Standing tall
Syeda's incredible story of recovery
Welcome

The front cover of this edition features a remarkable young woman, Syeda Mannan, who is set to return to university to study law and politics after surviving a life-threatening illness which resulted in both her legs being amputated.

She was interviewed at our Amputee Rehabilitation Centre in Kennington where teams of highly specialist staff helped her to get used to using artificial limbs so she can resume her studies and live independently. Find out more about Syeda on page 8.

You can also discover what happened when Prince Harry visited Burrell Street Sexual Health Centre on page 10. He spent time with doctors and patients talking about how we diagnose and treat HIV, as well as how we normalise HIV testing.

Prince Harry had an HIV test during his visit to raise awareness and to show how quick and easy it is. Since his visit, charities have reported large increases in the number of people ordering HIV testing kits, and an astonishing 2.4 million people have watched Prince Harry take his HIV test on Facebook.

I hope you enjoy this edition of the GiST.

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

Contents

05 UK first for children with curved spines
A pioneering imaging technique reduces the use of X-rays

08 Syeda stands tall
Syeda has a bright future after a life-changing two weeks

10 Prince Harry tackles HIV stigma
Raising awareness of the importance of early diagnosis

14 The Interview
Dr Terry Gibson talks about his time saving lives in Sierra Leone

17 The Leading Edge
A new pacemaker positioning technique could save lives

18 Work Life
Oasis Youth Support Manager Tom Isaac describes a typical day

21 History Corner
Meet Mary Seacole

Meet the team


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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
Visit us online at: www.guysandstthomas.nhs.uk

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Chief Executive
Guy’s and St Thomas’ NHS Foundation Trust
Cancer survivors celebrate hope

Sharon Clovis was one of 15 cancer survivors who took to the catwalk to celebrate Cancer Survivors’ Day at Guy’s Hospital in June.

More than 750 people enjoyed a day of live music and entertainment, tours of the Cancer Centre, and a special fashion show.

Sharon trained as a nurse at Guy’s in the 1990s and now works at the hospital as a prostate cancer nurse specialist.

She says: “Even though I’ve been working with cancer patients for more than 16 years, my own diagnosis came as a complete shock. I knew I wanted to be treated at Guy’s and I’ve been cared for so well.

“Getting involved in Cancer Survivors’ Day has been fun to meet all the other survivors in the fashion show. I’ve learned that no matter what, you’re never alone. We’re all in this together.”

Professor Arnie Purushotham, breast cancer surgeon at Guy’s and St Thomas’ and Leader of the King’s Health Partners Cancer Clinical Academic Group, says: “This was only the second Cancer Survivors’ Day celebration to be held at Guy’s, but already it feels like a time-honoured tradition.

“The event will continue to grow and grow and we can’t wait to be able to share the experience with more people each year.”

Mary Seacole statue unveiled

An imposing new statue honouring Crimean War nurse Mary Seacole was unveiled in the gardens of St Thomas’ Hospital in June.

The sculpture by Martin Jennings is believed to be the first of a named black woman in the UK.

It was unveiled by Baroness Floella Benjamin OBE after 12 years of fundraising by the Mary Seacole Memorial Statue Appeal.

Speaking at the unveiling, Sir Hugh Taylor, Chairman of Guy’s and St Thomas’ said: “Perhaps there has never been a time in our recent history when it has been more important to celebrate and stand up for difference. Mary Seacole was different. She was not and is not defined by what she was not, or by what she did or did not do when compared with anyone else.

“She is being honoured today for herself, for her contribution which has become her legacy. As she stands proud – overlooking Parliament – she bears witness to what it means to be different in our society and the need to recognise it and honour it.”

Find out more about Mary Seacole in History Corner on page 21.
Meet the governors

Elections have taken place to vote for eight representatives on Guy’s and St Thomas’ Council of Governors.

The Trust is accountable to its local communities and its staff through Foundation Trust members and the Council of Governors which includes elected representatives of the public, patients and staff – as voted for by members.

The voices of our patients, members of the public and staff are vital in ensuring that our services are able to meet the needs of our communities now and in the future.

The following candidates were elected:

Public constituency
- Linda Goldsmith
- Prof John Porter (re-elected)
- Jenny Stiles (re-elected)

Patient constituency
- Devon Allison (re-elected)
- Heather Byron
- Anthony Leyshon

Staff constituency
(non-clinical staff group)
- Vicky Rogers
- Bryn Williams (re-elected)

Visit our website www.guysandstthomas.nhs.uk/membership to find out more about the Trust’s governors and how to become a member.

Join us at St Thomas’ on Thursday 15 September for our Annual Public Meeting. Refreshments will be available in Central Hall from 5.30pm before the meeting starts at 6pm in Shepherd Hall.

Join the organ donor register to save lives

Events will be taking place at Guy’s and St Thomas’ to celebrate Organ Donation Week which runs from Monday 5 to Sunday 11 September.

You can come and meet the team who will be available to answer any questions you may have about organ donation from 10am to 3pm on both Tuesday 6 September in Tower Wing reception at Guy’s Hospital and Thursday 8 September in the Birdsong Corridor at St Thomas’.

