



west mid matters

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Heart appointment saved my life

WHEN 66-YEAR-OLD KEN Wilks walked into West Mid for a cardiology outpatient appointment, he had no idea that his life would be saved within a few hours.

Ken, a shop owner from Feltham, came to the hospital on 12th December 2011 for further investigation after seeing his GP about chest pain which he thought was indigestion.

He had an ECG and consultation with specialist nurse Agnes Kaba before taking an exercise test which monitored his heart function under stress.

Ken was running on the machine under the supervision of two physiologists when they told him they would have to stop the test. He started to feel "strange" and had a sudden pain across his chest.

The Rapid Access Chest Pain team and a medical team sprung into action to make Ken comfortable and stabilise his condition. He was swiftly transferred to a waiting ambulance which took him to Hammersmith Hospital's specialist heart centre.

Ken had an emergency angioplasty (to re-open his artery) and was back recovering at West Mid's Coronary Care Unit within hours. He was well enough to go home before Christmas and is now receiving cardiac rehabilitation.

He said: "When I was running on the machine my artery went from 60 per cent open to completely closed. Apparently there's only a very limited amount of time for blood supply to be restored to your heart. I might not have survived if it had happened outside the hospital. It was only because I went to get checked out that it happened in the best possible place.

"I would urge anyone who has symptoms that they're not sure about to go to their GP. And if you've got an outpatient appointment make sure you keep it because you never know what's around the corner.

"When I spoke to the nurses at my appointment they said I was one of three people booked in. But I was the only person who turned up. It made me think about what would happen to those two people who didn't come to get their heart checked out, and the people that could have had the appointments in their place."

To read more about Ken's experience turn to page 5.



"If you've got an outpatient appointment make sure you keep it because you never know what's around the corner"

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Neil goes for gold

NEIL SCHOFIELD MAY have only just turned 21, but he first started judo aged nine, became a black belt at 17 and gained his first gold medal in a competition at 19. Since then he has picked up a further two gold medals, including one at international level, as well as a string of silver and bronzes going back ten years.

Neil's latest achievement is being selected for the senior British Judo Squad, which will see him competing for his country in the European and World Championships this year. Neil will also be a reserve for the Olympic squad, ready to step in if one of the squad is injured.

At over 130 kilograms in weight, more than 20 stone, Neil might seem ideal for the hospital's security team. But his day job is working in the maintenance department of ETDE, helping fix faulty locks and door handles as well as other carpentry related issues.

While we would never wish anyone ill health, WMM hopes Neil gets a shot at the Olympics this year!



Neil Schofield with ETDE General Manager Caroline Laver



What matters to me

'NO CHANGE IS not an option' is a phrase you may have heard lately in relation to the NHS.

But what exactly does this mean, and how will it affect our hospital, our patients and our staff?

The NHS needs to ensure it meets the current needs of its patients, and make changes to anticipate the future needs for healthcare.

As life expectancy increases, we are seeing more and more patients with long term health conditions such as heart disease, diabetes and dementia that require ongoing treatment.

Nationally we need to do more to improve care, prevent the onset of some of these avoidable conditions and help patients take control of their own health where possible.

NHS North West London has recently launched a programme to improve healthcare for the two million people living in this area.

Called Shaping a healthier future, its aim is to tackle issues such as health inequalities that see a difference in life expectancy of up to 17 years in some parts of North West London.



Dame Jacqueline Docherty - Chief Executive

The programme is looking at the full picture of healthcare, including that provided by GPs, hospitals and community services.

It involves the input from patients and clinicians, who have an over-riding interest in getting things right.

Never before has a programme looked to address healthcare on such a large scale.

It gives us all an opportunity to have our say in the future of healthcare for us and future generations and I would urge you to find out more and to get involved where you can as your views really do matter.

Visit: www.northwestlondon.nhs.uk/shapingahealthierfuture for more information.

This it is not about is cutting back on services or closing facilities, although inevitably there will be some difficult decisions.

I know some of you are understandably worried about the hospital's future, but I would like to reassure you on this.

West Middlesex University Hospital is fortunate to be one of the most modern hospitals in the region and we continue to invest in improving our facilities.

We have an award winning maternity unit, dedicated stroke unit, busy A&E with a trauma unit, and a state-of-the-art diagnostic imaging department. We also provide convenient day surgery facilities

for a range of procedures.

