



# west mid matters

ISSUE 41: August 2012

## Olympic honours for staff



Golden moment: A&E Sister Emma Harley with the Olympic torch

WEST MIDDLESEX STAFF had their moment to shine during the London 2012 Olympics. Paediatric A&E sister Emma Harley was chosen to carry the Olympic torch in Fulham on 26 July, and Bruntha Nurendran and Edwin de la Cruz performed in the opening ceremony the following evening.

Emma's torch was lit at 2pm in front of cheering crowds. She carefully jogged with it for 350 metres along North End Road before passing the flame on to the next torchbearer.

Emma was selected to be a torchbearer for her dedicated work with street children and disadvantaged communities in Kenya. She said: "It was incredible. I was absolutely mobbed as I got off the torch relay bus. There were crowds of people cheering along my route with the police holding them back.

"My torch was actually quite light and the whole experience went by really quickly. My

friends and family were there to watch me and it was an amazing atmosphere. It feels very surreal to be back at work in the emergency department. It was such a privilege to carry the Olympic torch."

Edwin de la Cruz, Head of Faculty of Nursing, and Bruntha Nurendran, Learning and Development Data Co-ordinator, took part in the opening ceremony, watched by 80,000 spectators and millions of TV viewers around the world.

They performed in the NHS sequence of the show directed by Oscar-winning director Danny Boyle, dancing with giant hospital beds and creating dazzling dance formations along with 800 volunteers and 400 children.

NHS staff across the UK were invited to audition for the sequence last year and Edwin and Bruntha found out just before Christmas that they had been selected. They gave up weekends and annual leave to attend all the rehearsals between March and July this year, keeping it a secret from friends and colleagues to save the surprise.

**"It was an incredible feeling to walk into the Olympic Stadium knowing the world was watching"**

Edwin said: "It's been an honour to be part of the greatest show on Earth which I will cherish. I've met and made friends with so many lovely people. On the day of the show we were getting ready from 1pm and we walked in a line from Eton Manor to the

stadium before our cue to go on as there were 10,000 participants to co-ordinate.

"When we got out there we had hidden radio headsets so producers could remind us what we should be doing at each stage. We were told not to look at the cameras or feel nervous but to keep in character and enjoy



Backstage: Bruntha Nurendran and Edwin de la Cruz before their Olympic opening ceremony performance

the experience.

"Afterwards we saw the Olympic athletes getting ready to take part in the parade. Team GB were taking photos of us as we were taking photos of them! I was also interviewed by a cable station for the Philippines. The excitement still hasn't worn off yet."

Bruntha said: "It was a privilege and an incredible feeling to walk into the Olympic Stadium knowing the world was watching. I played a nurse in a part of the NHS sequence nicknamed Swing out Sisters and the dance was a combination of Lindy Hop swing and contemporary dance routines. It was so exciting to finally reach the big day after the demanding auditions and long rehearsal days. *Continued on page 4...*

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## Help us secure Major Hospital status

NHS North West London is consulting to improve healthcare for the two million people it serves. Under the **preferred option (option A)** West Middlesex would become a Major Hospital - expanding our award winning maternity, high performing A&E and other services.

Under another option (option C) West Middlesex would lose these services and patients would need to travel to a different hospital to access A&E, maternity and children's services.

We are confident that we can secure and deliver Major Hospital status but we need your help!

To have your say, please:

- pick up a **consultation pack** from the hospital or
- visit [www.healthiernorthwestlondon.nhs.uk](http://www.healthiernorthwestlondon.nhs.uk) or
- call **0800 881 5209** / email [consultation@nwlondon.nhs.uk](mailto:consultation@nwlondon.nhs.uk)

Turn to page 2 to find out why we want option A and why we're confident we can expand.



# What matters to me

AS I WRITE this column it's almost impossible not to get caught up in the buzz and excitement surrounding the Olympic Games taking place right now in London.

As you'll have seen on the front page, two of our staff were involved in the opening ceremony, and another carried the Olympic flame through the streets of London. These must have been truly memorable events for those involved.

Planning for the 2012 Games has been going on for a number of years, and we have been very much part of this. Our Olympics Steering Group has been leading on our preparations, to make sure that we have continued to provide a first class service for patients regardless of any disruption. I would like to thank all our staff for their extra efforts in this.

The Olympics are synonymous with teams working together to reach the highest levels of achievement for their country's glory. For this to be possible, years of training and unwavering commitment are required. But more than this, they need passion and desire to become the very best possible.

