

insight

ISSUE 8 WINTER 2010

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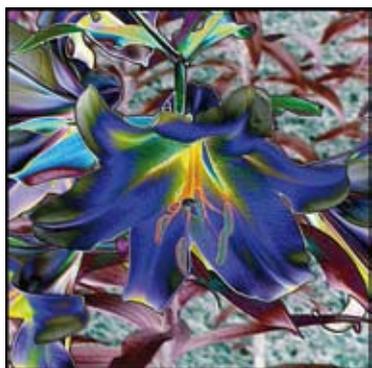
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Welcome



Glorious nature see page 30

In this latest edition of insight, we highlight the excellent work being undertaken at the RUH to care for people with dementia. From improving communication and mealtimes, to providing activities and entertainment, the RUH is focused on improving the experience of patients in hospital. (See page 5-8).

We also feature more about Project SEARCH - a hugely successful project that has welcomed students with learning disabilities into the workplace. It's an encouraging and uplifting article. (See page 10-12)

As Autumn approaches, we're looking forward to a new Soundbite programme - a series of lunchtime performances - to bring a variety of uplifting live music to the hospital. The performances take place on Tuesdays/Wednesdays, from 1-1.30pm in the atrium. We're hoping that Claire Jones, harpist to HRH the Prince of Wales (featured on our cover), will perform at the RUH towards the end of the year.

Anita Houlding

Senior Communications Officer / Editor

Editorial dates 2010

You can send your articles for insight via email to anita.houlding@ruh.nhs.uk or communication@ruh.nhs.uk or you can send a paper copy via the internal mail. Deadline for copy for the next issue is **10th December 2010** for publication early in February 2011.

Cover photo courtesy of the Victor Salvi Foundation / Paolo Racca at Bosio Associata

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Ward Manager, Combe Ward

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Major milestone in infection control

Since January of this year only 1 patient has contracted a post-48 hour MRSA bacteraemia at the RUH. This is a huge accomplishment. It's also been more than 1,000 days since the last case of MRSA in the Critical Care Unit.*

Yvonne Pritchard, Senior Nurse - Infection Control says: "No one single thing is responsible for this success, the intense focus by everyone to reduce infection in our hospital has clearly had an impact.

"Some of the preventative measures we've taken include having robust systems in place to reduce harm to patients - this includes screening all patients for MRSA before admission to our hospital. We have opened a new Central Pre-Operative Assessment Unit where we test patients prior to their surgery. About one in three of us carry the MRSA bacteria in our nose or on the surface of our skin, and people can be 'colonised' with the antibiotic resistant strain MRSA without ever being infected. However, to reduce the risk of the bacteraemia entering an open wound, we screen patients before their operations. If their results are MRSA positive we ask the patient's GP to



to putting in intravenous lines or taking a blood sample. This decontamination of the skin not only reduces the risk of MRSA bacteraemia, but also helps to prevent the possibility of contaminated samples. Since the introduction of ChloroPrep, the number of line-associated MRSA bacteraemias has fallen.

"We carry out quarterly infection control audits. These include audits of hand hygiene, use of personal protective equipment and ensuring that

a rigorous performance management process in place.

"Our Infection Control Link Practitioners - who act as a link between their own clinical area and the infection control team - are helping to embed good infection control practices into the culture of our hospital. Their role is to increase awareness of infection control issues in their ward and motivate staff to improve practice. They are of great value to us, as they help to improve clinical ward audit scores and help infection control nurses implement policies and collect data on infections.

"All our staff must be congratulated on this major improvement in infection rates and we'll need their continued help to maintain this encouraging progress into the future; let's aim to still be celebrating sustained progress another six months from now."

"Their role is to increase awareness of infection control issues in their ward and motivate staff to improve practice."

start a simple washing and lotion treatment five days before they are due to come in to hospital.

"We also decontaminate skin with a special cleaner called ChloroPrep prior

intravascular catheters (those inserted into veins) and those inserted into the bladder (urinary) are kept infection free. We also undertake monthly auditing of hand hygiene compliance and have

**accurate at time of print*

Leading on dementia care

There are about 750,000 people in the UK with dementia and at any one time, up to a third of all patients in hospital may have dementia or delirium. Whilst these patients may have been admitted to the RUH for other reasons, their dementia can make time spent in an unfamiliar hospital bed even more distressing.

Dr Chris Dyer, Consultant Geriatrician, says: "People with dementia may feel sad, frightened or angry about what is happening to them, and a decline in their ability to talk, read and write can make it hard to understand medical problems or communicate with the staff caring for them."

The RUH, together with Avon and Wiltshire Mental Health Partnership NHS Trust (AWP) and other partners such as Alzheimer's Support, is leading the implementation of the National Dementia Strategy to improve the experience of patients in hospital.

Jon Willis, Ward Manager on Combe ward has been spearheading many of the changes. "Whilst Combe is an acute geriatric ward, not a dementia ward, we do see a lot of patients who are confused or suffering from dementia. Over the last year we have been working on many projects to make each patient's experience on our ward better and now we're proud to be able to see we're making a difference." (Read how we are making a difference on pages 6, 7 & 8).

Heading up all the changes is the new Charter Mark Standards for RUH Patients with Dementia. This is the first such scheme in the UK and provides a 'gold standard' for staff to ensure care for people with dementia on all adult wards, not just those specifically for older people, is the very best it can be.



Each ward is being given the opportunity to apply for the Charter Mark, with three levels available - gold, silver and bronze. The standards cover four main areas of care: respecting and caring for people with dementia, the ward environment, meeting nutritional needs and suitability of staffing.

Sue Leathers, Matron for the Older People's Unit (OPU) says: "The high

exploring all areas of dementia and how to care for people with mental health problems.

Ben Amor, Mental Health Liaison Nurse at AWP says: "Dealing with patients with dementia can be tough, and challenging behaviour can be difficult to understand and manage. Understanding the person behind the dementia can help to understand

"Dealing with patients with dementia can be tough, and challenging behaviour can be difficult to understand."

standards are set for each adult ward to ultimately provide the very best care possible for patients with dementia and ensure their stay in our hospital is as stress-free as possible."

We have also placed a strong focus on training for our staff, with the opportunity to book onto a 3-hour interactive training session run by the Mental Health Liaison Team at AWP,

their actions and enable staff to give better care."

RUH lead on dementia, Consultant Geriatrician Dr Nick John says: "Our vision is that everyone working on an adult ward in this hospital should have the core skills to manage someone with a dementia or delirium, and know how to access support."

I am... in hospital

The RUH is this month launching a new leaflet to help staff connect with patients with dementia and provide care that goes beyond the excellent clinical care we champion.

The new 'I am' leaflet will be trialled on Combe ward before being rolled out to the Medical Assessment Unit and other areas in the hospital. The leaflet will help hospital staff to learn about a patient's habits, hobbies, likes and dislikes and provides a 'snapshot' of the person behind the dementia.

Based on the concept developed by the Alzheimer's Society 'This is me' leaflet, supported by the Royal College of Nursing, 'I am' can be filled out and given to staff when a person with dementia goes into hospital.

The leaflet will help staff respond to the person's needs and help reduce their feelings of agitation and distress. For

example, people with dementia can become agitated and confused when they are in an unfamiliar environment and it is this behaviour that nurses can find challenging.

Ward Manager Jon Willis says: "This new leaflet means we don't have to be asking the same questions over and over again, possibly leading to further confusion for the patient. We ask both 'My name is...' but also 'I like to be addressed as...' so we try to get it right first time."

The information in the leaflet is not just medical information such as current medication, allergies or GP contact details. There are also questions about sleep patterns, whether individuals need help going to the toilet and their food likes and dislikes.

Jon adds: "We also ask about people's lives - from their childhood, to

adulthood and on to retirement and include families, work, hobbies and personal achievements. Perhaps most importantly we ask 'what might upset me' such as separation from loved ones, continence, finance or memory problems. It will be incredibly useful on the wards and will help us gain a greater understanding of our patients' lives. We might have a patient who keeps getting up in the night and who gets distressed when we try to encourage him back to bed. Information on the 'I am' leaflet could tell us he was a milkman for 40 years and getting up at 4am every day was part of his everyday routine.

"It's about understanding the person behind the condition - we have patients who have incredible pasts and have led inspiring lives, so to understand a bit about their history can really help us to connect and bond with the patient."

Making a connection

Imagine being able to see and talk to your parents or husband or wife in hospital, at any time of the day, from your home that may be hundreds of miles away. Soon that may be a reality with the purchase of a new large flat screen TV for the day room on Combe ward.