If you are a regular reader of this magazine you will have heard of many significant changes and investments we have made over the past few years including a brand new natural birth centre, new MRI and CT scanners and most recently an urgent care centre, due to open in March.

We consistently meet or exceed key performance standards for patient care and are focusing on further improving patient satisfaction.

We face financial challenges, like many other acute trusts in London.

However, last year we achieved financial balance for the first time in three years and this year we are on track to deliver over £12 million of cost savings whilst achieving a surplus of £1.4 million.

West Middlesex is a key health facility in North West London and I have no doubt it has a strong future providing first class services to our community.

Our aim is to work with others across the sector to support developments which maximise the benefits for those who require our services.

Director's cut Learning from our patients' experiences... the changing landscape



Joe Johnson - Assistant Director for Patient and Public Involvement

THE FEEDBACK WE receive from people who are using our services, and their family and friends, is really important to us.

By listening and learning from what people tell us, we can improve the services we provide and it can also help us to plan for the future.

The comments we receive from people arrive through several different routes. Often people will simply tell our staff about their experiences whilst they are in

a department or ward.

Others prefer to provide feedback through one of the more formal routes such as our national or local postal surveys, or by sending a thank you card or letter.

Some people will write to us complaining about their experience or speak to our PALS (Patient Advice & Liaison Service) Team.

Whether the feedback is positive or negative, it all provides a rich source of information which helps us to reflect and ultimately to provide a better service.

We have seen a significant change in the way that people provide us with feedback in recent years.

We are finding that more patient feedback is being received electronically with the growth of the internet and development of our website.

Social media

The increase in social media means that more people are opting to provide feedback through routes such as NHS Choices (a national NHS website where patients can obtain information or provide feedback), Patient Opinion (another online feedback medium), or through social networking sites such as Twitter or Facebook. This is something that will

inevitably grow and develop further over time.

Video

The way that we use and learn from patient feedback is also changing with the availability of new technologies.

In the past year, we have started to capture some of our patient stories using digital video to help inform our local training sessions.

This approach has proved particularly successful in helping us to identify the themes around staff attitude, behavior and communication.

It has also helped us to better understand the emotional component of our patients' experiences.

The patient videos are also shown to our Trust Board so that our Executive team is kept aware of the different types of patient feedback we are receiving and the actions taken by staff to improve services.

Simulation

In the coming year we are planning to deliver new simulation training through our Education Centre for our doctors, nurses and therapists, using real complaint scenarios, role play and video stories.

From my own experience, I find that patients and their relatives/carers often tell us that they would like better information and involvement in their own care.

Communication

When I receive feedback via a complaint, I often find it's around issues relating to poor communication and attitude, and not the quality of the actual care provided to the patient.

It is often simple things such as somebody being friendly, courteous and kind that patients/relatives will remember.

We will continue to use innovative approaches such as patient video stories and simulation training to ensure that our staff learn from the patient feedback we receive and apply this learning to their day-to-day work.

Share your experience

If you would like to tell me about your experience as a patient at the hospital, or you are interested in taking part in the patient digital story programme, please feel free to ring me on 020 8321 6537 or send me an email at tellus@wmuh.nhs.uk.



Patients say care is “excellent” on obs ward

PATIENTS USING THE A&E observation ward have rated quality of care provided by staff as excellent. The feedback came from a survey carried out by first year foundation trainee Dr Richard Kirkdale and overseen by Dr Jasmin Cheema, Consultant in Emergency Medicine.

Over 95 per cent of patients who completed the survey gave an excellent or good rating for:

- Quality of care
- Their overall experience
- The explanation given to them about where they were and their purpose for being on the ward
- The swiftness of staff to respond to them if needed

98 per cent of patients also rated the courtesy and consideration shown by staff as excellent and good. 100 per cent of patients rated the cleanliness of the ward as between excellent and fair.

As well as the overall positive feedback, some patients also provided helpful comments about the provision of hot food on the ward and ways to improve this are being looked at.

The survey was carried out on the ward between September and November 2011 by Dr Kirkdale and A&E Technicians to find out what was being done well and what areas needed improvement. 86 out of 100 patients surveyed provided feedback.

The observation ward sees patients presenting to A&E who need observation and treatment which may take longer than four hours. It has six beds and can treat over 20 patients in a day. Staff on the ward look after patients with a variety



Dr Richard Kirkdale sharing the survey results with Senior A&E Staff Nurse Janet Bright-Davies

of issues but typically patients may need observation after seizures, may be awaiting specialist diagnostic tests such as head scans, or may need to sober up from alcohol so they can be clinically assessed.

