



Royal United Hospital Bath NHS Trust
Corporate and Social Responsibility
Report 2009/10

United in Excellence

Foreword

Welcome to the first Corporate and Social Responsibility Report prepared by the Royal United Hospital Bath NHS Trust. It gives me very great personal pleasure to see its production because although we already account for the way in which we spend our money (Annual Accounts) and the quality of our services (Quality Accounts), this report presents a 'richer' picture of the way in which we engage with our communities and contribute to them.

Through this document you will read about what we do within a number of spheres – using our strengths for the benefit of others, providing training and education opportunities, improving the environmental impact of our activities, working with local businesses and public organisations and benefiting from the support of our local community in delivering our services. We do not work with one community but engage with many – from local support groups and specific patient groups to the global community.

You will also read about our commitment to the sustainability agenda and how we recognise what an important part we play, both as a large employer in Bath and as part of the wider NHS, in reducing carbon emissions. People are increasingly aware of the need to reduce energy consumption at home and it is important that we educate, encourage and enable staff to do the same at work, as well as being a responsible public sector organisation.

As we look forward I am keen to make sure that we continue to build on our existing activities and that we demonstrate the value that we can bring. I am hopeful that we will be an NHS Foundation Trust within the next couple of years – that offers further opportunities as a membership organisation to engage differently with our staff, patients and with the wider population.

I hope you enjoy this report.



James Scott
Chief Executive

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er One: Our Environment

Our Environment

The NHS in England is responsible for more than 18 million tonnes of CO₂ each year from heating, cooling and lighting buildings, powering equipment, procuring goods and commissioning services, sending waste to landfill, and patient, staff and visitor travel. This is 25% of total public sector emissions in England and 3.2% of total carbon emissions in England.¹

In recognition of the urgency of climate change, the UK Government introduced the Climate Change Act with a target to cut carbon emissions by at least 80% by 2050, with a minimum reduction of 26% by 2020.

The Carbon Reduction Strategy, 'Saving Carbon, Improving Health', is the response of the NHS in England to the need for action. It addresses the mounting scientific evidence of the need for transformational change in the way we deliver health services. The strategy shows how we can rise to that challenge and demonstrates how the NHS in England can be an exemplar sustainable and low carbon public sector organisation.

Here at the RUH we have established a Sustainability Agenda led by a group we call Team Green RUH. Their remit is to reduce the carbon footprint of the Trust, which includes examining energy, waste and use of water, how we use our green spaces and our interaction with transport planning.² Managing these areas in a pro-active manner makes good business sense as well as reducing our impact on the environment.

One good example of this is the plan to replace the main boilerhouse with a new energy centre, incorporating a combined heat and power plant. This has the potential to save over half a million pounds per year in energy costs. Reducing our waste through recycling also reduces costs, as does the careful use of water consumption on site.

Going green, therefore, makes better use of resources and this is the basis for many projects which were begun in the last financial year and are continuing into the present one.



¹ Saving Carbon, Improving Health, NHS Carbon Reduction Strategy for England (January 2009)

² We are using the Good Corporate Citizenship tool to score ourselves on our sustainable credentials. Our carbon footprint is currently being calculated by using the Carbon Trust footprint calculator and we hope to be able to start using this as a benchmark in the coming year.



Royal Victoria Hospital Bath

Main Entrance

← Fracture & Orthopaedic

EMERGENCY SERVICE

Energy and Carbon Management

NHS buildings consume over £410 million worth of energy and produce 3.7 million tonnes of CO₂ every year. Energy use contributes 22% of the total NHS carbon footprint and offers many opportunities for saving and efficiency, allowing these savings to be directly reinvested into further reductions in carbon emissions and improved patient care.

Here at the RUH the use of both energy and water represents a significant impact on the environment - up to 20% of our carbon footprint. There is also a considerable cost involved which we have to consider, bearing in mind energy prices are much more likely to increase over the coming years. Our business plans need to be as resilient as possible to such price and availability fluctuations, so we need to look at sourcing and using energy wisely. By properly managing our energy and carbon use, and by coming up with new solutions to be more carbon efficient, we can minimise the impact on the funds available for direct patient care.

The contracts for the provision of gas and electricity to the site are negotiated nationally by the NHS Procurement and Supplies Authority (PASA) which has

recently been amalgamated into the Buying Solutions Energy Team as part of the Office of Government Commerce. The present electricity contract includes a requirement that 26% of the demand be met from renewable sources.

We report annually on our energy consumption to the Estates Returns Information Collection, or ERIC, section of the NHS Information Centre where they can be compared nationally. The ERIC returns will form part of the Official Statistics in 2010.

We are also covered under the European Union Emissions Trading Scheme (EUETS) as part of the Greenhouse Gas legislation. This scheme requires us to report annually on emissions from the main boilers on site, and to surrender the appropriate number of carbon allowances to cover these emissions. The Emissions Trading year runs January to December, and in March 2009 we reported CO₂ emissions of 6287 tonnes. This relates to gas used, most of which was emitted from the boilerhouse. This compares with 6480 tonnes recorded in 2008, a reduction of 3%.

The ERIC returns, for the year April to March showed:

Measure	08/09	09/10	Change
Electricity (GJ)	39898	39116	- 2 %
Gas (GJ)	126507	117094	- 7.5 %
CO ₂ (tonnes) *	11485	10876	- 5.3 %
Energy cost per sq. metre (£/m ²)	18.12	21.54	+ 19 %
Energy use per heated volume (GJ/100m ³) **	78.92	57.72	- 27 %
Total energy cost (£)	1675007	1999566	+ 19 %

* In ERIC the carbon figure relates to all energy used and includes the electricity demand – it is therefore larger than the EUETS figure

** A good deal of effort was made in 2009/10 to ensure that the estate was measured correctly and some anomalies were corrected

The Estates team regularly read gas, electricity and water meters across the site, and all invoices are scrutinised to ensure they are correct before payment. In this way leaks and exceptional changes can be identified and investigated.

New Display Energy Certificates and Energy Performance Certificates have been displayed in specific buildings on the site and show the unique energy usage per building as opposed to the blanket figure previously used. These figures will help us to measure our performance year on year.

In 2009/10 we carried out several projects to improve our environmental performance:

- Inefficient and failing heating systems were replaced in the central labs, medical physics and central pre-operative assessment suite.
- The pharmacy heating system was upgraded as part of the robot installation.
- A continuing programme of window replacement which gives a better environment both by reducing draughts and heat loss but also, when appropriate, reducing solar gain.
- Automatic doors were installed into the emergency department to better control the environment and allow the existing systems to operate to heat or cool more effectively
- LED lighting was installed in the north corridor and in the Princess Anne Wing link corridor. Modern lighting controls have been incorporated into the schemes. LED lighting can reduce energy usage by as much as 40% compared to fluorescent lighting and they also last significantly longer, so they are a sound investment to save on our electricity usage and reduce carbon emissions. LED lighting has also been trialled for external lighting ahead of possible installation in car parks and outside areas across the estate.

- Further work was carried out on improving and extending the Building Management System across the site. This can monitor and control heating, cooling, and ventilation systems, reducing energy usage through better control, managing set points and time schedules.

The programme for 2010/11 includes:

- More LED lighting in corridor and 24-hour areas.
- Increased levels of roof insulation in West ward block, residences and Bath & Wessex House. A thermal survey is programmed for the whole site in the winter to identify problem areas.
- More windows replacement – in the South block with particular emphasis on replacing the louvre windows but also on allowing better control of opening to improve ventilation.
- A heating system upgrade for Bernard Ireland House.
- Heating and cooling systems rationalisation in the emergency department to improve efficiency and effectiveness.
- Further work on measuring and metering – to assist energy awareness campaigns.

