

# *the* GIST

News from Guy's and St Thomas' Issue 18 | 2016



## *Thumbs up!*

Evelina London Children's Hospital  
is rated 'Outstanding'



## Welcome

I am delighted to share the news that we have achieved an overall rating of 'Good' from the Care Quality Commission (CQC), the organisation that regulates healthcare in England.

You can read more about our CQC inspection on page 8, and meet some of the staff in our hospitals and community services whose hard work and compassion has made such a difference to our patients.

We were rated 'Outstanding' for caring services and 'Good' for effectiveness, responsiveness, and being well-led.

Most services were 'Good', with Evelina London Children's Hospital and the Emergency Department (A&E) at St Thomas' rated 'Outstanding'. Evelina London is the first children's hospital in the country to be judged 'Outstanding' – a remarkable achievement which reflects the exceptional quality of the care provided to children and young people.

The report is a valuable source of information about where and how we can do better for patients, and we will work together to tackle the areas that CQC inspectors rated as 'Requires improvement'.

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



## Contents

### 04 Leading diabetes research

Alex tests a new treatment

### 07 Meet baby Evelina

Named after the hospital that saved her life

### 08 Our 'Good' rating

Find out more about our CQC report

### 14 The Interview

Alero talks about her passion for research

### 17 The leading edge

Dragons' Den inspires innovation

### 20 A chance to breathe

Performing arts help patients and staff to relax

### 22 Say what?

Faye Buckle takes on a new career as a porter

## Meet the team

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Cameron Moore gives Evelina London Children's Hospital a thumbs up for its 'Outstanding' care.

## TELL US WHAT YOU THINK

If you have any comments about the magazine or suggestions for future articles, please contact the communications department, St Thomas' Hospital, Westminster Bridge Road, London SE1 7EH, or email [press@gstt.nhs.uk](mailto:press@gstt.nhs.uk)

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# Royal visit shines a light on mental health

The Duke and Duchess of Cambridge visited St Thomas' to meet an inspirational mental health campaigner as part of their focus on suicide prevention and support for those bereaved by suicide.

They met Jonny Benjamin, who was cared for at St Thomas' after he contemplated taking his own life on Waterloo Bridge in 2008, and Neil Laybourn, the man who talked him down.

After receiving help, Jonny launched a social media campaign called #FindMike, with the charity Rethink Mental Illness to find and thank the man who saved him. The campaign succeeded and Jonny was reunited with Neil.

Jonny believes that if he had received help for his mental health challenges earlier in life he would not have reached his crisis point. His aim is to break



The Duchess and Duke of Cambridge meet Jonny Benjamin and Neil Laybourn

the stigma associated with mental health and put mental health education on the national curriculum.

Dame Eileen Sills, Chief Nurse at Guy's and St Thomas', says: "Mental health is a huge priority at our Trust, and we're so supportive of the positive awareness that is being raised.

"In the eight years since Jonny was brought to our A&E

Department, we have established a dedicated team of mental health professionals to ensure our patients are kept as safe as possible, and receive the most appropriate care.

"They also work closely with community-based mental health services and offer psychological care for families of people living with mental illness."

## European first at Guy's Cancer Centre



A linear accelerator is lifted into the Radiotherapy Village

The first radiotherapy machines in Europe that will treat patients above ground level have been delivered to the new Cancer Centre at Guy's Hospital.

Six linear accelerators, which weigh more than 10 tonnes each, were lifted by crane into the Radiotherapy Village on the second floor of the state-of-the-art building, which will open to patients this autumn.

Radiotherapy treatment is traditionally located in hospital basements due to the combined weight of the machines and their treatment rooms.

The decision to locate the linear accelerators above ground was made following feedback from patients and cancer survivors.

Alison Hookham had five weeks of radiotherapy at St Thomas' Hospital in 2009 after being diagnosed with breast cancer. She says: "When I asked if the radiotherapy suite in the new Cancer Centre could be above ground, the project team said the reason why radiotherapy is usually in the basement is because the machines are so heavy.

"But they listened to what I said from a patient's perspective and discovered it was possible. I am delighted that my wish has been granted."

## IN THE NEWS

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

### **The Times, Daily Mail**

A new vaccine aimed at enabling the immune system to fight against cancer is being trialled by patients at Guy's and St Thomas'. This innovative work received widespread media coverage, including in *The Times* and *Daily Mail*.



### **BBC London**

After its restoration (pictured above), St Thomas' Chapel was officially reopened by the Bishop at Lambeth. BBC London News reported on the role of the chapel and the spiritual care team in hospital life.

### **The Guardian**

Journalists from *the Guardian* followed staff and patients on the Paediatric Intensive Care Unit at Evelina London Children's Hospital and made a short film to celebrate their work. This was shared on *the Guardian* website and was viewed more than 200,000 times in its first two days.



## Testing our response

Guy's and St Thomas' was able to test its response to a major incident when it took part in *Exercise Unified Response*.

This was an emergency planning exercise based on the scenario of a tower block collapsing into Waterloo station and causing mass casualties.

Volunteers playing the role of casualties with fake injuries were brought to the Emergency Department (A&E) at St Thomas'.

Dozens of staff from across the Trust participated in the exercise and responded as they would to a real-life major incident. The volunteer casualties – many playing the part of patients with life-threatening injuries – received treatment from teams in A&E, critical care, surgery, imaging, and other specialist services.

Dr Simon Steddon, Acting Chief Operating Officer at Guy's and St Thomas', says: "We take our emergency planning duties very seriously and participating in the exercise was an extremely valuable opportunity for us to rehearse our response to a mass casualty incident."

"I'm proud to say that our staff performed brilliantly under the pressure. As an organisation we know how best to manage a major incident so that, even when services are under immense strain, we can ensure top quality care for patients."

## Leading diabetes research

A clinical trial into a new way to halt the progress of Type 1 diabetes is underway, with patients at Guy's Hospital being the first to test the new treatment.

Type 1 diabetes is an autoimmune disease in which cells in the pancreas that make insulin are killed by the immune system. The immunotherapy treatment, called MultiPepT1De, is being developed to target the autoimmune attack that leads to the development of Type 1 diabetes.

Among the patients who are taking part in the new MultiPepT1De clinical trial is Aleix Rowlandson, 18, a student from Trawden, Lancashire, who was diagnosed with Type 1 diabetes last September.

She says: "When I was first diagnosed with Type 1 diabetes I didn't know much about it or what could be done to treat it. My family and I did some research and when I found out about the clinical trial I was delighted. Having spoken to the clinicians leading the trial and completed tests to check that I was a suitable candidate, I am now looking forward to starting treatment and seeing the results."

"I hope that in some way I can help



Aleix Rowlandson is treated by Dr Nikolaos Fountoulakis, clinical research fellow

others who suffer from the disease."

MultiPepT1De was developed with funding from the Wellcome Trust by researchers working in the National Institute for Health Research (NIHR) Biomedical Research Centre (BRC) at Guy's and St Thomas' and King's College London.