Dr Kirkdale explained: “The ward always has a doctor, a nurse and an A&E Technician on duty during the day. People presenting to A&E are often anxious or feel vulnerable, and it’s a very busy place with a high turnover.

“On the obs ward they’re cared for by staff who are close at hand over a longer time which perhaps partly explains the positive feedback.”

Comments from the survey included: “The Staff were amazing”, “All Excellent. Thank you all so much”, “Staff were brilliant and caring”, and “A credit to the NHS”.

Urgent Care Centre on schedule

WORK ON THE new Urgent Care Centre has been progressing to plan, and is on schedule to open in late March.

The centre is located at the front of our existing A&E department and will care for people who have a minor injury or medical problem that is not life-threatening but cannot wait to see their GP.

This will free up A&E so it can focus on patients requiring emergency treatment as a result of serious accidents or life-threatening medical conditions.

The Urgent Care Centre will be run by Hounslow and Richmond Community Healthcare NHS Trust.

Food and drink matters



Staff Nurse Katja Mukhtar with inpatient Ruth Woods on Syon 2 ward

A NATIONAL CAMPAIGN to highlight the importance of good food and drink for hospital patients was supported by West Mid in January.

Poor nutrition and hydration leads to poor health, increased and prolonged hospital admissions, and increased cost to the NHS.

The campaign was run by the National Patient Safety Agency and Patient Safety First to reinforce and focus energy and activity on nutrition and hydration for patients staying in hospital.

There were a range of local initiatives to raise the profile of this very important safety issue at our hospital.

Senior executives and ward sisters observed meal times, nursing records were audited, and patients were observed to ensure they could reach a glass of water (unless nil by mouth).

Dietitians were also on hand in the main atrium providing information on healthy eating.

Julie Wright, Director of Nursing and Midwifery, said: “We have an ongoing commitment to ensuring our patients have food and drink that supports their wellbeing and recovery while staying with us. The week was a great opportunity for us to give extra focus to this important area.”

Guide to our discharge lounge

What is the discharge lounge?

It provides a safe and comfortable environment for patients being discharged from hospital; either from an inpatient bed or from A&E.

When is it available?

9.00am until 7.00pm, Monday to Friday.

Where is it located?

At the front of Crane Ward, first floor of the Marjory Warren building.

What are the benefits?

- Friendly discharge lounge staff speak to patients to ensure all their needs are catered for before leaving
- Patients are provided with light refreshments whilst they are waiting to leave. There are magazines, a TV, reclining chairs and easy chairs, plus two beds for ongoing treatment
- Pharmacy staff assist with prioritising take-away medicines
- Patients can use a phone to organise their journey home
- Single collection point for inpatients using hospital transport
- A ‘Welcome Home’ pack, in partnership with Age UK, will be available to patients who are discharged after 5pm. It includes a small amount of tea, coffee, milk, sugar, biscuits, to ensure that patients can have a warming drink and a little sustenance when they reach home
- A dedicated advice corner with Age UK is being planned

Who are the staff?

A Nurse and a Healthcare Assistant are on duty to assist patients. The Healthcare Assistant assists patients with:

- Transport, should patients have a medical need for hospital transport
- Any support matters before discharge e.g. contacting relatives, friends, confirming transport, collecting takeaway medicines etc

The Nurse assists with all of the above and:

- Administers final doses of IV medication
- Advises about take-away medicines
- Speaks with the patient’s GP about any relevant issues, including follow-up appointments if required

Why do we have a discharge lounge?

It makes the process of leaving hospital better for patients. The lounge also enables ward staff to improve the flow of patients through the hospital, and patients continue to receive excellent care in a dedicated area until they leave.

Who do I contact to transfer a patient?

If you have a patient to transfer please dial extension 6028 and give the patient’s name, bed number and ward. The discharge lounge staff will do the rest.

What if I have a comment, question or complaint?

Please dial 07771 763305 to speak to Andy Finlay, Performance & Operations Manager, who will be delighted to assist you.



Prostate cancer

March is Prostate Cancer Awareness Month. We spoke to Consultant Urologist Dr Mathias Winkler to find out more about this disease.

Prostate cancer is the most common cancer in men. Each year in the UK about 36,000 men are diagnosed with prostate cancer and it accounts for 25 per cent of all newly diagnosed cases of cancer in men.

