News for staff, patients and visitors at the Churchill, Horton General and John Radcliffe Hospitals

FREE
Please take one
Staff and patients saw for themselves the lovely new facilities at the new Chipping Norton Community Hospital at an open day on Thursday 3 March. At the end of February 2011, staff, patients and services at the Chipping Norton War Memorial Community Hospital all moved to the brand new site on the London Road, Chipping Norton.

The Oxford Radcliffe Hospitals NHS Trust is providing two of the services at the new site: the Cotswold Maternity Unit and X-ray services. Other services on the site include an Outpatient Unit that includes physiotherapy, speech and language therapy, podiatry and consultant clinics as well as short stay inpatient services. Services such as district nursing and community services for occupational therapy and physiotherapy will also have their offices based in the new building.

The new Cotswold Maternity Unit has two birthing pools, both with en suite facilities, a larger and improved waiting area and greatly improved space for antenatal and postnatal drop-in and breastfeeding support.

Community Midwife Cheryl Keeble, Team Leader at the Cotswold Maternity Unit said: “The existing unit has served the population of Chipping Norton and the surrounding areas well for a number of years. We will all take fond memories of it with us. However, we are delighted with our new purpose-built facilities which are really lovely. This is an exciting time.”

There has been a hospital in Chipping Norton since 1920. It was closed for a year at the outset of World War Two and reopened in 1940. The NHS took over the running of it in 1946.

The telephone number for the Cotswold Maternity Unit is 01608 648 222.
On 28 February 2011, the Trust Boards of the Nuffield Orthopaedic Centre (NOC) and the Oxford Radcliffe Hospitals (ORH) agreed at public Board meetings to integrate their services and create a combined NHS Trust with a new name.

The two Trusts announced in September 2010 that they planned to explore the possibility of integration, and since then a great deal of work has taken place to identify the benefits to patients and to begin the formal processes which would enable integration to happen.

A new name for the Trust has not been finally decided upon, but it is expected the name will reflect both organisations’ world class clinical and research expertise. The four hospital sites will retain their current names and identities in the overarching NHS Trust.

The NOC will continue to provide the range of services from its current site in Headington; and the John Radcliffe, Churchill and Horton General Hospitals will retain their separate identities and the existing range of general and specialist services.

There are still a number of stages to go through before the Trusts can finally integrate. The NOC - ORH Integration Business Case is the main document detailing the way in which integration will happen and identifies the main benefits of taking this forward.

The main purpose of merger is to deliver better patient care. By joining forces, the NOC and ORH will be better placed to improve care pathways and ensure patients receive access to the best treatments available. Both Trusts already have strong research partnerships and integration will strengthen the links between academic research, teaching and training and clinical service delivery.

Five main areas have been identified in which integration will benefit the populations served by the new Trust:

**Patient outcomes and experience**
Integration will enable improvements to pathways that currently cross Trust boundaries, identify the best treatment options more quickly and help overcome some of the barriers that exist when organisations are working separately. Clinicians and managers from both Trusts will be working with GPs and with patients in the coming months to ensure that their views are harnessed to make the changes that will benefit patients.

**Patient safety** – Continuity of care will be easier to deliver in a merged organisation where joint working across service boundaries is the norm.

**Education and research** – Integration will maximise the opportunity of delivering innovation through translational research with our University partners.

**Specialist services** – Both the ORH and the NOC currently offer a range of specialist services that are not widely available in the UK and attract patients from beyond Oxfordshire. The integration offers a potential to grow these services so that more patients can benefit from the expertise Oxford’s hospitals have to offer.

**Staff development** – Integration will enable more opportunities for career development, shared training programmes and a broader range of experience across different specialties. It will ensure Oxford continues to attract the best candidates for clinical posts and support staff retention.

**Making the case for merger**
A key aim is to create a Trust that is able to achieve enhanced patient care and also provide the financial and operational stability which is necessary to achieve Foundation Trust status. It is believed that the combination of the two Trusts would enhance the ability to achieve Foundation Trust status by 2014 in line with Government requirements.

