

Voices

The magazine for the UH Bristol community



p10-11

**UH Bristol
leads the way in
tissue donation**



Hello and welcome to the September/October edition of Voices.

Wherever we work in the Trust we are united by our wish to provide the best care possible to patients. On page 5 we look at the enhanced support that the enhanced supervision team is providing to elderly patients who require additional support.

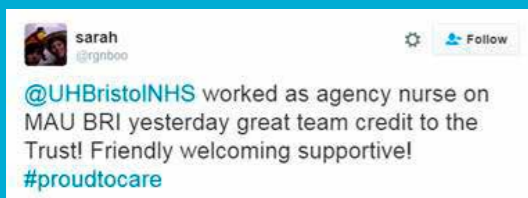
Feedback from patients is essential to improving services and on page 9 we take a look at the results of the National Cancer Patient Experience Survey. We have acted on feedback from previous surveys and the results from the latest one show an improvement in our cancer patients' experience - with more work to do. On page 15 we look at our new way of working with patients and their representatives as we build on our aim to create a real partnership with patients.

Every year thousands of lives are saved thanks to donated organs but you may not realise that donated tissues such as eyes, skin and bones also have the potential to vastly improve the quality of life for many. Here at UH Bristol we are helping to lead the way to ensure that every family who loses a loved one is able to make a personal decision about tissue donation, and potentially help to rebuild the lives of sick or injured people. Find out more on pages 10-11.

I hope you enjoy this edition.

Fiona

Fiona Reid
Head of communications



Chat to us:

@UHBristolNHS

University Hospitals Bristol NHS Foundation Trust

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Children's hospital nurse volunteers for British Paralympic team in Rio

Claire Bohr, paediatric stoma and bowel management nurse, has recently returned from volunteering at the Paralympic Games in Rio.

Claire has worked as a nurse at Bristol children's hospital for over 30 years and was selected as a volunteer carer for the Paralympic athletes after having volunteered with the elite British wheelchair rugby team since the London 2012 Olympics.

"I worked as a carer while in Rio, supporting and assisting the Paralympic athletes during the games. This included assisting with skin care, mobility, dressings, and general accessibility needs like helping them get ready in the morning and prepare themselves for their competitions.

"The Paralympic athletes see themselves as elite athletes first, and disabled second. They have to overcome so many challenges to perform in their chosen sports and it was truly a privilege to be a part of it all."



BHI roof garden gets makeover

The rooftop garden on level 7 of the Bristol Heart Institute has recently been renovated as part of the #mywildcity campaign by Avon Wildlife Trust.

The team from Avon Wildlife Trust and volunteers from Skanska UK worked hard over the three day project to create a peaceful and tranquil retreat for staff to relax in.

Sue Claridge works in the cardiac intensive care unit: "I think it's amazing what they've done with this



space. This garden really means a lot to us as it gives you a place to just stop, think and collect yourself."

In brief

Trust celebrates Sign up to Safety first birthday

In August the Trust celebrated its first birthday since launching its Sign up to Safety campaign.

Sign up to Safety is a national patient safety campaign, launched in 2014. The campaign aims to make the NHS the safest healthcare system in the world.

UH Bristol's commitments are:

Deteriorating patients

Recognising and acting on early signs of patients becoming more unwell, especially from sepsis and acute kidney injury.



Leadership

To ensure that patients, relatives and staff have the opportunity to raise patient safety concerns first-hand.



Safety culture

Developing our safety culture.



Medicines safety

Helping people to take their medicines safely.



Surgical

Making surgery safer.



Healthy city week

Save the date for Healthy City Week, 15 to 22 October 2016, and help us celebrate wellbeing that 'doesn't cost the earth'. More information on our programme of events is on our website www.uhbristol.nhs.uk

BIG Bake

Whip out your whisks and preheat those ovens - Wallace & Gromit's BIG Bake is back!

The Grand Appeal kneads you to get baking and raise some dough for Bristol children's hospital. Whether you are a beginner baker or a pastry pro, anyone can take part and bake a difference!

The money raised will support The Grand Appeal's £1.5million Home from Home Appeal, to fund new family accommodation for Bristol children's hospital. Our children's hospital covers the largest area of any children's hospital in England, with many young patients and their families having to travel large distances for the expert care available.

By throwing a BIG Bake to support the Home from Home Appeal, you will help give these families somewhere to stay just minutes from their child's bedside, so that they can be there for them when they need it most.

Hold a bake off for your ward or department with a prize for the best bake, or just encourage friends and colleagues to come along to your BIG Bake sale and buy a tasty treat. It's all for a cracking cause!



Bristol children's hospital patient Harriet and her brother Sam get baking!

You can hold your BIG Bake any time throughout the year, with free fundraising packs available at www.bigbake.org. You can also download extra ingredients like posters, cake flags, bunting and games to make your BIG Bake even more brilliant.

Bristol children's hospital patient Harriet Thomas, 3, and her brother Sam took part in a special BIG Bake class to launch the campaign. Harriet underwent open heart surgery last year. Mum Debbie said: "I

can't express how terrifying it was to have to leave my daughter in the hands of a surgeon, but the doctors and nurses could not have been more caring and kind. We will be forever grateful to everyone who looked after us, and hope our story inspires others to support Bristol children's hospital."

For your free BIG Bake pack visit www.bigbake.org or pop into The Grand Appeal office.