The chances of developing prostate cancer increase as you get older. Most cases develop in men aged 70 or older.

For reasons that are not understood, prostate cancer is more common in men of African-Caribbean or African descent, and less common in men of Asian descent.

The causes of prostate cancer are largely unknown.

What is the prostate?

The prostate is a small gland in the pelvis that is found only in men. It is about the size of a walnut, and is located between the penis and the bladder.

It surrounds the urethra, the tube that carries urine from the bladder to the penis. The main function of the prostate is to help in the production of semen.

What are the symptoms of prostate cancer?

Prostate cancer normally causes no symptoms until the cancer has grown large enough to put pressure on the urethra.

This sometimes results in problems associated with urination.

Symptoms can include:

- Needing to urinate more frequently, often during the night
- Needing to rush to the toilet
- Difficulty in starting to urinate or pee (hesitancy)
- Straining or taking a long time while urinating
- Weak flow
- Feeling that your bladder has not emptied fully

Most commonly these symptoms are due to non-cancerous enlargement of the prostate which occurs with increasing age.

They shouldn't be ignored as they can be treated easily and allow the doctor or nurse to run tests which may exclude prostate cancer.

Two of the best tests to exclude prostate cancer are physical examination of the prostate and a blood test called PSA, Prostate Specific Antigen.

Both can be obtained free from your family doctor.

What are the risk factors?

There are a number of known risk factors for developing prostate cancer, including:



By Dr Mathias Winkler, Consultant Urologist

Age - the risk of prostate cancer rises with age, from about 50 years, and increases as you get older.

Ethnicity - prostate cancer is more common among men of African-Caribbean and African descent.

The condition is relatively rare among men of Asian and South and Central American descent.

Family history - having a close male relative, such as a brother, father or uncle, who had prostate cancer seems to increase the risk of you developing prostate cancer.

Research also shows that having a close female relative who developed breast or ovarian cancer may also increase the risk of you developing the condition.

Obesity, diet and exercise - recent research suggests that there may be a link between obesity and prostate cancer.

Research is ongoing into the links between diet and prostate cancer. There is evidence that a diet high in calcium is

linked to an increased risk of developing prostate cancer.

Reducing the risk

Whilst the exact causes of prostate cancer are not known, some research has shown that prostate cancer rates appear to be lower in people who eat foods containing certain nutrients including lycopene, found in tomatoes and other red fruit, and selenium, found in brazil nuts.

Men who take regular exercise have also been found to be at lower risk of developing prostate cancer.

It follows that to improve your health generally it is recommended that you eat a balanced diet containing your five-a-day, take regular exercise, quit smoking if you are a smoker and reduce your alcohol intake.

If you have any concerns or notice some of the symptoms then your family doctor, GP, will be pleased to discuss this with you. So don't delay in making an appointment.

How can I find out more?

More information on prostate cancer is available from several reliable websites, or arrange an appointment with your GP if you are concerned.



- www.nhs.uk/conditions
- <http://cancerhelp.cancerresearchuk.org/type/prostate-cancer/>
- www.prostate-cancer.org.uk

Prostate cancer is the most common cancer in men

Photo gallery



Ways of providing excellent care for older patients were shared between health professionals from West Mid and ISSSTELEON hospital, Mexico on a cold January morning. Dr John Platt, Consultant in Care of the Elderly (second left), and Ahlam Wynne, Stroke Specialist Nurse, hosted Dr Fernando Coindreau, Chief of Geriatrics (third left) and his clinical colleagues from ISSSTELEON. They came to find out how West Mid's services for older patients are run and to share knowledge and experience, as part of a wider tour of centres in UK and Spain. Their hospital is planning to build a range of services for older patients including day care, memory clinic, middle stay unit (stroke and orthogeriatric), long stay unit and palliative unit.



The Ear Nose and Throat (ENT) Team was praised after an unexpected visit from Seema Malhotra, MP for Feltham and Heston in January. Ms Malhotra said: "I was really grateful to the ENT team for their wonderful service when I brought a close family member to West Middlesex for an emergency procedure. The nurses and specialists worked so hard and with great dedication and care for patients." Luckily someone was on hand to take a photo of the MP with some of the team. Pictured left to right: Dinah Laryea, Team Leader (Head of Neck / General Surgery Team), Seema Malhotra MP, Mini Mathew, Staff Nurse, Nenita Chavez, Health Care Assistant, Christopher Balagtas, Health Care Assistant, and Dr Oulabi.



