Daybreak comes to St George’s
CONTENTS

3 A word from... Miles Scott chief executive

3 Trust news
Community ward signals new approach to care; New training facility is not for dummies; Breast unit opened by Mayor; Enhanced recovery improves surgical care

5 Patient perspective Phyllis Hillsley, cardiac patient

6 Membership matters
FT application: a top priority; Diabetes: separating fact from fiction

8 Spotlight on
The sewing room

9 Patient safety; Patient feedback

10 Past and present; Living our values awards

11 Top tips

12 Charity news

Front cover shows TV’s Dr Hilary Jones with Sharon Jeeta, neonatal unit junior doctor.

With thanks to Yusuf Ozkizil, Colin Wren, Mark Evenden and Deadlinepix Ltd for their photography services.

date is written and published by the communications unit. The opinions expressed do not necessarily represent those of St George’s Healthcare NHS Trust.

If you have a story for the gazette, please email communications@stgeorges.nhs.uk

The gazette

Neurorehabilitation consultation update
After reviewing the outcomes of the recent Improving neurorehabilitation services in southwest London public consultation, we are moving ahead with plans to relocate services based at the Wolfson Neurorehabilitation Centre.

Our long-term plan is to relocate the majority of the services currently provided at the Wolfson to Queen Mary’s Hospital, Roehampton. In addition, 10 beds will be provided at St George’s Hospital, Tooting, allowing patients who still have acute needs to begin their rehabilitation earlier.

During March 2012 we will implement our interim plan and move the Wolfson services into temporary homes at Queen Mary’s and St George’s Hospitals.

Our proposals to redesign neurorehabilitation services will provide improved facilities for patients and maintain the ethos and strong team approach of the current service which is rightly regarded as being first class.

Full details are available online at www.stgeorges.nhs.uk

Daybreak comes to St George’s
ITV’s Daybreak breakfast programme reported live from St George’s Hospital in December with Dr Hilary Jones interviewing staff and parents about life on the neonatal unit at Christmas.

Goodbye to Hello
Downton Abbey star Elizabeth McGovern joined youngsters at Wandsworth Museum in January to celebrate the end of the successful year-long Hello campaign.

The campaign kicked off last year with a balloon launch at Wandsworth Museum, and since then the community speech and language therapy team have been spreading the word and encouraging people from across Wandsworth to talk, listen and take part.

More than 1,300 children in the borough use St George’s Healthcare’s speech and language therapy service, which provides support for children and families in hospitals, schools and people’s homes. You can contact the community speech and language therapists by emailing wandsworthslt@nhs.net
A word from...

MILES SCOTT  
chief executive

A warm welcome to readers of our ‘new look’ gazette which, I am delighted to say, will now be received by all public members of the trust as well as our staff.

As we set our sights on becoming a Foundation Trust by 2014 so it is important that members – staff and public alike – are actively informed about the latest news and developments that are happening across St George’s Healthcare. The new gazette has been designed to be more consumer magazine-like in its style and we promise to try our best to limit the use of NHS jargon.

Regular features will include a Membership matters section, providing dedicated information for members, and the patient perspective, offering first hand accounts of care received at the trust. We have looked to involve our members in introducing these changes and have established a membership advisory group (MAG) to provide thoughts and ideas on the content of the gazette. I would like to thank the members of MAG for their support and also MITIE for their generous sponsorship of this publication.

In this issue we celebrate the opening of the Rose Centre, a new breast diagnostic unit, and the state-of-the-art simulation centre, a joint venture between the trust and St George’s, University of London. These are both great examples of how, since integrating with Community Services Wandsworth in 2010, the trust has been able to develop new patient pathways between hospital and community services.

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A £350,000 state-of-the-art training facility was officially opened at the St George’s campus in December by Niall Dickson, chief executive and registrar of the General Medical Council.

The Advanced Patient Simulator Centre, a joint project between the trust and St George’s, University of London, provides specialist training for healthcare professionals and students. It allows them to test their skills in practical scenarios based on real-life situations including surgical and medical emergencies. They work with computer-controlled patient manikins that realistically mimic a wide range of health problems.

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St George’s unable to proceed with St Helier merger

St George’s Healthcare NHS Trust submitted a bid for a potential merger with St Helier Hospital in November 2011.