I can't help but feel a parallel with the journey West Middlesex has been on



Dame Jacqueline Docherty - Chief Executive

over the past few years. Our vision - to be a first class hospital for our community - has taken us on an often challenging leap of faith, and the route has changed along the way. However, we are now in a very strong position having achieved so

many of the goals we and others have set us. Years of hard work have led to this position, giving us firm foundations to move onto the next level: going from good to great - from a finalist to a medal winner.

For us, this means securing Major Hospital status in the outcome of the consultation currently underway, which NHS North West London are undertaking with the aim of improving healthcare for the two million people it serves.

You can read on box opposite exactly why we want to become a Major Hospital and why we believe this is the best outcome for patients. However, although this is the preferred option under the consultation, we cannot afford to be complacent as this is by no means a done deal.

We need your help to secure Major Hospital status. I would encourage you to get involved in the consultation, and most importantly to take part by giving your views on why you support West Middlesex under option A as a Major Hospital. We cannot do this without you!

## Proposed changes to the NHS in North West London

### Why we want option A

- We will keep our busy A&E
- We will keep our award winning maternity service - this service was the first in London to achieve Baby Friendly Status and achieved a Charter Mark for excellence in customer care
- We will keep our paediatric service at the West Middlesex, supporting the growing population in our community
- It will mean less service disruption as no hospital will need to develop new services. For example, if we became a local hospital Ealing would have to develop a stroke unit and a trauma unit as we would no longer have them - this would take time and money
- It makes best use of our excellent buildings, the highest quality estate in North West London
- We have space to expand to further develop clinical services and increase employment opportunities for local people
- Option A is the best value option for the tax payer

### Have your say

- Consultation packs available around the hospital
- [www.healthnorthwestlondon.nhs.uk](http://www.healthnorthwestlondon.nhs.uk)
- 0800 881 5209
- [consultation@nwlondon.nhs.uk](mailto:consultation@nwlondon.nhs.uk)

# Director's cut



Anne Gibbs - Deputy Chief Executive and Director of Strategy

## Why I believe 'option A' is the right choice

will fundamentally transform the way healthcare is delivered locally.

Whether you are a patient, carer, member of staff or local resident, (or indeed like me all of these!) then this consultation is extremely important to you.

I would encourage you to give your views and help shape the future of the West Middlesex and the other healthcare services you use.

### Clinically led

Why change? The reasons for change within the NHS centres around the growing needs of an ageing population, to improve access to care and to meet the financial challenges that are common to all public services.

This process has been clinically led, with GPs and hospital doctors setting high professional standards which will aim to support Major Hospitals as centres of excellence. Although no hospitals will close, the plan is to have fewer hospitals with

large, fully functioning A&E departments. These Major Hospitals (five in total) will also have maternity and paediatric services.

Hospital sites which do not become Major Hospitals will continue to provide GP and nurse led urgent care, outpatient services and support services such as clinical imaging (including x-ray), and be known as Local Hospitals.

We believe that the West Middlesex is in a strong position to be designated as a 'Major Hospital' and retain its A&E, award-winning maternity service and inpatient facilities. We offer high quality services and have a new hospital building.

We believe that our local residents will benefit from us securing Major Hospital status. We already serve the people of Hounslow, Richmond and Twickenham, Ealing and Surrey. Securing Major Hospital status will allow us to continue to grow and develop as a hospital.

### Value for money

There are three options being consulted on. We believe option A allows the delivery of substantial service change, whilst improving quality and value for money.

It would make best use of our high quality estate. It would allow us to continue to grow and develop our services to support the whole of our local community and remain a significant employer within our local community.

Option A is also the preferred option of the clinical team leading the consultation, but it's also important that widespread support for this is made clear.

I would therefore encourage you to have your say and respond to the consultation so that we continue to secure the best health services for our patients. (Please see details above.)

RECENTLY, A MAJOR public consultation was launched across North West London. 'Shaping a healthier future' lays out a significant set of proposals which





## National praise for lung care

AN INNOVATIVE CARE package set up at West Middlesex for patients with lung disease has won more national praise. It beat hospital schemes across the country to reach the final three in the NICE (National Institute for Health and Clinical Excellence) 2011-2012 Shared Learning Awards.

The scheme, provided by a multi-skilled team led by respiratory consultant Dr Bobby Mann, was just pipped to the post for the prize. Val Moore, Implementation Programme Director at NICE, said West Middlesex had done "incredibly well" to be picked out of 60 entries for the top three places.