Individual support for vulnerable patients

As a person gets older, changes in their brain can affect memory and cognition, although the extent of these changes varies from person to person. For patients with cognitive impairments, being in hospital can be a scary, challenging experience. The Division of Medicine has come up with a unique way to provide one-on-one care to patients who require extra time and support, as Marcella Pinto discovered.

The enhanced supervision team (EST) has been introduced in the Division of Medicine in response to the recognition that at any one time, a number of patients on UH Bristol's wards require an enhanced level of supervision and support. The team is currently made up of six nursing assistants, who have received training to provide additional support to particularly vulnerable and anxious patients.

"We introduced the new enhanced supervision team in May. We are very aware that there are increasing numbers of patients who are admitted who have a cognitive impairment in hospital. There is evidence that if you actively engage with people with cognitive impairments and meet their needs on an individual basis then their distress is lessened.

"Every morning the team are allocated patients who require extra support; these patients are usually the elderly and frail. Each team member works with patients either on a one-on-one basis or in a small group," said Helen Bishop, deputy head of nursing for the Division of Medicine.

The EST team will plan the patient's day in response to their individual patients' needs to include social activities such as reading, painting, and playing games, in addition to their physical care and treatment needs. They will find out what they like to eat, what they don't like to eat, what time they like to wake in the morning and more about their usual daily routine which they find comforting.

"The whole aim of this project is about being more creative with how patients

spend their days. Patients are often taken out on walks, and participate in larger group activities with patients on other wards. Over several days each EST nurse is able to build up a strong therapeutic relationship with their patient and their significant carers.

"Since the launch of the team, ward-based staff have highlighted that their wards feel a lot calmer because particularly distressed patients are kept safe, occupied and stimulated. Patients who are being monitored by an EST nurse appear to be a lot more relaxed and ultimately happier. We are delighted with this response so far. There are plans to expand the team, and for other Divisions to emulate what we have done in Medicine."

Helping our hospitals to run efficiently through the winter months

In preparation for improving patient flow ahead of the challenging winter months, UH Bristol will shortly be launching new patient flow trackers in the Bristol Royal Infirmary and the Bristol Heart Institute.

The trackers will provide the clinical teams and flow managers with real-time information about bed requirements for both emergency and elective patients.



Consultant Andrew Hollowood explained: "This is a really exciting improvement for both patients and staff. For the first time, our teams have access to real-time information that will help them identify

and measure critical factors that impact patient flow. We are extremely grateful to the hospital's charity Above & Beyond for supporting us with this improvement for our patients and staff."

My favourite part of my role: Hannah Jones, activities assistant

"I started my role at the beginning of May. I work full time, looking after patients who are particularly vulnerable and are usually unsettled on the wards. I look after patients for numerous days so that we can build up a good relationship. I enjoy my role because I have the time to dedicate to patients who need extra support, it is wonderful to see the difference that the activities we do with the patients can make."





Key duties of governors

Our Foundation Trust governors have two key duties – firstly to hold our non-executive directors to account, and secondly to engage the members of the community who they represent, who in turn hold them to account. Two governors reflect on how they fulfil these elements of their governor role.

The task of holding non-executive directors to account requires governors to scrutinise how well the Trust Board is working, and ask the non-executive directors for assurance that the Board is performing effectively.

There are a number of ways in which governors do this. Clive Hamilton, a public governor representing North Somerset members, said: “We have enhanced our ability to hold non-executives to account effectively with regular informal meetings between the governors and the non-executives. Governors also receive reports from the non-executive director chairs of key Trust committees at our governor focus groups. These are effective platforms for us to be able to develop questions

which challenge the non-executive directors where necessary.” While non-executive directors are accountable to the governors, in turn governors are accountable to the Foundation Trust members who elected them, of which there are around 21,000 – including a staff contingent of around 10,000.

Ray Phipps, a patient governor, said that one of the most important aspects of the governors’ work is engaging with members, gathering feedback from patients and using this to improve the care the Trust provides. “Contact with family, our social circle and special events organised to meet with the public all provide information on the care needs and experience of our patients. These range from general health to critical

needs and we use this information to help develop care and identify matters that need to be improved.”

There are a number of opportunities throughout the year to meet the governors. Health Matters events, looking at different service or strategic elements of the Trust, are held throughout the year – the next event, on back care, will be held on 23 November 2016 in the Education & Research Centre from 4pm to 5.30pm.

For more details about any of our events, or to get in touch with any of our governors, please email foundationtrust@uhbristol.nhs.uk, call 0117 342 3764 or visit www.uhbristol.nhs.uk/healthmatters

Come and talk to us

As part of Healthy City Week, we’ll be hosting a membership and governor information stand in the BHI atrium on Friday 21 October. Governors will be on hand from 10am to 4pm to discuss any queries you may have.

Your new governors

In June 2016, following governor elections, we welcomed 12 new governors to the Council of Governors. The full list is here: www.uhbristol.nhs.uk/governors. We will be running another governor election campaign in spring 2017—look out for more information in the next edition of Voices and on our website.

Governors going green

Staff governors Karen Stevens and Andy Coles-Driver were delighted to be among a number of UH Bristol staff to receive a Green Impact Award in July 2016 for their work to promote sustainability within the Trust.

Karen received her award in recognition of her work to save the Trust money as a result of returning pharmaceutical waste. Andy Coles-Driver, a fellow staff governor and member of the pharmacy team, also won an award with his team from pharmacy informatics, as a result of looking at how cumulative small changes can make a big difference.