The board is clear that a merger between St George’s Healthcare and St Helier would be an excellent strategic opportunity, with the potential to bring significant improvements to the care of patients across southwest London and beyond.

After careful consideration the board has reached the conclusion that the current terms of the merger prevent us from proceeding further at this time.

The level of financial challenge facing hospitals in south west London, combined with the inability to pre-empt the outcome of a public consultation around the Better Services Better Value (BSBV) review, means this is not the right time for us to progress with the transaction.

We want to continue to build on the existing links that are in place for clinical services. We have identified a number of the potential benefits to patients that would occur from an acquisition which could also be delivered if the organisations remained separate legal entities which we shall continue to pursue.

We are particularly keen to develop the clinical and academic networks that span St George’s Healthcare and St Helier, and explore opportunities to establish new networks across services, to the benefit of patients.

A key priority for the trust is to achieve Foundation Trust (FT) status by 2014, and we will focus our efforts on achieving this. The board feels strongly that achieving FT status will strengthen the opportunities for St George’s Healthcare and St Helier to work together in the future.

BREAST UNIT OPENED BY MAYOR

The Rose Centre, a £4m breast diagnostic unit, was officially opened at St George’s Hospital in January by the Mayor of Wandsworth, Councillor Jane Cooper.

St George’s Hospital is a regional cancer centre and its clinical results for breast screening are among the best in London. The Rose Centre provides modern, high-quality services for the diagnosis and treatment of breast cancer and other breast diseases.

The unit is also home to South West London Breast Screening Service and St George’s National Breast Screening Training Centre.

Dr Louise Wilkinson, director of screening at St George’s, said: “This sophisticated unit provides women with a modern, high-quality and efficient screening and diagnostic service in a calm and caring environment. “Early detection of breast cancer is the key to successful treatment and the Rose Centre provides all the tests women need in one place at one time.”

ENHANCED RECOVERY IMPROVES SURGICAL CARE

The Enhanced Recovery Programme (ERP) is successfully improving the quality of care and reducing length-of-stay for surgical patients at St George’s Hospital.

ERP, a national scheme aimed at helping patients to recover more quickly following an operation, starts before patients are admitted for their surgery. It focuses on three key aspects of care:

- Eating and drinking as soon as possible after surgery
- Mobilising (getting up and moving around) as soon as possible after surgery
- Receiving good pain control

Marion Beer, lead nurse for ERP, said: “By following the principles of the programme our patients recover sooner and are therefore discharged from hospital earlier. Apart from reducing the risk of hospital acquired infections for the patient, a reduced length-of-stay encourages the patient to recover in the comfort of their own home where they generally eat better, sleep better and move around more.”

Hugh Byrne, consultant obstetrician, is one of the clinical leads for the programme. He said: “ERP is a group effort involving the medical teams, nursing staff on the wards and therapists, plus regular contact with the enhanced recovery nurse; this gives patients the confidence to be independent. We will be rolling out the principles of this programme across more areas of the trust, to give more patients the chance to benefit.”

So far the programme has been introduced in urology, colorectal and gynaecology.

Patient Denise Britton went through the programme when she came into hospital for a hysterectomy. She said: “The treatment I received at St George’s was excellent. I went in for my operation on Monday morning and was out shopping by Wednesday. The programme definitely helped with my quick recovery. I would like to add a special thank you to Sarah Mitchelmore (lead nurse for ERP, gynaecology); she was excellent. She called me everyday for a week once I left hospital to find out how I was getting on.”

IMPROVING CARE: (left to right)
Sarah Mitchelmore and Marion Beer, lead nurses for ERP

Respectful
Phyllis Hillsley, CARDIAC PATIENT

91-year-old Phyllis Hillsley spent time in St George’s Hospital after suffering a heart attack last December. She was brought straight to the hospital’s cardiac catheter laboratory where she was treated by the specialist heart attack team.

“They knew what was wrong with me straight away,” says Phyllis, “they were brilliant.”

It was the first time that Phyllis has undergone any major surgery or spent any length of time in hospital. She spent nine days on Belgrave Ward before being sent home. She explains: “The reason I was on the ward for so long was because I had a chest infection before I came in, so the doctors wanted to be sure that it had cleared up and I was okay before I left hospital.”