With a wi-fi connection, the new TV will give relatives the opportunity to Skype their loved ones and connect with them in way that is currently not possible. Video calling through Skype is free of charge and means that anyone with a webcam at home can see and be seen by their caller.

Ward Manager Jon Willis says: "We'd really like to be able to utilise

technology to improve the wellbeing of our patients in a way we never have before. As well as the Skype opportunities, our physiotherapists are also looking into the possibility of using Nintendo wii exercises with patients as part of their therapy. We're also planning a 'video box' to get feedback from patients."

Patient feedback is hugely important to us and we currently collect the thoughts and opinions of patients via questionnaires, surveys and our instant Patient Experience Tracker, a handheld computer device. However, this can be hard for some older patients or patients with dementia to complete, so we wanted to make it

as easy as possible for those patients to tell us directly how they feel about their care.

Jon adds: "The videos will be carried out in private and will give patients the chance to be completely honest about how they feel. We will ask what was good and what was bad about their experience at the RUH as well as just the general 'tell us about your time here'. With each patient's consent we will be able to use the outcomes and measures to inform our learning. Showing staff the videos with the patient's own words, will be a very powerful training tool in what we could do better, but also a chance to feedback positive experiences."

Music as **therapy**

The launch of 'Soundbite' - a new initiative bringing a diverse range of music workshops and live performances to the hospital - has been very successful. (See page 3).

As part of Soundbite, 'Hospital Notes' brings music to patients on the Older People's Unit. Since December, regular performances have taken place and we have found that listening to music can improve the mood of the patients and create a positive atmosphere on the wards.

Rosanna Campbell, Musician in Residence, runs weekly interactive music workshops on Combe ward involving patients in singing and playing musical instruments. Each workshop is unique and involves a variety of instruments as well as songs from 'the old days'.

Rosanna says: "I started the workshops not really knowing what to expect but it's been such a fantastic experience. Everyone takes something different away from the sessions and I hope I can make a small difference to their time in hospital. One patient, Bert, was unsteady on his feet but wanted to get up and walk, maybe out of boredom or distress, I don't know. His memory was not good so he tended to forget that he was unsteady, leading to a fall on the ward. Bert took part in one of my workshops and afterwards he sat in his chair, content, smiling for the next four hours."

A review of music therapy for dementia has concluded that, based on the available evidence, it may be beneficial in treating symptoms and improving the quality of life of people with dementia. We have also found that the music may contribute to reduced levels of stress, aggression and the number of falls on the ward, according to our recent internal incident reports.



Music can also often help with memory as it can have powerful associations - we're looking into purchasing a number of CD players and encouraging patients or their carers to bring in CDs from home.

Ward Manager Jon Willis says: "Last year's BBC2 Gerry Robinson programme on dementia showed how tragic the lack of stimulation can be. Although people with dementia may struggle to remember things, they do feel joy, excitement, pleasure, pain, hurt, anger, loneliness or hopelessness and feel them intensely.

"As part of the programme, the Alzheimer's Society found that a typical person with dementia in a care home spends just two minutes in every six hours socially interacting with other people. Whilst a hospital environment is very different, the findings were a very powerful reminder to us that we have a role to play in helping patients 'feel'.

"We hope that by introducing activities such as the music workshops we can provide some social interaction and fun that goes well beyond the acute clinical care we provide."

A dinner service with a difference

Mealtimes are so important to get right, for both a patient's immediate care and their long term wellbeing, but patients with dementia can struggle at mealtimes.

There are several reasons why a person with dementia may have a poor appetite or seem uninterested in eating. These can include depression, physical discomfort from sore gums, lack of exercise during the day, constipation and damage to the brain. In the later stages of dementia, a person may no longer be able to understand that the food in front of them is there to be eaten, even if they are hungry. This is because the nerve pathways in the brain are damaged, so the message is not getting through.

We try to ensure that meals are relaxed, unhurried affairs despite being in a busy hospital environment. We also try to be as flexible as possible, providing snacks or finger food if that is what the patient would prefer. And we encourage friends and relatives to help the patient feel involved by putting the food into their hand and guiding it to their mouth rather than just feeding them.

Dr Chris Dyer, Consultant Geriatrician says: "We recognise that patients with dementia may not feel thirst or hunger and that some patients may take a long time to eat a meal. Everything on the OPU wards is now geared towards making things easier for our patients. This includes a range of new crockery and encouraging carers to get involved with the tricks and techniques they know work, so that patients with dementia can keep their independence and still maintain their weight."



Medical Nurse Practitioner Claire Casling showing off the new crockery to a patient

The team is making the most of the use of colour to easily identify any patients who might need help eating or drinking and to build small connections in the brain so that patients recognise the crockery and realise it's time to eat.

Ward Manager Jon Willis tells us more: "We're using red trays to serve meals to anyone who needs help with feeding. We are also using coloured jugs and beakers to show quickly and simply which patients may need help with drinking. This way anyone coming on to the ward can see who needs help topping up their beaker or help to have a drink."

Dexterity decreases with dementia so all the new, brightly-coloured crockery has a lip around the edge to make it easier to scoop up food - an easy change that could benefit everyone,

not just older people.

Jon says: "We've chosen sturdy mugs with double handles - we're using proper crockery, not plastic or 'childish' items, the aim is to give people their dignity and independence back. A simple thing like being able to reach out and hold your cup of tea yourself can make a huge difference."

New signs have also been put up on Combe ward. Rather than just words, the large colourful signs say 'bathroom' with a picture of a toilet and 'bedroom' with a picture of a bed. Jon adds: "Again it's about independence and dignity. Not everyone can take themselves to the toilet alone but for those that would like to, we hope to give them the best chance to manage and understand where to go."

Improving services for patients

A project to move specialist x-ray equipment from the Radiology department to the Oral Surgery department has been successfully completed - much to the delight of patients and staff. The move will help to improve the patient experience for those coming to the RUH for orthodontic treatment.

Previously, patients requiring an oral x-ray had to go to the Radiology department, which is located in a different part of the hospital, some distance from the Oral Surgery department. An audit showed that during a six week period, 232 patients were sent to x-ray and their average time spent in the department was an hour and a quarter - this time could be extended for patients requiring assistance from a porter with a wheelchair to get them from one location to another. This didn't help to lessen the anxiety that patients sometimes feel when coming in to hospital.

Project Manager Charlotte Scully (above left) says: "This project has taken two years to complete - moving specialist equipment involves considerable planning, particularly as the service we offer patients still has to continue. We've had



"We've had to undertake a lot of structural work to make the new location suitable and safe for x-raying."

to undertake a lot of structural work to make the new location suitable and safe for x-raying."

Sister for Oral Surgery, Lynn Howes (above centre with her colleagues involved in the project), says: "We're very grateful to the project team who have all worked so hard to make this change happen as quickly and as smoothly as possible. We'd also like to thank the Friends of the RUH who so kindly provided £69,000 of funding for the project, it wouldn't have happened without them.

"Our Radiology and Oral Surgery staff have received extensive training in the use of the brand new CR Reader* in our imaging room. Having all the right equipment will help improve our efficiency, it will make better use of staff time, give the dental nurses an

opportunity to increase their skill and experience and reduce the workload in main x-ray. Most importantly of all though, this will improve the patient's experience of our services."

**CR stands for Computed Radiography; a film-less processor which reads the analogue x-ray exposure and converts it to a digital image so it can be viewed and stored on a computer.*



Project SEARCH



Ben



Poppy



Josh

How many of us would like to say that working at the Royal United Hospital was a life-changing experience? Well, that's what ten teenagers - who have just completed a year's internship at our hospital - will tell you.

The significant fact here is that each of these young adults has a learning disability, such as autistic spectrum disorder or language and communication difficulties - but thanks to the huge success of Project SEARCH - these young students from Bath and North East Somerset (BANES) and Wiltshire have significantly increased their prospects of full employment. In fact, three of the group have now secured jobs at this hospital and in the community.

The RUH was the first hospital in the South West to welcome teenagers with learning disabilities into the workplace as part of Project SEARCH, working in partnership with Fosseway School and BANES Children's Services. The project provides an opportunity for real-life work, focused on both general and task-specific job skills. Students receive

daily instruction in the workplace and independent living skills and participate in rotations on a particular job, to help them to make a successful transition from school to productive adult life.

Teacher Louisa Hawksley says: "Project SEARCH challenges traditional perceptions about employing people with learning disabilities, proving that with good instruction and tuition, they can perform jobs as well as non-disabled people.

"Following an induction and orientation period, the students spend one or two hours in the classroom each day, receiving job coaching and mentoring. They aim to sit an exam set by the ASDAN examining board (Award Scheme Development and Accreditation Network) to achieve an employability qualification. To do this they have to gather evidence to show that they have gained the skills employers look for; so specific skills related to the job they'd be doing, skills for daily living such as travel training and job development, being able to write a CV and job applications."

