

**Health Minister unveils new  
service for breast cancer patients**

**A hospital fit for the future**

**Breaking down the language  
barriers**





## Getting into the swim!

The RUH swimming pool is now open for a new season.

Prices are reduced for staff for the 2009 season. Also, a further price reduction of £10 is available to members of the Oasis health club.

The heated pool is supervised by experienced pool attendants and remains open throughout the summer months until Wednesday 30 September.

Application forms and pool rules are available from the main reception desk or the Oasis health club. This information is also on the hospital's intranet, under welfare and facilities. Opening dates and times will also be on display outside the swimming pool.

## Employee Assistance Programme

### Life getting you down? Stressed at home? Problems at work?

#### If you work here:

The EAP Staff Counselling Service is available to support you and immediate family members with:

- Free, confidential information and counselling
- You can refer yourself
- Short waiting times

**Just call us on ext. 5960**

**Employee Assistance Programme (EAP)**  
Royal United Hospital, Bath

**THERMAE BATH SPA**

# twilightpackage

at Thermae Bath Spa

**Treat yourself to an evening at Thermae and enjoy bathing in the warm, mineral-rich waters along with a light meal in the Springs Café & Restaurant.**

The Twilight Package is available Sunday - Friday from 4.00pm with last entry into the Spa at 6.30pm and last serving in the Restaurant at 8.15pm.

**ALL-INCLUSIVE PRICE OF £37.50 PER PERSON OFFERS:**

- 3-hour spa session for the price of 2 hours
- Complimentary use of towel, slippers and robe
- An individual main course from the 'Twilight Menu' and a glass of house wine, lager or juice

Enquiries: [www.thermaebathspa.com](http://www.thermaebathspa.com)  
**0844 888 0844**

# Stop Press!



Ben Bradshaw MP formally opening the digital breast unit, assisted by patient Sandra Veasey

Just as this issue of insight was about to go to print, a ministerial visit was underway at the RUH.

Ben Bradshaw MP - Minister of State for Health Services and Minister for the South West - arrived to formally open the Digital Breast Unit. The event highlighted the Hospital's digital mammography service for breast cancer patients.

Following a welcome from Chairman James Carine, Chief Executive James Scott and Medical Director John Waldron, the Minister first visited the Radiology MRI/CT unit and the Emergency Department before returning to the Breast Unit to unveil a commemorative plaque. The Minister met consultant in diagnostic breast imaging Dr Dorothy Goddard and spent time talking to staff and to patients in the unit who have benefited from the new technology.

## Editorial dates 2009

You can send your articles for **insight** via email to [anita.houlding@ruh.nhs.uk](mailto:anita.houlding@ruh.nhs.uk) or [communication@ruh.nhs.uk](mailto:communication@ruh.nhs.uk) or you can send a paper copy via the internal mail.

<b>Deadline for copy</b>	<b>Publication date</b>
Week ending 26 June	Week commencing 3 August
Week ending 25 September	Week commencing 2 November

To avoid disappointment, please avoid submitting your copy at the last minute.

## inside this issue

### insafehands

The future is in our hands	4-5
Proud to be in uniform	5
Yours sincerely	6

### inperson

Team of the month	7, 8 & 12
Book success	8
Just a minute	7, 9 & 12
People moves	9
Meet the divisions	10 -11
Cardiology ward	13
Celebrating innovation	13
RUH among top scorers	14
An insight into my role	14

### inview

A nicer brighter hospital	15
Our hospital fit for the future	16

### intheknow

Breaking down the language barriers	17
It's not just patients who want to get better	18
Supporting young carers	18
Focusing on 'end of life' care	19
Aspects of death, dying & grief	19
Ask Lisa!	20
Managing talent	21
New development opportunity for managers	21

### inaddition

Stressing down	22
Forever Friends	23
Art at the RUH	24
Hospital Friends	25

### insummary

Chief Executive looks ahead	27
-----------------------------	----

### inyourowntime

Take a break	28
--------------	----

## Contributors



**Andrew Alexander**  
Respiratory Consultant  
Pioneering a new communications service for profoundly deaf people



**Pete Fox**  
Senior Nurse Practice Development  
Focusing on 'end of life' care



**Howard Jones**  
Director of Facilities  
Modernising the hospital and improving life for patients and staff

## The Future is in our hands

The infection control team continue to keep us all focused on the progress the trust has made in reducing infection. At the time of writing, a week-long infection control event - The Future is in Our Hands - is planned. This event, from Tuesday 5 - Friday 9 May, coincides with the first Global Patient Safety Challenge and the launch of the Save Lives: Clean your Hands initiative.

Yvonne Pritchard, Senior Nurse for Infection Control said: "As a Trust we've seen an impressive reduction in infections over the past two years and we've achieved great success in hand hygiene. But we need to keep pushing ourselves and working together to achieve even greater reductions.

"We have been trialling a 'green card' scheme. This is a way of identifying positive behaviour and promoting good practice. We visit clinical areas and reward staff who are following all our infection control guidelines; simple changes such as removing jewellery and tying hair back can make a big difference."

Other activities include themed displays, competitions and quizzes on various aspects of infection prevention as well as a Trust wide 'de-clutter'. A course for infection control link practitioners, 'Proud to be an infection control link' is also running, including artistic elements which have been arranged by Hetty Dupays, Arts Co-ordinator.



Jo Miller talks about patient safety

We now screen all elective patients for MRSA and our new central pre-operative assessment unit is helping to reduce the spread of infections dramatically. If MRSA is present on the patient, they will be informed and their GPs will be asked to commence treatment five days ahead of admission to hospital.

Our aim is to have no patients suffering MRSA bacteraemia at the RUH.

This is challenging but achievable; all staff have a part to play in reducing and preventing infections and it is of vital importance that we work together to make the RUH a safe place for patients.

Patient safety is at the heart of everything we do at the RUH. Jo Miller describes eight interventions that will make a real difference to patients and the experience of staff in delivering care.

1. **Leadership:** Executive patient safety visits take place across the Trust and patient safety briefings are being trialled at handover in clinical areas.

As a Trust we've seen an impressive reduction in infections over the past two years

Continued...

2. **Surgical checklist:** a 'pre-flight check' is being used in theatre to make surgery safer.
3. **Reducing healthcare associated infections:** we're aiming for zero numbers of infections such as MRSA bacteraemia, line related and surgical site infections and ventilator associated pneumonia. We also want to eradicate C.Difficile diarrhoea as a cause of death.
4. **Detection of deteriorating patient:** all clinical areas will be recording vital signs and early warning scores in a standard way by October 2009.
5. **Reduction of high risk medication errors:** focusing on prescribing and administration, with the development of a new insulin chart, a review of medication doses and work on the prescribing and administration of warfarin and opioids.

“ I would like to thank everyone for their enthusiasm and commitment ”

6. **Reduction of preventable falls:** we aim to reduce the number of falls patients experience in hospital by 50% by April 2010.
7. **Venous thromboembolism (VTE):** 100% of patients are now risk assessed for VTE, with the appropriate administration of prophylaxis treatment.
8. **Reduction of hospital acquired pressure ulcers:** work is well underway to ensure that by 2010, grade 4 pressure ulcers will be a thing of the past.

Jo says: "On behalf of the Patient Safety Steering Group, I would like to thank everyone for their enthusiasm and commitment to this agenda and look forward to an exciting year ahead."

Jo Miller has been appointed to the post of Assistant Director of Nursing/Assistant Director of Infection Prevention and Control. The focus of this role will be to work across the Trust on our key objective of patient safety, including supporting the teams in infection control, clinical effectiveness and tissue viability. Jo has been seconded into the role of Senior Nurse, Patient Safety for the past few months and prior to this was Matron within Medicine. We all wish Jo well in this new role and support her and the teams in their work on patient safety.



## Proud to be in uniform

A new standard nurses uniform is being introduced at the RUH which will include changing Band 6 Junior Sisters from their current light blue uniform into navy uniform, as well as standardising the style of the uniforms worn by our Senior Sisters and Matrons.

