so many essential projects to fund within the final £500,000, for example:



• £50 to burn cancerous binpoint accuracy

Get in touch. Whatever activity you choose to do please get in touch to tell us all about it. We give you support, advice and lots of ideas as well as fundraising materials and t-shirts.

Dribuild name us Charity of the Year

We're delighted that Keynsham-based business, Dribuild, has chosen Above & Beyond as its charity of the year! They have pledged to raise a staggering £50,000 to fund urgent new research into the treatment of Immune Thrombocytopenia (ITP) - a debilitating auto-immune illness whereby platelets are destroyed causing potentially life-threatening bleeding, bruising and severe tiredness.

Don't miss! Dribuild are hosting a Race Day on Tuesday 12 July at Bath Racecourse, open to all. For more information please contact Lorna on 0117 370 0842.

Lido Street **Party and** family swim

One of the oldest surviving Lidos in the UK in Clifton, Bristol is holding a midsummer street party on Saturday 18 June and you're all invited!

Between 12pm-6pm live music and food and drink stalls will line the street outside the Lido and families and adults can swim in the Lido for a small fee, with adults-only swimming in the evening.

Swim tickets can be pre-purchased by visiting our website and entry to the street party is free (BS8 2BJ).

There is also the chance to win fantastic prizes in the Lido's midsummer raffle, including a year's membership to the Lido in Clifton for two people and a massage for a year at the Lido. Raffle tickets cost just £2 and can be purchased on the day or from the Above & Bevond fundraising hub (next to M&S) inside the BRI Welcome Centre, Monday to Friday between 10am and 5pm. See you there!



ver the early May bank holiday weekend 80 cyclists, including hospital staff, patients' family members, teams from businesses in Bristol and inspired individuals, completed a challenging 430km, four day cycle ride from Bristol to Paris to raise £150,000 for a new 3D ultrasound cardiac scanner at Bristol children's hospital.

Join us on next year's Bristol to Paris Cycle Challenge, Friday 28 April to Tuesday 2 May, 2017 and raise money for the major trauma and rehabilitation unit in the children's hospital. Contact Cressida or Lorna on 0117 927 7120.

bumper £25,000!

Above & Beyond is the local hospital's charity fundraising for patients, families and staff in Bristol's city centre hospitals / 0117 927 7120 / www.aboveandbeyond.org.uk



Final spaces on **Bristol Nightrider**



Saturday 25 June (PM) into Sunday 26 June (AM), while Bristol sleeps, you could be pedalling 100km through our wonderful city with 300 other cyclists, knowing that your night owl efforts are making a big difference to patients being cared for in our hospitals. There'll even be a well-earned breakfast and medal waiting for you at the finish line.

Registration: £39. Minimum sponsorship: £175. Please contact Cressida at Above & Beyond on 0117 3700 486. Registration closes 10 June.



Take on the ultimate thrill seeking challenge for Bristol's hospitals – a 15,000 foot skydive on Sunday 25 September with GoSkydive. If you or a team would like to take part in our September Skydive please call Amy on 0117 927 7120.

Run for us



Run for us at the Bristol Half Marathon or the 2017 Bath Half Marathon! Contact Cressida on 0117 3700 486 for more information.

Creating a sustainable pathology service

After years of joint work with North Bristol NHS Trust, the cellular pathology service at UH Bristol moved to Southmead Hospital at the end of April. Marcella Pinto finds out more.

What is cellular pathology?

Cellular pathology is the branch of pathology that involves the study of body organs and tissues and is a vital part of patients' cancer pathway. Cellular pathology determines the cause of many diseases and the effects that they are having on the body. These essential diagnostic services are vital for high quality and effective treatment and also support a number of national screening programmes such as cervical screening.

On 28 April the service and its staff moved from UH Bristol to North Bristol NHS Trust after several years of planning. A few days before the move the division of diagnostic and therapies held a small lunch in the department for all of the staff to thank them for their work at UH Bristol.

Why has the service transferred? The UH Bristol cellular pathology service has transferred to Southmead Hospital to create a joint, sustainable and resilient service for patients now and in the future. The creation of a single pathology service for Bristol was the last outstanding action from the independent review into histopathology services that completed in 2010.