The students worked in finance, payroll, HR, sterile services, environment, pharmacy, portering, post room, Combe ward, oral surgery, library, catering, PALS, emergency department, medical records and orthodontics.

Louisa continues: "All of the staff in each of the departments involved in the project have been incredibly supportive. Naturally there were some initial reservations, but these were worked through and turned around. The students became valued members of the teams they've been supporting.

"We're delighted that three of them have secured jobs at the end of their year: Stephanie will be working in Sterile Services at the RUH, Ben has joined as an Environment Porter and Alice was on a fixed-term contract in HR but now has a permanent post at Bath University.

"We set out with high expectations and it's been a steep learning curve but the success this first year has been fantastic. It's been an amazing experience and it has been life-changing for the students - their world has opened up."



Jake



Jan & Alison



Ben



Georgie

HR Project Support Manager Alison Stead has been integral to the setting up of the project and managing it on a day-to-day basis. One of her first challenges was to establish a classroom for the students before they arrived. Alison coordinated the conversion of the skittle alley in the former RUH social club, and the end result has proved to be a great success, providing a dedicated area for education which has helped the students to establish a routine and feel settled and secure. Alison says: "I first met the students in June last year as we were all about to take a step into the unknown.

"There's had to be a culture change and the Trust has completely embraced it. We've had to rethink how we do things, which has had a positive impact on other people too. Just one example; we had to find a way of capturing how to do a particular job that was easy to understand and use, without creating a thumping great manual. By breaking down the role into tasks and describing how to do them using flowcharts, we've managed to do that simply and concisely. We can see the benefits of using this approach elsewhere to streamline processes.

"It's fantastic to see such a change in these teenagers as they reach the end of their year – they're a great group who have all grown in independence and confidence. That fact that three of them have secured jobs is an excellent result. Support will continue to be available from job coaches within BANES to the others seeking employment. It's a remarkable project to be involved in – I feel very passionate about it and I've found it hugely rewarding."

easy communication. We had the support of a Project SEARCH job coach Becky Woods to help us discuss and resolve any minor problems that cropped up. The whole project was beneficial to staff who found that with Poppy's additional help they had more time to care for their patients and prepare for clinics. It was lovely to see Poppy gain in confidence and we hope that she can assist us again in some capacity. We'll soon be working

"The feedback received from staff in the departments in which the students have been working has been really positive."

The feedback received from staff in the departments in which the students have been working has been really positive. Senior Sister in Oral Surgery Lynn Howes says: "Poppy worked closely with dental nurses Dawn Peters and Lorraine Forrester acting as her mentors, they coordinated her daily workload. Poppy helped us to prepare for the Orthodontic clinics involving a series of increasingly difficult jobs. We helped her by creating a pictorial folder as a guide to aid her memory and used a message board for

with another student in Oral Surgery and it would be good to look at the possibility of creating an apprenticeship in the future, with the opportunity of possible employment, either in the RUH or another local organisation."

The Project has the full support of the Trust Board and the Equality and Diversity Committee. Three of the students made a presentation to the Trust Board recently.

continued page 12



Hannah

Our Chief Executive James Scott says: "I've been really pleased to have been involved with Project SEARCH since its inception, having originally heard of the idea from colleagues at Cincinnati Children's Hospital in the States. The Board was incredibly impressed by the maturity and confidence of the interns when they presented to the Board and

we are proud of our staff for embracing the concept and creating such great opportunities for the interns."

As the first academic year of Project SEARCH comes to an end, Louisa will be handing over to teacher Jan Marsh, who will work with the next intake of students. Jan says: "I'm looking forward to getting stuck in and building on the success of this project. I will be working with nine new students who are excited at making the move from school to work. They are all very serious about finding paid work to secure their futures. I'm also looking forward to meeting the staff who worked so hard with us last year, and to responding to the new challenges ahead."



Alice



Stephanie's story

Stephanie Lewington has recently secured a full-time job in Sterile Services, following a year's internship at the hospital. Stephanie's mum Marcia, tells us about the impact that Project SEARCH has had on Stephanie and her family:

"Stephanie was diagnosed with Aspergers syndrome – part of the autistic spectrum – in 2002. Steph had struggled at school, she was unable to go to classes at times and displayed some disruptive behaviour.

"When she was about to leave school, it seemed likely that college or sixth

form would be her only options. Then we were told about Project SEARCH and we spent a lot of time asking questions before deciding what to do. We were concerned about how she would cope in unfamiliar surroundings, amongst strangers, would she even access the classroom? It was a difficult decision to make and an anxious time.

"But we decided that Project SEARCH was the way to go and it's been the best decision. Steph has blossomed so much and each week bought new surprises; Steph was able to talk to strangers, walk around the RUH, go to the shop, and visit the restaurant, choosing food and paying by herself. Steph was maturing and becoming more confident every day - she was travelling to and from the hospital on her own - the transformation was incredible. We're absolutely delighted that she has secured a job in Sterile Services – what an achievement.

"I must express my gratitude to the Sterile Services team who have made Steph feel like part of a family. Kim Stuart, Steph's line manager, is so supportive. Kim gave me a tour around the department so I've an insight

into Steph's working day and she's encouraged me to call anytime if I have concerns. This has given me great confidence as a parent that Steph will continue to enjoy, improve and develop within the work place.

"It has also given me the opportunity to extend my working hours in the hospital's medical records department, which I now feel able to do because I no longer need to be concerned about Steph's welfare whilst she is working herself.

"You can't imagine how we feel. I believe this good fortune is down to the dedication of the Project SEARCH team and RUH staff – to their ability to understand Stephanie's needs and their belief in her. We are so indebted to them for the opportunities they have all given her.

"I think there's a need for these schemes to be promoted, for more people to recognise that they form an essential part of helping children with any disability into the work environment. I hope Stephanie's story is an inspiration to others and encourages them to get involved."

EAP has been under an **art attack!**

Pupils from Oldfield School in Bath have helped refresh and revive the counselling rooms over at EAP (Employee Assistance Programme).

The girls, members of the 'gifted & talented' group at the school, needed to undertake a project in the community and jumped at the chance to help us get more creative in EAP.

Facilitated by their art teacher Miss Vicky Jones, the girls designed and created a series of themed wall panels for the two counselling rooms and in the same vein have also transformed two ancient desks with fabulous painted designs.

Cindi Bedor, Employee Assistance Programme Manager (above right), says "The project came about after discussions with Arts Coordinator Hetty Dupays about how we might artistically enhance the EAP building. Hetty (right centre) provided the link with the school in a great example of community engagement. Oldfield School headteacher, Mrs Sparling, has been very supportive - without her this would not have been possible. Likewise Miss Jones has worked really hard in making this happen within such a short time."

Staff Counsellor Vanessa Gajewska (far right) says "The work in one room is inspired by the art of Henri Rousseau, with a rich leafy-green, jungle-like feel and the other room now has a warm, fresh seaside ambiance with a pattern of pretty shells reflected in the panels and the designs on the desk. It's an imaginative approach which will undoubtedly bring energy into the rooms where we work with our clients."

Nell, a year 8 pupil at Oldfield said "I'm really excited about this project. I've never done anything quite like this before. Thank you for giving us this opportunity".

EAP is a free and strictly confidential support service for use by members of staff and their immediate families.

Most people at some time in their lives have periods of stress, or ongoing problems which no longer seem manageable. Coping with these difficulties may affect home life and/or performance in the workplace. Having more information and someone who will listen may alleviate a stressful situation and help solve a problem.



Short term counselling and support is also available to help solve problems in areas such as stress at work, lack of confidence, anxiety or depression, bereavement and money worries or debt. Couples counselling is also available as well as help for your immediate family. Appointments are usually offered within a week of contact and after an initial assessment lasting about half an hour, up to four free 50-minute sessions of counselling are available.



We ♥ technology

Seeing the pharmacy robot at work is like watching something out of a science fiction movie – and pharmacy staff love it.

This state-of-the-art robot (bottom centre), installed a year ago, has revolutionised the way we dispense medicines in our busy pharmacy.

The robot selects the required drugs at a speed of one item every six to 12 seconds from its own internal shelves, using advanced computer technology. Pharmacy staff (right) still order the medication and generate the labels from their computers, but drugs are picked and placed on a conveyor arriving at the dispenser's workstation in a matter of seconds, or place in spiral chutes to fill ward boxes.