**For more information about joining a clinical trial, email [clinicaltrials@gstt.nhs.uk](mailto:clinicaltrials@gstt.nhs.uk).**

## New night nursing team supports sickest patients

Patients who are coming to the end of their lives or are seriously ill will get quicker expert nursing care at home thanks to a new night time nursing service launched by Guy's and St Thomas'.

The pal@home service sends nurses out to patients' homes in Lambeth and Southwark within an hour of referral by specialist palliative care nurses, GPs, district nurses or other health professionals.

It means that patients no longer need to go to hospital in the middle of the night or wait until the morning to see their GP. The service runs from 8pm to 8am seven days a week.



Hannah Simmons and Richard Jones from the @home service

Karen Titchener, Deputy Head of Nursing for the pal@home service, says: "Patients may need urgent symptom control such as pain relief or have a medical problem like a blocked catheter. They want to be seen quickly, especially at night. We are here to help and support them when they really need it."

**For information about the pal@home service call 020 3049 5751 or email [karen.titchener@gstt.nhs.uk](mailto:karen.titchener@gstt.nhs.uk).**



## 3D printing world first

Surgeons at Guy's and St Thomas' have pioneered the world's first use of 3D printing to support the successful transplantation of an adult kidney into a child.

Two-year-old Lucy Boucher, from Antrim in Northern Ireland, suffered heart failure as a baby. This resulted in her body, including her kidneys, being starved of oxygen.

Having undergone surgery to address her heart condition, Lucy faced the prospect of a lifetime of dialysis treatment due to her kidney failure but that all changed after her transplant. Lucy's surgery took place last November at Great Ormond Street Hospital using a kidney donated by her father, Chris Boucher, during a procedure at Guy's Hospital.

Models of Chris' kidney and Lucy's abdomen were produced using Guy's and St Thomas' 3D printer so that the surgeons could accurately plan the highly complex operation to minimise the risks.

It is the first time in the world that 3D printing has been used to aid kidney transplant surgery involving an adult donor and a child recipient.

Lucy's father Chris, an assistant lay



Daniel, Ciara, Chris and Lucy Boucher

minister, says: "When I first saw the models I was taken aback by the level of detail in them. It really helped me get an idea in my head of what was going to happen. My first reaction when I saw the 3D printout of my kidney was surprise at how big it was and I wondered how it could possibly fit into Lucy.

"Seeing the model of her abdomen and the way the kidney was going to be transplanted inside her gave me a clear understanding of exactly what was going to happen. It helped ease my concerns and it was hugely reassuring to know that the surgeons could carry out such detailed planning ahead of the operation."

## Marching into a new career

Military veterans are getting the chance to pursue a new career in the NHS thanks to a recruitment programme hosted by Guy's and St Thomas'.

Howard David, 58, served in the army for 22 years. He now works at Bowley Close Rehabilitation Centre in Crystal Palace making and fitting artificial limbs. Howard says: "I joined the army in 1978 when I was 20. I'd been a welder and the firm I was with went bust.

"My job was repairing guns and I was posted all over the world including Hong Kong, Bosnia and Ireland. My resettlement officer suggested I take the prosthetics and orthotics course at Salford University because he thought it would be a bit like engineering.



Howard David with Danielle Fullwood of Step into Health

"Now I make artificial limbs for people. It's a fantastic job and very satisfying because I'm helping people to get walking again after amputation.

"I left the army with no medical background but the life skills I gained and the experience of meeting lots of different people prepared me for a new career in the NHS."

**For more information about the Step into Health programme contact**  
**danielle.fullwood@southlondon.hee.nhs.uk.**

## TOP TWEETS



@kennyfella

Well done

@EvelinaLondon. Just been for blood tests with my daughter & her first impression was "this is a toy shop, not a hospital, daddy"



@GSTTnhs

Patients at St Thomas' got a spectacular view of the #sunset over @UKParliament this evening #London #sunssets



@trekstock

Nurse Angela what a total gem hand massage & a cup of tea post stitches for a wobbly patient @GSTTnhs @NHSEngland



@VHC88

Obstetric and midwifery staff @GSTTnhs have been so kind and compassionate and work so hard to look after new mums and mums to be



@skillsforhealth

David Lammas from @GSTTnhs is doing a splendid job as a true healthcare ambassador! #OurHealthHeroes Thank you!



@mattlowndes

A day at a children's hospital is good for the soul. Easy to forget how lucky we are to have such incredible people in the NHS @EvelinaLondon



@Zoe\_Moody

Today, I will consciously eat milk, cooked in a cake in an allergy challenge @GSTTnhs hospital. After 22 years of avoidance, #CanIEatItCooked?

Deniz explains how physiotherapy helps her to live with fibromyalgia.

## Deniz turns her life around



**Deniz Altinoluk** is a 26-year-old entrepreneur from Southwark. She runs LifeLineWorks, which uses drama to explore healthy relationships, sexual health and body confidence with young people. Her achievements are all the more impressive because Deniz has fibromyalgia, which causes widespread chronic pain and excessive tiredness.

She developed the condition after a series of tonsillitis infections and her health got worse after she was involved in a car accident. It was at this point that the condition began to affect every aspect of her life.

Deniz says: "It is very difficult to do anything when your body is constantly telling you that it needs to rest, that it needs to stop moving to minimise the pain. It affects even simple things like brushing my teeth, getting dressed or cooking. I can sleep for any period of time but I still wake up feeling as though I've not slept at all."

**"Be kind, compassionate and gentle to yourself."**

A physiotherapist referred her to a chronic pain physiotherapy specialist at Guy's and St Thomas'.

Deniz says: "The support I got from them really helped to lift me out of the very depressed place that I was in. The main thing I've learned is to shift my attention away from getting rid of the pain and focus on how I can work with it to live a fulfilling life."

She is still learning how to control her condition. Fibromyalgia has numerous symptoms, meaning that no single treatment will work for all of them.

Deniz says: "Doing gentle things like exercises in a heated pool is good but I avoid high intensity exercise and things that put a lot of pressure on my joints."

"I realised that, if I was going to live with this condition effectively, I would have to make the choice to allow it to be what it is and work with it, not against it."

"Living with fibromyalgia closed a lot of doors to me so I decided to create my

own opportunities."

Deniz has begun to reach out to others who share her condition, and after two years she has some advice for fellow sufferers.

She says: "Be kind, compassionate and gentle to yourself, it takes time to effectively manage fibromyalgia. Most importantly, as someone who's taken about two years just to manage the basics, never give up on yourself and your ability to adapt."

Guy's and St Thomas' also runs a specialist one-stop fibromyalgia clinic which recently won a national award from the British Society of Rheumatology.

For more information, visit [www.guysandstthomas.nhs.uk/fibromyalgia](http://www.guysandstthomas.nhs.uk/fibromyalgia).



Evelina, who was diagnosed with a heart condition before she was born, was named after the hospital that saved her life.

## Meet baby Evelina



New parents Peter McFarlane and Kelly McPherson with baby Evelina

Expectant parents Kelly McPherson and Peter McFarlane from Gravesend in Kent were referred to Evelina London Children's Hospital after their 20-week pregnancy scan revealed more than just the sex of their baby. Although delighted to find out they were having a girl, Kelly and Peter were referred for further tests as there were some concerns about how their baby was developing.