We are also working to reduce our gas usage and our reliance on electricity supplied by the National Grid by seeking funding approval to invest in a 2MW Combined Heat and Power plant (CHP).

The CHP project, which will involve a complete refurbishment of the boilerhouse, has an expected saving of £550k pa against an investment of approximately £4.8M. CHP plants produce heat and electricity from the same process and at the same time, therefore offering substantial energy savings and reduction in carbon emissions due to much more efficient fuel use.



Procurement and Food

The NHS in England spends £20 billion every year on goods and services. Emissions from this comprise the largest contribution to the NHS carbon footprint totalling over 11 million tonnes of CO₂ per annum: nearly 60% of the total NHS carbon footprint.³

As a responsible organisation, we need to take every opportunity to manage our procurement efficiently, thereby minimising wastage and carbon from the outset.

Sustainable procurement is a vital consideration for our hospital as it makes economic, social and environmental sense.

To ensure our procurement policy⁴ reflects our desire to reduce our carbon footprint, we need to consider our approach to commissioning, sourcing and buying. This includes whether a product should be purchased in the first place, the level of use, the most appropriate stock levels and reviewing whether an item can be reused or recycled prior to ordering new items. The drive to constantly reduce costs often favours the cheapest short term option, but this can have a disproportionately high life time carbon cost. When considering a purchase, we make sure we understand the whole lifecycle costs and any potential environmental impact.

We also have a leading role to play in partnership with suppliers to minimise carbon impact and promote sustainability and can use our buying power to ensure suppliers take carbon reduction and sustainability seriously.

Our overall aim is to ensure that goods and services procured by the RUH are designed, manufactured, delivered, used and managed at end-of-life in an environmentally and socially responsible manner.

Sustainable procurement helps us to:

- Stimulate innovation in the supply chain to deliver viable sustainable options for both goods and services.
- Identify any opportunities for greater efficiency in the supply chain, such as sourcing products from local suppliers or cooperatives.
- Reduce sustainability risks posed to the Trust through the practices of supply chain partners, the sourcing of materials and design of goods.
- Meet stakeholder expectations in a marketplace that is looking increasingly at the origins and ethical nature of products.

We have already made sustainable gains in a number of areas and are now working to develop this on a more formal basis. An example of this is the move to electronic trading where tenders, quotations and purchase orders no longer need paper copies. We also want to make the most of the opportunity for local suppliers to compete for NHS contracts, thus reducing transport mileage and our carbon footprint as a result.

We are working hard to ensure we try to purchase more products derived from renewable sources, encouraging our suppliers to develop and innovate suitable products for use by the Trust.

³ Saving Carbon, Improving Health, NHS Carbon Reduction Strategy for England (January 2009)

⁴ We have been strong supporters of Government policy outlined in Securing the Future - the UK Government Sustainable Development Strategy (2005) and Procuring the Future – the Sustainable Procurement National Action Plan (2006).

Food

The NHS is one of the largest purchasers and providers of food in the UK. We need to make sure we procure and produce sustainable, healthy and nutritious food for patients, visitors and staff.

Ways in which we can develop a more sustainable food system whilst maintaining nutritional value include the use of seasonally adjusted menus, increased use of sustainably sourced fish and a reduction in the reliance on meat, dairy and eggs. We can also work with local suppliers that can demonstrate lower carbon forms of production and transport.

We are working with local farmers and food suppliers to increase the amount of sustainable produce we use. Using more assured foods from fairly traded and organic sources results in healthier meals for patients, staff and visitors as well as benefiting the environment and the local economy.

Patients, staff and visitors can enjoy more assured foods from fairly traded and organic sources, such as free range Lion quality eggs, free range organic chicken, Rainforest alliance coffee and organic ice cream.

The hospital now frequently buys from smaller suppliers, giving local businesses the opportunity to provide good quality, fresh local food to the hospital at a competitive price. Meat and poultry comes from Bristol Butcher John Sheppards Ltd., fruit and vegetables from Bristol Fruit Market, cakes and bread from Bath Bakery and farm assured milk from Wellington, Somerset.





Bicycle
Parking

Travel, transport and access

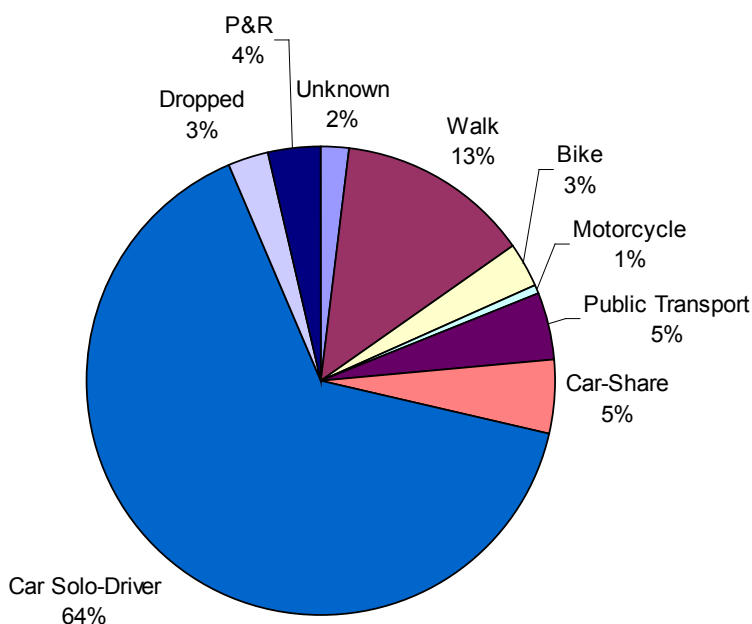
In line with our five-year Green Travel Plan (2005) we are actively seeking to reduce overall reliance on the use of the car as a means of transport to our site for patient, staff and visitors.

Our latest staff travel survey, carried out in 2009, showed that the most common way for staff to travel to work is single occupancy car. Clearly there is a need to encourage alternative means of transport as continued reliance on the car is not sustainable. Over the last four years we have successfully reduced the number of staff who travel by single occupancy car from two thirds of all staff to just over half since our first survey in 2005.

More staff are now walking to work with an increase of 7.4% from 2005. In the 2009 study, 21% of staff came to work on foot. We still need to do work around increasing car sharing and promoting the use of public transport. These have not significantly increased since the 2005 survey and work needs to focus on improving public transport links and promoting car sharing amongst staff.

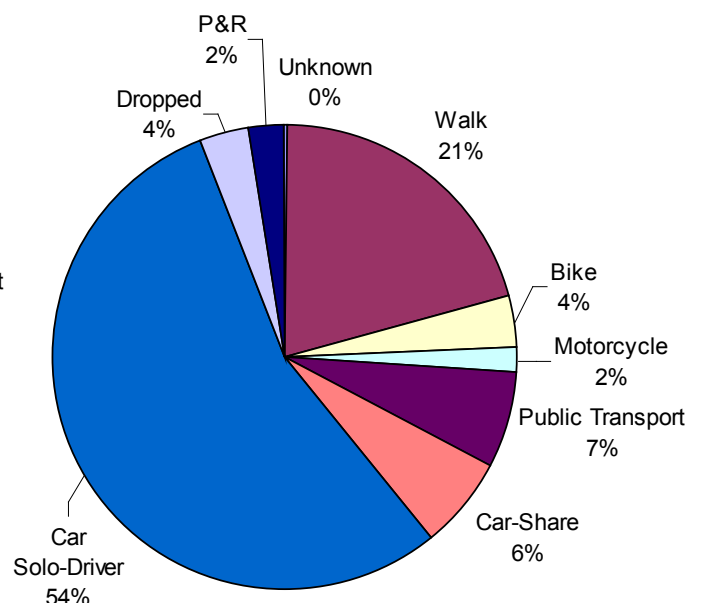
For visitors and patients car use is the main way of getting to the hospital, representing some 80% of total journeys, although in this case only a quarter of these are single occupancy. Buses, in all forms, account for fewer than 16% of journeys with other modes totalling less than 4%.