The aim of this change is to promote a more corporate and professional image as well as enabling the procurement of better quality garments which are more appropriate for staff needs. It is also hoped that this move will make it easier for members of the public to identify nursing staff and support our ward

teams by reinforcing the seniority of nurses providing care.

By the time you are reading this we'll be promoting the uniform change across the hospital as well as reminding staff that we have a dress code that applies to everyone, regardless of whether or not they wear a uniform.

“ The aim of this change is to promote a more corporate and professional image ”

## Yours sincerely

Patients continue to take the time to write to us about their care and treatment at the RUH. Here are a few extracts from letters we received over the last few months, some of which appeared in print in the Bath Chronicle.

*Mr Hunt from Westbury* wrote 'I was rushed into the RUH and confess I was a little apprehensive having heard mixed stories of the performance of the hospital. However, the moment I arrived I received the most exemplary care that one could imagine. I was amazed at the dedication and professionalism of all the staff, to the hospital porter and the lady bringing in the tea. I never realised the extreme pressure staff undergo every day of the week and for them to perform their duties in such a professional manner shows dedication to duty that goes far beyond the norm. I thank the medical team that saved my hand, the dedication of the physiotherapy department and every one of the hospital staff for whom I now have the greatest respect.'

*Mrs Byrne from Shepton Mallet* wrote 'Thank you to all the staff on Philip Yeoman ward for the wonderful care and kindness shown to me. The nursing was second to none. They were gentle, kind and considerate. Everyone was very kind and I have nothing but admiration for your hospital.'

*Mrs Newson from Holt* wrote 'I was admitted to A&E then taken to Surgical Admissions Unit and Parry Ward. I found the treatment very professional and efficient and Dr Chris John was very caring, understanding of my needs and extremely supportive. The treatment was excellent.'

*Mrs Hamilton from Bath* wrote 'I cannot speak too highly of the staff. I recovered more quickly than expected. I was well looked after by the nurse, physio and occupational therapist so the whole experience was less traumatic than it could have been.'

*Mr Cobbe from Dunkerton* wrote 'I was in MAU and the MSSU. I enjoyed my stay in the RUH! The watch words in both wards were efficiency, care, expertise and effectiveness, I cannot speak too highly of either.'

*Mr Boast from Chippenham* wrote 'At all times, staff on Haygarth ward were professional, friendly and reassuring. All the staff I encountered were excellent from doctors, nurses, radiographers through to people delivering meals.'

*Susan Potter from Frome* wrote 'A very big thank you to the breast unit especially Mr El-Wakeel, Kate and Cherry. I am sure hundreds of people pass through that department but I was made to feel that it was only me. The attention you get is first class and they are there to sit and talk things through or at the end of a telephone line if you have a worry. Thank you NHS at the Royal United.'

*Mrs O'Neill from Bristol* wrote 'I think it is important to let you know that my stay in hospital was made as pleasant as possible due to the level of care that I received. All of the staff were



helpful, courteous, kind and caring at all times. I cannot speak highly enough of their professionalism and commitment, both to their roles and the patients in their care. I was on Forrester Brown and I met some wonderful people. The ward was also very clean. I have worked in hospitals and care homes for 30 years as an auxiliary nurse and people are sometimes all too quick to complain and criticise when disappointed but are not always so forthcoming when satisfied. The staff on Forrester Brown deserve praise indeed. They are people that the RUH should be very proud of'.

*Mr Dunseath from Wiltshire* 'I would like you to know how very well I was treated during my stay and how professional, kind, caring and considerate the staff who dealt with me were. I felt from doctors to cleaners, they were working as a closely knit team who put care of their patients absolutely at the top of their priority list. I would be grateful if you could pass on my thanks to staff in the cardiac ward and also to Dr A Garg who carried out the operation'.



# in person

## Just a minute...



... with Mike Osborne, Macmillan Consultant Clinical Psychologist, providing psychological support to hospital teams.



**Q** What led you to become a Clinical Psychologist?

**A.** It just seemed to happen as a result of the things that fascinated me. You listen to people all day as they face some of the most demanding tests we face in our life and do what you can to help them get through it and make sense of it. That's what all hospital staff do much of the time and it's incredible...for a psychologist, where else would you want to be?

**Q** What's the first thing you do when you get into the hospital in the morning?

**A.** Check on the BBC website for any psychology and cancer cure stories, weird celebrity behaviour that I might be asked about that day... and hope that Arsenal might buy a holding midfielder.

**Q** What book are you reading right now?

**A.** Plot Against America by Phillip Roth, one of those 'Master and Commander' books and lots of articles on Kindness and Compassion – and My Family and Other Animals with my son.

**Q** What's your dream holiday destination?

**A.** Sat in a cab with an Ice Road Trucker... although pretty much any Caribbean beach with the family would do.

**Q** Name one thing you couldn't do without in your job?

**A.** All RUH staff - everyone has to be a psychologist most of the time in this place.

**Q** If you could change one thing about working at the RUH, what would it be?

**A.** A bit more time to think would help.

**Q** What makes you laugh?

**A.** At the moment, the children on 'outnumbered' and the Ninja Cat on Youtube.

**Q** What do you do for fun?

**A.** Watch 'outnumbered' and the ninja cat on Youtube, try and wind up my children, dig holes in the garden, battle a slice on the golf course – try and do all the 'reasons to be cheerful part III'... just be at home with Helen.

## Gastro department awarded Team of the Month for January



The Gastro department has successfully gained Joint Advisory Group Accreditation in order to become a Bowel Cancer Screening Centre for five years from December 2008.

Consultants within the department ensured training and assessment initiatives were completed, the nurse team ensured quality and safety of patient experience and the audit admin team ensured processes and pathways were developed for ease of booking, as well as providing a facility to monitor waiting lists.



# Book success for hospital author

All the paediatric Occupational Therapists in the children's centre are tremendously proud of their colleague, senior occupational therapist Tessa Hyde, who has co-authored a second book on occupational therapy approaches for children.



The book, entitled Building Blocks for Learning: Occupational Therapy Approaches (Practical Strategies for the Inclusion of Special Needs in Primary School 2008) is co-authored with Jill Jenkinson and Saffia Ahmad. Published by Wiley-Blackwell, the book will be used extensively within primary education by teachers and special needs coordinators. It provides clear medical explanations for a wide range of conditions and how these can impact on the learning and social life of pupils. The format enables teachers to access information and a range of practical solutions quickly and easily.

Senior occupational therapist Naomi Floyd says: "Tessa was tireless in her commitment to writing the book whilst managing her workload. We are very lucky to work alongside someone so knowledgeable and experienced."

▀▀ Tessa was tireless in her commitment to writing the book whilst managing her workload ▀▀

# Myeloproliferative disorder telephone service team is February Team of Month



The team have implemented an innovative way of treating patients with Myeloproliferative disorders in the community.

The scheme enables patients to have their blood tested at their local GP surgery. Their results and any changes to be made to their medication are then telephoned through to them by the team at the RUH. Previously patients had to attend the haematology outpatients' clinic for blood tests every 2-3 months and then wait to see a doctor for decisions on any changes to their medication. Now they only have to come once a year for an annual

review but are able to call advisers between appointments if they have any queries. This has freed up appointments for other patients that need to attend the haematology outpatients' clinic.

Myeloproliferative disorders are a group of diseases in which the bone marrow produces too many red or white blood cells, or platelets. Patients require medication to control the overproduction of these blood cells.



▀▀ This has freed up appointments for other patients that need to attend the haematology outpatients' clinic ▀▀



# Just a minute...

...with Regina Brophy, chief pharmacist.

**Q** What led you to become a Pharmacist?

**A.** I wanted to do law or pharmacy. If I had known then what I know now, I should have done law and made my fortune dealing with medico legal claims!

**Q** What's the first thing you do when you get into the hospital in the morning?

**A.** I usually try and smile and leave any concerns behind, say a few hellos, head off to the ward and remind myself why we are all here: to make the patients' journey a safer one.