The awards recognise and reward organisations who have actively tried to find new ways of working to implement NICE guidance and ultimately improve health and wellbeing for patients and their families.

Patients with chronic obstructive pulmonary disease (COPD) have damaged lungs which can cause shortness of breath, chronic cough, and acute exacerbations which can require hospitalisation. The team at West Middlesex has been working since May 2010 to improve care for COPD patients and enable them to manage their condition at home rather than be re-admitted to hospital. The package includes information booklets, advice on



Dr Bobby Mann (far left) with some of the team who have contributed to the success of the COPD care package

stopping smoking, help with using inhalers, outpatient appointments, and follow-up phone calls to check on the patient's condition after discharge.

Last year the care package was awarded the HQIP (Healthcare Quality Improvement Partnership) award for creating and improving efficiencies.

## King's Fund will enhance A&E experience

COMING TO AN emergency department can be a frightening experience for patients and their loved ones. Our emergency department is aiming to improve this, thanks to money awarded by the King's Fund.

West Middlesex is one of 11 hospitals across the country that have been successful in their bid for funding to take part in the Patient and Family-centred Care Programme.

A steering group including clinicians, managers and the Patient Advice and Liaison Service will be examining what it's like for adults with chest pain and their relatives / carers, from arriving at our emergency department through to being admitted to a ward or discharged home.

This will include shadowing some patients with chest pain on their journey through the department, using questionnaires, and making observations on interaction with staff, use of facilities, and time taken to receive different aspects of care. The steering group will make a plan to put improvements in place, with work completed by November 2013.

The funding provides an opportunity to focus on enhancing patient experience in what is often a busy environment dealing with life saving situations. *WMM* will bring you more details as work progresses.

## Improving patient care programme

FURTHER IMPROVEMENTS TO the way we deliver emergency care to patients are being made across the hospital. These include speeding up how we plan and deliver care to our emergency patients and changing the way we plan for discharge back home.

Staff are working in project groups to deliver the improvements following recommendations made by the Department of Health's Emergency Care Intensive Support Team.

The team visited in May after an invitation from the Trust to act as our 'critical friend' and review the way we provide emergency care. They spent time observing work and talking with staff in our emergency department, and acute assessment and medical units.

Their report acknowledged the significant progress that's already been made to improve the steps we follow to provide care, and gave helpful recommendations on how we can improve even further.

The Trust Board support the recommendations and have initiated an 'improving patient care' programme, with teams of staff working together to make the changes. For example, the therapy service (some of the team pictured right) is carrying out four projects which include:

- reviewing how the Real Time discharge planning

programme is used to improve communication between therapists and other staff

- producing a joint assessment form to improve team working in the delivery of care
- trialling a six day weekly therapy service during October to December
- trialling an older adults team who can see the same patients from the time they are admitted to our Acute Medical Unit through to discharge home

Lesley Stephen, Director of Operations, said: "It's a real pleasure to see the therapists working so cohesively as a team on the project and so effectively with their colleagues from other disciplines.

"I hope that all areas of the project get a boost from the positive energy and potential for change that the team shows. This should help the Trust's management of winter pressures and ensure continued good care."

Over in our emergency department, a team led by consultant Dr Jasmin Cheema are planning to



L-r: Charlotte Johnson, Junior Physiotherapist, Ruth Carruthers, Senior Occupational Therapist, Emily Low, Senior Orthopaedic Physiotherapist, and Sima Sheth, Senior Occupational Therapist

implement a Rapid Access and Treatment Service. They want to do this by October 2012. The aim is to reduce the amount of time for a patient in A&E to be seen by a senior doctor, who can then make early decisions about appropriate investigations, treatment and care.

There are many more improvements taking place and the programme aims to be completed by November 2012. We will be sharing more about what's been achieved by staff in our next issue of *WMM*.



## Word from West Mid

# Breastfeeding benefits

By Sue Lister, Infant Feeding Co-ordinator

Sue Lister, Infant Feeding Co-ordinator at our award-winning Queen Mary Maternity Unit, explains the health benefits of breastfeeding and offers some tips to mark World Breastfeeding Week this month.

It's a well-known fact that 'breast is best', but why is breast milk so special? Mum's milk contains antibodies which help to reduce the risk of their baby developing tummy, chest, ear and urine infections.

Breastfeeding is good for mum too. It can help to reduce her risk of developing breast and ovarian cancer, and brittle bone disease later in life.

