Their Royal Highnesses The Prince of Wales and The Duchess of Cornwall visited Chelsea and Westminster Hospital on Tuesday 18 March to open Chelsea Children's Hospital.

Chelsea Children's Hospital is a state-of-the-art facility dedicated to providing high-quality healthcare for children and young people in a safe and child friendly environment. It is one of London's largest providers of children's services, caring for more than 75,000 children a year as inpatients, outpatients and as day cases.

Chelsea Children's Hospital also provides a number of specialist paediatric services including a designated children's accident and emergency department, the only children's burns service in London for children that require care in a high dependency setting and a Neonatal Intensive Care Unit that provides the highest level of specialised medical and surgical neonatal care to support very premature and unwell babies.

Chelsea Children's Hospital is also home to the UK's only da Vinci robot dedicated to babies and children. The state-of-the-art surgical robot, which cost more than £1 million, was donated by the Children's Hospital Trust Fund through their Pluto Appeal.

During their visit Their Royal Highnesses were given a tour of the new paediatric facilities. They were shown around by Mr Simon Eccles (Clinical Lead for Paediatric Services) and Vanessa Sloane (Lead Nurse for Paediatrics).

Their Royal Highnesses met nurses and patients on Saturn Ward (day case surgery) and were able to try their hand at robotic surgery on a mannequin under the watchful eye of Chelsea Children's Hospital's team of paediatric surgeons including Mr Munther Haddad, Mr Simon Clarke and Mr Nick Madden.

The Royal couple then spent some time on Mercury Ward (surgical inpatient) meeting staff, including Ward Sister Sarah Chin, patients and their families. Their Royal Highnesses were also shown the play room where they met one of our play specialists, Gitta Nuchan, and watched a music session arranged by the Chelsea and Westminster Health Charity.

After leaving the wards Their Royal Highnesses met staff from paediatric services that they couldn't visit on their tour, including paediatric A&E and Mars Ward (paediatric burns unit).

The Royal couple then visited the Chelsea Community Hospital School, taking part in a primary school class and meeting children taking a secondary school lesson. They were shown the school by Jeanette Steele who was presented with her OBE by Prince Charles a few years ago.

After the tour Their Royal Highnesses met staff from paediatric services that they couldn't visit on their tour, including paediatric A&E and Mars Ward (paediatric burns unit).

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The Duchess of Cornwall was presented with a bouquet of flowers by two and half year old Coco Barnwell, a former patient of Mr Simon Eccles. Two current patients, Osama El Helimi and Mohammed Ahmed, presented Their Royal Highnesses with certificates to commend their training on the surgical robot.

A commemorative pull out of the Royal visit is included in this issue of Trust News—please see pp8–9.
Tony’s View by Tony Bell, Chief Executive

I have to start by mentioning our Royal visit. On Tuesday 18 March we were delighted to welcome Their Royal Highnesses The Prince of Wales and The Duchess of Cornwall to the Trust to open Chelsea Children’s Hospital.

Their Royal Highnesses were given a tour of Chelsea Children’s Hospital and then unveiled the plaque at a ceremony in the academic atrium. It was an honour to be able to be part of the tour and show them around our fantastic paediatric facilities.

This Royal visit acknowledges the importance of consolidating general and specialist paediatric care under one roof. Looking forward, the model of acute care for children will be purpose built facilities with the right support in place for families and clinicians. We have made significant steps to achieving this with Chelsea Children’s Hospital but there is still work to be done and I look forward to seeing the next stages of this process come to life.

Thank you to the staff who helped to organise the visit and ensure the tour went by so smoothly and a special thanks to all the staff who kept the wards running as normal for patients during the tour. I received a wonderful letter thanking us for the visit and asking me to pass on Their Royal Highnesses’ gratitude to all involved.

We have received feedback on two surveys over the last few weeks—the NHS staff survey and CQC inpatient survey. Overall the feedback from both surveys has been very positive but we have plenty of areas to work on. Teams will be taking away the feedback and acting to make improvements for patients and staff.

Quality for patients and staff is the number one priority for this organisation and we will continue to act on feedback to grow and improve.

We will also be asking patients and staff for feedback about our new wellbeing strategy over the coming months.

We are adopting the principles of what is known as an accountable care organisation (ACO), which means not only integrating care but also planning care for the population, with the aim of improving their health.

We are meeting regularly with GPs and community trust providers, sharing data to understand how to anticipate and meet the needs of the population.

Our aim is to keep people well for longer and improve the effectiveness of what we do as health professionals. A central part of this is the concept of self-care management and putting patients at the centre of decision making and information.

There will be an opportunity to find out more about our wellbeing strategy at our open day which is taking place on Saturday 14 June. There is more information about our open day on p6. I look forward to seeing you there.

St Dunstan’s Clinic moves

The Paediatric Physiotherapist team work off site for Chelsea and Westminster as part of the Cheyne Child Development service at St Dunstan’s clinic, serving the patients of Hammersmith and Fulham in their local community.

Their well-established team and clinic are leaving their home at St Dunstan’s to move to a brand new centre based in White City.

St Dunstan’s Clinic has been a wonderful multidisciplinary centre for children with complex and multiple, often life-long conditions and will be fondly remembered by all who have worked or visited there.

Typhoon Haiyan fundraising

Thank you to everyone who helped with the fund raising charity events for the victims of Typhoon Haiyan in the Philippines.

On the 8 November 2013 the strongest typhoon ever hit the Philippines and on the 25 November nurses from Chelsea and Westminster held a fund raising event on the ground floor atrium and raised £595.00 in aid of the Typhoon Haiyan victims.

In January the cheque was presented by Cielito Caneja (Respiratory Clinical Nurse Specialist) and Roel Caneja (Cardiology Specialist) and Roel Caneja (Cardiology Specialist) to Guba Doce Pares at Chelsea and Westminster for their visit. On Tuesday 18 March we were delighted to welcome Their Royal Highnesses The Prince of Wales and The Duchess of Cornwall officially open the new Chelsea Children’s Hospital.

We say & write lots about #NHSChangeDay - but do you know how the #birthcentre was at @ChelwestFT?
11:05am • 24 Mar 2014

You can read the report online at www.cqc.org.uk/hospitalmonitoring
Day in the life... Rachel Floyd
Play Specialist

8am
My day begins with setting up the playrooms, cleaning all the toys and equipment and making sure they are safe and ready for children and their families. I work in a team of Play Specialists and Play Support Workers—we are mainly based in our own specific areas, I am based in paediatric outpatients but sometimes I cross over onto the wards if I am needed.

8:30am
Once the areas are all set up I have a handover with the nursing team about the patients we will see that day—this is particularly important if I am working on the wards as it helps me to be aware of the reason for a child’s admission, relevant medical history and any safeguarding concerns we should know about.

I then assess whom I need to prioritise to see that day. In the children’s outpatients department I prioritise my time with children attending clinics that might require a procedure, for example fracture clinic where children might be having a cast put on, taken off, or pins removed. I work with a whole range of age groups from babies to adolescents in outpatients and I need to adapt the way I explain procedures depending on a child’s level of understanding.

9am
When I get to clinic I introduce myself to patients and their families, I make quick assessments as to which children might require my support. Clinics where children might require a blood test are also a priority area as this procedure can cause heightened anxiety in children and young people. I explain to children what they can expect and where possible provide realistic options for how the test is carried out to help the child maintain some feeling of control. I provide distraction techniques for children and young people who find it useful and also post-procedural play for some children as a way of helping the child make sense of what has happened after a procedure. We are not only supporting the child but the whole family so I also make sure I am aware of siblings who might be feeling confused about what is going on.

To become a Play Specialist you need to complete the two year foundation degree in Healthcare Play Specialism. This course covers child development, the impact of illness and being in hospital on children and young people and how to support children through various procedures. The course also teaches about communicating in an appropriate way with children with a range of complex needs and creating the best environment for young patients.

1pm
Over the lunchtime period there can be meetings to attend, for example the weekly safeguarding meeting which is important to attend to hear feedback or provide input. There are also various multidisciplinary team meetings where it is valuable to have a play specialist represented, they are an opportunity to sit down with everyone who is caring for a patient and as play specialists we can offer a voice for that child.

2pm
In the afternoon I might be assigned to certain clinics or if I am based on the ward I prioritise one-to-one play sessions particularly for children who are staying in for over a week. I put together a plan to support that child’s development and where possible encourage group play to promote social interaction. I work alongside members of the multidisciplinary team when putting together these plans, for example the physiotherapists may make recommendations that a baby plays in a certain position to strengthen specific muscles.

3pm
Our team works alongside the hospital school to discuss patient needs with teachers. In school hours we work with patients who are not attending school, outside of school hours we organise activities in the playrooms and we often arrange for entertainers such as magicians to visit the children and their families, providing a welcome distraction from the ward routines.