Staff Travel Survey 2005



P&R = Park and Ride

Staff Travel Survey 2009



In 2003 we went into partnership with BANES to run the Odd Down Park & Ride service. The site at Odd Down was chosen for its large parking capacity and its good catchment area for hospital patients and visitors, South of the city.

The Trust is currently working with BANES Council, Bath Universities and First Group on how we can best use local bus services to reduce the impact of travel to this site. First Group are currently examining their complete Bath bus network system with a view to improving service provision and better match services to demand. Our input on this is vital and will influence future bus service provision for all staff, patients and visitors.

In 2006 we signed up to Cyclescheme which is the leading provider of tax free bikes for the Government Cycle to Work initiative. Our employees can purchase a new bike and accessories through the scheme, and can save around 30-40% on the retail cost. This is very popular and more people are signing up to buy a new bike and reduce their car usage.

In January 2010 we installed a number of cycle hoops, covered shelters and a new secure staff cycle compound, substantially improving the facilities for cyclists. A Cycle Users Group was also set up in early 2010 which aims to raise the profile of the health, environmental and economic benefits of cycling to work.

We own several RUH vehicles, the majority of which utilise diesel fuel, with the remainder being electric. In 2009/10, our total amount of diesel used was 6187.40 litres which equates to 16.52 tonnes of CO₂.

We also provide a Non Emergency Patient Transport Service (NEPTS) for patients attending outpatient appointments, admission for treatment or being discharged following a hospital stay, where there is a medical need for the service.

In order to ensure we only carry out the necessary journeys we have a strict criteria, in line with national guidance⁵, and a dedicated transport office where booking requests are taken. This helps to improve the quality and accessibility of the service, reduce expenditure and screen the eligibility of patients, only providing for those who have a valid need.

NEPTS journeys are planned carefully to make sure each vehicle can carry a number of patients, with varying mobility needs, therefore reducing the carbon footprint by reducing the amount of journeys per day. All our ambulances run on diesel fuel in line with the Trust policy for sustainable greener energy.

⁵ Eligibility Criteria for Patient Transport Services (PTS) http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_078372.pdf

Water

Because water usage, drainage and the heating of water has a direct impact on carbon, we need to make sure we are efficiently using water by measuring and monitoring its usage, by quick operational responses to leaks, by using water efficient technology and by avoiding the routine purchasing of bottled water.

We use a substantial amount of water and in 2009/2010 we used 161,124 cubic metres of water, primarily for patient care.

We monitor our water usage closely by taking frequent meter readings and identifying unusual patterns which could indicate a leak is present. Leaks and faults are investigated and repaired promptly.

In 2009/10 we carried out a number of activities to improve our water use:

- The domestic hot water supply calorifiers for the South block were 'retired', removing a major inefficiency as well as providing better control of legionella risk.
- The Hydrotherapy pool was re-supplied with hot water from the central system, taking another old and inefficient system out of use.
- Following a step increase in base water consumption identified in January, survey works were put in hand to identify a possible leak perhaps caused by the severe winter. Most of the external underground mains have now been renewed or sleeved.

In 2010/11, there will be major re-piping works carried out on the mains water supply network at our site. A large water leak has been identified and its location verified. This leak will be repaired as part of the re-piping works and will ensure not just a more efficient water system, but also generate a cost saving to the Trust.

Total water consumption at the RUH:

Measure	08/09	09/10	Change
Water used (m3)***	155,233	161,124	+ 4 %
Water and sewerage cost (£)	336,052	360,887	+ 7 %
Water used per bed per day	657	701	+ 7 %

*** A step change in January indicated that a possible leak had occurred on the external system.



Waste

One in every 100 tonnes of domestic waste generated in the UK comes from the NHS, with the vast majority going to landfill. The NHS Confederation and the New Economics Foundation calculates that recycling all the paper, cardboard, magazines and newspapers produced by the NHS in England and Wales could save up to 42,000 tonnes of CO₂.⁶

In 2009/10 we generated a total of 1466 tonnes of waste, of which 319 tonnes was recycled (equating to a 22% recycling rate). We have to submit detailed records to the Department of Health explaining the amounts and types of waste we handle. Our waste is very strictly controlled; we are required by law to ensure all waste is managed and recycled or disposed of correctly at all times. Clinical waste and other hazardous waste is subject to tougher controls – 439 tonnes of clinical waste was disposed of in 2009/10.

We recognise that the most efficient way to manage our waste is to follow the waste hierarchy wherever possible:

Reduce: Can we reduce our waste by, for example, using an alternative product with less packaging?

Re-use: A lot of items can often be used again or put to a different use altogether. Re-use is more efficient than recycling or disposal.

Recycle: A large proportion of waste items are recyclable. It is also cheaper to recycle waste than for it to be disposed of in a landfill site.

Recovery: Some chemicals we use in our labs are returned to the supplier for recovery.

Disposal: Some items cannot at the moment be recycled and therefore they are safely disposed of in accordance with best practice to limit our environmental impact.⁷

In April 2009, we spent £100K on a new waste compactor and cardboard baler, a new electric waste truck and 110 new RUH branded wheelie bins. We also increased the promotion of recycling and re-use.

Significant achievements for 2009/10 include:

- Achieving annual savings of approximately £30K on waste disposal fees.
- Compacting our landfill rubbish which means our waste contractor has reduced their visits to our site meaning less vehicle movements.
- Baling our cardboard and selling it to a local company. This has meant that we are earning approximately £2K pa instead of spending £13K pa to have the cardboard disposed of.
- Improved recycling rates from our contractor for large bulky waste, such as damaged furniture. This has meant that we have reduced our spend on waste to landfill from £99K in 2008/09 to £82K in 2009/10.
- Starting the 'Any Takers' club. All staff can post items for re-use such as good quality, undamaged furniture, stationery and bric-a-brac to the Any Takers email address; a bulletin is emailed every Tuesday. There are approximately 3200 members of the Any Takers club and membership is still growing. This has saved many items from being disposed of to landfill.

We have set out our priorities for 2010/11 for improving our waste management operations after discussion with key stakeholders:

Increase recycling and waste segregation in our operating theatres

We need to reduce the amount of clinical waste we send for incineration and increase the amount of waste recycled. Operating theatres will switch a large proportion of their clinical waste from incineration to steam treatment in August 2010 and they have

⁶ Taking the Temperature - Towards an NHS response to Global Warning, 2007 NHS Confederation

⁷ <http://www.defra.gov.uk/environment/waste/topics/>

already significantly increased the proportion of waste sent for recycling by approximately 80kg⁸ per week.

Further investment in providing more recycling facilities for staff, patients and visitors with a target to reduce the amount of waste sent to landfill by 10% in the period 2010/11

Following on from the success of the Recycle Zone initiative⁹, more recycling units will be placed across the RUH, helping to ensure we can capture as much waste as possible for recycling instead of it ending up in landfill. This will also help to raise the profile for our hospital as a front runner for increasing our recycling rate. Several wards will trial the new recycling units. Increases in recycling can be monitored by looking for the increased usage of bins and subsequent drop in the tonnage of waste sent to landfill.