**Q** What book are you reading now?

**A.** I recently read 'Trespassers on the Roof of the World', a fascinating book about Tibet and all about the international race to get into Lhasa.

**Q** What's your dream holiday destination?

**A.** New Zealand, though I would settle for anywhere I could watch the French or Italian rugby team!

**Q** Name one thing you couldn't do without in your job?

**A.** My staff - any achievement of mine is down to them.

**Q** If you could change one thing about working at the RUH, what would it be?

**A.** I would insist that anyone in the organisation who wanted to contact me with something important would come and talk to me rather than e-mail me. I hate the e-mail culture even though I use it myself.



**Q** What makes you laugh?

**A.** I have a warped sense of humour so watching someone walk straight into a glass door would be enough to set me off. Bremer, Bird and Fortune (Channel 4) are also high up on my list.

**Q** What do you do for fun?

**A.** Tennis, partying and playing the piano.

## People moves



**James Rimmer, who is to join us as Director of Operations in June.**

James previously worked at Yeovil District Hospital NHS Foundation Trust as Director of Strategy and Performance and in that role led their successful

application to become an NHS Foundation Trust. James says: "I am very much looking forward to working closely with staff in the RUH to progress the trust's ambitious organisational goals."

**Welcome also to:** Matthew Prentice and Richard Graham, consultants in clinical radiology. Matthew previously worked at Royal Perth Hospital in Australia and Richard comes to us from the Oxford Radcliffe Hospitals NHS Trust. Josephine Crowe is a consultant haematologist who has taken up a permanent post having previously worked at the RUH as a locum. Alex Cowley is a consultant hand surgeon who previously worked at University Hospital of South Manchester.

**Farewell** to Professor John Osborne who recently retired. John had been a consultant paediatrician at the RUH for 25 years. During his career he reinforced the unit's high clinical reputation and helped establish a very good reputation for teaching and training. He established the paediatric research centre at Bath. He was part of the group that found the gene for tuberous sclerosis and has established ongoing clinical research on this condition. More recently he conceived then conducted an international trial evaluating different treatments for infantile spasms, a type of childhood epilepsy.

# inperson

## Meet the divisions

### Speciality & Support Services division

**Chair:** Lindsay Grant

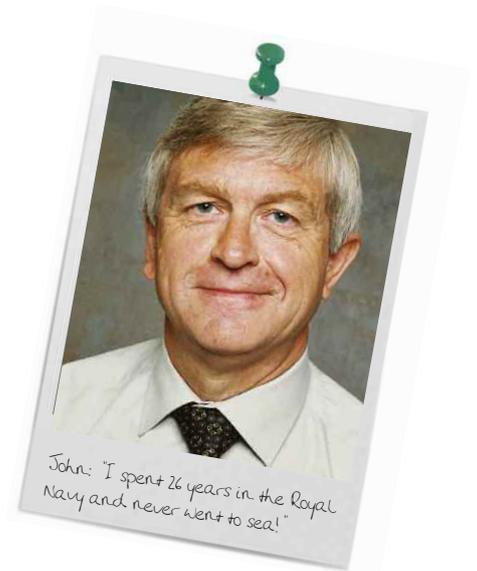
**Divisional Manager:** John Travers

**Lead Nurse (rotation):** Caroline Gilleece, Bev Boyd and Debbie Grant

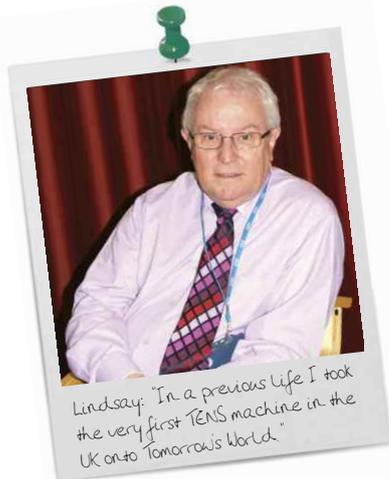
The speciality and Support Services division covers the parts of the hospital that aren't primarily medicine or surgery. We provide most of the diagnostic services and each patient who comes into the hospital will be supported by virtually every part of our division.

We do blood tests in Pathology, imaging in Radiology and the Breast Unit, supply drugs from Pharmacy, treat children and babies in Paediatrics and NICU, and treat cancer patients in Haematology and Oncology. Additionally we provide Therapy and Psychology services with all areas of the hospital supported by Medical Physics and Bioengineering.

Many recent medical advances have occurred in areas covered by our services. In order for the Trust to meet its waiting time targets, we need to make a significant expansion in the Radiology service where waiting times in MRI have come down from 18 months to six weeks and we are moving to two weeks. The Oncology plan is one of our major initiatives and currently we are waiting for PCT approval for major investment in this area. 10% of all babies born come through our Neonatal Intensive Care Unit and we are having a major appeal for a new building as well as increasing the staffing levels.



As we move towards NHS Foundation Trust status, the speciality division is the glue that holds all the other parts of the clinical services together. As a top performing Trust we need fast responsive diagnostics and excellent cancer and children's services. With a major focus on patient throughput, the division is central to achieving our waiting times targets.



### Medical division

**Chair:** William Hubbard

**Divisional Manager:** Clare O'Farrell

**Assistant Director of Nursing:** Gareth Howells

The work of the Medical division covers most of the conditions for which people are admitted to hospital. Areas we focus on include specific organs, such as the heart (cardiology), or the gut (gastroenterology) or diseases such as diabetes, stroke and cancers. In the case of medicine for the elderly the focus is on the particular needs of older people, many of whom may have a combination of different health and social problems.

For many people the Medical division is synonymous with the 'front door' of the hospital. The Emergency Department (or ED) and the Medical Assessment Unit are dynamic and demanding environments in which to provide care. Teamwork is the name of the game and quality is

defined by timely and accurate diagnosis and decision-making in order to ensure that patients get the treatment they need.



Continued...

Our top three priorities are improving patient experience and quality of care with an emphasis on the discharge process, improving and developing stroke care in line with new national guidelines and sustaining performance against the 4-hour wait target.

The success of the Medical division in delivering its key targets and ambitions will contribute significantly to the Trust's transition to NHS Foundation Trust status.



### Surgical division

**Chair:** Chris Gallegos

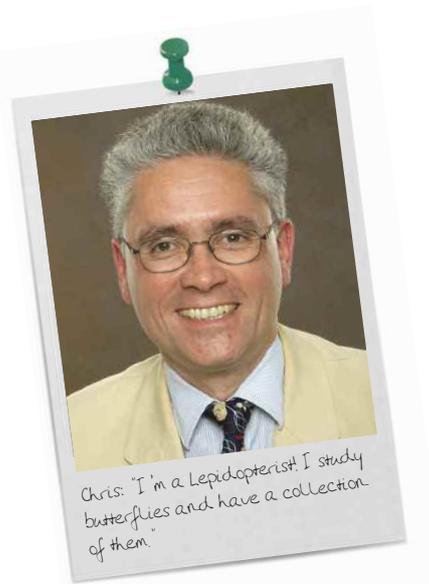
**Divisional Manager:** Steve Hart

**Assistant Director of Nursing:** Jan Lynn

The majority of our patients have planned surgical procedures, yet we also care for many emergency admissions, we've seen over 50,000 new outpatient referrals this year and operated on over 20,000 elective patients and 8,000 patients as emergency procedures.

Patient safety and patient experience are priorities for the hospital and this year, ward sisters have been participating in the Productive Ward initiative, releasing more nursing time to care for patients. Recruiting more nurses is also a priority and the number of nursing vacancies is reducing.

It's down to everyone's hard work and commitment that, despite many challenges, we've achieved maximum 18 week elective waiting times and we've reduced infections. We are particularly proud that this year not one elective surgical patient contracted an MRSA bacteraemia. Our surgical standard mortality ratio is also better than the national average.



