trustnews

Chelsea and Westminster Hospital NHS
NHS Foundation Trust

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Singer-songwriter Sophie Ellis-Bextor (left) presents Medical Day Unit staff with the Team of the Year award last May

Nominations now open for Star Awards

Everyone is invited to submit nominations for outstanding individuals and teams who make the greatest difference to our patients and our hospital for this year's Chelsea and Westminster Star Awards, supported by CW+.

Do you know a member of staff or a team who deserve recognition for their outstanding work?

The Star Awards, now in their fourth year, recognises those staff who embody our Trust values of Respectful, Kind, Safe and Excellent. We have refreshed the award categories this year to bring them in line with our values and corporate objectives. Staff are invited to nominate colleagues in eight staff choice categories, in which both clinical and non-clinical staff will be recognised. Nominations must include evidence that the member of staff or team demonstrate how they work to the values and vision of the Trust.

Our Foundation Trust Governors—who include elected representatives of patients, members of the public and staff—will be invited to nominate staff for the Council of Governors Special Award.

Chief Executive Libby McManus will be invited to present her Special Award in recognition of an outstanding individual or team.

The awards are made possible thanks to the generous support of CW+, who this year will also be presenting their own special award as well. The charity exists to make care better for patients and their families through pioneering research, innovation, art and design—www.cwplus.org.uk.

Chief Executive of CW+ Mark Norbury said: "I'm delighted that CW+ is once again supporting the Star Awards. The care and commitment of the hospital team is inspiring and we're proud to celebrate all they have achieved. Through our work on art and design, raising funds for research, and investing in clinical innovations, we rely on the passion and brilliance of the Chelsea and Westminster staff. This is a nice way to say thank you."

The awards will be presented at an evening ceremony where all shortlisted staff and their guests will be invited to attend. To nominate a colleague or team for an award please use the online form at **www.chelwest.nhs.uk/starawards**. We have withdrawn paper nominations this year to save money through printing and administration time costs but if you don't have access to a computer please call Annie Duffy (020 3315 5869) or Tim Fairclough (020 3315 2272) who will take your nomination (closes 27 February).

2015 Star Award categories

- **Inspirational Leader of the Year:** An individual who embodies the best of Chelsea and Westminster including the values, listening to patients and staff, communicating the vision, motivating and developing their staff, providing efficiencies, and focusing on quality.
- **Safety Award:** A team or individual who has made our hospital as safe as possible for patients, relatives, carers and staff. Nominations must show evidence of a project, process or achievement which has excelled in terms of safety standards and shown openness in regards to safety and risk reporting.
- **Kindness Award:** A team or individual who has gone the extra mile to help patients and/or service users. Nominations must show evidence of a project, process or achievement which has anticipated the needs of patients or internal customers, listened to concerns and shown compassion and understanding.
- **Excellence Award:** A team or individual who has aspired to be the best in all their actions and interactions, and sought to improve performance to deliver the best outcomes for patients. Nominations must show evidence of how the nominee has used feedback to make improvements and maintained professional conduct at all times.
- **Respectful Award:** A team or individual who is aware of people's diverse needs and seeks to provide the appropriate support, showing discretion and sensitivity at all times. Nominations must demonstrate evidence of how the nominee has improved privacy and/or dignity and shown respect for patients and colleagues.
- **Public Health Star of the Year:** A team or individual who has improved public health and developed integrated care.
- **Education Star of the Year:** A team or individual who has created an environment for learning and discovery to benefit patient care.
- **Enterprising Health Partnership Star Award:** An individual or team chosen by CW+ and Chelsea and Westminster who have created an innovative project at the hospital that improves patient care and experience, and which generates revenue or real cost savings for the hospital.
- **Efficiency Star of the Year:** A team or individual who has delivered efficiency savings for their department or the wider Trust—through a product or process change, or an innovative way of working, for example. Nominations must show evidence of a saving, cost improvement or income generation.
- **CW+ Special Award:** A team or individual chosen by CW+ who has championed patient experience at Chelsea and Westminster. Nominees must demonstrate a project, process or achievement that has made a significant improvement to patient experience at the hospital.
- **Council of Governors' Special Award:** A team or individual chosen by the Council of Governors.
- **Chief Executive's Special Award:** A team or individual of the year selected by the Chief Executive.

Our values: 'It's who we are'

Our values define what patients should expect when they are cared for at Chelsea and Westminster and how all staff can help to meet those expectations.

Our values are:

S Safe
E Excellent
K Kind
R Respectful

Quick bites

Improved patient experience for patients using the radiology booking processes

A redesign allowed for an administration hub to be located at the back of reception.

All telephones lines have been transferred from reception areas to the hub where the lines are manned throughout the day.

In addition, appointment letters have been changed providing new contact numbers dedicated to individual areas—CT, MRI and Ultrasound.

All appointment letters now have a dedicated radiology email address for patients to contact the department when experiencing difficulties during peak telephone time.

These changes have resulted in a dramatic reduction in complaints.

Improved day case rates

The surgery team, with the support of the Project Management Office, has been working on improving our day case rates for hernias.

It means that patients do not have to stay for a night in hospital which is generally preferred by patients, speeds up their recovery and helps free up much needed inpatient beds so that A&E patients requiring admission are not delayed.

Our values: respect

We will be re-launching our LGBT staff network group to ensure staff have a welcoming place to discuss any issues and help to raise awareness.

If you are interested in being part of the network please contact either lee.watson@chelwest.nhs.uk or l.depalo@imperial.ac.uk.

To find out more about the Diversity Champions programme more generally and how to get involved please contact Mary Sampson (Corporate HR Manager) at mary.sampson@chelwest.nhs.uk.

Shaping a healthier future (SaHF)

The North West London programme board met on 18 December and agreed for the implementation business case to be submitted to the Department of Health.

This includes the proposals agreed by our Board for significant capital investment on site and at Doughty House.

This will increase our bed base, staffing and other capital requirements to allow us to safely increase the level of activity at the hospital.

Libby's View by Libby McManus, Chief Executive

Welcome to the first edition of *Trust News* in 2015—and my first edition as Chief Executive.

I am delighted to have taken up the leadership reins of such a wonderful organisation with dedicated staff committed to providing you with the best care possible while in hospital.

I also pay tribute to my predecessor Tony Bell and I am sure you will join me in wishing him well.

As you know I was Chief Nurse and Director of Quality prior to taking on my current role and, as such, my focus in all I do will continue to be on providing patients with the best quality care and experience.

In the interim I am delighted to announce that Vanessa Sloane will be Director of Nursing while our Medical Director Zoë Penn will take on the remit of quality.

We will also be welcoming a new Chief Operating Officer, Karl Munslow-Ong, at the beginning of March who is joining us from Hillingdon Hospital.

Winter still retains its grip on us with all the inherent pressures on our services. You cannot have avoided the press coverage about struggling A&Es and waiting time breaches.

I am proud to say that Chelsea and Westminster Hospital has performed well over the past few months despite these pressures.

However our data shows us where we must now focus on improving the acute patient pathway and organisation of care in the hospital with our partners. This is so that no-one stays in hospital longer than they medically need to.

My focus, alongside my executive and non-executive colleagues, is on doing the day job well and prioritising our longer term efforts into our proposed acquisition of West Middlesex University Hospital and implementing the essential elements of Shaping a healthier future.

To deliver against these priorities, we must put our *People First*—patients, staff, members and volunteers.

I want to make sure that staff feel they enjoy coming to work, that volunteers enjoy their time at the hospital, that patients feel supported, and that all who care about Chelsea and Westminster feel involved and listened to.

If you are interested in becoming one of our hospital volunteers, please visit the following homepage and fill out an enquiry form which you can find at www.chelwest.nhs.uk/volunteers.

I believe 2015 will mark new beginnings and opportunities for all of us. I look forward to sharing with you our successes and improvements as the year progresses.

Top tweets

Alison Cameron @allyc375

Am getting out of hospital tomorrow. Thanks @ChelwestFT as the care has been faultless—compassion in action.

3:31pm • 9 Jan 2015

Jackie Kabler @jackiekabler

@ChelwestFT Your A&E staff were absolutely fantastic today with my horribly broken post-ice-skating wrist. Thank you so much.

12:11am • 18 Dec 2014

Lisa Smith @lisasmithy

@ChelwestFT thanks 2 everyone at A & E for looking after me in the early hours after my tumble. U did every check possible & I'm grateful x

5:10pm • 19 Dec 2014

Si Barry @SiBarry81

@ChelwestFT Quick shout out and thanks to the people at Chelsea & Westminster Hospital: The most friendly & helpful staff I've met.

11:33pm • 11 Dec 2014

Richard E. Grant @RichardEGrant

Bravo to the palliative care team at Chelsea and Westminster hospital. X

11:08pm • 22 Jan 2015

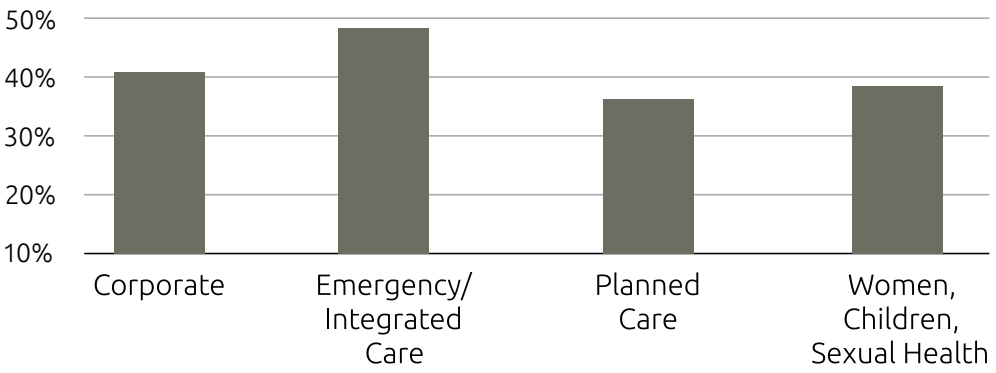
Alison Clarke @pitchwitch

@ChelwestFT amazing care , fantastic service and wonderful teams from start to finish. #Thankyou

5:30pm • 11 Dec 2014

Staff flu vaccine uptake

The staff flu vaccination campaign has now finished. The latest figures show that 57% of frontline healthcare workers were vaccinated which is higher than the national average of 53% but lower than the Department of Health target of 75%. The figures below show the breakdown by division, including both clinical and non-clinical staff.