New bin exchange system

Our aim is to change the way we manage waste from the wards in order to make the process safer, cleaner and more efficient. We have already made a start on refurbishing our waste bin rooms in South block so that they can handle large wheelie bins to reduce the manual handling risks to our Environment Porters. A large wheelie bin will simply be exchanged for an empty one and will not need to be decanted, so visits to the waste bin room will be significantly reduced. Within the next two years we aim to have all our main waste bin rooms refurbished to this standard. Progress will be regularly reviewed by the Environment Manager who will report findings to the Safer Environment Group.

Some of the materials we use on site are hazardous, that is, they have a potential to cause harm to human health, or to the environment, either immediately or over an extended period of time.

⁸ (assumed total weight of bags in wheelie bin: 40kg in full bin, when emptied each bag weighs approx 4-5kgs)

⁹ http://www.recycle-zone.co.uk/press_office/news_read.asp?t_id=65

Examples of these materials are:

- Petrochemical based cleaning chemicals
- Petrochemical based paints and thinning agents
- Specialist stains used in our labs to help identify cell structures in microscopy
- Chlorine Dioxide dosed into the site mains water system to ensure water quality is maintained
- Asbestos used in buildings.

A detailed inventory of all hazardous substances used on site is held in the Estates Department in line with Control of Substances Hazardous to Health regulations. We have made progress in reducing the amount of hazardous substances used by moving to digital x-ray technology, which means that we do not have to use hazardous chemicals for the developing process. The redundant x-ray chemical waste tanks were fully decommissioned and removed from our site in June 2009. Digital x-rays are also available for inspection much quicker, meaning important diagnoses can be made in a shorter space of time for patients.

We have a detailed asbestos register which tells us exactly where asbestos is present. We have already removed large amounts of asbestos from our buildings and there is an ongoing programme to remove asbestos where required, for example, during refurbishment or new build works.

We will continue to work towards reducing the amount of hazardous substances we use. In 2010, we will decommission the Chlorine Dioxide chemical based water treatment plant and replace it with a Copper-Silver ion water treatment system. This will ensure our mains water is treated to the highest standard without use of chemicals, thus ensuring our water quality is improved - using a safer method - for patients, staff and visitors.



The Built Environment

The NHS has the largest property portfolio in Europe. Decisions about the planning, design and construction of new buildings, and the refurbishment of existing ones, are important opportunities to contribute to health and wellbeing, and to a more sustainable NHS. Since July 2008, there has been a formal requirement to apply the BREEAM¹⁰ healthcare environmental and sustainability standard to healthcare building and refurbishment projects above certain capital thresholds.

New buildings are expected to achieve an 'Excellent' rating and refurbishments a 'Very Good' rating, within the scheme.

Sustainable building and refurbishment means maximising sustainability performance through all phases of a building's lifetime – planning, design, construction and operation and using building projects to trigger improvement in other areas, like promoting active travel, cutting carbon, and expanding green and natural spaces.

In 2010, work will begin to build the UK's first environmentally sustainable Neonatal Intensive Care Unit (NICU) here at the RUH.

The Forever Friends Appeal has been raising money as part of its Space to Grow campaign to go towards a NICU that will be the first of a new generation of therapeutic healthcare buildings. The new NICU is costing £6.1m to build and is a 50/50 funded project between the NHS and Charitable monies.

The carbon neutral building will take just under a year to complete and once the NICU babies and staff have moved in, the refurbishment of the existing and currently very cramped unit will take place – becoming new parent accommodation, administration and training / seminar space. The whole project will be complete by autumn 2011.

The new NICU will include a range of sustainability features to create a 'lean, mean and green' building helping to reduce carbon emissions and setting a benchmark for future units.

LEAN – Design structure to minimise energy use

- Setting new standards for the health sector
- Energy efficient design, reducing air leakage, using low energy materials and creating a highly insulated building envelope
- Prefabricated building methods to avoid waste, landfill and disruption
- 'Green' roof and a sustainable urban drainage system to reduce pressure on infrastructure and promote biodiversity on RUH campus
- High performance roof glazing to allow direct sunlight into the 'heart' of the building without leading to overheating.

MEAN – Do as much as possible passively

- Heat recovery systems in mechanically ventilated areas
- Dimmable, low energy lighting controlled by daylight and movement sensors
- Lifecycle costs minimised through careful design
- Development of a water conservation strategy
- Natural ventilation used wherever possible.

GREEN – Maximise sustainability of active systems

- Single storey building to maximise the footprint and energy contribution of a ground source heat pump
- Cost effective use of solar panels and wind turbines is being considered
- Reduce waste / maximise recycling as prototype for best NHS practice
- Specify sustainable materials with minimal toxicity (for vulnerable babies) that are available locally
- The design will help the RUH take responsibility for future generations and make the NICU a beacon for sustainability across the health sector.

¹⁰ BRE Environmental Assessment Method



The UK Government aims for all new non-domestic public sector buildings to be zero carbon by 2018. We will continue to design for sustainability in new builds, such as NICU, but also in any refurbishments to take advantage of new technologies, the opportunity to improve patient environments and create buildings with lower running costs and reduced waste.

This is a great proposal. The NHS is starting to take its climate change and broader sustainable development responsibilities much more seriously, but it needs some state-of-the-art exemplars to demonstrate all the many benefits (environmental, social and economic) of doing things so much more creatively and sustainably. The RUH's proposal for a new – and very different – Neonatal Intensive Care Unit precisely fits that bill, and I sincerely hope that this proposal prospers accordingly.

JONATHON PORRITT

Founder Director, Forum for the Future



Green Spaces

Our hospital occupies a 21 hectare site and within this space we manage the grounds and gardens to ensure we present a clean and aesthetically pleasing environment for our patients, visitors and staff to enjoy. We have a range of veteran trees on site and have retained some land areas as semi wild environments (for example, the area adjacent to Avon and Wiltshire Mental Health Trust and near our main entrance).

We also have several internal courtyard areas in which we have placed art sculptures to provide an interesting and varied space for appreciation. Several of our courtyards are linked to patient areas and we recognise that green spaces can improve mental and physical health and wellbeing.¹¹ This is of particular importance during a patient's stay in our hospital and for their visitors too.

In March 2008 we completely refurbished our large memorial pond. We installed new pumps, rebuilt the pond perimeter, installed a new bespoke set of iron railings and an Ultraviolet Light (UV) water treatment system and high powered pump to improve the water quality. In June 2008 we extensively refurbished the memorial garden located in Princess Anne wing just in time for the NHS 60th Anniversary events at our hospital. Extensive preparatory ground works and landscaping works were undertaken to transform a once neglected space into a bright space for relaxation and enjoyment.

In 2009 we embarked on a large project to refurbish a large courtyard adjacent to the Children's Centre. For many years, this had been neglected so charitable funds were secured enabling the work to go ahead. The space is now much improved and willow sculptures have also been installed in this courtyard to enhance the natural environment for our young patients to explore.

Last year we took part in a project with BANES Parks and Green Spaces department and the Hospital Friends to brighten up the hospital buildings with beautiful floral displays. The facilities department arranged for the attractive hanging basket supports to be repainted and moved to a new, more central location. BANES Parks and Green Spaces department generously supplied the flowers and kindly agreed to care for the hanging baskets during the growing season. The project was just one of many funded by the Hospital Friends to benefit patients, visitors and staff.

We recognise that our green spaces play an important role in the health and well being of our patients, visitors and staff. We will preserve and enhance our green spaces by ensuring that we protect our natural habitats and conserve biodiversity in line with the Natural Environment and Communities Act (NERC Act), which puts a legal duty on us to ensure due regard to the conservation of biodiversity.

The Duty is set out in Section 40 of the Act and states that: "Every public authority must, in exercising its functions, have regard, so far as is consistent with the proper exercise of those functions, to the purpose of conserving biodiversity."