The Surgical division supports patients who may require surgery, or who are booked in for planned surgery in a number of different areas, including gynaecology, ophthalmology, orthopaedics, urology, anaesthesia, ENT, general surgery and orthodontics. These surgical patients are managed via the elective booking process or the outpatients departments. Patients receive a pre-operative assessment prior to surgery, undergo their operation in theatre and then recover on a ward.



We are also reviewing our management processes, empowering staff and giving them greater independence in decision making around the services they provide. Making this kind of cultural change will be better for patients and staff and will support us when we become an NHS Foundation Trust in 2010.

# inperson

## Just a minute...



...with Steve Kelly, Purchasing Team Leader

**Q** What led you to work in purchasing?

**A.** I began as a buyer so it seemed like a good career move.

**Q** What's the first thing you do when you get into the hospital in the morning?

**A.** Sadly, I turn on the lights in the department.

**Q** What book are you reading right now?

**A.** I just finished *The Explorers* by Tim Flannery and now I'm on *Batavia's Graveyard* by Mike Dash.

**Q** What's your dream holiday destination?

**A.** Anywhere east of the Nicobar Islands is fine by me.

**Q** Name one thing you couldn't do without in your job?

**A.** Probably a telephone headset - although they don't really suit us blokes.

**Q** If you could change one thing about working at the RUH, what would it be?

**A.** Stop people parking on walkways and paths.



**Q** What makes you laugh?

**A.** *Blackadder*, Peter Kay, *The Royle Family*, *Monty Python*, *Bottom* - anything amusing.

**Q** What do you do for fun?

**A.** Play squash, listen to music - the usual suspects.

## Intensive Therapy Unit is March Team of the Month



In the last year the ITU has seen an increase in the number of critically ill patients requiring intensive care and staff have continued to ensure a high

standard of nursing care and professionalism during this time.

The ITU is one of the first to implement the 'productive ward' initiative which has helped them to work in a better,

more organised environment. They are also one of only 10 hospitals in the country taking part in a trial studying high frequency oscillation in acute respiratory distress syndrome and the latest ICNARC data ranks the unit as third in the country for its standard mortality rates. On top of all these successes, and despite increasing demand on ITU services, the team have been effective in responding to Government initiatives, such as the Saving Lives Campaign.

The effectiveness of this is reflected in two of the unit's longest length of stay patients in 2008, ventilated for 128 days and 124 days respectively without MRSA or C.Diff infections. Deserving award winners indeed.

# Cardiology ward bigger and even better

At the RUH we are always adapting and improving services to reflect the changing demands on our hospital, which in turn improves the care we offer our patients. One such change - which our Cardiology staff are very enthusiastic about - is the increase in the number of beds on the Cardiology ward, from 34 to 40.

This increase is possible because the cardiac rehabilitation classes have moved to the physiotherapy gym on the ground floor.

Sister Liz Richards says these changes will benefit both our patients and our staff: "Increasing the number of beds means we'll be able to treat more patients. Given other improvements in angioplasty services and access to cardiology investigation, as well as the fact that patients requiring bypass surgery may only have to wait a week for transfer, this means we are able to see patients more quickly and reduce their length of stay.



"The nurses benefit too, as we will be supporting them to develop their existing skills and knowledge to care for these patients. Supporting and training in such a great environment means we are more likely to recruit and retain staff. In fact, lots of students come back as trained staff, so we all benefit. There is a lot of activity on the ward and the staff care for a diverse group of patients in a friendly, efficient and effective way. Cardiology is a wonderful place to work."

Patients are admitted to the Cardiology ward for planned procedures such as a pacemaker fitting or angioplasty (a non surgical intervention for patients with blocked or narrowed coronary arteries), usually requiring a one or two night stay. The majority of patients with heart failure, chest pain, unstable angina etc., are admitted via the emergency department. They also come to the cardiology department from other wards or directly from the cardiology outpatient clinic.

## Celebrating innovation and excellence

We are delighted to hear that consultant in intensive care medicine Dr Tim Craft has been shortlisted for the People's Award for Dignity in Care - an award that recognises the importance of treating people with dignity and respect when providing health and social care services. Tim was nominated for this award by the family of one of his patients.

Dignity in Care is one of 14 categories that form the Health and Social Care Awards, which are run at both regional and national levels. The winning application from each national category in all 10 regions will be automatically considered for a national award.

There is so much in healthcare for us to be proud of and it is always great news when the achievements of those who



dedicate their lives every day to helping people are publicly recognised. We congratulate Tim on being shortlisted for this award.

# An insight into my role



Viv Derrick is office manager in the Oncology department and has been working at the RUH for seven years.

Previously Viv worked as a ward clerk on Robin Smith ward.

Viv says: "Much of my job is spent ensuring that clinics run smoothly and efficiently. I make all the new outpatient appointments and ensure that patients' case notes are available and well prepared in advance of clinic appointments.

"All staff work extremely hard to ensure that each patient receives the best possible care and consideration during their visit. Some of our patients travel a long way, so we always do our best to fix a time that best suits them.

"Even though many of our patients are very poorly and arrive feeling unwell, it is a really happy place to work. My job can be extremely rewarding. I particularly enjoy the relationship I have with staff and the contact that I have with patients.

I have met so many lovely people since I began working here.

"I enjoy my job but it is important to wind down after work, so sometimes I'll go to the theatre or maybe have a meal out - I have a passion for Indian food. I also love to travel with my husband."

All staff work extremely hard to ensure that each patient receives the best possible care

## RUH among top scorers in national NHS Staff Survey

Results recently published show that we are in the best 20% of acute trusts in key areas.

These include the majority of staff surveyed feeling they are valued by colleagues, involved in making improvements at work and satisfied within their roles and with what their job involves overall.

The survey also reveals that more staff than before are satisfied with their job, want to stay at the Trust and believe that the organisation is committed to a better

work-life balance. Director of HR Lynn Vaughan says: "The number of staff who would recommend the RUH as a place to work is above the national average for acute trusts. What better commendation could there be than one like this, which demonstrates that our staff are proud to work here and feel valued in what they do."

Lynn acknowledges: "Staff are still experiencing work-related pressure as a result of the substantial increases in the number of patients electing to come here for treatment and in the number of

patients referred by their GP. We're committed to matching staffing levels to the increasing workload. We've had a really successful recruitment process, and since last year have reduced the vacancy rate from fewer than 10% to just over 4%. In total 263 new nurses have started.

"Continuing our recruitment drive and improving team working will help us all to respond positively to the challenges of working in a busy hospital focused on delivering excellent care for every patient."

# A nicer brighter hospital



Project Managers Lee Williams and Daniel Barnett

Spring is often a time when many of us unearth the decorating equipment, head for the DIY store, or employ the professionals if more than a 'spruce up' is needed.

Things are not that different here at the RUH... just on a much larger scale and with a wide range of contractors and craftsmen. You may have noticed many pockets of work ongoing in and around the site and there is more to come. It's being overseen by our relatively new Director of Facilities, Howard Jones and works progress is being managed by teams of staff across the hospital. Howard says: "The planned programme of work is very extensive – everything from modernising wards to include new single-sex sanitary facilities, which will improve patient dignity and privacy, through to developing a much quieter and more efficient waste management system. We've started the window

replacement programme with part of Bath & Wessex House and will continue with Bernard Ireland House in the spring/summer."

The £800,000 investment in the Central Pre-Operative Assessment Unit is bringing many benefits to patient care and improving productivity. As part of this contract, the curtain walling to the bridge between RUH south and west will be repaired. Work will begin soon to build a new aseptic suite for oncology on William Budd ward. This will provide ensuite accommodation for patients and allow us to demolish the existing poor quality building. The design team has also been appointed to build a new Linear Accelerator bunker and the Linac itself will be ordered late this year - increasing the service to cancer patients. A lot of work has been done to improve the Radiology department including a new staff room. Further work is planned.

A new grounds and garden contract has been awarded with an increased investment this year, there is much to do but the intention is to improve the entire site with maintenance and some re-planting. A new window cleaning contract means windows will be cleaned four times a year from now on.