### Getting off to a good start

Skin-to-skin contact will help to keep baby warm and calm after they are first born. Babies are more alert from birth to two hours old and eager to feed during this time. If mum keeps her baby close, she will be able to watch for early feeding / 'I'm hungry!' signals. These are often:

- Wriggling and stirring
- Turning head from side to side
- Opening mouth
- Licking lips
- Sucking on fingers

### Early days

Healthy term babies may not feed very much in the first 48 hours. They have energy stores that they can use to provide

food. After the first day or two, it is normal for babies to vary their feeding patterns, feeding between eight and 12 times a day. Letting baby choose when and how long to feed ensures they will get enough milk.

### Getting comfortable

It's normal to feel some discomfort and sensitivity during the first days of breastfeeding but this will soon pass. Many common problems mums experience (e.g. sore nipples) happen because the baby is not attached well to the breast.

Mum can breastfeed her baby in any position that is comfortable. Start by holding baby close and facing mum with their head and body in a straight line and nose opposite the nipple.

Baby needs to be able to tilt their head back slightly so they can open their mouth wide and take in a big mouthful of breast. Watch for a wide gaping mouth and quickly bring baby to breast. Their chin should touch the breast first.

It is important that baby is correctly attached to the breast when they are feeding. They should have a wide mouth, their chin pressed into the breast with nose



clear, cheeks will be round and full, and rapid sucking will become slower, with pauses and soft swallowing.

### Positive signs

Feeding should be baby-led (often called demand feeding). If feed times appear to be very long, then mum

should ask her midwife, health visitor or breastfeeding supporter to check the way her baby is attached to the breast.

By the time baby is three to four days old mum should be able to hear them swallowing frequently during feeding.

Breastfeeding should feel comfortable, and baby will release the breast of their own accord and look content after most feeds. Baby should always be given the opportunity to feed from both breasts at each feed, but both may not be taken.

If they have plenty of wet and dirty nappies, it is a good sign that breastfeeding is going well.

### Plan B

If mum does not wish to breastfeed her baby or is struggling with breastfeeding she might like to give her baby expressed milk instead.

Mums should speak to their midwife, health visitor or breastfeeding supporter if they have any queries or uncertainties about feeding their baby.

### Ongoing support

Before being discharged from our Queen Mary Maternity Unit, mums who are breastfeeding are shown how to attach their baby correctly to breast and hand express their milk.

They are also taught how to recognise effective feeding and are given details of how to access help and support for when they are at home, in addition to support from their midwife and health visitor.

### Useful links

- National Childbirth Trust  
[www.nctpregnancyandbabycare.com](http://www.nctpregnancyandbabycare.com)
- La Leche League  
[www.laleche.org.uk](http://www.laleche.org.uk)
- Breastfeeding Network  
[www.breastfeedingnetwork.org.uk](http://www.breastfeedingnetwork.org.uk)
- Association of Breastfeeding Mothers  
[www.abm.me.uk](http://www.abm.me.uk)
- Twins and Multiple Births  
[www.tambra.org.uk](http://www.tambra.org.uk)

## Photo gallery



Patients attended an education day at the hospital on 2 July provided by the Heart Health Team. The day included talks on risk factors, managing medicines, and cardiac investigations. The Heart Health Team work with patients to enable them to manage their health after heart treatment. Cas Shotter Weetman, Lead Cardiology Specialist Nurse, provides expert treatment, advice and support in her clinic, while Katie Baxter and Stavria Achilleos from Hounslow & Richmond Community Healthcare Trust provide advice on exercise and nutrition respectively. The team communicates back to GPs after their clinics so they have a clear treatment plan for the patients. (Clockwise from left: Stavria, Katie and Cas with patients Kathleen Wilkins and Marilyn Bevan.)



THE INTENSIVE TREATMENT unit (ITU) received a generous donation from the family of one of their patients last month. David Hughes (pictured top left) presented a brand new high definition television to ITU Matron Anil Jaggernath in thanks for the care given to his mother Sandra (seated) during her time in the unit. Also pictured is Sandra's daughter Angela Chessman (bottom left) and some of the ITU team. The television will be used in ITU to help entertain patients there after the previous non-digital TV became obsolete.



THE UPBEAT HEART Prevention & Patient Support Group was awarded a second prize of £500 at the annual Let's Do It awards in Hounslow. They were one of five charities to share nearly £4,000 at the event run by Barclays and supported by the Hounslow Chronicle. The awards recognise and help promote the good work done by charities across the borough. Hounslow mayor Pritam Grewal presented all the winners with their awards in a ceremony at Hounslow Civic Centre on 15 June. Representatives from Barclays, Chronicle editor Adrian Seal and Brentford and Isleworth MP Mary Macleod were among the judging panel.





