

St George's Healthcare



NHS Trust

the

# frontline

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## Celebrating our frontline staff

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Front page picture shows Nurses' Day winners: (l-r back row): Briar Cooper, healthcare assistant (HCA) of the Year; Mary Holland, Mentor of the Year. Front row: Alice Ciolino, Midwife of the Year; Linda Smith, Nurse of the Year.

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**HAPPY ENDING:** (l-r) Simon and Stacey outside the intensive care unit in which she spent 32 agonising days

## Life-saving intervention for swine flu patient

**38-year-old Stacey Raines had no idea that, when she came to A&E on Christmas Eve last year, she would remain in hospital for 42 days.**

Stacey began to feel unwell at the end of November when she came down with flu. A couple of weeks later she developed an aggressive cough and when her ability to breathe drastically declined on Christmas Eve, she went straight back to her GP who called an ambulance immediately. She was brought to St George's A&E department and was diagnosed with swine flu and admitted onto the cardiac intensive care unit (ICU).

Before New Year's Eve, Stacey was so sick that her consultants referred her to the Extra Corporeal Membrane Oxygenation (ECMO) at centre Glenfield Hospital in Leicester. ECMO is used when a patient has a serious condition which prevents the lungs or heart from working normally and is a supportive measure that uses an artificial lung to oxygenate the blood outside the body. While Stacey fulfilled the criteria, the centre could not take her as they were full.

The St George's intensive care unit (ITU) team pressed on with a technique known as high frequency oscillation. This technique is a specialised ventilation technique and is only performed by a very few ITU in the country.

Nick Fletcher, consultant and lead intensivist for cardiac ICU, said: "We find when conventional ventilation fails as in Stacey's case, this technique can be lifesaving. It helps to hold the lungs open in the most desperate conditions."

Stacey was very ill for a long time, but eventually started to make a good recovery and after 32 days in ICU she was moved onto a cardiac ward. She said: "I didn't know how ill I had been and I couldn't believe how much time had passed – I woke up thinking that it was Boxing Day and that we should be going snowboarding!"

"I then had to go through a rehabilitation process while on the ward, as my muscles had wasted away after being bedridden for so long. The staff on the ICU were amazing – I cannot thank them enough." Stacey's rehabilitation continued after leaving hospital in the form of physiotherapy for issues with her muscles, joints and lungs. Four months later, while just resuming light gym training, Stacey is still some way off getting back to all the sports she used to enjoy such as cycling, snowboarding and sailing.

Stacey has recently got engaged to her partner, Simon. She said: "He wanted to propose to me while we were on holiday but then I got sick so he had to sweat it out a little longer!" The couple are due to get married in New Zealand next year.

### Date for the diary

**St George's Annual General Meeting (AGM) will take place from 6pm–8pm on Thursday 29<sup>th</sup> September in the Monckton Theatre, ground floor, Grosvenor Wing.**

“ I am pleased to be writing my first introduction in the *gazette*.

This edition, like previous ones I have read, showcases some of the great work that is going on trust-wide. This month readers can also take the opportunity to find out more about me and my priorities for the trust in the coming months in view from the top on page 7.

I had the opportunity in June to help bring one of the stories to life by awarding the winners of the trust's *living our values awards* with their certificate and vouchers for the value of kind – a very pleasant experience for my second week in post.



Peter Coles

Other staff achieving recognition in this edition are the winners of International Nurses' Day event, the coverage of which can be found on pages 10-11. Another great feature is the coverage of the St George's first community open day on page 12. The day attracted around 2,000 people and was a great way of engaging our local community with the work of the hospital and the university.

Finally, I would like to thank all of those staff I have met so far for the warm welcome they have given me. I look forward to meeting many more of you during my time here and working with you to help St George's reach its full potential.



## Review to look at 'Better Services Better Value' in southwest London

**Doctors, nurses and therapists are coming together with patients and their representatives to review health services in southwest London. They are calling the review: Better Services Better Value.**

Six clinical working groups are being formed, looking at the following areas:

- Planned care and end of life care
- Urgent, unscheduled and emergency care
- Maternity and newborn care
- Children's services
- Polysystems, mental health, long term conditions and staying healthy
- Specialist services under London review (for example cancer, cardiac and paediatrics)

The NHS spends £2.2 billion annually on health services in southwest London. The review will consider: "Are we spending this money in a way that benefits patients the most?" and, "Can hospitals work collaboratively with each other to improve the service we offer to patients?"

It is recognised that hospitals across southwest London have areas of excellence among the services they provide. By exploring how these areas of excellence can be shared, quality across the board can be improved and services can be protected for all patients.

The clinical working groups will be discussing the problems and not proposing solutions at this stage, so it is too early to start talking about any proposals for change. However, the overall aim will be to improve health outcomes for patients in southwest London within available resources.

You can find more information about 'Better Services Better Value' at [www.southwestlondon.nhs.uk](http://www.southwestlondon.nhs.uk).

### Building bridges

The director of women's and children's of the Aga Khan Institute, Prof Bhutta, and the deans of the six medical schools of the Aga Khan visited St George's Hospital early in June, to strengthen their understanding of maternal-fetal medicine.

The meeting was an informal fact finding visit. While the trust has no formal relationship at institutional level, Aris Papageorghiou, consultant in obstetrics and gynaecology, collaborates with Prof Bhutta on research and some global health initiatives, so it may lead to a relationship in terms of St George's Healthcare helping with trainees and even tertiary referrals.

### Bolingbroke Hospital – the final chapter

The trust handed over the keys of the Bolingbroke Hospital to Wandsworth Council in March, marking the final chapter in the Bolingbroke's century-long history of providing health services to the population of Battersea and beyond. The council is working with education charity ARK Schools to set up and operate a new secondary school on the site, which is scheduled to open in 2012.

## Potential St Helier partnership

**St George's Healthcare has been formally invited to tender for partnership with St Helier Hospital, including Sutton Hospital and Queen Mary's Hospital for Children.**

The Epsom & St Helier University Hospitals NHS Trust board agreed in December 2010 that the trust is not financially viable in the long term and will not be able to achieve foundation trust status, and made the decision to explore alternative options in order for Epsom, St Helier and Sutton hospitals to achieve foundation trust status, including the possible de-merger and re-merger of its hospitals with partner organisations.

St George's Healthcare was the only NHS trust to express an interest in partnering St Helier Hospital, and is now working to submit a bid on 16th September 2011, with the St Helier transaction board due to make a recommendation to the Epsom & St Helier board in October 2011.

St George's Healthcare and St Helier Hospital already have a wide range of clinical and academic links.