The large children's courtyard is also being redesigned with our Arts Strategy group taking the lead for that. Helping people to find their way around the hospital better will start with clearer signage at key points, starting with the road junctions and main entrance; we will also put in place an external re-decoration programme this summer. A new waste compactor, baler and electric vehicle will enable more efficient, quieter management of waste which will also generate expected savings of £15,000 a year.

Finally, the estates team are busy at work replacing the engineering plant to improve the efficiency and safety of our heating and hot water systems, ready for when those cold winter days descend – thankfully they are several months away!



Refurbished waiting room in x-ray

# RUH redevelopment programme: Our hospital fit for the future



Artist impression

**Last September we announced ambitious plans for a major hospital modernisation programme.**

If approved, a number of new projects will take place over the next ten years including a new and improved neonatal intensive care unit and a medical block featuring three new wards, all with ensuite rooms, and new pathology and pharmacy departments. A dedicated cancer centre will be built and RUH South will be refurbished to become an outpatient unit.



Artist impression

Steve Boxall, Head of Service Redesign & Improvement is heading up the exciting programme. Steve says: "Our next step is to bring together the results of all our planning and preparation work into what's called a Strategic Outline Case. This goes to the Trust Board and the Strategic Health Authority for approval and if approved, we'll start on individual planning applications for each of the proposed projects."

Planning application for the new NICU has already been submitted to Bath and North East Somerset Council, which if approved, could see building work start in late autumn.

On the estates side early work has involved understanding more about the hospital site and the condition of the existing buildings by carrying out detailed site surveys. Meanwhile staff and patients have already been

involved in a series of clinical workshops discussing ideas around improving models of clinical care and looking at innovative care pathways.

Steve adds: "We wanted to ask the very people that use these services what would work best for them. One of the main themes that came from these workshops was simplicity. You wanted excellent clinical services in an environment that was built around the patient, so simple things like putting services for cancer all in the same place and designing rooms where relatives or carers could stay overnight easily and comfortably."

As the programme progresses the project team will be consulting in more detail with staff, patients, visitors and the wider public. Regular project updates and news will also be available on the RUH website.

# Breaking down the language barriers



Consultant Respiratory Physician, Dr Andrew Alexander's personal experience has led him to pioneer a brand new communications service at the RUH for profoundly deaf people.

"My interest in health care for deaf people comes from having a deaf daughter. We communicate through British Sign Language at home and I am aware of the problems deaf people have in accessing health care and in understanding consultations with health care professionals. Deaf people normally rely on family and friends to interpret at hospital visits but they are not usually qualified interpreters and communication in a medical consultation needs to be 100%, so relying on lip reading and writing notes is often inadequate. Poorer access and communication contribute to poorer health for deaf people."

However, by the time you're reading this, the RUH should be well on its way to being the first UK hospital to provide a web-based communication system for deaf people along with deaf awareness training for staff. 'SignTranslate' gives access to an on-line British Sign Language interpreter if an interpreter on site is unavailable. If an on-line interpreter isn't available then video clips of questions and phrases in BSL (and also 12 spoken foreign languages) can be used to aid communication. SignTranslate can also be used to send text messages to patients about appointments and to print off a list of medications.



## The first UK hospital to provide a web-based communication system for deaf people

Andrew adds: "I have been working with several departments at the RUH to try and improve communication for deaf patients and deaf awareness in general. One of the Computers on Wheels (or COWS) from the Emergency department will be used to access SignTranslate for patients across the hospital. However, there is little point in having the service without staff being aware of the communication needs of deaf people. That's why we have also set up deaf awareness training for up to 250 staff.

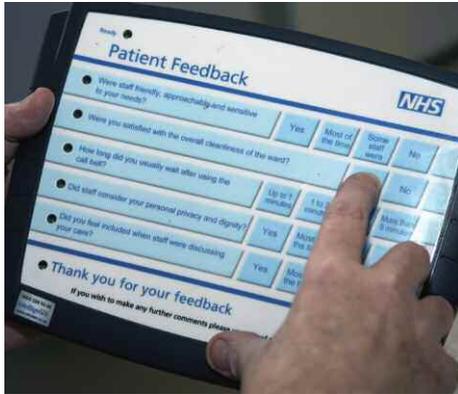
"What we are doing here at the RUH is also being recognised at a national level.

"I am a member of the Research Advisory Committee of a national three year research project investigating the health of deaf people in the UK.

Through my involvement in this study I was recently invited to speak on the health of deaf people at the House of Commons. This gave me the opportunity to meet MPs and leaders of national deaf organisations to discuss what the RUH had done and what we could do."



# It's not just patients who want to get better at the RUH



The RUH is the first NHS Trust in the south west to use the Patient Experience Tracker or PET, which provides patient feedback on their experience.

The PET is a mini-sized computer that asks five questions for patients to answer, with an option of 17 languages. The questions give patients the opportunity to respond anonymously on topics such as cleanliness, staff attitude and staff ability to work as a team.

Patients answer the questions by selecting the answer that best fits their experience. This information is then downloaded and sent back to staff the following week. Staff address any improvements needed and this action is

recorded on a poster displayed for patients and visitors to read.

Head of Patient Experience Theresa Hegarty says: "Staff are incredibly supportive of this project and have shown their consistent commitment to improve patient experience at the RUH."

Mandy Staunton, a patient representative at the hospital says: "Use of the PET is a concrete step towards taking the patient view and concerns into account and making changes as a result. The staff I've worked with on this project have impressed me with their drive and enthusiasm to improve patient experience in the midst of a very demanding job."

**Staff are incredibly supportive of this project and have shown their consistent commitment**

## Supporting young carers

Some of the children who visit our wards and outpatient departments do so as the main carer of a relative, often a parent.

With support from Salisbury Hospital, and BANES and Wiltshire young carers' teams, the RUH is now aiming to give these children the recognition, information and support they require.

In April, the RUH hosted an event to launch the Young Carer Pack that will support young carers whilst they are visiting with a relative. The pack contains a range of fun and practical items as well as important information including a young carer's leaflet, hospital map, contact numbers, top tips to get most useful information and facts about

'bugs'. A list of standard questions to ask staff also ensures they are fully involved in the care plan; this is so they leave with the knowledge they need to care for that person when they go home.

Around 30 young carers attended the launch event giving staff the opportunity to meet them and get a better understanding of some of the issues they face.

Ward staff are now being encouraged to establish if visiting children are young carers, and if this is the case, to provide them with a Young Carer Pack.

BANES and Wiltshire young carers teams represent around 700 known children who are long term carers for family members.



Daisy Cochrane and Hayley Lundie explore the new packs with Sonya Hutchison at the RUH. Photo courtesy of Bath Chronicle

Some of these children are as young as five and caring for people with learning disabilities, mental health problems, physical disabilities or a chronic illness. In some cases these young people will be the main person looking after someone in the family.

# Focusing on 'end of life' care

A new section dedicated to End of Life care is now available on our intranet to support staff through this often complex and sensitive aspect of care.

End of Life gives practical information for staff as well as policy documents, education material, other web links and much more around the end of life pathway of care.

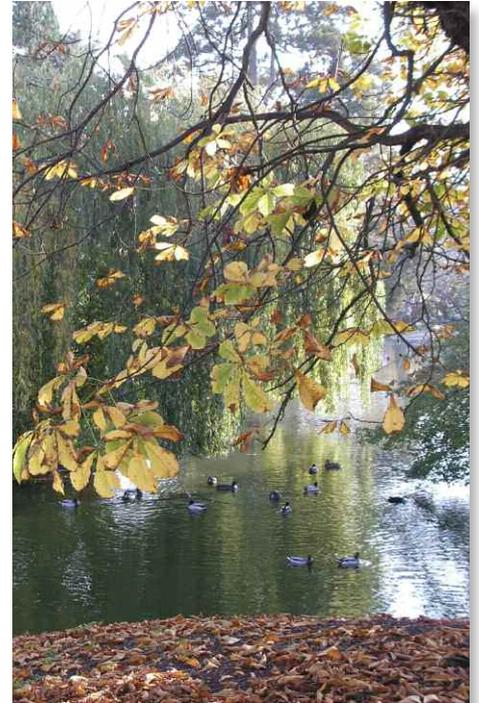
Maggie Crowe, Nurse Consultant Cancer Services, said: "End of life care is so important and how we care for the dying is an indicator of how we care for all sick and vulnerable people."