Dispensary Manager Nesta Thomas says: "The robot is a fantastic piece of equipment and it has transformed the way we work. Before the installation, the dispensary was outdated, overcrowded and we spent a lot of time putting drugs away and then getting them out again. The turnaround time for dispensing prescriptions to take away - or TTAs as we call them - was between two and four hours.

"Now though, with capacity to stock around 28,000 items, which are fed automatically into the robot overnight, the average time to dispense an item for prescription takes about 20 seconds and TTAs are now completed in under an hour.



"Our pharmacy robot is a big step forward in improving patient safety at the RUH. The robot reads the bar codes on the medicines before it selects them, which is a much safer system than the human eye. The risk of dispensing errors is reduced and we check against the prescription to ensure the right medicines, dose and expiration date goes to the ward.

"The robot also helps to reduce waste by monitoring expiry dates - when drugs are delivered the packages will be scanned into the robot and stored so that the older stock is used first."

Automated dispensing systems are an

extremely important part of an NHS pharmacy modernisation strategy. In practice, a robot dispenses prescriptions faster and more accurately than humans and enables pharmacies to directly free up staff to have a more patient focused role.

The RUH robot picks between 1500 and 1700 items a day, mainly for dispensing but also for ward stock.

"Ultimately the robot enables us to release nursing time and allow our skilled pharmacy staff to spend more time with patients discussing any issues they have around their medication."



Healthy Lifestyle Service

The NHS isn't just here to treat illness, it's here to help you lead a healthy lifestyle too. Whether you want to stop smoking, eat a healthier diet, exercise more or lose some weight, there is a range of FREE help and support available from NHS Bath and North East Somerset's Healthy Lifestyle Service.

"The simplest ways to get healthy are to stop smoking, eat a balanced diet including five portions of fruit and vegetables and take part in 30 minutes of exercise every day," says Sarah Button, Healthy Lifestyle Service Manager. "However, although this sounds easy enough, in reality it can be quite difficult and achieving a healthy lifestyle might not always be that simple."

"Many people have difficulty in changing to a healthier way of life and are often unaware of what support is available to them. Not knowing where to start and previous unsuccessful attempts often prevent them from having the confidence to turn good intentions into sustained actions that would lead to healthier lives."

But you don't have to struggle alone. The Healthy Lifestyle Service is made up of teams of local lifestyle advisors working within your community. If you are looking to make a change to your health and wellbeing but don't know where to start, why not find out how you can get further support and give us a call today on 01225 831847 or email the team at Healthylifestyleservice@banes-pct.nhs.uk



l to r: Lisa Fry, Helen Arnoldi, Kaye Blakeley, Sarah Button, Ann Main & Ken Few

New direction

How often do our staff get stopped in the corridor by a visitor to our hospital who is confused by the signs? Quite a lot.

We're aiming for this to soon be a thing of the past, as there is a project well underway to improve 'way finding' for everyone who comes to the RUH.

Considerable analysis of our current signage, both internal and external, is being undertaken with fresh eyes by Mike Pridding and Mike Slater from Wayfinder UK Limited. They are supported by a team of staff from different areas of the hospital - including the Capital Projects team, Head of Patient Experience Theresa Hegarty, Communications staff, hospital volunteers and representatives from patients and the public - to compile a Wayfinding Strategy that we can adopt to change the way we direct people around the site.

Director of Estates and Facilities Howard Jones says: "Frankly, the signage around the hospital is in a bit of a mess; there are too many signs, some are out of date and they are inconsistent in design. This doesn't



make it very easy for patients to find their way.

"We'll be looking to make wayfinding much simpler, have a common system and a more corporate look. We'll be making it more inclusive to ensure that signs are accessible in terms of the colour, size and font and to ensure compliance with the Disability Discrimination Act - there's a lot to consider. We're also looking at adding access information to appointment letters so that patients receive guidance before they arrive on site.

"We're looking forward to making things much easier for our visitors to find their way around, which will contribute to a more positive image of people's experience of our hospital."

If you have a constructive suggestion or view which you think may help this work, please contact Project Manager Daniel Barnett on 01225 821016 or email daniel.barnett@ruh.nhs.uk

Yours sincerely

It's always pleasing to receive positive feedback from patients and their relatives for the support and care they receive from our staff and the Trust frequently receives letters of praise and thanks. Some also appear in the local press. Here are extracts from a few.

Mr G Roe from Bath (Mr Roe was cared for at the RUH and subsequently at Southmead hospital, Bristol) wrote "I simply wanted to say a very big thank you to all those involved. To observe for the first time in my life the professional dedication and simple human empathy by the hard pressed NHS staff who contributed to my survival was a humbling experience."

Mrs J Wharton from Radstock wrote "I am writing to say how impressed I was with all the hospital staff with whom I came into contact both prior to and following the birth of my first baby this year. From midwives on Mary Ward (in particular Louise, Leah and Becky), to the doctors, receptionists and auxiliaries and to the staff on NICU, everyone was professional, extremely knowledgeable and helpful. It was also evident that they enjoyed their work."

Mrs M Routledge from Trowbridge wrote "I am writing to express my sincere thanks for the care received during my short stay on Philip Yeoman ward. I wish to offer my praise and congratulations to you for the highest standards in this team. From the surgeon and his medical team, the anaesthetist, theatre and recovery ward staff to the ward nursing team, nothing was too much trouble. They were professional yet friendly and helpful in all areas. Such positive staff attitudes mean a lot when you are feeling ill or in pain. This includes the physiotherapists, radiotherapists, pharmacist, ward clerk, porters and domestic staff. Also thank you to the catering staff whom I imagine may sometimes be forgotten. One hears of so many complaints about the NHS, I think praise should be given where it is due and it was certainly due in the RUH."

Mr P Whitmore from Bath wrote "We owe the Trust a huge debt of gratitude for the care and consideration shown to our late father. Everything was done with maximum care for dad and with sympathy and understanding for the family. We were particularly pleased to see how 'joined up' all of dad's medical and care needs were, with his GP and district nurses clearly working together with Kumari carers, with the ENT and Oncology department and with Dorothy House doctors and nurses. There are too many people to mention individually – they were all marvellous – but we would especially like to mention for their kindness Mr Pinder in ENT, Dr De Winton in Oncology, the staff in the Radiotherapy department, Dad's GP Dr Chapman at Widcombe Surgery, the district nurses, Dr Higgs and specialist nurse Michelle Tippett at Dorothy House."

Dr A Rotas from Bristol wrote "I write to thank you for the exemplary care my 89 year old mother received in your hospital, following a fall. The kindness, professionalism and care that she received from the moment she was brought in to the Emergency department and Forrester Brown ward were superb. Thanks to staff nurse Chloe and the doctor in ED who, after explaining the procedure to re-set her broken wrist, asked if she had any questions. She did. It was Wimbledon finals day and she wanted to know the score. The doctor found out and told her (and then re-set her wrist). Thanks to all the staff on Forrester Brown – 'this is a happy ward' she said to me, 'I feel beautifully looked after'. You hear so much in the media about the neglect and ill treatment of elderly patients in hospital and I would just like to say that our experience couldn't have been further from this negative stereotype. Please pass on our heartfelt thanks."

Mr M Sattar from Chippenham wrote "I recently had an unplanned stay in the RUH. I was apprehensive and concerned, but my fears were alleviated by the kind and efficient manner displayed by all staff, especially in the Acute Stroke Unit. Please convey my thanks and appreciation to Dr Peacock and all those in her command for their professionalism, patience, kindness and for making my short stay so painless."

Just a minute...



with **Willow Vivian**, Receptionist, main reception (atrium)

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

A Pens - ours always go missing.

Q Name the first CD you ever bought

A Silver Side Up by Canadian rock band Nickelback.

Q What possession could you not live without?

A My iPhone, I'm constantly on it.

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

A Improving signage around the hospital would really help us on reception.

Q What talent do you wish you had?

A Invisibility - I'd love to hear what people say behind closed doors.

Q What would be your ideal menu and where would you eat it?

A Mexican food and ice cream eaten on a nice beach in Hawaii.

Q What motivates you?

A Friendly and appreciative people, we get so many through the doors every day and they make work worthwhile.

Q What was the last book you read?



A Martina Cole's Hard Girls, it was fantastic.

Q What single thing would improve your life?

A I'll be starting University next September and I think that's going to make my life really fun and interesting.

Customer Service Award winners

Staff nurse Pauline Lloyd has received a customer service award in recognition of her exceptional patient care.



A patient's relative recently took the time to write to the Trust to commend Pauline for the care she gave to her father whilst he was on Philip Yeoman ward – she wanted to pass on her personal thanks. The letter stated that Pauline was a credit to her profession – going out of her way to put the patient at ease and to assist in his care by liaising with other parts of the hospital on his behalf.

