

the
new
nurse

February 2010
issue 16

In the spotlight: community nursing



- 2 Dialysis unit brings care closer to home
- 3 A word from David
- 3 South London HIEC bid successful
- 4 Hole-hearted
- 4 Welcome Sanjay Sharma
- 4 Joined-up thinking will benefit Wandsworth patients
- 5 New clinical director for A&E
- 5 New technology delivers clearer scans in seconds
- 6 New Trust website
- 6 March deployment date for iCLIP
- 7 Vaccination heroes
- 8 In the spotlight
- 9 View from the top
- 10 Foundation Trust: Q&A
- 11 10:10
- 12 PM visits St George's
- 12 A&E nurse visits No 10
- 12 Stop smoking drop-in clinics
- 13 Clean sweep
- 13 Welcome news
- 13 V&A delivers new collection
- 14 Appraisal: Have you had yours?
- 14 Training leaders
- 14 Chief Executive congratulates One Team Service Partners
- 15 Health and safety
- 16 Fundraising news

With thanks to Mark Evenden, Media Services, St George's University of London, for photographic services.

Front page picture shows Sam Prigmore, Respiratory Nurse Consultant, with patient Pat Osmond.

the gazette is written and published by the Communications Unit. The opinions expressed do not necessarily represent those of St George's Healthcare NHS Trust. The next edition will be published April 2010. If you are a staff member with a story for **the gazette**, please email: communications@stgeorges.nhs.uk



Amor Marasigan (left), Clinical Manager for the north Wandsworth satellite dialysis unit, with Karen Jones, dialysis nurse

Dialysis treatment is moved closer to home

A new satellite dialysis unit has opened in Battersea for St George's renal (kidney) patients so they can get treatment closer to home.

The centre, run by Fresenius Medical Care Renal Services, operates in addition to the renal department at St George's and serves patients from north Wandsworth and surrounding areas. St George's renal consultants, specialist nurses and dieticians visit their patients at the unit on a regular basis.

The unit has 18 individual dialysis stations which come with adjustable electronic chairs and their own flat screen TV. A wireless network is also available which patients can access for their own computers. Consulting rooms are available for outpatients and other individual patient consultations.

Mattias Persson, Lead Nurse for Haemodialysis Unit, said, "Quality of life is of prime importance when treating patients with long term conditions. This new centre brings huge benefits to patients who not only enjoy a shorter journey to receive their dialysis treatment away from the hustle and bustle of the main hospital, but also the state of the art facilities."



The unit will be officially opened on February 16th by Naaz Coker, Chair of St George's and Patron of St George's Kidney Patients' Association. It is one of a handful of units set to open to increase the choice available to people who need dialysis in south-west London and Surrey.

South London HIEC bid successful



South West London
Academic Health and Social Care
Network

NHS, education and social care organisations in south London have become one of only 17 networks across England to receive government funding to improve healthcare delivery and education in the region.

The Department of Health announced successful HIEC applications in January following a rigorous selection process, including a formal interview by the National Award Panel chaired by Sir Alan Langlands.

The collaboration, made up of around 30 organisations, forms the South London Health Innovation Education Cluster (HIEC) - one of the new government funded networks aimed at delivering high quality patient care through better trained clinicians and faster translation and adoption of research and innovation.

South London HIEC brings together members of south London's two major healthcare networks – the South West London Academic Health and Social Care Network and King's Health Partners Academic Health Sciences Centre. This includes all south London's primary care and mental health trusts, 17 NHS hospitals including St George's, the London Ambulance Service and the local Health Protection Unit, as well as six universities, further education providers and social care teams.

Members of the HIEC will work together to improve patient care and local health services by more rapidly delivering the benefits of research and innovation directly to patients. Early work will include a review of current education and training aimed at health professionals across south London. This is expected to lead to the introduction of new programmes, as well as enhancements to existing training courses.

The South London HIEC has identified four areas to focus on initially: mental health; infection prevention and control; diabetes, and stroke.

The new HIEC will be jointly led by the South West London Academic Health and Social Care Network and King's Health Partners Academic Health Sciences Centre.

Commenting on the successful bid, St George's Chief Executive, David Astley, said: "This is an exciting development for South London, as the diversity of this region brings unique challenges to local services. The collaborative solutions of researchers, doctors and nurses will be put into practice by the HIEC to deliver real benefits to local people."

A word from David

“ Welcome to the first **gazette** of 2010. This edition highlights several exciting developments which will happen during this year. There is news of our planned integration with Community Services Wandsworth, which will increase our range of experience and expertise and enable us to improve patient pathways. Our major IT upgrade, *iCLIP*, will go live from the end of March and I know many of you will have received training for this. 2010 is, of course, a critical year for our journey towards Foundation Trust (FT) status and in this issue of **the gazette** our Chair, Naaz Coker, answers questions from Staff Side about FT and what it will mean for staff and patients.



2010 is also a year when we have pledged to reduce our carbon footprint by 10 per cent. St George's has been committed to carbon reduction for a number of years. In joining with the national 10:10 campaign, we are supporting the idea of taking positive action against the climate change and encouraging others to do the same.

Colleagues will not have failed to notice that this is an election year. Whatever the outcome, there will inevitably still be pressure on public sector finances. The NHS will be challenged with delivering high quality services for less money. I am confident that St George's is well placed to meet this tough challenge but it certainly won't be easy. Whatever the future may hold, we will continue to develop improved services for our patients. The new dialysis unit in north Wandsworth is an example of the changes that are being made.