Sally Johnson, Director of Organ Donation and Transplantation at NHS Blood and Transplant, says: “Organ Donation Week gives everyone across the UK a special week to celebrate organ donors and their families, and to talk to family and friends about whether they would be prepared to emulate our special donors and make the decision to donate their organs too.

People waiting for transplants depend on others being willing to donate their organs. Sadly, on average three people die every day across the UK due to a shortage of donated organs.

“We know families are much more likely to support a relative’s decision to donate at a time of grief if they know that it was what their relative wanted.”

How can you join the NHS organ donor register?
- Online at www.organdonation.nhs.uk
- Phone 0300 123 23 23
- When you register for a driving licence, register at a GP surgery, apply for a Boots Advantage Card, or register for a European Health Insurance card (EHIC).

Guy’s Campus to go smoke-free

King’s College London’s Guy’s Campus is going smoke-free from Monday 5 September. This means that the whole of the Guy’s site will be smoke-free from that date.

Smoking will not be permitted anywhere on the King’s College London campus or on the Guy’s Hospital site. E-cigarettes will be permitted outdoors on the university campus but will continue to be banned on the hospital site.

Guy’s and St Thomas’ banned smoking on its hospital and community premises in June 2015.

If you want to know more about Guy’s and St Thomas’ smoke-free policy, or would like support to give up smoking, please contact Guy’s and St Thomas’ Stop Smoking Service on 020 7188 0995, or via email stopsmoking@gstt.nhs.uk.

For further information go to www.guysandstthomas.nhs.uk/smoke-free
Keep Our Bus Stops Safe!

More than 2,000 people signed a petition calling on Transport for London (TfL) to re-think plans for a ‘floating’ bus stop outside St Thomas’ Hospital.

Campaigners gathered at the bus stop on 28 June to urge TfL to listen to concerns that patients, visitors and staff getting off buses would have to cross a busy cycle lane to reach the hospital.

Guy’s and St Thomas’ NHS Foundation Trust has also filed an application for a judicial review, with support from charities including the RNIB and Guide Dogs.

Trust Chairman Sir Hugh Taylor says: “We are not taking this action lightly, however we believe that TfL’s plans for cycle lanes and so-called ‘floating’ bus stops on Westminster Bridge pose risks to both pedestrians and cyclists. We are talking to TfL about possible solutions.

“We are concerned about the impact on patients and carers, especially the elderly, disabled, and families with children in buggies and wheelchairs coming to Evelina London Children’s Hospital.”

UK first for children with curved spines

A new imaging system pioneered in Evelina London’s ‘One Small Step’ Gait Laboratory uses motion capture technology and ultrasound to generate 3D images of the spine’s shape instead of using X-rays.

This will help clinicians to make better treatment decisions when caring for children with scoliosis, a condition in which the spine is twisted and curved.

Daisy Biglands, 13, was one of the first patients to receive a scan using the new technology.

She says: “When I was diagnosed with scoliosis I was really scared. It’s not a nice thing to be told.

“The ultrasound was easy and took almost no time at all. We watched the 3D image of my spine build up as my back was scanned and I could see the curves really clearly. It helped me to understand what was going on with my scoliosis.”

Walking with Pride

More than 100 people joined Guy’s and St Thomas’ Lesbian, Gay, Bisexual and Transgender (LGBT) Forum to march at Pride and show support for the Trust and the NHS. Eric Pirozzoli, co-Chair of the LGBT Forum, said: “It was an amazing experience. Thank you to everyone who came to support us – we’ll see you again next year.” You can follow the Trust’s LGBT Forum on Twitter @GSTTLGBT.
When Renne Likau was pregnant, her only wish was to be able to hold her baby when she was born.

She explains: “My oldest child, Tanisha, was born when I was just 29 weeks pregnant. I’d had pre-eclampsia, a condition that can cause fits and stop the baby from growing, so she had to be delivered early to give her a chance at life. “She weighed just 1lb 10oz and she was in intensive care for five weeks. I couldn’t hold her. It was awful. “So when I was pregnant again, I was so worried that history would repeat itself. But when Cataleya was born, I got to hold her as soon as she was delivered. I couldn’t believe it! My dream came true.”

Renne experienced hypertension (unusually high blood pressure) during pregnancy. People who have hypertension don’t always have symptoms but in severe cases it can cause heart attacks and strokes. In pregnant women, hypertension also affects the growth of the baby and increases the risk of pre-eclampsia.

Renne was referred by her GP to a clinic at St Thomas’ which specialises in helping women with hypertension to have healthy pregnancies.

At the clinic, Renne met consultant obstetrician Professor Lucy Chappell who explains: “So many mothers tell me, ‘I just want to be able to hold my baby’ – and the specialist care and advice we provide helps to give women hope. “We do everything we can so that women can take a baby home with them at the end of a pregnancy. Sometimes that involves scans and regular blood pressure monitoring, blood pressure tablets that you can take when you’re pregnant, or advice on lifestyle. “When women like Renne get to meet and hold their babies it really encourages me to help more women have healthy pregnancies. “Piece by piece the research we do is helping doctors and scientists to understand more about hypertension in pregnancy so we can help more women.”