4pm
Sometimes I can be called to the ward at the last minute to support a child who is about to have a cannula inserted or help prepare a child for theatre so I can never predict where my day will take me.

5pm
I spend the end of the day on our computer system writing up notes and recommending interventions which can help the children I work with. When patients are transferred to other areas the notes on our system help the next play specialist make sure they are prepared. I also document all of my patients’ progress and keep their play plans up-to-date.

I enjoy the challenge of meeting children and quickly developing a rapport. It is rewarding to be in a position to support children and young people on their journey through hospital and witness a child overcoming an anxiety or developing coping strategies that can help them.

I have learnt that playing is the most natural way that a child communicates and makes sense of what is going on in their world and by providing opportunities for children to play we are helping that child feel more comfortable, reducing stress and thereby aiding recovery.
We currently have one of the best performing Emergency Departments in England, with 98% of patients being seen and treated within the four hour national target. We want the environment in which patients are seen to be of the same high standard as the care we provide our patients.

There has been a significant increase in activity over the last few years, with 4% average growth since 2002/3. In 2012/13 we treated 112,000 people in a department designed for 60,000 patients a year.

We receive positive patient experience results with 98% of patients ‘extremely likely’ or ‘likely’ to recommend their care but space constraints have impacted on their experience, privacy and dignity.

Therefore, in line with a range of investments to develop Chelsea and Westminster Hospital, we are investing more than £10m to redevelop our Emergency Department. This will provide more space, more staff and state-of-the-art equipment to treat emergency patients.

Our current environment was designed 20 years ago, so this expansion will accommodate the increasing numbers of people using our service. It will also help support the implementation of Shaping a healthier future which will centralise the number of Emergency Departments across North West London.

In support of this major redevelopment, Chelsea and Westminster Health Charity is launching a £600,000 fundraising appeal. Bringing together leading artists such as Brian Eno, Andy Goldsworthy and Richard Woods, the appeal will enable us to create an environment that minimises anxiety.

This will include adaptable lighting, bespoke sound programmes, flexible distractions for ceilings and walls.

We will also be able support clinical innovations such as apps, devices and services that improve the experience of being in the Emergency Department for patients, families, visitors and for staff.

**Design of the ED**

The design of our new Emergency Department is fundamental to the success of the service and brings together hospital staff, architects, designers and the team at Chelsea and Westminster Health Charity.

We want the design to:

- Improve privacy and dignity
- Create a better space for patients, families, visitors and staff
- Allow for CT scanning within the department which will mean quicker diagnosis
- Introduce two dedicated mental health cubicles
- Be patient focused, integrating a new way-finding system
- Incorporate a dedicated baby feeding cubicle in the children’s department
- Provide calming distractions to alleviate stress

Tony Bell (Chief Executive, Chelsea and Westminster Hospital) said: “The renovation of the Emergency Department is highly significant—not just for the hospital but for our community.

“For many people the Emergency Department will be their first contact with our services. It’s not just important about where people wait, but how they feel about the areas in which they’re treated. And how well the environment works for the doctors and nurses in being able to get the patient through that in the most efficient and effective way possible.

“So, what we’re about to do has had a lot of staff and charity involvement in the design. We want to create an entirely different feel for that process of coming in as an emergency admission patient.”

**Timescales**

The project will evolve over time but the current proposed overall timescales are detailed as follows:

- May–June 2014: Relocation of departments currently in the development footprint (eg Antenatal, Children’s Outpatients)
- Summer 2014: Construction work commences over 6 phases
- Spring 2015: Completion of phase 1, opening up the new adult majors, observation unit, imaging and fracture clinic
- Early 2016: Completion of works

While the building works are taking place there will be a contact number for staff to call if the building work is causing significant disruption to care. To donate to Chelsea and Westminster Health Charity’s ED appeal:

- visit www.justgiving.com/CWAE
- text CWAE70 and the amount you want to donate to 70070 (for example, CWAE70 £10)

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**Strategy update**

**Integration with West Middlesex University Hospital**

We continue to work with West Middlesex University Hospital NHS Trust to examine the potential to integrate services. There is an agreed schedule and process—including the boards of each Trust, our Council of Governors, local commissioners, NHS regulators and others—geared towards assessing the potential to create a unified Trust.

This process to assess the viability of integrating the two Trusts is on track and the next stage is for the Chelsea and Westminster Hospital Board to consider the outline business case.
New state-of-the-art Birth Centre open

The birth centre offers spa-like facilities. Midwives feel the delivery changes are mainly due to the new environment. The centre has bespoke illustrations commissioned by the Chelsea and Westminster Health Charity.

On Wednesday 5 February Chelsea and Westminster Hospital opened a new, bespoke, midwife-led birth centre and witnessed its first delivery when Baby Matteo was born at 1:59pm to parents Danielle Warshawer and Chris Grass.

Mum Danielle said: “It doesn’t feel like a hospital and lives up to its name as a specialist birthing centre. The care was exceptional—the attention to detail and feel of love and care was instantly calming. It made the birthing experience surprisingly a pleasure.”

The birth centre offers spa-like facilities within the safety of the hospital and comprises seven rooms, four with birthing pools and mood lighting. The team in the new unit includes midwives and doula (non-medical caregivers) who together support women through birth.

During its first month of opening the new unit has already had an impact on deliveries. The transfer rate (from the Birth Unit to labour ward) is down to 19% from 32% and the instrumental delivery rate is down to 6% from 18%.

Midwives feel the delivery changes are mainly due to the new environment. The centre has bespoke illustrations commissioned by the Chelsea and Westminster Health Charity.

Illustrator Laurie Hastings was selected from over 90 applicants to design illustrations throughout the centre.

Anna Mattheas (Visual Arts Officer for the charity) said: “Laurie’s designs were inspired by the aromatherapy oils often used to help women during labour.

“Artworks in the birthing rooms integrate the plants that produce these oils and the rooms are named accordingly.

“We believe that these illustrations complement the relaxing and ‘spa-like’ feel of the unit for patients.”

Vivien Bell, Head of Midwifery, said: “We respect each mother’s decision when it comes to how they wish to give birth and as such provide women with a full range of options for their birth plan—from homebirth all the way through to a consultant led delivery.

“We’ve designed the midwife-led birth centre to make mothers feel as relaxed and comfortable as possible.

“It is the newest and most state-of-the-art unit in London and we encourage women to view the environment and meet our experienced midwifery team.”

The Birth Centre has since seen its 100th baby and Baby Cochrane was born on 23 March to proud dad and mum Thomas and Emma Cochrane.

Dean Street Express sees more than 6,500 patients during first six weeks

Dean Street Express, the Trust’s new sexual health clinic, has seen 6,523 between its opening on the 6 February and 27 March.

Dean Street Express is a new walk-in clinic offering fast, free and confidential sexual health screening (STI/STD tests) six days a week for patients who have no symptoms but need a check-up. It’s based at 34 Dean Street, Soho in central London and sends patients test results by text message usually within six hours of their check-up. It uses the latest technology to make screening even easier than before, with touchscreen check-in, self-taken tests and fast bloods with their friendly team.

The service is designed to make having a routine sexual health check-up as easy as possible.

Dean Street Express is the first clinic in the world to use a GeneXpert Infinity diagnostic system. The HIV test result is usually given during the visit and other results by text message. To date, 98% of patients have rated the service at Dean Express as “excellent”.

If patients do need treatment they can see the expert team at 56 Dean Street. If one of the tests is positive for an infection patients will be sent a link with information on how to book in for treatment—usually within 24 hours.

Pioneering palliative care guidance published by neonatal team

Chelsea and Westminster Hospital has published the first ever guidance of its kind to support staff caring for very young babies with life limiting conditions who need palliative or end of life care.

Practical guidance for the management of palliative care on neonatal units was formally launched on Thursday 13 February in the Academic Atrium on the Lower Ground Floor.

Despite advances in neonatal medicine, sadly many babies will suffer from conditions that mean they will not survive longer than months, days or a few minutes. The purpose of the guidance is to help clinical staff deliver care for babies that is of the highest quality, and provide families with the support they require.

Caroline Friel, mother of baby Brigid, said: “Nothing can prepare you for the death of a child. It is vital that the staff who are caring for our babies and supporting us through this difficult time are trained and equipped to do so with an understanding of the procedures and protocols that will allow our babies to die with dignity, while ensuring that they do not suffer unnecessarily. It is also important that this is done within a framework that allows the families to have their concerns heard and their wishes considered.”

