MAKING A SPLASH
Dorothy’s recovery goes swimmingly

FOUNDATION TRUST
Application reaches major milestone
Top medical publication promotes hospital centre

An inventive Southampton hospital service being offered to people with breathing difficulties has been published by a top European medical journal.

The Respiratory Centre, which opened at Southampton General Hospital in 2000, is one of the UK’s leading intermediate care services for chronic obstructive pulmonary disease (COPD).

It allows patients already known to the service to refer themselves to the hospital for an urgent review if they feel their condition is worsening.

Once referred, patients have access to a specialist nurse, physio and respiratory consultant. The service offers oxygen assessments, nurse-led local clinics, fitness assessments, community home visits and palliative care.

A recent internal audit carried out by the centre found that 94 per cent of patients who had urgently referred themselves were discharged home following an examination and escalation of treatment.

The audit, led by respiratory consultant Dr Ramesh Kurukulaarath and conducted by a team of junior doctors and nurses at SUHT, was accepted by the European Respiratory Journal and published in October.

Katherine Austin, Senior Sister for the Respiratory Centre, said: “The team here work so hard in helping the many who suffer breathing difficulties and we are absolutely thrilled to have been recognised by such a respected publication.

“Through our system of self-referral, we are able to offer patients dedicated and personal one-to-one treatment, while taking the strain off other areas of the health service at the same time.”

The innovative techniques employed by the centre have kept many people out of hospital and saved the NHS thousands of pounds.

Hospital’s turnaround recognised by health watchdogs

SUHT has taken another step forward in its drive to become the UK’s leading clinical academic centre with the publication of this year’s Healthcare Commission annual health check ratings.

The hospital’s rating has improved for the third year in a row and it is now recognised to be making good use of resources and offering good quality services to patients.

Everything from cleanliness and patient safety to waiting times and complaints handling was scrutinised in the tough assessment by England’s healthcare watchdogs.

The Trust recorded superb results in a variety of individual assessments, gaining top marks for standard of care (9/9), dignity and respect (10/10) and keeping the public healthy (4/4).

SUHT has rapidly scaled the rankings table in the past few years to hit “good” levels. Only three years ago, the Trust was marked as “weak” and “fair” in the two categories.

Haydn’s bright future

The Daily Echo followed up last month’s cover story about Haydn Boxall – the youngest ever patient to undergo brain surgery for epilepsy at Southampton General Hospital.
The 72-year-old was one of the first patients on SUHT’s new enhanced recovery programme. Dorothy, from Hedge End, near Southampton, was diagnosed with bowel cancer earlier this year, and needed to have about six centimetres of her bowel removed.

In the past, with a conventional open procedure, this would have meant an average stay in hospital of around ten days, but as her surgery could be done laparoscopically, also known as keyhole surgery, Dorothy was told she could expect to be home within five days of her operation. In September, SUHT began trialling an enhanced recovery programme for elective laparoscopic colorectal surgery, on ward E7. The new ERALS (enhanced recovery after laparoscopic surgery) programme is led by consultant colorectal surgeons Paul Nichols and John Knight.

Dorothy had her operation on the Friday and was up and walking the next morning. By Monday she was back home with her husband Peter, and within three weeks she was enjoying using their swimming pool once more.

Imogen Fecher, the Trust's colorectal support sister and co-ordinator of the enhanced recovery programme, said: “We aim to get patients up and about and eating much quicker than we have in the past. Extensive studies have shown that lengthy stays in hospital following these operations are not always necessary. "Our nurse practitioner sees the patients a week before their surgery to explain the process and we give them a patient information booklet on enhanced recovery – it’s really important that they feel informed. This programme also gives patients more control of their recovery. "They have access to a 24-hour nurse-led hotline that they can call with any concerns and can be directly readmitted if necessary. "About 30% of our patients can benefit from this and we hope the figure will increase to around 85% once we are able to perform more surgery laparoscopically."