Phyllis describes her care at the hospital as excellent: “I couldn’t have asked for better really. Everyone was so helpful. I received a nice blanket bath when I couldn’t get up to wash myself – I didn’t know they still did those!”

Phyllis lives in Sutton but is no stranger to Tooting. She said: “We lived in Fountain Road growing up – I was the youngest of 11 siblings and during the war my brothers came to the hospital based here (what was then the Grove Hospital).”

Her family are also grateful for the care she received at the hospital. Her son, David, said: “Nothing was too much trouble for the staff. At the age of 91 she was given all the medical treatment required and great love and care were shown by all the staff. Our family cannot thank the team who cared for her enough.”

Dr Pitt Lim is consultant cardiologist and clinical lead for cardiac intervention and was Phyllis’s consultant during her stay. He said: “Mrs Hillsley is a really sharp lady and it was fortunate that she called for help within the hour of the onset of her heart attack. As a result, her treatment was completed well under the threshold of 150 mins from the onset of her heart attack, which meant that damage to her heart muscle was minimised.”

The specialist heart attack team that cared for Phyllis was set up in October 2005 and has allowed the trust to provide gold standard treatment of patients suffering heart attacks.

The latest MINAP* report published in November 2011 showed that St George’s had the best ‘call to balloon’ rate; treating 90% of patients in under 150 minutes. The ‘call-to-balloon’ time is from when the patient makes the emergency call, to the time that their emergency surgery is completed in hospital.

St George’s is one of the biggest and busiest of the eight specialist heart attack centres in the Capital, serving the southwest London population and, since March 2011, patients from across east Surrey.

*MINAP - Myocardial Ischaemia National Audit Project
FT APPLICATION: A TOP PRIORITY

Setting out their priorities for St George’s Healthcare in 2012, trust chairman, Christopher Smallwood, and chief executive, Miles Scott, are clear in their commitment to move forward as soon as possible with our Foundation Trust (FT) application.

FT status is essential to the longer-term success of the trust and will provide a mark of the quality of our clinical services and management.

The trust commenced its FT application in spring 2010. A year later the board agreed to delay the application so that the trust could focus on improving its financial performance, as well as continuing to improve the quality and safety of patient care.

To contact the FT Membership Office
Telephone: 020 8266 6132
Email: members@stgeorges.nhs.uk

Money saving offers and vouchers for members

The NHS discount scheme offers hundreds of money saving opportunities to NHS staff and is now available to members of St George’s Healthcare.

NHS Discounts provides special deals, voucher cash backs and shopping discounts on a wide range of items including electrical items, mobile phones, gifts, insurance, financial products, holidays, theatre breaks, days out at theme parks and much more.

To register go to www.nhsdiscounts.com, complete the registration form (for the question ‘Do you work for the NHS’ select ‘NHS Foundation Trust Member’ from the drop down menu) and start saving!

New advisory group: staff members needed

A new Membership Advisory Group (MAG) has been set up to work with the FT membership office and ensure that the trust’s membership recruitment, communication and engagement activities are informed by members and reflect the needs and interests of the membership. MAG has good representation from public members but still needs more staff representatives. For further information please contact members@stgeorges.nhs.uk

MEMBERS’ EVENTS

Booking is essential for all events. Contact 020 8266 6132 or email members@stgeorges.nhs.uk

Health lecture series: breast health
Breast screening
Wednesday 11th April
12.15hrs – 13.15hrs
19.00hrs – 20.00hrs
Seminar Room, the Rose Centre

Breast cancer treatment
Wednesday 16th May
14.30hrs – 15.30hrs
John Parker Lecture Theatre, ground floor, Atkinson Morley Wing
19.00hrs – 20.00hrs
Seminar Room, the Rose Centre

Learning to live with breast cancer
Wednesday 13th June
12.15hrs – 13.15hrs
19.00hrs – 20.00hrs
Seminar Room, the Rose Centre
Presented by specialists from breast screening and cancer services.