Many services provided by St George's Healthcare and St Helier Hospital are members of established clinical networks with care pathways operating across the trusts and a number of joint medical appointments. These services include cancer, trauma, stroke, renal surgery, cardiology, vascular surgery, maxillofacial surgery, ENT, paediatric surgery, urology, plastic surgery, neurosurgery and thoracic surgery.

Updates on the potential partnership with St Helier Hospital will be featured in future editions of *the gazette*, in eG and on the intranet.



**WINNING TEAM:** Wandsworth community neuro team

# Living our Values Awards - celebrating kind

Launched in February, the *Living our Values Awards* have been embraced by staff across the trust. This month *the gazette* meets those who won the awards for personifying the trust value of  **kind**.

- Anticipate and respond to patients' and carers' concerns and worries
- Support each other under pressure and consider the impact of our actions on others
- Help people find their way if they look unsure or lost
- Smile, listen and be friendly

Susie George, advanced physio practitioner, won the individual award. She said: "We work together as a team – it does not work with just one person. I'm really open and honest with patients, which they seem to like. I explain what their musculoskeletal condition means for them and what they can expect next."

In nominating Susie, Lucy Clark, team lead for physiotherapy in outpatients, said: "Susie is an incredibly kind person in so many ways to both her patients and colleagues. By treating each patient holistically rather than just the physical symptoms and always discussing their expectations, she significantly improves patients' experiences and satisfaction."

"By being kind and supportive to all her colleagues, she is a good role model to others and ensures the team works seamlessly together to achieve team goals and maintain high service user satisfaction."

In her nomination for the Wandsworth community neuro team (WCNT), clinical team leader Rachel Sibson, said: "I have been the team leader of this service for nearly six years, and I am proud to describe them as exemplary. Every individual in the team demonstrates the core trust values on a daily basis. Most of the WCNT's patients have very complex



**HOLISTIC APPROACH:** (l-r) *Di Caulfield-Stoker, divisional chair of community services Wandsworth division; Susie George, advanced physio practitioner; and Lucy Clark, team lead for physiotherapy*

and often deteriorating/terminal conditions; therefore the team is managing patients at the most difficult and traumatic time in their lives.

"They have to demonstrate tact, empathy, respect and humility at all times while remaining professional, informative and proactive to anticipate and respond to patient's needs and worries.

"I regularly hear comments from patients, relatives, carers and other services commenting on how the WCNT have shown genuine kindness towards their patients – they often go the extra mile for patients who are in particular difficulty, or have been 'let down' by other services/organisations or individuals."



## Team

**Winner** Wandsworth community neuro team  
 Runner-up: William Drummond HASU team

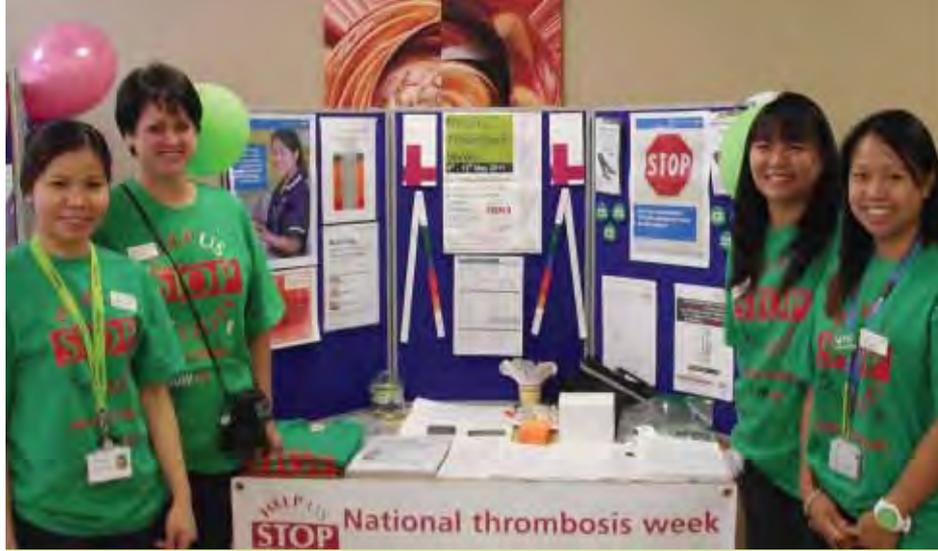
## Individual

**Winner** Susie George, advanced physio practitioner, Queen Mary's Hospital  
 Runner-up: Dennis Farebrother, portering  
 Runner-up: Gwynne Farrell, neurosurgery  
 Runner-up: Bernadette Kennedy, integrated falls service

This month, *the gazette* is asking staff to nominate a team or individual who they think embodies the value of:

## **responsible**

When making your decision, please take into consideration the behaviours which support this value and how the person/team incorporates these into their working lives. Download the nomination form from the 'our values' page under the 'about us' section of the intranet and email this to [awards@stgeorges.nhs.uk](mailto:awards@stgeorges.nhs.uk). Winners will be announced in the October edition of *the gazette*.



**AWARENESS RAISING:** (l-r) The VTE team had an educational stand in the Hyde Park Room, as part of International Nurses' Day

## National Thrombosis Week

**A number of activities took place across the trust to mark National Thrombosis Week in May.**

As well as having an educational stand in the Grosvenor Wing main entrance, the ingredients restaurant and the Hyde Park Room throughout the week, the venous thromboembolism (VTE) team also held 'walkarounds' on various wards to make sure that staff

knew what VTE was all about.

Ediscyll Lorusso, thromboprophylaxis nurse who leads on VTE, said: "The walkarounds were a real success as it meant we could find out what different wards were doing well and what they were struggling with. It gave staff the chance to find out more about VTE and ask any questions they may have."

## Patient safety – our top priority

**Patient safety work is ongoing around the trust to ensure that patients are safe and that any problems are reported in a timely and effective way.**

Across the trust there are many dedicated staff who champion the patient safety cause and a number of initiatives and events are held to promote this. A coordinated programme of safety initiatives is currently being developed into a safety dashboard which will be available on the intranet.

A key patient safety initiative is work around the early warning system (EWS) tool. This is being undertaken by Deborah Dawson, consultant nurse in critical care, and her team including Paula O'Shea GICU liaison nurse and Chris Ryan GICU team leader. The tool is used to record and report the deterioration of patients. A new EWS is currently in a three month pilot and, if successful, will be rolled out to the rest of the trust by the end of the year.

This updated EWS has responded to staff concerns and includes a simplified method of scoring systolic BP and urine output, it also includes a score for oxygen and updated scores for heart rate, respiratory rate, conscious level and temperature based on national guidance and contemporary evidence. As before, each parameter is scored more highly the further it deviates from 'normal'. The individual score for each parameter is then combined and this provides an aggregated weighted score for each set of observations which can be compared to a trigger tool to highlight patients that should be reviewed. The chart has also been updated to include all the scores on one page, a colour coded chart and the SBAR communication tool.