The guidance was developed by a group of staff from our neonatal team that included doctors, a nurse, a psychologist and a hospital chaplain. It has been endorsed by the Royal College of Paediatrics and Child Health after several rounds of stakeholder consultation, including key charitable organisations and professionals within the field of neonatal palliative care.

The development of the guidance was funded by the Department of Health and the production and publication was supported by the Chelsea and Westminster Health Charity. The guidance includes a foreword by Sir Bruce Keogh (National Medical Director for NHS England) and real-life experiences of families whose babies have received such care.

Alexandra Mancini (Lead Nurse for Complex, Palliative and Bereavement Care) said: “The guidance is the first of its kind in that it is based upon a systematic review of available evidence.

In developing the guidance it became clear to us that there was a need for more evidence to guide best practice and we hope that this will be addressed with more funding for research into this area of neonatal care. We would like to thank all those who have contributed and commented in the making of this document.”

Hard copies of the guidance will be sent to all neonatal units across the country and it will also be available to download, along with all of the supporting documents, from the Royal College of Paediatrics and Child Health website.

It was also available from a number of charity and stakeholder websites including Bliss, British Association of Perinatal Medicine, Child Bereavement UK, The Multiple Births Foundation, Stillbirth and Neonatal Death Charity and Together for Short Lives.
The Chelsea and Westminster Hospital open day is back for 2014. It is taking place on the slightly later date of Saturday 14 June between 11am–3pm at the main hospital site on the Fulham Road.

We are thrilled to announce that actress Joanna Lumley will be attending to open the event and have a look around the hospital and the stands.

The event will feature all the popular stands and behind-the-scenes tours from previous years. The theme of this year’s event is “Keeping you well”. We will be asking for your opinions on our public health strategy and offering advice on keeping healthy and well and out of hospital. Our healthcare professionals will once again be running health MOTs where you can get a quick and easy check-up and advice on how to lead a healthy lifestyle, with everything from help to stop smoking to tips on eating well.

You will be able to look around the state-of-the-art Chelsea Children’s hospital, which was opened by Their Royal Highnesses the Prince of Wales and The Duchess of Cornwall. The Teddy Bear Hospital will be back once again and there will be many other fun and educational activities for children and families to enjoy.

Our charities will also have their own stands where you can find out about their latest fundraising campaigns and the cutting edge equipment for which they are raising money.

We will also have a variety of other stands from sexual health to maternity and pharmacy to end of life care so there really is something for everyone. Our back office teams will also be around during our open day and will be showing you what it takes to keep such a huge and busy organisation running 24/7.

Our Foundation Trust Governors will be available throughout the day to speak to you about your local hospital and the work they do representing patients and our local community. If you are interested in becoming more involved and finding out more about Chelsea and Westminster Hospital you can sign up to become a Foundation Trust member. There will be goody bags for everyone who signs up on the day.

We look forward to seeing you at our open day. For further information please visit www.chelwest.nhs.uk/openday.

Absolutely fabulous guest confirmed for Open Day 2014

The judges have been busy reading through the 500 entries received for this year’s Star Awards and the successful shortlisted nominees are listed below.

The winners will be announced at the Star Awards ceremony on Thursday 15 May at Chelsea Football Club. The Star Awards are kindly supported by Chelsea and Westminster Health Charity.

Singer and Strictly Come Dancing finalist Sophie Ellis-Bextor will be presenting this year’s awards to all of our worthy winners. The winners will be published in the next issue of Trust News and on our website after the ceremony.

Star Awards 2014

Healthcare Assistant of the Year
• Sophie Byrne
• Adnan Maan
• Thomas Sorrell

Midwife of the Year
• Wendy Allen
• Lucinda Jenkins
• Becky Scott

Senior Nurse of the Year
• Anne Hickey
• Vanessa Sloane
• Rosemarie Turner

Nurse of the Year
• Laurie Brown
• Karen Simpson
• Leila Uweziyamana

Doctor of the Year
• Dr Nigel Davies
• Dr Attah Ocholi
• Dr Margaret Phelan

Diagnostic and Allied Health Professional of the Year
• Lucia Berry
• Russ Hargreaves
• Sheena Patel

Researcher of the Year
• Vanessa Marvin
• Tom Newsom-Davis
• Kieran O’Dea

Facilities Services Star of the Year
• Mahmoud Aboudoukhane
• Ricky Carrea
• Renier Erasmus

Support Services Star of the Year
• Rosalind Casaclang
• Muriel Dorginac
• Lisa Fuller

Manager of the Year
• Anne Dede
• Ally Maffey
• Harriet Reid

Team of the Year
• Birth Centre Midwife team
• Decontamination team
• Medical Day Unit team

Volunteer of the Year
• Diana Davies
• Juliet Fellows
• Amanda Pitt-Brown

Educator/Mentor of the Year
• Michelle Hayes
• Anna Hutchings
• Jackie Tyler

Outstanding Leadership Award
• Jane Hocking
• Ifeoma Oniri
• Karen Robertson

Improving the Patient Experience Award
• Grant Mallon
• Alex Mancini
• Jenna Thomas and Michelle Ross

Special awards
• Patient Choice Award
• Council of Governors’ Special Award
• Chief Executive’s Special Award

Outstanding Leadership Award
• Jane Hocking
• Ifeoma Oniri
• Karen Robertson

Improving the Patient Experience Award
• Grant Mallon
• Alex Mancini
• Jenna Thomas and Michelle Ross

Special awards
• Patient Choice Award
• Council of Governors’ Special Award
• Chief Executive’s Special Award
Foundation Trust members’ news

March Council of Governors meeting

New Chairman Sir Tom Hughes-Hallett presided over his first Council of Governors meeting with interesting discussions about a range of topics including strategy, business planning, staffing and end of life care.

Sir Tom said: “I really enjoyed chairing my first Governors meeting, which is an important opportunity for our membership to commend success but also challenge the organisation on what they feel needs to improve at the hospital for the benefit of staff and patients.

“While I have met many individual members of the governing body it was great to see the collective group and get a sense of what are the ‘burning issues’ for local people so that we can make sure they are addressed fully at these meetings.

“Importantly, the quarterly Council of Governors meetings are held in public and I encourage anyone who’d like to see how the council operates on their behalf to do so.”

The next meeting is Thursday 15 May from 4–6pm in the Gleeson Lecture Theatre.

Medicine for Members sessions

Since the last edition of Trust News we have held two of these important events on the topics of the Emergency Department redevelopment and End of Life Care.

The sessions are open to all members and led by lead doctors and nurses for both these services.

People in attendance at both events commented on how ‘extremely likely’ they were to recommend attending again.

The session about the Emergency Department redevelopment talked through the service’s expansion plans in terms of increasing the space for the Emergency Department, improving privacy and dignity, investing in more imaging equipment so if a patient needs a diagnostic scan they can have one quickly, and how Chelsea and Westminster Health Charity are helping us invest in artwork to make the environment as calm as possible, improving the patient experience.

The End of Life Care session talked through how we deliver palliative care to people at the end of their life and our strategic plans to make sure that the service helps patients, friends and family at this difficult time get the support they need.

The next Medicine for Members event takes place on 22 May in the postgraduate lecture theatre—look for details in the Members e-news or on our website www.chelwest.nhs.uk/m4m.

Governors’ induction

This month has seen the induction of new governors, which we hope will provide them with the information and skills required to represent your views as part of our Council of Governors. Six governors were in attendance and listened to a range of talks from executive directors at the Trust spanning values, strategy, how the hospital works, finance and performance.

The induction was Sir Tom Hughes-Hallett’s first as Chairman. At the meeting he gave his feedback on what he has learned about the Trust—success, opportunities and challenge—in his eight weeks in the role.

Sir Tom said: “Governors are a vital part of the organisation, providing feedback from staff, patients and the public on what the hospital does well and what needs to improve, acting as a ‘critical friend’ to make sure that Chelsea and Westminster Hospital meets the needs of those it serves.

“Each governor brings something different and unique to the Council and it was fantastic seeing in action what skills and contribution those in attendance would be able to provide staff at the hospital as their expertise will no doubt help the organisation improve in ways they may not have thought of before, which is what the outside perspective can sometimes provide.

“I’d also like to thank governor Melvyn Jeremiah for providing his feedback on what it really means to be part of the Council of Governors, thanks to his many years of contribution, and what opportunities are available to our new group in respect of adding value.”

Trevor and colleagues walk for Borne

Security Manager Trevor Post will soon be changing out of his suit and into his shorts and trainers as he takes on the huge challenge of walking 100km from London to Brighton on 21 June 2014.

Trevor, and the colleagues he has persuaded to join him, are undertaking this challenge to raise money for Chelsea and Westminster Health Charity’s Borne initiative, which holds a special place in Trevor’s heart. This is not the first time Trevor has taken on this challenge. Last year, he successfully completed the walk in 30 hours, and raised an amazing £16,000.