Professor Chappell and her colleagues Dr Kate Harding and midwife Mary Stewart see about 30 women a week in the hypertension in pregnancy clinic, building relationships, gaining trust, and helping women to have healthy pregnancies.

Renne concludes: “Lucy was fantastic. After we met, I felt for the first time that it might be ok in the end – I started to feel hope.”

Advice on hypertension in pregnancy

• Speak up and seek help
• Aim to keep your blood pressure in the normal range – sometimes this will mean taking tablets
• Eat healthily and try not to gain too much weight
• Avoid salt in your diet
• Continue to take sensible exercise – walking, swimming and yoga are great.
Amelia Ferguson, 14, had been unwell for more than a year with an illness which GPs and doctors at her local hospital mistook for chronic fatigue or glandular fever. At its worst it left her unable to drink, eat or walk, and she was in constant pain.

She spent hours on the internet researching her symptoms and finally concluded that she had autoimmune pandysautonomia – an ultra-rare condition which affects the nerves that control the function of the body’s organs. As a result, Amelia’s stomach and gut stopped working.

Amelia says: “I was so ill I couldn’t go to school, so I spent my time researching my symptoms. That’s when I came across a girl in Australia who was the same age and had similar symptoms to me. “I spoke to my school doctor about the research and he made contact with the doctor in Australia who told us to contact an expert at Evelina London straight away.

“It was absolutely amazing – Dr Ming Lim at Evelina London saw me within days. That’s when I came across a girl in Australia who was the same age and had similar symptoms to me. “I spoke to my school doctor about the research and he made contact with the doctor in Australia who told us to contact an expert at Evelina London straight away.

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“Dr Lim is a consultant paediatric neurologist at Evelina London who specialises in autoimmune conditions. Dr Lim says: “Amelia’s condition is extremely rare. She is one of only three children I’ve ever known about with this type of condition. Most children only have a few of the symptoms caused by pandysautonomia, but Amelia has them all. Her case is very unusual but she’s making good progress with her recovery.

“Amelia is one of the brightest children I’ve ever met. She’s told me that she’s going to write a medical paper on her condition when she’s better so that she can help others to understand the condition and learn from her experiences and treatment.

“I’ve promised her that I’ll read her paper and help to get it published.”

Amelia’s illness meant she spent a majority of Year 9 and Year 10 at Evelina London rather than at school, but she was never out of the thoughts of her classmates at St John’s School in Leatherhead, Surrey.

Her school house, Hazlewood, chose Evelina London as their charity of the year and began fundraising for the hospital. They held a dinner in January which raised £5,000 and reached a grand total of £6,481.

Amelia’s mum, Kyrste Ferguson, says: “For a lot of the time when Amelia was in Evelina London she wasn’t able to eat and was fed by a tube. As a parent, you don’t want to go far from your child’s bed but it can be hard to eat food in front of them.

“The nurses suggested that it would be great if the money raised by Amelia’s school went towards improving the family kitchen facilities on Savannah Ward to make it feel more homely and to provide a seating area.

“We’re so grateful for all the fundraising efforts done by the school, especially as it will benefit so many other families staying on Savannah Ward. Amelia’s older sister Elena and I will be taking part in Guy’s Urban Challenge in October as a way of showing how incredibly thankful we are to the wonderful team at Evelina London. Amelia has come so far in the past 18 months.”

To find out more about fundraising for Evelina London, visit www.supportevelina.org.uk.
Syeda Mannan was 20-years-old when a catastrophic illness left her with both legs amputated above the knee and without the tips of eight fingers.

Syeda says: “I was just your average teenager when I was diagnosed with Lupus, an incurable condition that affects the immune system, and Raynaud’s Phenomenon, which causes discomfort and makes your fingers and toes turn blue. But I never let them affect me.

“I had a sore throat which seemed to get worse and worse. At one point I couldn’t even swallow and I started vomiting. In October 2015 I had an endoscopy at my local hospital to see what was causing the problem. The next two weeks were life-changing for me.”

Doctors discovered that Syeda had a fungal infection and she started a course of drug treatment. Unfortunately, she had a severe allergic reaction which caused her to have a seizure. She went into septic shock, which meant her blood pressure dropped to dangerously low levels.

Several of her organs, including her liver, heart and lungs, failed while she was being transferred to St Thomas’ Hospital and she went into a coma. Syeda’s legs were amputated to save her life.

**Moving on from intensive care**

Syeda and her family kept a photographic diary of her progress, from the day she arrived on the Intensive Care Unit at St Thomas’ to her extraordinary first steps.

She explains: “I couldn’t eat or drink for more than three months while I was in intensive care. All I could have was ice cubes on my lips so I didn’t get dehydrated.

“The only way I could communicate was by blinking to spell out words and to tell people when I was in pain.