My experience (cont. from front page)

KEN, A SHOP owner from Feltham, had sudden chest pain in November 2011 while watching television. He thought it was indigestion but then developed nausea and acid reflux. He explained: "My wife Shirley suggested I go to my GP. I hadn't been for years and thought it would be good to have an 'MOT'."

Ken's GP arranged blood tests and an appointment at West Mid where he saw specialist nurse Agnes Kaba who is lead for the Rapid Access Chest Pain service.

Sudden pain

Ken remembered: "I had an ECG and gave my history, and Agnes explained that I could have angina. When I went for my stress test at 1.30pm I had to have about 16 sticky bits placed around my chest. I took my shirt off thinking, 'There's nothing wrong with me!' I wasn't sure how long I'd been running when I was told they'd have to stop the test. I felt strange and had this sudden pain across the top left-side of my chest. Then all hell broke loose!"

The physiologists who had been monitoring Ken got him off the running machine so he was lying flat. Agnes was quickly on the scene and called for consultant Dr Nickolaos Pantazopoulos.

Ken said: "He got hold of those things they stick in your vein to put medication through. He apologised to me that it was going to hurt a bit but it was an emergency and he needed to get the stuff into my arm quickly. It was painful but I was thinking of so many other things."

Ken was transferred to the resuscitation room in A&E where he was given morphine and other medication. He said: "I was looking around mesmerised thinking, 'What's going on?' I felt alright – the pain was gradually going."

Reassurance

Ken's wife Shirley was able to join him in the back of the ambulance on the way to Hammersmith Hospital's specialist heart centre. Ken said: "I was feeling a bit nauseated, and uptight but I didn't feel scared because I knew that I was being looked after by experts. Everyone had reassured me and explained what was happening every step of the way."

"Within about 15 minutes we'd arrived and I was wheeled into theatre. The doctors there explained that I would feel a bit of pressure in my arm but that this was normal. There was a big camera buzzing around me which looked like something from a war ship. I could see my heart pulsating on the screen and could hear the doctors giving instructions as a tube was fed through an artery in my arm and up across my chest to the arteries around my heart. It sounded like my arteries were a sort of road map, you know, 'Take a right-hand turn!'

"They found the blockage by injecting a dye and told me they were going to insert a 'balloon' up through the artery and into the blocked area to



Ken with wife Shirley in the hospital garden

open it. I thought, 'Hello, it's party time!'. Then they fitted two stents. It didn't feel a long time and I was conscious throughout the whole thing. The pain had gone and I lay there wondering when they were going to start doing something because I couldn't really feel anything being done!

Surreal

"I was taken back to West Mid to the Coronary Care Unit where I stayed for monitoring. I managed to lie in bed but didn't sleep. I was thinking about everything that had just happened in the last few hours. It was all so surreal – you don't think it will happen to you."

"After a couple of days Cas Shotter, the Cardiology Nurse Specialist, came to see me and said she thought it was time we had a little talk. She pulled the screens around my bed and said that I'd been through quite an experience and it was normal for people to get very emotional at this time."

"Until that point I'd put on a brave face and hadn't shown any emotion. But it was like I was being given permission to let go and I let it all out. I was in floods of tears. It was like a big release."

"I've felt ok since the procedure, and changed my diet so there's more fish and less fried stuff. I've got follow-up appointments and rehab to do so I can safely build up my exercise levels. I was a smoker and I'd had a stressful year. My mum also had heart problems. I've been told that you can't pinpoint one single factor that led to my attack – it's a combination of all these things."

"I'd like to stress how fantastic the treatment was that I received from start to finish. It was gold standard and all of the staff were absolute diamonds."

Handbook for hearts

AN INNOVATIVE NEW book to empower patients to look after their hearts has been written by Agnes Kaba, Lead Rapid Access Chest Pain Service Specialist Nurse.

My Healthy Heart – The Green Book has just been published, and is available exclusively for West Mid patients while Agnes audits how helpful it is.

The book is designed to be used alongside assessments and support provided by a doctor or nurse.

It starts with sections for the patient to record the results of their vascular risk factor assessment (cardiovascular disease is the narrowing of the arteries which can lead to a heart attack).

These include height and weight ratio, waist measurement, blood pressure readings, blood sugar and cholesterol levels, smoking status, exercise levels, and alcohol intake.

Patients can then record later results, as well as appointments, medications, and plans for reaching their goals to reduce their risk factors.