Subject to an approval process, which includes the South Central Strategic Health Authority and the Secretary of State for Health, it is hoped integration will become effective from July 2011.

The NOC - ORH Integration Business Case is available from both Trust websites in the ‘About us’ section that contains Trust Board papers.
Finding the zone: doctors explore ‘functional leadership’

In December 2010, middle grade doctors and senior nurses from the Emergency Department (ED) learned about ‘functional leadership’ – a system that equips leaders with the skills to lead in complex and quick-changing situations.

It looks at leadership not as the actions of a single person, but rather as a set of behaviours that help a group perform their task. It is all about balancing the needs of the group, the individual and the task at hand – factors that are often present in healthcare.

Led by Dr Lloyd McCann from Service Improvement, the day started by looking at the concept of ‘functional leadership’ and then turned to practical outdoor activities which tested new skills and knowledge, and encouraged team building. The event culminated in an exercise where the team had to deal with a rapidly evolving scenario based around a real life major incident.

ED Specialist Registrar Dr John Hambly said, “It was brilliant to have the entire registrar team involved. We learned critical leadership and management skills and then had the opportunity to practice them.” Senior ED Sister, Jules Stockbridge said, “It gave the team a real opportunity to build on strengths and identify and work on areas of weaknesses.”

Ashok Handa, Clinical Director of Theatres and Anaesthetics and Clinical Lead for the Service Improvement team, commended the work. “As the NHS looks more to its doctors and nurses to come up with the solutions to the hard work facing it, it’s vital that we prioritise teaching the senior clinicians of the future about leadership and management skills.”

For more about functional leadership, contact Lloyd.mccann@orh.nhs.uk

To learn more about the work of the Service Improvement team, contact service.improvement@orh.nhs.uk

Senior ED Sister, Jules Stockbridge, said, “It gave the team a real opportunity to build on strengths and identify and work on areas of weaknesses.”
The review looked at care from the point of view of patients – not only during their time in hospital but afterwards as well, when they have rehabilitation and support at home.

Dr James Kennedy, stroke specialist at the Oxford Radcliffe Hospitals, told ORH News, “We are really pleased that we are delivering a better service for our patients. We are now seeing more patients able to return home sooner and in better shape than ever before. This is due to the improvements in care throughout their treatment in hospital and their rehabilitation.”

The review found that stroke services in Oxfordshire had greatly improved in recent years. This is because the hospital is working much more closely with GPs, support services such as physiotherapy, the County Council’s social care provision and researchers at the University of Oxford.

Two new stroke rehabilitation units opened in Oxfordshire in 2009, in Abingdon and Witney Community Hospitals, and recently a new service was launched that helps patients in their own home, so that they do not have to spend so long in hospital.

In fact, the average length of time stroke patients spend in hospital has reduced from 19 days in 2009 to seven days in 2010.

The Care Quality Commission review also highlighted that stroke services in Oxfordshire had done particularly well in the support offered to people who have had a stroke.

Oxfordshire County Council appointed a stroke advisor to work with the health service to make sure patients and their carers know where to find out about services they might need. New services have been put in place to support stroke survivors to make changes to their lifestyle to minimise the risk of a second stroke.
Public Consultation into the future

The NHS is reviewing the way children’s congenital heart surgery services are organised in England. The review, called Safe and Sustainable seeks to reduce the number of hospitals performing children’s heart surgery so that there are fewer, larger surgical centres.

Safe and Sustainable is recommending four options to reduce the number of hospitals providing children’s heart surgery from 11 to six or seven.

New quality standards are also proposed and a four month full public consultation on the proposals is taking place now. The consultation started on 28 February and will last until 1 July.

Events are being held near all 11 of the current children’s heart surgery centres – including Oxford – during the consultation period.

The public is invited to give their views on the recommendations and a final decision will be made later this year.