Pete Fox, Senior Nurse Practice Development says: "This new section

already has lots of information for staff, but we would really value any feedback to develop it. Please share this valuable information with your colleagues; you could also create a shortcut to it on your desk top."

The information is also being adapted for patients and carers and will be launched soon on the RUH public website, demonstrating our commitment to improving standards of care.

For more information and to provide feedback, please contact: Maggie Crowe, Pete Fox or Louette Eagles, End of Life web designer.



# Aspects of death, dying and grief

**How many of us take time to reflect on the process of dying?**

Do we explore the meaning and impact of loss and grief for patients and their families? Do we acknowledge the impact on ourselves?

I recently attended a workshop for non clinical staff, looking at aspects of death, dying and grief and it gave me much food for thought. A lot was packed into this thought-provoking day. We talked about what happens when someone dies in hospital and the practical issues around this. We shared examples of difficult situations we

experienced as individuals and explored how we felt and how others may react to grief and loss of many kinds as well as death. We also found out more about the support that's available to staff. It wasn't depressing, it was fascinating.

It didn't hurt to be reminded that staff deal with, or are exposed to, difficult and emotional situations on a daily basis and that they deserve to be supported just as much as those for whom they provide support. A lot of the time we have no idea what someone has had to deal with during

their day - this workshop has made me more considerate of that.

More workshops are planned for non-clinical staff in June, September and December. The clinical programme is full for this year, but another is planned. For more information, contact Lucy or Debbie on ext. 1542. Also ensure you look at the information and support that is available in the new End of Life section on the intranet.

Anita Houlding  
Communications officer

◀◀ We have no idea what someone has had to deal with during their day - this workshop has made me more considerate of that ▶▶

# Ask Lisa!

MLE trainer and co-ordinator Lisa Harvey answers some frequently asked questions.



**Q** What is a Performance & Development Review (PDR)?

**A.** In summary, it's a way that individuals and managers can review performance, agree work objectives and identify development needs for the future.

**Q** Where can I find out more about it?

**A.** There is a new section on the intranet describing the importance of PDRs and how to conduct them. You'll find a review form, handbook and policy, and training and support information along with facts on pay and gateways and details on the Knowledge and Skills Framework. If you can't find what you're looking for, contact Melanie Ball on ext. 5966.

**Q** How does MLE help with my Performance & Development Review?

**A.** MLE gives you access to your training record, providing evidence of your completed mandatory training. To find your training record in MLE:

- Click My Reports
- Within the training reports section, click training record, a course directory shows training opportunities, certificates of completion and KSF dimensions against each course or subject.

**Q** I am not confident using a computer. Where I can get help?

**A.** The NHS Elite e-learning programme is now available via MLE. This programme will help you gain

confidence in using a computer. For further assistance with computer training call Claire Bell or Liz Jones in IT on ext.1292 or ext. 5444.

**Q** When and where can I access MLE/e-learning?

**A.** You can gain access from any computer with internet access. We recommend a session in the library or education centre where you can get help if you need it.

**Q** I am having problems launching e-learning – can you help?

**A.** Yes we can. Why not book a place on one of our e-learning sessions? A list of dates can be sourced via MLE or you can call the education centre reception on ext. 5502. If you have a technical issue or you require a software update, contact the IT help desk on ext. 5444.

**Q** What is an NVQ?

**A.** A National Vocational Qualification is a nationally recognised work based qualification. A candidate is assessed in their work environment and during their normal working day, to demonstrate their competence.

**Q** How will an NVQ help me in my job?

**A.** An NVQ will give you the knowledge and confidence to enable you to work to the highest of standards. For further information, contact Deb or Lucy on ext.1542.

**Q** I'm having problems accessing MLE, who do I contact?

**A.** Contact the IT help desk on ext. 5444.

## Get involved in a staff survey 'listening event'

Representatives from the Staff Survey Steering Group are planning to hold 'listening events' to hear your feedback - gathered from the 2008 Staff Survey results – on the extent you feel satisfied with the quality of work and patient care you are able to deliver, alongside your satisfaction of working within well structured teams.

We want to hear what actions you would like the Trust to take to improve satisfaction levels in these key areas. Your contribution to these events is of great value – all staff are welcome. The 'listening events' will take place on:

- Wednesday 6 May, 11am-12noon  
Anaesthesia seminar room
- Wednesday 20 May, 9-10am  
directors office meeting room.

If you would like to take part, please contact Isabelle Fawkner-Corbett via email or ext. 4017 to book a place. Spaces are limited to a maximum of 15 people per session. If there is significant demand, further dates can be considered.

# Managing Talent at the RUH



As part of the Trust's newly agreed leadership strategy, entitled 'empowered leaders leading sustainable change', the RUH has been running a number of associated workshops to develop leadership tools within the organisation.

The leadership strategy describes the Trust's ambition to develop the capacity and capability of our leadership workforce and continue to manage our talent effectively. To assist the trust in managing talent effectively, invited guest executive coach and Scottish rugby captain David Sole engaged senior managers and clinical leads in the

concept of managing talent. The session included a talent management tool, which is being piloted in the organisation.

Jeremy Martin, Head of Business Development and Improvement described the session as 'highly inspirational yet with a really practical focus'. Amy Shortridge, Assistant Director of HR (development) added: "It's imperative that we manage talent well in the organisation. Spotting and developing talented people in the organisation is critical to achieving excellence and ensuring sustainable current and future leadership."

## New development opportunity for managers

April saw the delivery of a brand new training workshop designed to support the Performance & Development Review Process.

The main objectives of the workshop are to develop the core skills that a manager needs in order to carry out performance reviews effectively. It encourages a positive and pro-active approach to managing and developing performance as part of an ongoing management style throughout the year.

The workshop is highly participative and thought provoking and uses group work, exercises, discussion and DVD in a variety of sessions which include:-

**What's in it for whom?** Explores the benefits and obstacles associated with managing performance & development reviews.

**Are you a modern performance manager?** Examines the component parts of a manager's role and allows participants to consider their own management style.

**Agreeing objectives & standards:** Learn how to set objectives for staff and when to use standards.

**Keeping track of performance:** The benefits of monitoring performance and motivating ways of giving feedback.

**High quality feedback:** Enables participants to analyse and further develop their feedback skills using a coaching technique.

**Developing staff without really trying** - Explores the range of workplace development opportunities that can be used to develop staff and get maximum



benefit, without the need for extra resources.

The workshop will run throughout the year and dates are available for managers who are new in role or a refresher for managers who simply feel they could benefit from the above sessions.

Places can be booked via MLE or by calling the education centre on ext. 5502. Don't forget to visit the new Performance & Development web pages. For further information contact Melanie Ball on ext. 5966.

## inaddition

# Stressing down



Some of the HR team recently slipped into something comfortable at work.

They paid a small donation to wear their slippers and raised £23 for the Samaritans. Employment services manager Sharon Turnbull says: "The Samaritans were running a 'Stress down day' to raise awareness of stress in the workplace and to highlight ways of reducing stress. We thought wearing our slippers fitted the bill and the team were happy to pay a small fee for the privilege."

# Top responders!

Congratulations to the adult and paediatric physiotherapy and occupational therapy departments who, between them, have won £500, to be allocated to their departmental budget.

This extra boost was offered as an incentive to respond to a national NHS staff survey. As therapies had the highest return rate, they reaped the reward.



# Beating the blues

Staff in the children's centre are looking forward to choosing play equipment for some of the youngest patients to enjoy, thanks to staff and customers at the Marlborough Tavern.