From the chairman



It seems that whenever I sit down to write my piece for Voices the effect of the year’s seasons immediately enters my thinking. This, of course, should not be surprising; the changing climate has a direct effect on so much of the work of an acute hospital. We all know that winter is always a particular challenge and a time of great threat to our ability to maintain the standards required of us.

The Trust, by the efforts of its staff, has achieved great things since the start of the year. We are reaching the trajectories set for our return to compliance and I know that this is the result of so many of our staff going far beyond the call of duty. In spite of inevitable difficulties that arise from time to time the Trust is highly successful and we should rejoice in that. There is hard evidence for such a claim.

However, the real and wider challenge is that to which I referred in the last edition; the creation of a Sustainability and Transformation Plan that will be a shared responsibility for all of our health partners and that will more effectively provide the help and support for those who need it. We are proud that our own chief executive is leading this challenge and lucky that we have such a capability within the organisation. There must be a resultant change in the allocation of all of the funds within the current rather fragmented health and social care systems. As part of

this, money spent in large acute care establishments will need to find its way to being used differently and in situations closer to people’s homes.

I believe that this metamorphosis can be achieved and that it is the only way to avoid a very serious disaster in the near future. However, it is a sad truth that we in these small islands are not good at local and internal co-operation. It is rare, usually only in time of war, that achievement of a greater good finally overcomes local and personal agendas let alone the often-conflicting and confusing aims of the government and its agencies. I will not be popular with those higher bodies in pointedly making the observation that such change, such building of bridges to literally facilitate transfer, will require an additional immediate investment. That funding will not be found in pockets of reserves held in individual delivery agencies; all are clearly strapped for cash. There is a ticket price to pay for the allegorical journey to the sunlit uplands of tomorrow and it is a cruel and vain delusion that ignores this simple truth.

A common plan, jointly funded, a high degree of reciprocity and a humble commitment to a greater vision but with an enabling kick-start will bring the desired results. The potential return on such investment is priceless.

The Trust, by the efforts of its staff, has achieved great things since the start of the year. We are reaching the trajectories set for our return to compliance and I know that this is the result of so many of our staff going far beyond the call of duty.

With hope

John Savage, chairman

Having the confidence to speak out

The Bridge is the Sexual Assault Referral Centre (SARC) for Avon and Somerset. It offers medical care, emotional and psychological support, and practical help to anyone who has been raped or sexually assaulted. In the last year, the service has seen a marked increase in self-referrals but the team believes there is more work to do to encourage people to come forward after an assault, as Marcella Pinto discovered.

In England and Wales, approximately 85,000 women and 12,000 men are sexually assaulted each year. Based at the Central Health Clinic in Bristol, the Bridge provides support to anybody living in South Gloucestershire, Bristol, Somerset, North Somerset, and B&NES. The service is open 24 hours a day, 365 days of the year.

The Bridge can help with medical care, including sexual health and emergency contraception advice, practical help, counselling and psychological support to anybody over the age of 11, after rape or sexual assault. Anyone who reports an incident to the police will be referred there, other professionals can also refer to the service, and the public can contact them directly.

"A key aim for us this year was to increase the number of self-referrals that we receive," explained Louise Davey from the Bridge. "We want to reach those people who, for whatever reason, choose not to speak to the police. We want them to know that we are here for them. We knew that the way to do this was to increase the confidence that members of the public, and professionals, have in our service. This includes the public having confidence

that we provide a discreet, confidential and specialised service, and professionals having assurance that we provide useful resources and advice when they need it."

One way of increasing public and professional trust in their service was to improve the resources available. Last year they launched a new website, www.thebridgecanhelp.org.uk, which provides advice and guidance to anybody who has been raped or sexually assaulted recently or in the past. Since April this year 2,527 people have used their new website, a significant increase on the 1,895 people who accessed the old website in the same period last year.

Since the launch of the website, and through working with local organisations such as the nearby universities, health care providers and charities, the Bridge has seen a significant increase in the proportion of self-referrals: "Last year, 34% of our referrals came to us directly rather than via the police, compared to 44% this year," said Louise. "The number of referrals from the police has also increased so we know that we are reaching the people who would not otherwise get support. This reflects

the work that we have been doing, but we are very aware that there is still so much to be done. It is essential that we work collaboratively with other services to ensure that needs are identified and the right referrals are made for each individual.

"Many myths still exist around sexual assault. The message we want to get out is that it doesn't matter who you are, we will listen to you and support you to make choices. Anybody at any time can be sexually assaulted and we will always be here to provide support to people when they need it."

You can contact the Bridge:

Call: 0117 342 6999
Email: ubh-tr.thebridgecanhelp@nhs.net
Visit: www.thebridgecanhelp.org.uk

If you are a professional interested in attending The Bridge conference, information and a booking form are available on their website at www.thebridgecanhelp.org.uk/resources/professionals/



The Bridge team with Louise, third from right

Improving cancer patients' experience

Teresa Veale, haematology clinical nurse specialist with Bristol Haematology and Oncology patient, Peter Long

Each year, over 70,000 patients in England take part in the National Cancer Patient Experience Survey (NCPES). The results from the 2015 survey, released in July 2016, indicate an improvement in the experiences of cancer patients treated at UH Bristol with more work to do. Heather Price met Ruth Hendy, lead cancer nurse, and found out more.

Delivering best care, ensuring that our patients receive excellent quality treatment at the appropriate time and that their experience is a good one, is one of UH Bristol's aims. Feedback from patients is essential to improving services.