Finally, I would like to thank those who made outstanding efforts to get to work despite January's snow and ice. While Tooting only saw a few inches of snow, heavier falls occurred outside London and affected the travel of many staff and patients. The winter overall has been extremely challenging with high numbers of emergency admissions. I am grateful for the support of colleagues across the Trust in helping to ensure our patients still continue to receive high standards of care.”



Hole-hearted



A live procedure to close holes in a patient's heart was the highlight of a December conference hosted by St George's.

Atrial Septal Defect (ASD) is a heart defect, which is present at birth, where the wall that separates the upper heart chambers (atria) does not close completely.

The aim of the live demonstration was to teach cardiologists about advanced techniques to close these holes in the heart using catheters and closure devices. Doctors from Europe, the Middle East and Asia attended the conference, including two world-renowned cardiology experts. St George's was selected as the host site due to its reputation of clinical excellence in this field and superb catheter laboratory facilities provided in the Atkinson Morley Wing.

Dr Stephen Brecker, Consultant Cardiologist and Clinical Lead for the catheter labs, said: "We were delighted to have been selected to host this course. Our reputation and facilities are second to none, but what makes this type of live demonstration course possible are the people who work with us in the catheter labs. They are a dedicated group of professionals who have the highest clinical standards."

Welcome to Sanjay Sharma

Professor Sanjay Sharma has been appointed Academic Consultant Cardiologist for St George's.

Previously consultant cardiologist for the charity CRY (Cardiac Risk in the Young), Sanjay has an international reputation for teaching and tutoring junior staff to enable them to pass their MRCP (Membership of the Royal College of Physicians) UK examination.

Sanjay is no stranger to St George's; he studied at St George's, University of London and also established initial links with CRY at the Trust. St George's was the first hospital in the UK to develop a family screening clinic which screens whole families after a tragic young sudden cardiac death. Sanjay will build on this service and is keen to establish St George's as a nationally recognised cardiomyopathy service. Cardiomyopathy is a serious condition in which the heart muscle becomes enlarged and inflamed.

Sanjay also hopes to develop the first sports cardiology unit in the UK. In addition he would like to establish a research programme to



evaluate the effectiveness of screening young people for conditions which make them vulnerable to sudden cardiac death. He will continue his teaching role and will support student and post graduate teaching, with particular emphasis on the MRCP examination.

Sanjay says: "St George's is historically recognised as a major force in inherited cardiomyopathies. I am hopeful that my appointment will be pivotal in establishing St George's as a nationally recognised centre in inherited cardiac diseases. This will include the assessment of individuals with cardiomyopathies, ion channel diseases and evaluation of families of victims of sudden cardiac death syndrome."

Joined-up thinking will benefit Wandsworth patients

Plans to integrate St George's with Community Services Wandsworth are being developed with the aim of bringing improved services to local patients.

St George's has been chosen by NHS Wandsworth as the preferred organisation to integrate with their community services. This is likely to include district nursing, community specialist nursing, school nursing and many of the services provided at Queen Mary's Hospital, Roehampton. The aim is to improve patient experience and outcomes by linking community care and hospital care even more closely. This would mean building on existing partnerships and strengths, and redesigning services around the patient.

Integrated clinical teams could provide complete patients pathways spanning community and acute care. This should help reduce avoidable admissions into hospital, and reduce the time inpatients have to spend in hospital. It should also help to improve local access to outpatient and diagnostic services by moving more services off the acute hospital site and into the community.

Any change is subject to a formal 'transaction' process being completed with final approval from the boards of St George's, NHS Wandsworth and NHS London. At the point of integration, St George's would welcome around 1,000 new staff.

David Astley, Chief Executive, said: "This is

an exciting opportunity to improve patient care. Staff from across the Trust will be involved in preparing for the safe integration of hospital and community services.

Di Caulfeild-Stoker, Chief Operating Officer of Community Services Wandsworth, said "By joining our two organisations together we can make real differences to patient pathways and experiences and we will be able to share our knowledge and skills between our staff. When acute and community services work hand in hand there are some real benefits for patients and the partnership will give us the opportunity to look at how we change and improve services in the future."



New clinical director for A&E

Phil Moss, the new Clinical Director for the Emergency Department, joined St George's in November at the start of A&E's busiest time of year.

Phil has extensive experience in emergency medicine having previously worked for Newham University Hospital and the Royal London Hospital as a consultant in emergency medicine. Phil has also worked for the Helicopter Emergency Medical Service (HEMS) as a flight registrar.

Speaking about his appointment, Phil said: "This is an exciting time to be joining St George's with the development of the major trauma centre as well as the hyper-acute stroke unit at the hospital's main site in Tooting. I look forward to working with colleagues to develop these services in order to ensure the best possible care for patients. I will also be working to strengthen St George's role as a major player in the emergency and urgent care landscape of southwest London."

Welcoming Phil on board, Mike Bailey, Deputy Chief Executive and Medical Director, said: "As Clinical Director for the Emergency Department, Phil is involved in the clinical, operational and strategic decisions that take place around A&E. He is an accomplished professional who brings a wealth of emergency medicine knowledge and experience to this role."

New technology delivers clearer scans in seconds

St George's is preparing for the launch of its major trauma centre and hyper-acute stroke unit by becoming one of only a handful of Trust's in the UK to install an advanced CT scanner.