## Taking notes Kelly Martin, Organ Donation Specialist Nurse

### Tell us a little bit about your background

I originally trained as a nurse in Northampton before I moved to London after qualifying. I worked at St Thomas' Hospital where I specialised in high dependency and intensive care nursing.

### What did you enjoy most about this work?

Although most of the patients are sedated and unconscious, you get to know their family and build up a relationship with them. Part of the role is reassuring them and trying to put them at ease during a stressful time. It can be very rewarding when a patient comes in who is really unwell, and you see them getting gradually better and eventually leaving the unit to go to one of the wards before going home.

### What inspired you to become an organ donation specialist nurse?

Inevitably there are patients who don't get better and sadly die. You see the effect this has on the family, and I worked with the end-of-life-care team including the organ donation specialist nurses who came to speak to the next of kin at what is a very difficult time.

For some, it can really help their grieving to know that their loved one will go on to make a difference for other people's lives. When I saw a post come up for an organ donation specialist nurse I felt that I had the necessary skills and experience, and the role really appealed to me.

The interview was really tough – over two hours including a test – and I thought that I hadn't got it. But I was thrilled when they called me to offer me the job!

### What is a typical week like for you?

I am part of a team of about thirty organ donation specialist nurses covering the whole of London 24/7. My base is at West Middlesex, although I am also currently covering Hillingdon Hospital while a colleague is on

maternity leave. I take part in a rota where three of us respond to a call out day or night. If the call is at West Middlesex I will respond but it could mean me visiting any hospital in London.

As well as responding to referrals, my role is to help raise awareness about organ donation to staff. I carry out training sessions so that staff know more about my role, the donation process and how to make a referral for an assessment.

### How do you get involved?

I work closely with the intensive care team and emergency department at the hospital, which helps identify patients who could potentially become organ donors. I am able to check the Organ Donor Register to ascertain patients' wishes.

I discuss donation with their next of kin. Usually they are aware that their loved one wants to donate their organs, and respect their wishes. However we always discuss this with the family and help them make a decision that is right for them. If the family agree to donation then I will facilitate this process.

### Do people get to know how their loved one has helped others?

Yes, if they want to then we can give the families of donors an update and even forward on letters from recipients thanking them for their involvement and explaining what a difference it's made for them. However it is important to respect the donor and recipients' confidentiality.

### How can staff at the hospital get in touch with you?

If staff would like training from me, or make a referral, they can contact me through the internal email system or via switchboard.



### What would you say to people who have not thought about organ donation?

Most people would accept an organ donation if they needed it, but far fewer have actually joined the Organ Donation Register. It's easy to do, just visit [www.organdonation.nhs.uk](http://www.organdonation.nhs.uk) and click on the Register Now button. Or you can call the NHS Donor Line on 0300 123 23 23.

If you have registered, please have a conversation with your family so they know in advance about your wishes.



## Olympics honours for staff

...continued from front page

Bruntha said: "There are so many unforgettable moments that will be etched in my memory, like getting the opportunity to meet and work with Danny Boyle (pictured below with Bruntha) who came across as a genuinely nice man. I was so thrilled! It was an experience of a life-time that I will always remember."



Edwin with Lord Sebastian Coe, Chairman of London 2012

### Judo star

And let's not forget the judo star in our midst. 21-year-old Neil Schofield, employed by ETDE to work in our maintenance department, was at the Olympic Park on 1 – 3 August as official warm-up partner / reserve for the Team GB judo squad. He ranks at number three in the UK and has already won gold, silver and bronze medals in national and international competitions. Neil is pictured right, receiving a sponsorship cheque from David Carr, ETDE's Managing Director.







# Comings & goings

## Starters

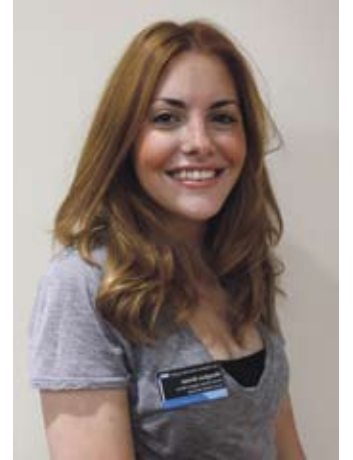
### Brian Sharkey, Local Counter Fraud Specialist

Brian is providing cover for Jennifer Rennison while she is on maternity leave. He is employed by Parkhill and is available to advise anyone in the Trust about fraud, bribery and corruption, as well as provide awareness and training sessions. He will also be helping the Trust to implement the NHS National Counter Fraud and Anti-Bribery strategies. Brian says that the NHS recognises that most patients and staff are honest but due to a minority we have to take action and minimise the risk. If you suspect that a colleague, contractor or patient is committing fraud or bribery please contact Brian (concerns can be raised anonymously) on 07917 266 451, 020 3313 2866, brian.sharkey@parkhill.org.uk or brian.sharkey@nhs.net.