Dorothy, who used to work as a cashier, said: “I was a bit sceptical at first that they wanted to get me home so quickly, but I've always been a strong person and after my operation I was keen to work hard at my recovery and go home to Peter. It was great to be swimming again so soon too. The literature they gave me was very helpful and everyone has been marvellous since I got my diagnosis.”

The enhanced recovery programme isn’t the only Southampton trial in which Dorothy is taking part.

She has to have chemotherapy to stop the cancer returning and has been selected for a trial being run by Cancer Research UK.

This is a trial comparing 12 weeks and 24 weeks of chemotherapy for people who have had surgery for bowel cancer. They usually have 24 weeks of treatment, but research has suggested that 12 weeks may be just as effective and cause fewer side effects.

Dorothy said: “Now I can’t wait to take a holiday at our house in Morocco – we haven’t been able to go for two years as I haven’t been well enough. I can swim in the sea there.”

Foundation Trust application passes major milestone

The hospital’s application to become a Foundation Trust reached a major milestone recently when South Central Strategic Health Authority gave it the green light to go forward to the Department of Health.

The Department will assess the application for four weeks and if it agrees with the SHA’s recommendations will approve SUHT as a Trust that is ready to go forward to the final stage in becoming a Foundation Trust – the Monitor assessment.

In the meantime, the hospital’s 20,000 members have been finding out more about the vote that will form its first Members’ Council.

Information sessions for members took place during October and more than 50 attendees at the public sessions have already expressed a firm interest in standing for election.

Chair of the Trust, John Trewby, said: "It’s great to be out and about in the community and with our staff meeting our members and listening to their views. “It has been my privilege to experience the huge support that exists for our ambition to join the top flight of UK hospitals and with our members on board I know we can make it!" For more information about the Foundation Trust application, membership or the Members’ Council election, please call our membership office on 023 8079 5199 or email ft@suht.swest.nhs.uk
Two-year-old Harvey Andrew-Stone has just started playschool and is enjoying making new friends and playing games like all the other children.

But without twice-weekly intravenous injections of Factor VIII his severe haemophilia could put him in danger, because his blood takes longer to clot.

People with severe haemophilia can bleed spontaneously and internally, without any cuts, grazes or bruises. The internal bleeding usually happens into joints, such as the ankles, knees and elbows.

Luckily for Harvey, his mum, Sarah-Jayne, has learnt to administer two injections of Factor VIII each week, at their family home in Hamble, Southampton. This treatment is called prophylaxis and it replaces the clotting factor that is missing from his blood.

This Factor VIII is known as a recombinant clotting factor as it is genetically grown, rather than being derived from donated blood.

Sarah-Jayne said: “We found out Harvey had haemophilia when I was pregnant with him and I have had support ever since.

“At first we had to take him to Southampton General Hospital every time he hurt himself, but at the beginning of this year, in partnership with the haemophilia team, I decided to learn to treat him at home, to help make life more normal for him and us.”

Haemostasis nurse specialist Chris Harris taught Sarah-Jayne how to put the medicine together and administer the injections twice a week. Now the Factor VIII is delivered to the family’s home once a month and they don’t need to visit the hospital as often.

Harvey’s dad, Russell, said: “It can be difficult finding a vein to inject into, because he is so young, but if we have any problems we go straight to Chris and she is fantastic. Luckily I run my business from home, as it takes both of us to do the injections. By the time he is nine or ten, we hope he’ll be able to learn to do it himself.”

Fact file

• Haemophilia is a lifelong genetic condition
• Females can carry the condition but only males are affected by it
• About 6,000 people in the UK are affected with haemophilia
• The most common type is haemophilia A, where Factor VIII is either partly or completely missing
• In haemophilia B it is Factor IX that is lacking
• There are many other known bleeding disorders, some of which are rare
Diary of a work experience student

Last year, more than 400 students, aged between 14 and 55, carried out a work experience placement at SUHT. Lara Freeman, aged 17, wrote a diary about her time with Southampton General Hospital’s radiography department.

Monday
My first stop was A&E. I was so excited to see how X-rays are done. As well as seeing patients with minor injuries, I witnessed an x-ray of a man who had had several knee operations. It was remarkable to see how his knee had been rebuilt.