Although other heart services use other tools, the book is the first of its kind in its approach to enabling patients to understand their risk factors, and motivating them to set their own action plan.

Agnes explained: "Often when I ask patients about their blood pressure they can't give me the exact figures of what it usually is, what the result means or what it should be."

"Healthcare is now a partnership between the clinician and the patient"

Specialist Nurse (and author!) Agnes Kaba



"We give explanations and information in clinic but it played on my mind that there wasn't enough understanding about the risk factors for cardiovascular disease. Healthcare is now a partnership between the clinician and the patient. I wanted a tool that could help the patients take charge, with clinical guidance."

Although she had the idea for many years, the support and encouragement of colleagues helped Agnes get it off the ground when the right opportunity came along.

She explained: "I was put in touch with Dr Henry Purcell, Chief Editor of the British Journal of Cardiology, who was very keen on the idea. Within two weeks I had met the publishers, NSHI, and it took off from there."

"I felt quite overwhelmed by it all but Dr Sadia Khan [Consultant Cardiologist at West Mid] encouraged me to keep going, and Chief Executive Dame Jacqueline Docherty recognises this as a 'splendid piece of work'."

Agnes is aiming to recruit 100 patients to use the book and would love to hear from West Mid colleagues who may find it helpful for their patients. You can contact Agnes on ext 5671 or email agnes.kaba@wmuh.nhs.uk.

Listen to your heart - don't ignore the symptoms

Heart attack symptoms can vary for different people, ranging from a severe pain in the centre of the chest, to mild discomfort, jaw pain, left arm pain, or symptoms of indigestion. In some cases chest pain or discomfort is accompanied by other symptoms like shortness of breath.

If you, or anyone around you, experience any of these symptoms don't ignore them. Phone 999 for an ambulance immediately. This means you will get treatment as soon as possible. The sooner you get treatment, the greater your chance of survival.

British Heart Foundation: www.bhf.org.uk/heart-health/symptoms

NHS: www.nhs.uk/conditions/heart-attack

Lifestyle advice: <http://www.nhs.uk/livewell/healthyhearts/pages/healthyheartshome>



Comings & goings

Starters

Sarah Glencrose - Children's Community Sister



A warm West Mid welcome to Sarah, who has joined our Children's Hospital 2 Home Team from her previous role with Shooting Star Children's Hospice in nearby Hampton. Along with other members of the team, Sarah provides home nursing care to children across the Hounslow borough who would otherwise be in hospital. Early discharge from our Starlight Ward is also supported, as evidence shows that children respond and comply better to treatment at home. As well as providing nursing care and support to children and their families, Sarah liaises with healthcare professionals across acute care and in the community. She told West Mid Matters she is happy to be furthering her experience of working out in the community, while also developing her clinical and assessment skills in a nurse-led environment. She's also enjoying having the best of both worlds by being a lone worker and part of a team.

Arpita Roy - Consultant Radiologist



Dr Roy joined us at the end of November and is settling in nicely thanks to the friendly and welcoming environment of the radiology department. Before her new role at West Mid, Arpita (or 'Molly') spent five and a half years as a specialist registrar in radiology at St. Bartholomew's and The Royal London Hospitals in London. She completed training in all subspecialties of radiology and gained specialist experience in musculoskeletal and gastrointestinal imaging, using her skills to help treat help trauma patients at the regional trauma centre and home of 'HEMS' - the helicopter emergency medical service. Her new role enables her to focus more on musculoskeletal work, working with Dr Martin Watson and Dr Paul Sookur. She's enjoying the range and variety at West Mid, with clinical images being used widely across different departments to help diagnose and manage patients' conditions.



Gema Montoya; Kierra Atree; Louise Corless - Maternity Assistants

We welcome Gema, Kierra, and Louise, who have joined the team at Queen Mary's Maternity Unit. They've come from a variety of backgrounds: Louise was previously a hairdresser, Kierra was a senior care assistant at the Royal Hospital Chelsea and is now training to be a nurse alongside her new role, and Gema worked as a senior care assistant at nursing home, a barista at Starbucks, and as a flight attendant where she gained experience in emergency medical situations. Their new role includes keeping areas clean and tidy, supporting mums with breast feeding advice, taking blood pressure, and taking out cannulas and catheters. After induction and shadowing sessions with other maternity assistants they're now gaining further experience and training on the job, and are looking forward to a course on how to take blood.