Oxford joins Southampton in children’s heart surgery network

The Oxford Radcliffe Hospitals NHS Trust has formed a strategic partnership with the children’s heart surgery centre in Southampton to provide surgery and invasive cardiology to patients across the South of England.

The two hospitals are hoping that by working together they can become part of the new configuration of children’s heart services being proposed by the national Safe and Sustainable review that is taking place in England.

The clinical teams at Oxford and Southampton have been working closely to develop proposals for a network of care across the South of England. The aim is to provide a more sustainable paediatric cardiac surgical service in line with the aims of Safe and Sustainable, while at the same time maximising the benefits of having the wide range of other interdependent services that are so often needed by this group of patients.

The national Safe and Sustainable review of children’s heart surgery services is recommending that children’s heart surgery should only be provided in a smaller number of larger centres in the future. These surgical centres would perform at least 400 children’s heart operations each year and have at least four surgeons.

Since Oxford stopped performing children’s heart surgery in February 2010, about 150 children have been referred to other hospitals – two thirds of these to Southampton and a third to Great Ormond Street in London. This has enabled Southampton to meet the criteria, in terms of patient numbers, that is being set by the review. Southampton University Hospitals NHS Trust now has four children’s heart surgeons (the fourth surgeon is a new appointment and starts with the Trust in July 2011).

An independent report by Professor Sir Ian Kennedy for the Safe and Sustainable review, ranked Southampton as the best children’s heart surgery centre outside London – second after the Evelina Children’s Hospital at Guy’s and St Thomas’. Despite this, the hospital is not guaranteed its place as one of the new surgical centres.

Children’s heart surgery in Bristol, Birmingham and the Alder Hey Hospital in Liverpool are thought to be safe from closure because they are the largest in terms of the number of operations carried out, and they feature in all of the four options in the consultation. Southampton features in just one of the options – Option B.
Oxford is not included in any of the options because the Safe and Sustainable review team felt that, as one of the smallest centres in the country, it had the least chance of achieving the new standards being set.

Sir Jonathan Michael, Chief Executive of the Oxford Radcliffe Hospitals NHS Trust said, “A partnership between Oxford and Southampton will ensure that children and families in the areas we serve receive the best treatment available. We believe that it is in the best interests of patients that services are preserved as locally as possible and it is important to remember that surgery is only one part of the treatment of children who often have complex needs.

“The networking arrangement that is working so successfully with Southampton is an innovative opportunity to provide excellent care in a way that fulfils the aims of the Safe and Sustainable review, while preserving the wishes of many families that they access the majority of the care for their children as close to home as possible.”

Mark Hackett, Chief Executive of Southampton University Hospitals NHS Trust said, “We are delighted that the Kennedy Report has supported the confidence our patients and families have always had in the high quality of our service.

“However, we remain concerned that the review has not yet guaranteed the future of the country’s leading centre outside London, and it is now important that the public supports us during this period of consultation. The Southampton-Oxford clinical network demonstrates that our organisations have already understood and acted on the principles of Safe and Sustainable in this area.”

The four options for public consultation

There are four options for the public to consider. Oxford is not included in any option because the Safe and Sustainable review team felt that, as one of the smallest centres in the country, it had the least chance of achieving the new standards being set. Southampton features in one option.

Safe and Sustainable is also recommending that London should be served by two surgical centres. The preferred configuration in London is that Great Ormond Street Hospital and the Evelina Children’s Hospital at Guy’s and St Thomas’ would remain surgical centres. The Royal Brompton Hospital, which also serves London, would become a children’s cardiology centre and stop providing children’s heart surgery.