Specialist scans at Evelina London Children's Hospital led to a diagnosis of hypoplastic left heart syndrome, which affects the way the heart develops.

Kelly says: "The doctor sketched pictures of a normal heart and our baby's heart to show us the problem. They took great care to make sure we understood but it was so hard to hear.

"It was difficult to see any light at the end of the tunnel when the chances of our baby surviving were so small. Even if she made it to being born, she would need life support and several operations. We took time to think about what we should do and after agonising over the decision, we knew we had to give her a chance, however hard

it might be."

Kelly gave birth to Evelina by caesarean section last November. She says: "We were warned that she would need oxygen when she was first born but we were all shocked when after only five minutes she started breathing on her own."

Evelina was treated on the Paediatric Intensive Care Unit before undergoing surgery to start to make repairs to her heart at just three-days-old. The complex operation, the first of three that Evelina would need, went well and after only seven days she was able to leave the unit.

Kelly says: "We were going to call her Evie, but on the way to the hospital I was looking at her letter and the name Evelina caught my eye. I researched the name of the hospital, and when I learned about the history behind it, I knew it was meant to be.

"The hospital means a lot to us. We've needed to stay for weeks at a time which has also been hard for my three other girls, Chloe, Libby and Aimee. They've been really brave and made us very proud. The staff made us so welcome that it feels like they're our long lost family. So far

Evelina has amazed us all with how she's coped and we now live in hope."

Peter adds: "Evelina will spend much of her childhood under the care of Evelina London, so naming her after the hospital just feels right. If I won the lottery now I'd give every penny to Evelina London."

### Built in memory of Evelina de Rothschild

The original Evelina Hospital for Sick Children opened in 1869 on Southwark Bridge Road. Funded by Austrian Baron Ferdinand de Rothschild, it was built in memory of his English wife, Evelina, who had died in childbirth three years earlier. Rothschild wanted to open a maternity hospital, but was persuaded by his friend Dr Arthur Farre, a famous obstetrician and physician to the Queen, to open a children's hospital.

[www.evelinalondon.nhs.uk](http://www.evelinalondon.nhs.uk)  
[www.supportevelina.org.uk](http://www.supportevelina.org.uk)

Guy's and St Thomas' has been rated 'Good' by the Care Quality Commission, the organisation that regulates healthcare in England. Dame Eileen Sills, Chief Nurse, explains why this is a result that really matters.



## Our 'Good' rating

Cameron Moore gives Evelina London Children's Hospital the thumbs up

I am very proud of our 'Good' rating – this is a significant achievement and a fantastic result for a Trust of our size and complexity. The CQC, whose inspectors visited us in September last year, paints a positive picture of the compassion shown by our staff and their dedication to delivering high quality care to patients in our hospitals and in the community.

The report makes a humbling read. It reinforces the fact that we have brilliant staff, who work together to put patients first.

The inspectors 'found staff to be highly committed to the Trust and delivering high quality patient care', and the report is full of excellent examples.

We are always looking for ways to improve the services we offer to patients, and the report also highlights areas that require improvement. But as long as we continue to put our patients first, we will be going in the right direction. We will quickly fix the things that we need to address urgently, and we will put plans in place to improve other areas, such as safety. I'm looking forward to working with our fantastic staff and patients to continue improving our services.

***Dame Eileen Sills, Chief Nurse***



### Outstanding care for children

Evelina London Children's Hospital was rated as 'Outstanding' – the highest possible rating and the first children's hospital in England to achieve it. Children's community services were rated as 'Good'.

The CQC report said that 'In every area we inspected we saw hospital staff from domestic staff to doctors talking warmly to children and their families. Parents unanimously reported that children and young people were positive about almost all aspects of their time in hospital'.

They added that the integration of children's community services to become part of Evelina London Children's Healthcare has had a positive impact and allows Evelina London to bring together care for children in the hospital and the community.



## Emergency Department

Our Emergency Department (A&E) was given an 'Outstanding' rating – which is particularly impressive because it is being redeveloped to form part of a new Emergency Floor. The CQC's report highlighted the specialist support available in A&E, which includes REACH, a service that helps victims of domestic abuse. As part of this service, a multi-lingual advisor, supported by the Better Community Business Network, provides life-changing support for people in vulnerable relationships.

Nationally 76% of domestic violence incidents are repeat occurrences – but the REACH repeat victims figure is just 5%.

James Hill, Head of Nursing in the Emergency Department, says: "It is tragic that people who experience domestic abuse will so often need emergency medical treatment at some point. The REACH team offers help to these people."

The inspectors also praised the work of security staff. James explains: "They give us so much help. When tensions run high, the security team keeps everything calm for patients and staff so we can focus on caring for people. I'm pleased that their compassion has been acknowledged – they don't always get the credit they deserve."

## Community care

Although adult community services were rated as 'Requires improvement' overall, the CQC identified teams that provide excellent care.

For example, Diabetes Education and Self Management for Ongoing and Newly Diagnosed (DESMOND) exists to help people who have been diagnosed with Type 2 diabetes to manage their condition.

Rosarie Atkinson, Diabetes and Endocrine Matron, explains: "It can be very unexpected when someone is diagnosed with diabetes. DESMOND brings people together and helps them understand how to look after their health through face-to-face meetings or over the phone.

"We aim to give people the confidence to live with this condition by providing them with practical information, like how to avoid hidden sugars in food, and other resources available to them locally."



James Hill (front left) with colleagues from the Emergency Department (A&E)

## The difference 'Good' makes

When Brian Paul, 68, was referred to St Thomas' Hospital, he was assessed by the Proactive Care of Older People Service (POPS) and immediately admitted to hospital.

Brian explains the difference they made: "The doctor spent more than two hours with me and she really listened to me. Because of her, I was diagnosed with an infected and swollen artery and immediately admitted to hospital."

"POPS was the first service of its kind when it was set up in 2003. It aims to improve the health of people aged over 65 before and after they have an operation so they recover more quickly.

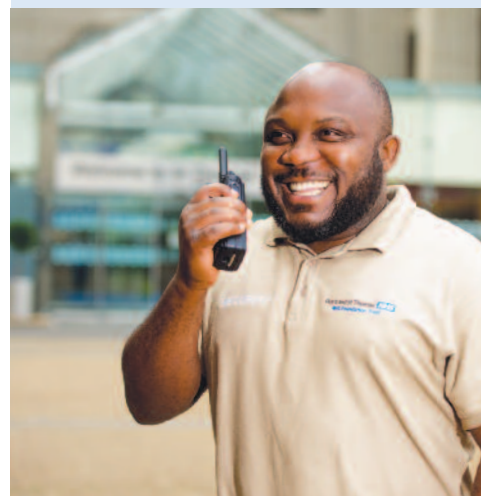
Brian continues: "POPS was with me from start to finish, making sure I was healthy enough for surgery. They spent time with my whole family, which we really appreciated, so they understood what was going to happen.

