

the G1ST

News from Guy's and St Thomas' Issue 13 | 2015

Staff stars shine bright

Doreen Lawrence
presents Trust Awards





Welcome

...to the winter edition of *the GiST* magazine which includes news and features about the often remarkable work that Guy's and St Thomas' staff do in our hospitals and in the local community that we serve.

A theme of this issue is the importance of providing holistic care for our patients, treating the person and not just their medical condition.

This is demonstrated by the uplifting story of Paul Colwell, whose life was saved in A&E and other areas of the hospital and then turned around by the Pathway homelessness team – their work is profiled on page 11.

It is also exemplified by the psychological and medical care that our staff provide for patients with chronic skin conditions – read Tara Burton's story on page 6 to find out more.

And James Jenkins, a matron in our @home service, is featured on pages 18 and 19 explaining how older patients can now often be treated in their own homes rather than in hospital.

I hope you enjoy this issue.

Ron Kerr

Chief Executive
Guy's and St Thomas'
NHS Foundation Trust



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NHS Health Checks nurse Thelma Bangura

Apology to the family of George Bailey

We would like to apologise to the family of George Bailey (pictured right with nurse Andrea Handley) for any distress caused by the publication of a photograph of him in an article about care for older people in Issue 5 of the *GiST*. It was not our intention in any way to suggest that George was a dementia patient. We are also sorry that this apology was not printed at an earlier date.



Front cover:

Baroness Doreen Lawrence presents the Inspiring Leadership Award to Cathy Ingram at the Guy's and St Thomas' Trust Awards



the GiST is published by Guy's and St Thomas' NHS Foundation Trust



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Cancer patients win major award



Cancer patients who shaped the development of the new Cancer Centre at Guy's Hospital have won a major national award.

The Patient Reference Group for the Cancer Centre won the patient involvement category of the Quality in Care (QIC) Oncology Awards 2014 – winners were announced in December.

Catherine Dale (pictured 2nd left), programme manager for patient centred care, explains: "A Patient Reference Group was established in 2010 to work alongside clinicians and managers to develop the plans for the new Cancer Centre right from the start.

"For example, a patient mentioned how depressing and demoralising it was to have to keep returning to a basement on a regular basis

when undergoing radiotherapy treatment.

"And so our architects have designed a building with radiotherapy on the second floor – the first design of this kind in Europe."

The Cancer Centre will bring together the majority of cancer treatment provided by Guy's and St Thomas' under one roof when it opens next year.

Cancer survivor Diana Crawshaw (pictured 2nd right), who chairs the Patient Reference Group, says: "Every member of the group should feel proud of their efforts. It was inspiring to hear at the awards ceremony about all the innovative work being done in the interests of cancer patients. It was a privilege to be involved in the event."

Fighting Ebola

Guy's and St Thomas' staff are helping to fight Ebola in West Africa through the King's Sierra Leone Partnership (KSLP) at Connaught Hospital in Freetown, Sierra Leone.

The team, which includes retired consultant physician Dr Terry Gibson, is also advising and supporting local and international partners on the wider response.

Its work has gained further national and international attention after Ebola survivor and nurse Will Pooley chose to join up with KSLP when he returned to Sierra Leone.

Following an initial donation by the Trust of around one tonne of medical equipment, Guy's and St Thomas' continues to support



King's Sierra Leone Partnership staff at Connaught Hospital in Freetown, Sierra Leone

the KSLP team through its procurement arm.

This means frontline staff can quickly and efficiently order all the vital medical supplies they need to safely perform their work.

See www.kslp.org.uk for details.

IN THE NEWS

A round-up of media activity featuring Guy's and St Thomas'.

Daily Mail

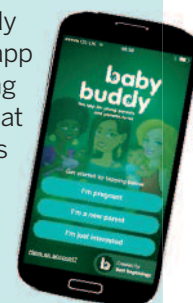
Heart patient Neville Glasgow was featured talking about a medical trial to treat his atrial flutter. The procedure was carried out in an MRI scanner – a UK first. Doctors hope the trial will be a springboard for treating irregular heart problems more effectively.

Southwark News

Gastroenterologist Dr Jude Oben was interviewed about the news that local 10 and 11-year-olds are the most overweight in the country. Dr Oben gave advice to parents about healthy eating and cutting down on calories.

London Live TV

The Baby Buddy mobile phone app trialled by young mothers-to-be at St Thomas' was featured on London Live. It allows users to create a



'virtual friend' who accompanies them on their journey during the first crucial stages of parenthood. Emily Denness, lead midwife in the teenage pregnancy team, was interviewed.

ITV

Good Morning Britain's Dr Hilary Jones visited the Sleep Disorders Centre at Guy's to interview expert Dr Guy Leschziner and give tips to viewers about getting a good night's sleep.



New Ronald McDonald House on track

Plans to build overnight accommodation for families of young patients at Evelina London Children's Hospital have been approved by Lambeth Council.

This is great news for parents of sick children who may need to stay in hospital for weeks or even months at a time.

The new Ronald McDonald House – due to open in 2016 – will be built and run by Ronald McDonald House Charities. This is an independent charity providing free 'home away from home' accommodation for families with sick children in hospital.

Guy's and St Thomas' Charity has provided the site for the new 59-bedroom facility within walking distance of the children's hospital on the St Thomas' site – it will replace the current 20-bedroom facility near Guy's Hospital.

Families will be able to stay free of charge and for as long as their children are being cared for in the Evelina.

Demand for the accommodation outstrips the current number of rooms available. This demand is likely to increase further as the number of children being treated at Evelina London Children's Hospital is increasing every year.

Evelina London treats children from not only the capital but also a wider catchment area throughout the south east and beyond – overnight accommodation means that families do not need to travel long distances to and from hospital each day.

'DIY antibiotics' at home

Patients needing long-term antibiotics can now continue their treatment at home thanks to a specialist team at Guy's and St Thomas'.

The outpatient parenteral antibiotic therapy team (OPAT) teaches patients and carers how to administer intravenous antibiotics themselves.

This medication goes directly into the bloodstream and usually requires patients to stay in hospital until they've finished their course, which can last up to 12 weeks.