### Meg Brown, Health Advisor Support Worker

Meg has started in a new role within our Sexual Health services where she will be supporting Health Advisors in our Twickenham House and Heart of Hounslow clinics. Her work is a mix of administration, including re-calling patients with positive results, and outreach work. Meg previously spent two years as a Healthcare Assistant at Bournemouth GUM Clinic and working for the Chlamydia Screening Team. She especially enjoys health promotion and working with a diverse range of people, and is looking forward to her role evolving over time. So far Meg is finding West Middlesex to be a lovely place to work, with a good introduction to the clinics and lots of friendly support from her new colleagues.



### Jen O'Brien, Staff Nurse – Sexual Health



This is Jen's first nursing role specialising in sexual health. After qualifying as a Staff Nurse from Kingston University in 2011, she gained a year's nursing experience at Kingston Hospital's emergency department. Before she trained to become a nurse, Jen spent two years as a sexual health technician in Kingston Hospital's sexual health clinic. She found it really interesting working with a broad range of patients, and seeing them all the way through their treatment. She started at West Middlesex at the end of June and has been enjoying working with a great sexual health team in an organised environment. She will be mostly based in Twickenham House providing general sexual health screening, treatment, and seeing

patients in the specialist HIV clinic. Jen is looking forward to the challenges that this new role brings and hopes to continue broadening her knowledge and skills with further training.

### James Warden, ICT Support Service Manager

Jim has joined us from Barts and The London NHS Trust where he was responsible for the development and support of network infrastructure services across five hospital sites with over 10,000 users. He was also the technical architect for infrastructure design and implementation for the largest new hospital build in Europe. In his new role at West Middlesex Jim will be responsible for the managerial and operational delivery of information, communication and technology (ICT) services for the Trust and associated health community partners. He aims to develop and improve the service currently provided by ICT. This will include working with colleagues to identify where introduction of new technology can improve delivery of patient care, and ensuring best practice is followed.



## Leavers

### Dr George Hughes, Consultant Haematologist

Colleagues gathered to say a warm goodbye to Dr Hughes in June. He has retired after over 28 years at West Middlesex. We caught up with him before he left and



asked about some of the highlights of his time here. He recalled coming to work at the hospital because of its reputation for good students, junior doctors and consultants, which was true then and has remained true. He was the hospital's first Medical Director, from 1992 for five years, developing the role of being the bridge between consultants and senior managers, which he feels is still very important. He has led the development of the Haematology Department from one to three consultants, two registrars and an SHO. It's much busier now and has a thriving Day Unit with excellent facilities thanks to generous

donations from patients. He is proud of the high standard of registrars who come to train, and highly rate the training, in the department, and has enjoyed the exchange of ideas and skills they bring. He's also proud of leading a department where people enjoy coming to work, and has appreciated working in a hospital where people speak to each other at every level. Dr Hughes is looking forward to using his spare time for more travel, and time in his house in France where he can brush up on his language skills and spend more time with his grandchildren.

### Natashia Cedeno, Breast Care Specialist Nurse

We're waving goodbye to Nastashia in August after nine years as a dedicated breast specialist nurse working in the breast cancer team. She is taking on a new challenge for another trust where she will work as a metastatic breast cancer specialist nurse, looking after women who have spread of their disease. Natashia says she will miss working in a fantastic team where she has been able to develop her skills, and learn different perspectives on life through the people she has met and helped. She believes that a team that works together makes a real difference to patients. Natashia was actively involved in setting up a patient group Cancer Understanding by Experience (CUBE) and found time each year to help organise the Macmillan Coffee morning. We wish her well in the next chapter of her vital work. Natashia is pictured below (holding a thank you bouquet) with friends from the CUBE group.







# Compassionate care

In this section we highlight some of the positive feedback provided about West Middlesex. The hospital receives many compliments, however, it is often the complaints which gain more attention. We would like to remind staff that all their dedication and hard work is appreciated by the most important people, our patients, their families and carers.