The relative wrote that their experience had given them complete confidence in the hospital and, in particular, the ward staff – they felt that their father was in safe hands.

You are a great ambassador for this hospital Pauline and you are a worthy winner.

Congratulations to our Senior Chaplain Rev. Alastair Davies, on receiving his customer service award.



Alastair provides pastoral support and spiritual care to our patients and their carers and hospital staff. Alastair was recently complimented for his calm and dedicated support to a patient who was nearing the end of his life - and for the support he gave to their family. He has been described as making a real difference to somebody's life.

Alastair is held in high regard by patients and staff alike and he has contributed significantly to the strong reputation of the chaplaincy.

Saving a life

Back in March 2006, two of our senior nurses helped to save a man's life at Gatwick airport, just minutes after they had stepped off a plane from Cuba.

Senior Sister on the Cardiac ward Julie Webber and Senior Staff Nurse on ITU Rosie Corbett were returning from a holiday. They quickly and calmly performed cardiac resuscitation (CPR) on a man who had collapsed at the airport, despite some 20 hours without sleep.

Four years later the nurses were delighted to be reunited with Jack, the man whose life they saved, and his wife Pam.

Julie shares her memories of that fateful day: "There was a small group of people moving in front of us as we came through the airport. There was obviously something going on and then we saw a man lying on the floor. At first we thought he had fainted but it soon became clear he wasn't breathing and we started CPR straight away."

"However, he hadn't regained consciousness when the paramedic arrived and he was taken off to hospital. We stayed with his wife for some time. She was, understandably, very shaky and a bit confused and we explained what was happening."

Rosie takes up the story: "We were really worried about him, but we were absolutely delighted to hear that he had recovered enough to undergo a quadruple bypass operation."

"Then recently, we were contacted by Jack and Pam who wanted to meet us and thank us in person for what we did. They organised a special trip to Bath from London on a steam train. We were actually a little nervous – and excited – and wondered if we'd recognise Jack,

as the last time we'd seen him he'd been on the floor and very poorly. But we recognised them both and enjoyed a strange, but wonderful day getting to know them, which reinforced how monumental our actions had been for them and their family.

"Words cannot adequately express how they felt about Julie and me, or indeed, how we felt to see Jack looking so well and happy. It confirms the importance of learning basic life support and having the confidence to use it in times of great need."



June Team of the Month

The Outbreak Cleaning Team is brilliant at responding to any outbreak of the Norovirus effectively and efficiently. Due to the nature of Norovirus, the team needs to leap into action at very little notice to clean any affected wards – the work is hard, repetitive and members are often under pressure.

The members are flexible and work beyond their normal working day, in a way that causes minimum disruption, and always with great spirit. Colleagues describe them as methodical, considerate and impressive to watch. The Outbreak Cleaning Team links in with many departments across the Trust to ensure a co-ordinated approach to any cleaning required and without it, we couldn't do what we do. Congratulations to you all on winning your award.



Just a minute...



with **Dominic Williamson**, Emergency Department Consultant

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

A The fantastic multidisciplinary team I work with.

Q Name the first record you ever bought

A Pink Floyd - The Final Cut.

Q What possession could you not live without?

A My DIY tools.

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

A The way we work with the community.

Q What talent do you wish you had?

A I'd love to play guitar to a high standard.

Q What would be your ideal menu and where would you eat it?

A Barbequed freshly caught seafood on a beach, somewhere warm.

Q What motivates you?

A I like to get things right.

Q What was the last book you read?

A The girl with the Dragon Tattoo by Stieg Larsson.



Q What single thing would improve your life?

A Retirement, after winning the lottery.

Breast of Friends

Breast of Friends is a new support group for the under 50s with breast cancer.

Kate Hope and Cherry Miller, Breast Cancer Clinical Nurse Specialists, contacted the Cancer Information and Support Centre to see about setting up the new group.

They said that they had recently seen an increase in young, newly diagnosed breast cancer patients. They felt that this group of patients would really benefit from an extra support network where they could talk with other women in the same situation and get advice and help in an informal setting.

The Cancer Information and Support Centre were recently successful in obtaining a Macmillan grant of £500 which is going to be used to invite a variety of speakers over the coming months.

Breast of Friends is an opportunity for women under the age of 50 to get

support from each other, and chat over a cuppa. A different speaker is arranged each month and so far, speakers have come to talk about hair care and wigs, colour imaging and the Citizens Advice Bureau to talk about benefits. Upcoming dates include management of fatigue, 'look and feel lovely in your lingerie' and further colour imaging, back by popular demand!

The group meets the first Monday of every month in the Oasis from 12.30pm;

for more information visit the Cancer Information and Support Centre in RUH North or just come along to a meeting.



Just a minute...



with **Nic Aplin**, Medical Nurse Practitioner, Older People's Unit

- Q** What's the first thing you do when you get into the hospital in the morning?
- A** Review and assess any patients who've been unwell overnight, and new patients to the ward.
- Q** Name a film you've seen more than any other
- A** 'Anvil' - a mock-umentary always goes down well.
- Q** Name one thing you couldn't do without in your job:
- A** All the knowledge and experience gained as a senior nurse, a sense of calm, patience and fun, and never limiting yourself to one thing (as you can tell).

- Q** Name something you have won
- A** We won the Team of the Month recently, which was a great vote of confidence for all of the Medical Nurse Practitioners. It's nice to think we've made a difference in our role in a short time.
- Q** If you could change one thing about working at the RUH, what would it be?
- A** The negative influence that politics and money can have on patient care.
- Q** Name something you are proud of
- A** My cats being on the 'I Can Has Cheezburger' website.



- Q** List a compliment someone has given you
- A** Nice hair - I think they were being sarcastic but I'm going to take it anyway.
- Q** What's your favourite comfort food?
- A** Free food is always welcome.

July Team of the Month

The Medical Assessment Unit team are winners of the team of the month, having successfully implemented single sex accommodation across their department. This was achieved without the need for any closure on the ward, and whilst maintaining the 4-hour waiting target, which added to the pressure.

Colleagues from NHS South West - who visited recently - said that 'there is a calm, controlled and professional atmosphere in MAU, with attitudes and an environment which is conducive to a positive patient experience'.

Staff showed pride in their achievements – rightly so – which has been reflected in the positive comments from our patients.

Congratulations on your win.



A bike ride to Paris

Two of our Healthcare Assistants, Jackie Constable and Dawn Samuel – who care for patients on Parry ward – have just completed an amazing charity challenge; cycling 328 miles from London to Paris to raise funds for Action Medical Research.

Jackie tells her story: “Combining shifts at work, training and home life was only possible with the help of family and friends - they got us to that start line at Chessington. We set off with 128 other riders from all walks of life.

“Dawn had a bit of a disaster when

James Scott about to draw the raffle on Parry ward to raise more money for Action Medical Research



her chain snapped, which did some damage, but it was repairable and we completed the first 76 miles to Portsmouth. We got off the overnight ferry at St Malo to begin the 85 miles to Mayenne. ‘Don’t worry this is a flat ride through beautiful countryside...’ well at least half of the pre-stage briefing was right - the countryside was beautiful. I was awarded the ‘most graceful fall of the day’! That night our thoughts were filled with the next ride, the longest, at 118 miles to Chartres. The briefing promised a ‘flat stage’ which we treated with a degree of scepticism. Many hours later - and with a very sore derrier - we arrived. We’re nearly there.

“The next morning’s briefing didn’t even try to pretend that this was a flat stage and the real challenge would be negotiating the traffic in Paris. The book ‘Rough Ride’ by Paul Kimmage sums up the feelings of arriving in Paris perfectly: “The sight of the Eiffel Tower, perhaps the most beautiful thing you’ve ever seen, lifts you like a magic potion. Flesh bristling with goose bumps, you sweep on

to the Champs Elysees. The surface of the avenue is bumpy. The peloton stretches into a long, snaking line but the strangest thing happens; for the first time in four days, you are pedalling without pain.”

“There were tears and champagne under the Eiffel Tower as the enormity of our achievement sank in – amazing.”

Jackie and Dawn chose to raise money for Action Medical Research because of their research to help children deal with disabling conditions like arthritis, diabetes, epilepsy, stroke and multiple sclerosis. They also have a Touching Tiny Lives Appeal aimed at reducing high rates of premature birth and finding the best ways of treating sick and vulnerable babies. Latest research has helped develop a hands-free continuous monitoring device that means doctors no longer need to record a baby’s heart-rate during resuscitation. This struck a chord with them, particularly in relation to the work going on at our own hospital to build a new neonatal intensive care unit.