Web watch

by George Vasilopoulos (Web Communications & Graphic Design Manager)

The Chelsea and Westminster website www.chelwest.nhs.uk was launched in July 2011 and currently sees 70–80,000 visitors each month.

In 2012 the Chartered Institute of Public Relations (CIPR) recognised our website as a finalist in the 'website' category of the CIPR Excellence Awards.

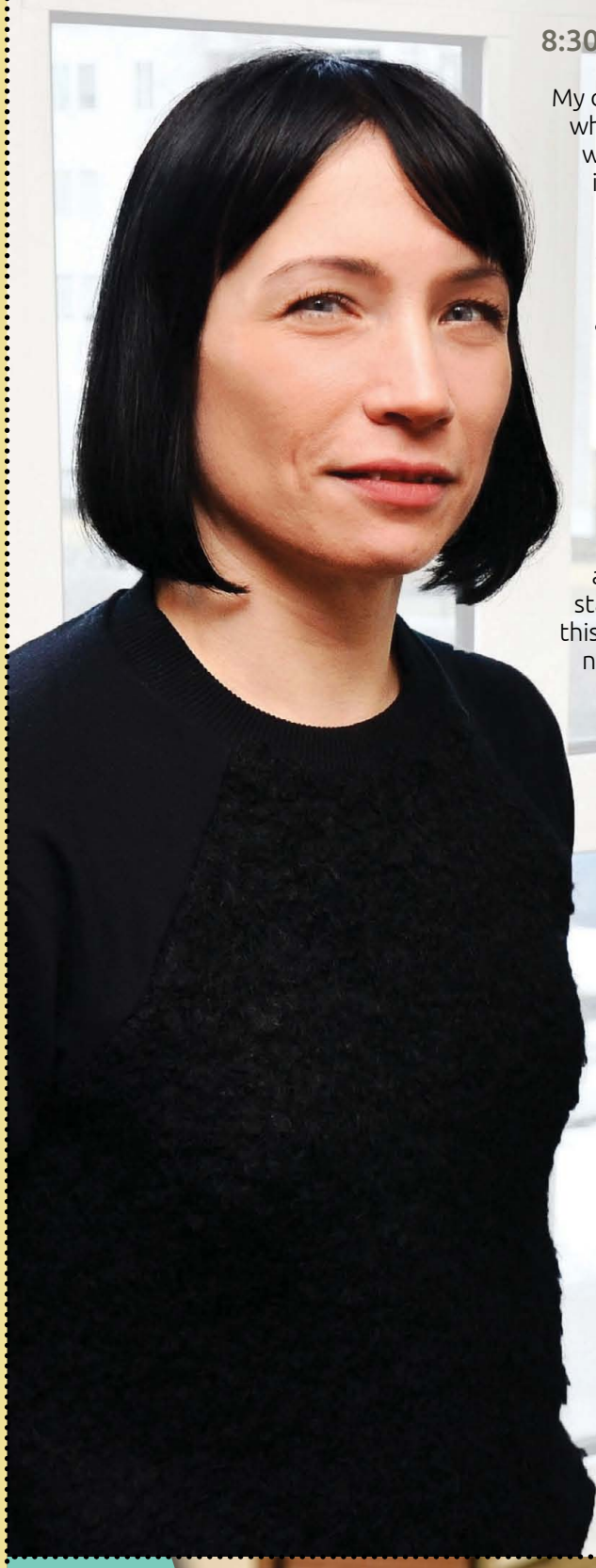
Nearly half of visitors are now viewing the website on mobile devices and to reflect this change in usage the Communications Department has begun plans to revamp the website.

The new site, launching this summer, will have a new look and feel and a responsive layout which adapts automatically to best suit the device used to view it—whether that is a computer, smartphone or tablet.

Staff, patients/service users and the public will be invited to join a forum to provide feedback on the new site to ensure it is clear and easy to use. Forum dates will be publicised on our website and in upcoming issues of *Trust News*.

In the meantime, if you have any ideas or suggestions, please email them to communications@chelwest.nhs.uk.

Day in the life... Malin Zettergren Clinical Risk Manager for Medicine and Surgery



8:30am

My day usually starts at about 8:30am when I go through my emails to check whether any new potentially serious incidents have been escalated overnight. If so, I will review these to establish if anything requires immediate external reporting to our commissioners or other agencies that require notification of certain types of serious incidents.

Incidents which require immediate escalation and external reporting include 'never events', discharge incidents and hospital-acquired pressure ulcers. It is everyone's responsibility to report incidents and we therefore depend on all staff to report incidents promptly—this helps to ensure that we meet the national 45 working day deadline to complete our investigation and submit a final report.

9:30am

I check my diary and prepare any documents I need for meetings throughout the day or provide information to colleagues for governance-related meeting papers. I usually have meetings at the main hospital site at least 3–4 days a week.

In the morning I also make calls to clarify any details around recently reported incidents and give advice to staff about what to do following an incident or about grading an incident.

11am

I present at the corporate induction to introduce new staff to the requirements of risk management and incident reporting and encourage incident reporting, outlining how and why errors occur, how incidents are graded and investigated, and how we can prevent similar events from happening in the future. I often also meet with smaller groups of staff to share learning from incidents specific to their area of work and suggest ideas relating to activities in other departments. That is the advantage I have of working across several teams—I can often suggest where good practice should be applied in order to promote consistency and safety improvements.

2pm

After lunch I go to the acute assessment unit to meet some of the new Band 6 nurses and explain what is expected of them when they receive, check and sign off incidents. I also offer any other support or advice they may need in relation to clinical governance.

One a month at the Risk Management Committee, lead investigators from wards and departments are invited to present the outcomes of their more serious incidents. A lot of work is required to prepare for this committee, such as following up with departmental risk leads on matters which require addressing and reporting. Prevention is better than cure—we use the committee as a place to identify problems and agree solutions and actions to address issues to improve patient safety. This committee also signs off a number of policies relating to risk.

I am a core member of incident investigation meetings, or panels, for Medicine and Surgery. The lead investigators are given half an hour each to present their investigations. The panel then discusses and agrees the conclusion and which actions should be taken to address the problem and reduce the risk of harm in future to patients or staff.

My role can be challenging, as different leads take different approaches and require different levels of support, but typically I will provide advice, training or support, assist with requests for statements and help provide access to patient records. I always make sure I hold an introductory meeting with lead investigators who are new to the role to talk them through our internal incident investigation process and to provide guidance and advice.

4pm

I attend speciality meetings such as the ED Clinical Effectiveness Group, Trauma & Orthopaedics Sub-directorate meeting and also other Trustwide meetings to provide risk management input, and share information and learning from incidents.

5pm

Typically I finish up by preparing for the next day, as sometimes I have to go straight to the hospital for a meeting the following morning.

The best bit about my job is that it is so varied—no day is ever the same. Although I always try work proactively and stay organised, priorities can change very quickly which means I have to be good at adapting and juggling many tasks at once. It is rewarding when an investigation is completed, the actions implemented, and this results in a positive change for patient experience or outcomes. It is great to know that even though I do not work on the frontline, I have been involved with something that has led to improvements for patients and support for my frontline colleagues.

I hope that people consider risk and clinical governance as more than administration and box ticking, but as useful and important when they see the benefits from applying learning from incidents or risk reduction activities. We are always working to improve the Trust's safety culture. Everyone involved in incidents is treated fairly and we encourage openness and transparency.

60 second interview

Andy Denton

Business and CAD (Space) Manager, Estates & Facilities

Why did you become a Business and CAD Manager?

I graduated as a chemical engineer however circumstances in the job market changed and I ended up working for Kensington and Chelsea and Westminster (KCW) Community Health Council assisting patients with their concerns with the NHS and accessing services, including working in partnership with Chelsea and Westminster Hospital, which I enjoyed. The role I do now ticks all my engineering and technical boxes while utilising my people skills—hopefully the work I do benefits the Trust in a positive way.

How long have you worked here?

Ten years in various roles from clinic clerk for various departments to working for Estates & Facilities.

What words would your work colleagues use to describe you?

Thorough, informed, helpful, genuine, caring and honest, conscientious, pedantic, empathetic, knowledgeable

Where did you go on your last holiday?

Marrakech, Morocco—a fascinating city and country, both geographically and culturally.

What did you want to grow up to be when you were a child?

A vet.

What motto do you live by?

The past is behind, learn from it. The future is ahead, prepare for it. The present is here, live it.

Chelsea and Westminster to join fight against cancer and rare diseases

NHS England announced that Imperial College Healthcare NHS Trust has been designated a Genomic Medical Centre (GMC) in partnership with Royal Brompton & Harefield NHS Foundation Trust, Royal Marsden NHS Foundation Trust and Chelsea and Westminster Hospital NHS Foundation Trust.

The four trusts make up Imperial College Health Partners NHS GMC which will contribute to the successful delivery of the 100,000 Genome Project, a national initiative which aims to sequence the genomes of 100,000 participants, for the first time, to enable new scientific discovery and medical insights, and bring benefit to patients.

Professor Derek Bell (Director of Research and Development, Chelsea and Westminster Hospital) said: "I am delighted that Chelsea and Westminster is part of this exciting project. This work has the potential to change our understanding of cancer and rare diseases, and help to shape future treatments."

The trusts will work together to ask patients with cancer and inherited rare diseases if they would like to participate, gather their samples and relevant medical information to build up a bank of anonymised data in order to better understand the role that genes play in disease and what treatments will work best for each individual patient.

The project has the potential to transform the future of healthcare by improving our knowledge of the influence of genetics on disease, how other people can be helped with similar diseases in the future, and how different types of tests can be developed to detect changes beyond the genome.

Some participating patients might benefit in the short-term as well, as a conclusive diagnosis may be reached for a rare and inherited disease more quickly, or a treatment for cancer may be targeted at the particular genetic change that is present in the cancer.

Imperial College Health Partners NHS GMC is supported by Imperial College Health Partners Academic Health Science Network.

It is one of 11 centres of this kind in the world, all in the UK.

IT shared service update

Many staff may have heard a little about the new 'IT Shared Service', but have a number of questions about how IT services will be provided in the future. Below are some frequently asked questions to help you find out more about the IT shared service:

What's it all about?

SPHERE is a new organisation, set up by Chelsea and Westminster Hospital and the Royal Marsden to deliver and support IT infrastructure to both trusts. 'IT infrastructure' is the part of IT that is pretty much the same for most organisations—user devices like PCs and laptops, the network, the data centre and servers that run our systems, and so on.