Shaping the future of healthcare services in southwest London: the Better Services, Better Value review
Wednesday 18th April
Presented by Ros Given-Wilson, medical director and consultant radiologist, and a representative from the Better Services, Better Value review team
12.00hrs – 13.00hrs
Venue TBC
19.00hrs – 20.00hrs
Lecture Theatre F, 1st floor, Hunter Wing

Heritage past, present and future: a walking tour of St George’s*
Wednesday 25th April and Wednesday 2nd May
Led by Colin Davis and Lee Lockhart-Mure
15.30hrs – 17.00hrs
17.30hrs – 19.00hrs
The tour will include key points of interest both inside and outside at St George’s, University of London.

* Places strictly limited to 15 people per tour

Keeping to the beat: sports cardiology and London 2012
Wednesday 30th May
Presented by Professor Sanjay Sharma, consultant cardiologist, medical director for the London Marathon and cardiologist for the London 2012 Olympics
14.30hrs – 15.30hrs
Michael Heron Lecture Theatre, 1st floor, Hunter Wing
19.00hrs – 20.00hrs
Lecture Theatre F, 1st floor, Hunter Wing

Big bangs, rising tides and the Olympics: emergency planning at St George’s
Wednesday 27th June
Presented by Hazel Gleed, emergency planning and liaison officer
14.30hrs – 15.30hrs
Lecture Theatre F, 1st floor, Hunter Wing
19.00hrs – 20.00hrs
Lecture Theatre F, 1st floor, Hunter Wing

All event times and venues subject to confirmation on booking.
**DIABETES: SEPARATING FACT FROM FICTION**

Diabetes is a condition that affects 2.6 million people in the UK – that’s four per cent of the total population. It is estimated that 10 per cent of the total NHS budget is spent on diabetes, which works out at £25 million per day.

But as well as the facts of diabetes, it is just as important to understand the myths that surround it. Dr Natasha H Patel, consultant in acute medicine and diabetes at St George’s Healthcare, dispels some of the most common myths.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
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<tbody>
<tr>
<td><strong>1. People with diabetes cannot eat sugar</strong></td>
<td>One of the most common myths is that diabetics have to eat a sugar-free diet. People with diabetes need to eat a balanced diet that will include some sugar. Motto: Everything in moderation.</td>
</tr>
<tr>
<td><strong>2. People with diabetes should only eat diabetic food</strong></td>
<td>The label ‘diabetic’ is often used on sweets and other foods that although are low in sugar are often high in fat. In fact, the charity Diabetes UK recommends that people with diabetes avoid diabetic food.</td>
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<tr>
<td><strong>3. Type 2 diabetes is mild</strong></td>
<td>This is widely repeated, but of course it is not true – no form of diabetes is mild. If type 2 diabetes is not taken seriously it can lead to serious and sometimes life-threatening complications.</td>
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<td><strong>4. Type 2 diabetes only affects overweight people</strong></td>
<td>While type 2 diabetes is often associated with being overweight or obese by the media, it is untrue to say it only affects fat people. Type 2 diabetes can also occur in people who are either under or normal weight.</td>
</tr>
<tr>
<td><strong>5. People with diabetes go blind and lose their legs</strong></td>
<td>Diabetes is associated with complications (including amputations) and is known to be the leading cause of blindness and chronic kidney disease. However, those diabetes patients who control their weight, blood pressure, glucose levels and quit smoking all increase their chances of remaining free of complications.</td>
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<tr>
<td><strong>6. Diabetes is contagious</strong></td>
<td>It is impossible to catch diabetes from someone else by any means; this includes sneezing, touch, blood or by any other person to person means. The only way in which diabetes can be passed on is from parents to their own children, but even this is only a genetic likelihood of diabetes, i.e. an increased susceptibility in developing diabetes, not the actual condition itself.</td>
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<tr>
<td><strong>7. People with diabetes are more likely to be ill</strong></td>
<td>If someone with diabetes takes care of themselves (see Myth 5) there should be no reason that they are more likely to fall ill or prone to developing a cold or flu. However, flu jabs are advisable and free. Illness may interfere with blood glucose levels; hence early prevention is absolutely essential.</td>
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**HOW I MANAGE DIABETES: COLIN DAVIS**

Eight years ago Colin Davis, main receptionist at St George’s Hospital, had just completed jury service and felt exhausted. A few days later he also noticed he was getting frequent migraines and was very thirsty, particularly at night. His GP diagnosed him with diabetes, and placed him on insulin injections immediately.