"My surgeons even used my iPhone to FaceTime our daughter in Japan so she could stop worrying about me and get on with enjoying her trip."

Brian's wife, Anne, adds: "I'm absolutely certain that they saved his life. He wouldn't be here today if it wasn't for POPS."

**"Security are incredible. They regularly take my breath away with their level of skill and compassion."**

Quote from the CQC report



**Geraldine Joyce** supports pregnant women who are particularly vulnerable due to mental health conditions, social circumstances such as homelessness, and drug or alcohol addictions.

## Supporting safe pregnancy

Midwife Geraldine Joyce has been supporting vulnerable women through pregnancy for more than 30 years, ensuring they and their babies are kept safe and well.

She says: “A lot of women and their partners plan their pregnancies. They read books, take vitamins, and attend GP and hospital appointments.

“In an ideal world, this is the experience we would like for everyone.”

### We all want the same thing

Geraldine continues: “We care for women whose lives and health can be more complicated than others, and become even more so when they become pregnant. Unfortunately, a number of these women are afraid to seek help because they fear that their baby will be taken away from them if they go to their GP or hospital.”

Geraldine and her colleagues work closely with local authorities, GPs, health visitors, police, specialist homelessness teams, and day centres across south London to identify vulnerable pregnant women and offer them support as soon

as they can.

“Once they do come to us for support, they realise that we want the same as them – we want to help them improve their health enough to be able to take their baby home with them after they give birth.

We’ll do all we can to make sure that happens.

“Our work is completely objective, and our women are often surprised at how

friendly and welcoming we are. We understand that no two women’s situations are ever the same when it comes to pregnancy, and we don’t judge them.”

### Grateful to go home

Seeing new mums take their baby home to a safe environment is what keeps Geraldine coming to work every day, no matter how long it takes.

She fondly remembers one particular success story: “Her first two babies were taken into care after she gave birth. It was heartbreaking, but certainly for the best because of her social circumstances at the time.

“During her third pregnancy we really saw the difference our input had made to this woman’s life. She was living in her own flat, she was not dependent on drugs or alcohol, and she had a new partner. To see her keep her baby and for them to go home together as a family was a very special moment.”

### Setting the example

Geraldine was one of the country’s first safeguarding midwives. Thanks to her role at St Thomas’, and as the chair of London’s safeguarding maternity network, hospitals across the UK are better equipped to support women and their babies.

Geraldine says: “Although we see a higher rate of vulnerability in London, there are women and babies up and down the country benefiting from the support of teams like ours.

“It’s all about making a difference. At the end of the day, we want women’s outcomes to be improved and aspirations to be met. We want them to know that there is something different out there, and we will support them not only in hospital but when they go back home.”



Specialist midwife  
Geraldine Joyce





If cancer is detected early, treatment is more likely to be successful, so spotting cancer at an early stage can be life-saving.



Louise Hopkirk, breast care nurse

## Catching cancer early

More people are surviving cancer than ever before. According to the latest figures from Cancer Research UK, death rates in the UK have dropped by 10% in the last decade.

The best way to recognise the signs and symptoms of cancer is to be familiar with your own body, and to be aware of the way you are feeling. Having a good sense of what is 'normal' for you will greatly increase your chances of recognising if something is not quite right.

The most common types of cancer symptoms range from lumps on or beneath the skin, swelling of the stomach, blood in urine or stools, loss of

appetite and weight loss, persistent coughs, and heartburn or indigestion.

"What's normal to one person may not be for another, so we should never underestimate the worth of knowing our own bodies," explains Louise Hopkirk, a

breast care nurse at Guy's Hospital. "If you think you're experiencing symptoms of cancer, don't hesitate to visit your GP.

"However, it is important to remember that it is likely that the symptoms are caused by something less serious. If your GP does suspect that you may have cancer, then you can be referred as soon as possible for tests – which may greatly

increase the success rates of your treatment."

### Be healthy – reduce your risk

As well as being aware of the symptoms of cancer, certain lifestyle choices are known to prevent its development. The risk of cancer can be lowered by:

- Eating a healthy, balanced diet
- Maintaining a healthy weight
- Staying active
- Drinking less alcohol
- Not smoking
- Protecting skin from sun damage.

**"Having a good sense of what is 'normal' for you will greatly increase your chances of recognising if something is not quite right."**

Dimbleby Cancer Care supports people living with cancer.  
[www.dimblebycancercare.org](http://www.dimblebycancercare.org)





Dr Anju Kulkarni, Consultant Clinical Geneticist, with Kenisha McGregor

## Inherited cancer

Some cancers are caused by gene mutations and can be inherited through families. Inherited cancers tend to occur at a younger age, sometimes in more than one place, and like all cancers they need to be caught as soon as possible, or even prevented.

The clinical genetics team at Guy's and St Thomas' has developed a pioneering new Smartphone app that will allow healthcare professionals to identify people at risk of the most common inherited cancers.

The app, Cancer Genetics, uses personal, family and medical history to assess a person's risk of inherited cancer. Healthcare professionals can then use the app to refer people directly to the specialist cancer genetics services at Guy's Hospital or other specialist centres.

In 2013, referrals to the clinical genetics service at Guy's and St Thomas' doubled after actress Angelina Jolie announced that she carried the inherited BRCA1 gene mutation and had undergone a preventative double mastectomy.

Dr Anju Kulkarni, Consultant Clinical Geneticist, says: "There has been increasing public awareness of the importance of genetic risk in cancer since several high profile celebrities shared their stories. Cancer Genetics equips

healthcare professionals with a tool to meet this growing awareness and identify patients at risk of inherited cancer."

**Kenisha McGregor**, 37, from Lewisham, was diagnosed with breast cancer in 2013 and was found to carry the BRCA1 gene mutation when she was referred to Guy's Hospital.

Kenisha says: "I'd been told that I could have an elevated risk of cancer due to my family history after my first scare, but I wasn't given a definitive answer. I was left wondering until I found a second lump in my armpit and was diagnosed.

"The use of this app could save families from similar uncertainty and help them to receive specialist genetic testing if necessary. I have a son and a daughter and, although it will be difficult for me to accept the results, I'd encourage them both to go for testing when they are older so that together we can either be reassured or make informed decisions about prevention if they do carry the gene.

"If people suspect that cancer may be inherited through their family, I'd encourage them to speak to their GP. You don't have to make any decisions but you can start to make supported and informed choices about the future."

Be clear on cancer. Find out more:  
[www.nhs.uk/be-clear-on-cancer](http://www.nhs.uk/be-clear-on-cancer)

**Cancer Genetics** was funded by Guy's and St Thomas' Charity and was developed by UBQO Ltd.

It can be downloaded by health professionals for free on the Apple App Store and Google Play.



**Alero Dabor** talks about why she became involved with our Biomedical Research Centre after surviving breast cancer.

## “Research has the potential to change the world”

### **Q Why did you become involved in research?**

**A** I was diagnosed with breast cancer and had a double mastectomy to remove and reconstruct my breasts. Mr David Ross, a plastic surgeon at Guy's Hospital, led my surgery. He's the reason I wanted to give back to Guy's.