By pooling our resources and knowledge in these areas, and adopting industry best working practices, we can provide better services.

How are things going to improve?

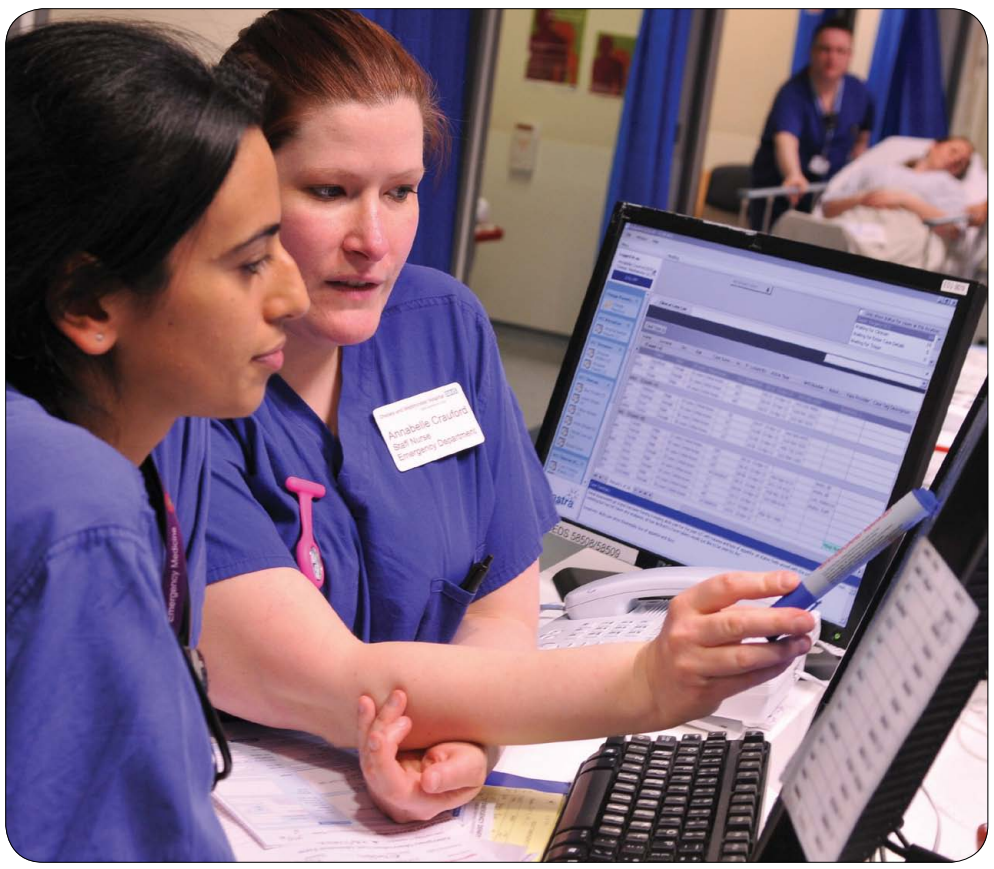
Our plans will see:

Response times to service calls will improve

The time taken to get help, to get a new service, and for your IT problem to be resolved, will be shorter. We will do this by following good industry practices, training our people (everyone gets customer service training and relevant technical training for their role), and having more Service Desk resources.

Reliability will improve

The number of times a fault occurs will reduce, removing the need to call for help in the first place (which will further help response times).



We will do this by investing in technologies that are more reliable, converging onto a smaller set of technologies that are easier to support, and retiring old, expensive-to-maintain, technologies.

Better support for remote and mobile working

To deliver IT capability where it is needed, when it is needed. We will do this by changing the way we provide end-user computing—desktops will be virtualised, and made accessible from any device in the trust, and even your own devices (Bring-Your-Own-Device) in an easy and secure way.

Better support for self-service

For many of you, looking after your own IT needs is a way of life in your personal world (internet banking, online shopping etc). We will increasingly make this the case for your professional IT needs.

Password resets is one obvious example that many of you have looked for in the past, and to that we will add 'self provisioning' so you can request IT services on a self-service portal and monitor and track the progress of your requests and your support calls without the need to pick up the phone.

We use different systems/ applications to the Royal Marsden—how are SPHERE going to manage them all?

The simple answer is that SPHERE won't manage them. The provision and maintenance of clinical applications, such as the EPR, radiology, pathology and critical care systems, will remain the responsibility of the IT team in each trust.

For more details, please contact Neil Walker (SPHERE Head of Service) at neil.walker@sphere.services.

Neil will be briefing the various leadership teams over the next few weeks to give an update on progress towards launch of SPHERE which is scheduled for early March.

I'm in main hospital site on Fulham Road—how am I going to get support if the 'base' for SPHERE is in Harbour Yard, Chelsea?

We will continue to have IT staff on each major hospital site. We will have four Support Analysts at the Fulham Road site, Monday to Friday, two starting early, two finishing late, overlapping in the busiest part of the day.

The remainder of the team will be based in Harbour Yard, working as they do today, mainly over the telephone and remotely accessing systems.

What happens if the network goes down?

The vast majority of network related problems are resolved remotely today. This won't change.

Where it is necessary to physically manage some IT equipment, this will be done by the on-site Support Analysts as 'remote hands' for the Network Administrators.

I've heard that other trusts will join in the future—isn't that just going to dilute the service I'm getting?

No, this won't be a problem. When a new trust joins, SPHERE will build a business case for the incoming trust.

This business case will ensure that the new member has sufficient resources set aside to bring them to the same level of IT support as the existing members.

West Middlesex update

Regulators give go-ahead for Chelsea and Westminster and West Middlesex hospitals to join forces

The Competition and Markets Authority (CMA) has cleared plans for the acquisition of West Middlesex University Hospital NHS Trust by Chelsea and Westminster Hospital NHS Foundation Trust.

This means one of the most significant milestones underpinning the proposals being set out by the two trusts has been met.

Chelsea and Westminster Hospital's Chief Executive Libby McManus said: "This CMA ruling is great news for all of those at both trusts already working hard together to establish the potential for improving services for local people. It is good to hear an external regulator telling us we have a credible plan.

"This is an important step in the process towards creating a bigger trust that is better equipped to meet the challenges of 21st century healthcare."

The assessment process examined whether the integration of the two trusts would lead to a 'significant lessening of competition' or a reduction in access or choice of services for local people.

The CMA contacted a range of organisations and individuals as part of their analysis.

It has confirmed that: "We do not believe that the merger will lead to a material reduction in the quality of services for patients (including clinical factors such as outcomes, infection rates and mortality rates, and non-clinical factors such as waiting times and patient experience) and will not materially reduce the hospitals' incentives to innovate and improve their services."

The new, unified organisation is expected to come into being in July. The Chelsea and Westminster Trust Board will consider a full business case which will then be presented to health service regulator Monitor. The NHS Trust Development Authority, the Chelsea and Westminster Trust Board and Council of Governors, and finally the Secretary of State for Health will all need to approve this acquisition.

The new trust will have around 5,000 staff and cover a potential population of nearly a million people.

Libby added: "These proposals can help us to improve services and ensure the very best healthcare is available long into the future.

"It can also improve the scope for research and development—ensuring that these two hospitals continue to provide high quality services for local people."

West Middlesex University Hospital NHS Trust Chief Executive Dame Jacqueline Docherty said: "It is really good news that the CMA ruling allows us to move on to the next stage of the merger of the two trusts.

"The focus now is on ensuring that this new organisation is well-placed to build on the strengths of both trusts, and that each hospital continues to deliver first-class care for their communities."

The Perfect Week at West Middlesex

A recent trial of *The Perfect Week* at West Middlesex University Hospital not only saw an incredible increase in performance against the four-hour target, it resulted in more than 60 new ideas for improving patient experience and service efficiency.

Developed by NHS England, *The Perfect Week* is a new approach designed to reduce overcrowding in emergency departments.

While all trusts have contingency plans in place for increasing resilience during times of pressure, *The Perfect Week* brings together staff from across the trust, together with partner agencies, to identify better ways of working using five simple steps, known as 'SAFER':

- **Senior review**—each patient receives a consultant assessment before midday, each day
- **All patients**—are clinically assessed for an expected discharge date and this is shared with them
- **Flow of patients**—begins as early as possible from the Acute Medical Unit to inpatient wards
- **Early discharge**—26% of inpatients are discharged before 11am, along with any medicines they need
- **Review**—patients with extended lengths of stay are reviewed weekly to identify actions for discharge

SAFER actions enable quick communication between services and functions. Frontline and non-clinical staff then work together to identify and fix any issues which might obstruct patient care. Performance is measured at regular intervals throughout the day, so that everyone is up to date and can react quickly to deal with new problems as they arise.

West Middlesex's perfect week took place from 12–18 January, an intense week for the Trust with 22 additional attendances on the previous week and 70 ambulance admissions. Despite these pressures, the efforts of all involved resulted in significant improvements in service performance. The headline goal of the project was to meet the 95% standard for A&E Type One across five days and this was achieved from Wednesday to Sunday.

Jasmin Cheema (Consultant, Emergency Medicine at West Middlesex) said: "We would like to thank everyone who took part in *The Perfect Week* for their truly excellent efforts. Their energy and enthusiasm ensured it was a great success, so much so that by the fifth day we achieved 100% compliance with the four-hour A&E target."

Clinicians engage on future plans at third annual Clinical Summit

On 3 December Miss Zoë Penn (Consultant Obstetrician) held her third Clinical Summit since becoming Medical Director for Chelsea and Westminster.

More than 100 people attended—including nurses, doctors and management. For the first time we invited our colleagues at West Middlesex University Hospital to join us to hear some of the exciting quality work and development of clinical services being undertaken.

The event covered a variety of topics regarding the Trust and the wider NHS, ending with a lively question and answer session about the potential acquisition of West Middlesex University Hospital.

Zoë Penn and Chief Executive Libby McManus opened the event with the Trust priorities and introduced our special guest Patricia Wright (Chief Executive Officer of the Royal College of Physicians) who kicked off the event with a presentation entitled *NHS leaders—realising the future hospital*.

The Royal College of Physicians held an event on this topic last September so it was a fantastic opportunity for their CEO to share this presentation with us and then stay to enjoy the rest of the event.

Simon Barton (Associate Medical Director for Integrated Care) followed with an update on the work of the Accountable Care Group and Zoë Penn and Libby McManus presented the Trust's Quality Strategy.