Option A –
Seven surgical centres at
- Freeman Hospital, Newcastle
- Alder Hey Children’s Hospital, Liverpool
- Glenfield Hospital, Leicester
- Birmingham Children’s Hospital
- Bristol Royal Hospital for Children
- Two centres in London

Option B –
Seven surgical centres at
- Freeman Hospital, Newcastle
- Alder Hey Children’s Hospital, Liverpool
- Birmingham Children’s Hospital
- Bristol Royal Hospital for Children
- Southampton General Hospital
- Two centres in London

Option C –
Six surgical centres at
- Freeman Hospital, Newcastle
- Alder Hey Children’s Hospital, Liverpool
- Birmingham Children’s Hospital
- Bristol Royal Hospital for Children
- Two centres in London

Option D –
Six surgical centres at
- Leeds General Infirmary
- Alder Hey Children’s Hospital, Liverpool
- Birmingham Children’s Hospital
- Bristol Royal Hospital for Children
- Two centres in London

London – The preferred two London centres in the four options are
- Evelina Children’s Hospital
- Great Ormond Street Hospital for Children

Public consultation events

Public consultation events are being held throughout the consultation period.

Public events will be held in Oxford and Southampton allowing people to find out more about the proposed options for change.

The events will also provide an opportunity for people to ask questions that may be useful before completing the consultation response form.

The Oxford consultation event will be held on 4 May at the Kassam Stadium.

The Southampton consultation event will be held on 24 May at the Guildhall.

Both events are from 6.00pm to 8.00pm.

To register to attend any of the events, please visit: www.eventsforce.net/safeandsustainable

More information about the consultation options and events is available from the website for specialist services: www.specialisedservices.nhs.uk
Weight Watchers
Express meetings
for staff

Staff have been dropping-in to drop pounds at the new on-site Weight Watchers Express meetings that started at the John Radcliffe Hospital in February.

The meetings are new and exclusively for staff, as part of the Occupational Health Department’s programme of promoting staff wellbeing.

Group leader Zita Luscombe lost five stone in 11 months using Weight Watchers. She said, “I’m proof that the programme works. It’s not about restricting yourself or crash dieting, it’s a long lasting lifestyle change.

“Express meetings give you the chance to follow the Weight Watchers programme even if you don’t have much time to spare,” said Zita. “Members can have as little or as much support as they need, not just in the sessions themselves but by text, phone and email too.

“In the first three weeks we had 40 people join and they have lost 50lb (22.7kgs) between them.”

Patricia Poole, Occupational Health Manager said, “We’re delighted with how popular the meetings have been. It’s fantastic to see everyone motivated and enjoying themselves whilst improving their wellbeing.”

Are you a Foundation Trust member?

The Oxford Radcliffe Hospitals NHS Trust hopes to become a Foundation Trust. We already have around 5,000 members from the local community who have been keeping in touch with our news and attending events at our hospitals.

Become a Foundation Trust member and have a greater say in how your hospitals are run.

Contact us:
Foundation Trust Office
Level 3, Academic Centre
John Radcliffe Hospital
Headley Way
Oxford OX3 9DU
Email: orhmembers@orh.nhs.uk
www.oxfordradcliffe.nhs.uk/foundation

Doing more to help your wellbeing

Weight Watchers meetings are part of the wider work in the Trust to do more to help staff stay healthy. Staff can find out more about health and wellbeing activities on the Staff Room pages of ORHi the Trust intranet.
Or contact Occupational Health on 01865 2 20798.

Thursdays
12.00pm - 1.30pm
Committee Room, Level 3 – opposite the George Pickering Education Centre at the John Radcliffe Hospital.

For more information contact:
zita.luscombe@googlemail.com
or just pop along to a meeting.
ORH staff awarded

**Professor Andrew Wilkinson**, Consultant Paediatrician at the John Radcliffe Hospital, has been awarded the James Spence Medal.

The medal is awarded for outstanding contributions to the advancement or clarification of paediatric knowledge. It is the highest honour the Royal College of Paediatrics and Child Health can bestow.

Professor Wilkinson is an internationally recognised specialist who has carried out a wide range of research into improving medical care of sick newborn babies. The last time the James Spence Medal was issued to a paediatrician at the John Radcliffe Hospital was in 1986 to Professor Peter Tizard.