If you would like to send in a compliment letter, write to the PALS team at the hospital address or visit our website: [west-middlesex-hospital.nhs.uk](http://west-middlesex-hospital.nhs.uk) and type *compliments* into the search box.

If you are a staff member or team who has received a compliment letter that you would like published in West Mid Matters, please contact us on x 6342 / [communications@wmuh.nhs.uk](mailto:communications@wmuh.nhs.uk).

## Via Twitter

Follow us on Twitter @WestMidHospital



## Via NHS Choices

*Mrs Holmes visited Orthopaedics services in July 2012*

The Consultant looked after my Daughter very well. I would be more than happy to see them again. ;)

*CatLamin visited Gynaecology services in June 2012*

I was really impressed with the kindness and support of the staff when I visited the colposcopy clinic today. Naturally I was very anxious and nervous and the staff went out of their way to make me feel as comfortable as they could.

*Erdilo visited General surgery at West Middlesex University Hospital in July 2012*

I had a small operation at Day Surgery and initially I was supposed to have full anaesthetic however the doctor came to see me and told me that it could be done with local anaesthetic, and whether I would like that. I agreed and he reassured me several times which made me feel very relaxed. At the operation theatre all nurses and support staff were very friendly and supportive, asked me several times if I needed extra blankets and if I'm comfortable. The staff prepared very well for the operation washed and sterilised themselves thoroughly, followed procedure. The surgeon explained everything thoroughly and asked me every time if I was OK. He told me what I would feel and what he was going to do. Within half an hour I was back at the ward smiling. Thank you everybody who was involved, you did a great job.

To comment about us on NHS Choices go to [www.nhs.uk](http://www.nhs.uk), go to Comments and search for West Middlesex University Hospital

## Via email

Back in April I had to take my other half to West Mid as she was having respiratory problems. Although the wait was long when we were seen we both both very impressed. The A&E team as a whole were fantastic. We wanted to single out Dr Catherine Walton as the care she gave us was outstanding. She was professional, personable and charming whilst clearly being very busy made time to care for my partner. We were very impressed with Dr Walton and I would like my thanks past on to her. *OM*

I would like to express my compliments for Mr David Davidson (orthopaedics) and thank him for his advice and support following my outpatients appointment Friday 13th July. Mr Davidson provided me with reassurance and the confidence that the fracture I sustained two months previously had healed. *NS*

This morning I had a pelvic ultrasound and would like to compliment all the staff in the department for their kindness, courtesy and professionalism. *DK*

I wish to praise Mr. Ramesh and the whole surgical, clinical and administrative team that made my brief stay in Day Surgery as smooth and stress free as it was... I was amazed at my pit-stop inguinal hernia repair in West Middlesex Hospital day surgery service. I reported at 07:30, was in Theatre by 11:00, in a recovery ward by noon and collected by my wife Sheila by 15:00. An appendectomy was done too as an unexpected extra...Thanks to all those who looked after me so well. I even came away with a goody bag of drugs and post-op plasters! *TC*

Send us your feedback by emailing [tellus@wmuh.nhs.uk](mailto:tellus@wmuh.nhs.uk)

# Annual Public Meeting & Exhibition

WE HAD A great turnout for our annual public meeting held in our Education Centre in July.

Chairman Tom Hayhoe, Chief Executive Jacqueline Docherty and Finance Director Rakesh Patel gave presentations on how the Trust has performed over the last year and our plans for the future.

Dr Alex Matson gave a talk on our Enhanced Recovery Programme which is helping patients to recover more quickly from surgery, illustrated by a video interview with patient Pam Croad.

We also held a mini exhibition before the meeting to showcase some of the great work being done around the Trust and in the health community.

Look out for details of our open day in 2013 which will be bigger and even better.







# Stories from the heart

Heart patients Nimit Shishodia, 32, from Brentford, and Joe Keyes, 78, from Isleworth, share their experience of diagnosis, treatment and recovery.

## Nimit's story

I FELT A severe pain across my chest after a workout in my shed. I thought it was caused by exercising in cold weather and took some Ibrufen tablets. The pain went after 20 minutes and I was fine later on.

On the following Friday morning I was playing with my baby boy when I felt a similar pain across my chest so I went to West Middlesex emergency department on my wife's suggestion. I had ECG scans and other tests which showed the pain was coming from my heart.