The service and its staff are now housed in a new purpose-built laboratory at Southmead Hospital, with an 'Essential Services Laboratory' (ESL) based at the Bristol Royal Infirmary. This smaller laboratory will fulfil a few essential services including a frozen section service which will perform rapid microscopic analysis of specimens to support clinicians treating cancer patients, and specimen dissection. However, the majority of the work will be done at North Bristol NHS Trust.

Fiona Jones, divisional director of diagnostics and therapies said: "I would like to take the opportunity to thank all of the pathology staff who have now transferred to North Bristol NHS Trust, and whose work is so important to our clinical services here at UH Bristol. The move of the service is a great testament to the strong partnership working between the two organisations and is the culmination of many years of work. Bristol now has a single resilient cellular pathology service, which will continue to provide cellular pathology services to the clinical teams here at UH Bristol. '

What will the move mean for patients and service users? The key thing for patients is the quality and efficiency of testing services rather than their location and they will benefit in the longer term from a more sustainable and resilient service. As before, quality standards are in place to ensure turnaround times for diagnostic tests to ensure patients receive timely and efficient care.

Mark Orrell, head of service for cellular pathology said: "I am pleased that the merging of the cellular pathology departments of North Bristol NHS Trust and UH Bristol into a new, purpose built building at Southmead hospital is now complete. We are looking forward to developing an integrated diagnostic service which will be aiming to reach the highest standards possible, which will ultimately benefit the patients. We are excited and looking forward to settling in to our new department."

New film shows we are proud to care

A new film about the Trust was launched on Nurses' Day on 12 May. The film, called 'We are proud to care', will be used in a wide variety of teaching settings and inductions. It will also feature on the Trust's website and social media, to inspire staff, those who may be thinking of joining the Trust, and give patients an insight into the Trust values. Abigail Evans looks at this exciting development.

The film aims to take people through a 24 hour period from a range of staff perspectives, both clinical and non-clinical, featuring footage from across all Trust sites.

Deputy chief nurse Helen Morgan first came up with the initial idea for the film when attending an induction in 2012. Then in 2014, the opportunity to see the idea through came when a group was established to look at compassion in care.

"I worked closely on the project over many months with colleagues from the Trust and Above & Beyond staff," said Helen. "We wanted to create a film which gave a sense of who and what UH Bristol is, incorporating the fantastic environment, amazing technology and treatment.

"It is, though, mostly about the wide variety of staff who work here, without whom the Trust would not function. They provide skilled, kind and compassionate care and services every day to our patients and their families. Ultimately, we want staff to see the film and feel proud of what they do and to work here at UH Bristol. We also want it to act as a window into the Trust for patients who may be coming here for the first time and may be feeling apprehensive, and for those who are considering coming to work here."

The film was funded by hospital's charity Above & Beyond. Sarah Talbot-Williams, CEO of the charity, said: "We are very committed to supporting our healthcare staff across our hospitals as we know that what is vital to great patient experience is creating a valued and caring workplace where employees are recognised for the tremendous work they do. Above & Beyond is dedicated to helping Bristol's hospitals go that extra mile to achieve this through funding different projects which help promote a real sense of achievement and commitment."

Tara lles, a cardiology matron at the Bristol Heart Institute who features in the film, said: "I feel privileged to have been involved in the making of this film which represents UH Bristol, as I am proud to be a part of this Trust. I love being a nurse and am sure this film will capture the high level of care and compassion demonstrated by all nurses throughout the Trust every day."

Rupert Ward-Lewis of Bee's Knees Media, who filmed and produced the video, said: "I was truly humbled and amazed by what goes into the workings of a hospital. Patients and staff were very generous with their time, considering the potentially stressful situations. I've met truly dedicated and compassionate people along the way, and I hope this film does them justice."

Deborah Lee, chief operating officer and deputy chief executive, said: "I am very aware of the extent to which our staff go the extra mile for patients when they are under our care. However, this film absolutely blew me away! The extent to which the film captures the large and small gestures that staff make in order to put patients at their ease and feel cared for is tremendous. This makes me very proud to be part of the team that generated this film."



The importance of a good night's sleep

The latest UH Bristol 'Bright Idea' aims to help patients sleep better during their stay in hospital. Sabrina Lee finds out more.