Deborah Dawson said: "The EWS tool helps staff to recognise and then clearly communicate patient deterioration. A fast response to recognise early patient deterioration gives the patient the best chance for recovery."

If you or your team has developed a safety initiative please share this with Yvonne Connolly, head of patient safety via email.



## Junior doctor programme improves patient safety

**Junior doctor Imran Qureshi is encouraging colleagues to get involved in improving patient safety through his Doctors Advancing Patient Safety (DAPS) programme.**

The programme involves getting junior doctors involved in developing projects that will improve or enhance patient safety in the hospital environment. Projects undertaken to date include surgical handover, tracking the changes in a patient's medications during their inpatient stay, developing a mnemonic for medical ward rounds to ensure necessary information is remembered and producing a flow chart for arterial blood gases in neonatal units.

Imran was inspired by the idea when he attended a quality and safety conference in 2009. He said: "While I was there I had this idea that junior doctors could be champions of safety, and fed this idea back to the group of junior doctors I was working with at St Peter's Hospital in Chertsey."

Imran brought the programme over to St

George's when he joined the trust in August 2010. Each junior doctor involved in the initiative at the trust has had a consultant as a mentor and this has been instrumental in providing them with support.

The programme is constantly taking on different projects and in January 2011 ran its first International Improvement Programme which involved seven junior doctors going over to Services Hospital Lahore, Pakistan, to carry out quality improvement projects.

DAPS has also developed its first publication entitled *Reporting for Duty* which encourages junior doctors to report cases on the DAPS website to build up a collection of case studies which can be used as learning tools.

Imran runs DAPS with Sarah Hammond, consultant anaesthetist, and to facilitate the projects and they have started a 'student safety forum' which is held bi-weekly and focuses on key patient safety issues.

## ◆ Feedback

The trust cares for more than 800,000 patients each year and many of those take time to write and express their thanks. Each month in *the gazette* we publish a selection of those letters.

### ● FAO the spinal team, operating staff ICU and Ocean Ward

My daughter was admitted into your hospital for a major spinal operation to repair a scoliosis. I would like to say that the service my wife, myself and my daughter received was first class. On what was a very stressful time for all of us, the staff we dealt with were very kind, helpful and understanding.

I would like to single out the spinal team: Moey Chen Lim, Jason Bernard and Tim Bishop – their skill and compassion at what was a very emotional time was absolutely brilliant, before and after the operation. I am totally in awe of their skill and their ability to instill confidence.

Also a very big thank you to everyone else who was in the operating theatre, it was very humbling when my wife and I realised how many people were involved and were waiting for us when we got to the theatre.

After the operation the nurses and staff in the ICU and Ocean Ward were all very understanding and very helpful. All in all, what was a very stressful and emotional time for us was made totally bearable.

### ● FAO the intermediate care team at Dawes House

Thank you for the wonderful care, help and kindness received in intermediate care at Dawes House. All the staff were a real blessing, cheerful and willing to assist. Overall, the level of care was 100 per cent.

### ● FAO Champney's Ward

I would just like to extend my sincere gratitude to you and your staff for the excellent service I was given throughout my surgery in the Champney's Ward. From the nursing staff in my ward (namely, Sonia) to the recovery ward (I only remember hearing 'Cherry' for a name), I was so pleasantly surprised at how wonderfully I was treated. Thank you so much for putting me at ease from the moment I 'moved in' to the time I was discharged. I will be eternally grateful.

### ● FAO Mr Rami Issa and team, Grey Ward and Vernon Ward and the Haemophilia Clinical Nurse Specialist

I have used a number of your services and I have to say that the whole experience has been one of wonderment. Everybody I have been in contact with has been highly professional, courteous and friendly. I have to say that you have a dream team at St George's which you should be proud of.

I would like to thank personally my surgeon Mr Rami Issa, locum consultant urological surgeon, and his team. At all times they kept me informed of what was happening, and were a major credit to your hospital.

I stayed on Grey Ward and Vernon Ward and all the staff, from the sister in charge to the dinner lady, have to be commended for their professional approach. Their care is second-to-none and the staff should, in my opinion, be highly praised for the work that they do.

There is just one other person I would like to bring to your attention – Ann, the haemophilia clinical nurse specialist. Like everyone else I have met, she has been highly professional, kept me well informed and has been very helpful.

I would like to finish by saying I am quite a stressful person, but your staff have been wonderful and have kept me calm throughout. Your staff are a credit to the trust.

### ● FAO fracture clinic

I was discharged from the fracture clinic after what I can only describe as a course of thoroughly excellent, professional treatment, which does our much-maligned NHS proud.

I was seen promptly on each occasion, and was treated in a friendly and professional manner at all times. The various members of staff I saw managed to gain my trust, and were more than happy to accommodate my questions and concerns. I would like to express my sincerest thanks for the care that I received.

## Past and present – Dame Muriel Powell

**The Dame Muriel Powell meeting room on the third floor of Atkinson Morley Wing is named after one of the most prominent and pioneering nursing figures of the last century.**

Matron of St George's Hospital from 1947 to 1969, she has been described as an outstanding figure among the nursing leaders of her era. Her commitment to research in the areas of clinical practice and nurse education resulted in major research projects being carried out at St George's Hospital during her time here; for which she received both national and international recognition.

Powell trained as a nurse at St George's Hospital in 1934 and returned to the hospital to be matron in 1947 at just 33 years old. Although some thought she may be too inexperienced for

the job, the general view was that a 'youthful and progressive' leader was needed in light of the changes to the health system.

She revolutionised established practices in a bid to 'humanise' St George's atmosphere, which she considered too strict. She recognised the importance of involving patients in decision making, and introduced questionnaires on medical and nursing care, as well as other aspects of the service, to see where improvements could be made. She also abolished the practice of nurses having to resign when they married.

Every year at the International Nurses' Day awards, the Nurses League honour Dame Muriel Powell's memory by presenting an award which they fund. The 'Dame Muriel Powell award' aims to promote the ideals and values that Dame Muriel Powell upheld.

### Peter Coles, interim chief executive

**The gazette caught up with Peter Coles, interim CEO, during his second week in office, to find out about his career and his priorities for the trust over the next few months.**

#### How long have you worked in the NHS?

I have worked in the NHS for 28 years, at trust, foundation trust, primary care trust (PCT), regional and Department of Health levels and across acute, mental health and primary care services.

From the start of my career I was keen to work in the public sector although I was unsure about whether to go into education or the NHS. It was while waiting for a postgraduate teaching course to come up that I took a temporary job at Leeds Infirmary, my local hospital at the time, in a clerical role which I really enjoyed.