A few years later Colin also needed an operation on his back and was told he would need to lose some weight. “I saw this as a really good opportunity to help my back and also my diabetes,” Colin said. “I started to eat more vegetables and less meat, and had more control over my portion sizes at mealtimes. I also joined a gym and took up cycling and walking on the treadmill; nothing too strenuous at first.”

Today, Colin has brought his weight under control and has hugely reduced his insulin intake from a total of 28 units every morning and 18 each evening to just eight units a day.

Colin said: “I am also taking tablets for my diabetes at the moment and the doctors hope to take me off insulin injections completely in the next six months, leaving me with just the tablets.

“I would encourage anyone with diabetes who needs to make some changes to do so – the health benefits are great, as well as helping with your condition. It certainly isn’t easy at first, and changes do not happen overnight, but you can build on the exercise each day and help improve your health.”
THE SEWING ROOM

The sewing room is not the first department that comes to mind when you think about the support services that a NHS trust needs. Yet it offers an essential service; providing uniforms for staff and helping out with alterations and repairs.

The sewing room is the first port of call for staff who need a uniform. The team provide around 600 uniforms a month; measuring staff for size, ordering the uniforms and making any alterations necessary to ensure that it fits perfectly. The ladies are very diplomatic in ensuring that staff order the right size to fit them and carry out minor repairs to extend the life of garments.

The team are also responsible for altering or repairing up to 120 garments a week and repair curtains and other items requested by the wards and departments. The team have also, on occasion, helped out members of staff who have had an embarrassing trouser split!

The team is led by Catherine Leak, assistant facilities manager and Andrea Wright assistant general manager. Catherine said: “The overriding impression given by the ladies of the sewing room is that they care - for the staff they assist, for the smooth running of the sewing room and for the standards of the uniforms they distribute and repair. We are lucky to have such a good humoured and dedicated team.”

Andrea adds: “The service provided by the team is an invaluable one. Over the years the service has gone through many changes which the sewing room team has embraced. Their workload has increased significantly with the centralisation of all trust uniforms but they continue to deliver services in an efficient and effective manner. They are an outstanding team who are dedicated and committed in all areas of their work ensuring staff leave the department with their uniforms and a smile!”

The sewing room is run by two members of staff; Fatima Zerroud and Souad Areiqat. Fatima has over 25 years experience in NHS sewing rooms and joined St George’s sewing room in 1992, having previously worked at Springfield Hospital and the former St Stephen’s Hospital (now Chelsea and Westminster). She recalls the lovely uniforms that nurses used to have including the starched white apron. She said: “When student nurses gained their qualifications their families often bought them silver belt buckles which the sewing room would fit to the appropriate colour belt for them. These uniforms included five dresses, one nurse’s cape and three to four starched white hats!”

Souad joined the trust in 2010. She has worked in sewing rooms both in the UK and abroad, specialising in bespoke upholstery and curtains as well as more usual garments.

“A stitch in time: Sewing team members Fatima Zerroud and Souad Areiqat

In October 2010, following integration with community services Wandsworth, the facilities team began centralising uniforms across all trust sites. This was to ensure that all staff were wearing the same uniform to the high standard that is expected.

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What’s in a name?
THE IMPORTANCE OF PATIENT IDENTIFICATION

It may not be something you think of when you come into hospital for either an emergency or elective procedure, but patient identification is a top safety priority for the trust.

Our identification policy helps ensure that all our patients are correctly identified and that all the correct identification checks are carried out before any procedure begins. For staff, it is really important that rather than asking “Are you John Smith?” they instead ask “Please tell me your full name and date of birth” and check these against the patient records.

We encourage patients to check that medical teams know your identity and what your needs are. Please ask your doctor or nurse if they know who you are – it may sound unnecessary, but it helps us make your experience in hospital as safe as it can be.

Most patients coming into hospital, whether staying overnight or as a day case, will need to wear an identity wristband. During 2011, we finished rolling out printed wristbands to replace ones handwritten by staff. The printed wristbands include a barcode with the patient’s details. These are printed automatically in some areas such as when a patient comes to the A&E department or when registering a newborn baby. This process helps improve patient safety.