Gary Davies (Consultant lead for Acute Medicine) introduced the work on which the hospital is very excited to start working to manage sepsis followed by Simon Eccles (Associate Medical Director for Maternal and Child Health Services), who presented the work for integrated care within paediatrics.

The event ended with Dominic Conlin (Director of Strategy) and Zoë Penn presenting the vision for the potential future of Chelsea and Westminster Hospital and West Middlesex University Hospital.

This encouraged the audience to get involved and voice their thoughts on the process and the direction for both hospitals.

This event was a great opportunity for colleagues to connect from both hospitals and painted a great picture of the energy and enthusiasm of staff for the future of the hospital.

Council of Governors' news

Diary dates 2015

- **5 Mar, 4–6pm**, Gleeson Lecture Theatre, Lower Ground Floor—Council of Governors' Meeting
- **10 Mar, 5:30–6:30pm**, Postgraduate Lecture Theatre, Lower Ground Floor—Medicine for Members
- **26 Mar, 4–5:30pm**, Hospital Board-room, Lower Ground Floor—Public Board Meeting
- **30 Apr, 4–5:30pm**, Hospital Board-room, Lower Ground Floor—Public Board Meeting
- **9 May, 11am–3pm**, main hospital site, 369 Fulham Road—Open Day
- **14 May, 4–6pm**, Gleeson Lecture Theatre, Lower Ground Floor—Council of Governors' Meeting
- **26 May, 4–5:30pm**, Hospital Board-room, Lower Ground Floor—Public Board Meeting
- **16 Jul, 4–6pm**, Gleeson Lecture Theatre, Lower Ground Floor—Council of Governors' Meeting
- **30 Jul, 4–5:30pm**, Hospital Board-room, Lower Ground Floor—Public Board Meeting
- **17 Sep, 4–6pm**, Gleeson Lecture Theatre, Lower Ground Floor—Council of Governors' Meeting
- **23 Sep, 5:30–7pm**, location to be confirmed—Annual Members' Meeting
- **29 Oct, 4-5:30pm**, Hospital Board-room, Lower Ground Floor—Public Board Meeting
- **3 Dec, 4–6pm**, Gleeson Lecture Theatre, Lower Ground Floor—Council of Governors' Meeting

Medicine for Members

Modern obesity management

Tue 10 Mar, 5:30-6:30pm
Postgraduate Lecture Theatre
Lower Ground Floor

Mr Evangelos Efthimiou (Consultant Bariatric Surgeon) and colleagues from the bariatric service will be presenting a Medicine for Members event on modern obesity management.

The seminar will cover topics including diet, drugs and surgery and there will be a question and answer session after the presentation.

To book your place, please email medicine4members@chelwest.nhs.uk or call 020 3315 6829/2767.

Governors spread Christmas Cheer

by Anna Hodson-Pressinger (Patient Governor)

After 16 years of helping at our hospital and now as a governor, I found it a real must to do something for patients this Christmas. Last year I quietly went around the several wards specialised for the elderly patients with gifts and chatted to them and found it gave each much pleasure.

So this year I was so thrilled to be joined by our new governor, Lou De Palo—for he was immediately helping in every way. I explained to all the other governors, that in their name I was to give a special Christmas Eve ward-round to each and every patient. The only exception was the children's wards which are already very well organised at Christmas. It was therefore wonderful that the rest of the governors kindly voted to fund my idea out of the Governor's annual budget.

Lou and his colleague Anne were very generous in allowing their office to be used as the dumping room for all the presents and bags etc. Our special marathon day on Christmas Eve was designed to give some much needed cheer, especially to those alone and without family to visit them.

Lou went online and brought hats and socks and I went off to Poundland for gifts and we approached many in the hospital and outside shops and friends, asking them to contribute either in time or with gifts. We decided not to wrap the presents but use bags that could be re-used as stockings, so that we could easily streamline what we gave to each patient depending on their health needs, age and gender.

So to the many staff who were very generous we want to thank you, and also The Dowager Marchioness of Salisbury, Sir Richard and Lady Hutchinson, the Felt Shop in Chelsea Village, Mrs Christopher Collins, the pop-up shop 'Christmas Crackers', the monthly perfume shop in the hospital and many other individuals. This was along which with those we brought ourselves and made so many very happy, for we were able to give each patient a bag of gifts as we went around all the wards on each floor.

On Christmas Eve I asked for everyone to come to the Boardroom at 10am, where they had coffee, tea and mince pies waiting them. After introductions and a chat, I, in a loud voice (which got hoarser as the day went by) called for all to keep together on our rounds for security, as by 10:30am when we set out there were some 35 of us. I insisted on a carol singing practice, which I hilariously conducted and continued to do as we went to each bay in each ward singing, one carol to each. We then split up spending at least five minutes with each patient—longer with those who mentioned they were alone.

Despite Lou, our Father Christmas, refusing to sing, saying he could not (though I did catch him singing at a later stage and then discovered he *did* have a good voice... just shy) it was so extremely impressive as matrons and sisters, and nurses, and close friends, family friends, university friends, all came and added to the fun. Yes it was huge fun and really set the tone of the true Christmas spirit to all.

We gave the staff Christmas hats and chocolates and I thank them all for working over Christmas—we definitely brought much cheer to patients and staff alike... each of us who partook in this were so overjoyed by the welcome and the appreciation of the many patients, many who clapped at our attempts of singing.

I, who had my voice trained many years ago as an opera-singer, had a frog in my voice most of the day unless I was singing high and over it! Lady Henrietta who came as she had heard I was putting this on in the hospital, surprised me not only by turning up but she surprised us all with her brilliant voice, as well as the Matrons, who kindly joined us.

Next year it has to be repeated as it was great and a marvellous way to start Christmas.

So a huge thank you to all those who, in one way or other, helped Lou and myself achieve a brilliant and beautiful happy Christmas to our patients this Christmas.

Innovative and successful new pain clinic for the survivors of torture

Chelsea and Westminster Hospital's Pain Clinic for Survivors of Torture, which started work in November, is the only one of its kind in the UK—and one of the few found in the world—providing an all-encompassing pain service that takes each patient's physical and psychological needs into account.

The Trust's Consultant Clinical Psychologist Dr Susan Childs says: "Refugees, asylum seekers and survivors of torture often have a high level of chronic pain. A study from 2013 cited that 25% had post-traumatic stress disorder and 35% of that population were at risk of suicide"—suggesting this population has specific needs that may not be addressed in the usual pain clinic pathway.

Patients are referred to the pain clinic by their GP as a tertiary referral. They then receive a letter about the clinic, explaining how it works and what it aims to achieve.

Dr Childs says: "Often, people have moved from place to place and received different medicines and advice along the way, so one of the first things is for a full medical review to take place.

"Before the clinic was set up, patients would have been offered standard pain management treatment, which could sometimes make the situation worse because some aspects of their care may have triggered memories of terrible experiences—we call this re-traumatisation."

Dr Childs works with her colleagues Dr Bianca Kuehler, a Specialty Doctor in Pain Medicine, and Sarah Thomas, the lead Clinical Nurse Specialist.

Each session lasts an hour and a half and aims to ensure all the needs of the patient are taken into consideration, whether that is physical treatment, medication management or psychological care.

Dr Kuehler says: "We aim to establish what we can do to improve the lives of the people we see, which may not always be apparent at first.

"For example, through our discussions we found that one man simply wanted to be able to play with his children, so hydrotherapy was the best option in helping him gain the flexibility he needed.

"Often we find that it is not expensive drugs or treatment that people need, but a combination of support services that help them continue to live as good a life as possible."

The Pain Clinic for Survivors of Torture looks at how the care pathway could be improved for patients, how it can be more joined up and meet all of a person's needs.

This innovative service is already seeing some dramatic results and looks certain to change the way healthcare is provided for survivors of torture from across the world.

Coordinating care at the end of life

Under the direction of the Trust's End of Life Care Steering Group which includes, governors, bereaved family members, community representatives and voluntary services, and members of the hospital team, the hospital has been implementing a number of actions to improve patient and family care at the end of life.

This has included moving to a seven day face-to-face palliative care nursing service and ensuring staff are supported to deliver the key principles of good end of life care.

The aim of our End of Life Care Strategy is to ensure consistency and excellence in delivering 24-hour care to people, and to their families, in the last 12 months of life while in hospital and we are also working with our community partners to ensure patients are able to be in their preferred place of care.

An important aspect of this work is sensitively identifying patients who may be moving into their last year of life and working with them and their family members to ensure their wishes and plans are recognised early and acted upon.

An essential aspect of ensuring patients' wishes are addressed is, with the patient's permission, sharing their wishes with their GP and their community services. Working together and in a collaborative manner means we can ensure that the personal wishes can be realised.

With this in mind, Chelsea and Westminster is using Coordinate My Care (CMC) which has been developed to give people with chronic health care conditions and/or life-limiting illnesses an opportunity to create a personalised care plan to express their wishes and preferences for how and where they are treated and cared for.

Sara Scarborough (Macmillan Clinical Nurse Specialist) and Joel McIlveen (Associate Nurse Specialist)

At the heart of CMC is a care plan that is developed with a patient, his/her family members and nurse and/or doctor in a sensitive and supportive manner when it is appropriate.

The care plan is uploaded to the CMC electronic system which is only accessible by trained professionals involved in the patient's care. These include GPs, out-of-hours services, hospitals, nursing and care homes, hospices and community nursing teams, ambulance control staff and NHS 111 operators.

By sharing this information in a safe and secure manner we are better able to support patients and their families with the care they want.

If you would like to know more about Coordinate My Care for yourself, a family member or someone you are looking after, please contact Sara Scarborough or Joel McIlveen from our Palliative Care Team on 020 3315 8499 or online at www.coordinatemycare.co.uk.

Taking action from our CQC report

We have been working hard on our action plan following our CQC report October 2014. The peer review of our action plan will take place in April.

The action plan is updated weekly, with Vanessa Sloane (Director of Nursing) overseeing the overall plan but with the actions being owned locally by leads for the individual areas.

Many actions were already known to us and by the date of publication of the report, we were already well underway. Actions include:

- Robust medicines management by matrons and pharmacy staff—regular pharmacy rounds are taking place to audit the storage of medicines.
- Recruitment of 85 permanent nurses and midwives since July—most are now in post across the Trust.
- Access to IT systems for agency staff—agency nurses can now undertake online training to access Lastword, our patient record system, and be issued with a password between 8am–4pm, Monday–Friday.
- Our lead nurse for Learning Disability, Kathryn Mangold is now in post two days a week, going up to four days a week in March.
- Senior nurses are now undertaking Back to Floor Fridays, spending Friday morning in clinical areas, our executive team are also doing weekly visits to clinical and non-clinical areas.