When I had chemotherapy, and I lost my hair, his team helped me to stay positive and to feel like myself. I can never forget what they did for me.

After my illness, I lost my way for a bit – I kept thinking 'why me?' – but I wanted to use my own academic background to benefit others, and working with researchers helped me to find my confidence again.

I know that I may not directly benefit from the research I am helping with in my own lifetime but I am happy that my contribution will help someone else one day. Research has the potential to change the world.

### **Q How do you help?**

**A** The National Institute of Health Research (NIHR) Biomedical Research Centre (BRC) at Guy's and St

Thomas' and King's College London studies lots of health conditions and public health issues, including cancer.

Researchers need to work with patients on clinical trials – without testing a drug on people, they would never know if a new treatment or medicine could work.

I am part of the patient and public involvement group, so I talk to researchers about how to reach patients who might be wary of research, and I talk to patients about why research is such a positive thing. I hope I put a human face on what these amazing men and women do.

### **Q Why did you write your book?**

**A** When I was first diagnosed, I began to keep a journal of how I was feeling as my cancer treatment progressed. At the time, I had lots of emotional, physical and financial worries that I didn't want to share with anyone else.

Stories – whether fact or fiction – educate, enhance and enrich our lives based on people's experiences. I wanted to help researchers and patients to understand my experience of cancer and they inspired me to publish my book, *My cancer has many faces*.

### **Q What do you get out of your work with the BRC?**

**A** I get a lot out of knowing that I have helped someone to feel confident enough to take part in research, but for me, the simple fact that I turned my diagnosis into something positive is something I'll always treasure.

### **Q What's next?**

**A** A lot of the cancer research that I help with is moving into Guy's Cancer Centre later this year. It's going to be a real hub for innovation, which will help us to understand and treat this horrible disease.

### **Q How can people take part in research?**

**A** There is so much research at Guy's and St Thomas' – and it's not just people with cancer who can get involved. The 100,000 Genomes Project is actively recruiting people with rare diseases, not to mention ongoing research into allergies, skin conditions, stroke, diabetes, and dozens of other clinical trials. The best thing I can recommend is to ask your doctor or nurse.



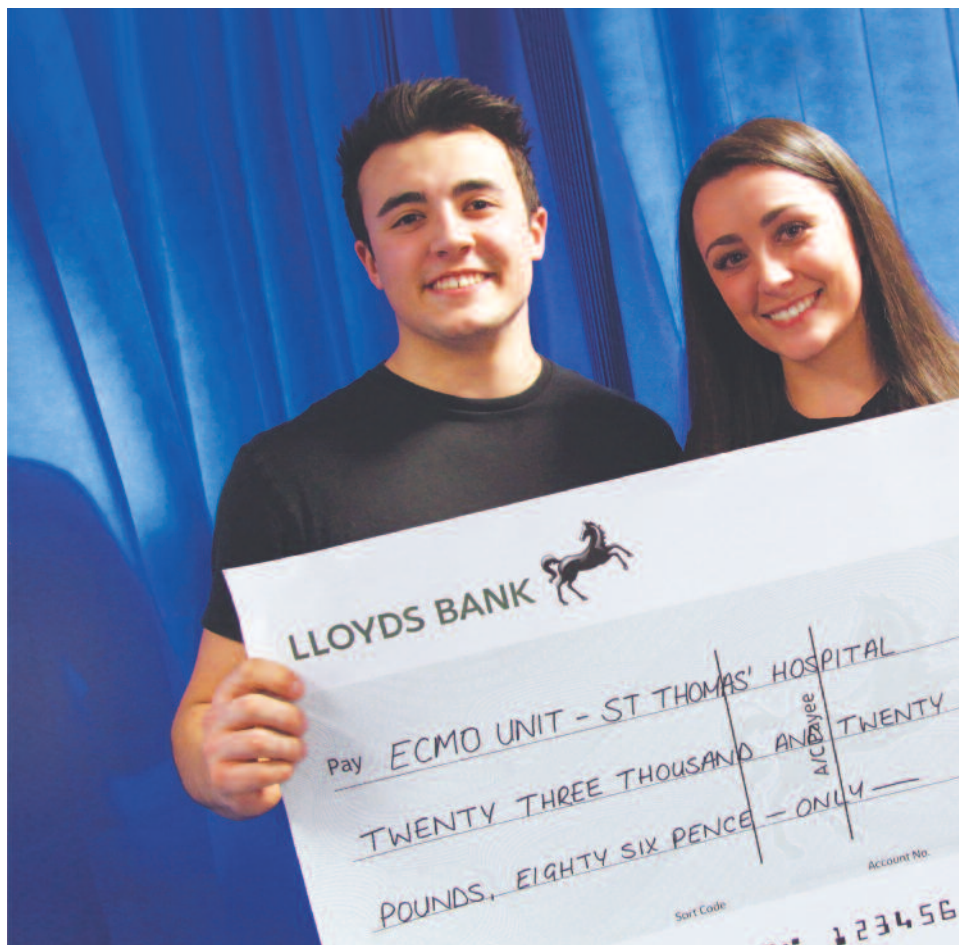


### Get involved

- A typical patient and public involvement group meets every three months, but you can offer as little or as much time as you wish. There are plenty of ways to help if you have been a patient or carer
- You will be fully supported and will be offered full training
- To discuss ways in which you can get involved in research at the BRC email [jacintha.mcgon@gstt.nhs.uk](mailto:jacintha.mcgon@gstt.nhs.uk) or call 07876 034 393. [www.guysandstthomasbrc.nihr.ac.uk](http://www.guysandstthomasbrc.nihr.ac.uk)

**Simon Dredge's** family raised more than £23,000 to thank the staff who saved his life when an accident left him critically ill.

# Grateful family's fundraising 'thank you'



Simon Dredge and his sister Laura-Jo return to St Thomas' to hand over the money they raised

Simon Dredge was so badly injured in a power boat accident near Southampton in May 2015 that at it looked unlikely he would live. He had been knocked unconscious in the sea and rescued by his father, who gave him mouth-to-mouth resuscitation, but at first doctors didn't think Simon would survive.

He was rushed to a local A&E department where doctors recognised that he needed specialist intensive care. He was soon brought to the Intensive Care Unit at St Thomas' Hospital where an ECMO (extracorporeal membrane oxygenation) machine was used to support his heart and lungs.

ECMO removes blood from the body, artificially pumping out carbon dioxide and adding oxygen. It is used in intensive

care medicine to help patients who are unable to breathe for themselves.

Simon was on ECMO for five days, which gave his lungs enough time to recover and repair themselves. He pulled through and, after spending three weeks in St Thomas', he was able to go home.

Simon's sister, Laura-Jo, was so inspired by the treatment he received that she organised a dinner which raised more than £23,000 for the hospital and its ECMO equipment.

Laura-Jo, 22, says: "Without ECMO and the intensive care team, we would not be lucky enough to have Simon with us today. I hope that our fundraising will not only enable the team to continue their phenomenal work caring for other patients but also help to provide the support for families that we were so

grateful to receive.