"We have an encouraging set of results this year," said Ruth. "The 2014 NCPES results were disappointing and indicated that the Trust had improvements to make. A lot of work has been done over the last couple of years to improve the experience of our cancer patients, and the latest results reflect this."

The 2015 NCPES contained 50 questions about each patient's entire care pathway – from seeing their GP before diagnosis, through their treatment in hospital, and on to the support they received after treatment. The sample comprised inpatient and day case adult patients with a primary diagnosis of cancer who were discharged from our care between 1 April and 30 June

2015. The survey reflects their experiences across all UH Bristol services – not just the Bristol Haematology and Oncology Centre.

One encouraging result, with a score of 93% – above the national average – was the patient being given the name of the clinical nurse specialist (CNS) supporting them throughout their treatment. "We believe this result is directly linked to our recent efforts," said Ruth. "We know that when patients feel supported by their CNS, their experience is better overall. The Trust has invested in more cancer CNSs, and we've worked hard to make sure patients know who their CNS is, how to contact them, and they have a clear understanding of what they can expect from them." Two cancer teams in particular were rated very highly by patients in the survey – haematology and gynae-oncology. The survey also identified areas where UH Bristol can make further improvements, such as giving GPs more information about treatment, and providing patients

with a care plan. "These lower scores are linked to ongoing work that is due to be completed, so we could expect to see improved scores next year," said Ruth. This includes the implementation of a 'recovery package' for patients at the end of treatment, which includes: a detailed treatment summary for their GP; referral to health and wellbeing education sessions; and a 'holistic needs assessment', where their needs are assessed in a structured way before leaving hospital, and then nurse and patient agree a plan of care to meet those needs. "It's reassuring that we had recognised these areas and are already in the process of addressing them," said Ruth. "We still have progress to make, but it's clear we are going in the right direction."

The following results have improved the most since 2014:

- the patient found it easy to contact their CNS ▲18%
- the patient felt involved in decisions about care and treatment ▲15%
- there were enough nurses on duty ▲14%
- the patient was given written information about the type of cancer they had ▲10%
- the patient was given information on the impact on work/education ▲10%

Becky Russell (L), senior staff nurse on ITU with Marion Jones (R), hospital development nurse practitioner for NHS Blood and Transplant

Transforming patients' lives thanks to tissue donation

Every year thousands of lives are saved thanks to donated organs. But you may not realise that donated tissues such as eyes, skin and bones also have the potential to vastly improve the quality of life for so many. UH Bristol is helping to lead the way to ensure that every family who loses a loved one at the Trust is able to make the personal decision about tissue donation, and potentially make the generous decision to rebuild the lives of sick or injured people. Marcella Pinto found out more.

In November 2015 UH Bristol was designated as an Alliance site. This accreditation means that every single adult patient who dies at UH Bristol is referred to NHS Blood and Transplant so that the potential for tissue donation may be explored. Fewer missed opportunities to donate tissue equate to more lives transformed thanks to life-changing tissue transplants.

Tissues include eyes, bones, tendons, heart valves, and skin. Many people do not know about the potential for tissue donation to change lives, but one tissue donor could enhance the lives of more than 50 recipients.

Marion Jones, hospital development nurse practitioner at NHS Blood and Transplant, began working in conjunction with UH Bristol at the end of 2014. "When I began working with UH Bristol I looked at tissue referral rates in the Bristol Royal Infirmary (BRI).

There was a steady flow of eye donations only. It was my task to look at how tissue donation could be increased and improved. Donated tissue such as skin, bones and eyes can save or dramatically improve the lives of many people suffering from illness or injury."

A snapshot of documentation was analysed and it became clear to Marion that the level of tissue retrieval was low because staff were unaware of how and where to refer patients. Analysis showed that in a five month period in 2015, 25 patients who were registered on the organ donor register were not identified, and therefore their tissues were not donated.

Marion approached UH Bristol's deputy chief nurse Helen Morgan to discuss a proposal for UH Bristol to become an Alliance site hospital for tissue donation. Alongside the clinical lead for organ donation for UH Bristol, Dr Fran O'Higgins, Rebecca Russell, senior staff nurse, Sophia Bloor, lead nurse for palliative care, and the Trust's IM&T (information, management and technology) team, Marion set about producing a simple online system that has now become part of the end of life care process for every adult patient.

"It isn't a nurse's job to decide whether or not their patient is eligible for tissue donation," said Marion, "with the required referral, every adult patient who dies is referred to NHS Blood and Transplant's facility in Liverpool via the Trust's new online system, not just those on the organ register. This facility is staffed by specially trained nurses who contact families after death to discuss whether they would consider donation."

Families are given a leaflet and informed that a specialist nurse may contact them to talk to them about tissue donation. If families consent to their loved one becoming a donor then the retrieval of tissues is performed by NHS Blood and Transplant staff at UH Bristol.

"We are currently in the process of training two of NHS Blood and Transplant's four Bristol-based eye retrievers to be able to remove multi-tissues, including skin and heart valves," said Marion.

"Ultimately we rely on, and are very grateful for, the generosity of our donors and their families. Thanks to them we are able to provide skin, tendons, bone

and other tissues to repair or rebuild the bodies, faces and lives of thousands of severely injured people."

Since becoming an Alliance centre and developing the online referral system, there has been a steady increase in the number of referrals to NHS Blood and Transplant, which Marion hopes, in time, will result in more donations.

Facts about organ donation

- letting your family know your organ donation decision will make it much easier for them to support what you want
- every day across the UK, around three people who could have benefited from a transplant die because there aren't enough organ donors.