Elizabeth Kyle, 62, from Southwark, was admitted to St Thomas' Hospital for eight days with an abscess on her vertebrae. She needed long-term



Clinical nurse specialist Elizabeth O'Donnell with patient Elizabeth Kyle

intravenous antibiotics that would have usually required her to stay in hospital for at least six weeks.

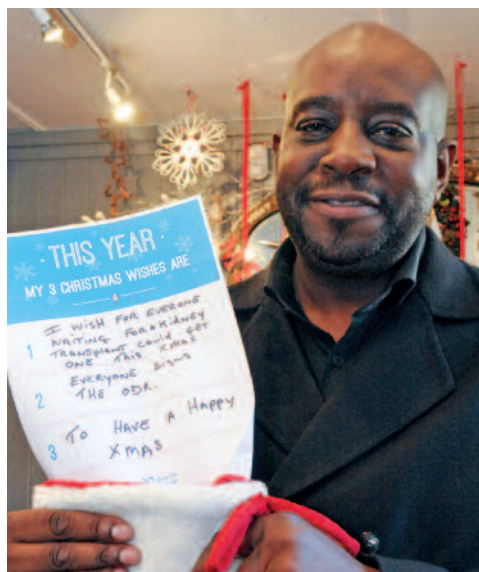
She says: "When you're unwell you will do anything to get better, but staying in hospital for six weeks would have been so disruptive to my life.

I wouldn't have been able to look after my granddaughter or return to my part-time job.

"I was very well looked after by the team, they supported me through the whole process of going home and teaching me to give myself the antibiotics."

Delroy fronts organ donor drive

Delroy Cottrell from Catford, who had a kidney transplant at Guy's Hospital last July, was part of the Christmas List campaign encouraging more people to join the organ donor register.



Delroy has the hereditary illness polycystic kidney disease – as does his brother who is still waiting for a transplant to give him a new lease of life. Their father has also spent the last nine years on dialysis.

He particularly wants people from black and minority ethnic (BME) communities to sign up – they are more susceptible to illnesses such as diabetes but only 36% of BME families agree to organ donation compared to 63% in the rest of the population.

This means people from BME backgrounds end up waiting longer for a transplant.

NHS Blood and Transplant's Christmas List campaign drew attention to the fact that every day in the UK three people die waiting for an organ transplant.

To join the organ donor register, visit www.organdonation.nhs.uk or phone 0300 123 23 23.

Chief Nurse honoured

Chief Nurse Eileen Sills was made a Dame in the Queen's New Year Honours for services to nursing.

Ron Kerr, Chief Executive of Guy's and St Thomas', says: "Eileen is passionately committed to improving the experience of every patient treated in our hospitals and in our community services. The example that she sets is an inspiration to all of us."

Eileen, who has been Chief Nurse since 2005, says: "I have had an amazing 10 years at Guy's and St Thomas' and I would like to thank all the staff who work here because this recognition would not have

happened without them."

She has a national reputation for strong, visible clinical leadership including her introduction of Clinical Fridays – increasing the amount of time that senior nurses spend on the frontline – and the weekly Safe in Our Hands forum where nurses and other staff share successes and challenges to improve patient care. Eileen was also the driving force behind the award-winning 'Barbara's Story' training film to raise staff awareness of dementia.

Other staff included in the New Year Honours were:



- Dr Hilary Cass, a consultant in Evelina London Children's Hospital specialising in neurodisability, received an OBE for services to child health

- Professor Peter Braude, formerly Director of the Assisted Conception Unit at Guy's, received an OBE for services to reproductive medicine.

TOP TWEETS



@Pr1ncessclare

Back in @GSTnhs can't praise the staff here enough! Big Shout out to #beckettward and the high dependency unit! #beststaff #saveourNHS.



@JoshuaDrewNoir

The staff at St Thomas' Hospital have to be the happiest I've ever met, such an awesome bunch.



@OTYOfficial

Had the best morning at the @EvelinaLondon Children's Hospital. Was the most touching experience.



@g_sage

Just leaving @GSTnhs after the birth of our son Edward on Dec 28. Amazing job by all the midwives, especially Anna Tomas Enrique. Thank you.



@lucywarin

V positive experience at @GSTnhs's Urgent Care Centre. Friendly, efficient & reassuring staff, not too bad a wait. Thank you! @supportGSTT.

Follow @GSTnhs

and @EvelinaLondon for all the latest news from Guy's and St Thomas' and Evelina London Children's Hospital.

June 'breaks the ground'

Cancer survivor June Casson 'broke the ground' to signal the start of construction work on Guy's and St Thomas' new Cancer Centre at Queen Mary's Hospital in Sidcup.

June shared the honour with local MP James Brokenshire.

This is a major milestone in the £30 million redevelopment of the Queen Mary's site by Oxleas NHS Foundation Trust.

When it opens in 2016, most patients will no longer have to travel into central London for radiotherapy and chemotherapy – the Sidcup centre will complement the new Cancer Centre at Guy's Hospital.



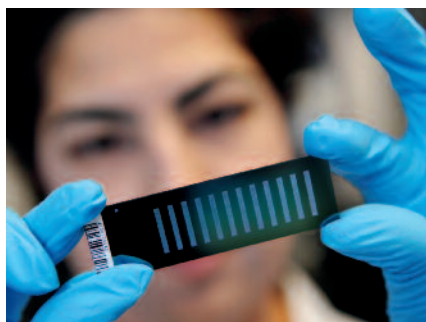
June Casson and James Brokenshire MP on the site of our new Cancer Centre in Sidcup

June says: "I was treated for womb cancer 10 years ago which included daily radiotherapy treatment at St Thomas'. I was travelling up to 90 minutes each way every day for treatment.

"This new Cancer Centre is really needed by patients in Bexley and the surrounding areas because radiotherapy is tiring and traumatic enough without commuting into central London for treatment."

All in the genes

Patients with rare diseases and cancer will benefit from the news that Guy's and St Thomas' will host a pioneering Genomic Medicine Centre – part of the groundbreaking 100,000 Genomes Project. It follows the Prime Minister's pledge to establish the UK as a world leader in genetic research and to transform patient care by unlocking the power of DNA. The three-year project could improve the prediction and prevention of diseases and allow personalisation of drugs and other treatments to specific patients. Our genetics and cancer services will start recruiting suitable patients in the coming months.