The SOMATOM® Definition Flash CT scanner carries out the fastest available scanning in CT, and can image a person as tall as six feet six inches in less than five seconds.

Two x-ray tubes simultaneously revolve around the patient's body while the patient lies on a couch inside the scanner. This technology allows a scan to be performed much faster and to a higher quality than using traditional CT scanners. The technology also benefits patients who may be concerned about undergoing a scan, such as children, intensive care patients and those who have suffered a major trauma.

A complete scan of the whole chest takes just one second. This means that patients admitted to hospital with chest pains can undergo an early CT scan to identify potential heart disease and reduce the need for overnight stays or invasive tests.

St George's has a long standing affiliation with the CT scanner; the world's first prototype was installed in Atkinson Morley Hospital. The first

human patient CT scan was undertaken on 1 October 1971, by Dr James Ambrose, a consultant radiologist. Some staff members who worked on the first commercial version of the scanner are still employed in the Trust's neuro-radiology department.

Dr Johnny Vlahos, Radiology Consultant, said "We hope that the provision of extremely fast state-of-the-art imaging for our sickest patients will further improve the clinical outcome of these patients. Reducing the length of stay and unnecessary hospital admissions will also have beneficial effects for the availability of imaging services for all other patients attending St George's."

The scanner will be located in St James' Wing, adjacent to A&E, which means that emergency patients can be transferred quickly and easily when need be.

"At St George's we are proud of our history and our contribution to the development of CT scanning technology. The combination of new hardware technology and our expert staff ensures that St George's remains at the forefront of imaging technology and innovations that benefit the people of south-west London and beyond," said Chief Executive, David Astley.

A CT scanner of the type which is now operational in St James' Wing



*new look website



Pages from the re-vamped website

New Year brings in new Trust website

January saw the launch of St George's new website www.stgeorges.nhs.uk which has been completely overhauled by staff in the communications team. Several new features have been introduced to provide patients and the public with better access to information about St George's.

The site benefits from a new navigation, which is easier for users, providing improved accessibility to information and clearer presentation. It also allows greater flexibility, meaning that content for each department can be developed beyond the basics that were hosted on the old site.

Fresh photography has been included and a new area has been developed to host more sophisticated information, which will allow the Trust to cater for specialist audiences. The *Healthcare Professionals* pages, designed to provide information to GPs and other healthcare professionals are work in progress. This section currently hosts information about courses and day seminars for GPs, as well as referral guides and *GP News*. The area also includes St George's tracheostomy guidance and a full contact list of appointed consultants.

"The new website is a major development and represents St George's as a modern, leading-edge healthcare provider," says Director of Communications, Jean-Pierre Moser. "Having conducted a survey of consultants, patients groups and GPs in 2009, we knew that changing the look and feel of the website would have a positive impact. This was a major project delivered using the skills and knowledge of our in-house team."

"The *Healthcare professionals* area can host microsites to cater for niche audiences, such as consultants, nurses, GPs and medical students," says Jean-Pierre. "This is an important development for the website and will offer services the opportunity to present information to their peers in a professional online environment under the St George's banner."



For more information about www.stgeorges.nhs.uk, its new feature areas, or to contribute content, contact the communications team on ext 5151, or email communications@stgeorges.nhs.uk

March deployment date for



At its December meeting, the Board endorsed a new deployment date for the iCLIP programme, of **29th March**. The iCLIP project team is working hard to complete all essential project activities so that the deployment of the new electronic records system runs as smoothly and efficiently as possible.

The new March date has allowed the iCLIP team to run more training, demonstrations and dress rehearsals, to ensure that all staff are confident with the new systems and feel fully prepared for deployment.

"It is vitally important for the success of the programme that we maintain the momentum generated over the last five or six months, so staff should continue to prepare," said Patrick Mitchell, Chief Operating Officer.

Details of iCLIP training schedules have published on the iCLIP training pages of the intranet and staff should continue to book their places if they haven't already done so.

Vaccination heroes

Latest figures show that more than 2,400 frontline staff at St George's have taken up the opportunity to be vaccinated against swine flu.

The programme of vaccination began with those working with the most vulnerable patients but, thanks to good supplies of swine flu vaccine, it was extended to all clinical staff working with patients. Seasonal flu vaccinations were offered at the same time and St George's has so far been able to double the numbers of staff receiving this compared to previous years.

A team of 14 vaccinators (specially trained nurses) were released from their normal duties. This team vaccinated as



The Pre-pack team: Helen Arnold, Mavis Hewlett, Magdalena Bauyon, Sharon Canhye, Imran Latif, Alma Monk with Vinodh Kumar. Absent is Sandra Browne



David Astley with vaccinators Jamillah Mwariko, Akua Kyei, and Cesar Lacuna

many as 100 staff a day during the first seven weeks of the programme before Occupational Health took over the running of the clinics in mid-December. David Astley, Chief Executive, offered a personal thank you to vaccinators when he visited the clinic in early December.

He said: "The vaccination programme is crucial in protecting our patients and staff from swine flu. I'm grateful that so many colleagues recognised the importance of vaccination as one way to avoid spreading this infection."

Pharmacy staff at St George's played a key part in the vaccination programme. Staff members were on the Vaccination Steering Group, which led the implementation of the Trust's programme. The Pharmacy also had an important role in distributing the vaccine to healthcare providers across southwest London.