We are currently devising a biodiversity action plan to ensure we continue to meet our obligations under the NERC Act. The action plan will utilise information produced by Avon Wildlife Trust from their completed biodiversity survey, habitat survey and forthcoming bat habitat survey.

Provision for suitable green space will continue to be an important consideration on all new refurbishment or new build projects.

¹¹ http://www.fph.org.uk/uploads/bs_great_outdoors.pdf



Chapter Two



Two: Working with People

Working with People

The NHS is the biggest employer in the UK, and one of the biggest in the world.

The RUH is one of the largest employers in the Bath area, employing approximately 4500 staff. The employment standards we follow already go some way to ensuring that we can act as Good Corporate Citizens.

We know we can make a big difference to the well-being of the communities we serve through our approach to recruitment, learning and skills development, management, career progression, working conditions and equal opportunities. We can also promote sustainable development through the examples we set; with our staff, our local community and our suppliers or those with whom we do business.

Improving the health and well-being of our workforce not only ensures we are a 'healthy employer' with low sickness rates and high levels of motivation, it also helps to improve the general health of the communities in which our staff live. Whilst individuals have a role to play in terms of proactive personal responsibility, businesses have a role that goes beyond the legal 'duty of care' to improve the health and well-being of their staff. The NHS Constitution contains four pledges to staff, including commitments to clear roles and responsibilities, personal development, health safety and wellbeing and engagement.

The Final Boorman Review¹², commissioned by the Department of Health and published in November 2009, sets out recommendations for improving the health and well-being of NHS staff. Key points included engaging with staff so that services meet their specific needs, developing a Health and Well-being Strategy and recognising the links between staff well-being and productivity, efficiency and patient experience.

The Review found that:

Organisations that prioritised staff health and well-being performed better, with improved patient satisfaction, stronger quality scores, better outcomes, higher levels of staff retention and lower rates of sickness absence. (NHS Health and Well-being, p3)

As well as on-site facilities to support staff healthy lifestyles, we have already taken forward much good work, with various policies, procedures and initiatives to support employee health and well-being. Our new Health and Well-being Strategy¹³ will bring together all these elements and ensure that they are driven forward over the next few years.

¹² <http://www.nhshealthandwellbeing.org/FinalReport.html>

¹³ The strategy is based on the previous government's NHS strategy and public health agenda and will need to be updated in autumn 2010 when the current government produces a white paper on its plans to reform the NHS and Public health.



Organisational and Workforce Development

Healthy workplace

Currently, over half of women and about two-thirds of men are either overweight or obese. Being overweight or obese increases the risk of developing heart disease, Type 2 diabetes, high blood pressure and osteoarthritis. Obesity causes about 18 million sick days and 30,000 deaths a year in England alone.¹⁴

We know from looking at our 2009 Travel Survey that 60% of our staff come to work via car, either alone or car-sharing, so we have worked hard to encourage our staff to walk their way to a healthier lifestyle.

National charity Living Streets run the Walking Works campaign, funded by the Big Lottery Fund, to highlight the role that walking can play in bringing some much-needed activity into our daily lives. We took part by organising walks to Victoria Park at lunchtime, walks to the hospital from the bus/train station, and laps of the neighbouring Lansdown cricket pitch.

We know many of our staff are active throughout the day, and on their feet for most of it, but we encouraged more people to get outside into the fresh air, to take a break away from their desks and enjoy both the physical and mental health benefits of walking. We rewarded staff who took part in Walk to Work Week by giving out goody bags with footcare packs from the Body Shop to relieve weary feet and energy drinks and bars to re-energise tired bodies.

Every year we hold a 'cycle to work week', now named Team Green Britain Bike Week. This national celebration of cycling aims to get more people 'on their bikes' and we work with staff to raise awareness of cycle routes to work, promote the benefits of cycling and offer free breakfasts for staff who can cycle in that week.

We also encourage staff to join the national Cyclescheme, the leading provider of tax free bikes for the Government Cycle to Work initiative. 200 staff have joined so far, and made a substantial saving on a new bike.

Diversity and inclusion

We are committed to creating an environment in which everyone feels valued and able to give their best, and we believe that a diverse workforce can have a positive impact on both the everyday running of the hospital and our quality of patient care.

We have developed a Single Equality Scheme that pulls together all six equality strands: race, disability, gender, age, sexual orientation and religion & belief. The scheme outlines our commitment to giving an excellent service to patients and to being a first-rate employer.

Over the last twelve months we have supported a number of projects that promote diversity and inclusion in the workplace.

In November 2009 all members of staff from black and minority ethnic (BME) backgrounds were invited to a listening event to tell us what we could do better to support their development and working lives. As a result of this, staff wanted to set up a BME forum which would meet on a regular basis and give them the opportunity to support each other and share learning. Building a really active and participative group can make a real difference to staff in this Trust. We are now looking to help the group plan a multicultural event at our hospital for 2010/11.

We have supported a senior staff member to participate in a transformation leadership programme offered by the NHS Institute of Innovation and Improvement, called 'Breaking Through'. 'Breaking

¹⁴ Source: National Audit Office

Through' works by identifying, supporting and guiding people from BME backgrounds with the talent and potential essential to assuming senior leadership roles.

Our 50+ Club invitations generated a massive response and the listening event organised to launch the club in November 2009 generated a lively debate. Feedback indicated that a big concern for many older workers is the fact that their employment can end at the age of 65 - even if they don't want to retire. Forthcoming changes to national law will enable staff to continue working, supporting older people achieve a more active and financially secure life.

We hope that the 50+ Club will continue the debate and provide a forum for us to learn from our older workers' experiences.

Every year we hold a 'Learning at work' day to promote education and development in the workplace. In 2009 we were awarded the Inspiring Learning Award, sponsored by The Open University as part of its partnership with Campaign for Learning, which recognised our achievement in inspiring learning through our Learning at Work Day activities.

Learning can and should be life-changing and the award recognised our celebration of staff achievements.

Learning and development

We are committed to ensuring that all staff have the opportunity for performance development reviews and the chance to learn and progress their career at the RUH.

We want to ensure every member of staff has clear objectives that are in line with and support our strategic objectives to improve patient safety, patient experience and staff experience. We also work hard to identify potential in our staff and give them every chance to succeed as well as identifying any key skills gaps and provide training solutions to meet these.



Project SEARCH

We were the first hospital in the UK to welcome teens with learning disabilities into the workplace as part of Project SEARCH.

Project SEARCH is a programme to help young adults with learning disabilities learn the skills necessary for future employment and help them make successful transitions from school to productive adult life. Ten students took part in the school-to-work internship at the hospital in 2009/10 and a further cohort will join in September 2010.

From HR to the emergency department, from oral surgery to finance, each day the students spent time in the workplace, as well as back in their classroom to assess how their day has gone and learn other valuable skills such as writing CVs and attending interviews. The goal for each student is competitive employment somewhere in the community using the skills they have acquired at the RUH. We are pleased to announce that two students have now been taken on in full-term employment with us, within Sterile Services and Environment.

The Project SEARCH model was first developed in the USA at the Cincinnati Children's Hospital. Now running in over 120 American organisations, the project has proven success in supporting people with moderate to severe learning disabilities into work and staying there.

Project SEARCH supports the cross-government Learning Disability Employment Strategy¹⁵ which sets out a vision to increase the number of real jobs for people with learning disabilities with appropriate support being provided. Nationally, the unemployment rate for adults with learning disabilities is 90% and the majority of these individuals want to work.

Working with large employers drives culture change, as staff and customers see people with learning disabilities performing a variety of valued roles.