“If someone is struggling emotionally, it’s likely to influence how they cope with or manage their physical health.”
Dr Mark Turner

More than skin deep



Clinical psychologist Dr Mark Turner and patient Tara Burton

Most of us would associate skin conditions with itchy, flaky skin, redness, soreness and lumps. We probably wouldn’t consider symptoms such as anxiety, depression and low self-esteem.

But for many patients treated in the St John’s Institute of Dermatology at Guy’s and St Thomas’, having a severe and complex skin disease can lead to self-consciousness, low mood and social isolation, as well as physical symptoms.

For 33-year-old Tara Burton, having Hidradenitis Suppurativa (HS) – a chronic condition that causes abscesses and scarring around the most intimate parts of the body – turned her life upside down.

Tara says: “At one time, I had more than 30 abscesses in a single area – I literally couldn’t move for the pain! I couldn’t walk. I couldn’t load a washing machine. I couldn’t even tend to my children.

“You’re depressed because of the pain and embarrassed by the symptoms. You feel guilty because you can’t fulfil your role as a mum or wife, and frustrated because you can’t perform even the most mundane functions. You feel completely useless. And, of course, the stress of it exacerbates the condition, so it’s a vicious cycle.”

Tara’s situation is not unique. This ‘catch-22’ of emotional and physical symptoms is common across a range of skin conditions. And so St John’s Institute of Dermatology has teamed up with the IMPARTS service to join up psychological and medical care for patients with chronic eczema, psoriasis and HS.

IMPARTS is an initiative funded by King’s Health Partners to integrate mental and physical healthcare for patients at not only Guy’s and St Thomas’ but also King’s College Hospital NHS Foundation Trust and South

London and Maudsley NHS Foundation Trust.

Clinical psychologist Dr Mark Turner explains: “It’s about treating the whole person. People’s psychological well-being and their physical health are inextricably linked – if someone is struggling with a chronic condition like HS, it will almost certainly impact on their well-being more generally.

“Equally, if someone is struggling emotionally, it’s likely to influence how they cope with or manage their physical health. Merging psychological and medical care enables us to offer a more holistic approach to treatment, and allows the patient to feel more understood.”

The IMPARTS programme

offers training for medical and nursing staff to understand psychological distress in their patients. For patients, it offers screening in psychological well-being at clinic appointments and a range of self-help materials tailored to the specific needs of people with severe skin conditions.

“It’s important for medical staff to be able to recognise emotional distress as well as physical symptoms, so it’s great that this programme gets staff thinking more about well-being,” continues Mark.

Tara says: “The care here is second to none. HS is an internal battle as much as an external one, so having emotional support in conjunction with medical care is one of the major things that can change a person’s life.”

Tara Burton runs the UK’s only HS charity, offering information and support for fellow sufferers. For more information, visit www.hstrust.org.



Guy's and St Thomas' staff
Victoria Cheston (far left)
and Dr Bill Newsholme (4th right)
with staff at Ndola Central Hospital
in Zambia

Zambia project wins new funding

Dr Bill Newsholme has a full-time job at Guy's and St Thomas' as a consultant in infectious diseases, general medicine and infection control.

But he is also clinical lead for the GSTT Zambia Link, a partnership between the Trust and two hospitals in Ndola, the second largest city in Zambia in south-central Africa.

Bill's colleague Victoria Cheston, the Trust's Commercial Director, is the managerial lead for the Zambia Link.

Since 2009, Guy's and St Thomas' has been linked with Ndola Central Hospital and Arthur Davidson Children's Hospital.

The partnership supports the development of clinical capacity in the two hospitals in areas including children's health and maternal health.

Almost half of the population of Zambia is aged under 14 and the country has a high infant mortality rate – 68 deaths per 1,000 live births – with a maternal mortality rate of 440 deaths per 100,000 live births.

Guy's and St Thomas' staff provide coaching and mentoring support, together with their clinical expertise, to help their Zambian colleagues.

Bill and Victoria lead a team of dedicated clinical and managerial staff

supporting work in infection control and patient safety, biomedical engineering, children's health, maternal health and dentistry.

The GSTT Zambia Link has been supported by grants from the World Health Organisation and others. Now the project has won a major grant of £207,000 from the Tropical Health & Education Trust (THET) to fund three major initiatives in leadership training, vaccination programmes, and infection control and patient safety.

Dr Bill Newsholme says: "This grant will set up routine vaccinations for all frontline clinical and laboratory staff against Hepatitis B. This is standard practice in Europe and North America. Hepatitis B is a major problem in central and southern Africa so it will give the workforce proper protection.

"We will also be able to improve how the microbiology laboratory works so that staff can diagnose infections and give better treatment to patients."

The THET grant will also help to develop leadership in the hospital workforce. This year, four clinical staff will travel to South Africa to take further training in infection control practice while two others will go to the university

hospital in Gondar, Ethiopia, for audit training so they can set up robust audit processes on site. The aim is to develop key staff into local leaders not just in the hospital but for the community and other hospitals.

The grant will also build on the last two years of work in infection control and patient safety.

Dr Newsholme explains: "Poor hand hygiene can lead to infections like diarrhoea and chest infections passing from patient to patient, or other infections spreading from staff to patients.

"Our previous funders were keen to promote hand hygiene by encouraging the use of alcohol hand gel in places which don't have running water. Since 2012 half of the hospital staff have been trained in hand hygiene and two pharmacists have been taught how to produce alcohol gel. By this summer, they will actually be producing it on site."

The GSTT Zambia Link is funded through the Health Partnership Scheme, a programme to support the development of health services in some of the world's poorest countries – it is supported by the Department for International Development and managed by THET.

Dr Nicky Thomas, who is a consultant health psychologist helping patients with sickle cell disease and other blood disorders, has recently been appointed as Head of Psychological Services at Guy's and St Thomas'. She tells us about the importance of integrating physical and mental health.

Mind and body



Q What is your day job?

A I set up our psychology service more than 17 years ago for people living with sickle cell disease.

Sickle cell is an inherited disorder of the red blood cells which means the blood doesn't flow smoothly and people can get blockages which lead to severe pain.

According to research, the average life expectancy is 45 for women and 42 for men, although with good comprehensive care patients can live for much longer. Here at Guy's and St Thomas' we have patients living with the disease in their 70s.