When the doctor informed me I was having a heart attack I was shocked and thought that I was too young but quickly pulled myself together. I was taken to Hammersmith Hospital for an angioplasty to unblock the arteries to my heart. In the ambulance I was given a spray to help my heart work more easily which tasted like vodka. The paramedics were very friendly and I didn't feel like I was in a critical situation.

I was fitted with a bare metal stent to unblock my right coronary artery and the whole procedure took 45 minutes. I spent a couple of days receiving good care from the hospital and was told I could return to work as long as it was non physical and my stress levels were kept to minimum.

I'm an IT contractor and unfortunately a contract was terminated which caused some emotional stress. I had an attack of pain in my left arm and my heart felt like it was sinking down. After I called 999 I was thoroughly checked over in hospital and had the 'all clear' but



medics explained that the pain might have been caused by the stress. Since then I've found strength in moments of weakness.

I continued karate training, lost around 20kg, and fought a martial arts championship just two months after my heart attack. I now commute to work by bike, averaging 30 miles a day, and have a healthier diet. The cardiovascular exercises have increased my stamina and I'm feeling much healthier in every aspect of my life.

I'm grateful to West Middlesex staff for diagnosing the symptoms so quickly and the way the Hammersmith Hospital team handled my case. The heart attack was a blessing in disguise and unlocked my potential. As Friedrich Nietzsche said. "That which does not kill us makes us stronger..."

## Joe's story

I FELT PALPITATIONS when I washing up and when I checked my pulse I had missing beats.

I didn't feel dizzy and the palpitations passed. It happened again the next two days when I was washing up (I started to think perhaps I shouldn't be doing the washing up!). I didn't panic but thought I'd better see my GP.

My surgery fitted me in straightaway and my GP arranged for paramedics to give me an ECG. They took me to West Middlesex where I was fitted with a heart monitor and kept in for observation.

I had another episode of palpitations and a consultant explained that if I had a pacemaker fitted it would keep

my heart pumping regularly and life would be normal. I wasn't concerned and I'd heard about people who'd had this done and returned to a normal existence.

I went to St Mary's Hospital where I was given local anaesthetic just below my left collarbone. The surgeon made a small cut and inserted the pacemaker, connecting it through the arteries to my heart, and I felt a light pressure but no pain.

I was given a booklet which explained the different types of pacemakers. Mine sends electrical signals to the heart muscle to keep it pumping regularly. I was taken back to West Middlesex to recover and within a day I was able to go home.

Six weeks later my pacemaker was checked and showed that my heart sometimes beats rapidly but not fully, so I'm taking Warfarin to help thin the blood and prevent clots. I was also invited to a cardiology clinic at West Middlesex where I discussed how I was managing after the procedure with specialist nurse Cas Shotter Weetman.

The pacemaker is quite a snug fit but I've become less aware of it over time. I think being fit helps you recover more quickly from an operation. I took up skiing at 48 and have been going regularly ever since so I hope to be back on the slopes next February.

Most of the guys who were on my ward found out they had a heart problem the hard way by collapsing somewhere and waking up with people around them. I was lucky that I picked my problem up early and my GP was on the ball. Check your pulse and if it is missing beats don't mess about – get down to your GP.



**Do you know how to check your pulse?**  
Go to [www.heartrhythmcharity.org.uk](http://www.heartrhythmcharity.org.uk) for a heart rhythm checklist  
Dial 999 immediately if you suspect that you or someone you know is having a heart attack:  
[www.nhs.uk/conditions/heart-attack](http://www.nhs.uk/conditions/heart-attack)



# Education, learning and development

WE WELCOMED OUR new Foundation Year One (FY1) doctors on 26 and 27 July (pictured left). They spent two days shadowing the current FY1 doctors before starting work in departments around the hospital. We also welcomed our new intake of Foundation Year Two doctors in August.

Serena Kang, Foundation Programme Co-ordinator, said: "We wish all of the new doctors well and hope they have an enjoyable time at West Middlesex developing their skills and experience. We would also like to say thank you to the Foundation Year doctors who are leaving us to move to the next stage in their career development and wish them well for the future."

## Contact us

**Editorial team:** Richard Elliott, Louise Jones

**Contact:** [communications@wmuh.nhs.uk](mailto:communications@wmuh.nhs.uk) / 020 8321 6342 / 5035

If you have an idea or article for inclusion in future editions of West Mid Matters please let us know via the contact details above.

We are always keen to hear your feedback on West Mid Matters - what you like about it and what you think could be improved - so please let us know.

If you would like to be added or removed from our mailing list, please email your details to: [communications@wmuh.nhs.uk](mailto:communications@wmuh.nhs.uk)