One of the primary keys to the success of the Project SEARCH model is a strong collaboration between partners and we worked closely with partners Bath and North East Somerset Children's Services and Adult Social Services and Fosse Way School, Bath, as well as BOSS (Bristol One Stop Shop) and Pluss Organisation Ltd.

¹⁵ Valuing Employment Now: Real Jobs For People With Learning Disabilities, 24 June 2009, Phil Hope, Minister for Care Services.

Sustainable workforce

We have a responsibility to the patients we care for and the staff who work for us to ensure we maintain a sustainable workforce.

There is a well documented predicted shortage of nurses in the UK. In the next 10 years one third of all registered nurses will retire.¹⁶ In order to continue to provide the care we currently do, and to expand that care in the future, the RUH needs to recruit, educate and develop people from a wider pool than just the current graduate nurse.

In planning for the future, we are looking into alternative ways of providing care to the traditional model. With our registered nurses working at an autonomous nurse practitioner level such as the Medical Nurse Practitioners we are looking at new roles to provide quality, hands-on care for patients. The development of an Assistant Practitioner role provides opportunities for career progression to those previously unable to move beyond the position of Healthcare Assistant.

An Assistant Practitioner is someone who competently delivers health and social care in a healthcare setting. They have a level of knowledge and skill beyond that of the traditional healthcare assistant or support worker. The role is developed and designed around the needs of service and patients, and so enables registered staff to be freed to perform more complicated clinical tasks as Assistant Practitioners undertake routine tasks and assume responsibility for the supervision of staff in bands one – three.

The Medical Nurse Practitioner is a fairly new role in the NHS, which enhances the role of skilled nurses in hospitals by ensuring they are better qualified to assist clinical teams. Medical Nurse Practitioners act as a lynch pin, providing far greater continuity of care, looking after both the medical health and social care of patients. They focus on discharge planning to help reduce a patient's length of stay, as well as other key issues such as infection control and help to improve communication between nursing and medical teams. They also help us to comply with the European Working Time Directive on training doctors' hours.

We are committed to developing the capacity and capability of our leadership workforce and to managing our talent effectively. Spotting and developing talented people in the organisation is critical to achieving excellence and ensuring sustainable current and future leadership. As part of our Leadership Strategy, entitled 'Empowered Leaders Leading Sustainable Change', we have run a number of workshops to develop leadership tools within the organisation. We invited guest executive coach and Scottish rugby captain David Sole to help with these workshops and meet senior managers and clinical leads, as well as using the sessions to pilot a talent management tool.

¹⁶ http://www.rcn.org.uk/newsevents/government/briefings/nurse_staffing_and_workforce_planning



Role of Partnerships and Networks

Community engagement

Here at the RUH we aim to be good neighbours, as well as provide first class acute healthcare. We engage with a number of community groups in Bath, both to improve our services and to understand how our impact, particularly in Weston and Newbridge, can be reduced. Good community relationships with local councillors, local neighbours and the BaNES team can help to mitigate against some of the worse effects of having such a large employer in the middle of a residential neighbourhood.

We work with the local council across a range of activities, especially Town & Country planning, travel planning and those services which are of particular interest to user groups. We also have good relationships with the police community support network and the local PACT neighbourhood teams which helps us to design our security and car parking services.

We also have a number of responsibilities, set out in the NHS Constitution¹⁷, that go beyond direct patient care.

One of the NHS Constitution principles sets out: ***'The NHS works together across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.'***

A value set out in the NHS Constitution states: ***We put patients first in everything we do, by reaching out to staff, patients, carers, families, community and professionals outside the NHS. We put the needs of patients and communities before organisational boundaries.***

Within the local healthcare community we work with three key NHS partners, NHS Bath and North East Somerset (BaNES), NHS Wiltshire and NHS Somerset. Each of these Primary Care Trusts are responsible for commissioning healthcare on behalf of their respective populations and delivering community and primary care services such as GPs and dentists. In these relationships we work to ensure that we are able to meet needs of the local population and that we promote healthy living.

Beyond healthcare partners, we work with the BaNES Local Strategic Partnership - this brings together a number of public and private sector organisations to address key issues in the local community. For example, the results of alcohol misuse are felt across the police, health service, education and local businesses in terms of anti-social behaviour, crime, injury and damage to property. By all agencies working together to understand the causes of alcohol misuse and to address these, and by working to have a consistent and robust response to risks and incidents relating to alcohol we can make more progress than working separately.

Likewise issues such as fuel poverty and sustainability can be addressed more effectively across agencies. In Wiltshire we have been part of the Wiltshire Strategic Needs Assessment, contributing to the priority setting for Wiltshire County Council and NHS Wiltshire in addressing health and well-being concerns.

We also have strong business links within the local community. Our Deputy Chief Executive is currently President of the Bath Chamber of Commerce, a membership organisation that promotes business needs within the BaNES area. It is quite unusual to find a member of the public sector occupying this position but as one of the largest employers within BaNES with around 4,500 staff, issues of transport, housing and overall economic well-being within the local area are of significant concern to the hospital.

¹⁷ <http://www.nhs.uk/choiceintheNHS/Rightsandpledges/NHSConstitution/Pages/Overview.aspx>

Being part of the Chamber of Commerce and of the Bath Initiative (a partner organisation) allows us to contribute to local development discussions such as the Bath Transportation Package, the development of Bath Western Riverside and developing Bath as a Centre for knowledge based industries.

In addition to the formal education links that we have with the Universities of the West of England and Bristol and with Bath College for the training of clinical and administrative staff, we work closely with a number of researchers at University of Bath and elsewhere to promote knowledge.

Help across the world

A number of our doctors and nurses travel the world, and give their own time, to provide medical help and assistance on a variety of charitable missions. We support them and, as an employer, gain a great deal from the wealth of experience brought back to the hospital.

A team from the intensive care unit visited the Centre for Tropical Diseases in Ho Chi Minh City, Vietnam in January 2010. Consultant anaesthetists Dr Jerry Nolan and Dr Tim Cook were able to share their knowledge and skills with healthcare workers in Vietnam as well as learning about the recognition and treatment of various tropical diseases such as tetanus and malaria. The team make annual visits to Ho Chi Minh City to deliver teaching and have made valuable contacts with colleagues who deliver healthcare in a different culture.

The Kenyan Orphan Project (KOP) is a registered charity supports programmes for orphans and vulnerable children in western Kenya, where poverty and disease are devastating communities and where approximately one in five children do not live to see their fifth birthday.

KOP supports school, health and nutrition projects in partnership with local project partners and does this in conjunction with an extensive UK university and volunteering programme focused on global child health education and experience.

Dr Dan Magnus (Paediatrics) and Dr Rebecca Leslie (Anaesthetics), two of the KOP co-founding trustees both work at the RUH and have both been to Kenya several times in the past 12 months.

KOP has taken doctor and nurse volunteers from the RUH to run rural medical camps in Kenya in 2006 and 2007 and staff are taking part in 'Making Tracks' in November 2010, a KOP cycle 500 miles across Kenya to raise funds for school water and sanitation projects.

A holistic approach to healthcare

We believe in not just excellent clinical care but also in enhancing the experiences of both our patients and staff.

Art at the Heart of the RUH

Art at the Heart is the charitably funded arts programme for the RUH. Their mission is to deliver a programme of integrated arts projects for the comfort, health and well being of patients, staff and the wider hospital community.

Since its inception in 2000, Art at the Heart has strived to present a high quality programme of arts for the benefit of patients, staff and visitors. The programme has covered the visual arts, music and literature through exhibitions, performances and readings, together with educational workshops for patients and staff. Work is also undertaken to improve the healing environment through innovative design ideas for the interior and exterior spaces of the hospital, art acquisitions and commissions, as well as an ambitious temporary exhibitions programme which covers the ground floor central area of the hospital.