Movers

Ashvin Nundloll - Lung Function and Sleep Technician

Ashvin's colleagues in Outpatients would like to wish him well in his new role as Lung Function and Sleep Technician. Ashvin has been at West Mid since 2003, and previously worked as a Staff Nurse overseeing Outpatient Department 2.



His new role sees him working within the Chest Clinic under consultants Dr Winning and Dr Mann. This involves him carrying out lung function tests on patients with respiratory problems and monitoring whether this worsens over time. He will be working with Dr Winning in the sleep laboratory, where patients with suspected sleep apnoea are assessed.

Leaver

Collie Stewart - Support Service Manager

We bid farewell to Collie who is joining American IT company Citrix Systems to take up a technical management role within their Networking Division. His new role provides an opportunity to return to the private sector and to leverage the technical skills that he has developed over the last 12 years. Collie says he has enjoyed his time overseeing the IT support team and the many highlights include completing a project to improve IT security within the trust, and working with the infrastructure team to develop a robust and resilient IT network over the coming months.





Compassionate care

In this section we highlight some of the positive feedback provided about West Mid. 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 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.

I have today attended the West Middlesex Hospital for a fibre-sigmoidoscopy. I was dreading this appointment, partly because of the nature of the examination but mainly because I am deaf and this can cause problems with communication.

I need not have worried on either score. The internal examination all went off very smoothly and the nurses and staff of the Endoscopy Unit spoke very clearly to me and made sure I understood exactly what was going on.

Please pass on my sincere thanks to these nurses and staff. It made my day so much easier and I appreciate their help.

Letter from Mrs B.

I am writing to offer my sincere thanks and compliments regarding the excellent care that my wife and newborn son received from the midwife team and other medical staff late last year.

My wife was admitted to your maternity unit and gave birth by emergency caesarean to a very healthy baby later that day. At all times the staff charged with her care were kind, supportive and, above all, extremely professional in all that they did for us.

Given the immediacy of the complications giving rise to my son's arrival by swift caesarean intervention, I could not have been more impressed with the clarity of communication between the midwife team, the anaesthetist and surgeon involved and the way in which they kept us informed and helped us to make good decisions.

What really struck me was their efficiency and calmness under pressure. At all times I felt that my wife and unborn child were in very safe hands.

Letter from Mr F.

I felt completely safe in the hands of the pleasant staff at West Middlesex Hospital. The orthopaedic team could not be better and I feel that the treatment I received was second to none in all respects. I needed 2 operations as the result of a broken shoulder, both of which went very well. I was lucky to come to this hospital.

Modern, clean and well equipped hospital, efficient service, competent staff.

Vincent MacDonald on NHS Choices website

Friendly environment, always had time to answer questions or assist with baby. Couldn't have done enough for us. Excellent service from beginning (booking in) to end (final health visitor visit...and beyond)

Comment on NHS Choices website

West Middlesex Hospital is amazing. Seen, diagnosed and received treatment within 30 minutes. Consider it recommended.

CMNaughtyAlice on Twitter

Using the Olympics buzz for a fitter 2012

IN THE MIDST of winter it's hard to imagine what summer will be like, with the celebrations of the Queen's Diamond Jubilee and a certain sporting event that you might be aware of...

In just a few months the London 2012 Olympic Games will hit the capital. The Games take place from 27th July to 12th August, and the Paralympic Games from 29th August to 9th September.

It's arguably the biggest sports showcase on Earth and the dramas and heroics that unfold will hopefully be inspirational to us all. (There's nothing like watching a thrilling athletics race for motivation to go outside for a run!)

Boost

The buzz of the Games is a boost to West Mid and other NHS organisations, as we continue to encourage and support our staff and local communities to take care of their health.

As Dr Stella Barnass said in the last *WMM* (Director's Cut, January 2012), "The aim is to make changes that are sustainable in the long-term and prevent illness where possible."

Our Occupational Health & Wellbeing department has an ongoing programme of healthy workforce initiatives for staff which include yoga, massage, and physiotherapy. (If you have any ideas please contact them on 020 8321 5044.)

Our Travel Plan team supports active travel, organising events around cycling and walking to work, maintaining bike shelters around the hospital and supporting our voluntary Bicycle User Group.

Staff advise patients about healthy lifestyle changes as part of their care and treatment, there is information on our website, and you will be hopefully be familiar with the expert advice in our Word from West Mid on these very pages.