“The first part of my journey was very traumatic for my family but they have been wonderful, making the trip up from Crawley to the hospital, and now the Amputee Rehabilitation Unit, every single day. They have completely put their lives on hold since I fell ill. It has been very scary at times and it’s fair to say my recovery has shocked and surprised everyone.

“The doctors and nurses have been brilliant, they became like family to me. They spoiled me lots and would visit me in their break times and at the end of their shifts. I can never thank them enough for what they did.”

Syeda turned 21 in March while she was in the Lane Fox Respiratory Unit where she was being prepared to move on to the Amputee Rehabilitation Unit at St Thomas’. There a large team, including physiotherapist Lauren Joseph, got Syeda walking again.

**Preparing for the future**

Syeda continues: “Every day I’m learning new skills like dressing myself and how to open cupboard doors and reach for things safely. It will help me be more independent when I go home. They’ve given me new hobbies like volleyball and tennis.

“Sometimes I do get sad and ask why this has happened to me. But I don’t let it affect my outlook. There’s no use dwelling on the past. I want to focus on the future. I want to make a fresh start and be the best I can be.

“The staff at Guy’s and St Thomas’ have been amazing. I wouldn’t be here without them.”

With the help of occupational therapist Sophie Cook, Syeda has applied to return to university in September where she will continue studying politics and law.
“There’s no use dwelling on the past. I want to focus on the future. I want to make a fresh start and be the best I can be.”
HIV rates in the UK continue to rise despite years of progress in treating the illness. One of the biggest factors is that up to 17% of people who are HIV positive are unaware of their status and so can unintentionally pass on the virus to partners.

Late diagnosis also means people don’t get the early treatment they need to enable them to lead healthy lives.

Prince Harry visited Burrell Street Sexual Health Centre in Southwark as part of his work to focus the minds of his generation on the fight against HIV. While he was there, he took a rapid HIV test to help normalise and reduce the stigma associated with testing.

Robert Palmer, lead health advisor and psychosexual counsellor at Burrell Street, carried out Prince Harry’s rapid HIV test. His blood was mixed with chemicals and poured into a test tray.

In less than a minute, a negative result was indicated by a blue spot in the tray. If two spots had appeared, then more testing would have been needed.

Robert says: “It’s really important for someone like Prince Harry to have an HIV test because it normalises the testing process. It lets everyone know that it’s a simple test, it doesn’t take long, and that it’s important to know your HIV status.

“What we do know is that it’s not people who are HIV positive who are passing the infection on, it’s those who do not know their status. What we want to do is get those people into the clinic.

“If Prince Harry can come along today and let it be known that a royal can have an HIV test, then everyone can have an HIV test.”

Since Prince Harry’s visit to Burrell Street, the Terrence Higgins Trust has reported a five-fold increase in people ordering a self-testing kit.

HIV testing in A&E

Prince Harry also heard about a proactive approach to HIV testing in the Emergency Department (A&E) at St Thomas’ which means that people are receiving earlier diagnosis and treatment.

All A&E patients who are having a blood test are now tested for HIV as standard practice unless they opt out.

This approach was introduced in July 2015. To date, 30,000 patients have been
tested and 115 people were diagnosed.

Dr Nick Larbalestier, consultant physician and clinical lead for HIV, says: “Just as we use blood tests to check for other medical conditions such as diabetes, routine testing for HIV helps us to identify undiagnosed cases.

“People with HIV are able to live long and healthy lives, but this depends on them being diagnosed promptly and receiving the specialist treatment they need. This is why it’s so important to increase detection rates.”

When diagnosed, people with HIV are given medicines – often a single tablet or once-a-day regimen. These are very effective, very safe and largely free of side effects. They also prevent HIV from being spread.

Most patients diagnosed with HIV today can expect an almost normal lifespan if they are receiving treatment. The damage done by HIV to the immune system can be significantly repaired and, with better immune function, the risk of infection and some cancers is significantly reduced.

Dr Larbalestier concludes: “HIV can affect anyone, but testing undoubtedly saves lives.”

If you want an HIV test, please walk in or book an appointment at any of our sexual health clinics. www.guysandstthomas.nhs.uk/sexual-health

To order a free home testing kit, contact SH:24 www.sh24.org.uk
Every year, one in three people aged 65 and over has a fall, but there are plenty of simple ways to reduce the risk of falling as Jack Graves and Ruth Shepherd found out.

Reducing your risk of falls

For many older people a fall can lead to both injury and a serious loss of confidence.

Following a fall, it’s common to feel worried about doing physical activities and to become reluctant to leave home. This fear can undermine independence and affect a person’s social life and health. Supporting people to avoid falls is crucial in helping maintain a good quality of life.

Reducing the risk of falls is also valuable for wider society. Falls account for half of all accident-related hospital admissions, and up to a quarter of ambulance callouts.

Nicole Donnelly is an occupational therapist who works in the Trust’s falls clinic. She explains: “Supporting people to keep active and avoid falling – or falling repeatedly – is vital. Sometimes we find there is a simple reason why someone falls, such as impaired vision. I worked with a lady who had cataracts and was falling repeatedly. After having cataract surgery, she stopped falling and was able to regain her independence.”