Amy Gass, clinical safety officer for IT, said: “Printed wristbands now give us an exciting opportunity to use barcode scanning technologies to further improve patient safety. We know there is evidence of real improvements to patient safety when coding systems are used to match patients to their care such as reduced medication errors and reduced risk of wrong site surgery.”

Patient feedback...

Every year the trust cares for more than 800,000 patients and many of those patients take the time to write and express their thanks. In every edition of the gazette we publish a selection of those letters.

FAO stroke unit

My family and I would like to thank all the nurses on the stroke unit. My father was admitted with a suspected stroke in December. My father is 82 years old, and has been diagnosed with both Alzheimer’s and dementia. As you can imagine, in his frail stage, I was very upset when he was admitted to hospital with a suspected stroke.

However, I came to realise that the standard of nursing at St George’s is of a higher standard than I could have imagined or have ever experienced. This includes my experiences at private hospitals that my father attended at various times over a period of years, when he had private health insurance. My father was treated with respect, humility and genuine kindness during his stay with you. I am very grateful to all the staff of the stroke team, and I would like to thank all responsible for making his stay as pleasant as possible.

FAO A&E, plastics, theatre staff, anaesthetics, porters and Nicholls Ward

On Christmas Eve my six-year-old son was bitten on his lip by our family dog. I first attended Epsom A&E and was referred to the plastic surgical team at St George’s.

My son was reviewed by the team and underwent a general anaesthetic to have his lip sutured and then we spent the night in Nicholls Ward.

I wanted to congratulate and offer my appreciation on the quality of care I received. All staff from the receptionist, A&E staff nurse, the plastics team, theatre staff, anaesthetics, recovery staff, porters and the staff on Nicholls Ward were a perfect example of the professionalism and dedication staff display whilst working in the NHS.

We were well informed, well cared for, always met with a smile and I could not have asked for better care.

FAO dentistry

I would just like to praise the excellent service and advice I received from your dental surgeons and assistant today. I was seen within five minutes of my allocated time and the advice and service was professional, informative and very friendly. I came away knowing all of my options and with a clear way forward. When I compare this to my experience at a private dentist, you can tell that your staff are giving a service to the benefit of the patient and not their back pocket.

They were a credit to your organisation.

Pauline is a great credit to NHS, St George’s Hospital and the South West London Bowel Cancer Screening Centre. Please pass on my sincere thanks, gratitude and admiration.

FAO bowel screening

I attended a bowel cancer screening appointment on Wednesday 14th December and was seen by Pauline Wymark. I cannot speak highly enough of Pauline’s professionalism throughout my appointment.

Pauline has the most delightfully warm, friendly and empathetic manner, together with a great personality. She has a very natural ability to put patients at ease and relax them.

It takes a very special kind of practitioner and person to handle the very sensitive and emotive subject of bowel cancer screening.
**Past & Present**

**Eddie Wilson café**

Take a look at the walls of the Eddie Wilson café, located on the second floor of the Hunter Wing of St George’s University, and you’ll see a polar landscape which gives a clue to the origins of the café’s name.

Edward Wilson qualified as a doctor from St George’s in 1900 and went on to become internationally famous as an explorer, naturalist, painter and ornithologist.

As junior surgeon and vertebrate zoologist on the British National Antarctic Expedition he travelled, under Robert Falcon Scott, to the Antarctic from 1901-1904. This trip – and his subsequent work as a naturalist – led to his appointment as chief of the scientific staff on Scott’s ill-fated Terra Nova Expedition. The team reached the South Pole on 17 January 1912, only to find that they had been preceded by Roald Amundsen’s Norwegian expedition. Wilson, who sketched throughout the trip, died on 29th March 1912 on the return journey with Scott and Henry Bowers from a combination of exhaustion, starvation and extreme cold.

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**LIVING OUR VALUES AWARDS**

**celebrating**

**respectful**

The Living our Values Awards have been embraced by staff across the trust and this month the gazette meets those who won the awards for personifying the trust value of **respectful**.

Respectful behaviours:
- Keep patients, families and carers involved and informed.
- Protect patients’ dignity and confidentiality.
- Wear our name badges, introduce ourselves and address people in a professional manner.
- Respect colleagues’ roles in patient care and experience.
- Value and understand the diversity of those around us.