Vinodh Kumar, Assistant Chief Pharmacist (Technical Services), said: "The swine flu vaccine comes as a multi-dose vial with each box of 50 vials

vaccinating 500 patients – much more than one GP practice can use or store. Therefore, we have been packing them down into packs of one, three or five vials along with the relevant leaflets and information for GP surgeries."

"Staff have worked evenings and weekends to get the first batches of vaccines out and we continue packing down vaccines as GPs are now vaccinating children under five. At the beginning of the swine flu pandemic last year, we were also involved in packing down Tamiflu, the anti-viral pills, and labelling products with instructions for use," he added.

As a Medicines and Healthcare products Regulatory Agency (MHRA) licensed facility, St George's Pharmacy re-packs medicines for healthcare providers across the UK. Within the Trust, the same team also ensure individual patient packs of labelled medicines are available at the point of need, for example, in A&E.

Occupational Health, located on the Perimeter Road, is offering a daily drop-in clinic for staff swine flu vaccination: Monday to Wednesday, between 8.30am and 1pm, and Thursday and Friday, between 10am and 4pm.

Meet Sam Prigmore, providing expert care in the heart of the community

“In my role as Respiratory Nurse Consultant I care for a range of patients from teenage asthmatics to elderly people with respiratory problems. Around 60 per cent of my clinical work is seeing patients at the Chest Clinic but around 40 per cent of patients I see in their own homes.

The Respiratory Nurse post was established in 1992 and has grown considerably. It was set up to provide care at home to people who were frequently coming in and out of hospital, in order to avoid hospital admissions. The original funding came from a healthcare bid to “add years to life and life to years”, in other words to prolong life and improve quality of life for these patients.

“There is now a team of community-based British Lung Foundation respiratory nurses for NHS Wandsworth and Community Respiratory Nurses for Merton and Sutton Primary Care Trust, who visit and monitor these patients at home. I jointly manage and supervise the Wandsworth respiratory nursing team with Jo Jackson, Head of Intermediate Care at NHS Wandsworth.

“My role now involves seeing patients with the most complex problems, often those requiring ventilation at home or those with other health problems which complicate their condition. The majority of these patients are over 60 because this is the age when problems become serious. This group would include anyone whom the community team is concerned about and after any patient’s admission into hospital following their discharge home. I monitor them, for example by checking for signs of infection or deterioration in their oxygen levels which may result in an admission to hospital, if not acted on promptly. I also teach people how to care for themselves and discuss the treatment they are receiving. This might include



Sam visits patient Pat Osmond

advice about using their inhalers or ventilator, or giving up smoking. It may also include discussing how to make difficult decisions about care at the end of life. This group is usually happy to follow treatment and advice from a health professional but they can be forgetful, especially about remembering to take their medication. Their families and carers often need a lot of support too.

“The role also involves liaising with other allied health professionals - physiotherapists, social workers and occupational therapists - and with palliative care services at Trinity Hospice and St Raphael’s, to ensure the patients receive the most appropriate interventions and support.”

“One area of my work at the Chest Clinic is providing care for asthmatic adolescents. I also see asthmatic patients as Outpatients, following attacks which have resulted in an admission to hospital. Usually this is in the clinic but I have been known to track people down at home if they do not attend, especially if they are at risk of being re-admitted with a life-threatening asthma attack. I also provide a service for asthmatic adolescents. I see them initially in a joint clinic run with Ann Christopher in Paediatrics. This provides a bridge for

young people from paediatric to adult care, as the change can be daunting for them.

“I qualified in 1987 and specialised in cardiothoracics, working at the Royal Brompton Hospital. I came to St George’s in 1989 and worked on a respiratory ward, and in 1992 I joined the Chest Clinic as a respiratory nurse specialist. My academic study includes post-basic courses in cardiothoracics, asthma and allergy, and I have a BSc in Primary Care Nursing and an MSc in Cardio-respiratory Nursing. I became a Nurse Consultant in 2004. This was an ideal and natural step for me as I wanted to stay in clinical practice and not go into a management role. This role combines clinical expertise, leadership and also education; I lecture at Imperial College once a fortnight.

“I am also working with the Department of Health in developing a clinical strategy for patients with Chronic Obstructive Pulmonary Disease (COPD), a smoking-related disease which is underdiagnosed. It cannot be cured but early management can help. I chair the Respiratory Working Group with NHS Wandsworth looking at patient pathways for patients with asthma and COPD, and I’m a Trustee of the British Lung Foundation. I really enjoy my job but there are a lot of aspects of it to juggle!”

In April 2009, clinicians Eric Chemla, Val Thomas and Ken Anson were appointed as Divisional Chairs, a new role for the Trust.

This month Eric Chemla talks to *the gazette* about his role as Divisional Chair for the Medicine and Cardiovascular Division and Consultant Transplant Surgeon.

What is the role of a Divisional Chair?

→ It is taking on a role which was previously part of the Medical Director's remit. The Medical Director's role had previously included clinical governance and medical management. However, St George's is a big organisation; and the role of overseeing clinical governance is enough of a job in its own right.

Divisional Chairs now undertake the managerial role and oversee issues like business planning, consultant's job planning, watching financial spend, bed planning, or disciplinary issues. It is quite hands-on in terms of running the Division. Issues recently have often been related to winter pressures, for example, looking at ways to organise ward rounds to ensure that patients who are ready for discharge can go early in the day or looking at areas where there could be nurse-led discharge.