My first chief executive role came in 1994 at Thameside Community Services in Essex, at which time I became one of the youngest NHS trust chief executives.

#### What attracted you to St George's Healthcare?

I became very familiar with the trust while working as interim chief executive at Epsom and St Helier Hospital in 2009.

St George's Healthcare has developed a reputation for excellence across a number of key specialties including major trauma, stroke, cancer, cardiac and neurological services. These services, and many more, have helped the trust to retain its place on the NHS map of strategic importance. However, as the NHS changes, so the trust will need to adapt in order to meet its full potential.

#### Having taken up the interim role has your view of the trust changed?

I'm still getting to know the place and everyone I have met so far has made me feel very welcome.

I think there is a sense that the excellent work that happens at the trust hasn't always been acknowledged or recognised by the wider world – clearly we need to be prepared to shout about our successes more and tell people all the good things we are doing.

I also think that the trust has somehow failed to deliver reliably against its status and reputation. For example, not yet becoming a foundation trust (FT) when,



to the wider NHS, this hospital would be an obvious candidate to be one of the capital's leading FTs. Meeting financial targets has been an ongoing challenge, while slip-ups on key performance targets such as 18-weeks and A&E waits do reflect a lack of consistency.

#### What are your key priorities for the next few months?

Patient safety and the quality agenda will always be on the top of my list, but these must be achieved at the same time as financial targets. I have learned over my time in the NHS that it doesn't have to cost more to provide high quality. Doing things right first time reduces cost and increases productivity. An important part of my role will be to continue to build on the improvements the trust has already made, and to ensure that robust structures and processes are in place to help us deliver long-term financial stability. The challenge is to deliver on our cost improvement targets and get ahead of them if we can.

I also want to make sure we meet the national performance targets for 18-weeks, A&E, cancer services, patient experience, MRSA and C. Diff.

To achieve our goals we will need to work more closely with other organisations. The future strategy of the trust is linked in with the London-wide reviews of services and will require us to forge a stronger partnership with St George's, University of London and to work in alliance with local hospitals.

Because of my background and experience, I already know the chief executives of the other local trusts and the directors of NHS South West London. I'm very keen to continue to develop those relationships and to build the effective partnerships where we can, in much the same way that we are doing with Kingston Hospital, where we have reviews and initiatives around the clinical support services such as pathology, radiology and pharmacy.

Something that I am personally very keen on is supporting and developing the role of the divisional chairs, clinical directors, heads of departments and non-medical lead clinicians, so they can take on more control and responsibility for performance in their areas, whether it is financial, service or quality standards.

I know from experience that success depends on being able to work alongside clinical leaders to promote quality of services and performance. From what I have seen so far, the structure and the people, I have been very impressed.

#### What is your challenge to staff?

Change is never easy and the current climate in the NHS is very much focused on finding new and more efficient ways of working. However, in terms of St George's Healthcare there is a lot of excellence and even more potential.

The problems that we have are not insurmountable. By working together we can address them and we should take confidence from the many achievements of the last few years, including integration with community services Wandsworth, becoming the centre of a number of clinical service networks and improved patient survey results.

These achievements demonstrate that we have the capacity to meet our targets, but we also need to be honest about those areas where we need to improve and not seek to blame others or make excuses. We need to put our energies into fixing problems where they exist rather than being defensive about the reasons for them. We also need to recognise where we have not met the targets and take action to put that right. If we can do this then we will have full control of our own future.

#### What do you do in your spare time?

Spare time? I try to strike a balance and like to play sports including table tennis and golf. Also, I like to get out to the country at weekends and to go to the cinema when time allows.

# Spotlight on... the divisional directors of operations

This month *the gazette* turns its attention to a busy team working hard behind the scenes to ensure the smooth running of the trust's frontline services.

The divisional directors of operations, (DDOs) Fiona Ashworth, Chloe Cox and Jan Beynon are managed by Patrick Mitchell, chief operating officer. Together they work closely with the divisional chairs, divisional directors of nursing and governance, general managers and clinical directors to provide a link between the executive directors and the clinical teams.

The role of DDO is a varied one, incorporating strategic and operational overviews for patient, financial and clinical activity. On a day-to-day basis, the DDOs work with general managers, clinical directors and directorate teams to help them move forward organisational and local issues in their services.

## Chloe Cox, DDO for surgery, theatres, neurosciences and cancer

Chloe has worked at the trust for three years. She started her NHS career as a general manager after completing the national management training scheme. She works with divisional chair Ken Anson to provide leadership to the five directorates within her division. She said: "I see myself as being there to support the clinical teams. By the nature of my role, I do spend a lot of time in meetings, but I would like to spend more time in clinical areas.

"There have been some exciting projects including the launch of the major trauma centre and hyper-acute stroke unit. But while these are excellent achievements we have got to focus on getting the basics right too.

"Some of our plans for the future are around improving the surgical pathway so we are looking at the pre-operative assessment pathway and the admissions process. We have to make sure that we get our elective patients in efficiently and on time and need to focus on the quality of patient care."

Other key work streams include the productive operating theatre (TPOT) project, which aims to improve the efficiency of theatres. TPOT covers all aspects of theatres life including the environment, the way that patients are scheduled and team working. The project will eventually roll out to all theatre suites at the trust.

There are some exciting plans on the horizon. Chloe explained: "We are looking at how we can work more closely with community services Wandsworth in the way that we provide neurorehabilitation services to offer a much more streamlined service for our patients.

"We have opened a new cancer information centre, funded by Macmillan Cancer Support, on the ground floor of Grosvenor Wing where there will be staff on hand to advise patients and provide access to expert literature and information via the internet."

Chloe is very proud of her team and is quick to acknowledge the role that they play: "My role as a DDO would count for nothing without the people who work hard to support me."

When not working, Chloe enjoys time out with her family including her ten-year-old and seven-year-old children. She said: "We are lucky enough to live close to the River Thames so we relax by spending time on the water. I also keep fit by cycling to work and running."

## Jan Beynon, DDO for medicine and cardiovascular

Jan joined the trust in 2010 in a temporary role before moving on to associate director of operations initially covering cardiovascular services. She has recently been appointed as DDO for the medicine and cardiovascular division.

After gaining a degree in economics politics and French, Jan trained to be a nurse. Her career started at Guys and St Thomas' Hospital and, as well as working briefly in India and Romania as an aid worker, she has also worked in a number of hospitals across London.



**TIRELESS TRIO: (l-r) Fiona Ashworth, Chloe Cox and Jan Beynon**

Jan enjoys working closely with Eric Chemla, divisional chair for medicine and cardiovascular, and her clinical colleagues. Jan said: "Our role is to support clinical teams and we can only do this by working closely with them."