Samantha Ives, service delivery manager, won the individual award for her dedication and transformation of the transport service for the end-of-life care discharge home service.

Samantha was nominated by Berit Moback, senior nurse for palliative care. Berit said: “Samantha treats all patients and carers with utmost respect and ensures that all ambulance staff do the same. She has a very deep understanding of the needs of end-of-life care patients and works extremely hard to ensure that these patients receive high quality care during the transfer from the hospital to their preferred place of care. Her contribution has also had a huge impact on staff by reducing our stress, as we are able to openly discuss any problems in regards to transport with her.”

On receiving her award, Samantha said: “This is a huge surprise and I am honoured to receive this award.”

The team award went to the sewing room team for demonstrating respect in their attitude everyday.

The team were nominated by Catherine Leak, assistant facilities manager. Catherine said: “The sewing room is run by two members of staff who provide a discreet, understated service. Their hard work and dedication makes sure that the staff of St George’s present as professional individuals with clean, suitable and correct uniforms.”

The sewing team are also featured in our ‘spotlight’ piece this month.

*Turn to page eight to find out more.*
Infection control

PREVENTING THE SPREAD OF INFECTION

The control of infection in healthcare environments is a major concern for patients and the public. Controlling infection is a key priority for the trust both in hospital and out in the community.

To keep patients safe we have an infection control team working around the clock, monitoring infections and providing staff with advice on how to treat and prevent the spread of bacteria and viruses. Alongside the cleanliness of wards, we offer training for staff and have published strict hand hygiene protocols. We are also very careful about what antibiotics patients receive and how long they take them – taking antibiotics unnecessarily can make them less effective as bugs develop their resistance.

We screen patients coming in for operations for bacteria, such as MRSA, and have very strict procedures to follow when an infection breaks out. Infection control is a team effort. It takes commitment from every member of staff at the trust, maintaining high standards of hygiene, following procedures and flagging up potential outbreaks so they can be brought under control quickly.

But what about patients and visitors?

Patients and visitors have a key role to play too and, it may sound simple, but good hand hygiene goes a long way to keeping infections at bay.

You can use the hand gel dispensers outside all our wards to clean your hands regularly, and don’t hesitate to ask our staff if they have cleaned their hands before they come into contact with you or the person you are visiting.

Also think carefully about whether you’re already carrying a bug that might make others sick before attending a clinic or hospital appointment. If you’re suffering with symptoms of diarrhoea, vomiting or other flu-like symptoms you should think about staying at home and rearranging your visit or non-urgent appointment. Patients should also consider getting a flu vaccination each year – we encourage our staff to have the jab too.

Remember, always:

• Clean your hands after going to the toilet
• Clean your hands before and after eating
• Clean your hands before and after touching a patient

ALL YOU NEED TO KNOW ABOUT... VITAMIN D

There have been a number of media reports recently about the importance of vitamin D in people’s diets. In this issue of the gazette Catherine Collins, principal diettian, offers some expert advice.

Having enough vitamin D is essential for your health. There are two forms of vitamin D that are used by our body. They are vitamin D2 (known as ergocalciferol) and vitamin D3 (cholecalciferol). Deficiency leads to weakened bones, thinner bones with aging that are more easily fractured, and muscular aches and pains, particularly in the upper back and shoulders.

What is the benefit of enough vitamin D?

• Helps the body absorb dietary calcium and phosphate to help make for healthy bones
• Helps improve muscle strength and immune function
• Helps reduce inflammation, so reducing muscular aches and pains
• May reduce the risk of ‘auto-immune’ conditions such as insulin-dependent diabetes, rheumatoid arthritis, and multiple sclerosis
• Can help people with diabetes to manage their blood sugar better
• May reduce the risk of developing certain cancers – possibly breast and colorectal (bowel) cancer

There are three sources of vitamin D available to us:

Sunlight
• Food
• Vitamin supplements

Sunlight

Vitamin D3 is made when our bare skin is exposed to sunlight. UK sunlight is only strong enough to make vitamin D during the summer months between 11am to 3pm. It is the burning rays of the sun (UVB rays) that help us to make vitamin D. Using sunscreen of Factor 8 or higher completely blocks production of vitamin D by the skin.