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Getting enough rest and sleep is absolutely essential for recovery. However, hospitals run 24 hours a day which means they can often be noisy and some patients find it difficult to sleep during their stay.

Damien Leith, a core medical trainee year 2 (CMT2), knew that something needed to be done.

"Being unwell in an unfamiliar environment and noise from other patients, staff or machines on the ward can make it very difficult to rest," said Damien. "I always thought it would be a good idea to try to improve the quality of sleep for

With the help and funding of the UH Bristol transformation team, the 'Better Night's Sleep' project pilot launched in April and two hundred 'Sleep Well' packs with reusable eye masks and ear plugs have been distributed to patients on the surgical trauma assessment unit (STAU), acute medical unit (AMU) and the older

"This is a fantastic idea and I think it really has the potential to transform the care we provide. It's important to us and patients that their recovery goes as smoothly as possible and getting enough rest is key to that," said Jessica Thornton, senior AMU staff nurse.

Feedback from patients has been positive so far.

"The eye mask and ear plugs make a big difference in helping block out the hospital noise and lights. I'm sure many patients would appreciate these packs," said Karen Pope, an AMU patient at the Bristol Royal Infirmary (BRI).

through UH Bristol's 'Bright Ideas' scheme. Launched in 2009, the scheme was born out of the desire to help staff develop their innovative ideas for new healthcare products or services that will improve patient care and experience.

Damien explained: "I had wanted to do something to try and improve patient's

the Bright Ideas scheme seemed like the perfect opportunity. Through further research we discovered Northampton General Hospital NHS Trust had a similar sleep well campaign for patients. They offered some very helpful advice when we were developing our project. With that shared best practice and the patient feedback that we have been collecting, we're hoping to roll this out successfully throughout the entire Trust."



Damien Leith presents a 'Sleep Well' pack to a patient on the acute medical unit

Moving on and looking forward

Wendy Gregory, governor representing patient and carers aged 16 years and over, will be stepping down as a governor on 31 May after completing three terms. Here Wendy reflects on her time at UH Bristol.

Eight years ago, a group convened at UH Bristol's Trust headquarters as governors of the newly established Foundation Trust. None of us could have foreseen the huge challenges and changes that would face us through different governments, many new health secretaries, multiple new health initiatives and budget-saving schemes.

At the end of May 2016, I will be leaving the Trust having completed three terms of service, and I do so with mixed feelings. I know I am not the only governor who feels that this has been one of the most important roles I have ever undertaken. We have consistently highlighted the patient and carer perspective in our dealings with our staff, executives and non-executive directors, and we have contributed to some significant advances. These are just a few highlights:

The development of **Health Matters events**

We developed these popular, free events for members of the public and staff to help promote the work of the Trust and its services. See www.uhbristol.nhs.uk/healthmatters.

Championing the philosophy of 'walking the patient pathway' When a Trust member raised concerns about the change of pharmacy provision in the Bristol Eve Hospital we were able to flag this with the Trust Board and ensure service improvements were made to meet the needs of this group of patients. In this case, governors highlighted the importance of seeing a service change from the patient's perspective.

Influencing the Trust's corporate quality objectives As governors we play a key role in reflecting on the Trust's achievements and guiding on where we feel more focus is needed. Part of this is providing feedback on the annual quality report and the following year's quality objectives.

Acting as a critical friend to the Trust We regularly challenge performance standards and provide feedback to support improvements in different areas of the hospitals, for example outpatient departments and wards.

Looking forward

There is still much important work to do and we will need the new energy and



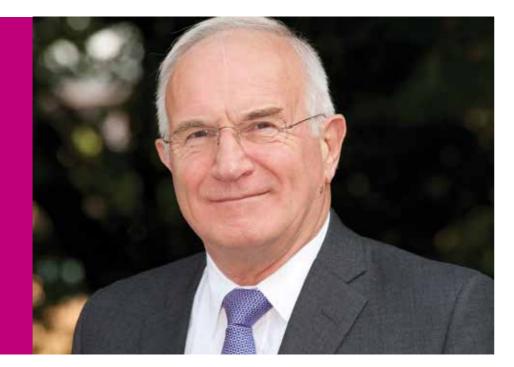
expertise from the incoming governors elected this year. Is it do-able? Most certainly, but only with a huge amount of commitment and hard work. This is an interesting time for the health service, but it will be an exciting and rewarding time for our successors and I wish them well.