This year, Trevor is aiming to cross the finish line in 21.5 hours and raise even more, with the help of his teammates. Please show your support for Trevor and his team with this inspiring challenge— you can help by texting TREV21 £5 (for example) to 70070 or online at www.justgiving.com/Trevor-Post.

Find out more about how Borne is helping mothers and babies at Chelsea and Westminster at www.borne.org.uk.

Important visit from the Department of Health

Earl Howe (Parliamentary Under Secretary of State for Quality at the Department of Health) visited the Emergency Department last month to see how our A&E department have delivered care to patients during winter, which is often a challenging time for hospitals.

The Trust has, for the second year in a row, performed the best in the country in respect of the national four hour A&E target, consistently seeing 95% of patients within this timescale compared to the national target of 95%.

Earl Howe was taken on a tour of the current adult and children’s Emergency Department facilities, led by clinical lead Dr Patrick Roberts, service manager Sarah Buckland and nurse Hilary Donnellan.

Following this, the team talked through plans for the £10 million Emergency Department redevelopment and expansion.

David Radbourne (Chief Operating Officer) said: “We are extremely proud of our emergency service and as we consistently meet national targets we are pleased to share actions we’ve taken that have helped us achieve this goal.

“This has included providing an excellent GP-led urgent care service for those that visit the Emergency Department but not in an emergency.

“They work closely with acute medicine colleagues to make sure that patients receive quick and decisive assessments should a patient need to stay over four hours but may not need to stay as an inpatient.

“The team also work to improve discharge out of hospital so that someone who has had to stay can get back to the comfort of their home without unnecessary delay.

“We all know that, while the standard of clinical care we provide in this service is first class, the environment itself is not.

“The investment being made to improve and expand the department will bring the patient experience up to the same high standards as the quality and safety of care we provide.”
Chelsea Children’s Hospital

About Chelsea Children’s Hospital

Chelsea Children’s Hospital is a state-of-the-art facility dedicated to providing high quality healthcare for children and young people in a safe and child-friendly environment.

We are one of London’s largest providers of children’s services, caring for more than 75,000 children a year as inpatients, outpatients and as day cases. We also provide specialist services in our designated children’s accident and emergency department.

Chelsea Children’s Hospital comprises:

• Saturn Ward—a 12-bed day case unit
• Apollo Ward—a 12-bed high dependency unit
• Mars Ward—a 6-bed dedicated children’s burns unit
• Jupiter Ward—a 12-bed adolescent ward
• Neptune Ward—a 16-bed medical inpatient ward
• Mercury Ward—a 24-bed surgical and gastroenterology ward
• An operating theatre suite consisting of four modern theatres

The children’s hospital is staffed by:

• 130 nurses
• 62 doctors
• 10 play specialists

The children’s hospital is also linked to the Chelsea Community Hospital School.

We have invested in providing the new hospital facility, with £1.2 million raised by Chelsea and Westminster Health Charity. Locating all of our children’s facilities together on one floor makes it easier for patients, families and visitors to access our services.

Work continues to complete the redevelopment of our children’s services with the new children’s outpatient department opening on the 1st Floor.

The Royal opening—18 March 2014

Their Royal Highnesses The Prince of Wales and The Duchess of Cornwall visited Chelsea and Westminster Hospital NHS Foundation Trust to open Chelsea Children’s Hospital.

Their Royal Highnesses were given a tour of the new paediatric facilities including Saturn Ward (day case surgery), paediatric theatres, Mercury Ward (inpatients) and the Chelsea Community Hospital School. While visiting theatres Their Royal Highnesses were able to try their hand at robotic surgery on a mannequin under the watchful eye of Chelsea Children’s Hospital’s team of paediatric surgeons.

After the tour Their Royal Highnesses joined guests for a ceremony where they unveiled the plaque to commemorate the opening.
**Research, innovation and education**

**Healthy volunteers participating in clinical research**

Chelsea and Westminster Hospital undertakes a variety of clinical research studies. While most of our studies involve patients, others require the participation of healthy volunteers.

Healthy volunteers provide researchers with crucial data because their health information can be used as a comparison. When developing a new technique such as a blood test or an imaging device, we need clinical research volunteers to help define the limits of ‘normal’. The purpose of research with healthy volunteers is to develop new knowledge, not to provide a young adult study to define the limits of ‘normal’. The purpose of research with healthy volunteers is to develop new knowledge, not to provide evidence that preterm birth is associated with differences in the amount of body fat and muscle, blood pressure and other markers of metabolism in adulthood. We are conducting a study to confirm whether the differences are a genuine effect of being born preterm.

### What does the study involve for the volunteer?

- Participation involves a single visit to Chelsea and Westminster Hospital during which time healthy volunteers will have their height, weight and blood pressure recorded, in addition to having an MRI scan and providing a sample of blood and urine.
- How long has it been running at Chelsea and Westminster? The study began in September 2013 and will run until August 2015.
- What is your role and who else within the Trust is involved in running the study? I am the study coordinator and responsible for recruitment of participants, sample collection and data analysis. The project is supervised by the Principal Investigator for the study, Professor Neena Modi.

### What is the aim of the study and what does this involve for patients?

- More than 16,000 patients are admitted to Chelsea and Westminster Hospital each year, around three quarters of patients report having at least one episode of “the worst pain imaginable” and up to half of these patients can develop chronic pain. We think that the burn causes tissue damage which provokes pain—however, our understanding of this is limited.
- The pain associated with these injuries impacts on patients in many different ways including impaired functional rehabilitation, psychological wellbeing as well as social re-integration.
- Despite some therapeutic progress, burn injury-associated pain is a common experience for patients and often difficult to treat.
- The study is recruiting healthy volunteers in order to examine the response in the tissues to a reversible minor burn, with the aim of allowing us to understand how this occurs in severe burn injury and impacts on pain.
- The majority of babies are born at full term (between 37-42 weeks gestation) but 1 in 10 babies is born too early. There is evidence that preterm birth is associated with differences in the amount of body fat and muscle, blood pressure and other markers of metabolism in adulthood. We are conducting a study to confirm whether the differences are a genuine effect of being born preterm.

### Who is involved in the coordination of this study?

- The Principal investigator is Dr Carsten Bantel (Head of Acute Pain Service and Anaesthesia Consultant at Chelsea and Westminster Hospital).

### What do volunteers think?

- "This project has been running since September 2012 and will be completed by June 2014.
- The pain associated with these injuries impacts on patients in many different ways including impaired functional rehabilitation, psychological wellbeing as well as social re-integration.
- Despite some therapeutic progress, burn injury-associated pain is a common experience for patients and often difficult to treat.
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### What is the aim of the study?

- The study was instigated by Dr Francesca Neuberger and 100% said they gained knowledge about the organisation. It has promoted good practice and has allowed staff to assume ownership and take appropriate action where standards of care are unacceptable.

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**Patient Voice project**

The Patient Voice project aims to enable junior doctors to reflect on their own practice by listening to direct feedback from their patients. The project was designed in response to the Francis Report to promote high-quality, patient-centred care which aligns with our values. This original idea was conceived by Dr Julia Hillier (Post Graduate Clinical Tutor) and formulated with Carol Dale (Patient & Staff Experience Lead); it was supported by Ms Zoë Penn, (Medical Director) and instigated by Dr Francesca Neuberger (Medical Education Fellow) with support from Dr Sam Barclay (Foundation Year 2 doctor).

Junior doctors receive a lot of feedback from seniors and from peers but very little from the patients themselves. This project teaches junior doctors about the importance of patient experience which can otherwise be challenging in busy clinical settings. It also promotes discussion about how we can support doctors to improve patient care.

Patient Voice was launched in January 2014 and is incorporated into the training programme for Foundation Year 2 (FY2) doctors. Each fortnight, the FY2 doctors select and invite a patient to share with them their experience of being cared for at Chelsea and Westminster Hospital. The discussion is led by the patient and they are encouraged to tell their story in their own words.

Once the patient has returned to the ward, the discussion about the specific issues raised continues among the FY2s and they are encouraged to reflect on the experience.

Initial feedback from the FY2 doctors has been very positive. The mean score for usefulness was 8.3 on a scale 10, and 90% said they gained knowledge that would help them in caring for their patients. 79% of FY2s said that they would change their practice as a direct effect of Patient Voice teaching sessions.

The Trust is keen to roll the project out into other disciplines and staff groups to improve people management across the organisation. It has promoted good practice and has allowed staff to assume ownership and take appropriate action where standards of care are unacceptable.