One of the biggest issues is the threat of severe and acute pain, also known as painful crisis, which stops people from living life normally and makes the condition very stressful to live with.

The clinical health psychology service is embedded in the sickle cell team so we can support patients to improve their quality of life by enhancing their understanding of their illness and how they experience it. We can also help them to develop strategies to cope with symptoms and enable them to adhere to treatment.

Stress is one of the biggest triggers of a sickling episode and so helping to control it enables patients to take control of their condition.

Q What difference has the psychology service made to sickle cell patients?

A Psychology is a normal part of the care that patients receive. Signs of psychological distress can be addressed, according to the patient's needs, which has made a real difference to patients' quality of life and how they cope with their situation.

We know from what patients say in the questionnaires that they complete at the end of therapy sessions that there has been a benefit to them and our own research has shown that the psychology service has reduced pain and hospital admissions.

Other staff have seen the benefits of the psychology service to sickle cell patients because they refer patients to us with other blood disorders such as haemophilia.

Q What do you do as Head of Psychological Services?

A I provide professional leadership for psychologists working in the Trust because we are embedded in different multi-disciplinary teams – there isn't a department of psychology as such. A big part of my role is writing bids for funding from charities and other organisations to support new services in areas that would benefit from psychologists.

Q Where do psychologists make the most impact?

A There are many different areas where clinical health psychologists are doing brilliant work – for example the team led by Sue Smith for cancer patients and the team led by Therese Andre for kidney disease patients.

Melinda Edwards leads the psychology service in Evelina London Children's Hospital. This makes a real difference to children who are going through painful and prolonged treatment that may be very distressing. Psychologists help children understand their treatment and support their parents.

Q Why does psychology matter?

A Psychologists can add enormous value to patients' care.

I want to normalise clinical health psychology and make it a standard part of our care for patients and their families.

Hospitals can be frightening and scary places for patients and so a key part of our role is to help people make sense of the information they are given so they can make informed decisions about their treatment.

Another area where psychology can make a difference is patients' adherence to and compliance with medication. A big piece of work is currently underway in pharmacy looking at ways of applying health psychology to increase adherence to medicines. This is a collaborative project involving pharmacists, led by Professor Graham Davies, and health psychologists, led by Professor John Weinman.

'Desperate Debra' to cut childbirth deaths



A doctor demonstrates the emergency caesarean simulator

An emergency caesarean simulator that allows doctors to experience life-threatening situations is realistic and should be used in training, according to new research.

The study to test the effectiveness of Desperate Debra®, a silicone abdomen that simulates advanced labour, found that 87% of doctors say it is realistic and 93% think it is a useful training device.

Now experts from Guy's and St Thomas' and NHS Fife, who designed Desperate Debra®, are calling for it to be used as a mandatory training device for all gynaecologists and obstetricians.

During emergency caesareans, which affect around 20,000 births per year in the UK, the baby's head may get stuck in the pelvis because the woman is in the advanced stages of labour.

Professor Andrew Shennan, consultant obstetrician at Guy's and St Thomas', says: "An emergency caesarean situation can develop very quickly and can rapidly deteriorate. Although we are thankful that these life-threatening situations are rare, this means that doctors often do not experience them before they are

faced with them for the first time.

"Desperate Debra® allows doctors to experience the difficulties of these scenarios. The simulator can be adjusted to different difficulties and it is highly realistic in terms of how the baby's head and neck moves.

"We have proved that using Desperate Debra® will help train doctors to reduce the likelihood of serious complications for the infant and mother and reduce childbirth deaths."

The research study featured 30 doctors who trialled the simulator at three different difficulty settings.

It compared the ability of senior and junior doctors to deliver the baby, as well as their opinions about how realistic the simulator was.

Dr Graham Tydeman, a consultant in obstetrics and gynaecology at NHS Fife, says: "I wish I'd had the chance to train with a simulator before encountering the real thing.

"Simulators that accurately recreate a clinical experience, particularly in emergency situations and where consequences can be catastrophic, must be the way forward."

Desperate Debra® was funded by Guy's and St Thomas' Charity.

“I had such a massive team of people looking after me. They filled in forms for me, took me to the council and organised temporary housing.”

Paul Colwell

A groundbreaking initiative was set up 12 months ago to improve care for the increasing number of patients affected by the issues of homelessness. Staff and a patient tell us how the Pathway service is transforming health services for homeless people.

Pathway through homelessness

Samantha Dorney-Smith has been working with London's homeless in the community for more than a decade.

In this time, she has seen homelessness rise dramatically, particularly in the mile around St Thomas' Hospital where it is estimated that 65% of London's homeless sleep rough. The area is known as Homeless Central and has the highest number of homeless people in the country.

But in January 2014 Samantha, A&E nurse Rachael Smith, and a multi-disciplinary team set up a groundbreaking initiative to improve the co-ordination of care for homeless patients through a service called Pathway – run by King's Health Partners.

Samantha, who is the joint service lead, explains: "The unique thing about this service is that we work across three NHS trusts – Guy's and St Thomas', King's College Hospital and South London and Maudsley.

"Homeless people often visit a number of different hospital sites and, with our shared database, we spot things that others might not. We have voluntary sector housing workers in the team, and affiliations with many other partnership organisations, so we can provide a really joined-up service for these patients.

"It might be housing, drug and alcohol services, or a GP to co-ordinate and provide preventative healthcare."

Dr Zana Khan, GP Specialist in Homeless and Inclusion Health, says:

"Pathway has allowed us to reduce frequent attendance, which this client group are well known for. In our first six months, A&E visits and the length of hospital stay for this group has dropped considerably. Crucially, it has allowed us to maximise the benefit of necessary admissions to hospital."

Professor Sir Robert Lechler, Executive Director of King's Health Partners, adds: "The impact of homelessness on the health and well-being of an individual is profound, with an average life expectancy of just 47 years. The Pathway team has made an outstanding contribution since it launched in January 2014."

Paul Colwell's story

I'd been working as a first mate on a private yacht in the Mediterranean for two years. The boat I was on was sold so I came up to London and was looking for work, staying with friends in Vauxhall on their sofa.