Jackie adds: “Many people inspired us along the way and the encouragement and generosity of the patients and staff on Parry ward really helped us cope with the training. We are so grateful to everyone for their support and so far we’ve raised £2,000 – which is brilliant.”



Dawn and Jackie

Breaking down the language barriers

Trying to improve access to the RUH for Deaf patients

The RUH was the first UK hospital to provide a new on-line British Sign Language (BSL) interpreting service for profoundly Deaf people, SignTranslate, together with deaf awareness training for staff.

These developments were led by Consultant Respiratory Physician Dr Andrew Alexander - whose interest in healthcare for Deaf people comes from having a Deaf daughter. He is aware of the problems Deaf people have in accessing health care and in understanding consultations with health care professionals, and is chair of the research advisory committee of a three-year national research project investigating the health of Deaf people.

Andrew explains: "Deaf patients who communicate through British Sign Language are only a small proportion of our patients and many staff may never have looked after a Deaf patient. Awareness of the communication barriers which can impair access to



and writing notes is also inadequate. If a deaf person's preferred method of communication is British Sign Language (BSL) then a qualified BSL interpreter is essential and it is a legal requirement for the hospital to provide one. The first step is to book a face-

has improved, things have not always gone smoothly.

"In an effort to improve understanding of the communication and access issues of deaf patients and to support our staff, I've been working with my colleagues Theresa Hegarty, Head of Patient Experience and Louette Eagles, Web Developer, to create a series of new intranet pages.

"These consist of practical step-by-step guidance on how to communicate with deaf patients, understanding the individual patient's communication needs, how to arrange a BSL interpreter, and how to work with an interpreter."

Staff can access these new web pages via the intranet, by searching the A-Z index and looking for: 'Communicating with Deaf patients and carers' or 'Deaf patients – interpreter services'.

"Deaf people often have to rely on family and friends to interpret at hospital visits but they are not usually qualified interpreters."

health care is generally low throughout the NHS. However, poor access and poor communication contribute to poorer health for Deaf people.

"Deaf people often have to rely on family and friends to interpret at hospital visits but they are not usually qualified interpreters. Communication in a medical consultation needs to be 100%, so relying on lip reading

to-face interpreter. The SignTranslate on-line interpreter service, which is accessed using a webcam and computer-on-wheels based in the Emergency department, is used as a back-up if no face-to-face BSL interpreter is available.

"RUH staff were provided with deaf awareness training and although communication with Deaf patients

Innovation in the NHS

Bath Institute of Medical Engineering (BIME) is an engineering design and development charity, based at the RUH, which works to improve the quality of life for people with disabilities and healthcare problems.

A team of 16 design engineers, engineering technicians, an occupational therapist and support staff - working in partnership with our own research and innovation leads - helps provide solutions to challenging problems, creating new applications of technology, new medical devices or instruments which will benefit patients.

Director of BIME Dr Nigel Harris says: "We are nationally recognised as a centre of excellence within the assistive technology field. Our aim is to take on projects that will benefit many people, but as a charity we may take on work for individuals with particular disabilities.



"We do have our own workshops, but where possible we will partner with manufacturers to make and sell our products. BIME has worked with the RUH Children's Centre, to develop and produce WizzyBug (right) - a children's powered mobility vehicle; we also make an oxygen bottle trolley for babies (above).

BIME has been successful in securing funds from Research Councils and the National Institute for Clinical Research. It recently secured an £80,000 medical



Simon Halsey, Grey Giddins & Tim Adlam discussing the finger fixator project

innovation grant to develop a fixation device to speed up the surgical repair of fractured fingers.

Working with colleagues in the University of Bath and the Research Institute for the Care of the Elderly, the team has received funding to develop the software for a computer video conferencing system for use by people living with dementia, the aim is to reduce their sense of social isolation.

Nigel adds: "In collaboration with the RUH research team and the NHS Innovation Hub, we can help identify and take forward ideas for new technology solutions. Very often, the development process begins with a member of the clinical team, who identifies a problem that needs solving or has an idea for some new technology. The first step is to understand the problem and identify a solution, we would then seek funding to develop a prototype and if this proves successful, identify partners to develop it into a marketable product.

"BIME is located in the Wolfson Centre

within the RUH; this gives hospital staff a unique opportunity to work with us. Look out for us in the autumn when we will be running innovation workshops around the hospital."

For more information, contact Design Engineer Simon Halsey on 01225 824103 or email info@bime.or.uk



Testing, 1, 2, 3...

This autumn, our staff will be practising and testing how they respond to cardiac arrest calls - don't be alarmed though – these aren't real cardiac arrests, but mock ones to help us practice and improve the way we respond to an emergency.

Resuscitation Officer Penny Rutter says: "These drills will be unannounced. We'll be setting up the simulation manikin (a popular training tool) in either a ward or department somewhere in the hospital. Then there'll be a shout for help and the responder will react as if it were a real cardiac arrest situation - it'll be all systems go.

"The drills, run by the Resuscitation



Team, will be carried out once every three months, and they will give us an opportunity to practice the response to an emergency as a team, in a safe environment. Training of this kind can

help to highlight actual and potential risks and will help us to identify who attends, how many attend and what role they play, with the aim of maximising the benefit to the patient. We can also assess whether the right equipment is stored in the best place.

"The purpose of these drills is not to test individuals, but rather to test the emergency procedure as a process. This is a stress test which is common practice in many other NHS Trusts and simulation is a good way to enhance communication between teams. We'll be reviewing the success of the drills and sharing any lessons learnt with the staff involved."

Taking care

When we think about manual handling we often think about preventing injury to ourselves. But a good knowledge and understanding of manual handling issues can actually have a direct impact on patient care and help us to look after our patients better.

Jill Wright, Radiographer, tells her story...

"When I started as manual handling trainer for the x-ray department, I thought all it would involve was training staff the correct manual handling techniques - which is important - but it's so much more than that.

"We x-ray many people who come to us not long after hip surgery, so they are still in considerable pain and discomfort. The normal way of x-raying these patients is to laterally transfer them from their beds onto



to our x-ray table. To do this we need to roll the patient onto their side - the very site of the operation - which is painful and the experience can therefore be quite traumatic and upsetting.

"I wondered if I could use my knowledge and skill of manual handling to come up with a way of improving patients' experience. After discussing various solutions with Manual Handling Adviser Mary

Chapman, we came up with the idea of inserting a slide sheet using the top to toe method, which does not require the patient to be rolled. Then we could either do a lateral transfer by slipping the pat slide under the patient without rolling them or transfer them from top to bottom.

"We have since found this to be a much more comfortable way of transferring patients and we hope this improves their overall experience in the x-ray department. Being a manual handling trainer enabled me to think about how we can change our practice in simple ways to improve patient care and dignity."

European Health and Safety Week

It's Health and Safety Week from 25-29 October. Join the team in the Lansdown foyer to find out about activities taking place at the RUH.

CRS (Millennium)

Many people will be aware of the National programme for IT (NPfIT), which is supporting the NHS to implement IT systems to allow information to be shared between NHS organisations and within individual teams.

Our own project - CRS (Millennium) - is making great progress towards the replacement of our patient administration system and our existing Theatres system. This is a major step forward in modernising our IT services to help improve patient choice, patient safety and quality of care at the RUH.

There are a number of stages of the project we're working through before we're ready to go live with the new system.

Currently, we're into the 'build' stage.

Key staff are 'operational decision makers' and they'll be working with the Project Team to design the new system, based on feedback from a series of events and workshops to ensure that everyone involved can see how the new system will look and feel.

System Review - This involves personalising the system to meet our needs. Cerner (the providers of Millennium) will help us to work out what we want the system to do for us and then build a prototype.

Design Review - This step confirms that the prototype matches what we need the system to do. Clinicians, nursing staff, specialty managers, ward managers and ward clerks will attend workshops to ensure that they are comfortable with the way in which the

system is working.

System Validation - Finally, we will confirm the full system meets our requirements and we can begin testing. Our trainers will also be closely involved so that they can consider how best to support training.

Janina Cross, CRS Project Manager says: "This project is about transforming the way in which we work, creating a tailored system that suits our needs and which allows us to focus more on patient care.

"We want to encourage staff to get involved and would love to hear from anyone interested in joining the Project Team or who would like to be considered as a Champion User. If staff have any questions at all, please contact me on x4047 or Sue Cope on x6268."

Planning for **winter**

As we are still enjoying some days of autumnal sunshine, writing about our winter plans may seem a little premature; rather like getting a Christmas party flyer in August.

However we believe we learn from experience and as one winter ends, we are already revising our plans, working with community partners and looking at what we can improve in terms of patient safety and care.