We have shared our action plan with our partner organisations. Libby McManus (Chief Executive) and Vanessa Sloane presented our action plan to the tri-borough adult social care and health scrutiny committee on 22 January.

Focus on... Chief Nurses' Cabinet

Introducing the Chief Nurses' Cabinet

The Chief Nurses Cabinet comprises:

- **Vanessa Sloane** (Director of Nursing)
- **Lucy Connolly** (Deputy Chief Nurse)
- **Barry Quinn** (Assistant Chief Nurse)
- **Vivien Bell** (Head of Midwifery)
- **Nathan Askew** (Divisional Nurse for Women's, Neonates, Children's and Young People, HIV/GUM and Dermatology Services)
- **Claire Painter** (Divisional Nurse for Planned Care Surgery & Clinical Support)
- **Sarah Wheatland** (Divisional Nurse for Emergency and Integrated Care)

This group meets weekly to discuss issues affecting nursing and patients within the Trust and nationally, and to make decisions on nursing actions within the hospital.

As part of our aim for increased visibility of senior nurses Barry, Lucy and Vanessa are now wearing highly visible red uniforms. This is in response to feedback from staff, patients and governors.

The senior nurses (matrons, lead nurses and chief nurses cabinet) will also be visiting assigned ward and clinical areas once a week for 'Back to Floor' visits—we look forward to meeting staff and patients on these visits.

Please feel free to contact any of us via our Trust email or via Dionne Powell (PA to the Director of Nursing) at pa.directorofnursing@chelwest.nhs.uk.

Chief Nurse for England visits Chelsea and Westminster

Jane Cummings (Chief Nurse for England, 3rd left) with members of the NICU team

Chief Nurse for England Jane Cummings visited Chelsea and Westminster on 16 January to meet with nurses from across the Trust. We invited her on the back of the excellent piece of work undertaken in developing the *Practical Guidance for the management of Palliative Care on the Neonatal Unit* and she was eager to come and meet the team to find out more.

Jane met with the neonatal team who developed the new national guidance and then visited the neonatal intensive care unit (NICU). After spending some time on NICU she then went to our haematology, oncology and HIV ward, Ron Johnson, and our respiratory medicine ward, David Erskine. The visit ended with a discussion session with the Chief Nurses Cabinet.

Director of Nursing Vanessa Sloane said: "It was a pleasure to welcome Jane to Chelsea and Westminster. During her visit she commented on the passion, commitment and care that our staff demonstrated when talking about the important role they play in end of life care."

Meet the

Vanessa Sloane

"I trained at the old Westminster Hospital and London South Bank University (or Polytechnic as it then was) as a Registered General Nurse with a BSc in Nursing and Community Health.

"Following completion of training I worked on an adult surgical ward and then moved to Birmingham to undertake my Registered Sick Children's Nurse training. As a children's nurse I worked within the Oxford University Hospitals group, and spent some time at Guys and St Thomas' Trust.

"My specialist area is paediatric neurosciences and I also spent some time in the community caring for complex needs children. While in Oxford as a matron I participated in the integration of two Trusts, and have experience of cross site working—four sites covering 25 miles!

"Having undertaken a variety of nursing roles, I spent 18 months working as a service manager within paediatrics at the time of the introduction of the 18 week pathway—an interesting experience which has given me great respect for our service managers and the jobs they do.

"I came to Chelsea and Westminster Hospital in January 2012 as the Head of Paediatric & Neonatal Nursing, and greatly enjoyed my work with the team and the challenges and changes which took place over three years. During this time I was able to undertake some clinical shifts enabling me to keep up to date with the daily challenges and the joys of providing direct patient and family care.

"I am very excited by the new opportunities presented to me following recent changes. I feel very passionate about leadership within nursing, and how we do the best for our staff and patients. I am leading the Matrons and Lead Nurses group which meets monthly, and am aligned to the Planned Care Division to provide additional leadership and support."

Lucy Connolly

"I joined the Burns Unit at Selly Oak Hospital in Birmingham for my first qualified nursing post in 1995. After a year of consolidation I moved to Good Hope Hospital in the West Midlands and worked in a variety of care of the elderly settings. Caring for older people is my nursing passion and as a consequence I studied my Masters Degree in Gerontology at Keele University.

"After stepping out of the traditional clinical nursing career pathway I have held a variety of roles including clinical governance coordinator, clinical risk management lead and even ventured into directorate management for a five year period heading up a large medicine for the elderly division which I loved with a passion and then an emergency department and acute medicine division which was a 'different' yet enhancing experience!

"In 2009 I joined the Chief Nurse Team at York Hospital taking the lead on End of Life Care and Safeguarding Adults. I was offered the Assistant Chief Nurse position in December of that year and picked up the lead for Nursing Workforce. I moved into the Human Resource Department in January 2013 as Head of Nursing Workforce and provided professional advice to HR on nursing related matters—this was a fantastic opportunity to learn lots from my HR colleagues.

"I joined Chelsea and Westminster in January 2014 as Assistant Chief Nurse and am currently acting Deputy Chief Nurse.

"I have loved the whole of my career in the NHS so far and am thrilled to be part of the Chief Nurse's Cabinet at Chelsea and Westminster Hospital. As a member of the Cabinet I will be providing leadership and support to the Women's and Children, HIV and Sexual Health & GUM, and Dermatology division. I will chair and support the Ward Sister Charge Nurse meetings and I am also the main contact in the Cabinet for the nursing and healthcare assistant workforce."

Barry Quinn

"I have worked in healthcare for 30 years in hospital, hospice and community settings in the UK and Ireland. Having trained at University College London as a nurse, I then worked at UCLH in oncology and haematology. During my time there I worked as a manager and clinical nurse specialist and completed post registrations studies, including an MSc in Health Studies. Having an interest in leadership, research and education I worked as a clinical lecturer and programme director at the Royal Marsden Hospital while undertaking my PhD studies at King's College.

team

"I then worked at St George's Hospital, Tooting, as the Senior Nurse for Cancer. Prior to coming to Chelsea and Westminster Hospital, I worked as a Consultant Lead Nurse for Cancer and Palliative Care, with corporate responsibility for end of life care at Ashford & St Peter's NHS Trust, Surrey.

"I continue to be engaged on the boards of a number of national and international organisations focusing on advancing leadership and improving clinical practice.

"Alongside my clinical and leadership roles I am a Visiting Lecturer at the University of Surrey and the Royal Marsden Hospital, and a CLAHRC Fellow.

"I joined Chelsea and Westminster in October 2013 as the Lead Nurse for Cancer & Palliative Care and took on the Trust Lead for end of life care.

"As a member of the Cabinet I will continue my role as the Lead Nurse for Cancer and Palliative Care and the Lead for end of life care.

"I am now aligned to the Medicine and Emergency Division, providing leadership and support. I will provide a professional lead role for specialist nurses and midwifes. I will also take on the lead role for nursing education and multi-professional research."

Vivien Bell

"I have trained as both a nurse and a midwife with the majority of my career in maternity services.

"Currently, I am Head of Midwifery at Chelsea and Westminster Hospital which provides care for approximately 5,000 women a year in the maternity department.

"Before this I worked as a community/ hospital midwifery manager in Chichester on the south coast and before that as the lead midwife, deputy director of midwifery in Sheffield.

"Originally from Nottinghamshire, I started my midwifery career in the East Midlands where my own children were born. I trained as a supervisor of midwives in Leeds and I believe that midwives have a privileged position in a unique life event."

Nathan Askew

"My career began at Guys and St Thomas' NHS Foundation Trust where I worked in intensive care, surgery and supported the implementation and running of their high dependency unit. Following this I moved to Great Ormond Street Hospital to pursue a carrier in paediatric specialist surgery.

"I am passionate about all aspects of nursing and believe that as the NHS continues through difficult financial times it remains the responsibility of all staff to ensure that patients experience the best care possible.

"My particular areas of interest are in high dependency care, advancing nursing practice and patient experience. I also have a keen passion for nursing education as well as the development and support of the role of the healthcare assistant.

"I am excited to have been offered the opportunity to join Chelsea and Westminster and look forward to working alongside the teams across Chelsea Children's', adult services and potentially West Middlesex University Hospital.

"It is exciting to be working within so many outstanding services and with people who are so passionate about the great work which they undertake."

Nathan joins us at the end of March.

Claire Painter

"I am absolutely delighted to be joining the Chelsea and Westminster as Divisional Nurse for Planned Care and Clinical Support at a time of considerable change and opportunity.

"Having initially trained at Barts in the 1980s, my professional career has remained in London. I still feel the same sense of privilege of being a nurse that I felt when I first entered nursing and I am delighted that the next chapter of my professional life will be in an organisation with such strong values and a fantastic clinical reputation.

"Before moving to my current role as Head of Nursing for surgery at St George's in South London, I worked in a number of operational and specialist roles in acute care, including partnership roles with Kings College London.

I maintain a strong clinical profile and a clear commitment to deliver the very best of care. I am looking forward to working alongside colleagues to support the Trust in achieving its vision of excellence."

Claire joins us in early April.

Sarah Wheatland

"I started my career as a paediatric staff nurse at The Hillingdon Hospital NHS Trust in 1995 before moving to St Mary's Hospital, Paddington, which is now part of Imperial College Healthcare NHS Trust, in 2002.

"During my time at Imperial I worked my way from ward sister on the bone marrow transplant/infectious diseases ward to Lead Nurse for Paediatrics and I completed a master's degree in Leading, Managing and Partnership Working. In 2013 I joined the Portland Hospital as Head of Children's Services managing the newly expanded paediatric unit.

"I believe in providing strong, professional nursing leadership to inspire , motivate and empower the nursing team ensuring high quality, evidence based care is given to all patients. I am committed to service improvement, staff experience and development and most importantly providing excellent patient experience."

Sarah joins us in early April.

Research & education

23rd Magill Anaesthesia Symposium

The 23rd Magill Anaesthesia Symposium, 'Enhanced Recovery: Beyond the Guidelines' was held on the 19 November in the Gleeson Lecture Theatre at Chelsea and Westminster Hospital.