To find out who the new governors are visit our website:

Date for the Diary: Annual Members' Meeting

The Trust will hold its annual members' meeting on Thursday 15 September. This event is open to all so please come along to hear about the progress the Trust has made in the last year, and how it continues to work to improve services for patients.

Where? Education and Research Centre, Upper Maudlin Street, Bristol When? 5pm to 7pm with refreshments available from 4pm



From the chairman

W^e made it to spring, that evocative season of promise, renewal and regrowth.

Along with, I guess, everyone involved with the health services, we look to see a relaxation of the pressures on demand that have been with us all for so much longer and more intensely than previous years. Our staff surely hope for and deserve some degree of relaxation after the frantic winter months, but I never see a diminution of effort wherever I go within the Trust.

Elsewhere in these pages is the report of the Nurses' Day award winners; it was a privilege to sit on the panel that judged the outcomes and, from hundreds of worthy recommendations it was very difficult to come to conclusions, as always. People are judged from the comments of their colleagues and, in reading the applications, I was again deeply touched by the very high degree of dedication that was evidenced by this process. My good wishes and thanks go to all of our staff but, for this annual occasion especially, to the award winners and those who were highly commended.

The pressure from increasing demand will continue on health services as a whole and it is clear that there will be an ever-diminishing financial route to solutions. In line with government and departmental requirements all services

must find new ways of working together to bring community wide and holistic solutions to this challenge.

For the Bristol, North Somerset and South Gloucestershire locality there is a new group drawn from local government, commissioners and providers charged with delivering a Five Year Joint Sustainability and Transformation Plan. Our own chief executive has been tasked with leading this group and I hope you will all join me in wishing him well in this vital endeavour.

It is so important to remain optimistic. Our health services are an example of practical responsibility and humanity for the whole world; we should maintain a fierce pride in what has been achieved and a determination to continue to improve.

I was recently clearing up the mess I had caused with a minor building enterprise on the pavement area in front of my home when two ladies engaged me in conversation. The theme quickly turned to their view that our world was an increasingly terrible place and I was struck by their rather gentle gloom. I took my cue from the thoughts that I had been mulling for this article and guietly reminded them that it was just some of the people in the world that try to make it thus. I was able to tell them with great confidence that I meet so many more people on a daily basis at this Trust who by their efforts make the world a much better It is so important to remain optimistic. Our health services are an example of practical responsibility and humanity for the whole world; we should maintain a fierce pride in what has been achieved and a determination to continue to improve.



place for those whom they strive to serve and, in doing so, enhance their own lives. For me, all of our colleagues are winners and deserve the satisfaction of proper pride in what they do.

With all good wishes

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Canon Dr John Savage CBE, chairman



The supportive and palliative care team at UH Bristol provides care and support to people with life-limiting or terminal illnesses. Marcella Pinto went to find out how they have used feedback from families and patient experience to provide a better service to patients across the Trust.

elling somebody that they are reaching the last months of their life, or dying imminently, seems an impossible task, and the manner in which the news is delivered can stay with a patient forever. This is very much in the minds of the supportive and palliative care team, who receive referrals from adult departments across UH Bristol on a daily basis.

"As part of ongoing initiatives to improve end of life care for patients with life-limiting illnesses we conducted an audit in the oncology and hepatology wards and one cardiology ward," said Colette Reid, consultant in palliative medicine. "We examined the notes of patients who were identified as coming to the end of their life for evidence of them having had an honest conversation with their doctor about their illness and life expectancy. We know how important it is that patients with terminal illnesses are detected early, so that professionals can have these conversations with their patients as early as possible in their journey."

This audit showed that of all the patients identified as terminally ill, 76 per cent of them had had a conversation with their doctor about how long they were likely to live: "Combined with this result, we held a focus group at St Peter's Hospice with patients with cancer who had previously used our services here at UH Bristol," explained Rachel McCoubrie, consultant in palliative medicine. "Previous patients fed back in these focus groups that they felt there was sometimes reluctance on behalf of their clinical teams to have these truthful conversations with them. They acknowledged that telling somebody they are dying isn't easy but that they wanted the doctors to take time, to listen to them, not to make them feel rushed, and to remember the person behind the diagnosis."