Facts about tissue donation

- almost anybody can be considered as a tissue donor
- there is a national shortage of corneas for transplant surgery
- eyes can be donated between the ages of three and 85 years of age. There is no age restriction for donating bone and skin, but heart valves and tendons can only be donated up to the age of 60.

Register here: www.organdonation.nhs.uk or by calling: 0300 123 23 23

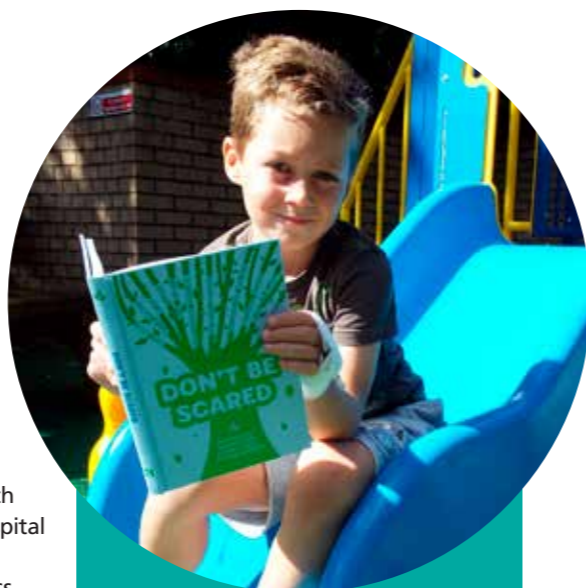
Children's anthology on sale to raise money for Bristol children's hospital

Fizzing with imagination and a child's sense of wonder, dare-devil sheep and huffy cats, *Don't Be Scared*, produced by Bristol hospital charity Above & Beyond is now available for all to enjoy.

Some of our best-loved writers and illustrators including Jacqueline Wilson, Julia Donaldson, Raymond Briggs and Quentin Blake share the magic and fears of

childhood in a collection of 22 short stories and poems.

Sales of the book will raise funds for Bristol Royal Hospital for Children, which has 4,000 admissions each year. The hospital is crucial not only to those living in and around Bristol but also to children across the region as it's the major paediatric trauma centre for the South West.



Featuring...

Limited print run – buy your copy today!

Don't Be Scared can be purchased at the Above & Beyond Fundraising Hub located in-between WHSmith and M&S in the BRI welcome centre, Monday to Friday, 10am to 5pm, or online via www.redcliffepress.co.uk/products-page

Nicola Bayley
Ellen Beier
Quentin Blake
Herbie Brennan
Raymond Briggs
Mike Brownlow
Romi Caron
Emma Chichester Clark
Wendy Cope
Roald Dahl
Kate Daubney
Julia Donaldson

Carol Ann Duffy
Rose Fay
Anne Fine
Michael Foreman
Anthony Horowitz
Michael Jecks
Andrew Joyce
Satoshi Kitamura
Penelope Lively
Jacqui Mair
Alexander McCall Smith
Geraldine McCaughrean

Michael Morpurgo
Caro Ness
Hiawyn Oram
Michael Rosen
Tony Ross
Adrienne Salgado
Nick Sharratt
Yuliya Somina
Sam Usher
Martin Waddell
Sholto Walker
Jacqueline Wilson



2017 challenges

Do something fun and different next year and join Above & Beyond at the Piple Woods Mud Bath, the Two Tunnels Railway Race, the Jurassic Coast Trek or a 140km Velothon cycle through Wales. You could even hold a bake sale or quiz to raise money for Bristol's hospitals.

Visit our website today www.aboveandbeyond.org.uk/events

Thank you for your golden gifts!

Our three year £6m Golden Gift Appeal is nearly at an end and we want to thank everyone who donated or offered time to help raise millions to transform the Bristol Royal Infirmary (BRI) and Bristol Haematology & Oncology Centre (BHOC).

Here's just a small selection of the projects you have helped make happen:

- Bone Marrow Transplant Unit at the BHOC so that seriously ill patients can have all their treatment under one roof
- More single rooms providing greater privacy and dignity for patients
- Innovative, world class monitoring system in the BRI intensive care unit
- Inspiring artwork in the older people's assessment unit.



You've made a lasting difference, thank you. Read the full list of projects here www.aboveandbeyond.org.uk

Christmas in Lapland

Tuesday 20 December



Journey through a magical snowy forest under a canopy of stars while you sip sparkling drinks under the northern lights! As you feast on a fabulous three-course meal from Hype's award winning caterers, festive characters will take you on a magical journey through Lapland. The party continues with a live band, DJ and photo booth. Open to all - friends and family groups, businesses and clubs.

Tickets are £40 plus vat and can be booked by calling Hype on 0117 971 0320 or email info@hypeagency.co.uk and quote 'Above & Beyond' or visit www.hypeagency.co.uk/bristol.

16 year old celebrates 10 year anniversary of brain tumour surgery



When Tom (right) was just five years old, he had to undergo major surgery to have a life-threatening brain tumour the size of an egg removed. Now 16 years old he is on a mission to raise £5,000 for Bristol Royal Hospital for Children. Fundraising events throughout the year have included a 7.5 mile walk, a Year 7 Valentine's disco, charity football match and summer fete. For more information please visit: www.gofundme.com/ng63y8kp.

Christmas Star Concert

Thursday 15 December, 7.30pm to 9pm
Bristol Cathedral

Join Above & Beyond for a magical evening of music and traditional carols in the stunning surroundings of Bristol Cathedral, featuring the Bristol Salvation Army Citadel Brass Band, The Above & Beyond Singers and school choirs.