International, national and local speakers gave presentations that helped to inspire new ways of enhancing the recovery of our patients requiring surgical interventions.

Excellence in Care certificate presentation

The Learning and Development team hosted a certificate presentation event on 18 December for Healthcare Assistants and Maternity Support Workers who have completed the Excellence in Care course.

The event was very well represented by both support workers and senior clinical staff. Vanessa Sloane (Director of Nursing) and Lucy Connolly (Deputy Chief Nurse) attended and highly praised our support staff for their hard work, professionalism and outstanding care they give to our patients.

The Excellence in Care course is attended by all support workers newly employed in the Trust and aims to give them all the tools they need to give high quality, patient-centred care that is aligned to Trust values.

In addition to competency books, the support workers are encouraged to write a reflective account about an element of care they have undertaken in their first few weeks of employment.

The use of reflective practice promotes safe systems of care and allows our support workers to take ownership of the care they give.

This certificate presentation day aimed to show to our support workers how greatly they are valued in their clinical areas and by the wider nursing team.

With the additional work they undertake as part of the course requirements, the skills and knowledge obtained contributes to the excellent and compassionate care our patients receive.

Charity corner

Honouring some of London's bravest mothers

The Children's Hospital Trust Fund were delighted to host a pre-Christmas treat for mums with babies and children in Chelsea Children's Hospital.

With the help of local hair salon, Danilo, and MAC make-up, a "Pop-up Hair and Beauty Salon" was set up in the hospital, where mothers could come for some much-needed respite and TLC with hair, nail and make-up treatments all being provided free of charge.

Carluccio's and IPC Magazines also generously supported the event by donating pastries and magazines.

Mothers face what can be one of the toughest of experiences when their child is in hospital.

One of the mothers said: "I really appreciate the Children's Hospital Trust Fund thinking of us at such a difficult time as this—thank you."

Making a difference on the wards

Aside from buying million pound surgical robots, the Children's Hospital Trust Fund also funds smaller, urgently-needed items of medical equipment which wouldn't otherwise be available. Recently we have provided the following:

- Advanced glucose monitors to help parents and children monitor glucose levels and learn to manage their diabetes independently
- More sterilisers for babies' bottles
- Chester Chest—teaching parents how to apply dressings, manage feeding tubes and central lines so their child can be cared for at home rather than in hospital
- Anatomical Apron—a visual tool to help give parents a better understanding of stoma surgery and why it is necessary

Making mealtimes more fun for children in hospital

The Children's Hospital Trust Fund has made mealtimes more fun for children in hospital by providing packs of colouring pencils for their meal trays.

Previously meals were served on trays with a paper sheet with quizzes, puzzles and pictures to colour in.

A lot of children were unable to enjoy these as there were no crayons provided and so would have to borrow from a nurse or carer. With the help of Carluccio's, the Children's Hospital Trust Fund has changed this and every child is now given a pack of colouring pencils at meal times.

News from our Friends

The year ended very successfully for the Friends with an excellent Christmas Fair raising £4,700—this will be going towards funding some interesting grant applications received to improve patient experience. We would like to encourage all staff to submit or discuss any grant proposals with Lisa Williams in the Friends office, located next to the Friends Shop on the Ground Floor.

As in previous years, we funded hospital's Christmas Cheer Awards, which were presented to employees who had made a significant contribution to the wellbeing of patients, and Best Decorated Ward Award which was won by Edgar Horne Ward.

We would like to welcome our new Library Administrator Caroline O'Neill who joined us at the end of October—she has already started the job with much enthusiasm, and importantly, restarted the Friday book sale after a brief hiatus.

Caroline is enjoying the role and coming up with new ideas as to how we can improve the reach and efficiency of the staff and patient library.

We hope that you are still enjoying the selection of books available at the book sale between 10am to 2pm, every Friday.

The Friends will be keeping you informed of future events organised by our new Fundraising Committee, chaired by Hilary O'Neill.

This new sub-committee will formulate a program of events for next year and beyond.

If any members of staff are interested in getting involved please contact Hilary at hilly@mailus.co.uk.

We are always happy to welcome new members so feel free to encourage any interests to join our membership, or become a volunteer or committee member—contact the Friends office for more information!

Get in touch

You can reach the Friends Office on 020 3315 8825 or by emailing friends.office@chelwest.nhs.uk.

Christmas with the Friends

Homemade goodies went down a treat at the produce stall →

← Christmas wine tombola - staff and visitors stocked up for Christmas winning lots of wine!

Bookworms enjoyed the new stock of novels →

← Bric-a-Brac sold some great gifts for Christmas

Charity corner

Supporting CW+, the hospital's charity

Charitable support continues to play a crucial role in so much of what Chelsea and Westminster Hospital is able to achieve.

In recent years, for example, donations to the charity, CW+, have supported our pioneering research into burns care, and preventing premature birth and its complications.

CW+ has supported design and facility enhancements and therapies for Chelsea Children's Hospital.

CW+ also manages the art collection that adorns the hospital walls and a comprehensive performing arts programme for the benefit of patients.

From time to time, we would like to use your name and address (if you received this copy as part of the membership mailing) to allow CW+ to send you information about its work.

If you would like to be updated on how the charity is supporting patients, families, visitors and staff at the hospital, please write to Kerry Huntington, Head of Fundraising, CW+, 4 Verney House, 1B Hollywood Road, London, SW10 9HS or send an email to kerry.huntington@chelwest.nhs.uk.

A trip down memory lane

We are excited to announce that our 'Memory Lane' music sessions have now expanded to David Erskine Ward and Lord Wigram Ward.

'Memory Lane' has been successful on two of our care of the elderly wards since September 2013.

Every Monday, our pianist-in-residence, Maria Marchant, plays patients' favourite songs on the piano, taking them on a trip down memory lane.

Research from both the UK and the US has demonstrated that music can help to improve patients' visual awareness, memory and mood.

Angela Pennock (Ward Manager, Nell Gwynne Ward) agrees: "Music is absolutely fantastic for the ward. Patients improve when they don't associate the environment with being a hospital one. Music can ease stress. Staff get a lot from it too. If I have happy staff, I have happy patients."

Our continued partnerships with the Royal College of Music and Concordia Foundation have enabled us to develop a training programme for six new pianists.

In addition to expanding the project to more wards, bringing the total number of patients annually involved in Memory Lane to more than 10,000, the pianists undergo training on working in hospitals, from infection control regulations to communicating effectively with patients and relatives.

Memory Lane takes place every Monday on Nell Gwynne Ward (3–4pm) and Edgar Horne Ward (4–5pm), and every Tuesday on David Erskine Ward (3–4pm) and Lord Wigram Ward (4–5pm).

Find out more about Memory Lane at www.cwplus.org.uk/memorylane.

"The easiest thing I have ever done."

Sarah Bryan

This month, Sarah Bryan (Dementia Case Manager) has been busy transforming the patients' day room in Edgar Horne Ward to create a more social environment.

Following a successful application to Small Change Big Impact, the recently launched small grants fund from CW+, Sarah has been able to add additional furniture to the room including a drop-leaf table and bookshelves.

With the new furniture in place, Sarah is planning to introduce group activities and re-establish a lunchtime club for patients to eat away from the bedside.

Sarah says: "It's really important to encourage patients with dementia to socialise. It really helps with stimulation and their wellbeing."

In addition to the day room furniture, Sarah also applied for special orientation clocks which will be going into each of the bays and side rooms.

"Patients with dementia can struggle with their visual perception. These clocks, which feature the day, date and time, can really help patients with their orientation.

"This is particularly important in the winter months as it gets dark earlier, so it can be difficult to recognise the time of day. These will be really helpful."

"Purchasing the furniture and clocks through Small Change Big Impact was the easiest thing I have ever done.

"After filling out a simple application, within a couple of weeks the furniture had arrived and I was putting the shelves together!

"The team at CW+ were really helpful."

Small Change Big Impact is a small grants fund from CW+ that gives you the power to make changes in the hospital.

Whether it is equipment, furniture, support for patients or enhancements to the environment, Small Change Big Impact can help get your ideas off the ground.

Grants of between £1 to £2,000 are available.

Application forms are available at www.cwplus.org.uk/scbi, by emailing smallchangebigimpact@chelwest.nhs.uk or calling 020 3315 6581.

"The team has made a difference and brought light here—we won't forget it."

South Africa has one of the highest rates of death in childbirth in the world (the lifetime risk of maternal death in South Africa is 140 per 100,000).

In more than 65% of these cases these deaths could have been prevented.

A team from Chelsea and Westminster Hospital went to South Africa to deliver a course in managing obstetric emergencies.

The training was supported by CW+'s international maternity programme which sends teams of highly skilled obstetricians and midwives to resource poorer countries.

Some of the staff who attended the course were then invited to attend the follow up 'train the trainer' course which ensures that the training is disseminated to a larger footprint.

The training course was very successful and left maternity staff educated and empowered.

One senior midwife who attended the course said "I will go back to the ward and will speak up in every emergency. Everyone will think 'how does she know so much?!"

Another fed back: "The team has made a difference and brought light here—we won't forget it."

Sophie, a junior doctor at Chelsea and Westminster, reflects on her experience: "It's probably true to say that there is nothing more rewarding than watching those you have taught put into action the lessons they have learnt."

Your opinion matters

As many of you will already be aware (and would have no doubt seen the scaffolding)—plans for the very exciting CW+ MediCinema are well underway and we can't wait to bring the joy and escapism of film to families and their loved ones later this spring.

But, before we can get the screens ready, we really would like to hear from patients and staff—we would be delighted if you could take a few minutes to participate in a short survey.

The survey is available online at www.surveymonkey.com/s/medicinema.

By taking part, you can also be in with a chance of winning two tickets to a West End premiere! Thank you.

A&E redevelopment

CW+

A&E&U update

We have completed all of the moves in relation to the redevelopment of our A&E department and the contractors are now working in the space. The services and staff who have moved are:

- Antenatal and Ultrasound has moved to 1st floor (old Phlebotomy)
- Child and Adolescent Mental Health Service (CAMHS) has moved to 1st floor (old outpatients 3)
- Community Paediatrics has moved to 1st floor and Doughty House
- Appliances Officer (Miriam Busani) has moved to the fracture clinic
- Research and oncology nurses have moved to the back of the Medical Day Unit just before the transport lounge
- Paediatric consultants have moved to the first floor (old outpatients 3)
- Speech and language therapists have moved to the portable office

The demolition work in the empty space has been completed and the building work is due to start imminently. The first phase of our A&E redevelopment is due to be completed in mid-July and includes the new majors, observation unit, fracture clinic, and CT and X-ray.