**Sister Ann Readhead** was awarded an honorary MBE in the Queen’s Birthday Honours last year. Ann was closely involved with the relocation of the Geratology Unit from the Radcliffe Infirmary to the John Radcliffe Hospital, and its subsequent refurbishment.

Ann was a champion for the creation of a sensory garden for geratology patients. In her voluntary role as Prospects Manager she has helped raise £200,000 for the garden and equipment. Her passion for her role has also helped raise the profile of care of elderly patients both in the Trust and in the community as a whole.

*Anne Readhead with Anne Milton, Parliamentary Under Secretary of State for Health, who presented the awards.*

**Professor David Mant**, Associate Non-executive Director of the Trust, has been awarded an OBE in the New Year Honours for his services to medicine.

Professor Mant is head of the University of Oxford’s Department of Primary Health Care and works as a general practitioner in the NHS. His personal research focuses on the prevention and early diagnosis of common diseases in primary care, particularly childhood infection, cardiovascular disease and stroke. He is also responsible for the clinical teaching of Oxford University medical students in general practice.

The first Baby Café based inside a hospital was launched at the John Radcliffe Hospital’s Women’s Centre in January.

The John Radcliffe Baby Café is unique as it provides support for breastfeeding mums and their partners before they leave hospital. The service is run by midwife Lisa Clayden and supported by volunteers who have been trained in breastfeeding peer support. Drop-in sessions are run every Wednesday morning for inpatients.

Lisa Clayden said, “Baby Cafés offer mums and their partners a friendly and supportive atmosphere to learn and talk about breastfeeding. By setting up a café in the hospital we can give mums a good start before they leave and put them on the road to successful breastfeeding”.

There are 11 other Baby Cafés across Oxfordshire based in the community. There are also Breastfeeding Clinics at the John Radcliffe and the Horton General Hospital.

For more information about Baby Cafés and Breastfeeding Clinics visit: [www.oxfordradcliffe.nhs.uk/infantfeeding](http://www.oxfordradcliffe.nhs.uk/infantfeeding)
New vision for the Horton

Doctors, nurses and managers at the Trust have been working with members of the public, GPs and staff from NHS Oxfordshire (who currently commission our services) to identify how we can further develop services at the Horton General Hospital in Banbury.

In the changing world of healthcare, patients expect more services to be delivered locally and in the community. The Oxford Radcliffe Hospitals is developing a work programme with clinicians and members of the public to see what services can be delivered from Banbury in the future.

For more details on the vision for the Horton, please see www.oxfordradcliffe.nhs.uk/aboutus/horton.aspx

The Better Healthcare Programme for Banbury and the surrounding areas

The Better Healthcare Programme has been a collaboration between NHS Oxfordshire, the Oxford Radcliffe Hospitals NHS Trust and the local community. Together, proposals have been developed to safeguard paediatric and obstetric services at the Horton General Hospital, and to expand anaesthetic services.

By far the biggest of the changes brought about by the Better Healthcare Programme has been the recruitment of 12 new paediatric consultants. Eleven posts have now been filled and the remaining post will be advertised in the late spring. Nearly all the new consultants are now in post. A new resident anaesthetic rota has now started with new anaesthetic theatre nurses and staff being recruited to support it.

The Trust remains committed to implementing a 24/7 obstetric service at the Horton General Hospital. At the moment the Trust is examining options for delivering this.

100% The Horton is manual bed free

The Horton General Hospital is now manual bed free as all beds across hospital wards are now electrically controlled following a delivery of new beds in December 2010.

Electric beds are better for patients and staff. They are more comfortable and because you can alter the position of the beds at the press of a button, staff are less likely to get back injuries when adjusting them.