Owner of the Marlborough Tavern Joe Cussens says: "We had the idea of a 'beat the blues' party to cheer everyone up and organised a special menu, musical entertainment and a raffle. We wanted to make people feel good and you usually feel good when you are helping others. We raised £300 for the children's centre."

Sister Denise Greenman says: "We are very grateful to Joe and his staff and customers for their generosity. It's lovely to know we are in the hearts and minds of the local community. The children will get a great deal of pleasure from the play equipment and this has made us all feel good."

# A fundraising update from the Forever Friends

## Pounding the streets for NICU

The lead charity for the Bath Half Marathon this year was our own Forever Friends neonatal intensive care unit 'Space to Grow' campaign. 250 runners took to the streets to fundraise. Thanks to our fantastic sponsors, all of our runners were treated with a lovely selection of gifts and treatments afterwards. Over 500 adults and children also took part in the Bath Half Family Fun Run. The uptake for entries was astounding - selling out well ahead of the race!

The Forever Friends Appeal and Ted's Team sponsors, Western Power Distribution, wish to thank everyone for their fundraising efforts. Please pay your sponsorship money in by Friday 15 May 2009 and you could win some goodies kindly donated by First Great Western.



## I helped build NICU...

We invite you to buy a 'baby' brick for £10 and help save a baby's life. Our new neonatal intensive care unit will be based on a sustainable design and purchasing a 'baby' brick will help us to buy the materials needed. Buy one as a celebration gift or in memory of a loved one or even purchase a row for £100. If you don't like doing things by halves involve your school or workplace and aim for a whole wall costing £1,000! You'll get a certificate and your name will be acknowledged within the design of the new building. To join this novel fundraiser visit [www.foreverfriendsappeal.co.uk](http://www.foreverfriendsappeal.co.uk)



## Vanessa's Walk 2009

A beautiful 21-mile walk along the canal between Devizes and Bath will help raise funds for our cancer patients and is in memory of our friend Vanessa Kyte, who sadly lost her life to cancer in 2007. This challenge is a really enjoyable day out. You can sign up now for the full 21 miles or just do half the distance. Ask your friends and family to get involved. **Please help us in taking a positive step towards beating cancer today. For further information call 01225 825823.**



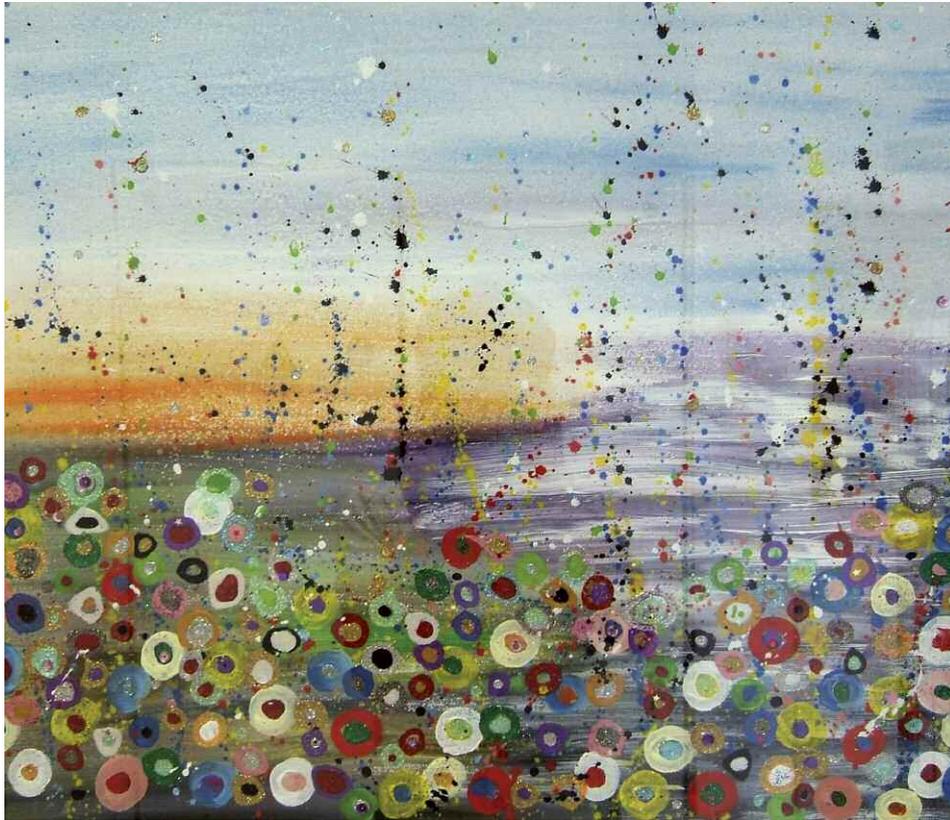
## Original paintings for sale

The family of the late Dennis Leach, a well known local artist, has kindly donated some of his work for the Forever Friends to sell. There is a range of original paintings, including limited edition signed prints of St Mary Redcliffe, Bristol, the Clifton Suspension Bridge and Pulteney Bridge, Bath. The cost of individual paintings will vary, but limited editions paintings are available from £15, small prints and postcards available from as little as £1. **Further information is available from the Appeal office on 01225 825392.**



# inaddition

## Art at the RUH



Twelve female artists are exhibiting a diverse selection of artworks for patients, staff and visitors.

A group of six artists are all working on the theme of 'land' and its many interpretations, including Sally Muir's invented landscapes and drawings that play a pivotal role in Valerie Rutley-Paine's work.



Natalie Williams combines elements of the everyday with the transient, the solidity and structure of buildings, trees, and chimneys with the mutability of snow, rainbows, starlight and the movement of birds and butterflies.

Madeleine Town is interested by the mysteries and rhythms of the natural landscape to produce imaginary landscapes and Angela Lai Yen's work explores issues of Diaspora, focusing on the displaced home, discovery of place and self.

Poppy Pitt's work is focused on the body and its presence, exploring the landscape of relationships that human bodies create as they move through their environment. Her paintings and stitched work express the multitude of relationships and interactions as if a rich fabric or texture.

Elizabeth Knott's paintings incorporate elements of the human figure and of the landscape.

Pauline Palmer makes spontaneous and rapid marks to create tension in the image rather like a performance, a visual extension of body movements and emotions.

Glenna Gillingham's paintings are inspired by the English garden. Originally from Canada, Glenna says: "no other country uses such an exuberant mix of colours in one space" and she reflects this fabulous use of colour in her paintings. Sometimes there is even a hint of sparkle!

An exhibition by Felicity Bowers of four panels titled Leaf Evolution has been extended until May.



The central courtyards show work by two sculptors: Dawn Lippiat's giant Daddy Long Legs, 'For the Next 24 hours' 2007 in steel, aluminium and resin, which stands four meters high. Also two larger than life Boxing Hares, made from wire and steel, by Julieann Worrall Hood.

# Hospital Friends

## Pulling Together



With all the blossom and flowers in bloom we are quite happy to forget the snowy weather we had back in February, but we take this opportunity



to record our thanks to our volunteers who made such efforts help us at that time. We know that the patients and staff really appreciated your help.

Director of Facilities Howard Jones sent his personal thanks to June Weir, Bill Viles, Jeff Whittock, Fay James, Paul Ronchetti and Pat Ost who so kindly rallied around: "The staff were extremely grateful for your assistance and the trust is ever thankful to you all for your continued support."

Senior sister Julie Webber also said: "I'd like to take this opportunity to thank our sometimes unsung heroes. The volunteers kindly put in extra time and effort to support staff on the cardiac ward and maintain patient comfort. Their tea rounds and kind words with patients whose visitors were struggling to get in to see their loved ones were greatly appreciated. Bill Viles and many others selflessly went above and beyond the call of duty in my opinion."



## Summer Caribbean Fete

The Friends will be hosting their annual summer fete on Saturday 20 June, from 2.00pm until 4.00pm.