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**Visit of Vice Principal Professor Karen O’Brien**

O n 25 February the Trust hosted a visit for Professor Karen O’Brien, the Vice Principal of King’s College London. This was an opportunity for Professor O’Brien to see the practice learning environments that our pre-registration nursing and midwifery students undertake while on placements with us.

Staff from the Clinical Learning and Development Team showed Professor O’Brien around the Trust, where she visited the Birth Centre, Adult Burns Unit and Apollo Ward (paediatric burns unit) and had the opportunity to meet and talk with mentors. During the visit she was accompanied by Professor Steve Tee, Angela Parry and Dr Tina Day from the Florence Nightingale School of Nursing and Midwifery at King’s College.

Professor O’Brien expressed her thanks, stating that “...the college is very grateful to all the staff at Chelsea and Westminster for the thorough and thoughtful support that you give to our students.”

The visit follows on from a successful Nursing and Midwifery Council (NMC) visit in early February. The NMC reviewer, Karen Murray, met with mentors and students as part of the pre-registration midwifery pre-registration annual monitoring visit to King’s College.

This was a good opportunity to demonstrate our excellent partnership working with King’s College and to thank all mentors for the work they put in supporting our pre-registration nursing and midwifery students.

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**Dr James Parkinson: ‘The preterm baby as a young adult’ study**

What is the aim of this study? The majority of babies are born at full term (between 37-42 weeks gestation) but 1 in 10 babies is born too early. There is evidence that preterm birth is associated with differences in the amount of body fat and muscle, blood pressure and other markers of metabolism in adulthood. We are conducting a study to confirm whether the differences are a genuine effect of being born preterm.

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**Dr Helen Laycock: ‘Identification of biomarkers for Burn Pain’ study**

What is the aim of the study and what does this involve for patients?

- More than 16,000 patients are admitted to Chelsea and Westminster Hospital each year, around three quarters of patients report having at least one episode of “the worst pain imaginable” and up to half of these patients can develop chronic pain. We think that the burn causes tissue damage which provokes pain—however, our understanding of this is limited.
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- Despite some therapeutic progress, burn injury-associated pain is a common experience for patients and often difficult to treat.
- The study is recruiting healthy volunteers in order to examine the response in the tissues to a reversible minor burn, with the aim of allowing us to understand how this occurs in severe burn injury and impacts on pain.

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**What is your role and who else is involved within the Trust?**

- The study was instigated by Dr Francesca Neuberger and 100% said they gained knowledge about the organisation. It has promoted good practice and has allowed staff to assume ownership and take appropriate action where standards of care are unacceptable.

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In November at Chelsea and Westminster Health Charity’s inaugural Wonderland Dinner for their Borne initiative, rugby World Cup legend Will Greenwood invited guests to join him in scaling Kilimanjaro in aid of Borne.

Ten enthusiasts stood up there and then, including Chelsea and Westminster Health Charity’s Chief Executive Mark Norbury.

Since then, the excitement and news of the trek has spread and there are currently 17 people signed up to ‘Team Greens’.

Alex Mancini (Lead Nurse for Neonatal Complex, Palliative and Bereavement Care) also heard about the trek and after some words of encouragement from her teenage son, decided to take on the challenge to prove him wrong!

Team Greens will be taking the seven day Rongai Route. It’s not for the faint-hearted, with temperatures ranging from -20°C to over 35°C, a 5,895m ascent and the unpredictability of altitude sickness.

The trek will be taking place from 6–16 August this year and has a team fundraising target of £250,000. This will enable us to fund the next level of Borne’s research, education and training, to prevent disability and death in childhood and create lifelong health for mothers and babies.

We caught up with Will, Mark and Alex to find out why they are taking on this challenge of a lifetime and to see how they are feeling about it...

What does completing this trek in aid of Borne mean to you?

Will Greenwood (WG):

A very tiny, weeny small thank you to Mark Johnson—I cannot thank him enough. (Will and his wife Caro’s first son, Freddie, was born at 22 weeks and passed away after 45 minutes. Mark Johnson treated and cared for Caro during her three subsequent successful pregnancies.)

Mark Norbury (MN):

It will be one of my proudest ever achievements. It will also be a small way to thank Mark Johnson, his colleagues and my team, and there is an element of solemnity—it is a way to honour women and children who have died through childbirth.

Alex Mancini (AM):

Helping to raise funds and increase awareness for the work and essential research which Borne supports. I work closely with babies who are born prematurely or who need neonatal intensive care support, and have in-depth knowledge and experience in relation to the impact and effect this has on the whole family. Borne’s ultimate aim is to reduce the number of babies and families who need this support.

What are you most looking forward to on the trip?

WG:

Just getting out and doing something—seemed to have spent a lot of my life talking about doing things!

MN:

The camaraderie, recognising there will be lows as well as many highs, and reaching the summit with every single other person who starts out.

AM:

Experiencing nature at its finest.

What are not looking forward to?

MN:

I hate sleeping in tents—sleep is an absent friend at the best of times, so anxious about that.

AM:

Being cold.

What would be your luxury item on the trip?

WG:

My pillow.

MN:

High altitude jet pack.

How will you celebrate reaching the summit?

WG:

Dancing with everyone.

MN:

Enormous amounts of hugging, quite a lot of exhausted whooping and laughter, then a few minutes to myself taking it all in.

AM:

Crying and jumping up and down (if I have the energy).

Rugby legend leading the way up Kilimanjaro

Chelsea and Westminster Health Charity and the Borne team are so proud of Team Greens taking on this enormous challenge and we are sure you agree.

It is a fantastic demonstration of the hospital, charity and previous patients’ support coming together to make a real difference to mothers and babies lives.

You can be part of the challenge by supporting Team Greens. You can donate online at www.justgiving.com/willgreenwood or text WIL13 and the amount you want to donate to 70070 (£WIL13 £10 to 70070).

Remember to also spread the word to friends, family and colleagues to gather even more support for our intrepid trekkers!

Staff survey

Chelsea and Westminster Health Charity would like to thank the 628 staff who completed our staff survey. The lucky winner of the £50 John Lewis vouchers prize was Colette McDonagh (Paediatrics Medical Secretary) who was very pleased to win: “I am amazed, I never win anything!” We hope you enjoy spending your vouchers Colette!

If you would like to sign up to the quarterly e-newsletter to find out more about our work, visit www.cwchc.org.uk or email sarah.holland@chelwest.nhs.uk.

Bee Chair

Children with complex needs, who would usually require assistance to set up, will now enjoy the independence of a new “Bee chair” purchased by The Children’s Hospital Trust Fund.

The chair, costing £1,700, is designed to look like a bee to increase its appeal to children with complex needs, who would usually require assistance to set up.

The charity contacted Waterstones, Penguin, Random House and Usborne—hundreds of books have already been donated but many more are needed.

Paediatric Physiotherapist David Sowby said: “Having the new Bee chair has given the children greater opportunities for learning and cognitive development as a result of being supported in a good sitting position.”

Book appeal

Plans are underway to organise book corners in all children’s wards. Although some books are already available on the children’s wards and in outpatient areas, following discussions with the Play Therapists, the Children’s Hospital Trust Fund decided to step in to help set up book corners for each ward.

The charity contacted Waterstones, Penguin, Random House and Usborne—hundreds of books have already been donated but many more are needed.

The charity is appealing to the local community to donate any new or good condition secondhand hardback and paperback books which would appeal to children aged 0–16. Interactive books, which could be used to distract young children while having procedures, would be particularly welcome. Books will need to be regularly replaced because of infection control so a constant flow of book donations will be needed.

Rachel Fitzpatrick (Hospital Play Team Manager) said: “The books that have been donated have been a great success and are used to support children with distraction techniques and in therapeutic situations.”

If you are able to donate books, please contact the Children’s Hospital Trust Fund on 020 3315 8956 or email chtf@chelwest.nhs.uk.

‘Style the beast’ reveal

Paul with stylist Sara and a thrilled Chris Morrow-Frost

Paul Eggleden (Charge Nurse in ED), known for his full head of hair, has had his much treasured long locks and beard cut off in aid of The Children’s Hospital Trust Fund.

The Children’s Hospital Trust Fund is a cause close to the heart of Paul. Recently he and his family celebrated the birth of his fifth child, Eartha, who was unwell when she was born. Eartha has now fully recovered and Paul wanted to show his support to Chelsea Children’s Hospital and their families by raising money for the Children’s Hospital Trust Fund.

Paul now sports a ‘George Clooney’ look, which was one of three styles he put up on his JustGiving webpage. Paul left the decision on what look to adopt up to bidders.

Clinical Site Manager Chris Morrow-Frost cut off Paul’s long hair and beard, and stylist Sara from Danilo Hairdressing on Fulham Road took on the challenging task of transforming Paul’s hair into the Clooney style. Danilo Hairdressing also donates free hair appointments to the Children’s Hospital Trust Fund for mothers of children in hospital.