Mary Ashford, Senior Back Care Advisor, who is part of the Occupational Health team said, “Using electric beds is better for staff and patients. We are delighted that the Horton is now manual bed free. There are some areas with manual beds on the Churchill and John Radcliffe Hospital sites, but we are working hard with the procurement team to ensure that soon we have only electric beds across all three sites.”
‘Second to none’

Pat McFarlane from Nottingham has raised over £2,500 for a specialist chair in the neuro intensive care unit as a ‘thank you’ to the Trust for her son’s care. Pat’s son Michael has been treated by the unit following a head injury in June 2010.

Pat organised a Northern Soul dance to raise the funds for the chair with around 300 people buying tickets. She said, “The treatment Michael receives is second to none. Without the unit and the staff Michael simply wouldn’t be here.”

Hilary Madder, clinical lead of neuro intensive care said, “It’s really important to patients’ recovery that they get out of bed as soon as they can. Before Pat’s kind donation we had one of these specialist chairs. Having this second one is a fantastic help and many patients will benefit from Pat’s generosity.”

The Oxfordshire Chlamydia Screening Project is encouraging more young people to get tested for Chlamydia by offering free, confidential self-test packs.

Leon Maciocia, Chlamydia Screening Coordinator said, “Chlamydia has no symptoms, the only way to know you don’t have it is to get tested. The test is really quick and completely painless (you do the test yourself – at home if you request a postal test) and if you do find out you’ve got Chlamydia, it’s simple to treat with antibiotics.”

Chlamydia facts

- Chlamydia is the most commonly diagnosed sexually transmitted infection.
- It is most common in men and women under 25.
- 1 in 14 young people under 25 are estimated to already be infected with Chlamydia.
- Free self-test packs are also available in most GP surgeries, contraception and sexual health clinics, antenatal clinics and selected pharmacies throughout Oxfordshire. Screening is also available in the colleges and universities.
- If you are 25 or over, have symptoms or are worried about your sexual health, you can contact the Genitourinary Medicine (GUM) clinics in Oxford (01865 231231) or Banbury (01295 819181).

For more information or to request a self-test kit visit www.sexualhealthoxfordshire.nhs.uk
Brodey Centre expands thanks to generous donations

The Brodey Centre has re-opened at the Horton General Hospital following building work to extend it.

The Brodey Centre offers patients the opportunity to have their treatment for cancer in Banbury rather than travelling to the Cancer Centre in Oxford. Following the extension, the Brodey Centre now has eight treatment spaces – double the number available before.

The extension has been made possible by the amazing generosity of hundreds of people who fundraised a fantastic £500,000 to make it happen. The whole project was co-ordinated by Fundraising Project Manager, Yolanda Jacob.

Mike Fleming, Director of the Horton General Hospital, spoke of the Trust’s gratitude, “I want to thank Yolanda personally for all the hard work that she has put in on this project and all of our fantastic donors. Most of our donors were from Banbury and the surrounding areas, but the Trust has also had substantial donations from people from across the UK and overseas.”

Senior Staff Nurse, Anita Joyce, who works at the Brodey Centre said, “I am so pleased for our patients. It means such a lot to them that their surroundings are as nice as possible when they are having their treatment. It is also great news that fewer patients will now have to travel for their treatment and that more can be treated nearer to their homes in the Banbury area.”

Patient Geoff Wilkins said, “The care I get at the Brodey Centre is marvelous. The staff are so kind and caring and the new centre is lovely. And it makes a huge difference for me and my family that I don’t have to travel to Oxford for treatment.”

The expanded space in the new centre allows for more privacy for patients and relatives. The benefits advisor from the Maggie’s Centre in Oxford who provides support and advice for patients and their families will also have a space in the new facilities.

The re-build took less than six months and was completed on schedule, allowing the centre to re-open on 6 December 2010.
Research draws in the public

Hundreds of people came to the John Radcliffe Hospital to learn about research

On Thursday 17 March, we had our second Open Day and invited people to the foyer of the West Wing to learn about the research that happens in our hospitals, from which many patients benefit.