Support your hospital and come and join in the family fun. Sway along to the Caribbean steel band and browse the stalls.

## Bric-a-brac wanted

If you find you have any unwanted bits and pieces during your spring clean that you think would be ideal to sell at the fete to raise money, please donate them to the Friends office in the west corridor, next to the coffee shop. We're here between 9am and 5pm Monday to Friday.

It'll only cost you 50p and children come in free. All monies raised will go towards the provision of patient amenities.

## inaddition

# Good luck Pat, it's been a pleasure

Pat Hall has recently retired after working at the RUH for 26 years and after completing an amazing 47 years in the NHS!

Pat is known to many staff who will not have had an opportunity to say farewell. Pat didn't want a lot of fuss but we did manage to 'pap' her at a farewell tea party with two of her work mates Chris Skudra and Debbie Greaves. We all wish Pat a long and very happy retirement.



## A splash of colour cheers patients



Artist Anna Shuttlewood has cheered up patients in the plaster room with her creative and colourful murals.

Rather than staring at bare walls, everyone can now lose themselves in a riot of colour, animals, stars, rainbows and flowers.

Staff nurse Adele O'Connor says: "Art on this scale can be a great distraction, particularly for some of our younger patients. It gives them something else to focus on for a little while. It also improves the environment we work in, bringing life and colour to our surroundings. It's been fascinating watching Anna create the murals and bring them to life. We are very grateful to Hetty Dupays, the hospital arts co-ordinator and the Hospital Friends for making this possible."

Anna is a muralist, painter and illustrator who studied at the National Academy of Arts in Sofia, Bulgaria. She says: "I try to create peace, fun, and harmony and understanding in my art, I want it to take people out of their everyday worries. I was delighted that the RUH were happy for me to design and paint some murals and that staff and patients are enjoying them."



## Chief Executive Looks Ahead

As we move into a new financial year, this is another opportunity for me to thank you all for a job well done - if only we had a 4,800 staff award - you all deserve one.

It seems to have been a very long winter and although we're well into spring now, we are still dealing with an unrelenting emergency workload. We've seen large increases in numbers of emergency patients - one day we recorded 267 Emergency Department attendances - something of a record!

There is tremendous team work going on and staff have worked incredibly hard to meet these pressures and to provide the very best care to our patients. This is reflected in the many letters I receive from patients who write in appreciation of the dedication, professionalism, care and kindness shown to them during their time with us.

Looking to the year ahead, there is inevitably much to do. We must remain focused on improving the flow of patients through the hospital, making more efficient use of our beds, despite the increasing demands on them. By ensuring patients are placed in the most appropriate areas and by discharging them in a timely manner, we will free up longer term acute medical beds for those who need them. An Emergency Access 4-hour task force has implemented an action plan to continue to reduce length of stay, decrease delayed transfers of care and agree a final model for medical bed management. Plans are underway to deliver additional capacity through maximising theatres and day surgery and an increase in the number of beds in cardiology and neurology ward will help us to plan care more effectively.

As I write this, we are also looking to utilise ward 2 at St Martins hospital as extra capacity to help us deliver 13 weeks in quarter one.

The pressures we have experienced on beds were exacerbated by another outbreak of D&V in the community, which affected the hospital and I know that staff continue to work extremely hard to control outbreaks within the Trust.

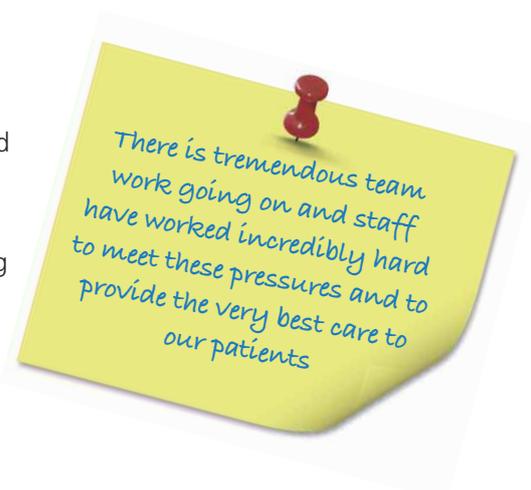
Infection control and patient safety will continue to be our number one priority over the coming year and the executive directors are working with frontline staff to develop an open culture around the safety of patients. We're 'walking the walk' - or carrying out WalkRounds™ - to wards and departments to hear first hand any concerns staff have about patient safety.

Each of the executives has a number of allocated wards - mine are Combe, Waterhouse, Medlock, Parry, Hamilton and the Emergency Department. These walkrounds are not a one off event but are part of a continuing cycle of improvement. We're there to support and empower staff to discuss safety issues openly, to help identify solutions and to minimise risk. I'm sure we'll be identifying areas of good practice as well as gathering information to share with other colleagues so we can continue to learn lessons.

James Scott  
Chief Executive



**We're there to support and empower staff to discuss safety issues openly, to help identify solutions and to minimise risk**



# inyourowntime

## Take a break

There's a fabulous prize for staff to win - a Twilight package at Bath's premier Thermae Spa.

The package includes a 3-hour spa session and a main course and drink from the 'Twilight' menu. Visit [www.thermaebathspa.com](http://www.thermaebathspa.com) to find out more about the twilight package. All you have to do is complete all three puzzles correctly and return this page to the Communications office by the 30th June.



## Where am I?

**This city is famous for a particular man-made structure, an unlikely tourist attraction and being devastated in the early twentieth century by one of the world's natural disasters.**

Sir Francis Drake failed to find it in 1579 but 270 years later the discovery of gold in the hills around, albeit briefly, led to a massive population boom. Around the same time, what was then a revolutionary form of public transport transformed the steep hills of this city and remains a major tourist attraction to this day.

A second landmark opened in 1912 although its 'original' visitors would not have had the luxury of leaving. It was only after it closed in 1963 and Native Americans, who then inhabited the island as a protest, left in 1971, did it become a popular tourist destination. This unlikely landmark was also the location for a very famous film.

Another of the city's outstanding landmarks opened in 1937. Today this 'shimmering' structure is often shrouded in fog but on a clear day it connects this city to the country's most famous wine growing region.

### Where am I?

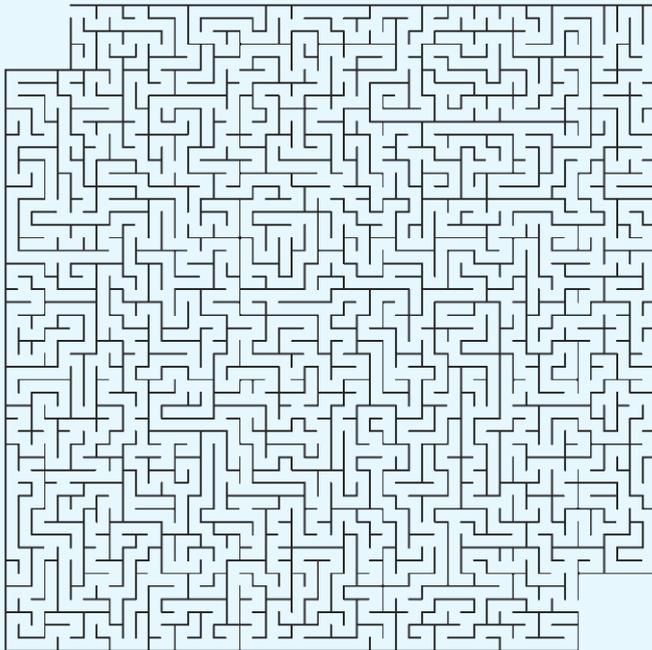
Name:

Department:

Contact No.

## It's a-maze-ing!

Find your way from one side to the other.



## Spot the Shot

See if you can spot the photo that this picture is taken from in this issue. To enter, just tell us which page it's on.



## Congratulations

Congratulations to last edition's winner, HR Assistant Matt Searle. His correct entry won him a two-course lunch or dinner for four at the Marlborough Tavern, Bath.