Open conversations, Rachel explained, are absolutely vital for people who have a life-threatening or potentially terminal illness. "The manner in which these conversations are delivered will stay with a patient forever. During the focus groups we detected that if

patients felt the conversation had been done well, they couldn't necessarily remember the exact words used by their doctors, but they remembered that it was done well. However, if done poorly, they could remember specific phrases that had stuck in their minds."

As a result of both the audit and the focus groups, the team has been delivering communication teaching and training to numerous departments across the hospitals to help them when undertaking these significant conversations with patients.

"We prepared a mixture of teaching sessions in order to reach as many staff as possible" said Colette, "we wanted to use the audit information and feedback from previous patients and embed this into our training. It isn't easy voicing the inevitable to patients but if it is done early, and done well, patients have informed us that they are able to plan better, and make arrangements."

So far the team has reached many teams including the ear, nose and throat medical team, oncology consultants and registrars, speech and language therapists, the cystic fibrosis team, the hepatology team, and cardiology junior doctors. The team plans to reach other teams across the Trust in the coming year. Colette said: "The team hope that through this work, staff will feel better equipped to undertake these conversations, and patients and their families will find the news is broken in a sensitive and timely way."

Jane Palmer

Head of nurse recruitment

When did you join University Hospitals Bristol NHS Foundation Trust (UH Bristol)?

I joined the Bristol and Weston Health Authority (what University Hospitals Bristol NHS Foundation Trust was previously) as a student ophthalmic nurse in 1975 and undertook my training in the Bristol Eye Hospital. I then went on to complete my general nurse training. Most of my career has been in the operating theatres at the Bristol Royal Infirmary and latterly as head of nursing for surgery, head and neck for seven years prior to starting my new role.

How long have you been in your current post?

I began this role in December 2015 and I've been getting involved with all aspects of recruitment and working closely with all the heads of nursing and their recruitment leads across the Trust. I also work closely with the staff in resourcing. I'm currently focusing on soon to be qualified registered nurses (RNs), to ensure they're placed on the right ward or area for them and the service.

What does your role involve?

My role involves working with all the Trust divisions on their nurse recruitment needs, and helping them to sustain a well-supported and happy workforce. Some of the key areas where we currently have some exciting opportunities include working in our centres of excellence such as the Bristol Heart Institute and the Bristol Haematology and Oncology Centre.

I really enjoy being involved in the recruitment of soon to be qualified nurses. It's great to hear about their enthusiasm for the job and the Trust. Part of my role is to enhance links with the University of the West of England and other universities with regards to recruitment at the Trust.

What do you think makes UH Bristol a great place to work?

I've spent most of my professional career working at UH Bristol because it is such a great place to work. The Trust is incredibly friendly and full of good people. All the staff I know work extremely hard to give our patients the best care that they can at every level in the organisation. I know that the Trust values what all of us do every day which is so important.

UH Bristol is open to new ideas and has a flexible approach to solving problems and offers fantastic opportunities; which is why I really enjoy working here.

Can you provide some example of current career opportunities for nurses at UH Bristol?

- Band 5 RNs for trauma and orthopaedic wards A602/A604 at the Bristol Royal Infirmary. Contact Emma Neale on emma.neale@uhbristol.nhs.uk
- Band 5 RNs for care of the elderly wards.

Contact Sally Wilson on sally.wilson@ uhbristol.nhs.uk

 Band 7 sister /charge nurse post on D703 at the Bristol Haematology and Oncology Centre. Contact Hayley Long on hayley.long@uhbristol.nhs.uk

For any nurse recruitment queries, people can always contact me on jane.palmer@uhbristol.nhs.uk.

What is your proudest professional moment?

This was when I secured the head of nursing for surgery substantive role – I had been acting into it for 11 months. I will never forget the phone call from the Trust divisional manager offering me this great opportunity. I have to admit there were a few tears of joy!

My proudest personal moments were the births of my two lovely boys who are now all grown up, living and working in London.

What's one thing that most people don't know about you?

I am sure most people don't know that I'm a qualified British sub aqua sports diver.

For more information on UH Bristol nursing career opportunities, please contact Jane Palmer on jane.palmer@ uhbristol.nhs.uk.