School children, patients and the general public talked with nurses, doctors and scientists from the Oxford Radcliffe Hospitals and the University of Oxford and enjoyed more than 18 interactive displays.

They got to test their reaction time, find out what a pupillometer does and its importance in Parkinson’s disease research, saw DNA being extracted from strawberries and knocked nasty bugs off their perches.

Opening the event was local resident, former Goodies star and BBC Radio 4 writer and presenter Graeme Garden. He was joined by Oxford Radcliffe Hospitals Chief Executive, Sir Jonathan Michael, who started off the day’s activities.

In the evening, a selection of experts talked about how they use the latest technology in the care of their patients. Chaired by Paul Johnson, Professor of Paediatric Surgery, speakers gave an overview of their research and took questions from the audience. Topics included how sight may be restored in the bionic eye trial, how surgeons are using high intensity sound waves to heat up and destroy cancer cells and how robotic surgical devices are so precise they can peel off the skin of a grape without damaging the flesh.

For more information visit www.oxfordbrc.org.uk or call 01865 743341
Hundreds of staff and hospital supporters came out again to join us in the annual Children’s Hospital fun run – the Oxford Mail OX5RUN at Blenheim Palace.

The event, which this year took place on Sunday 20 March, has raised hundreds of thousands of pounds in its nine year history, supporting the Children’s Hospital and Children’s Services across the Trust.

Last year alone, the five-mile run raised £57,000, which paid for some truly life-changing equipment that will reduce the number of babies who develop cerebral palsy.

A cooling machine and two brain activity monitors, funded by the money raised at 2010’s OX5RUN, are already being used to treat newborn babies who have suffered a lack of oxygen during birth.

This state-of-the-art equipment can help reduce - and in some cases even completely prevent - the brain damage that leads to babies developing cerebral palsy, meaning that the benefits are felt for the whole of the child’s life.

Eleri Adams, Clinical lead for Neonatology at the John Radcliffe Hospital, explained, “To be able to buy this equipment is fantastic. Monitoring and treatment using these machines has been shown in recent clinical trials to improve the chance of a normal neurological outcome following birth asphyxia. For the child and their family this is simply life-changing.

“It is estimated that the equipment will help up to 60 babies here a year who are at very high risk of developing cerebral palsy, around eight of these babies will have a completely normal outcome following treatment. There will also be significant improvements in development scores for some of the other infants, meaning they develop a milder form of cerebral palsy.

“The clinical team would like to thank every one of the runners and the Oxford Mail for their generosity and encourage others who want to raise money for our hospitals, so that we can continue to make such incredible advances that help our patients.”

One runner who signed up this year is Karen Bamford who works in the Trust’s Gene Medicine Research Group. Karen’s nephew, 10 year old Marcus, has cerebral palsy. Karen explained, “I’ve run for charity in the past but this event will be really special for me, because it will benefit the hospital I work for and has also been inspired by my wonderful nephew Marcus. He goes through so much, but he is so happy and smiley and inspires us all.”
Finding and fighting breast cancer

“If we can’t find it, we can’t treat it.” This commonsense statement from Jane Gerrish, of the breast cancer radiography team, concisely explains why Charitable Funds and the Breast Screening Department are in the midst of fundraising for an upgrade of breast screening equipment.

Every year, 25,000 women are scanned by the ORH’s Breast Screening Service and early detection of breast cancer can make a huge difference to the chances of successful treatment.

Jane Gerrish, Superintendent Radiographer, explains, “We are due to have our film-based machines replaced by the NHS, but would like to upgrade them to digital equipment. These use a lower dose of radiation, detect tumours across a larger area of the chest and are less uncomfortable for women. Being digital, the images give us more information and can be shared quickly amongst clinicians.”

To help share the latest developments in breast cancer detection, research and treatment the clinical team is organising a public open day on Saturday 26 March.

Alice Hahn Gosling explained, “We have found that when our clinical colleagues organise open days where the leading clinicians share the latest research, it is a very popular way of engaging with the public.