Some significant developments have taken place in the medicine and cardiovascular division over recent months. The South West London Cardiac Centre has recently extended its boundaries to receive primary Percutaneous Coronary Intervention (PCI) patients from Surrey.

Consultant cardiologists now review the patient's ECG using telemetry (technology that allows remote measurement and reporting of information) to inform the ambulance crew whether the patient should be brought direct to St George's Hospital or referred instead to their local hospital.

The vascular surgery department also receives all complex surgery from local hospitals and considerable work has taken place to improve the patient experience and capacity in cardiology with a focus on booking and patient pathways for those who are referred for treatment in the catheter laboratories.

The haematology department is working closely with community services Wandsworth and other stakeholders to review the sickle cell pathway with a view to identifying where care and support for people with sickle cell is best placed.

The service is also looking at provision of the acute oncology service for cancer patients who attend A&E with symptoms of their disease or side-effects of their treatment in order to ensure that they are seen as quickly as possible and appropriately.

In her spare time, Jan enjoys the outdoors walking and cycling.

## Fiona Ashworth, DDO for childrens, womens, diagnostics, therapeutics and critical care

Fiona has been in post at the trust for nearly three years. She has a clinical background and has worked in trusts across the country. Since 1999 Fiona has worked in general management in several organisations across southwest London.

Speaking about her role Fiona said: "As a DDO I work closely with Val Thomas, divisional chair, and Ruth Meadows, divisional director of nursing and governance.

"I also work with clinical directors, general managers and directorates to support them in addressing and moving forward on key issues including governance, patient safety and quality, and of course finance and performance management."

Over the past 12 months the division has had many challenges and also some very positive developments.

In 2010 the trust's paediatric intensive care unit (PICU) was extended to ensure adequate access for children locally, London-wide and beyond. The build of the new breast screening centre is also close to completion enabling patients to have a more 'joined-up' pathway. These schemes were developed and delivered by the clinical teams who deliver the patient care.

Some this division's support services have had to implement changes in ways of working, so that maximum flexibility is ensured to enable trust-wide developments. These changes have benefited patients including stroke and major trauma.

A pathology systems upgrade is currently underway which enables resilience in patient testing and GP results and is essential to the efficient and safe care of patients and supports trust business.

Fiona said: "It is essential that Chloe, Jan, Di Caulfeild-Stoker, divisional chair from community services, Wandsworth division, and I work through cross-divisional issues, opportunities and challenges.

"The team of DDO, divisional chair with the divisional director of nursing and governance must work together with our fantastic general managers and clinical directors if we are to ensure that we meet our trust wide and divisional objectives, with the clinical teams shaping the solutions for patients. Our roles cannot be delivered without their support."

Fiona, who lives near Epsom, keeps herself busy by spending time with her 24-year-old and eight-year-old daughters and relaxes by attending military fairs and auctions, reading and the very occasional visit to the gym.



# New information and support centre for St George's cancer patients



**HELPFUL TEAM:** (l-r) Julia Charsley, Macmillan cancer information officer, Beverley van der Molen, Macmillan Information manager and June Allen, Macmillan lead cancer nurse

## A new Macmillan information and support centre for patients, carers and families affected by cancer open its doors at St George's Hospital in July.

The centre, located on the ground floor of Grosvenor Wing, will provide vital free information and support for anyone affected by cancer, whether they are worried they may have the disease, during treatment or whilst adjusting to life afterwards. The relaxed and informal space will include a main area offering information booklets and leaflets and a quiet room.

There is a large screen with a keyboard so patients are able to access helpful websites, as well two specialist staff, a Macmillan cancer information manager and a Macmillan cancer information officer, on hand to answer any questions. Patients or carers can drop in, without the need to make an appointment.

The centre was funded with money awarded from Macmillan, after St George's Macmillan lead cancer nurse, June Allen, and Beverley van der Molen, Macmillan Information manager made a 'case of need' bid to the charity.

June said: "I'm thrilled that Macmillan has supported the development of this new centre. We know from feedback that our cancer patients have been asking for a dedicated cancer information centre at St George's hospital.

"When you're living with cancer, having the right kind of information and someone to talk to when you need it is essential, as it helps you make informed choices about your treatment and care and takes away some of the uncertainty and fear. By having the Macmillan cancer information centre it offers greater flexibility to our patients and their family at a time when they are feeling most anxious."

The centre is open Monday to Friday, and the hours will vary to complement the clinic times.

# Celebrating nurses' day



**NURSES' DAY WINNERS:** (I-r back row): Briar Cooper, healthcare assistant (HCA) of the Year; Mary Holland, Mentor of the Year. Front row: Alice Ciolino, Midwife of the Year; Linda Smith, Nurse of the Year.

The trust celebrated the contribution of its nurses, midwifery staff and healthcare assistants on Thursday 12<sup>th</sup> May through activities and events to mark International Nurses' Day.

Activities were held across the main trust sites as well as St George's, University of London throughout the morning and included information around patient experience, simulation demonstrations, training and development information and food tasting. More than 100 nurses attended a special event in the afternoon to hear a presentation from special guest Trish Morris-Thompson, chief nurse for NHS London.

The overall *Nurse of the Year 2011* award went to Linda Smith, matron for clinical infections unit, sexual health services and chest services, for being a professional and hardworking role model. Emma Leegood, lead nurse for healthcare services at HMP Wandsworth, received the runner-up award for demonstrating proven benefits to care following integration with community services Wandsworth.

The Healthcare Assistant of the Year 2011 award went to Briar Cooper for contributing greatly to patient care often above and beyond call of duty, and the runner-up award went to Chandradev Gobin for making an outstanding contribution to patient safety within the Wolfson Neurorehabilitation Centre.

Alice Ciolino, practice development midwife, was awarded *Midwife of the Year 2011* for being extremely motivated to increase standards in midwifery. Midwife Shirene Mowatt took the runner-

up for being hardworking, calm and approachable. The *Mentor of the Year 2011* award went to Mary Holland, junior sister at the Wolfson Neurorehabilitation Centre, for being very passionate about her role as practice educator and taking every opportunity to teach help her students. Judith Rowles, clinical nurse specialist at the chest clinic, received the runner-up award for making her students' learning "one of her priorities."

The Nurses League presented their Dame Muriel Powell award to Martyn Huws, charge nurse, McEntee Ward, for his continued work around the productive ward initiative.

The Auntie Lucy award went to matrons Claire Painter and Allison Hempstead for improving patient hydration through piloting the Hydrant; a bottle that attaches securely onto beds, chairs and wheelchairs, giving patients instant access to fluids so they can drink at any time without assistance.