Support where it’s needed – in hospital and in the community

The Older Person’s Assessment Unit at Guy’s Hospital runs a falls clinic for older people. The team includes a geriatrician, nurses, physiotherapists and occupational therapists.

People referred to the clinic will be assessed and provided with an exercise plan and may go on to take part in an eight-week course of strength and balance classes run by physiotherapists, with two classes each week.

Rebecca Edwards is a physiotherapist who works in the falls clinic. She says: “Our aim is for older people to regain confidence so that they can take charge of their own recovery.

“As well as the classes here in the clinic, the Trust also runs classes in community centres. Our award-winning community programme runs for up to 35 weeks in different venues across Lambeth and Southwark.

“Around 600 people go through the programme each year. It helps older people improve their strength and balance, as well as providing opportunities for socialising.”

The community classes are also open to older people who start to notice changes in their steadiness and want...
How to prevent falls

There are some simple steps to reduce the risk of falling:

- **Keep fit and active**
  You can do strengthening exercises such as squats or step-ups, and balance exercises such as lunges or walking on tiptoes.

- **Stay hydrated**
  It’s very important to drink enough water – being dehydrated is one of the main causes of falls.

- **Home improvements**
  There may be elements of your home that increase the risk of falls including poor lighting, trip hazards and clutter.

- **Get your eyes tested regularly.**

- **Overcome fears**
  Being afraid of falling increases the risk of falls because people avoid physical activity and lose their confidence.

- **Review medication**
  Side effects of medicines can contribute to falls. If your balance is getting worse, or you are getting very dizzy or having blackouts, your medicines may need to be reviewed.

Residents of Lambeth and Southwark can contact the Guy’s and St Thomas’ Strength and Balance Helpline on 020 3049 5424.

Valerie’s story

Valerie Collin, 96, from Vauxhall, was admitted to St Thomas’ Emergency Department (A&E) after falling and hitting her head. She has a history of falls, and was referred to the falls clinic for treatment.

Valerie’s falls were reviewed by the consultant to determine if there were any medical reasons for them. The occupational therapist made plans to review her at home for a hazards assessment and Valerie is now taking part in twice weekly exercise classes at Guy’s Hospital to take the first steps in regaining her confidence and strength.

Valerie says: “I’m really enjoying the classes. I felt lost after my fall, and it was difficult for me to get out of the house or to get on a bus. The exercise classes are really useful in building my strength and they are also something to do and somewhere to go.”

Valerie’s experience is all too common. Occupational therapist Nicole Donnelly comments: “When some people are first referred to us they are terrified to stand up, or even avoid drinking water so that they won’t need to go to the toilet. It’s so rewarding to support people like Valerie to recover from a fall, helping them to regain their strength and confidence.”
After retiring from his role as a consultant at Guy’s and St Thomas’, Dr Terry Gibson volunteered with the King’s Sierra Leone Partnership at Connaught Hospital in Freetown, Sierra Leone, from April 2014 to January 2016. He has now returned to a new role at St Thomas’ Hospital where he spoke to Michael Carden.

The view from Sierra Leone

**Q** What made you want to go out to Sierra Leone?

**A** I felt that I had more to offer. Having worked in developing countries before, Sierra Leone seemed like a fantastic opportunity to make a difference and stay within the King’s Health Partners family.

**Q** Having worked in the NHS most of your life, how did Sierra Leone compare?

**A** I could immediately see lots of challenges, which is what I was looking for. But I also realised very quickly that, in order to succeed, it was important not to try and impose ideas and to be aware of local culture, traditions and attitudes towards illness and medicine.

**Q** How does Connaught Hospital compare to what we have at Guy’s and St Thomas’?

**A** Very quickly you accept that you don’t have the same wealth of facilities that you would in the NHS, and you have to adapt, innovate and be imaginative. It reminds you just how few tools you actually need to do the basics of your job in acute medicine. The patients I was seeing were very sick with lots of different diseases, but they all required a diagnosis and appropriate treatments. It was very difficult to get things such as diagnostic scans or blood samples analysed. There was a CT scanner but no radiologist to interpret the results. So no matter how experienced you are, you do pick up new skills out of necessity!

**Q** What are your reflections on the role the team played during the Ebola crisis?

**A** I don’t think it can be said too often how crucial the King’s Sierra Leone Partnership team was in responding to the Ebola outbreak. They were the first to recognise how hospitals needed to reorganise in order to meet the threat. If it hadn’t been for their presence in setting up the first isolation unit in Freetown, there would have been a much worse impact on outcomes and spread of disease.

**Q** What lessons have you brought back from your time in Sierra Leone?

**A** A reminder to be respectful of different approaches to illness. I witnessed people who are very poor making great sacrifices for their loved ones and suffering tragic loss with great humility. It makes you realise how very fortunate we are here and how often we are unappreciative of our NHS.