Tickets: £10 adult, £20 family, £5 children. All tickets sold raise money towards Bristol city centre hospitals. To purchase please call Above & Beyond on 0117 3700 485, email amy.barnard-smith@aboveandbeyond.org.uk or pop into the Above & Beyond Fundraising Hub located in-between WHSmith and M&S in the BRI, Monday to Friday, 10am to 5pm.

We bid farewell to the Old Building



In recent years, many of our hospitals have been transformed into modern 21st century facilities, but a service of thanksgiving for the life of the Bristol Royal Infirmary (BRI) Old Building, and the decommissioning of the All Saints Chapel was an opportunity to remember and celebrate the hospital that has provided 280 years of care to patients in Bristol. Hayley Billington attended the celebration service.

The BRI Old Building has long been one of the oldest working hospitals in the UK, opening to patients on 20 May, 1737. The chapel was built and began its services 22 years later.

Led by Right Reverend Dr Lee Rayfield, Suffragan Bishop of Swindon, the service commemorated the Old Building and the significance of the chapel as a sanctuary for staff, patients and relatives who have faced difficult times at the hospital.

The service welcomed members of the public and staff, past and present. As the congregation joined together in prayer, Reverend Tom Douglas gave thanks to all those who had played a vital part in the hospital for generations: "We thank you for all those men and women who have worked in this building; for all those working in the healing professions. We pray for all those who work behind the scenes supporting them, cleaning, cooking, portering, in administration and

many more whose presence is invisible, but invaluable."

Lynette Jones, honorary secretary of The Nurses' League, whose members trained at the BRI School of Nursing said: "Those of us members who attended the decommissioning service found it quite emotional and for us it marked the end of an era. We were very sad when we heard some years ago about the proposed closure of the building, and thus the chapel, as we have always held a service there as part of our annual reunion day. The building will always hold a special place in our hearts."

Although it was a sad occasion for some, staff from different departments enjoyed sharing their fondest memories of their time working in one of the UK's oldest hospitals. Graham Weeks, post room supervisor, is the longest serving staff member in the Old Building. Beginning his career in 1973, Graham has many

memories of the hospital from over the years and, like many others, will clearly miss working in the building a great deal.

The service provided a fitting send-off for the Old Building and chapel, ending with a beautiful rendition of 'Like an Eagle' sung by the Above & Beyond charity choir. The charity has generously supported the redevelopment of the BRI and Bristol Haematology and Oncology Centre.



Robert Woolley, chief executive and John Savage, chairman at the chapel decommissioning and service of thanksgiving to the Old Building



Improving care with people power

At UH Bristol we strive to build a partnership with patients, families and carers. The Involvement Network is a step in this journey as it provides an important way of connecting to a diverse group of people who can provide unique insight into our services which affect patients. The network is working with us to update the Carer's Strategy. Abigail Evans found out more.

Tony Watkin is the Trust's lead in public and patient involvement, making him responsible for recruiting people to take part in this new initiative.

"People don't have to have a pre-existing strong connection with the Trust," he explained. "They could be a member of the Trust or a volunteer, but equally they could be somebody in an elder Asian community group, a member of a mosque, a young person. We're looking to create a network of people and communities who draw on their experiences of healthcare to work with us as partners for improvement."

When Tony is given a topic which the Trust would like input on, such as the Carer's Strategy, he creates a brief

to be sent out to the network.

"This lets people know the area we're looking at and the questions we'd like answered. We'll ask people to consider these over the next four or five weeks. They could do this at home or with a colleague over a cup of tea, or discuss it when they're next in their community group."

People can respond either over the phone or in writing, making it accessible to those who may not always be able to attend organised events. Once these thoughts and suggestions have been gathered, a meeting will also take place to discuss these further with the people responsible for developing them.

"We held an event in September with Carole Tookey, head of nursing for the Division of Medicine, who looks after the Carer's Strategy," said Tony. "We also had some members of the Carer's Forum and, along with those from the Involvement Network who wished to attend, we discussed what people have sent to us, as well as how carers can work as partners for the care of patients." Tony will draw out key points of learning which will inform the final policy.

Jim Houlihan, who participates in the Involvement Network, said: "I'm a member of the Trust so found out about this Involvement Network through being involved in other engagement activities. I see my role as being able to bring a lay perspective and look at things from an outsider's point of view.

"With regards to the Carer's Strategy I had a couple of questions to put forward around what lessons were learnt from the previous strategy, but overall I feel fortunate to live in a society where, despite hard-pressed public resources, we think so carefully about these kinds of issues."

If you are interested in joining the Involvement Network, please contact tony.watkin@uhbristol.nhs.uk

Melanie Fewkes

Associate director of occupational health, safety & wellbeing



When did you join UH Bristol?

I started my nursing career at this Trust in January 1987 as an enrolled nurse and then later becoming a registered nurse. In the 29 years I've been employed at UH Bristol I have occupied several nursing roles, changing my vocation from nursing to health and safety in the year 2000. Since joining the health and safety team my role has transformed and grown as the focus has shifted from health and safety to also include the vital area of staff wellbeing.

How long have you been in your current post?

My current role came about two years ago when the Human Resources (HR) team had a restructure, which meant I retained my management role in the safety department and added the departments of Avon Partnership Occupational NHS Health Service and Wellbeing.

What does your role involve?