Then I caught swine flu. I was having trouble breathing and my temperature was high so I went to a doctor who rushed me into A&E. I went into a coma and six weeks later, I woke up at St Thomas' looking at Big Ben. I'd had a lot of complications – my lungs had collapsed and I had a tracheotomy. My stomach had rotted so they had to take most of my colon out.

When I woke from the coma, my weight had halved, from 14 stone to just seven stone. I was on morphine and 40



Paul Colwell with members of the Pathway team

kinds of drugs, and I had major memory loss. I couldn't walk and had a colostomy bag attached to me. I was extremely depressed. I had no money and I couldn't go back to my friend's sofa as I was too ill to get up three flights of stairs. I thought I was going to end up on the streets.

David Hunter, my housing worker at Pathway, often came to my bedside. If he hadn't been around I'd be dead. Rachel, my Pathway nurse, visited daily and helped with benefits and healthcare. I had such a massive team of people looking after me. They filled in forms for me, took me to the council and organised temporary housing.

I've got an amazing little studio now. I go in and I shut my door, turn on the heating and the TV and lie on my bed with a cup of tea. It's the most wonderful feeling. It's priceless."

The INPUT Pain Management Unit at St Thomas' Hospital combines physical and psychological therapies in group-based treatment to help patients who suffer from chronic pain. Patients and staff explain in their own words how this unique service changes lives.

Helping people live with chronic pain

Dr Eleanor Carson, clinical psychologist

Acute pain is a natural sign that the body is injured and needs to protect itself but sometimes the body's responses continue long after the injury – this is chronic pain. The nervous system becomes hyper-sensitive, triggering the protective impulses normally reserved for acute injury and severely limiting quality of life.

The people we help have become stuck in a struggle with pain and come to us after lots of treatment and disappointments. They are frequently anxious and depressed, and their pain is often exacerbated by stress. At INPUT, we use physiotherapy, psychology, nursing and occupational therapy to help

them not only accept their condition but also rediscover the things that are important to them.

Some patients report a decrease in pain following their stay at INPUT, although there is no objective way of measuring this. What most patients do seem sure of is that, while their pain levels may be the same, their quality of life is so much better.

Leanne Exley, former patient

I have injuries to my neck, pelvis, ankle and wrist. I used to love my job as a school caretaker but had to give it up years ago. I was housebound in a wheelchair and would avoid family events because I didn't want anyone to see how ill I was. I'd tried various treatments, was

on a lot of medication, and was as close as I could be to feeling suicidal. Then my GP told me about INPUT.

I'd been the only ill person in my life but when I came here there were nine other people in the same boat. They were all such awesome and inspiring people and we've built up strong bonds. I could talk to any one of the multi-disciplinary team at INPUT about anything and I can't say one negative thing about them. They made me realise that I am more than just my pain.

Now my children are so proud of me. One of the first things I did when I came out was arrange a family barbecue, which was a big moment for me. I'm off all the medication now and I feel alive! I want to relearn so many things.



Leanne Exley, former INPUT Pain Unit patient



Clinical psychologist Dr Eleanor Carson (left) talks to patient Sharon Walker

“I’m much more myself. I feel ready to try going out with my kids on a Friday night.”
Sharon Walker

Sharon Walker, current patient

I had an operation on my back and then developed rheumatoid arthritis, osteoarthritis and a bone condition – all with chronic pain. I’d had physio, acupuncture, epidural injections and was addicted to medication. I was isolated in a bedroom for four years. I thought I’d be stuck in that room for the rest of my life.

When I came to INPUT, I was worried they’d say it was all in my mind, but I needed help to try to manage the rest of my life. It’s been great to meet people who feel like me – we’re putting together a Facebook group to support each other.

During your first week at INPUT, you’re told you’ll have pain for the rest of your life. That’s a wake-up call and accepting it is the hardest thing. But yesterday I went

on the bus for the first time in four years.

Halfway through the course, I have a fresh outlook on life. It’s not a miracle and it’s not a cure – I’m just learning to live in the moment. Just two weeks ago, I wasn’t able to sit down on a chair. Now I’m doing it.

My son, who is my full-time carer, can see that I’m much more myself. I feel ready to try going out with my kids on a Friday night. And my employer has adapted my study so I can work from home before I go back to the office. The future is scary, but exciting.

More than 10 million people are aged over 65 in the UK and by 2050 this figure is expected to almost double to 19 million. It has never been more important to care for older patients based on their individual needs, not their age. We take a look inside the Older Persons' Unit at St Thomas' Hospital and the Older Persons' Assessment Unit at Guy's Hospital to find out how staff are making a difference to our patients by doing just that.

Treating older people as individuals

Safe and welcoming wards

"Older people should not be stereotyped. From parliamentarians, war veterans and the Queen's seamstress to market stall holders and the oldest woman in the UK, each and every one of our patients is individual and we base our care around them and their needs, not their age."



Dr Rebekah Schiff

So says Dr Rebekah Schiff, a consultant on the Older Persons' Unit at St Thomas' Hospital.

Over the past two years, extensive work has been carried out to transform the unit – three linked wards on the 9th floor of North Wing at St Thomas' – into an area specifically designed to meet the needs of our older patients.

The wards now provide the safest possible environment for patients:

- Soft flooring has been installed to absorb noise and protect patients who may be at risk of suffering a fall
- Special bins close quietly so they don't wake patients by slamming shut
- Bed bays have been colour-coded so they are more easily recognisable
- New chairs have been installed which were designed by an 80-year-old for people of a similar age.

"It's not just the safety aspect of the wards that's important," explains Dr Schiff. "More recently we've been working on an art project to create a welcoming, comfortable environment for our patients."

"We have commissioned artwork for the unit so each bed bay will have a theme."

"We hope that by offering a welcoming and bright environment with familiar scenes, our patients will know that our wards are just for them, and that we are there to care for them and improve their quality of life, while respecting their independence and individuality."

Old Vic New Voices

Older patients have recently got involved in the development of a new play by Old Vic New Voices, a community and education programme run by the Old Vic Theatre in Waterloo.

Researcher Naomi Alexander spoke to outpatients in the Older Persons' Assessment Unit at Guy's Hospital.

"The research I've been doing has



Staff Nurse Tonye Oruitemeka with patient Patricia Edwards

been fascinating, it has really opened my eyes to the way older people are sometimes viewed," explains Naomi.