**Q** Do you have any advice to anyone thinking of volunteering in somewhere like Sierra Leone?

**A** Be flexible, listen and adapt. Establish relationships with local colleagues. Roll up your sleeves and join the existing workforce, lead by example, teaching as you go along. I think it offers a fantastic opportunity.

King’s Sierra Leone Partnership is an initiative of King’s Health Partners Academic Health Sciences Centre, our Trust’s partnership with King’s College London and King’s College Hospital and South London and Maudsley NHS Foundation Trusts. To find out more, visit www.kslp.org.uk.
There is no doubt that Terry Gibson’s involvement in Sierra Leone prevented the Ebola tragedy from being much worse.

After helping with the initial response to the Ebola outbreak, he became the only senior doctor in charge of the hospital’s four medical wards. As other volunteers responded to the huge numbers of Ebola cases, he single-handedly ran the wards, caring for people with malaria, HIV, diabetes, and many other illnesses.

For two straight months he worked seven days a week and his efforts kept Connaught Hospital open during the outbreak. His commitment and bravery are truly inspiring and he undoubtedly saved many lives.

Professor Sir Robert Lechler
Executive Director, King’s Health Partners
Emma Orgill takes a look at an exciting new development that will help families of patients in Evelina London Children’s Hospital for years to come.

Keeping families close

Since the first Ronald McDonald House opened in 1990 near Guy’s Hospital, it has helped more than 5,000 families by providing free ‘home from home’ accommodation and support.

When Evelina London Children’s Hospital opened 10 years ago children started to be cared for on the St Thomas’ site, rather than at Guy’s. So Ronald McDonald House Charities will soon open a brand new 59-bedroom House just a few minutes’ walk from Evelina London.

The Clayton family

Peta and Tim Clayton from Jersey stayed at Ronald McDonald House when their son Tommy was born by emergency caesarean at 31 weeks, weighing only 2lb 8oz.

They had been on a routine visit to an antenatal clinic in Jersey when doctors realised that Tommy wasn’t thriving and opted for an emergency operation.

Tommy was rushed to the Special Care Baby Unit (SCBU) in Jersey and kept on a ventilator, but his condition meant that he had to be transferred to Evelina London’s Neonatal Intensive Care Unit.

Peta said: “Not knowing how long we’d need to be in London, we were so grateful to be able to stay at Ronald McDonald House.

“Without the House, we, as worried parents, would have found it so much harder to deal with everything.

“Having our own safe and secure room meant we felt there was somewhere to spend quiet time talking and reflecting on what was happening and what we needed to prepare ourselves for next.”

After three weeks in London, Peta and Tim were given the green light to go home to the SCBU in Jersey where the unit continued to look after Tommy. Finally, when he was three months old, Peta and Tim took their baby home.

Back in time

Archaeologist Richard Hewett visited the site of the new Ronald McDonald House in Lambeth Park when construction started. Reflecting on the importance of the House and what makes this project so different, Richard says: “It will ultimately provide a great benefit to the community and it’s always rewarding to
be involved with such an enterprise.”

Because the new House is located on the historic site of Lambeth Palace, Richard makes sure that no archaeological artefacts are disturbed during building.

He describes what has been found: “We have begun to reveal a few artefacts related to the seventeenth century onwards, as well as a few fragments of medieval pottery, possibly from the 12th or 13th century.

“There are indications of a prehistoric presence, although only a few artefacts have been found, including one flint tool which may prove to be a scraper, perhaps from the Bronze Age.”

www.rmhc.org.uk/evelina

Technology boosts pacemaker placement

A hi-tech improvement to the way pacemakers are implanted into patients with heart failure is being pioneered at Guy’s and St Thomas’.

Pacemakers are small electrical devices surgically implanted into the chest. They send electrical pulses to the patient’s heart to keep it beating regularly. Having a pacemaker fitted can significantly improve a patient’s quality of life and can even be life-saving.

It is crucial to ensure the pacemaker leads are positioned correctly.

Using software developed by clinicians and engineers at King’s College London in collaboration with experts from Siemens Healthcare, cardiologists can process precise information from cardiac magnetic resonance images (MRI) and combine these with live X-rays during the implant procedure.

This highly detailed fusion of two images means the team implanting the pacemaker can place the leads into the best possible position, improving the pacemaker’s effectiveness.

Professor Aldo Rinaldi, consultant cardiologist, explains: “This highly sophisticated technology gives us a much clearer image of the patient’s heart and so enables us to carry out the pacemaker implantation with greater precision.”

Robert Comber, 70, a part-time film actor and languages teacher, was the first patient to receive a pacemaker implant using the new technology.

He says: “I was initially wary of having a pacemaker fitted but the cardiologists at St Thomas’ advised me that this was the best way of keeping my heart in good health over the long term.”

Since Robert’s pacemaker was fitted, his heart condition has improved and he has gained improved stamina for activities like walking and swimming.

Watch a video of Dr Jonathan Behar, cardiology registrar and research fellow, talking about the new technique at www.youtube.com/gsttnhs.
Tom Isaac, Oasis Youth Support Manager, is based in the Emergency Department (A&E) at St Thomas’. He provides ongoing one-to-one support for young people who come to A&E as a result of violence or aggression. He talked Sarah Clark through his day.