I work with five Clinical Directors who lead A&E, Acute Medicine, Specialist Medicine, Renal and Haemo-oncology and Cardiovascular care groups. I meet with them regularly and also with the other Divisional Chairs, Val and Ken.

How do you balance this role with your role as a Consultant Transplant Surgeon?

→ I am busy but it is very interesting so I can't complain. I still have four operating lists a week and two clinics. It has meant developing new ways of working. However, I think it is important

that clinicians have a role in management. It helps stop that 'them' and 'us' thinking: managers and doctors at opposite ends. I can talk to consultant colleagues because I understand their perspective – they are concerned about their patients. For example, they have to consider whether to see the sickest patient first, or the patient who can be discharged so then there is a bed for another patient. I can hopefully engage with people and have an informed discussion. I find most of my consultant colleagues are very reasonable; they are clever people and understand that there is a wider perspective; not just their patient's interests, but what is in all patient's best interests.

Tell us about your experience of St George's?

→ I came here from France in 2002 and this was my first job in the UK. I would not go back now. I have been offered opportunities here to develop which I do not think I would have had in France.

When I came to see the unit before my job interview, I was asked what I would do to improve it. I said there needed to be more work on vascular access (creating access points in a dialysis patient's blood vessels for blood to leave and return to their body). I have been allowed to develop that work here and St George's is now a tertiary referral centre for vascular access and is recognised internationally. I have also been encouraged to develop better leadership and management skills such as managing conflict better. I have been offered this opportunity to be Divisional Chair and have been encouraged to go further.

What do you do to relax?

→ I have a cross-training machine and I do around 10 miles on that a day. I find it good for getting rid of stress and I have also lost weight. I saw a picture of myself in *the gazette* some time ago and, well, I have lost four stone since then.



Foundation Trust: Q&A

This is an important year for St George's as the organisation moves forward with its application to become a Foundation Trust (FT). As part of the work to help inform colleagues about what becoming an FT really means, Staff Side was invited to put a number of questions to Naaz Coker, the Trust Chair.

Why do we have to become a FT and what would happen if we fail to get approval?

The government is committed to creating a patient-led NHS. FT status will mean having more freedom to manage our services for the benefit of our patients and to re-invest our surpluses in developing and improving those services. If we don't become a FT then St George's position as a major teaching hospital will be weakened and our future will be out of our control. We will run the real risk of being merged with an existing FT.

Does the recent media exposure of failing FTs prove that they are not better than a non-FT?

Whether a hospital has FT status or not, patient care must always be the priority. While there have been some high profile media reports of failing Trusts, on balance, research shows that FTs perform better than non-FTs and tend to come out on top of the quality rating lists. According to Monitor, the independent regulator, in 2009 out of the 125 existing FTs, no more than a handful were being closely scrutinised for possible poor performance.

Don't FTs undermine the principles of the NHS, by encouraging competition with other local



providers and the pursuit of profits? For example, FTs are meant to cooperate with other NHS organisations, but there is no obligation to share examples of good practice to improve patient care throughout the NHS.

The NHS has gone through many changes since it was founded in 1948 with FT status being the latest of these. FTs are under a legal duty to co-operate and to implement national NHS standards. St George's already has strong partnerships with local NHS organisations, with shared clinical work at local acute hospitals in the sector such as Epsom and St Helier, Kingston, Mayday and Queen Mary's, Roehampton.

The work we are leading on behalf of the sector in stroke, trauma, cancer services and paediatric services are all clear examples of partnership working. These are all in the interests of improved clinical outcomes and patient care and this approach will not change with FT status.

What are the tangible benefits of FT status for staff?

Staff membership of the FT will be automatic with the option to opt-out and it is for individual members to decide how actively they want to be involved. By becoming an FT member, staff will have an increased say in how services at St George's are developed. They will be able to stand for election to the Board of Governors and also vote in these elections.

There is no liability for debts or legal damages for staff who are FT members.

In terms of Governors there is a potential liability however in general, so long as they behave responsibly, there should be no problems.

How would FT status affect the terms and conditions for staff?

Becoming a FT does not affect the continuity of service of staff. Staff will have full access to the NHS pension scheme and other NHS benefits. To date, only one out of 125 FTs (Southend University Hospital) has made changes to its terms and conditions. We have no plans to change the terms and conditions of our staff under Agenda for Change.

Are there any costs involved in becoming a FT?

Clearly there are costs involved in becoming a FT, but these are covered by the overall corporate budget. We are acutely aware of the current financial climate and are therefore committed to doing most of the FT work using existing in-house resources.

What is the role of the Council of Governors?

The Council of Governors' is elected by the members of the FT. The Council of Governors' has some statutory duties such as the appointment of the Chair and non-executive directors, but most importantly they provide the stakeholder, public and staff representation in matters concerning the strategic direction of the FT.

It is important to note that the day-to-day operational management of the FT sits with the Board of Directors, as does the liability of the organisation.

The Council of Governors have a number of defined responsibilities such as:

- Contributing to the vision and strategic direction of the Trust
- Appointing or removing the Trust's Chairman and non-executive directors
- Approving the appointment of any new Chief Executive
- Approving the remuneration and allowances of non-executive directors
- Appointing or removing the Trust's financial auditor
- Communicating the views of the membership to the Trust Board

- Evaluating the success of the membership recruitment campaign
- Overseeing the development of the policy for ongoing membership recruitment and ensuring the membership is representative of its communities
- Representing the FT and acting as an ambassador for the organisation and its members
- Ensuring accountability of the FT to local people.