Auntie Lucy was the name given to Lucy Kpobie by colleagues; she was a staff nurse on Gray Ward and gave many years of service to the trust and her patients. She was much loved by her colleagues and her family have generously donated funding in her memory.

Alison Robertson, director of nursing and patient safety, said "International Nurses' Day is celebrated globally and is an opportunity to recognise the hard work and dedication of staff and to celebrate the achievements and successes of colleagues across the trust."



**AUNTIE LUCY AWARD:** Went to matrons Claire Painter (pictured) and Allison Hempstead for improving patient hydration. The award was presented by Auntie Lucy's daughter Isabella (left) and her granddaughter



**CELEBRATORY CAKE:** Caroline Thomas, amputee clinical nurse specialist, cuts into the cake provided at Queen Mary's Hospital in celebration of the day



**MAKING A STAND:** Staff promoted International Nurses' Day in the Grosvenor Wing main entrance at St George's Hospital

## Partnership working combats crime

**St George's Healthcare is helping local police 'fill in the blanks' of assault crimes in a bid to reduce violent offences in Wandsworth.**

The initiative, part of a Home Office and Department of Health joint project for safer communities, has been rolled out nationally over the past five years. It requires the trust to share anonymous data about the precise location of violence, weapon use, assailants and day/time of violence with the Wandsworth Crime and Disorder Reduction Partnership (CDRP).

This information is vital in helping the CDRP build a better picture of violent crimes committed in Wandsworth as a large number of cases treated in A&E are not reported to, or recorded by the police. They will then target areas where crime is more prevalent, or where there is an emerging trend in certain types of crimes or weapons used.

The scheme, which the trust joined in March, is the first of its kind in Wandsworth and aims to improve the safety of local residents and reduce the burden on the trust's emergency department. Partnerships have been found to reduce A&E violent assault attendances by 25-33 per cent and in

the first quarter the trust has already shared more than 100 incidents.

Heather Jarman, consultant nurse in emergency care and assistant clinical director for major trauma, said: "The work with our community and police colleagues will enable the trust to support the crime prevention and public health agenda within our local community."

"The shared information is completely anonymous so ensures those who do not want to report their assault cannot be traced but it will build a picture of the prevalence, types and locations of violence in the area. This enables resources to be targeted appropriately."

Superintendent David Chichen, Partnership and Safer Neighbourhoods, said: "We are very pleased to be working in partnership with the trust and the Wandsworth local authority on this project, as the information will help us address violence hotspots across the borough so we can reduce incidents of violent crime."

"In the long-term, this will mean that there is less drain on trust and the police service as we work together proactively to prevent these incidents from occurring."



**RUNNER-UP: Shirene Mowatt, midwife, runner-up for Midwife of the Year, with Trish Morris-Thompson, chief nurse, NHS London**



**RUNNER-UP: Chandradev Gobin, runner-up for HCA of the Year, with Trish Morris-Thompson, chief nurse, NHS London**



**RUNNER-UP: Judith Rowles, clinical nurse specialist at the chest clinic, runner-up for Mentor of the Year, with Trish Morris-Thompson, chief nurse, NHS London**



**DAME MURIELL POWELL AWARD: presented to Martyn Huws, charge nurse, McEntee Ward, for his continued work around the productive ward initiative. The award was presented by Kath Start, chair of St George's Nurses League**

## National training success in cardiothoracic surgery

**Appointments of cardiothoracic trainees in the United Kingdom, with awards of national training numbers, have been performed through a national selection for the past three years.**

There is an annual interview and appointment process which takes place over two days, where approximately only 20-24 trainees are appointed into the specialty across the United Kingdom. Usually the highest ranking candidates elect to come to London.

In May 2011, three of the highest ranking candidates in the national selection process were from St George's Hospital, where they were completing their core surgical training and/or cardiothoracic fellow training. All three are appointed into London training programmes.

The successful candidates were Mr. Mustafa Zakkar (highest rank in UK), Mr. Benjamin Adams and Mr. Damian Balmforth.

Marjan Jahangiri, professor of cardiac surgery and training program director, South Thames, London, said: "We were delighted with this news since it emphasises the high standard of basic and specialist surgical training at St George's. This will further attract high calibre post-core trainees."



**HIGH RANKING: St George's cardiothoracic trainees pictured with Marjan Jahangiri (front centre)**



# St George's community open day celebrates a Tooting success story

**EDUCATIONAL DAY:** Dr Matthew Szarko, lecturer in medical education, anatomical sciences, explaining the anatomy of the eyes to a young visitor

**Around 2,000 people enjoyed St George's Healthcare NHS Trust and St George's, University of London's first community open day, which took place on Saturday 18th June.**

The day was officially opened by the Mayor of Wandsworth Cllr Jane Cooper, while the Rt Hon Sadiq Khan, MP for Tooting, was also on hand to lend his support.

Visitors were able to go on tours of the hospital to get the inside view of CT body scanning and state-of-the-art robotic surgery. Staff from across the hospital and university were also available on over 50 stands to showcase key services, provide advice on healthy living, and offer information about healthcare career opportunities.

University students provided demonstrations of healthcare skills, while researchers provided an insight into the working science of the human body and demonstrated aspects of their cutting-edge medical and health sciences work.

As well as all the science and healthcare activities, family entertainment included juggling lessons, face painting, and street theatre performances.



Professor Peter Kopelman, principal of St George's, University of London, said: "It was a memorable occasion that showcased the past achievements of the hospital and university, the current close partnership and future ambitions.

"There was great interest from visitors in the stands and exhibitions on show. It was a privilege to be able to show people what we do here, as well as give them the chance to experience practical aspects of medicine and healthcare themselves."

**GRAND OPENING:** (l-r) St George's Healthcare NHS Trust chair, Naaz Coker; the Mayor of Wandsworth, councillor Jane Cooper; Tooting MP, Sadiq Khan; and St George's, University of London principal, professor Peter Kopelman

Naaz Coker, chair of St George's Healthcare, added: "I thank everyone who came along, and look forward to welcoming back the community to future events to celebrate the 'greater St George's'."



**MITIE PEOPLE:** MITIE's mandatory infection control training means 100 per cent of MITIE staff have successfully gained an infection control certificate

## Developing MITIE people

**MITIE, the contractor that provides domestic and catering services to St George's Hospital, has made great strides in improving the cleaning and catering standards across the trust since 2009.**

MITIE staff are offered specialist, certificated, training by dedicated trainers; Malcolm Mitchell and Mary Ridge, from The British Institute of Cleaning Science (BICSc), and all new starters are required to complete their BICSc accreditation before working unsupervised. MITIE's mandatory infection control training means 100 per cent of MITIE staff have successfully gained an infection control certificate.