"When looking into attitudes about age, I've learned that a lot of younger people group all 'old' people together, as if they're all the same. It's astonishing how these perceptions haven't changed over time, because the older a person is, the more experiences they've had, the more interesting they become, and the more we can learn from them."

"It was refreshing to see how patients in the Older Persons' Assessment Unit at Guy's were treated. The hospital was so warm and welcoming. I was overwhelmed by the sense of love and caring that I saw from every member of staff that I met."



Chief Nurse Eileen Sills trains Prime Minister David Cameron and his Cabinet to be 'dementia friends'

10 tips for ageing well

- Exercise
- Eat a healthy diet
- Don't smoke
- Engage socially with others
- Have a positive attitude about ageing
- Get regular health checks
- Protect your eyes
- Avoid excessive sun exposure
- Get good quality sleep
- Pay attention to your pension

More top tips and details of local services available from Age UK
www.ageuk.org.uk



A scene from 'Barbara's Story'

Barbara's success continues

It started out as a dementia training film for our 13,500 staff, now 'Barbara's Story' has been watched more than 22,000 times on YouTube in countries as far afield as Chile and New Zealand.

Chief Nurse Eileen Sills recently visited

Prime Minister David Cameron and members of the Cabinet to show them the film as part of their training to become 'dementia friends'.

Eileen says: "I am passionate about making London the first dementia friendly city, and I'm delighted to have been able to give this training to the Prime Minister and the Cabinet.

"We've seen it's the small things that make the biggest difference – the smiles, the eye contact, the time. By raising this kind of understanding we can improve the lives of people living with dementia as they go shopping, play sport, go to museums, the cinema or theatre, and visit friends and family without fear."

You can watch 'Barbara, the whole story' via our YouTube channel
www.youtube.com/user/GSTThns.

Stories of outstanding achievement and dedication brought tears to the eyes of guests at the Guy's and St Thomas' Trust Awards in November – the winners' stories are inspirational.

TRUST AWARDS

celebrate staff stars



Kelle Bryan presents Romi Grau with her Volunteer/Fundraiser of the Year accolade

Staff and volunteers who provide exceptional patient care or support services were recognised at a star-studded ceremony at the Park Plaza Hotel.

Special guests who presented awards included Baroness Doreen Lawrence, ITN newsreader Julie Etchingham, and Kelle Bryan from 90s pop group Eternal who is a grateful patient of the Lupus Unit at St Thomas' Hospital.

The evening of celebration was hosted by Chief Nurse Eileen Sills and Finance Director Martin Shaw.

Baroness Lawrence said: "You should all congratulate yourselves for the remarkable work that you do. The thing that I admire most is the teamwork and

the way that you all support each other to ensure that you really make a difference to your patients."

She presented the Inspiring Leadership Award to Cathy Ingram who manages the community rehabilitation and therapy service.

Podiatrist Helen Rapley says: "Cathy has worked in the community for many years providing expertise, guidance and inspiration. Despite coping with a bereavement and the serious illness of her partner, she continues to motivate herself and her team to provide high quality care.

"Her tireless commitment to the local population and the staff she leads is a credit to her and the organisation."

The CARE Award Team of the Year accolade was won by Northumberland Ward at St Thomas' which cares for patients with gastro-intestinal problems. Staff were singled out for their efforts to help a dying 38-year-old man and his fiancée to get married just 24 hours before he passed away.

Nurse Faye Jones, who worked in the team, says: "It was something I will always remember. The teamwork was amazing as we organised the room in two hours. We covered all the chairs in sheets and decorated the room.

"The patient had difficulty speaking but we managed to get him into a wheelchair and he was able to say his



Northumberland Ward, team winners of the Patricia Moberly CARE Award



Gavin Tiffin, Volunteer/Fundraiser of the Year



The Trust's apprentices won the Chairman and Chief Executive's Award

vows. It was one of those situations where we put ourselves into their shoes and did everything possible to make it special for them both."

Romi Grau and Gavin Tiffin were joint winners of the Volunteer/Fundraiser of the Year award.

Romi is a tireless volunteer in the pulmonary rehabilitation team, the Friends shop and the Friends office, as well as in many other departments.

Senior physiotherapist Ruth Kent says: "Romi has been working with the pulmonary rehabilitation team for many years as a volunteer. She comes here twice a week and makes tea and coffee for all the patients.

"Romi is always happy, caring and full of energy despite having a long-term health condition herself. She is a valued member of our team and I think we are all the better for having her as a part of it."

Gavin, whose 'day job' is being the Trust's hospitality manager, has raised more than £12,000 for Evelina London Children's Hospital.

In 2013 he cycled an amazing 360 miles from London to Paris and ran four marathons in four weeks. In 2014 he completed a 66-mile 'ultra' marathon in Switzerland.

And the winners are...

- Award for Excellence in Support Services – Essentia portering team
- Volunteer/Fundraiser of the Year – Romi Grau and Gavin Tiffin
- Community Services Award – Lane Fox Outreach Team
- Award for Dignity and Compassion – Denise Gorman, clinical nurse specialist in the cancer team
- Award for Innovation – The Golden Hour Team in the eye department
- Clinical Service or Team of the Year – Early Pregnancy and Acute Gynaecology Unit
- Inspiring Leadership Award – Cathy Ingram
- Patricia Moberly CARE Awards – an individual and a team were chosen from the winners of the Trust's monthly CARE Awards
Individual winner – Francis Busingye, food service assistant
Team winners – Northumberland Ward
- The Chairman and Chief Executive's Award – the Trust's apprentices.

James Jenkins, a matron in the @home service, talks to **Dr Ian Abbs**, the Trust's Medical Director, about providing care and support for older people in their own homes.

Role reversal

Q Why did you join the @home service?

A I'd spent most of my career working with critically ill patients in A&E. I noticed that more people were being admitted to hospital who, with the support of the right team with the right skills, could have been treated at home. When I saw the advert recruiting @home service matrons I jumped at the chance. I wanted to be a mechanism for change and get on and do something about it.

Q What's a typical day like for you?