Will you offer the local unions (staff side) a reserved Governor post, as is the case at King's College Hospital FT?

There will be five posts available for staff Governors and it has yet to be decided if any of these will be reserved. However all members of staff have the right to stand for election as Governor.

How much do you intend to borrow and won't this make our financial problems even worse?

St George's made great strides in recent years to improve its finances and this work must continue. In order to achieve FT status we will need to ensure we have a secure financial position and our business plans are based on achieving this. There are no plans to borrow additional funds.

The application process includes a 12 week public consultation. When will this begin?

The public consultation is due to start in early summer 2010.

Will there be open forums to discuss the various issues?

Yes. We want to ensure that all our staff are fully engaged in the FT process. In order to build understanding and support we will be communicating in a number of ways with open staff and public forums being among the methods we will use to reach our audience.

Is there a mandatory requirement for FTs to hold annual general meetings?

Yes and the Trust will continue to hold them.

April launch for 10:10

Plans to fulfil St George's commitment to reduce its carbon emissions by 10 per cent during 2010/11 are being developed and will be launched in April.

The Trust signed up to 10:10, a national campaign to tackle climate change, last autumn and will be encouraging all staff to get involved this year.

"Reducing carbon emissions is not a new thing for St George's," explains Director of Estates and Facilities, Neal Deans. "This is something we have been doing for many years and we will be building on the success of our existing carbon reduction programme and the work previously done under the 'Think Green' banner.

The 10:10 challenge is to reduce carbon emission by 10 per cent in four areas:

- Electricity sourced from the national grid
- On-site fossil fuel use, eg gas, coal or heating oil
- Vehicle fuel use
- Air travel

Neal said: "Reducing carbon involves all areas of Trust activity. For example, reducing vehicle fuel use means considering all the different vehicles that come and go from our sites each day. That not only includes patient transport, but staff travel – getting to work and travel during working hours to other sites. In addition, it includes the many suppliers who deliver to the Trust. All this equates to a significant number of patient journeys."

The Trust's annual expenditure on utilities is £6million and meeting the climate change agenda of reducing carbon emissions by 10 per cent would equate to £600,000.

Neal explains that the campaign will need everyone's support. "This is not just about what the Trust as a whole does, but also about the actions of individuals. For example, the Trust has just reviewed its combined heat and power plant and invested in it to improve its efficiency. This will have a

positive impact on both our carbon footprint and our fuel bills. On capital projects, building design now includes things like motion-sensor lighting, which automatically switches off when no one is around, in order to save electricity. However, on such a large estate all staff can play a big part in reducing electricity consumption by simply switching off lights and equipment when they are not needed."

During 2010/11, **the gazette** will update staff about 10:10 and give an insight into how the Trust is cutting consumption and waste.

Neal said: "People may not be aware of how 'green' St George's already is. For example, our catering contract with MITIE has sustainability written into it in terms of reducing packaging, plastics, the number deliveries we receive and food wastage. I hope people see that MITIE outlets encourage use of recyclable products and work with suppliers that share a 'green' culture."

"The launch of the campaign will be on the 1st April. We want people to understand how what the Trust already does will help us meet our 10 per cent target, and we want to develop new and exciting ways to help staff, patients and visitors support that goal. We want to invite staff across the Trust to become involved in carbon reduction and to take ideas home and put them into practice there as well."

The campaign will be in partnership with St George's, University of London, and all the other partners that are based at St George's, St John's Therapy Centre and the Wolfson Centre. The Estates and Facilities team will be appointing an Energy Manager to champion the works.



Prime Minister Gordon Brown and Alan Milburn MP chat to students at St George's University of London

PM visits St George's

Prime Minister Gordon Brown was among a group of ministers visiting St George's, University of London, in January.

As the government launched a drive to widen access to university, the prime minister chatted to medical students about their education and aspirations. Also visiting were Alan Milburn MP, Pat McFadden MP and local Tooting MP Sadiq Khan.

The University has a widening participation team which works with pupils from the age of nine years old upwards to raise aspirations and encourage student to think about careers in healthcare. Access schemes and initiatives such as summer schools support this work and as a result, the proportion of students joining from state school has increased from 53 per cent nine years ago to 80 per cent today.

A video of the Prime Minister's visit can be found on the Number 10 website www.number10.gov.uk

A&E nurse visits No 10

Stella Davey, Senior Emergency Department Nurse, joined Tooting MP Sadiq Khan at a reception at Downing street in December.

The event, entitled *Christmas Community Heroes*, was aimed at celebrating the hard work of those in the community who work on Christmas day and around the Christmas period.

Stella was selected for her dedication to patient care and for demonstrating sound knowledge and leadership within the emergency department. She has also worked numerous Christmases to ensure patients are provided with a high level of quality care when they come into the emergency department.

"I thoroughly enjoyed the evening, and it was a real privilege to be able to go and represent St George's," says Stella.



Stella Davey with Gordon Brown and Sadiq Khan

Stop smoking drop-in clinics

NHS Wandsworth has opened two new drop-in clinics at St George's for smokers who want help quitting.