← The previous location of the Antenatal Clinic

Demolition works continue ↓

The previous location of the Child and Adolescent Mental Health Service (CAMHS) ↓

← All live electrical wiring is clearly marked

A worker loads a skip to remove discarded building materials ↓

← Old offices and examination rooms are demolished in preparation for the redevelopment

A&E&U charity appeal

A rendering of the look and feel of the new A&E corridor

The end of 2014 was an enormous success for our friends over at CW+ who are more than halfway towards their fundraising target for A&E, having reached an incredible £350,000.

CW+ was chosen as a beneficiary of Harrodian School's gala dinner at the end of November. The evening raised £165,000 for the appeal, which will enable the team at CW+ to implement their art and design plans for paediatric A&E.

The charity is bringing together artists and working with clinical staff to create a calming environment across A&E which minimises anxiety and improves clinical outcomes. This will include adaptable lighting, flexible distractions and bespoke sound programmes.

Artist and film maker Isaac Julien is one of the internationally renowned artists working with the team to create bespoke installations for A&E. Isaac Julien kindly hosted a fundraising dinner for the appeal in November.

In addition to the flurry of fundraising activity that has been taking place, the CW+ team has been busy working with artists and partners to test artworks around the hospital, the findings of which will inform what goes into the new A&E.

Currently working in the newly opened Surgical Admissions Lounge, the team has installed a series of visual and digital artworks, including pieces by internationally-acclaimed producer and artist, Brian Eno.

The aim of these artworks is to help relax patients before their operations, therefore reducing stress and post-operative recovery time. To measure the impact of this pilot, CW+ is working with researchers from Imperial College. The findings will then assist the art and design plans for the A&E redevelopment.

You may also have spotted the charity's Arts Director Trystan Hawkins donning a pair of scrubs as he has been shadowing staff to gain an understanding of A&E.

Trystan says: "The time I have spent in A&E has been incredibly valuable in understanding the challenges faced by staff every day. Meeting the patients, spending time with staff and families, will really help inform our plans to make A&E as stress free as possible for patients, for families and for staff."

CW+ exists to make care better for patients and their families through pioneering research, innovation, art and design. To find out more about the A&E&U appeal or to get involved visit www.cwplus.org.uk or contact Kerry in the CW+ team on 020 3315 6619 or email kerry.huntington@chelwest.nhs.uk.

Recent events at Chelsea and Westminster

← Best Decorated Ward/Department

Thank you to the Friends for their generous support

1st place-David Erskine

↑ A special cake for Chelsea Children's Hospital

Mel Guinan (Divisonal Nurse for Children, Young People and Neonatal Services) with a young patient

Chelsea Football Club visit →

Members of the Chelsea FC team brought Christmas gifts to Chelsea Children's Hospital

Friends Christmas Cheer Awards

Trauma & Orthopaedics, Christmas Cheer team award winners are presented with a gift by Libby McManus and Val Thum from the Friends

Friends Christmas Cheer Awards

Libby McManus and Val Thum present Dorota Kugaczewska with her Christmas Cheer gift

↓

↑ Christmas at Chelsea and Westminster

Chelsea Pensioners switch on the Christmas tree lights with Libby McManus and Mayor of Kensington and Chelsea Cllr Maighread Condon-Simmonds

← Christmas at Chelsea and Westminster

X-Factor's Lola Saunders is presented with flowers after singing for the crowd

↑ Christmas at Chelsea and Westminster

Young visitor Chelsea - who was born here at Chelsea and Westminster - inspects the tree decorations

Light Up A Life

Light up a life took place in the hospital garden to remember loved ones and patients who are no longer with us

↓

↑ HATS (patient transport) Santa visit

Santa brought some Christmas cheer by delivering presents to patients

Welcome

Susan Luce

Susan Luce has joined the Trust as Director of Clinical Governance and Quality. Previously Susan has been a Director of Nursing and worked in CCGs, community provider services and other acute NHS providers.

Thomas Lafferty

Thomas Lafferty has been appointed as Interim Foundation Trust Secretary. Thomas will support the Chair, CEO, Chief People Officer and Director of Corporate Affairs on a wide range of Corporate Affairs matters, including supporting the Board on Governance and on aspects of the acquisition of West Middlesex.

A lawyer by background, Thom has experience as a Company Secretary in the NHS and has most recently supported the acquisition and integration process at Frimley Health NHS Foundation Trust in Berkshire.

Congratulations

Dr Marcus Harbord

Dr Marcus Harbord has been recognised with a European Crohn's and Colitis Organisation (ECCO) Mark of Merit by Simon Travis DPhil FRCP, President of ECCO.

Simon Travis says: "Dr Harbord has contributed substantially to ECCO, giving freely of his time in the interests of improving the care of patients with inflammatory bowel disease.

"This he has done in being actively involved and responsive to ECCO tasks and projects in the past and currently serving as Officer in the Guidelines Committee (GuiCom).

"Furthermore, Dr Harbord not only proposed the idea and launched the revolutionary ECCO e-Guide, but has taken personal responsibility for starting and developing this project. I look forward to seeing Dr Harbord evolve within ECCO and continue to contribute to the organisation."

Dr Dilys Lai

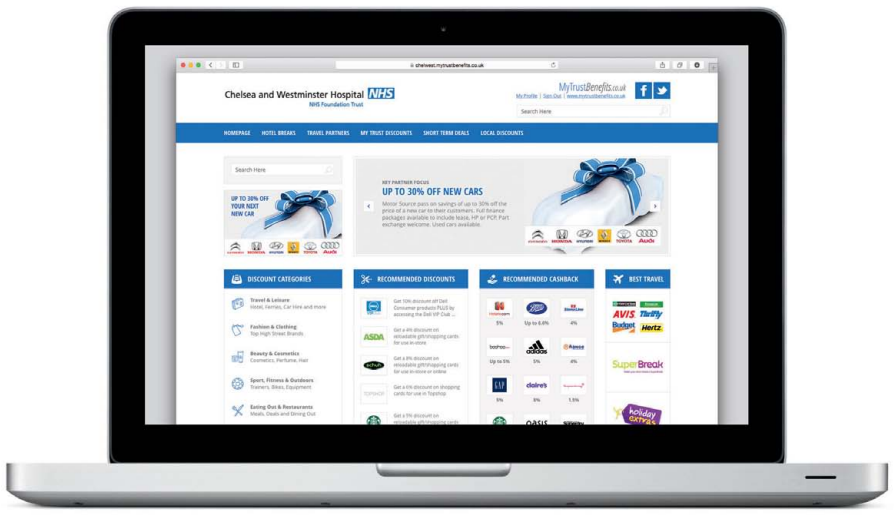
Dr Dilys Lai has been appointed to the role of Divisional Medical Director for Emergency and Integrated Care.

New Clinical Directors

Dr David Asboe and Dr Kingi Aminu have been appointed as our new Clinical Directors heading up the HIV, GUM & Dermatology and Neonatal, Children & Young People's Directorates respectively.

Dr Aminu will be helping us to realise the Chelsea Children's Hospital vision and Dr Asboe will be continuing to push forward his innovation directorate.

My Trust Benefits



Chelsea and Westminster Hospital's mytrustbenefits site promotes national and local offers for staff, volunteers and Foundation Trust members.

By registering and using the site not only will you be saving money but you will also be supporting the Trust as we earn 50% of any profits made from this site.

You can save at major supermarkets and Boots the chemist, Marks and Spencer and Costa Coffee to name just a few companies on the site. Save on travel in the UK and overseas, theatre tickets and attraction parks, plus financial services and hot deals all by registering today.

Just register at mytrustbenefits.co.uk and choose Chelsea and Westminster Hospital NHS Foundation Trust as your preferred Trust.

You will also receive emails promoting new and exciting offers.

If you can offer a discount to the Trust just visit the website and click on local discounts where you can fill in a short form and promote your business for free.

By working together and using the site we can support and invest in the health and wellbeing of our teams at Chelsea and Westminster Hospital.

In memoriam: Esther Burke Pantin

Staff Nurse Esther Burke Pantin sadly passed away on Tuesday 9 December. Esther had been unwell for quite some time but due to her great determination and dedication had wanted to continue working.

Esther had worked on Lord Wigram Ward since February 2003 and was an integral part of the team. She was much loved by both colleagues and patients alike. Our thoughts and prayers are with her family, friends and colleagues.

2014 Communications Survey—the results are in

In *Trust News* last September we ran the annual communications survey to find out which communications channels are working well and which areas we can improve.

Most respondents use *Trust News* and the Daily Noticeboard to get information and 56% of respondents find it very easy or fairly easy to find out what is going on at the Trust. 82% of respondents rated *Trust News* as good or excellent and 49% read every issue.

Feedback and suggestion included:

- more interviews with frontline staff
- stories about national NHS issues
- questions, letters and quizzes page
- more information about strategic changes that affect staff at the Trust

Other feedback indicated:

- 51% would like to have a Chief Executive blog once a month and some respondents would like to see blogs from other directors
- 53% of respondents said their manager never discusses Team Briefing with them and some suggested Team Brief could move to a lunchtime slot to make it easier for staff to attend
- 91% think that the Daily Noticeboard is just the right length but felt the format was old-fashioned

We received a lot of feedback about the intranet and staff will be pleased to know that a project is underway to launch a new intranet this summer! Watch this space for opportunities about how you can get involved in designing the new intranet for our Trust in the coming months.

Thank you to everyone who took the time to complete the communications survey—we will be taking all of your feedback on board and integrating improvements based on your suggestions over the coming months.

Imaging accreditation maintained

The Radiology Department has successfully maintained its accreditation as part of the Imaging Services Accreditation Scheme (ISAS). ISAS is patient-focussed programme designed to help ensure that patients consistently receive high quality services.

Chelsea and Westminster remains the only non-specialist hospital in London (GOSH is accredited) to hold accreditation and one of only 19 accredited organisations nationwide.

Feedback from the executive team walk-arounds

The Trust's Executive team have all spent much more time out and about in the organisation over the past four to six weeks. Some key points have emerged as they've listened to staff.

One of these relates to changing the Trust's stance on bank rates for nursing. A review will be taking place on the pay rates for staff who volunteer for or are asked to work bank shifts.

The Executive team also heard that career progression and training are important to staff and will be looking at these together with other initiatives to help staff have happy and lengthy careers at Chelsea and Westminster.