Along with more formal training, MITIE use "toolbox talks" designed to impart knowledge in key areas, particularly where there may be a particular issue, that staff need to react to.

**MITIE** has identified staff with the necessary skills or qualities to exemplify MITIE's best practices. In addition to a comprehensive induction, all new starters have a period of one week where they are "buddied" with a skilled member of the MITIE team in order that they can put their training to use in a practical setting. This means that at no point are unskilled staff required to work alone in the hospital.

## Supervisor development

Supervisors provide a crucial link between the trust and the MITIE team. It is important to provide training and support from the earliest stage. Recognising the important part that supervisors play in the success of the business and investing in their development helps ensure a steady stream of competent managers to support MITIE's work at St George's.

MITIE holds supervisor workshops on a monthly basis at St George's Hospital – forums which encourage supervisors to feed back on issues affecting their daily work. During the session supervisors are given an opportunity to raise ideas and concerns. Focus topics for meetings so far have been team-working, effective communication, and equality and diversity.

MITIE's supervisor development programme (SDP) is an interactive course, designed to help staff develop on the first rungs of the management ladder. The programme comprises of a three day supervisory management skills course, completion of online learning, and attendance at four human resources workshops.

Finally delegates complete an assessment which gives them the opportunity to identify the responsibilities in their role as a supervisor, give feedback on their performance and identify ways of improving performance by applying their training to a real-life scenario.

Once the first stage is completed, delegates are offered the opportunity to study for the Institute of Leadership and Management's (ILM) level three certificate in first line management.

## Public pick rose for new breast unit

**A public campaign to name a new breast diagnostic unit at St George's Hospital, Tooting, attracted nearly 400 votes, of which more than 50 per cent were for the "Rose Centre."**

The Rose Centre, due to open in October 2011, will be named after breast cancer research pioneer Rose Kushner. As a stand-alone facility, the centre will provide patients with a modern, high-quality and efficient screening and diagnostic service, in a calm and caring environment.

St George's Hospital is a regional cancer centre and its clinical results for breast screening are among the best in London. The hospital is also host to the South West London Breast Screening Service and St George's National Breast Screening Training Centre.

Ros Given-Wilson, medical director at St George's, said: "Early detection of breast cancer is the key to successful treatment and the Rose Centre will provide all the tests patients need in one place at one time, and give them their results quickly."

## HOPE exchange

For the third year running, the trust took part in the international exchange programme organised by HOPE, the European hospital and healthcare federation. The HOPE exchange programme encourages hospital and healthcare professionals with managerial responsibilities to take part in the programme to learn about hospital systems and healthcare providers in other countries.



**EURO EXCHANGE:** (l-r) Christian Queckenberg from Germany; Conni Christiansen from Denmark and Pedro Manuel Pereira Marques from Portugal



**KIND GIFT:** (l-r) Henry Marsh, neurosurgery consultant; Janet Street-Porter and Francis Johnston, neurosurgery consultant; with the family of Stephen Charlton

## AMW balconies opening celebrated

Media personality Janet Street-Porter officially opened the newly refurbished Atkinson Morley Wing balconies at a reception held on 15<sup>th</sup> June. A portion of the funds for the refurbishment of the balconies were kindly donated by the Charlton family, whose son and brother, Stephen Charlton, was a patient at St George's for many years before sadly passing away in 2003.

The balconies have created a peaceful area in which patients can enjoy an outside space. Potted plants and flowers add colour to the space thanks to the handiwork of Bob Holdawanski, trust gardener.

Henry Marsh, consultant neurosurgeon, said: "We are lucky with the wards in the Atkinson Morley Wing, as there is the potential for direct access to the outside world for our patients.

"Thanks to the generosity of Stephen Charlton and others, we have been able to convert the balconies into this very attractive roof garden. It is impossible to overstate how well received this has been both patients and staff."



### Grove is officially opened

The newly refurbished St George's Grove was officially opened in May. The ceremony was attended by St George's staff from nursing, facilities and operations as well as Thames Valley Housing (TVH), St George's Healthcare NHS Trust and Willmott Dixon Housing.

The Grove comprises 557 affordable rental homes for key workers and 78 shared ownership apartments. The development was provided in partnership between TVH, the trust and Willmott Dixon Housing. The key worker homes suit a variety of needs and budgets, ranging from single rooms with en-suite shower and shared living/kitchen facilities, to two or three

bedroom family apartments. They are available to employees of St George's Healthcare and other local key workers.

Neal Deans, the trust's director of estates and facilities, said: "Previously the Grove, which is a 15 minute walk from the hospital, had 500 individual rooms in shared flats for staff, but the blocks were dull, grey and dated. This exciting redevelopment has now transformed the Grove into modern flats and shared ownership properties with affordable rent for all St George's staff."

To find out further information about the Grove accommodation please contact 0208 6070757 or [stgeorges@tvha.co.uk](mailto:stgeorges@tvha.co.uk)



**FAMILY CARE:** Lyndsey Hookway and Bobbie Everson

### Family centred care (FCC) coordinator for neo-natal unit is a first

First Touch, St George's neonatal unit charity, and Bliss, the special care baby charity, have joined forces to create a new and innovative position at St George's Hospital to provide care for families of premature and sick babies in southwest London.

The charities are working with the trust and the South West London Perinatal Network to ensure the very best care is delivered to parents at what is an extremely challenging and difficult time.

The UK-first family centred care (FCC) coordinator post is being funded by the two charities for an initial term of three years. The coordinator will be based on the neonatal unit and will work with families to provide information and support; ensuring that the neonatal unit has consistent, high quality family-centred care. Caring for a premature or sick baby's entire family is widely recognised as a crucial part of their overall clinical care, making a positive contribution to the long-term health and wellbeing of the child.

The full-time post is shared between Bobbie Everson and Lyndsey Hookway.

Doris Jackman, head of nursing newborn services and lead nurse SWL Perinatal Network, said: "We are thrilled and excited about this new initiative. The FCC coordinator will make a huge difference to the care we can provide to babies and their families. The neonatal intensive care environment can be very overwhelming for parents and the FCC coordinator will help promote early maternal-infant attachment through support, communication and education. The role will complement the counsellor's work in helping parents resolve the emotional crisis of having a preterm or sick newborn baby on a neonatal unit."

## Nursing response team provide 24/7 care

The nursing response team are improving patient care and experience through the 24 hour cover service they provide.

The team assist areas that are short staffed and also cover escalation areas that are opened when there are bed shortages.

The team was first established in November 2009 and are managed by advanced nurse practitioners Siobhan Greene and Gary Lloyd, and nurse practitioner Linda Philpott. Siobhan said: "The aim is to have staff that can be deployed to any area and then moved if necessary; thus responding to changes in the hospital status."