These clinics will run every week, between 10am and 2pm. The clinics will be located near M&S in the Grosvenor Wing entrance entrance and in the Atkinson Morley Wing foyer.

Stop Smoking Advisors will:

- Provide free and confidential advice
- Tailor a programme around your individual needs and circumstances
- Help you plan a quit date and cope with stressful situations
- Introduce you to others in the same boat
- Understand that you need to take it one day at a time

For further information, contact the Stop Smoking Service on 020 8812 7794 or stopsmoking.team@wpct.nhs.uk or visit www.smokefreewandsworth.nhs.uk

*spot check

Clean sweep

An unannounced inspection of St George's by the Quality Care Commission (CQC) in November has confirmed the hospital is meeting its duty to protect patients and staff from infections.

The CQC spot check focused on four areas of the hospital, two wards and two units where patients are treated. The CQC examined against 16 hygiene measures including ward cleanliness, hand-washing facilities and availability of antibacterial hand gel. Inspectors questioned staff across the Trust including doctors, nurses, cleaners, and management, in order to test their knowledge of hygiene standards. The watchdog also reviewed the Trust's processes for staff infection control training and providing information for the public and the Board.

The CQC reported no concerns on 15 of its 16 measures. On one measure concerned with maintaining healthcare environments, it made a recommendation to improve cleaning as it found dust in extraction vents. This was a problem that Trust staff had already identified and were seeking to rectify. The recommendation did not mean the standard was breached.

The inspection report also noted that the Trust's rates of Clostridium difficile were lower than the rates for the majority of similar trusts between July 2008 and June 2009. In the same period, the Trust's rates for MRSA were between average for similar trusts and well below this range.

Zoe Packman, Interim Director of Nursing, said: "We are pleased with the CQC's report as it confirms our ongoing work to improve standards of hygiene within the Trust is protecting our patients, visitors and staff."

Welcome news

A new *Welcome to St George's* leaflet is to be published next month to provide essential up-to-date information to patients about the hospital and make a positive first impression.

The new A5 leaflet will combine the previously published *Welcome to Inpatients* and *Welcome to Outpatients* leaflets. Designed to answer many of the questions that first time visitors to the hospital may have, the leaflet should be sent out with appointment letters but also will be available to download from the website.

Illustrated with full-colour photographs, it will include advice about travel and parking, suggestions of how to prepare and what to bring, and details of facilities and services on site for patients.

Sponsorship support for the leaflet's print costs has been generously provided by SSP which runs M&S and Whistlestop at St George's.

For further information, please contact Abigail Changer, Interim Patient Information Manager, by emailing abigail.changer@stgeorges.nhs.uk

V&A delivers new collection

Delivery Suite staff, mothers-to-be and their visitors can enjoy a collection of 12 prints from the V&A museum currently on display in the Delivery Suite. The display is made up of work from several contemporary women printmakers and covers a variety of subjects, from the female body to questions of identity. It includes a limited edition print by the supermodel Kate Moss entitled Lipstick Kiss.

The display of prints from the V&A has been organised in association with Paintings in Hospitals, a charity dedicated to improving health, well-being and the patient experience, through the display of art, in healthcare facilities across the UK.

The prints will be on display until 30th May.



Giulia Zaniol's My Grandma's Kitchen



Marlene MacCallum's Strange Chambers

Appraisal: Have you had yours?

Appraisals are essential for the effective management and evaluation of staff at St George's – they help develop individuals, improve organisational performance, and feed into business planning.

"An appraisal is an opportunity for an open two-way discussion, usually between an individual and their line manager," explains Louise Holmes, Appraisal Project Manager. "The meeting focuses on the individual's performance during the previous year. A structured appraisal system helps staff feel that their good work is recognised and that they are valued. It also provides the opportunity to discuss any weaknesses or problems they may have and come up with solutions".

There is a joint responsibility between individual staff and managers to organise a formal appraisal date and time. Either your line manager or you can start the process – so if you are an employee with a shy boss then take the lead and ask for one.

Louise added: "Anyone who hasn't had an appraisal in the last 12 months, or perhaps at all, should speak to their line manager and arrange one. We want to see 100 per cent of staff at St George's receive an appraisal, as they not only benefit the individual, but also benefit our patients by helping us to improve the service we provide."



For further information, please visit the appraisal pages on the intranet or get in touch with Louise on ext 0837.



June Allen, Bridget Kalber, Mike Shaw, and Loke Ramnarine on the Senior Staff Induction and Leadership Programme

Training leaders

There is a range of programmes and masterclasses for leaders available from the Trust's Training and Development team.

These help senior leaders to build the skills, knowledge and networks and so achieve the transformation goals of the Trust.

One example is the Senior Staff Induction and Leadership Programme which is for consultants, general managers, matrons, heads of nursing, senior therapists, pharmacists and others.

The six-day course takes place over three months and is facilitated by Trust staff and externals specialists.

The overall aim is to give participants practical information and skills to support their leadership role and includes a session understanding their own personality

June Allen, Lead Cancer Nurse, said: *"Having recently attended the Leadership training course, I now feel even more equipped with confidence and the practical skills to meet the ever increasing challenges both within this Trust and the wider NHS. I particularly enjoyed and found useful the sessions on Effective Influencing."*

Information on leadership courses can be found via a link on the Education and Development homepage.