"Nothing can prepare you for a situation like the one we were in, but each member of staff who looked after Simon helped us every day with their incredible attitude towards work and their dedication to their jobs."

Since making their donation to Guy's and St Thomas', Simon, Laura-Jo, and their parents Peter and Fiona have returned to St Thomas' to thank staff in the Intensive Care Unit.

Simon, 18, who has since begun studying for a university degree, says: "It was great to see the team at St Thomas' and to be able to give something back after everything they've done.

"They helped to save my life, which is why my family wanted to raise funds and support their good work. I was hugely lucky to survive the accident and then to receive such first-class care at St Thomas' – I'll always be grateful."

Guy's and St Thomas' has three critical

**"Without ECMO and the intensive care team, we would not be lucky enough to have Simon with us today."**





care units, which are specially staffed, equipped, and designed to closely monitor and treat patients with life-threatening conditions.

Dr Chris Langrish, consultant intensivist and anaesthetist and clinical lead for critical care, says: "It was terrific to see Simon in such good shape. He responded really well to the treatment and has made an outstanding recovery.

"The specialist equipment we use in the critical care team supports our patients who are very seriously ill. Access to ECMO treatment can be life-saving.

"It's fantastic that Laura-Jo and Simon have been so successful in their fundraising. Their generous donation will help us continue to provide care for other seriously ill patients in future."

**To support Guy's and St Thomas' visit**  
[www.supportgstt.org.uk](http://www.supportgstt.org.uk)  
 or call 020 7848 4701.

## Staff innovation transforms cancer treatment for Elsie

Elsie Wood has cancer in the skin of her nose which requires brachytherapy – a treatment that involves delivering high doses of radiation.

The radiation must be targeted to just the cancer-affected area of the nose, so that Elsie's eyes and face are protected. To do this, a mould of the patient's face is created with carefully positioned tubes to deliver radiation to the skin.

This is usually done by creating a plaster cast of the patient's face but Elsie is the first patient at the Trust to have a mould of her face created using a 3D printer. This 3D-printed mould fits Elsie's face perfectly and means that her treatment is more effective.

Anna Tonino, trainee clinical scientist, developed this new mould and treatment method with staff in the medical physics department. It was funded through the Trust's Dragons' Den competition, which is part of our *Fit for the Future* programme. Through the competition staff can bid for up to £5,000 to fund projects which improve safety, quality or efficiency.

Dragons' Den has been running for three years and has funded a wide range of improvement projects, including the introduction of food lids to keep patient meals hot and the development of a smartphone app for staff that provides easy access to the Trust's bleep numbers.

Commenting on her project, Anna says: "The fit to the patient was excellent and, after various tests, we were able to deliver the right dose of radiation to the cancer while sparing the healthy tissue. Elsie and the whole clinical team have been impressed with the mould and the results of providing treatment in this way."

Sarah Aldridge, Head of Brachytherapy Physics, says: "We would not have been able to treat Elsie with brachytherapy without this technology. This is a very important development for our cancer treatment service and demonstrates how staff ideas can improve patient care."

Chief Executive Amanda Pritchard, who sponsored Anna's project, says: "I am delighted to see the outcome of this project. We are committed to exploring different ways of doing things which improve quality, safety and efficiency for our patients. This is an excellent example of how our staff can make this happen."



Anna Tonino and Elsie Wood with the mould

**Dr Tatiana Hyde,** a junior doctor in the Neonatal Unit (NNU) at Evelina London Children's Hospital, talks us through a typical Sunday.

## Work life

**8:30am** – Today I'm working a short shift helping to look after 28 babies in the Special Care Baby Unit (SCBU) and the High Dependency Unit (HDU). Many of these babies were born very prematurely and need careful support because their lungs, digestive systems and other organs aren't fully developed yet.

I receive a handover from the night team and then talk to the nurse in charge to prioritise the jobs to be done.

**9:00am** – My first job is to get a baby ready to go home. She's been in hospital for two weeks with breathing and feeding problems, but she's much better now. She spent last night in a room with her mum for the first time. I perform a newborn examination to make sure she is fit to go and write a letter summarising her care during her stay for the parents and GP.

Sending babies back home, happy and healthy, always reminds me why I love this job.

**9:30am** – I'm just about to start my ward round when I'm told that there is space available at another hospital for a baby girl who needs an urgent operation on her brain. The special baby transport team is coming at 10am to collect her by ambulance, so I have to

get her ready quickly. I prepare the paperwork for the doctors taking over her care and put a drip in her hand to give her fluids, as it will be too risky for her to feed during transport and before the operation. She returns to our intensive care after her operation.

**10:15am** – I start my ward round. I review all the babies in my care and make sure there are no complications. At the weekend, I spend a lot of time talking to mums and dads, as working parents are able to spend all day on the ward. I help them to understand what's happening to their baby and how they can help their child to get better.

Since having my own children I get a huge amount of satisfaction from reassuring them.

**2:00pm** – My ward round is not finished but I need a break so I grab a drink and a salad while there is a quiet moment. On weekdays, we often have lunchtime meetings. But at the weekend it is a case of staying nearby in case we are needed.

Even though I qualified as a doctor more than 10 years ago, I'm always learning. I get amazing support from the London School of Paediatrics, where I work on their Trainees' Committee. It's really helpful to hear about what is happening elsewhere in the city and share the good things we do at Evelina London.

**2:30pm** – I continue my ward round and ensure that every baby is reviewed, all the right tests are



Dr Tatiana Hyde with Charlotte Carryl and baby Rio





performed, and any treatment is given.

This afternoon, I need to prepare three more babies to go to their local hospitals. The Neonatal Unit at Evelina London is one of the biggest in the region, so we get babies transferred to us from hospitals all over London and sometimes even further afield.

**4:30pm** – I am called to the postnatal ward to review a baby who is six hours old. His mother had a fever in labour and he is breathing quickly. We order blood tests and start antibiotics but agree that he doesn't need to be admitted to the NNU at the moment, so can stay with his

mother. We arrange for him to be reviewed later.

**5:10pm** – I'm just finishing up when a jaundiced baby arrives for review. I admit him to the postnatal ward with his mother and take some tests.

I make sure all my jobs are finished so it's as quiet as possible for the doctors who are on the longer shift.

It is always guaranteed to be a busy shift in SCBU and HDU but it is the only shift where I finish in time to see my own kids before bedtime. I cycle home, have dinner with my family, and get the children ready for school tomorrow.



## Why I fundraise

John Lynch is fundraising for Evelina London Children's Hospital to say thank you for his granddaughter Ava's treatment. He has chosen the hospital as his golf club's charity and they have raised an amazing £5,575, which will go to the Paediatric Intensive Care Unit and the high dependency cardiac ward.

Ava, now aged two, needed emergency treatment at Evelina London as soon as she was born, and had to stay in the hospital for three weeks.

Ava's mum, Lauren, says: "As soon as we arrived at Evelina London, we felt that Ava was in the best possible hands. The care she received was second to none.