A I start work early, getting in at around 7am as the service runs from 8am to 11pm seven days a week. We have two teams made up of community nurses, GPs, therapists and a pharmacist covering Lambeth and Southwark. Patients are referred by health professionals and after an initial assessment are seen within two hours by a senior nurse or GP. My job is to organise the team so everyone knows about

patients who have been referred to us and to allocate staff to patients. We see patients with many different conditions including heart failure and severe breathing problems. Our team works closely with hospital consultants, London Ambulance Service paramedics, respiratory and heart failure teams, and nurses caring for patients coming to the end of their life.

Q How do you make a difference?

A I hope what we do makes a difference to people's lives. We provide expert care which is tailor-made to each individual patient we see.

It's about making life better for the whole person. We provide not only medical care but also therapy, help with everyday tasks such as washing and dressing, ensuring that patients get regular meals and supporting them with their medication. I would describe the @home team as a 'hit squad' bringing community and hospital services together to provide the best possible care for our patients.

Q What is your proudest moment since you joined the @home service?

A It was when we cared for a patient nearing the end of his life who had a severe infection but didn't want to go into





"I hope what we do makes a difference to people's lives. It's about making life better for the whole person."

hospital. The work of the @home service meant that he could stay at home for much longer.

Q What other benefits does the @home service bring?

A We see approximately 200 patients a month. On average patients stay in hospital about three days so this means the @home service is freeing up beds for other patients who really need to be in hospital. We know that patients recover better with support at home so @home is good news for not only patients but also the NHS as a whole.

@home is part of Guy's and St Thomas' Adult Local Services for Lambeth and Southwark residents.



Why I fundraise

David Giles was successfully treated for lung cancer at Guy's in 2011. Last summer, four of his friends raised £4,000 by cycling 1,000 kilometres in six days from Calais to the Alpe d'Huez – with David motoring behind them.

The weather varied from baking sunshine to heavy rain to thick fog, but the intrepid cyclists were undeterred. The final day provided their biggest challenge – a nine-mile mountain climb, one of the stages of the Tour de France.

Cyclist Steve Line said: "The strength came from my parents who both recently passed away with cancer. That reminded me of the importance of achieving something like this while I am still fit and healthy – and to celebrate the great work of cancer care at Guy's and St Thomas'."

As David was reunited with the riders at the top of the mountain, he reflected on their achievements.

He says: "I'm not ashamed to say I shed a few tears. My thanks to Guy's once again for making it possible to have this experience!"

Inspired? You can read David's story and find out why he's supporting Guy's Cancer Centre Appeal at www.togetherwecan.org.uk/david

Say what?

Ron Huseyin,
chef in Sheperd Hall
restaurant at St Thomas'



Q Growing up, what did you want to be?

A A chef. My parents were both chefs when I was growing up in Cyprus so that is what I wanted to be too.

Q If you could learn one thing?

A Tailoring. I learned a bit when I was younger and it would be a good skill to have.

Q Tell us something about you that we don't know?

A I love old films.

Q What's your best advice?

A Try to be happy and always be nice to other people. Work hard for what you want.

Q If you could have a superpower what would it be?

A I would not want to have a superpower. I'm happy with the way I am. To be healthy and to be able to look after my family – that's all I want.

Q If you could meet anyone, who would it be?

A My late father. He died 23 years ago but I still miss him.

Q You're well known for making great omelettes. What's your secret?

A I was taught the special technique by a great Italian chef from the Lyons Corner House. He showed me how to roll the omelette over in the pan with one hand. It took me months – it's not easy!

Evelina experts help children in Vietnam

A team from the operating theatres in Evelina London Children's Hospital has built links with medical staff at Can Tho University Hospital in Vietnam's Mekong Delta.

They travelled out to Vietnam in November with the charity Medical Education Exchange Teams (MEET) to operate on poor children and to help educate local doctors and nurses.

The Evelina team included three surgeons, anaesthetists and supporting theatre and recovery nurses.

A total of 56 children underwent successful surgery to correct cleft palates, hand deformities and urological problems.

Children's anaesthetist Dr Lance Tooke says: "Sharing knowledge with the medical team in Vietnam is a great experience. We want to leave a legacy in the country so the medical staff there can learn best practice when it comes to children's care."

"Within the next five years, we hope to help set up a new children's unit at Can Tho University Hospital because at the moment there isn't a dedicated centre for treating children in the south of the country. Currently children and their families have to travel to Ho Chi Minh City or Hanoi for complex operations."

The Evelina team is due to return to Vietnam later this year.



Staff with a young patient in Vietnam

Groundbreaking eye operation celebrates 65 years

During World War II, fighter pilots with shards of their plane's Perspex canopy embedded in their eyes could not have known they would inspire the greatest advance in eye surgery of the 20th century.

Sunday 8 February marks the 65th anniversary of the invention of modern cataract surgery, which has saved the sight of more than 200 million people worldwide, by a St Thomas' Hospital ophthalmologist.

Although cataract surgery had existed in various forms since 1000 BC, the only treatment for a cataract until 1950 was to surgically remove the cloudy lens of the eye, replacing its function with powerful 'milk bottle' thick glasses.

But Sir Harold Ridley noticed with his fighter pilot patients that, unlike most foreign bodies, the eye did not reject Perspex.



Professor David J Spalton (pictured above), Emeritus Consultant Ophthalmic Surgeon at St Thomas' Hospital and a specialist in cataract surgery and lens research, says: "The idea of putting a foreign body into the eye – a Perspex lens implant – was a totally new concept and Ridley was its pioneer.

"But there were a lot of complications and he fought for more than two decades to have it accepted by the medical profession. Today it's the most common eye operation in the world."

DID YOU KNOW?

- The Ridley Clinic at St Thomas' carries out 70–100 cataract operations every week
- 300,000 cataract operations are carried out in the UK every year

The eye doctor's view

Dr Laura de Benito, consultant ophthalmologist

"It's an honour to practise here where it all started. The main development in cataract surgery since then is that we've been able to make such a delicate surgery – working within a 3-5 millimetre eye space – quite straightforward. Placing a lens in the fine and fragile structures of the eye is done in 15 minutes with local anaesthetic and no stitches. Patients don't feel any pain and they can resume normal life and vision the following day."

The patient's perspective

David Roy Hamley, 85, cataract operation patient

"Before I had the operation, everything was cloudy and I couldn't see. My glasses were useless. Now colours are much brighter and the lighting in all the buildings is so intense, I should be wearing dark glasses! Now I've got my lovely sight back instead of just seeing a mist. At my time of life, I'm not going to waste my time looking at television. I want to see the sky, the birds and the trees. This operation changes your life."