Chief Executive congratulates One Team Service Partners

On Friday 11th December around 40 of the Trust's new One Team Service Partners were presented their certificates in a ceremony hosted by Chief Executive, David Astley, in the Philip Constable Board Room, Grosvenor Wing.

A podcast of the event is now available on the One Team intranet pages. The podcast also includes interviews with some of the new Service Partners, who explain how the One Team initiative is changing how they view their roles at St George's.

To watch the podcast, visit the One Team intranet pages.



Health and Safety

New posters outlining health and safety law will soon be on view around the Trust so all staff can be clear on their rights and responsibilities.

Each poster outlines the legal responsibilities an employer has for its staff to provide a safe environment for work, and the legal responsibility of staff in maintaining health and safety. It also has details of who to contact if there is a problem.

The Health and Safety Executive (HSE), the government department responsible for preventing work-related illness and injury, gave employers until 2014 to change old-style posters for new. St George's will receive its posters shortly and more than 100 will be displayed in its buildings located in key points such as reception areas where most people are likely to see them.

Research by HSE showed that the old text-heavy poster from 1999 was visually unappealing and rarely read. Peter McDermott, Health and Safety Manager, said: "It is important that St George's staff understand what the law says about health and safety at work. This new brighter version with bullet points will hopefully get read and understood by more people than the very long, rather grey, old-style poster."

Another way in which the Trust's Health and Safety team keep workplace risk management front of mind is through the Risk Management Calendar. These run April to March and each month focuses on a different topic of risk management. About 1,000 are published and distributed to wards and departments and the calendar is also available to download from the intranet. Checklists are available on the intranet for each month's theme and managers are encouraged to use them to identify unmanaged areas of risk.

February's theme is violence and aggression. The checklist will encourage managers to consider issues such as physical security, eg door locks, whether staff been trained in dealing with conflict and difficult people, and ensuring staff know how to report incidents.

Peter explains: "Risk cannot always be eliminated but there are usually straight forward measures to reduce risk and it is everyone's responsibility to take action. Local managers can use the checklists to identify and manage risk in their area and seek advice from the Health and Safety team when necessary. Problems may need to be escalated to a Divisional Health and Safety team to get resolved or the Trust's overall Health and Safety Committee."

Peter added: "By highlighting areas of risk, managers can ensure that we are aware of any trends across the Trust which may need a Trust-wide solution."

To contact the Health and Safety team, call ext 2487 or email peter.mcdermott@stgeorges.nhs.uk To find the checklists and information about health and safety workshops and the IOSH Managing Safely course, visit the Risk Management homepage on the intranet.

The old and new health and safety law posters

Life-saving simulation training for NNU

St George's Neonatal Unit (NNU) has received more than £60,000 to set up simulation equipment and training for its staff.

The donation will fund a live simulation set up with 'dummy' NNU equipment and patient. It will also pay for a specialist nurse to train doctors, nurses and other staff in caring for premature and sick babies, and managing life-threatening situations.

The grant has come from a charitable trust based in America, the RBaby Foundation, given to the NNU via its charity, First Touch (formerly the Friends of St George's NNU).

Dr Justin Richards, the Neonatal Consultant and project lead, explains that the equipment will enable staff to learn routine tasks safely, but also to practice identifying and responding to emergencies. "Simulation allows us to train staff safely on situations which may not happen often in clinical practice. We will use the equipment for one-to-one training but also for training teams, as in emergencies it is not just the individuals' skills which count, but also the teamwork."

He added: "We can also practice for rare cases which we know will actually be coming to NNU. For example, conditions that can be identified through antenatal scanning but which some staff may not have encountered before."

The equipment will be based on the Neonatal Unit so it is to hand for short training sessions. Current funding will allow a senior nurse will work part-time on the project for a



Justin Richards with baby Mia Richard-Londt

year and half. However, this is just the start.

"Once the simulation training is up and running then we can extend it to any teams in the hospital who might deal with newborns babies requiring emergency care, for example, A&E staff," explains Justin. "We also hope to collaborate with other local hospitals and partner organisations in south-west London to provide simulation training".

"As there is a lot of interest in simulation, we will also be hoping to look at how effective it is as a means of delivering training and helping staff gain the skills they need."

Justin will be liaising with St George's Clinical Simulation and Skills team, part of Training and Development, in order to set up the Neonatal Unit's simulation training. It is hoped training will be underway by early summer 2010.

Charity spinathon

Staff are invited to take part in a charity spinathon at St George's on March 2nd in aid of Action Medical Research.

The charity funds five research projects based either at the hospital or at St George's, University of London.

The event has jointly organised by Jon Porter, Transformation Workstream Lead, and Mike Boland, Manager of the Robert Lowe Sport Centre. The six hour event will run from 12pm in the bar of the university.

Jon explains: "*Fit individuals could take on the challenge of spinning for all six 50-minute sessions but teams are also invited to cover the sessions. We will have at least 13 bikes but are organising for more so that more people can take part and raise some cash.*"

Magnificent seven

St George's Hospital Charity will be well represented at this year's Virgin London Marathon with seven runners doing their bit to raise money.

St George's staff members Alex Garner, Marie Synnott-Wells and Jason Bernard are all running on 25th April, raising money for general funds or a for a specific service. Four members of the public are also taking on the 26-mile challenge for St George's each hoping to raise around £2,000.

If you would like to sponsor the runners, donations can be made via the charity office in the Grosvenor Wing entrance.