If you like Paul’s new look and want to support the Children’s Hospital Trust Fund, it’s not too late to donate at www.justgiving.com/stylethebeast.
Focus on... Nutrition and dietetics

Meet the Team

The Nutrition & Dietetic Team consists of 19 dietitians, two dietetic assistants and an administrator. The team work across all directorates promoting and implementing evidence based nutritional practice, throughout inpatient and outpatient services. They are also involved with a variety of MDTs, education and training, providing nutrition leadership on a variety of Trustwide projects.

Service Manager
Helen Stracey

Paediatric team
Jackie Falconer, Anakristina Skrapac, Jessica Murray Wicks, Emily Trewella, Victoria Bittle, Claire Dekoker

Chronic Disease team
Miranda Greg, Kelli Edmiston, Eleanor Kinsella, Ana Dehbozorgi, Lauren Mothershaw

Acute team

Dietetic Support team
Samantha Brady, Amy Kirk, Abi Omisore

Clinics and programmes

Nutrition and dietetics offer a variety of clinics and programmes, a few of which are highlighted below.

Dietetic outpatient clinics
These are popular and cover a wide variety of diagnosis for adults and children. The team consistently receive positive feedback from patients claiming that the quality of their lives has been transformed by the practical guidance enabling them to make appropriate lifestyle and food choices.

Refsum’s clinic
The Trust is famous for our Refsum’s clinic which is acknowledged nationally. The team have published a large body of literature on the subject and designed the Chelsea and Westminster Diet which is a key tool for managing this neurological disease.

Tummy trouble? We may be able to help
Gastroenterology clinics are one of our specialisms. In 2013 we saw a 30% increase in referrals to these clinics which cover diet therapy for a broad spectrum of issues to do with the gastrointestinal tract from inflammatory bowel disease (IBD) to Crohn’s disease, to functional gut disorders like Irritable Bowel Syndrome (IBS). IBS is more common than you might think with 10–15% of the population suffering from the condition. It costs the NHS £45.6m each year and that does not include the indirect cost of sick days.

We have recently audited our outcomes in IBS patients and found a significant decrease in their overall symptom score by 34%. Interventions are mostly around lifestyle changes (ie FODMAP approach. The results can be life changing for patients who may have had lifelong problems.

Paediatric clinics
Paediatric clinics are extremely popular—children are seen for a wide variety of issues from faltering growth, allergies and gastrointestinal disorders to weight loss. A new service has started for children and adolescents with IBS or functional abdominal pain using this same adult low FODMAP dietary approach. To date there is no evidence on its use in children as research has focused on adult IBS only. One of our paediatric dietitians is conducting a pilot study looking at whether this diet works for children. For this care, children aged 10–16 years of age with functional abdominal pain or IBS can be referred to the paediatric dietetic team.

A new Paediatric Weight Management Service has been set up to see patients who are overweight or obese. The package of care for 3–18 year olds provides a one-to-one service offering monthly appointments after school with the option of a weekly drop-in clinic for weight checks.

Smartloss (adults)
Smartloss is our successful adult weight loss programme with an average of 56% weight loss and 86% retention rate for patients who complete the programme. This is above national average and results in significant health and life quality benefits for patients:

- “Through dietary changes I have pretty much changed everything thanks to this programme.”
- “Very clear, supportive, encouraging funny and knowledgeable.”

A day in the life of a dietitian

by Sarah Price

I start at 9am when I plan my day in the acute team office—it always seems like no two days are the same. My responsibilities include RainsfordMowlem ward inpatients and also lead the gastroenterology outpatient service. As well, I am the dietitian on call to see inpatients with eating disorders. I also work part time in the Vincent Square eating disorders clinic seeing both inpatients and outpatients on an ad hoc basis.

First thing I will look through my diary, email and patients on my ward to see the comings and goings. The kitchen bed census displays the Nutritional Assessment Scores for the ward so I check for scores of six and above as these patients are at high risk of malnutrition.

In addition, for one week in four, I am on the Parenteral Nutrition Team and see the all of the patients having total parenteral nutrition (TPN) in the hospital.

Patients who cannot be fed through their gastrointestinal tract have to be fed intravenously. It can be 1–10 patients at a time and in most cases TPN bags unique to each patient are ordered daily. We can select a specific amount of electrolytes to deliver with ideal energy and protein needs depending on the patients’ condition and blood tests. This nutritional round consists of a dietitian and pharmacist and happens daily on week days, taking anywhere from 30 minutes to three hours.

Once this is finished I concentrate on seeing the patients on the ward. As Rainsford Mowlem has a mix of surgery and gastroenterology patients, it fits well with my outpatient role and often I will arrange to follow up inpatients when they have been discharged.

Depending on the day I may have clinic in the afternoon, and again two clinics are never the same! We have a dietitian lead for the Coeliac Disease clinic so we are responsible for ordering appropriate bloods, scans and feeding back results to patients. Other patients may have inflammatory bowel disease requiring nutritional support, or Irritable Bowel Syndrome requiring dietary modification to manage symptoms.

My Wednesday afternoon clinic runs until 7pm to provide our clients some flexibility around their working day. Alternatively, I may see more ward inpatients, or see a patient in the eating disorders unit. If an eating disorder patient is admitted to the Acute Assessment Unit, I help coordinate their treatment plan by bringing the team together to decide on nutritional treatment (eg palliative care) and follow their daily to closely monitor their progress.

Around the planned and unplanned parts of the day there is always plenty of administration to complete, such as discharge summaries and GP prescription letters.
Setting high standards

Meeting national standards for malnutrition

Identifying malnutrition early and acting swiftly can prevent unplanned and unnecessary stays in hospital, improving patients’ care and reducing healthcare costs. One of our many achievements has been implementing an efficient nutrition care pathway, which received a Governors Quality Award in 2013.

The Trust met the national target to ensure that more than 90% of patients admitted are assessed nutritionally and on average 88% of patients are screened weekly to identify any changes in their nutritional status.

Paediatric screening tool

2013 saw the implementation of the paediatric nutritional screening tool—PYMS—which screens for malnutrition in children. We are one of the leading Trusts for this area of work.

Meeting nutritional stroke standards

The initial three months of the implementation of the Stroke Nutrition Pathway (Jul-Sep 2013) identified that 45% of stroke patients required dietician input for reasons including low body mass index (BMI), poor oral intake or requiring enteral feeding. This statistical highlights that almost half of all stroke patients admitted to Neil Gwynne ward require dietician input to receive optimal nutrition. Optimising patient’s nutrition has shown to reduce length of stay in hospital and improve patients’ wellbeing.

Bariatric surgery

The Trust continues to be one of the leading providers of weight loss surgery in London, performing approximately 400 procedures a year. The service is supported by a team of three specialist dietitians whose role is integral to supporting the patient throughout their weight loss journey. They assess patients before surgery and help them prepare for the complex dietary and lifestyle changes needed after surgery. Patients are seen as inpatients to support them with their eating plans and then are followed up regularly after surgery to support them with their weight loss goals and help identify and treat any complications. We run 13 outpatient clinics a week and have more than 6,000 patient contacts in these clinics a year.

We also run regular Getting Ready For Surgery workshops and patient support groups. Some of our dietitians have advanced practice roles such as surgical team by conducting gastric band adjustments. We are actively involved in teaching within the Trust and have presented our work nationally and internationally. We have established a forum of dietitians from all bariatric units in London and regularly meet to work on standards of care for patients.

How to refer to our outpatient services

We welcome all referrals. The department is not on Choose and Book but GPs and Trust staff can refer patients directly to the Nutrition and Dietetics department.

Private Services: Since January 2014 the Trust has operated a private nutrition and dietetics service for outpatients. To book into this service please call Private Patients on 020 3315 8599 to make an appointment.

Company Wellbeing Days: The Nutrition and Dietetics team offers company wellbeing days with mini MOTs including cholesterol tests, blood pressure, body fat analysis and individual advice.

For further details on all areas please email helen.stracey@chelwest.nhs.uk or call 020 3315 8175.

Department of Health’s Una O’Brien visits frontline services

On 14 March the Trust welcomed Una O’Brien, (Permanent Secretary at the Department of Health) and her Private Secretary, Tabitha Brufal.

During her visit, Una had an open discussion with the Chair and Executive Directors about current challenges and how hospitals can be engaged in the integration agenda.

The group then visited three different clinical areas—A&E, Chelsea Children’s Hospital and Ron Johnson ward.

This visit will be followed up with a specific workshop with the Department of Health about improvements to commissioning for sexual health services. The Trust will be joining the Department of Health Connecting Programme to promote links between civil servants and frontline staff.