The radiographer explained how bones break while showing me how the equipment works and why the positioning of a patient is so important during an x-ray. Today has been really exciting, interesting and very worthwhile.

Tuesday
I spent today in the cardiac department. I went into theatre where a 10 month-old baby was having keyhole surgery and saw the echo of the baby’s heart.

I then watched as contrast dye was injected through a cannula in the arm so the radiographer could detect and take pictures of any abnormalities in the heart.

Today was truly amazing. I feel honoured to have witnessed something so incredible and to have worked with such a wide range of skilled practitioners. I learnt so much.

Wednesday
Today I watched patients have barium swallows, which is an x-ray test where you drink a liquid that contains barium sulphate that is used to obtain pictures of your upper gut. It was incredible to see the inside of a body on a screen.

I also watched ultrasounds on children. At first it just looked like a fuzzy black and white mass, but once the pictures were explained to me, they started to make more sense.

Thursday
Today I was in CT, a body scanner where all the body can be viewed in one scan. However, the machine slices the images up into very small segments to see inside the body.

All the staff were really nice. I was shown and taught all about the scanner itself, the pictures and the contrast. I was quizzed with questions and even managed to answer a few (I was very proud of myself) and made my previous learning worthwhile.

Every time a scan took place, it was explained to me in detail. I was also shown how to connect the contrast tube onto the patient’s cannula. One patient allowed me to feel their arm while the dye was being injected. This was an unbelievable feeling.

Friday
For the last day of my placement, I was in Endoscopy and worked with two student radiographers who were really enthusiastic and happy to share their knowledge of their course with me.

I had a really great week and this was thanks to all staff in radiography. Throughout my placement, I saw and learnt much more than expected and I am truly grateful for the opportunity. I could not have asked for a better week and the experience has definitely helped me in my career choices.

Thanks a bunch

Flowers kindly donated by The Floral Shop.

Jan Rudd has been given a special thank you by the audiology department at the Royal South Hants Hospital, for her efforts to help them collect patient feedback.

Gemma Tyler, the audiologist who nominated Jan, explained: “We audit our services through a patient satisfaction questionnaire and recently decided to give this to patients when they come to the audiology reception desk.

“Jan was keen to assist the department and she helps patients complete the questionnaires if they are having trouble. We had hoped to get at least ten completed per month, but Jan collected this many each week.

“We would not be able to collect this information without Jan. Thanks to her efforts we can work towards improving the quality of care we give our patients.”

Do you know a colleague who’s gone beyond the call of duty? Say thanks to them! Email your nomination to connect@suht.swest.nhs.uk

Kim Sutton, voluntary services manager, said: “We work with education providers across the city to provide placements for students. It is a way of investing in our future workforce and demonstrating the huge range of careers available here.”

To find out more about work experience at SUHT, contact Kim on ext 6062 or email kim.sutton@suht.swest.nhs.uk
Tell us a little bit about your background
I am married with three children and trained as an engineer within the electricity supply industry. Then I had a commercial career, initially in engineering and finally selling prisons to HM Prison Service.

Who do you have at home?
The cat, the wife and one daughter during the academic year, with another daughter and our son returning when university is in recess.

What do you get up to in your spare time?
Until recently I was a Lifeboat crew member. Nowadays I lead a more sedentary life style -as my waistline bears witness.

What’s the best book you’ve ever read?
Not surprisingly, the Bible. And I’m not just saying this because I have an appraisal due.

Favourite film?
Without hesitation or doubt, it’s Blazing Saddles.

What three items would you take with you on a desert island?
An everlasting glass of Guinness, my MP3 player/phone and my Study Bible.

Who has inspired your career?
The people I work with in the Emergency Department, General Intensive Care Unit, the Cardiothoracic directorate and the Acute Medical Unit, with support from my colleagues in Chaplaincy.

Why did you choose to work for the NHS?
Because it’s about caring.

Cleaning up our act
Cleaning continues to be a top priority at Southampton’s teaching hospitals.