I manage the three work streams; occupational health, health and safety, and wellbeing, as part of the corporate HR community. Our aim is to encourage staff to stay well, give them the support they need to do this and to protect them from harm at work. All employees working for the Trust are entitled to a number of services and initiatives such as our pregnancy workshops, staff network

around cancer (SNAC), in-house counselling service for work related stress, and physio direct for musculoskeletal problems.

As part of the safety department, we will go to wards and departments to work with managers and colleagues which is my favourite part of the role. Most of the team have previously worked as nurses or allied health professionals, so that experience helps when working in clinical areas.

What major projects are you currently working on?

In March of this year the Trust was set a Commissioning for Quality and Innovation (CQUIN) target which covers three indicators closely linked to staff health and wellbeing. This is the first target of its kind, and is hugely encouraging because we know that the quality of our services are directly linked to staff health and wellbeing.

When promoting staff health and wellbeing and the initiatives we have to support staff, one of our biggest challenges is communication, for example when ensuring all our staff take advantage of the free flu vaccine available to them at the Trust. It is important that we protect our staff, patients and visitors from flu and the most effective way of doing that is to

encourage as many staff as possible to have the flu jab. This year, as a small thank you, every staff member who does have the jab will be given a free hot drink from either Costa or the DeliMarché onsite. The flu campaign launches on 3 October 2016; virtual calendars with all clinic dates will be available on Connect (our intranet site).

What do you enjoy about your role?

I love helping staff and in turn helping our patients. With the advice we can provide staff about health and safety and wellness, such as how to work safely with hazardous chemicals, first aid incidents, staying well in pregnancy, and completing health and safety risk assessments, we aim to prevent staff, patients and visitors from harm.

What are you looking forward to most when you retire?

Although I will miss many of my colleagues dearly, I certainly look forward to the alarm clock not going off. My husband and I own a motorhome, used for travelling the country and going abroad, and I have just purchased a bike with plans to do a road trip around Europe in my gap year. I'm also very excited about becoming a grandparent for the first time and look forward to more time doing the things I enjoy most; travelling and socialising with family and friends.

The patient flow co-ordinators, with Adam



Going with the flow

Described as 'unsung heroes' in the nomination for their Non-Clinical Team of the Year 2015 title, the patient flow co-ordinators of Bristol Royal Infirmary's emergency department are an important part of the administrative cog that keeps this busy department moving. Steph Feldwicke talked to one of the team, Adam Pearson, to find out more about their role.

Making sure that patients have timely access to our services is a key priority for UH Bristol, and patient flow co-ordinators, like Adam, play a crucial role in making that happen.

Adam and his colleagues are admin and clerical staff and work closely with the Emergency Department (ED) clinical teams, and the clinical site management team in this particularly busy and challenging department, and are the first point of contact with ambulance crews. Their task is to direct arriving patients to the senior nurse for clinical triage.

He said: "We complete a wide range of admin and receive patients who arrive by ambulance, ensuring they're directed to the right place, with the right paperwork ready for the clinicians. This involves scanning notes into the patient administration system, logging the patient's details and

allocated clinical space on Medway, and ensuring all the correct ID labels and case notes are available for the clinical teams.

"We're in close contact with the entire department: receptionists, consultants, the nursing team and we're also there to greet patients' friends and relatives. Sometimes patients can go straight to the acute medical unit or other clinical area, or will need transferring quickly to other hospitals, so we have regular contact with lots of different people."

Adam was a waiting list co-ordinator in the Bristol Royal Infirmary for two years. He then joined the patient flow co-ordinator (PFC) team in ED after three years working for an airline. He and his colleagues work 12-hour shifts and are available at all times to provide 24/7 cover. The team is supervised by Liz Williams, ED reception and performance co-ordinator,

and managed by deputy specialty manager for non-elective services, Heather Shepherd.

As well as making sure patients' arrival in ED is efficient, the flow team also work with the hospitals' transport team and discharge lounge to allow patients who have recovered and are fit enough to go home leave hospital with everything they need.

Adam said: "I really enjoy working in ED; it's a fast-paced environment and can get very busy. You need to be very confident, quick and decisive to work here, but there's a huge amount of job satisfaction. I've worked at this Trust for six years so I know a lot of people and understand the hospitals' processes, which really helps – because one day is never the same as the next."

New options for patients as Duchenne trial starts at Bristol children's hospital

Clinical research provides us with improved practice and treatments for the future while also providing benefits for the patients who choose to get involved. Bristol Royal Hospital for Children has started to run its first Duchenne muscular dystrophy trial – a step that has been welcomed. Sabrina Lee found out more.

With the support of Action Duchenne (a non-profit organisation promoting awareness), experts and local people living with the condition, vital research into new treatments for Duchenne muscular dystrophy (DMD) will now take place at Bristol children's hospital.

Duchenne muscular dystrophy is the most common fatal genetic disorder diagnosed in childhood, affecting approximately one in every 3,500 live male births. In the UK, around 2,500 people have the condition. It primarily affects boys and results in progressive loss of strength in the muscles due to a genetic mutation.

Dr Anirban Majumdar, consultant paediatric neurologist and lead of the Bristol Neuromuscular Research Group based at the children's hospital, is the principal investigator for the trial: "Over the last year, we have worked very hard to secure funding and the infrastructure necessary to be able to deliver some of the important research that is currently being done. It is thanks to the support of Action Duchenne and UH Bristol that we have been able to add a specialist neuromuscular paediatric

physiotherapist to our team, one of the first post of its kind in the UK, to increase our ability to carry out this trial."