The Executive walk-arounds will continue every month so look out for the chance to speak with them to have your views heard.

Midwifery changes

Please do your best to welcome to all our new starters and help them settle in and feel at home.

- **General Manager for Maternity:** Vanessa Topp is on maternity leave so the general manager role will be covered by Stephen Funnell and Laura Bewick during her absence.
- **Labour Ward:** Kay Crowch started with the Trust in January as Labour Ward Matron. Kay comes with a wealth of experience and has worked in different units across the UK.
- **Maternity inpatients:** At the end of last year we appointed Ann O'Sullivan to the post of Inpatient Matron. Anne joins us from Ealing Hospital.
- **Farewell** to midwives Alison Dodds, Lynne Baldock and Miranda Johnson who have all left the Trust over the last couple of months.

RTT target met

Thanks to the efforts of all staff involved in the referral to treatment (RTT) work we have been declared fully compliant with this target, which is fantastic news for our patients.

In April 2014 the Board agreed, with Monitor and with CCG Commissioners support, that Chelsea and Westminster would undertake an accelerated RTT programme in order to treat long waiting patients as quickly as possible. This was planned knowing that it would result in the Trust RTT performance against the standard not being met during Q1–Q3 2014/15.

The Trust was compliant with all three RTT indicators in December, for the first time in 2014/15. The Trust is planning to continue to achieve all indicators in Q4.

The number of long waiting patients has significantly reduced from 1,400 in April to 220 at the end of December by putting on additional capacity, improving utilisation of theatre sessions and addressing specific resourcing issues in paediatric dentistry. The Trust achieved the overall Trust-wide position in December (91.5% against a 90% target).

Staff across the Trust have been working extra hard to accommodate patents, including Orthopaedic Surgeon Mr Warwick Radford who operated over the weekends to make sure patients didn't have to wait any longer.

Mr Radford said: "My involvement with the RTT target work began when I was told which patients of mine were breaching the target—I then went through the list and rescheduled the operations to avoid the breaches and did extra lists as necessary.

"It was a time-consuming undertaking. Moving forward I have suggested that the RTT date should be on the initial referral letter and clearly available to surgeons, then we have something to work with."

The Trust will continue ongoing focussing on the RTT target on a daily basis to ensure the target continues to be met and ensure that patients are treated as quickly as possible.

Procurement update

Over the last few months, staff across the Trust have been actively working with procurement on standardising clinical consumables and getting the best value for our patients. This process ensures that we are proactively standardising the care we deliver whilst reducing both waste and cost.

Clinicians from all corners of the organisation have helped this process to place the patient at the centre of our decision making. Together, we have had multiple successes. Some of our recent successful changes have included:

- Standardising aprons to one colour
- New patient warming machines
- Standardising clinical wipes to Clinell
- Replacing oxygen nasal cannulae to include ear guards to eradicate hospital-acquired ear pressure sores
- Replacing Mepitel dressings with Adaptic Touch dressings
- Creating a Trustwide wound care formulary to standardise wound care products across the Trust
- Standardising free-flow gravity sets to B Braun
- Standardising incontinence care products
- Changing our wound closure strips
- Standardising stationary across the Trust to reduce waste and duplication

There are also other projects underway which will improve patient care while reducing waste and expenditure so we can concentrate on our objectives moving forward. Thank you to all staff for helping to implement these changes.

If you have any feedback on clinical or non-clinical changes please contact the Procurement Department email, Suzanne Scannell (Head of Procurement) or Chris Morrow-Frost (Clinical Specialist Procurement Manager).

Dan's Fund reception

Our Burns team with supporters of Dan's Fund at the reception

Thank you everyone who was part of the very successful reception on the Burns Unit for Dan's Fund in January. Dan's Fund For Burns (DFFB) donated two pieces of specialised equipment which will improve the care for burns patients.

The first is a Laser Doppler scanner which gives doctors important information about the potential depth of burns. Images from the scanner helps the burns team decide on whether surgery is likely to be necessary—which is the case for deeper burns. Sometimes this is a very difficult assessment to make just by looking at the condition of burned skin. The scanner has also allowed us to begin research into the use of medical imaging in burns management.

The second piece of equipment is a Meek Mesher, which is very useful for patients with large burns because they often have very little unburned skin that we can use as donor sites. The Meek Mesher allows us to take small pieces of donor skin and then separates them into lots of much smaller squares of skin spread out over a larger area which can easily be placed onto the areas that need grafting. This would be extremely fiddly and time consuming to do manually.

As the small squares of skin heal the cells grow outwards from the edges and then connect to each other, eventually covering the whole area. Sometimes we are working with patients who have burns to more than 90% of their body, so equipment like this can make a big difference in their care.

Emma Danks, DFFB Trustee, said: "Thank you so much for the invitation and for organising such a superb visit. I found it really interesting and it helped put everything in context so well. An absolute credit to you and the rest of the team that you made it all so easy to understand in layman's terms!

"It was great to see the equipment and how it is used, plus also look around the Burns Unit and the paediatric unit too. What everyone does at Chelsea & Westminster is just marvellous."

Polly Brooks, DFFB Founder, said: "May I reiterate Emma's thanks and thoughts. It was a really great visit and good to see how our funding is actually helping. Will help drive us on to keep the coffers going! Please pass on our thanks to the rest of the team."

Felicity Miller, DFFB Trustee and Dan's mother said: "Thank you and all those from the Chelsea and Westminster Hospital burns unit, for the reception and lunch. It was a very positive and rewarding occasion for all of us. I am so glad the Unit has evolved so successfully. It looked efficient, spotless, fit for purpose and full of professional competence and yet was obviously so patient focussed."

- Find out more on the Dan's Fund website www.dansfundforburns.org

Farewell

Holly Ashforth

Holly Ashforth (Deputy Chief Nurse) left the Trust on 19 December to join Central London Community Healthcare as Associate Director of Quality Improvement. Holly started her nursing career working in the Trust 20 years ago and has worked as a staff nurse, matron, divisional nurse and Deputy Chief Nurse.

Mike Delahunty

Mike Delahunty (Head of Outpatient Services) left the Trust on 16 January after 14 years at Chelsea and Westminster to take up the role of Business Development Manager at Kingston Hospital NHS Foundation Trust.

Katie Drummond-Dunn

Katie Drummond-Dunn (Communications Manager and editor of *Trust News*) left the Trust on 13 February to move back home to Cornwall. She has taken on a role as Marketing Manager for a renewable energy company.

Dawn Grant

Dawn Grant (Lead Nurse for Health Care Assistant Development) is leaving the Trust to work on bands 1–4 strategy projects within Health Education North West London. Dawn started at the hospital in the role of HCA Development Lead in 2009 and says: "I will miss so many people and thank everyone for their support for my role over the years."

Imogen Head

Imogen Head (General Manager Surgery) is leaving the Trust on 27 February to take up the role of General Manager for Trauma and Orthopaedics at Guy's and St Thomas' Hospital.

Gavin Kavanagh

Gavin Kavanagh (Senior Category Manager, Procurement) is leaving on 27 February to join the London Procurement Programme.

Nicole Porter-Garthford

Nicole Porter-Garthford is leaving the Trust in February to take on the role of Head of Operational HR at NHS Croydon after seven years at Chelsea and Westminster.

Nominate your Chelsea and Westminster Star today!

www.chelwest.nhs.uk/starawards

Chelsea and Westminster star awards 2015

Supported by CW+ The Art+Science of Patient Care
Chelsea+Westminster Health Charity

Letters and poems

Thomas Macaulay was, of course, a 19th century Whig MP and historian but in the 20th century his name was strongly associated with our HIV-designated ward, affectionately known as T Mac. In the 1980s and 1990s, many people died on T Mac. In February 2012, T Mac was closed and replaced by our state-of-the-art Ron Johnson ward for people living with HIV and incorporating oncology and haematology services previously provided for cancer patients in our Medical Day Unit.

In December I was one of a small group of people invited to witness the unveiling by Dr Mark Nelson of two memorial plaques on the Ron Johnson ward, one to Ron Johnson himself, who died last year and who gave a very large sum of money to enable the ward to be the world-class facility it is and also to further research into HIV disease, and the other to Jim Smith, a governor of this hospital who died on T Mac in 2010.

It seems to me a pity that neither plaque mentions Thomas Macaulay ward. The Ron Johnson ward has not yet been officially opened. When it is, let us hope that the plaque recording its opening will say that it replaced the well-known Thomas Macaulay ward.

Chris Birch
Patient and Governor

From the editor

Thank you to everyone who has shared their feedback. If you would like to write to Trust News, please contact our new editor Mark Purcell by emailing mark.purcell@chelwest.nhs.uk

—Katie

My wife Judy had a successful knee operation last year at Chelsea and Westminster Hospital.

By way of a thank you to all the staff who took care of her, I've written a little poem to them.

Yours sincerely,
Sydney Wragg

Bless
by Sydney Wragg

Judy went into the Chelsea and Westminster Hospital for a knee replacement.

The operation took approximately two and a half hours.

Bless the surgeons for their expertise.

Bless the anaesthetist who sedated her.

Bless the nurse who attached her to the blood pressure and ECG machines to monitor her state.

Bless the nurse in recovery, who wrapped her in warm blankets as she felt the cold.

Bless the nurses in her ward who monitored her blood pressure, temperature and blood oxygen.

Bless the physios for helping her to walk again.

They told her it would take around six weeks before she'd enjoy the benefits of the operation.

They gave her crutches to aid her walking.

Bless the six weeks.

Bless the crutches.

Bless all the staff at the Chelsea and Westminster Hospital for their care and dedication.

Bless everyone.

Bless the world.

Bless me if I ever need a knee operation.

Bless! Bless! Bless!

The Beta Cell
by Simon Horn, Patient

You cannot beat the Beta Cell,
Their care is unassailable,
Their expertise, when you're not so well
Shows nursing with no equal.

So diabetic old or young
Attend this section when its needed.
Their staff with charm are just among
The best when cures are needed.

This hospital of the NHS,
Do all they can for healing.
We are so lucky and so blessed
It's also very appealing.

The C&W has saved my life
Four times! Would you believe?
Saved me from much pain and strife,
What twists and turns we weave!
I cannot praise this place enough
They are there when the going gets tough.

Hair Salon

2nd Floor, Lift Bank D

Tue–Fri
10:30am–5:30pm

Appointments outside these times by prior arrangement

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trustnews
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