"They also helped to support us as parents during such a difficult time. We are so grateful for the wonderful care Ava received. She went on to make a fantastic recovery and is now a very happy two-year-old with endless energy."

John adds: "The response from members of my golf club and visiting golfers has been fantastic. As soon as people have an understanding of the work of Evelina London they are keen to make a difference."

To find out how you can fundraise to support Evelina London, go to [www.supportevelina.org.uk](http://www.supportevelina.org.uk), email [info@supportevelina.org.uk](mailto:info@supportevelina.org.uk) or call 020 7848 4701.



## Ask us: How are you saving money?

The NHS is facing one of the biggest financial challenges in its history. Many trusts are struggling to balance their books and Guy's and St Thomas' is not immune from these pressures.

**Martin Shaw**, Finance Director, explains what we have been doing to save money.

### Why is this important?

Staying on top of our finances means we can continue to invest in our services so that we can provide the best possible care for our patients in the months and years to come.

### What are staff doing?

Staff are working hard to make savings and work as efficiently as possible, while maintaining the quality and safety of the care we provide to patients. More than 1,000 staff have attended interactive sessions to discuss how they can make changes in their own wards or departments.

### Can you give some examples of money-saving ideas?

Our anaesthetists are saving money by using less expensive blood transfusion sets, staff in the Paediatric Intensive Care Unit are making savings by changing the way they use and manage oxygen in the unit, and several of our services are reducing costs by using paper roll instead of linen on beds when it is appropriate. With the help of staff we reduced what we spend and gained additional income which saved £78.7 million last year.

## A chance to breathe

If you've visited our hospitals or community health centres, you may have caught a few beats of live music coming from our wards, corridors or staff areas.

From energizing flamenco to the soothing sounds of a harp, performances are delivered by Breathe Arts Health Research, an award-winning social enterprise which works to change attitudes towards creativity in healthcare.

Supported by Guy's and St Thomas' Charity, Breathe delivers more than 1,200 unique shows of music, dance, poetry and performing arts across Guy's and St Thomas' every year, including free lunchtime concerts on Mondays and Wednesdays. The performing arts programme is the largest of any NHS trust.

Each year more than 37,000 people in our hospitals and community health centres experience Breathe's performances. For patients, they offer a welcome distraction from treatment, and for staff a moment to recharge before carrying on with work.



Tim Osborn, project manager for performing arts at Breathe, says: "Music like this is emotional. Patients tell us that the music makes them feel better, happier, and more relaxed. It gives them a chance to forget why they're in hospital."

More than 80% of people report a reduction in stress, anxiety or worry, and 97% feel the performances 'humanise the hospital environment'.

And it doesn't end there. Breathe is

launching exciting new programmes to reach further and deeper into the environment. Its latest initiative, Breathing Spaces, is creating small pop-up events giving staff and patients the chance to experience a 'mini performance' and take short moments away from a stressful day.

[www.breatheahr.org](http://www.breatheahr.org)  
[www.gsttcharity.org.uk/arts](http://www.gsttcharity.org.uk/arts)



# Life blood – the first successful transfusion

**James Blundell**, after whom Blundell Ward at Guy's Hospital is named, carried out the first successful blood transfusion in humans.

James Blundell was a respected doctor and scientist, working in 'diseases of women' at Guy's Hospital.

Childbirth was often fatal in the 1800s, when one in every 100 women died from blood loss. At a time when women were still bled as a treatment for blood loss during labour, Blundell believed a blood transfusion could be used to treat blood loss after childbirth.

Transfusions had been attempted unsuccessfully in the 17th century using sheep's blood. But after several patients died, and a doctor put on trial for manslaughter, the practice was abandoned.

## Blundell's experiments

More than 150 years later, James Blundell, frustrated by losing so many women, designed his own experiments to build on recent work in animal-to-animal transfusions. Crucially, this previous work had established that blood transfusions could work if the animals were of the same species.

Blundell made careful note of the properties of human blood, and realised that it lost none of its life-giving properties when it was put into a syringe.

In 1818, after working at Guy's for four years, the 28-year-old doctor felt confident enough to cautiously try his first human-to-human transfusion.

The patient had stomach cancer and, although he died after a few days, James noted that his condition had briefly improved.

Blundell's first recorded success was in 1825, this time with a woman who had lost blood while giving birth. A few ounces of blood were transfused from her husband, and the woman survived.

Blundell went on to carry out 10 blood transfusions, five of which were successful. Part of the reason for the low success rate was a lack of understanding at the time about blood groups, which wouldn't be discovered until 1900.

When James Blundell published his findings in *The Lancet* in 1828, he wrote: "After undergoing the usual ordeal of neglect, opposition and ridicule, the operation will hereafter be admitted into general practice.

"The fact that life may be saved by transfusion of blood into the veins will be beneficial a thousand years hence as it is on this day."

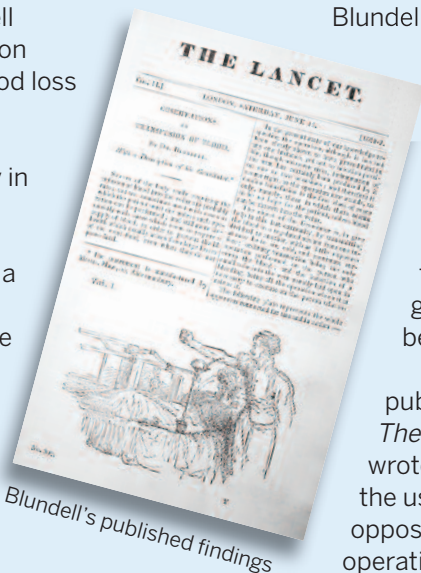
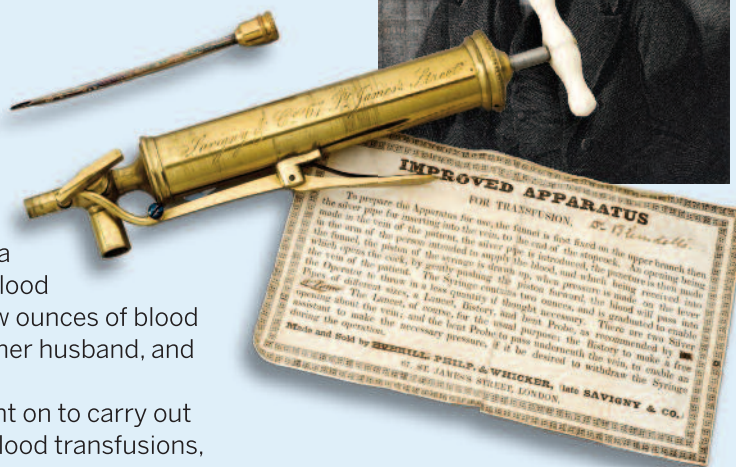
## About blood donations

- More than 800,000 people donate blood each year
- Less than 3% of people aged 17-70 are active blood donors
- Nationally we need 6,000 donations every day to meet hospitals' demand
- The different components of blood – for example platelets and red blood cells – can be separated out so that a patient can be given what they need.