Work life

9:30am – I meet with doctors, nurses and other staff for our regular psychosocial meeting. This important weekly meeting gives us the opportunity to review the cases of all potentially at-risk or vulnerable children and teenagers who have come to A&E in the last seven days. We make sure no stone is left unturned in terms of their safeguarding. There are a couple of young people who would benefit from my support and I note them down for follow-up.

11:00am – Roughly half of my working hours are spent outside the hospital meeting young people. Today I meet with a teenager who came to A&E last month due to a fight. Things recently got more serious and he brought a knife into his youth club which resulted in him being banned. We discuss what happened and he explains he brought the knife for protection from gang members who had been threatening him. After discussing his immediate and ongoing safety, we explore the actions leading to this incident and what he could do differently in future to avoid things escalating.

12:30pm – I pick up a falafel and salad wrap from a stand on Lower Marsh near the hospital (seriously tasty!).

1:00pm – I get a call from our placement student about a girl she has been mentoring. The girl has told her some troubling information about her boyfriend’s violent behaviour. After discussing it with the hospital safeguarding team, we decide we need to notify social care about our concerns, and come up with an action plan. The relationship of trust that our placement student has been building with this young person over the past five months was central to her feeling safe enough to share what she hadn’t told anyone else.

2:30pm – Back in the hospital I check whether any new referrals have come in. A 13-year-old was beaten up for their phone the evening before. I take their referral form and a copy of the notes for follow-up.

2:50pm – The mother of someone I have recently started working with gives me a call. She tells me her son has been admitted to King’s College Hospital after being stabbed in the shoulder. He had been in St Thomas’ A&E three weeks earlier after being hit with a baseball bat. I give the youth work team based at King’s a call to make them aware of the young person and their previous history. I schedule a time to go and visit him tomorrow morning.

3:45pm – Finally a bit of office time. I answer emails and write up diary sheets that record the details of all the young people I have met with and spoken to.
4:55pm – I remember I have an uneaten Kit-Kat and banana in my bag.

4:57pm – I no longer have an uneaten Kit-Kat and banana in my bag.

5:00pm – I call the young people I have booked in my diary for tomorrow to remind them we are meeting.

6:00pm – Almost done. I pick up a young person from his home and take him along to a football group. He came to A&E three months ago after punching through a window at home. In our one-to-one sessions he told me he loves football but has never played for a team. I’m hoping that, after I’ve taken him along to a few sessions, he will continue to go by himself.

This particular football project, Hub Athletic, is part of Oasis’ wider community work. It means that even after my work with him has officially come to an end, I will still be able to track his progress.

If successful, it will help him focus his energy and emotions into a productive activity, as well as keep him surrounded by positive role models. Which, in a nutshell, is what my job is all about.

www.oasisuk.org/oasis-youth-support

Why I fundraise

Councillor Dora Dixon-Fyle was the Mayor of Southwark in 2015-16 and Guy’s Cancer Centre Appeal was one of her two chosen charities. During her term in office she was passionate about raising money for the appeal.

“Cancer is such a tragic illness for so many families,” she says. “It was a privilege to support Guy’s Cancer Centre, which has the potential to help so many people from all walks of life and backgrounds to both recover from and survive their illness.”

Dora took part in many events to raise money, including walking up the 29 floors of Guy’s Tower as part of Guy’s Urban Challenge, an abseil, a charity ball and a successful quiz night. She also strutted her stuff on the catwalk of Cancer Survivors’ Day and visited patients at Guy’s and St Thomas’ on Christmas Day.

She says: “I want to say thank you to all the people who pledged and donated money to my mayoral events. Your contribution will help build the new Cancer Centre – saving lives and giving hope. What could be better?”

For more information about supporting your hospitals go to
www.supportgstt.org.uk or email
info@supportgstt.org.uk or call
020 7848 4701.
Ask us:
How do we share information?

Dr Cormac Breen, Chief Clinical Information Officer, explains how the Local Care Record is improving the way health organisations locally are caring for patients.

What is the Local Care Record?
The Local Care Record is a shared care record and a way of quickly and securely sharing patient information between health professionals at Guy’s and St Thomas’, King’s College Hospital, South London and Maudsley NHS Foundation Trusts and local GP practices.

What difference has it made?
The Local Care Record was launched in February 2016 and all 91 GP practices in Lambeth and Southwark are now using it. We are avoiding about 25 unnecessary or duplicate tests per GP practice per month and there are 60-75% fewer phone calls from GP practices to hospitals. It is saving time for both clinical and support staff, avoids duplication of tests and is improving continuity of care between services. It gives patients greater confidence that their care teams have the information they need.

Why is this important?
A lot of patients locally receive care at different local hospitals as well as their local GP practice. Care is improved because clinicians can quickly see the most up-to-date information in both the hospital and GP systems such as test results, medications and previous visits, which helps them to make better informed decisions about patient care.

www.kingshealthpartners.org/localcarerecord

Art at St Thomas’

On the walls of the South Wing corridor at St Thomas’, you can see a collection of beautiful tiled panels depicting nursery rhymes and fairy tales like Cinderella, Puss in Boots and Little Bo Peep.