When it comes to sun exposure, little and often is best. The more skin that is exposed, the greater the chance of making sufficient vitamin D for your body’s needs.

The recommended advice made by the British Association of Dermatologists, Cancer UK and five other leading UK charities in 2010, is that 10-15 minutes three times a week exposing face and arms is sufficient to raise blood vitamin D levels to a healthy target in pale-skinned people. Darker skinned people and older people need longer to make the same amount of vitamin D. This short time in the sun without sunblock is able to make plenty of vitamin D, before your skin starts to tan or burn. If you avoid sunlight then you should take regular vitamin D supplements year round.

Examples of food that are a source of vitamin D include:

• Oily fish
• Liver (avoid if planning a pregnancy)
• Fortified dairy products eg Petit Fils fromage frais, Dairylea cheese triangles
• Fortified fruit juices eg Tropicana
• Alpro, Provamel and So Good soya milks
• Egg yolks
• British margarines and low fat spreads

Vitamin D supplements

You should take a supplement daily if you:

• Avoid exposing your skin to sunlight
• Always cover up outside
• Have naturally darker coloured skin
• Are pregnant or breastfeeding
• Are housebound
• Have cancer
A brilliant team of ten fundraisers from PricewaterhouseCoopers took part in a mammoth and ultimately very messy challenge to raise funds for Brodie Ward. They took on the Men’s Health Survival of the Fittest challenge in November last year and came out muddy but smiling. They were inspired by their friend and colleague, Mabel Ross-Magenty, who had an emergency operation on a critical brain tumour and was cared for by the wonderful staff on the ward.

Introducing our London Marathon runners!

St George's Hospital Charity has a total of nine people so far running the Virgin London Marathon on Sunday 22nd April.

Sophie Guse and Hazel Gleed are our staff representatives on this year’s team, raising money respectively for PICU and paediatric A&E. Sophie says “I am aiming to provide poorly children with some comfort in the form of Music Therapy and light stimulation....looking to alleviate anxieties and provide some comfort through the tough times.” While Hazel says “The money I raise will go towards play equipment for the paediatric emergency department. Getting children to wait, when they are ill, can be really difficult. We have all needed the emergency department at some time in our lives; I have certainly been in there with my children on numerous occasions!”

Other runners include Laura Edwards, whose extended family has already raised over £100,000 for neuro ICU in memory of young Tom Wallace and who were voted “Fundraiser of the Year” in the JustGiving Awards last year. Jenny Tasker has supported us in many ways over the past couple of years and proudly drew the Grand Christmas Raffle for us in December 2012. Jenny’s fundraising will go towards a Gastrolyzer Breath Test (a hand held device used to diagnose food intolerances). Jenny has already been sponsored by the staff in the Gastroenterology Department!

Sarah Bixley who helped organise the fundraising on behalf of the whole team, said: “Since her treatment on Brodie Ward, Mabel has been making a fantastic recovery and this was only possible with unrelenting support and critical after-care, providing a much needed lifeline for her and her family during this difficult period, something they could not have managed without.” The team, who had aimed to raise £1,000, managed to completely smash their target and collect £1,500, which was then matched by their employers, PricewaterhouseCoopers, so that the total amount donated to St George’s Hospital Charity is £3,000, all for the benefit of Brodie Ward!

The kindness of strangers

When a customer got to the checkout at Sainsbury’s in Tooting his heart sank. He checked and re-checked his pockets, frustration mounting. His wallet was gone. He was now in the embarrassing position of being stranded in a wheelchair with no money and no way to pay.

Luckily a guardian Angel, in the form of Sainsbury’s cashier Ramilla Shah, was working on the checkout that day. Without any expectation of reimbursement she packed his bags and paid his bills, not even stopping to ask for his name and address. She agreed to accept the cash, under the proviso it was donated to a worthy cause. She then went out and bought a Cozy Coupe car for the children at St George’s and delivered it to the hospital personally. When she dropped it off at the fundraising office and told us her story it made us smile. Sainsbury’s Head Office was equally impressed and sent her back to the hospital to take a look at the car ‘in action’. While visiting the playroom she met with play specialist Deborah Edgington and one of our younger patients, Ange-Arielle.