Our health experts have also started providing articles about health conditions and the benefits of exercise to a website for leisure centres run by Fusion Lifestyle for Hounslow Borough Council. Follow us on Twitter (@westmidhospital) to find out when new articles are posted.

Benefits

If you've started a new exercise regime for 2012 but your enthusiasm is dropping along with the temperature, or you keep putting off the 'right' moment to start getting fit, here's a little reminder of why it's worth the effort.

Regular exercise can reduce your risk of major illnesses like heart disease, stroke, diabetes and cancer. It can also:

- Improve your strength and flexibility
- Improve your body shape and appearance
- Increase your energy

- Improve your mood
 - Reduce stress and anxiety
 - Help you to relax and get a good night's sleep
 - Improve your self confidence and your social life
- [*WMM* editors promise to practice what we preach and get the running trainers back out of storage...]



Tell us your Olympics story

Have you got tickets for an event? Are you volunteering during the Games? Have you been chosen to carry the Olympic Torch? We'd love to share your stories in *West Mid Matters*. Email us at communications@wmuh.nhs.uk.



Education, learning and development:

WIRED keeps track of vital training

AN INNOVATIVE COMPUTER program created at West Mid is helping staff keep track of essential training.

WIRED (Workforce Information Reporting Engine Database) has proved such a success that it's now being used by other hospital trusts across London.

The programme was developed by Harjinder Mann, Information Analyst, after the hospital identified the need for a reliable record of training that staff had done and needed to do.

It's updated by a nominated person in each training area (for example fire, infection control, or information governance) and everyone at the hospital can access it via the intranet.

WIRED is helping staff and managers keep track of training they need to do to ensure high quality and safe working methods.

It's also an invaluable tool for helping managers and their staff schedule training sessions, and providing a variety of information for staff on all levels.

It creates reports which are used by the trust board, and external organisations which monitor the training of NHS staff.

Skills for Health which supports the training and skills of NHS staff has adopted WIRED as part of its national improvement programme, and the database is now

being used by other health trusts.

Monique Chituku, Transfusion Nurse Specialist, has to deliver essential blood transfusion training to nearly 1,000 staff across the hospital. She was one of the first clinicians to use WIRED.

She said: "It has revolutionised the way I organise training, allowing me to focus on training the right clinical staff and thereby ensuring that patients receive high quality care.

"WIRED enables me, the clinician and managers to clearly see which staff need training and levels of compliance across clinical areas. This management information is required by the Trust Board and external regulators such as Care Quality Commission and NHS Litigation Authority."

Information Governance (IG) and Standards Manager Graham Trainor finds the programme helpful for promoting IG training.

He explained: "I can send out a link to WIRED to managers and staff so they can instantly check where



Monique Chituku, Transfusion Nurse Specialist, checks who needs training

they / their teams are with IG training.

"The fact that all training is now on WIRED and can be easily viewed by individual, department or division is fantastic.

"It's also very useful when doing staff

appraisals as it gives you an easy update to all the mandatory and statutory training for your staff – so you don't have to waste time chasing up certificates and last attended dates in a dozen different places."

Staff: Have you checked your training record?

You can access WIRED via the intranet's education, learning & development section. Click on the Skills for Health WIRED icon. 'Consolidated view by employee' will show your training record but why not take a look around the programme to get other views of training.

Bringing learning to life



WEST MID HOSTED the North West London Neonatal Network and the Neonatal Transport Team for a training day in January. It was the first time the training had been held outside the Queen Charlotte's and Chelsea Hospital. The trainees and faculty said they were very impressed with the facilities and work put in by Paediatric Consultant Dr Nour Elhadi, and Nikki Jones, Senior Resuscitation Officer and Simulation Co-ordinator.

The day included a lecture on the importance of human factors in improving neonatal care, and simulated scenarios following the journey of managing a pre-term baby born at 25 weeks gestation. Equipment was set-up, including life-like models, and a professional actor played the role of a mother to make the scenarios as realistic as possible.



Shape the future of your local community health services

Hounslow and Richmond Community Healthcare NHS Trust is applying to become a NHS foundation trust. It provides most of the community-based health services in the two boroughs and is asking for the views of staff, patients, relatives, carers, health economy stakeholders and partner organisations on its plans. Its public consultation runs until Friday 27 April. To have your say and find out more visit www.hrch.nhs.uk or email communications@hrch.nhs.uk for a hard copy of the consultation document.

Contact us

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Contact: 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