Generations of children have enjoyed the tiles which originally covered the walls of two of the children’s wards at St Thomas’ that opened in 1901 and 1903 (pictured).

The tiled panels were made by one of the great Victorian ceramic factories – Royal Doulton of Lambeth – which was among the many potteries that were based in the area at this time.

The tiles were designed by Margaret Thompson and William Rowe who worked alongside leading ceramic artists of the day including George Tinworth and Hannah Barlow. Together these ceramic artists left an artistic legacy that Royal Doulton is still famous for today.

The original children’s wards were damaged during World War II but some of the tiles survived. They were extensively restored in 2008 and displayed in their current locations for patients, staff and visitors to enjoy.

The Royal Doulton tiles are part of Guy’s and St Thomas’ Charity’s fine art and heritage collection, one of the largest art collections belonging to a health charity in the UK. The Charity uses art to improve the environment at Guy’s and St Thomas’ for the benefit of patients, staff and visitors.
Meet Mary Seacole

The new statue in the gardens of St Thomas’ Hospital is believed to be the first statue in the UK of a named black woman. Jean Gray reveals more about Mary Seacole.

“I trust that England will not forget one who nursed her sick, who sought out her wounded to aid and succour them, and who performed the last offices for some of her illustrious dead.”

This comment, written by The Times war correspondent Sir William Howard Russell in 1857, provided inspiration for the Mary Seacole Memorial Statue Appeal over 12 years of campaigning and fundraising.

The statue can now be seen by patients, visitors and staff walking through the gardens at St Thomas’.

Much of what we know about Mary’s life comes from her autobiography Wonderful Adventures of Mrs Seacole in Many Lands, written in 1857. The daughter of a Creole mother and Scottish father, Mary Jane Grant was born in Kingston, Jamaica early in the 1800s. She followed in her mother’s footsteps as a doctress, nurse and entrepreneur, with a passion for travel.

She was widowed after only eight years of marriage to Edwin Seacole, and in 1851 she single-handedly cared for patients during a cholera outbreak in Panama. She then returned to Jamaica to look after victims of yellow fever. In 1853 she was asked to supervise nursing services at the British Army headquarters in Up-Park Camp, Kingston, a move that created a bond between Mary and the military that would last throughout her life.

Arriving in London on business the following year, Mary was distressed by stories of the appalling care being offered to British soldiers in the Crimean War. Florence Nightingale had already left for Scutari, so Mary secured funds to get to the battlefields under her own steam.

There she set up the ‘British Hotel’, a canteen and store very close to the war zone, where she also ran a morning dispensary before visiting sick and wounded soldiers in their huts or on the battlefield. She became known to the soldiers as ‘Mother Seacole’.

Sir William Russell saw her ‘under fire’ at three battle scenes. He wrote: “A more tender or skillful hand about a wound or broken limb could not be found among our best surgeons.”

When the war ended abruptly in 1856, Mary returned to London and was declared bankrupt. Key figures in the military and the media, together with members of the Royal Family, ensured she was not destitute.

One example of their support was the four-day ‘Seacole Fund Grand Military Gala’ held in July 1857 and attended by 80,000 people. The venue was the magnificent Royal Surrey Gardens located in the centre of London on the banks of the Thames.

Mary died on 14 May 1881 at her home in Paddington. Her grave is in St Mary’s Catholic Cemetery in Kensal Green, west London.

A Statue for Mary: The Seacole Legacy

The story of Martin Jennings’ stunning work, is told in this commemorative book. It will be available, priced at £20, from the Florence Nightingale Museum and the Black Cultural Archives in Brixton. Mail order details are available at www.maryseacoleappeal.org.uk.
Thanks to a new opportunity at Guy’s and St Thomas’, I’m breaking down my barriers and taking steps towards achieving my dream of being a nurse.

After working as a housekeeper at Guy’s Hospital for 14 years, I’d always admired the nursing staff. My dad is a nurse and I’ve dreamed of following in his footsteps because I’m so proud of what he has achieved.

I was encouraged to apply for a nursing assistant secondment by a nurse on one of the wards where I was a housekeeper. I’d begun to feel confident enough with my English so decided to go for it. When I got the email to say I’d been successful I was so happy I screamed. I’d proven to myself that I can do it.

I can remember my first day really well, I was so nervous going to St Thomas’ rather than Guy’s that I left my lunch on the Tube – I couldn’t believe it!

The nursing assistant secondment programme is designed for people just like me who want to move into clinical roles. As well as working with the nursing teams on the wards, helping to care for patients, I’m also studying towards my nursing assistant diploma.

I’ve learned so much in such a short space of time. I used to be shy and not speak to people I didn’t know, but now I speak to different people every day and I am able to build lasting relationships with our patients.

I’m so much happier in myself. My son is so happy for me and I know my father would be proud.
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.

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

Send your entry by 23 September 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.

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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
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