This year will see a number of very distinct changes in our approach to tackling patient care during the winter months. For example, our patients are getting better quicker and this means we are slowly reducing the number of days a patient stays at the RUH. This in turn means that beds for patients being admitted - either through the Emergency department or via the GP - should be more readily available



and reduce delays, particularly in times of severe weather when admission levels can dramatically increase.

To further support that, we now have specialist team who works with patients, to plan their discharge from the moment of admission. Families and carers are also consulted as soon as possible to try to overcome any obstacles to a patient going home as soon as they are fit. The team is made up of our clinicians and social care and community care specialists and the approach is a holistic one, looking at all the patient's needs, not just the medical ones.

In addition, we will be setting aside a dedicated ward area to use when our admission levels are very high. This avoids trying to find bed spaces in lots of different areas of the hospital, often at short notice, which is far from ideal for our patients. Having a ward dedicated to cope with a sharp increase in admissions will enable us to better manage the safe care of our patients during those times and should improve their overall experience. This is only a brief snapshot of a very detailed plan and more information can be found on our website.

Dorothy House - **sharing care**

Sharing – whether it be information, expertise or mutual support – is the key to our close relationship with Dorothy House Hospice Care.

Dorothy House doctors are part of our hospital's palliative care team, with a hospice consultant here four days a week. The team support people at the end of life, whatever the cause - not only cancer patients, but people with heart failure, neurological disorders or dementia - with the aim of providing the best possible care to dying patients in and out of hospital.

The palliative care team has grown since 1993 when Dorothy House medical director Chris Higgs was its sole member, working one morning a week, and now includes two new consultants, Dr Trish Needham and Dr Marina Malthouse. The team is closely linked to the hospice, and a shared palliative care database helps the exchange of information. They support Dorothy House patients when they are admitted to the



Back row, l-r: Dr Chris Higgs, nurse Annie Murray, OT Jane Kibblewhite; front row, l-r: nurse Rachel Davis; team co-ordinator Linda Packer, nurse Caroline Groom

RUH and link with Dorothy House specialist nurses when they are discharged home.

Dr Chris Higgs says: "The hospital's palliative care nurses and occupational therapist do the bulk of the work, assessing patients, advising on symptom control and supporting them to make decisions about their care. They can call on the expertise at Dorothy House at any time for advice and support.

"Our Dorothy House doctors provide support and advice to solve difficult problems. Our day may start in the Medical Assessment Unit, with patients who would rather go back home than stay in hospital for their end of life. The palliative care team can reassure people that if they do choose to go home, they will have the support they need. We are also around to raise the profile of palliative care in the RUH."

Fact file

- The palliative care team comprises a Dorothy House doctor, three palliative care nurses, an occupational therapist and the team co-ordinator.
- Dorothy House doctors visit the RUH all day Tuesday and half days the rest of the week.
- The Dorothy House doctors work with the palliative care nurses each day providing support and advice. They see patients on the wards, and visit the Oncology ward and Medical Assessment Unit.
- The team office is off the north corridor and they are available 9am-5.30pm, Monday to Friday.
- The Dorothy House 24-hour, 365 day helpline 01225 722999 is available for any RUH staff to access for advice.
- The hospital palliative care team and the Dorothy House education team share in providing education and training for RUH staff, particularly in communication skills, end-of-life training and symptom control.

Forever Friends – update

Read about the activities of the Forever Friends Appeal team and find out more about some of the forthcoming events in their fundraising calendar.

Ted's Big Day Out! 2010 - Be silly in stripes

With this year's event fast approaching make sure you've completed your registration form, paid your £1 and returned it the Appeal team – then you'll have already raised money just to take your teddy to work, school, or wherever you happen to be on Friday 15 October. The theme this year is to 'be silly in stripes', so dig out your favourite stripey socks or even spend the day in your stripey pyjamas and help us complete the campaign to build a sustainable new neonatal intensive care unit at our hospital.

Be silly in stripes



Grand Raffle Draw

Tickets for this year's annual Grand Raffle will be on sale from mid-November. You could be a lucky winner of one of the amazing prizes available. Keep an eye out for volunteer Bill Viles, who'll be setting out his usual fabulous display of raffle prizes in the atrium, and be sure to buy a ticket. We say a big thank you to Tesco who are sponsoring the raffle this year.

Bath Half Marathon 2011

This popular, annual event is due to take place on Sunday 6 March 2011. Thousands of people will be taking to the streets of Bath to complete the 13.1 mile Bath Half Marathon.

Could 2011 be the year you take part? The Forever Friends Appeal has Golden Bond places available for the race. These places are open to all and cost just £25 per person. By taking part in the event you'll be a member of Ted's Team, raising money towards the provision of equipment that will benefit our patients. For more information and to sign up for the event, please call the Appeal team on 01225 825825. Alternatively you can email forever.friends@ruh.nhs.uk

Doctors' Mess Charity Ball

Each year a Charity Ball is organised by our new trainee doctors. This year's ball, which took place at the wonderful Assembly Rooms in Bath, was attended by 160 people who raised a fantastic £1,500 for the NICU 'Space to Grow' campaign. To aid them with their fundraising, a

raffle - sponsored by local companies Bath Rugby and Great Western wine - took place. The monies raised from the doctors' mess charity ball will be matched by the Brownsword Challenge. Mess President Jiten Doshi says: "it's a substantial contribution from a wonderful evening out".



Friends of the RUH

Giving us a helping hand



Summer Fete with a 1940s vibe

The Friends summer fete in June was a great success. Everyone really made an effort to get into the spirit of the 1940s theme. Staff dressing up in 1940s gear and jazz music of the era playing all added to the atmosphere.

The fete raised an amazing £7,528.89 - even more than last year. Given the

current economic climate, people's generosity was very encouraging. The money raised will go towards the renovation of a garden along the central corridor, for patients, visitors and staff to enjoy. Being able to look out at, or sit in, pleasant green spaces can make a big difference to our patients whilst they are with us.

A big thank you to all the Friends volunteers and hospital staff who helped with the arrangements for the fete, manned stalls and made cakes and goodies to sell – and of course a thank you to those of you who came along and spent your money. We hope you consider your pounds well spent.



Wanted – Gardening tools

The Friends gardening team started out as a tiny seedling and now it's blossomed. We can all enjoy the fruits of the labours of a group of eight volunteers who have been working to maintain 13 garden spaces throughout the hospital.

However, they need your help to continue because they're short of good quality gardening tools. If you have a decent spade, fork, hoe, or other useful garden tool that's gathering cobwebs in your garden shed, would you be prepared to donate to the Friends gardening team? If you can help, Jane Rymer on 01225 427337 would like to hear from you.

If you aren't able to offer tools - but you would still like to support the Friends gardening team - then a cash donation to the gardening fund would be much appreciated. If you can't spare your cash, but you can spare your time - this would be equally welcome. Please contact Jayne Watkins on 01225 824046 or pop in to see her in the Friends office.

As well as enjoying the gardens, we hope the magnificent hanging baskets and pots outside the front entrance have brought you cheer. These have been funded by the Friends and they really brighten up the place.



Settling in

In the last edition of insight we mentioned that the atrium shop has a new manager, Maxine Jefferies. We're delighted to say that Maxine's first three months have gone really well. Maxine says: "I've been made to feel very welcome by staff and volunteers alike. The volunteers are amazing – they work so hard. I'm really enjoying all aspects of my job and for the first time ever I can say that I look forward to coming to work in the morning!"

To advertise in this publication please call the sales team on **01909 478822**.

insight

Take a break

Answers to last issue's puzzles

Crossword

Across

1 Eggs 2 Saturn 3 Noon 4 Stitch 5 Diamond 6 Westerly 7 Cheese 8 Sally
9 Timmy 10 Candlestick

Down

11 Penn 12 Battenberg 13 Good intentions 14 Rice 15 Imp 16 Welsh 17 Lily
18 Ryder 19 Aunt 20 Ace

Where am I?

Durban, South Africa



£69,000 donation to Oral & Maxillofacial department

Patients and staff are benefiting from a generous donation from the Friends of the RUH. They were able to fund a project to move specialist x-ray equipment from the Radiology department to the Oral Surgery department. The move will help to improve the patient experience for those coming to the RUH for orthodontic treatment. For full story see page 9.

Art

at the Heart of the RUH

As the greens of summer give way to the golds of Autumn, the change of season heralds a new exhibition of Art at the hospital.

Art from six female artists will be on display throughout October and November. They include work by contemporary artist Carol Denn who creates imagery using just a few bold brush strokes and specific or personal elements of collage on raw linen canvas, around themes such as nature, memories and childhood. There are paintings by Carolyne Kardia which make use of bold, vibrant colours.