Sir Harold Ridley's legacy lives on through the Ridley Eye Foundation, run by his son Nic Ridley, to raise funds for and awareness of the need for cataract surgery in developing countries and to treat avoidable blindness – 50% of world blindness is caused by cataracts. www.ridleyeye.foundation.org



From the frontline

NHS Health Checks specialist nurse **Thelma Bangura**.

I'm part of an outreach team of specialist nurses who carry out NHS Health Checks in Lambeth. The checks are like MOTs and are aimed at people aged 40 to 74 who haven't already been diagnosed with health conditions like diabetes, heart or kidney problems.

Having the test can mean that potential health problems are picked up early. It's like a river. We try to catch people when they are upstream before they have fallen in and have a major health problem.

We ask questions about lifestyle and family medical history and we do some tests such as checking blood pressure, blood sugar and cholesterol levels.

We carry out the checks in all sorts of places including health centres, libraries, bus garages, church halls and mosques. These venues are often more convenient for people who find it difficult to access

health services.

We support people to manage their weight, stop smoking and reduce their alcohol intake so they stay healthy and lower their risk of problems such as stroke in the future.

I would advise anyone over 40 to drop into one of our clinics or to come along when they receive an invitation. The health check is a simple, free 20-minute test and it could save your life.

NHS Health Checks are part of Guy's and St Thomas' Adult Local Services for Lambeth and Southwark residents.

For more information contact 020 3049 5257

Ask us: What does the Trust do with its waste?

We speak to waste manager **Alan Armstrong**.

What kind of waste do we generate?

Every year we handle 4,700 tonnes of waste from our hospital sites. That's enough to fill 371 London double-decker buses! More than half of this is domestic and recycling waste – things like the newspapers that people bring into the hospital, the polystyrene trays from our restaurants, and the leaves that fall from our trees. A third of our waste is clinical waste – everything from surgical gloves and scrubs to needles and syringes. The rest of our waste is mainly made up of chemicals, confidential documents and food waste.



What happens to it all?

Different waste is collected, transported and disposed of in different ways. Good waste management is ensuring this is done quickly and efficiently and without exposing our patients or our staff to any risk of contamination. We do this by putting our waste into the correct bins and handling them carefully, and by collecting our bins regularly to avoid any overflow and to maintain good hygiene. We also aim for the most sustainable solutions. More and more of our waste gets recycled or transformed into energy, and only a small proportion has to be incinerated or go to landfill.

What's special about how we handle our waste?

We don't just get rid of our waste, we look at what comes before and what happens afterwards. Food is a good example. We have been working closely with our catering teams to reduce the number of uneaten meals while ensuring our patients still get the best service. Food waste is sent to local farms to be used as fertilizer and oil waste from our kitchens is collected and turned into biofuel. This in turn is powering local generators and even a number of London black cabs.

What's On

19 February

BioResource open event
11am – 2pm
Central Hall
St Thomas'



23 February

Meet the Florence
Nightingale Museum Curator
Free weekly tour
(every Monday) 1.30 – 2pm
Call 020 7620 0374
or visit www.florence-nightingale.co.uk

25 February

Lesbian, Gay, Bisexual
and Transgender (LGBT)
History Month event
11am – 2pm
Central Hall
St Thomas'

Marie Curie
Cancer Care



1 – 31 March

The Great Daffodil Appeal
(Marie Curie Cancer Care)
Call 0800 716 146 or visit
www.mariecurie.org.uk

11 March

No Smoking Day

12 March

World Kidney Day

26 March

Friends of St Thomas'
Hospital Mini Market
11am – 3pm, Central Hall
and Birdsong Corridor
St Thomas'

1 April

World Autism
Awareness Day

6 April

World Health Day

22 April

Friends of St Thomas'
Hospital Book Sale
10.30am – 2pm
Birdsong Corridor
St Thomas'

29 April

Joint Board of Directors
and Council of Governors
Meeting
3.45 – 7.30pm,
Robens Suite, Guy's

Every Monday:

Free lunchtime concert 1 – 2pm, Central Hall, St Thomas'

Every Wednesday:

Free lunchtime concert 1 – 2pm, Atrium 2, Guy's

Raise money for your hospital

For all the latest news about
our amazing fundraisers and how you can support
Guy's, St Thomas' and Evelina London,

follow @SupportGSTT

and @SupportEvelina

and like [facebook.com/SupportGSTT](https://www.facebook.com/SupportGSTT)

and [facebook.com/SupportEvelina](https://www.facebook.com/SupportEvelina).

Competition



We have two pairs of tickets to The View from The Shard up for grabs – to be in with a chance of winning them, simply complete the winter word search below.

S	N	O	S	R	O	K	A	T	O	W	A
W	A	S	N	E	Z	O	R	F	E	N	O
O	R	Z	O	V	E	R	C	O	A	T	L
G	D	E	W	L	K	O	W	A	R	L	S
S	O	N	F	L	S	N	O	W	M	A	N
L	S	M	L	G	Z	I	C	I	U	K	E
A	K	F	A	L	O	C	Y	I	F	E	T
T	A	S	K	O	N	I	H	S	F	K	T
I	T	T	E	V	S	C	M	I	S	M	I
W	I	N	T	E	R	L	S	C	L	D	M
T	N	L	A	S	L	E	K	G	E	L	S
E	G	D	E	L	S	N	W	O	M	S	Y

Earmuffs	Gloves	Overcoat	Snowflake
Chilly	Icicle	Skating	Snowman
Frozen	Mittens	Sledge	Winter

Name

Address

Email

Send your entry by **Monday 16 March** to the GiST competition, Communications Department, 4th floor, Staircase C, South Wing, St Thomas' Hospital, Westminster Bridge Road, SE1 7EH; or you can email communications@gstt.nhs.uk

The winners will be selected at random and notified within seven days of the draw. The result will be final and we will not enter into any correspondence regarding the competition winners. The prize is non-transferable.

Cough or cold?

**Don't go to A&E.
Treat this at home.**



Don't go to A&E if it's not a serious emergency.
Other NHS services are everywhere.

Use **www.nhs.uk**
to find the right treatment.