Earlier this year, the Trust called in consultants recommended by the Department of Health to carry out an external review of its cleaning contract. Outsourced by Medirest, the contract is currently worth £4.2m – reflecting the importance the organisation places on keeping the hospital in tip-top condition.

An in-house monitoring team has recently been appointed to ensure standards remain high.

The Trust has also introduced a 24-hour cleaning hotline, enabling patients, visitors and staff to report any fault, flood or problem area by calling 4006 or bleeping 2601. A rapid response clean-up squad has been launched to deal with these incidents.

Weekly meetings take place between the monitoring team and the contractor to discuss response times, staff turnover and any failures to meet standards.

The hospital has been split into three cleaning zones – very high risk (such as intensive care and operating theatres, high risk (hospital wards) and normal (rest of the site). Wards are also to be issued with their own cleaning schedule and service agreement to ensure every area receives thorough treatment.

The improved service follows the biggest ever deep clean at Southampton General Hospital, in which every single surface in all 50 wards were targeted. The blitz included ceilings, behind beds and radiators, and inside ventilation ducts and light-fittings.

There are now 30 matrons at the Trust and an expanded housekeeping team to help drive up standards on wards. The increase in numbers follows the appointment of 22 matrons over the last two years, to enhance frontline leadership for nurses.
The Wessex Clinical Genetics department, who won this year’s National NHS regatta in September. The seven-strong female doctor and nurse crew battled together to gain the two point lead and win the competition. For their efforts, the team have won a free entry worth £1,500 to the next regatta.

**Congratulations**

Martin Stephens, Divisional Clinical Director and Associate Medical Director for Clinical Effectiveness, who has been appointed as the National Clinical Director for Hospital Pharmacy. Martin will relinquish his DCD post but will remain at the Trust part-time as Associate Medical Director for Clinical Effectiveness and Medicines Management.

Dr John Heyworth, who has been appointed president of the national College of Emergency Medicine. John is the third member of the hospital’s Emergency Department team to take up a role with the college, which was set up to advance patient care, education and research in emergency medicine.

His role as president will include meeting with officials from the Department of Health, the government, other medical colleges and health professionals from around the country on a wide variety of matters relating to emergency medicine.

Elaine Lennan, the Trust’s lead chemotherapy nurse, and her colleagues Louise Hooker and Nikki McKeag, who were awarded the Best Professional Education Initiative at the University of Southampton’s mentor of the year. Kirsty was nominated by one of the student nurses she supported while in practice.

Angelika Themessl, Stuart Harrison, Julian Williams, Laura Back, Ariene Vega, Vincent Neshava, Matthew Coleman, Jeffrey Guanzon, Bryre Butcher and Alyte Podvoiks who came up with the best ten suggestions through the Trust’s I’ve Got A Good Idea scheme. Each member of staff received a £20 Marks and Spencer voucher and their ideas will be considered by the relevant departments/management teams. The top ten suggestions included a text messaging system to remind patients of forthcoming appointments, a prevention measure to avoid wasting drugs, re-siting of blood fridges and a walk-in GP surgery for staff.

The Trust pharmacy department and nutrition support team, who have been recognised nationally for their non-medical prescribing scheme.

The teams will be collecting the prestigious GlaxoSmithKline Advanced Practitioner Award 2008 at a ceremony in Leicestershire on November 21.

Peter Austin, senior pharmacist at SUHT, said: “We are extremely pleased to have had our achievements recognised by the industry. It is a measure of how rapidly we are moving forward in the development of non-medical prescribing in Southampton.”

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Complete this puzzle to be in with a chance of winning a meal at the Tiffin Club worth up to £25. Enter numbers from 1 to 9 into the blank squares, so that every row, every column and every 3x3 square has one of each digit. Cut out and send your entry through the internal post to Connect, Mailpoint 18, Trust Management Offices, SGH, by Friday 21st November.

Congratulations to Christine Tudor from IDEAL, who successfully completed Issue 15’s puzzle to scoop the prize. www.tiffinclub.co.uk