Eleanor Bartlett's paintings explore form, colour and surface, whilst Fiona Cassidy's photographs capture scenes from the constructed environment, showing objects slightly out of place or off kilter.

Victoria Purver creates unique and engaging concepts inspired by the exuberance of nature - painting from still life, using the 'floral' as a vehicle to express colour and energy and Australian artist Susi Adams paints English countryside landscapes using watercolour, oils and acrylics.

We are now also able to enjoy art in the north of the hospital and we're very

grateful to the Friends of the RUH for their generous donation towards the new hanging system there. Currently on show is a selection of glorious nature photography by Mike Spragg, Rachel Downtown and Beverly Griffiths, as well as watercolour paintings and miniatures by Norman Whiting.

Also on display is a painting donated to the RUH by artist (and patient) Philip Ledbury. Philip exhibits regularly at the hospital and this painting 'Friends' - located outside Oncology outpatients - represents the many friends he has made at the RUH over the years.





Further details of art at the RUH can be found in the Art at the Heart map and exhibition programme, which is available and on display in the hospital corridors. All of the work is for sale and a commission is paid to the RUH Arts Fund.

Exhibitions are open to the hospital community

24-hours a day. For more information please visit our website www.ruh.nhs.uk/art or call a member of the art team on 01225 824987.



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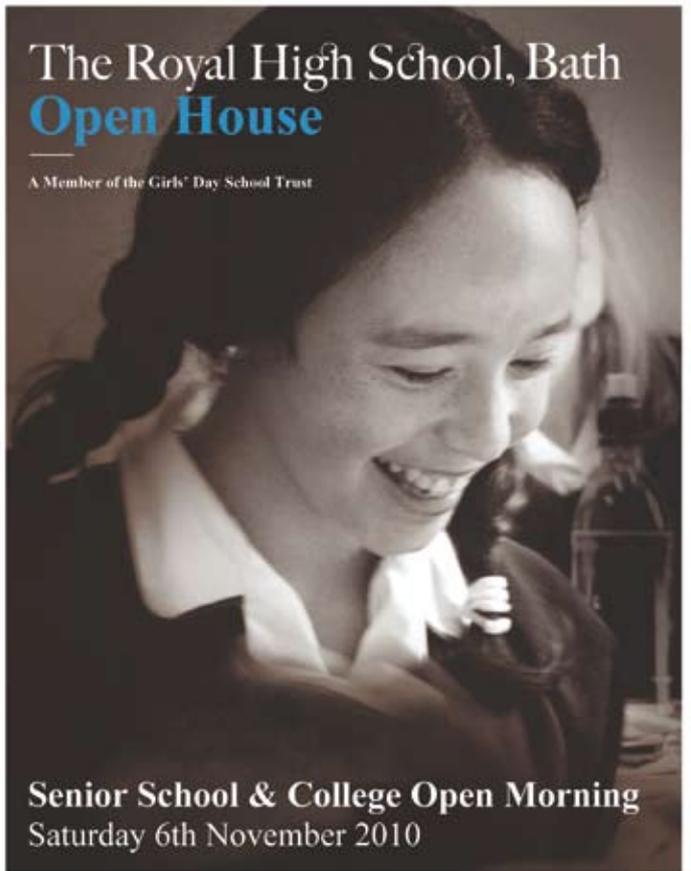
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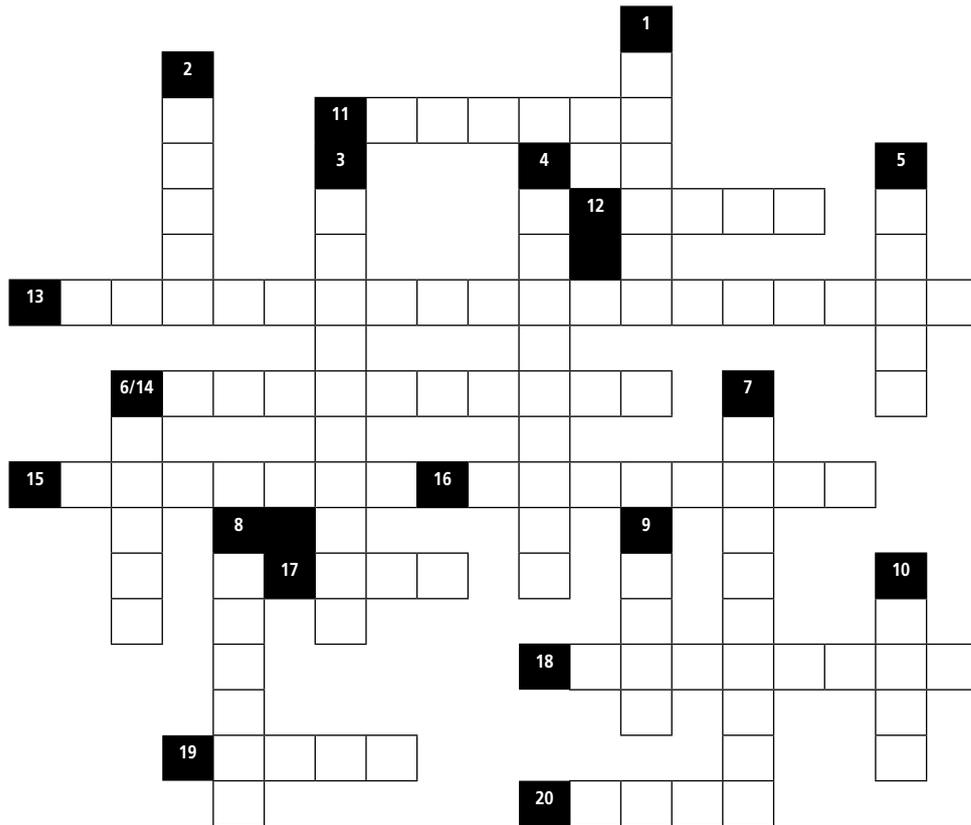
*Specific terms and conditions apply for the Perfect 10 package, Jumpstart shared equity scheme and the Home Exchange scheme, please see sales advisor for details. Purchase schemes only available on selected plots. Prices and availability correct at time of going to press.



Take a break

This is your chance to win two tickets to a 'black tie' do at The Pump Rooms. On **Friday 10 December** enjoy a Champagne cocktail beside the Great Bath, followed by a 3-course dinner. The evening ends with disco and fun money casino. Ticket includes a half bottle of wine. Competition open to staff and the public.

All you have to do is to complete **BOTH** puzzles correctly and return this page to the Communications office by the 15 November.



Across

- 11. The fruit in Tarte Tatin.
- 12. The lead singer of U2.
- 13. Commonly thought to be the first book in English to be printed in England.
- 14. What was Christopher Latham Scholes significant invention of 1868?
- 15. Children's TV programme feature Prof. Yaffle.
- 16. Claret wine is produced in the region surrounding which French city?
- 17. Name for a lyrical work, typically 50-200 lines long, from the Greek word for song.
- 18. A maker of arrows.
- 19. Circular collapsible tent used by Mongolian nomads.
- 20. Spar at the foot of a sail on a sailboat.

Down

- 1. What is the line on a weather chart which joins points of equal pressure?
- 2. Where was the 1962 World cup held?
- 3. Which famous composer wrote 'The Wedding March'?
- 4. Which living bird has the largest wing span?
- 5. What ball is worth three points in snooker?
- 6. The name of the first animal to orbit the earth.
- 7. What is a haboob?
- 8. A soft gentle breeze, yet also a river crossing.
- 9. What is the monetary unit of Botswana?
- 10. Which creatures communicate by touch, song and dance?

Where am I?

With a population of approximately 9.5 million this is the twelfth-largest city in the world.

Established in the fourth century, the city became an important trading port for the Kingdom of Sunda before being occupied by the Dutch in 1619 and renamed Batavia. The Dutch made the mistake of attempting to replicate Holland by digging canals through the malarial swamps resulting in shockingly high death rates and earning the nickname 'White Man's Graveyard'. The city's current name is derived from an old word which translates as 'victorious deed', or 'complete victory'.

Officially not a city but a province given special status as a capital city, sister relationships include Budapest, Cairo and Tokyo.

January is the height of the rainy season and sees an average of 14" of rain, and with 40% of the city below sea level, it is particularly prone to flooding.

Traffic congestion is a problem so a 'three in one' rule during peak hour was introduced in 1992, prohibiting fewer than three passengers per car on certain roads.

A monthly 'Car Free Day' takes place on the last Sunday of every month.

Where am I?

Name:

Contact details:

Congratulations

Congratulations to last edition's winner, Pauline Hearsey. Her correct entry won her £50 of John Lewis shopping vouchers.