In 2009 Art at the Heart was asked to create three sculpture gardens for patients to see from five new oncology isolation rooms, William Budd oncology ward and the new chemotherapy suite. Patients and staff were consulted in the selection of four sculptors and two photographers, who all shared a common theme of nature in their work. Research shows that access to, or a view of, an attractive garden and the inclusion of art in an environment is therapeutic for patients and staff.¹⁸ The planting list for each courtyard was designed to complement the sculpture and provide a varied view from all the windows.

An internal courtyard runs the length of the Children's

Centre isolation rooms and schoolroom. Originally planted and designed to include a pond in 1980, it had once been a garden that was accessible to patients but over the years redevelopment rendered the garden inaccessible and the pond was drained.

When the schoolroom was relocated with a door to access this courtyard, Art at the Heart saw potential to create an educational and restorative garden for the benefit of the children's ward, which would also offer a view from the main corridors on three floors and wards above. Funding was generously donated by the Friends of the RUH, The People's Mission Church and also The Bath Primary Schools Bi-Annual Arts Festival, which was held at the RUH in 2008 and raised £2500 in sales of the pupils' artworks.

Environmental artist, Julie Starks was appointed as artist in residence; Julie specialises in willow sculptures and features and she has made a willow deer, a bird and a large sculptural shelter as features for the garden. Workshops were offered to young patients in the isolation rooms and the school room and they created their ideal gardens in trays. Recently the young people have made a series of wildlife creatures from clay, which the artist has then cast in jessminite, to install as a wildlife trail for the garden.

Music as therapy

Soundbite is a new initiative from Art at the Heart, bringing a diverse range of music workshops and live performances to the hospital. These free and exciting events have shown to benefit patients, visitors and staff alike. One recent visitor said "[the music] brightened up the hospital... it was very uplifting. It cheered me up at a very sad time."

The programme was established in December 2009 and the team work in collaboration with musicians from Live Music Now, Bath Spa University and staff from the RUH including the RUH Choir.

¹⁸ Ulrich RS: View through a window may influence recovery from surgery. Science 1984;224: 420-421.



Through this diverse range of performances and workshops, Soundbite aims to ensure that all members of the hospital community have access to the enriching experience of music.

The 'Soundbite: Hospital Notes' initiative brings music to patients on the four wards on the Older People's Unit (OPU), who care for patients aged 65 and over, some of whom suffer from dementia. Since December 2009 regular performances have taken place on Combe ward, and it has been evident that listening to music can improve the mood of the patients and create a positive atmosphere on the wards. Music may also contribute to reduced levels of stress, aggression and number of falls on the ward, according to recent internal incident reports.

Rosanna Campbell, Musician in Residence, regularly runs interactive music workshops on the OPU; this involves active participation through singing and playing musical instruments. Each workshop is unique and involves a variety of instruments and resources. Active participation in musical activities may improve brain function and social activities can boost the self-esteem of older adults.¹⁹

Bath Hospital Radio

From humble beginnings with a weekly one hour programme of requests on tape, Bath Hospital Radio has progressed to 24/7 broadcasting in a professionally equipped studio in the grounds of the RUH.

A new broadband connection in 2009 means the radio station has improved its service to the patients in the RUH and the Royal National Hospital for Rheumatic Diseases by providing better quality live rugby commentaries from The Rec and other outside broadcasts.

Staffed by volunteers, Bath Hospital Radio's flagship programmes are the weekday evening request shows. Volunteers go to the wards and collect as many requests as time allows and they are played later that same evening. A variety of different specialist programmes are broadcast during the week and at weekends a Saturday afternoon sports programme includes live commentary from Twerton Park and The Rec.

¹⁹ http://alzheimers.org.uk/site/scripts/documents_info.php?categoryID=200137&documentID=134&pageNumber=1

Our Charities and Volunteers

Our work is significantly enhanced by the hard work and support of our dedicated charities. We never underestimate the support and help they give us whether it's volunteers helping on the ward to feed patients, money raised from the coffee shop to buy wheelchairs or fundraising events such as Ted's Big Day Out, which raises thousands of pounds to add to the millions raised to fund a new baby unit.

We would also like to thank all the individuals, our friends, who have donated money over the last year to the RUH. Every contribution, no matter how large or small, makes a difference to patients and staff at the hospital.

The Forever Friends Appeal

The Forever Friends Appeal raises funds to complement and enhance the services that we provide.

Their primary focus over the last couple of years has been a funding partnership with our hospital to provide a new, environmentally sustainable Neonatal Intensive Care Unit (NICU). This ground breaking project will put our hospital at the forefront of a sustainable approach to healthcare.

During 2009/10, the NICU Space to Grow campaign reached a key milestone; the cutting of the first turf for the NICU building. Raising a significant amount of the target funding has enabled the build to commence on schedule, whilst the remaining funds are secured.

Fundraising for the Space to Grow campaign has been successful as some longer term relationships with major donors come to fruition but just as important has been the overwhelming support from the public, community groups and corporate sector.

The past year was also notable for the visit by Hollywood actor Nicolas Cage who came to our annual fundraiser, Ted's Big Day Out! in support of the Space to Grow campaign. His visit helped to keep the Appeal in the public eye. Other areas to benefit from fundraising by either the Appeal team or individual fundraisers out in the community include the Acute Stroke Unit and Gynaecology.

The Trust board will be working with the Appeal to develop a new major campaign over the course of 2010/11 and the overall fundraising target for the year will again be in excess of £1 million.

The whole ethos of social responsibility is encapsulated in the Appeal / supporter relationship, whether through donating, support in kind or volunteering. Most people will have experience, directly or indirectly, of our hospital. Many have cause to be extremely grateful and this is reflected in the support we receive, either through the Appeal or directly to the hospital.

We've chosen Bath Rugby, St John's Hospital, Virgin Media and Chippenham Breast Cancer Support Group - who represent a small cross section of our public - to illustrate the strength of loyalty and support we receive from the community.



Bath Rugby

Bath Rugby has been a long term supporter, raising funds through their events, allowing collections at high profile matches, providing support in kind through player appearances and donating Bath Rugby memorabilia for raffles. Nick Blofeld, Chief Executive of Bath Rugby says: "Our players are frequent visitors to the RUH and are very grateful to the staff for the treatment and high level of care they receive. Supporting the Forever Friends Appeal is our way of saying thank you. They offer a valuable opportunity for us to link together and help provide additional resources beyond the reach of the NHS. Our local hospital is important to all of us and, like Bath Rugby, is at the heart of the community. The partnership between the Appeal, the RUH and us is therefore a natural link."

St John's Hospital Bath

St John's Hospital Bath, established in 1174, provides almshouse accommodation alongside grant giving, both to individuals and organisations. Chief Executive Jonathan O'Shea says: "As well as an historic charity, we are also a modern forward-thinking organisation. Our work has an important impact upon the lives of many Bath residents every year, and is of the utmost importance to the life of the city. The mission of the Trustees is to make best use of St John's endowment and St John's Hospital supports the new NICU project, which will benefit many babies over the coming years in its larger and environmentally friendly building."

Virgin Media

Virgin Media employ a large number of people with young families. The communications and entertainment company actively encourages its staff to support charities and the Forever Friends Appeal has proved popular. Lisa Codgell Brown, Regional Charity Champion (South West) says: "When staff opt to take part in sponsorship or raise additional funds, the amount raised is then matched up to £500 by Virgin Media's Corporate Responsibility programme. The company encourages active involvement among its staff and engages with charities throughout the UK. Staff are also given one day a year to volunteer and are encouraged to use this time to support their chosen charities. In the past staff have helped out by collecting donations at events organised by the Forever Friends Appeal."