James Blundell



Blundell's blood transfusion kit - courtesy of Science Museum, London



Blundell's published findings

## How blood helps in hospital

- Two thirds of blood donations are used to treat medical conditions including anaemia, cancer and blood disorders
- 27% is used in surgery, including heart surgery and emergency surgery
- 6% is used to treat blood loss after childbirth
- At Guy's and St Thomas' we use 54,500 blood components a year
- Most of the blood we use comes from the NHS Blood and Transplant stock holding unit in Tooting.

[www.blood.co.uk](http://www.blood.co.uk)



Picture courtesy of NHS Blood and Transplant

6,000 people are needed to give blood every day

# Say what?

Faye Buckle, porter

## Q How long have you been a porter?

A I've been a porter for eight months, but people might recognise me as I worked in Marks and Spencer at St Thomas' for three years before changing my career.

## Q That's quite a career change, how did that come about?

A I've always enjoyed working in a caring environment and I was previously a care assistant. Working in Marks and Spencer was like a community, it didn't feel like a job, you got to meet so many different people. I wanted to take it further, and I thought being a porter would be a great place to start.

## Q How would you describe the role of a porter?

A We are here to help patients to get around the hospital and we're often the first person a patient sees when they arrive. We aim to put them at ease with a friendly welcome as they may be feeling anxious or nervous. It's a huge honour and you can tell when you make a difference to a patient's experience, they're often very grateful.

## Q What's the best thing about being a porter?

A The job is different every day, it keeps you on your toes. It's a great team, and there are lots of female porters which makes me feel very proud as it is often seen as a male dominated role.



## Q What advice would you give to someone who was thinking of changing career?

A Go for it. Being at work should be a fulfilling and enjoyable time. I'm so happy in my new career. Who knows what might be next for me – watch this space!

## From the frontline

Clinical specialist physiotherapist  
**Mark McGlinchey**

I help people who have had strokes or other problems with their nervous system to become as physically independent as possible. I've worked here for four years now, and really enjoy it. Guy's and St Thomas' is a place that really develops its staff and I feel fortunate to have had a good level of training. I also teach students at King's College London and I recently had a fantastic opportunity to share my knowledge further afield.

Earlier this year, occupational therapist Nicole Walmsley and I visited a hospital in Vietnam. The trip was organised by Oxford University Clinical Research Unit and we were based at the Hospital for Tropical Diseases in Ho Chi Minh City. Our aim was to help them improve patient care and also support the carers (often relatives) who look after patients at home.

We spent a week training clinicians in rehabilitation with practical demonstrations and lectures, and also visited patients in their own homes. We made videos to show their carers the different ways that they could support them.

One patient I worked with had been treated for tuberculous (TB) meningitis. The disease had damaged her nerves so she couldn't walk or do everyday tasks for herself. TB meningitis is rare in the UK – it happens when the tuberculosis bacteria invade the membranes and fluid that surrounds the brain and spinal



Nicola Walmsley and Mark McGlinchey in Ho Chi Minh City

cord. Nerve damage happens if it isn't caught early.

The patient and her husband had been very creative with physiotherapy exercises and adapting their home to deal with her situation. It just highlighted how we don't always need to spend a lot of money to improve people's lives. It's possible to make a big difference with very little.

She had a wheelchair, but no hoists or lifting machines. Her husband improvised a device for her from bicycle parts and scrap metal – it worked surprisingly well. It made us feel lucky to have the resources we do in the UK.

We've encouraged the clinical staff in Ho Chi Minh City to establish links with other hospitals in the area so they can share the things they learnt even further. We hope the training will inspire clinicians and help patients and carers for many years to come.

It was a really rewarding experience. I can't wait to go back.



# What's On

## Now until 30 October

Take me to Neverland:

**Peter Pan from Play to Book and Beyond**

Florence Nightingale Museum

10am – 5pm

Call 020 7620 0374 or visit

[www.florence-nightingale.co.uk](http://www.florence-nightingale.co.uk)

## 26 May

**Seminar for Foundation Trust Members – Dementia**

6 – 7.30pm

Nevin Lecture Theatre,

St Thomas'

Call 0800 731 0319 or email

[members@gstt.nhs.uk](mailto:members@gstt.nhs.uk) to

book your place

## 4 June

**Guy's Cancer Centre abseil**

Register at

[www.cancercentreabseil.eventbrite.co.uk](http://www.cancercentreabseil.eventbrite.co.uk)

or call 020 7848 4701

## 5 June

**Cancer Survivors' Day**

2 – 6.30pm

Guy's Hospital

Register for tickets at

[www.cancersurvivorsdaylondon.eventbrite.com](http://www.cancersurvivorsdaylondon.eventbrite.com)

or call 07824 547 260

## Free film screenings:

**Medicinema** shows the latest releases for patients and staff

**Guy's** Tuesdays, 1.30pm and Thursdays, 7pm

**St Thomas'** Saturdays, 7pm and Tuesdays, 7.30pm

**Evelina London** screenings on Wednesdays, 7.30pm

## Free lunchtime concerts:

**Mondays** 1-2pm, Central Hall, St Thomas'

**Wednesdays** 1-2pm, Hospital Chapel, Guy's

## 12-18 June

**Diabetes Week**

[www.diabetes.org.uk](http://www.diabetes.org.uk)

## 14 June

**World Blood Donor Day**

[www.blood.co.uk](http://www.blood.co.uk)

## 25 June

**Pride in London**

Email [lgbtforum@gstt.nhs.uk](mailto:lgbtforum@gstt.nhs.uk)

for more information

## 13 July

**Friends of St Thomas'**

**Hospital Book Sale**

10am – 3pm

Birdsong Corridor, St Thomas'

## 14 July

**Seminar for Foundation Trust Members – Ophthalmology**

6 – 7.30pm

Nevin Lecture Theatre,

St Thomas'

Call 0800 731 0319 or email

[members@gstt.nhs.uk](mailto:members@gstt.nhs.uk) to

book your place

## 27 July

**Joint Board of Directors and Council of Governors meeting**

3.45 – 7.30pm

Governors' Hall, St Thomas'

# Competition



We have two pairs of tickets to the London Eye up for grabs. To be in with a chance of winning one pair, simply complete the wordsearch below.

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

Albatross

Kestrel

Puffin

Starling

Blackbird

Kingfisher

Raven

Swan

Chaffinch

Magpie

Robin

Woodpecker

Goldfinch

Pigeon

Sparrow

Wren

Name

Address

Email

Send your entry by **Thursday 30 June** 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](mailto: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.

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

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



Support

Guy's and  
St Thomas'

Support

Evelina  
London  
Children's Hospital



**Run.**

Secure your place  
[guysurbanchallenge.org.uk](http://guysurbanchallenge.org.uk)



**Spin.**



**Climb.**

**Fundraise for  
your hospitals!**  
Run the streets. Spin the pedals.  
Climb the stairs of the world's  
tallest hospital building.  
**Step up on your own or  
in a relay team.**

**Guy's  
Urban  
Challenge**

**30 Sept - 1 Oct 2016**