We were also delighted to show Una the Mansfield Room, dedicated to Dr Simon Mansfield with whom Una worked as one of the founding members of the London Lighthouse.

Ambulatory care update

The principle of the Acute Assessment Unit (AAU) ambulatory care service is to provide a high quality and safe service which improves patient experience. The service aims to:

- Prevent attendance at hospital
- Reduce admissions and overnight stays in hospital
- Reduce inpatient length of stay

There are currently three work streams in ambulatory care:

1. Medical and Surgical acute assessment clinics: Clinics are located in AAU in the ambulatory care room. The clinics are for a consultant to assess patients. Patients can only attend clinic once. Medical and surgical patients thought suitable for acute assessment clinics must be discussed with the respective consultant.

2. Treatment service: The treatment service has evolved over the last year from three antibiotic pathways to an outpatient antibiotic and DVT service.

   The service is currently staffed by a nurse on bleep 4560 Monday to Friday 7:30am–6pm, a registrar 9am–5pm and access to a consultant acute physician Monday to Friday 9am–5pm.

   To allow for the continuation of the service over the weekend there are two hours of nursing cover on Saturday and Sunday.

   Patients suitable for the IV antibiotic pathway are currently seen daily in the AAU ambulatory care room by the AAU nurse who reviews the patient and administers antibiotics as prescribed. Patients are referred mainly from GPs, the Emergency Department (ED), the Urgent Care Centre (UCC) and the Acute Assessment Unit (AAU).

3. Virtual ward: Patients on the virtual ward are patients who have been discharged from AAU but require urgent outpatient investigations to be followed up. Patients on the virtual ward are not seen in person, but their results are chased daily and acted on by the ambulatory care team—staff nurse, and ambulatory care consultant and registrar.

   Every Monday and Friday, all patients in the treatment service and the virtual ward are discussed in an hour long multidisciplinary team meeting. This multidisciplinary team comprises the ambulatory care staff nurse, consultant, junior doctor, a microbiologist and an antimicrobial pharmacist.

   For queries or to find out more, please contact Anna Letchworth (Ambulatory Care Implementation Manager) at anna.letchworth@chelwest.nhs.uk.

Road closures this summer

Please note the following scheduled road closures and disruptions due to running and cycling events in London this summer:

- The Tour de France taking place in London on Monday 7 July with the roads on the route through north, east and central London closed for most of the day. Visit www.letour.2014stage3.com for more information.
- The Prudential RideLondon event in London and Surrey is taking place on Sunday 10 August. The route will remain essentially the same as 2013, with minor changes. The organisers have agreed to continue not using Fulham Road. Route maps for the events are available at www.PrudentialRideLondon.co.uk.
Awards 2014. The National Hospital Staff changes

Congratulations to Radio Chelsea and Development

of R&D within the Trust. Her successor is down from this role, as she has been appointed as the new Clinical Director for Research and Development. Maria Lorena Peña (Critical Care Outreach Nurse Practitioner) began her career at the Philippines Heart Centre before arriving in the UK in 2000. She previously worked at East and North Hertfordshire NHS Trust in various nursing roles before joining the Critical Care Outreach Team. Maria said: “I enjoyed giving support and sharing my expertise not only to nurses but also to other health professionals. Further to my role as a CCOT nurse, I was also given the task to participate in developing and maintaining good practice in the care of patients with tracheostomy in the ward.”

Congratulation

Alex Baker

Congratulations to Radio Chelsea and Westminster presenter Alex Baker, who was shortlisted for Male Presenter of the Year at the National Hospital Radio Awards 2014. The National Hospital Radio Awards is an annual celebration of the excellent standards found in hospital radio stations across the UK. It’s the second time that Alex has been nominated for the award. The first time was in 2012, when he was runner-up.

Staff survey results

This year’s staff survey results list Chelsea and Westminster Hospital in the best 20% of Trusts for a number of key findings including:

• feeling satisfied with the quality of work and patient care they are able to deliver
• staff motivation at work

Of all the key findings from the survey, Chelsea and Westminster Hospital was in the top 20% of scores of all acute trusts in 2013 for 13 of the 28 criteria.

Susan Young (Director of HR and Occupational Development) said: “Staff surveys are a really important tool for us to gauge where we are as an organisation from those behind the delivery of high quality care on our behalf to patients. “A happy workforce has been shown to correlate with good patient outcomes and so we are pleased that staff feel supported and valued in their great efforts to care for people.

“There are of course areas in which we can improve, based on what our staff are telling us, and we will develop an action plan that will address all areas in which we scored lower than average to ensure that we provide the best working environment to our teams in 2014 and beyond.”

Areas of concern remain staff perception of discrimination at work and perceptions of harassment, bullying or abuse from patients, relatives or the public in the last 12 months. Divisions will be working on plans to address this.

You can view the full results by visiting www.nhsstaffsurveys.com and clicking ‘Latest results’.

VTE project awarded 2nd place at Thrombus Innovation Awards

The Trust’s application entitled A local venous thromboembolism prevention programme driven by nurse initiatives was awarded 2nd place at the Thrombus Innovation Awards and collected £1,500 for the team. The VTE project demonstrated innovation and excellence that has improved the delivery of services to patients for VTE prevention and treatment. The poster was second out of six shortlisted finalists.

The team was congratulated for their contribution, engagement and integrated approach to ensure VTE focus is embedded into clinical practice, particularly in multidisciplinary VTE ward rounds which are beneficial to not only ward staff but also departments sharing practice.

The team members were Sheena Patel, Dr Helen Yarranton, Mr Armer Raza, Mr Warwick Radford, Dr Philip Lee, Claire Shard, Malin Zettergren, Caroline Evans, and the Electronic Prescribing and Radiology teams.

Flu vaccination winter round-up

This winter, the majority of areas saw a rise in number of staff vaccinated. Out of 3,236 employed staff, 1,889 staff were vaccinated (71%). In addition, 672 non-Chelwest/contractors were vaccinated for a total of 2,019—the highest number to date. Despite such high figures, the Department of Health advises that the public in the last 12 months. Divisions will be working on plans to address this.

You can view the full results by visiting www.nhsstaffsurveys.com and clicking ‘Latest results’.

Staff changes in Research and Development

Dr Dilys Lai (Divisional Research Lead for Medicine and Surgery) will be stepping down from this role, as she has been appointed as the new Clinical Director for Research and Development since 2010 and has made a significant contribution to the success of R&D within the Trust. Her successor is Dr Tom Newsom-Davies who is an active researcher in the field of rare diseases. Dilys has been Divisional Research Lead since 2010 and has made a significant contribution to the success of R&D within the Trust. Her successor is Dr Tom Newsom-Davies who is an active researcher in the field of rare diseases.

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The team members were Sheena Patel, Dr Helen Yarranton, Mr Armer Raza, Mr Warwick Radford, Dr Philip Lee, Claire Shard, Malin Zettergren, Caroline Evans, and the Electronic Prescribing and Radiology teams.

Flu vaccination winter round-up

This winter, the majority of areas saw a rise in number of staff vaccinated. Out of 3,236 employed staff, 1,889 staff were vaccinated (71%). In addition, 672 non-Chelwest/contractors were vaccinated for a total of 2,019—the highest number to date. Despite such high figures, the Department of Health advises that the public in the last 12 months. Divisions will be working on plans to address this.

You can view the full results by visiting www.nhsstaffsurveys.com and clicking ‘Latest results’.

Staff changes in Research and Development

Dr Dilys Lai (Divisional Research Lead for Medicine and Surgery) will be stepping down from this role, as she has been appointed as the new Clinical Director for Research and Development since 2010 and has made a significant contribution to the success of R&D within the Trust. Her successor is Dr Tom Newsom-Davies who is an active researcher in the field of rare diseases. Dilys has been Divisional Research Lead since 2010 and has made a significant contribution to the success of R&D within the Trust. Her successor is Dr Tom Newsom-Davies who is an active researcher in the field of rare diseases.

Staff survey results

This year’s staff survey results list Chelsea and Westminster Hospital in the best 20% of Trusts for a number of key findings including:

• feeling satisfied with the quality of work and patient care they are able to deliver
• staff motivation at work

Of all the key findings from the survey, Chelsea and Westminster Hospital was in the top 20% of scores of all acute trusts in 2013 for 13 of the 28 criteria.

Susan Young (Director of HR and Occupational Development) said: “Staff surveys are a really important tool for us to gauge where we are as an organisation from those behind the delivery of high quality care on our behalf to patients. “A happy workforce has been shown to correlate with good patient outcomes and so we are pleased that staff feel supported and valued in their great efforts to care for people.