The Chippenham Breast Cancer Support Group

The Chippenham Breast Cancer Support Group was started in 1996 by four friends, who met in the RUH whilst being treated here for breast cancer. They wanted to continue supporting each other after their treatment. The group gradually expanded and meets regularly, offering support and friendship to those diagnosed with breast cancer. Such support is recognised as being invaluable in helping towards post treatment recovery. Chairman Joy Widdows says: "As most of the members have received their treatment and care at the RUH, the group obviously has strong links to the hospital and this is reflected in the ongoing, supportive relationship between us and the Breast Unit, Oncology and Palliative Care team at the hospital. Details of the breast cancer support group, along with other information, is handed to newly diagnosed patients, and a recent web link from the Breast Unit web pages has been set up to link to the support group site."

Friends of the RUH

The Friends of the RUH have been supporting our hospital for over 50 years. Each day, up to 70 dedicated volunteers contribute their time and effort to provide assistance throughout the hospital. In a typical year 62,400 hours are given to guiding, providing tea and a listening ear on the wards, assisting patients to attend Chapel services, knitting for the premature babies and the elderly and planting and maintaining many of the courtyard gardens.

Commercial activities are also provided for patients, staff and visitors. The Friends Shop in the atrium and the Friends Coffee Shop, combined with the management of the Traders outlet, underpin the financial stability of the Friends organisation, which employs some full-time and part-time managers and assistants to ensure that the voluntary contribution is delivered in a professional and efficient manner. Additional more modest income arises from donations, bequests and fund-raising activities organised by the Friends.

A Board of Trustees oversees the activities of these commercial enterprises and the 400 volunteers who regularly participate. As a recognised Charity, the Board is responsible for ensuring that all profits are applied within the hospital, primarily for the benefit of patients, but not excluding visitors and staff.

During 2009/10, The Friends of the RUH provided £659,000 to purchase a range of items to benefit patients and their families. Examples include major renovation work to Victoria ward, electrically powered postal trolleys, an Oculus Pentacam camera for the Ophthalmic department and the provision of a private counselling room in the Pharmacy shop. Smaller but equally important sums were provided to purchase such things as CD players and patient information booklets.

The Friends also manage 40 students from local schools and universities who volunteer at our hospital. Regularly spending time on the ward, serving drinks and talking and listening to patients and generally helping out is an excellent way for those contemplating a career in the health service to gain experience in the caring and communication skills they will need. The patients really enjoy the company of the young volunteers who are able to spare a little more time at the bedside to chat. This is particularly welcome to those patients who don't have friends and family to visit them.

The Friends of the RUH will continue to try to improve the overall hospital experience by ensuring that the business outlets and fundraising activities remain profitable and that their volunteers are properly recruited and trained to provide an invaluable service to our patients, visitors and staff.

Volunteer drivers

If we are contacted by a patient who does not qualify for ambulance transportation then we can refer them to a number of local volunteer groups who can help. The Link Scheme in Wiltshire, Mendip Community Transport in Somerset and Age Concern in the Bath area can all help our patients get to and from the RUH when in difficulty.

Link Schemes are local voluntary groups which offer a good neighbour service to local people who are in need. Transport is provided for medical appointments and visiting relatives or friends in hospital. Link Schemes provide a free confidential service but welcome donations from their users. All donations are used in the provision of the service which is run entirely by volunteers.



Mendip Community Transport is a not-for-profit transport provider which operates accessible vehicles for community groups, the disabled, elderly, frail, the blind, mobility-impaired and similar disadvantaged groups/individuals, residing in the Mendip area. Set up in 2005 within the Mendip District Council Area following the reorganisation of the Patient Transport Service by the NHS, the service provides transport for individuals to outpatient departments and other medical appointments and is operated by volunteer car drivers who offer their time freely and in return receive reimbursement of expenses in respect of the mileage they incur.

Age Concern Bath offers a Home from Hospital service to support older people on discharge from the RUH. They take the patient home and help them to settle back into their familiar surroundings, making sure they are safe, warm and comfortable.

Short term help is given, if needed, which can involve talking and listening to the patient's concerns as well as practical tasks such as collecting prescriptions, shopping and helping with meals. This support, reassurance and encouragement can help relieve the stress and anxiety of going home and coping independently once again. The Home from Hospital service is operated under contract to the Primary Care Trust and Social Services and is free to the patient.

We also have two volunteer drivers who work as part of the Non Emergency Patient Transport Service contract operated by E-zec. These volunteers are particularly valuable to cancer patients who are coming to the hospital for radiotherapy treatment. Although they may not qualify for an ambulance, these patients can still get transport to hospital during a very distressing time in their treatment.

Our local community got involved and helped us out during the severe weather in January and February 2010. We put a call out for anyone local with a four wheel drive vehicle who was willing and able to help, and a number of local farmers got in touch. These volunteers worked tirelessly to bring members of staff who were stuck in the snow, to and from work and without a doubt helped us to keep our core hospital services running throughout the severe weather.

The Bath Cancer Unit Support Group

The Bath Cancer Unit Support Group has raised over £3m in the past 25 years to help cancer patients at the RUH, with a significant percentage of donations coming from patients and the families of patients.

Founded in 1985, the Bath Cancer Unit Support Group has funded many projects over the year including:

- £1m on a Linear Accelerator and a new reception area. The Linear Accelerator is a high energy x-ray machine, which allows more targeted and effective radiotherapy treatment to be provided to patients with cancer.
- £220,000 for a day-case treatment area on William Budd oncology unit, which enables some patients to receive their treatment as outpatients rather than being admitted as an inpatient.
- £25,000 for a new quiet room, which is a private space for cancer patients and their carers to use. The quiet room is dedicated to the memory of Janet Crane, a former member of staff at the RUH.
- £35,000 towards the funding of a new prostate cancer treatment called Brachytherapy, which involves planting radioactive seeds directly into the prostate gland and is often used instead of radical surgery.

The Cancer Information and Support Centre

The Cancer Information and Support Centre opened in July 2005 and is a partnership between Macmillan Cancer Support and the RUH, supported by the Bath Cancer Unit Support Group. The aim of the Centre is to offer information, practical advice and support to people with cancer, families and friends and also to provide healthcare professionals with an additional resource.

Established with a full-time information specialist and supported by trained volunteers, the Centre is currently open three days per week and during 2009/10 supported an average of six people on each of those days. Once a week, Bath-based charity Positive Action on Counselling (PAC) uses the Centre's quiet room to see cancer patients.

During 2009/10 the Centre provided around 150 oncology patients a month with 'green folders'. These contain a wide range of information specific to the type of cancer our patients have been diagnosed with and it enabled them to take that information away and read in their own time.

In 2010/11 the aim is to increase the opening hours of the centre and see, or provide telephone support for, up to ten people a day. New programmes such as the Look Good Feel Better Programme, Headstart and a 'Breast of Friends' group will run throughout the year and provide additional support to patients with cancer.

Recruiting, training and retaining volunteers will continue to be a priority during the coming year as they remain a vital part of the services and support the Centre offers to cancer patients across Bath, North East Somerset and North and West Wiltshire.

If you would like to know more, or to comment on our plans, please write to the
Chairman Brian Stables or Chief Executive James Scott at:

Royal United Hospital NHS Trust

Combe Park

BATH

BA1 3NG

Telephone: 01225 824033

E-mail: trustboard@ruh.nhs.uk

Website: www.ruh.nhs.uk

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Tel: 01225 825656

E-mail: pals@ruh.nhs.uk

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01225 825656.

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