The main areas that the response team cover include A&E, acute medical units and both general and speciality medical and surgical wards. They have also been deployed to cardiac, neuro and paediatrics. This exposure to a wide variety of ward areas is seen as a positive aspect of the role as the nurses are able to develop a range of different skills.

The team of nurses are highly competent in a number of areas and have undertaken training such as cannulation, mentorship, MEERKAT, IV drug administration and male catheterisation to prepare them for any situation they may find themselves in.

Nurse Sarah Soares has been part of the team since March 2010. She said: "I decided to join the team because I wanted to gain experience in all fields of nursing. I enjoy going onto different wards and helping out colleagues when they are short staffed or when they have a heavy workload. It's nice to lend a helping hand."

### Regional fetal medicine day

St George's Hospital played host to a regional fetal medicine day in May. The aim of the day, attended by 59 delegates, was to attract all the consultants and fetal medicine midwives from the trust's referring hospitals to ensure good communication, agree unified protocols to streamline care and facilitate research collaborations.

The trust's fetal medicine unit is the second largest nationally and acts as tertiary referral centre for southwest London, in addition to an increasing number of hospitals from further afield.



**BEST PRACTICE:** The 23-hour team showcased best practice at the British Association of Surgical Oncology conference and AGM in May

## Leading the way in shortening patient stays

**An innovative change in the way cancer services are provided at St George's Hospital, Tooting, means patients can go home sooner after surgery.**

The trust is one of only 13 pilot sites in England working in collaboration with NHS Improvement to take forward the day case or overnight stay discharge model for women receiving breast surgery.

This innovative approach means that many patients are able to have surgery and return home on the same or next day. This is suitable for the two out of three breast cancer patients who do not need complex reconstructive surgery.

Dibyesh Banerjee, consultant oncoplastic breast surgeon, said: "Patients who come for breast surgery tend to be aged between 50 and 60 and are usually fit and well, so there is no medical reason why they should not go home on the same day.

"Discharging patients earlier reduces inpatient stays and improves patient recovery. It also helps patients avoid deep vein thrombosis and hospital acquired infections, such as MRSA, which are often associated with increased length of stay."

In the past patients might have been in hospital for up to six days, receiving pre- and post-operative assessments and aftercare, before they were allowed to return home. Under the new model, patients are communicated with well in advance of their operation in an extended pre-operative assessment and their aftercare is provided by community nurses in their own home.

The latest data shows that St George's Hospital is leading the way for southwest London, treating 83 per cent of eligible patients under this model. None of the patients discharged within 23 hours were readmitted within 30 days

Mr Banerjee stresses that patient safety is always paramount: "Patients are only discharged if it is safe for them to go home. Once they get home they are not left to their own devices – they are supported by a named Macmillan breast care nurse or district nurses in their own homes."

Best practice by St George's was showcased by NHS Improvement Nationally at the British Association of Surgical Oncology conference and AGM 17<sup>th</sup> May 2011.

## News from St George's Hospital Charity

**In the last six months, St George's Hospital Charity has awarded in excess of £2m in grants to St George's Healthcare.** These grants have been for capital projects and non-capital projects alike and have been awarded because the Trustees of the Charity aim to raise and use charitable funds to bring real benefits to patients and staff in areas where the NHS Trust is not able to make grants or cannot stretch its budget.

These grants for capital projects include:

- £500,000 for the relocation and refurbishment of the Simulation Centre, including £150,000 for a high-fidelity mannequin
- £200,000 to relocate the chest clinic into Lanesborough Wing outpatients from its current location on the perimeter road.
- £82,000 to relocate and refurbish the bereavement services department away from its current location in Knightsbridge Wing to the heart of the Hospital

A number of non-capital grants have also been awarded. These include:

Learning disability services received £10,000 over two years to support the pioneering work of Jim Blair to improve the hospital experience of people with learning disabilities and their carers.

The palliative care team was awarded £65,000 to purchase syringe drivers. These are being used by terminally ill patients to manage their pain relief at home, at the end of their lives. This funding has enabled St George's to deliver the standard of care that gives patients choice, supports dignity and makes a significant difference to individuals.

Avid readers of the Gazette will already know that St George's Hospital Charity funds the living our values staff awards. Individual and team winners receive £50 and £150 vouchers respectively in the categories of excellent, kind, responsible and respectful.

All capital and non-capital bids are co-ordinated by Sharon Welby. Forms are available electronically from Liz Woods in the Fundraising Office.



## London Marathon

**This year's St George's Hospital Charity London Marathon runners raised funds and awareness in support of teams including neurological ICU, cardiothoracics, paediatrics, Richmond Ward and the trauma and orthopaedics team.**

We are delighted that the total raised by our runners was more than £12,000! Huge congratulations to Chris Goldsmith, Hannah Moorhouse, Clare Hillery, Laura Edwards, Alan Nelles, Beth Long and Susan Menzies and thanks to the whole team for running for St George's Hospital Charity.

For a place in the St George's London Marathon Team for 2012 please email [giving@stgeorges.nhs.uk](mailto:giving@stgeorges.nhs.uk) or pop into the Fundraising Office to request an application form.

## Flying for Full Circle

**Up hill, down dale, twisting country roads and a forecast of torrential rain were just some of the challenges for Team Full Circle in the May Flyer Sportive on Sunday 8th May 2011.**

Organised by the South Western Road Club (SWRC) the May Flyer sportive, held in aid of Full Circle Fund for the second year, comprised two seriously tough courses – an 86km route and a longer 146km route.

Several members of Team Full Circle completed the sportive in exceptional times – Alan Brunnsden, Vero Bringlow, and Dr Fenella Willis achieved Gold times in the 146km route, and Chloe Hall won Gold for fastest female in the 86km course.

Full Circle Fund supports children and adults with life threatening conditions at St George's Hospital, London. Team Full Circle raised more than £4,000 to fund a part-time therapist for a year.

To support the team, visit [www.justgiving.com/teamfullcircle](http://www.justgiving.com/teamfullcircle), [www.fullcirclefund.org.uk](http://www.fullcirclefund.org.uk) or call 020 8725 5503.



**GENEROUS DONATION:** (l-r) Ray Conway; Paul Gillespie, orthopaedic consultant; Marilyn Cross and Carole Caddick, Mrs Conway's daughters (front left); with the trauma and orthopaedic therapy team

The Conway family has generously donated more than £1,300 to purchase an Anatome transfer chair for the trauma and orthopaedic wards in memory of their mother, Hilda May

Conway, who was cared for on Gunning Ward.

The chair is a tilt-in-space and a recliner chair; used for patients who are unable to sit on their own to do so safely.