“There are of course areas in which we can improve, based on what our staff are telling us, and we will develop an action plan that will address all areas in which we scored lower than average to ensure that we provide the best working environment to our teams in 2014 and beyond.”

Areas of concern remain staff perception of discrimination at work and perceptions of harassment, bullying or abuse from patients, relatives or the public in the last 12 months. Divisions will be working on plans to address this.

You can view the full results by visiting www.nhsstaffsurveys.com and clicking ‘Latest results’.

VTE project awarded 2nd place at Thrombus Innovation Awards

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Feel Good February

Feel Good February presented staff with the opportunity to celebrate health, wellbeing and diversity. There were a number of activities including Nordic walking, yoga, music meditation, knitting, crochet, subsidised exercise sessions, a series of free mini MOTs and enlightening talks on LGBT issues and disability in the workplace. Staff were encouraged to beat the January blues and to get on board with feel Good February.

Feel Good February gave the Trust a chance to celebrate Lesbian, Gay, Bisexual and Transgender month with a series of engaging and informative talks to cover a plethora of LGBT issues, both inside and outside of the Trust. Michelle Ross from the Terence Higgins Trust discussed raising awareness of trans-related issues for patients and staff, as well as speaking about Clink, the first sexual health clinic for the trans community which is run by 56 Dean Street.

Leila Woodhouse from Stonewall hosted the next talk, looking at patient health inequalities encountered by the Lesbian, Gay, Bisexual and Transgender population. This was followed up with Frankie Stevens (also from Stonewall), who delivered a great talk on the importance of staff networks and on Stonewall’s findings on the key themes experienced generally by LGBT staff working in organisations.

The staff response to the Feel Good February activities was really positive—the mini MOT sessions in particular proved to be a real hit. In fact, so many of our staff were keen to partake that Occupational Health opted to do walk-in sessions so they could see as many people as possible.

In the same vein, the staff who attended the talks delivered great feedback, only lamenting that not more people were able to attend.

The popular yoga session led by our very own Sarah Buckland has led to the possibility for regular yoga sessions from April, so watch this space.

Finally, thanks to everyone for getting involved and making Feel Good February what it was—and it looks like spring is just around the corner.

If you missed any of the talks and would like any further information on issues and topics covered, please email Hannah at hannah.mendoza@chelwest.nhs.uk

Radiology Department accreditation

The Radiology department has spent the last 18 months working towards completion of the Imaging Services Accreditation Scheme (ISAS) and was approved in February.

Chelsea and Westminster is one of only a handful of Foundation Trusts in the country with this accreditation.

The Royal College of Radiologists and College of Radiographers have developed the ISAS to help diagnostic imaging services ensure that their patients consistently receive high quality services delivered by competent staff working in safe environments.

Accreditation gives formal recognition that an imaging services provider has demonstrated their organisational competence to deliver high quality imaging services. It also gives the people using the service confidence in their diagnosis.

Accreditation also improves clinical governance standards, raises the level of competency and enhances the credibility of the service among patients and assures those who fund the services.

African Drumming workshops for patients

Chelsea and Westminster Health Charity has partnered with the Centre for Performance Science at the Royal College of Music on an exciting research project exploring the effects of music on psychological wellbeing and immune function.

As part of this project, outpatients who feel they are experiencing stress, anxiety, depression, pain or fatigue, are invited to take part in a free, four-week introduction to African Drumming which aims to improve patients’ wellbeing. Participants will discover African musical culture, hear live performances and learn to play in a supportive and friendly atmosphere.

Courses are running in May and June and will be led by Royal College of Music musicians. For more information, please contact daisy.fancourt@chelwest.nhs.uk or 020 3315 6618.

Farewell

Prof Sir Christopher Edwards

Professor Sir Christopher Edwards stepped down as Chairman of Chelsea and Westminster Hospital at the end of January.

Sir Christopher said: “I have been privileged to be Chairman for the last six years. I have had the good fortune to work with two outstanding Chief Executives, Heather Lawrence and Tony Bell.

“Thanks to their efforts and those of our world class staff Chelsea and Westminster Hospital NHS Foundation Trust has flourished.

“Let me give some examples. Getting the Dr Foster award for being the safest hospital in England is something of which we can be justly proud.

“Our financial success has enabled us to invest in superb new facilities such as the Chelsea Children’s Hospital.

“Our enterprise has created the largest and most successful sexual health centre in the UK at 56 Dean Street.

“There is a long list of people that I would like to thank. In particular Board members past and present, our Council of Governors and staff at every level.

“They have all contributed to the success story that is the Chelsea and Westminster. I wish you all the best for the Future.”

Mary Wray

Senior Nurse Mary Wray has retired from the Trust having worked at the hospital and its predecessor since 1974.

Caroline Evans (Sister—David Evans Ward) said: “All David Evans Ward staff and staff who know Mary are sorry to see her go but hope she has a great retirement and wish her all the best.

“She has offered exceptional support to staff and given care to many patients. She will be missed.”

Jen Allen

Jen Allen (Head of Performance Improvement) is leaving the Trust on 23 May to take up the role of Divisional Director of Operations for networked nursing and therapies at CLCH (Central London Community Healthcare).

Jen said: “I’ve been here since December 2007 in several different jobs, and moved round lots of different offices and teams. It has been great and I will miss everyone here. Hopefully I’ll still be working closely with Chelsea and Westminster colleagues as there are lots of joint projects and whole system working between CLCH and the Trust.”

Dominic Clarke

Dominic Clarke (General Manager for Medicine, A&E and Trustwide Operations/ Staff Governance) is leaving on Friday 30 May to take up the role of Director of Surgery at Western Sussex Hospitals Foundation Trust based in Chichester and Worthing.

Dominic said: “I have been at Chelsea and Westminster for 8 years, nearly a quarter of my life. Working here has had a massive impact on my career and will be a place forever close to my heart. Half of any job is the people you work with and I have been lucky to work with some exceptional individuals and teams, clinical and non-clinical, during my time managing cancer, surgery, medicine, A&E and operations. I wish Chelsea and Westminster all the best and look forward to coming back to visit the new A&E!”

Sean Palmer

Sean Palmer (Senior Project Manager, Strategy Team) is leaving the Trust on 6 June and returning to the Department of Health to work in its Financial Policy and Strategy team.

Sean said: “I’ve really enjoyed my time at Chelsea and Westminster and have learnt a great deal, which I intend to put to good use back in the Department of Health.”
Turning ideas into reality

Have you ever thought of an idea that could help patients but you were unsure about how you would go about it and how to make it successful?

The hospital together with Chelsea and Westminster Health Charity are launching an exciting new initiative, the Enterprising Health Partnership, which will support staff to get their ideas off the ground and turn them into a reality.

The hospital and the charity are looking to hear from staff across all departments with their ideas. There is funding available for up to £50,000 for each idea which will improve patient care and experience and generate revenue or real cost savings. Ideas could include anything from improving processes at the hospital, coming up with a new product idea, using technology in a different way. Whatever the idea, we would love to hear from you.

Chief Executive Tony Bell said: “People come to work with so many talents that aren’t in their job description. The initiatives and innovations that staff develop are important because they enable people to be creative in their day jobs. I’m a keen advocate for our staff involved in innovation and enterprising ideas. Anyone can innovate. Anyone can solve a problem whatever is on their job description. I would encourage staff to get involved and submit their ideas.”

Some ideas to get you started

Getting people moving:

Darren Brown, Physiotherapist, has recently been working with the charity on an idea for a group exercise class for patients. “The idea is that it’s going to be a group exercise class for patients and carers to think about the role that physical activity can play in both mental and physical health. We want to improve people’s health and wellbeing.”

At the swipe of a screen

With the number of people using smart phones, developing a mobile phone app can be a simple way of sharing clinical expertise patients and colleagues.

Sunita Sharma, Clinical lead for post-natal services, has recently created an app for new mums. The information that new mums receive when they go home covers such a wide range of information. “We know from listening to patients, that it can be a simple way of sharing clinical expertise patients and colleagues.

In the running for two top hospital awards

Chelsea and Westminster Hospital has been shortlisted for two CHKS Top Hospitals awards—Patient Safety and Quality of Care.

The CHKS Top Hospitals awards celebrate the success of healthcare providers across the UK and are given to acute organisations for their achievements in healthcare quality and improvement.

The Patient Safety award recognises outstanding performance in providing a safe hospital environment for patients and is based on a range of indicators, including rates of hospital-acquired infections and mortality.

The Quality of Care award is given for excellence in high quality care to patients, appropriate to their diagnosis. It is based on a number of criteria including the length of time patients stay in hospital, the rate of emergency re-admissions and whether the care pathway proceeded as it was originally intended.

The CHKS Top Hospitals programme awards will be held in London on 13 May.

Photo gallery