Natalie Fineman, lead nurse for the Trust's Women's and Children's research unit said: "We are delighted to

have been able to deliver, and support our patients and their families, during this important clinical trial in Bristol. A special thank you must go to Catherine White, clinical research nurse, who led the coordination and planned the patient care for this trial."

Patients and their families welcome this trial as it will increase access to innovative drugs and treatments for those living in the South West and South Wales regions.

Diana Ribeiro, CEO of Action Duchenne, said: "Action Duchenne is delighted that Bristol is emerging as a new trial centre, and that local families and young people living with Duchenne will soon be able to access investigational compounds that could impact the quality of their lives."

Action Duchenne, with the support of the Duchenne community, funds international state-of-the-art research in Duchenne, raises awareness of the condition and offers an online community for patients and parents.



(L-R) Camilla Ballin, clinical research nurse, Dr Kayal Vijayakumar, consultant paediatric neurology, and Beverly Toms, specialist neuromuscular paediatric physiotherapist

Innovative virtual ward service expands capacity and provides new option for patients

University Hospitals Bristol and ORLA Healthcare are working in partnership to offer the first "virtual ward" service for patients in Bristol. Sabrina Lee found out how patients are benefiting from the new service.

An exciting new service has arrived at the Trust and it is allowing patients to be treated in the comfort of their home or where they live.

The ORLA "virtual ward" is part of a range of services offered by the Trust and is now available to adult patients who fulfil the eligibility criteria. At the moment patients from the emergency department (ED) and the wards of the Trust are being accepted into the ORLA service and treated at home.

ORLA staff deliver the same level of high quality and safe care to patients in their own homes as patients receive in the Trust's inpatient wards, and that includes using the latest patient monitoring technology.

Available 24/7, 365 days a year, the ORLA "virtual ward" service is consultant-led and is an extension of the clinical services offered by the Trust. Patients remain NHS patients throughout their journey despite being cared for by ORLA Healthcare staff in their own homes. Patients remain in the care of the ORLA service until they are discharged by the ORLA consultant on behalf of the Trust back to the care of their GP.

Dr Peter Collins, clinical chair for the Division of Medicine at UH Bristol said: "We are thrilled to be working with ORLA to deliver innovative high quality



care to patients in their homes. While this type of "virtual ward service" isn't right for everyone, it can help some people recover more quickly and avoid a lengthy stay in hospital."

Carol Grimsdale, ORLA clinical services manager, said: "It's been fantastic working with Trust staff as they really have embraced the concept of managing acute patients at home. We have collaborated together to offer this great service to Bristol patients through the Trust, and the feedback from patients has also all been very positive."

The Trust and ORLA are currently planning to expand the service beyond Bristol.

To find out more, please visit www.uhbristol.nhs.uk/patients-and-visitors/orla-virtual-ward

What do patients think?

Philip Wren, from Brislington, is one of the first people in Bristol to have been admitted to the new ORLA virtual ward at the Trust.

Philip had cellulitis, a bacterial skin infection, and was looked after at his home by the ORLA team for 10 days before he was discharged.

He said: "The care I received from the ORLA team was absolutely wonderful. They were professional, friendly and always ready to answer any questions I had. It was great that I could receive the same high quality treatment as in the Bristol Royal Infirmary in the comfort of my own home."



The ORLA team on the acute medical unit

Come back to caring



Geraldine Hotham, midwife at St Michael's Hospital, returned to nursing after a break from her nursing career

Are you a previously registered nurse or midwife? Has your registration lapsed? You may now have the opportunity to return to practice after completing a combination of classroom and placement based learning.

If you are a nurse or midwife with an expired Nursing and Midwifery Council (NMC) PIN who is inspired by the idea of returning to nursing or midwifery, think about undertaking a Return to Practice programme, and come back to caring at UH Bristol.

The opportunity is available three times a year, in January, May, and October. The course is a combination of academic teaching at the University of the West of England (UWE), placement based learning at UH Bristol, and self-directed learning and studying.

"Candidates are supported to re-join the NMC register, and will have a designated mentor to support learning and development. If successful, they will be offered an interview for a job at the end of the programme in their area of choice, if there is a vacancy," said Jane Palmer, head of nurse recruitment.

Geraldine Hotham took up the opportunity at UH Bristol and is now settled in to a midwifery role at St Michael's Hospital. You could do the same.

"I initially trained as a direct entry midwife in Hull, and qualified in 2005. I worked at the Maternity Hospital in Hull, and stopped working as a midwife in 2008," explained Geraldine.

"Because of family responsibilities, shift work became difficult and so I moved on to a different career. Then, more recently,

I decided to look into the programme. I was looking for a fresh start, and felt that I had found a good match for me in Bristol. When I was shown around the wards everybody was very welcoming, and I enjoyed the busy atmosphere.

"I completed 450 placement hours, which is equivalent to three months' full time work. I chose to do this full time so that I could complete it as quickly as possible, and get back to full time work. In addition there were six days at UWE, and an assignment to complete.

"I would definitely advise other people to take part in the programme and return to nursing. You need to be focused, but I have not had a minute's regret. My favourite part about being a midwife is seeing a woman becoming confident in herself and her ability as a mother. It is a privilege to be able to witness this."

Are you interested in returning to nursing?

Please contact jane.palmer@uhbristol.nhs.uk for more information, or for an informal chat.

Candidates can apply for the programme via www.jobs.nhs.uk