“We all know someone who has had breast cancer and how devastating it can be, so fundraising for this upgrade is a real chance to make a difference to thousands of women in our area, every year.”

The talks by leading clinicians will take place at the Oxford Cancer Centre and be followed by a questions and answers session tour of the unit. To book your place or find out more about breast screening fundraising, call Marianne Julebin on 01865 231523.

See your hospital from a different angle

Our abseils have become rather famous across the Trust – with hundreds of staff and hospital supporters taking part every year. They raise large sums of money, yet it only costs £10 to enter the 100 foot abseil! We ask everyone who takes part to try and raise £100 or more in sponsorship. There are causes across the Trust benefitting from the brave souls prepared to dangle on a rope from the top of the Women’s Centre – all in the name of charity. So why not make 2011 the year when you sign up and take part? Just choose the area you want to raise money for from the list below:

**Abseil on Sunday 3 April**
in aid of
- IMPS (Injury Minimisation Programme for Schools)
- SSNAP (Support for the Sick Newborn and their Parents)
- Oral and Maxillofacial Surgery, Neurosciences Ward and Intensive Care Unit, Level 5
- Maternity Unit and Oxford Spires Midwifery-led Unit
- Pain Relief Unit.

**The Cancer and Heart Centre Abseil on Sunday 12 June** – 150 places are available for this popular hospital fundraiser.

**The Children’s Hospital Abseil Sunday 18 September** – supporting babies and children who are treated by the ORH.

If you would like to discuss your fundraising ideas just call the fundraising team on 01865 743444 or email campaign@orh.nhs.uk All our fundraising events are on the website www.orhcharitablefunds.nhs.uk
Hoist donation provides a helping hand

Staff on E Ward at the Horton General Hospital have received a new hoist thanks to donations from the Horton Charitable Fund, the hospital’s League of Friends, their ward account and a large donation by a former patient.

The new hoist will promote patient mobility around the ward as it assists patients to stand and walk without the need for staff to support them manually. The hoist can be wheeled where the patient needs to go, such as the bathroom, providing greater privacy and dignity for patients as they can move around the ward more easily.

Adrian Hearn, Chairman of the Horton Hospital’s League of Friends is pictured with Sharon Wells, Ward Manager E Ward; Heather Clelford, Assistant Chairman League of Friends; Karleen Campbell, Clinical Support Worker E Ward and manual handling coordinator.
The Electronic Patient Record – it’s coming true...

The ORH is moving ever closer to implementing the Electronic Patient Record (EPR). Replacing our paper records with these digital records will, over time, transform how we work, touch everyone at the Trust, and affect everything we do for patients.

The move to the Electronic Patient Record will help us with many of our goals:

- improving safety and quality
- enhancing patient and staff experience
- improving our efficiency; and delivering better information across the Trust.

At the ORH, we are working to ‘go live’ with the first elements of EPR by the end of 2011. This will not mark an end to our work, but rather the beginning of a far-reaching process that will last a number of years, as we develop more and more digital innovations and paperless working.

A phased roll-out will ensure that we can train all staff on the new systems and ways of working. It also ensures that the system’s main features are fully embedded before we begin turning on additional clinical functions.

**Phase 1: core functions go live**

Patient Administration System (PAS), Emergency Department and Maternity systems. Over 3,000 people will need training for this phase, which will be followed by a stabilisation period.

**Phase 2: 3-6 months after go live – clinical functions increase**

‘CaseNotes’ (the current online clinical results system) will be replaced, which will affect over 5,000 users. The electronic ordering and delivery of diagnostic tests and results will increase, and EPR will be rolled out across theatres and clinical departments. At the same time, the plan is to scan existing paper notes, so that these will also be available in a digital format.

**Phase 3: a year onwards – deeper implementation**

Over time, individual clinical specialty systems will be replaced, with more and more functions within the system being brought online. This includes plans for e-Prescribing and medicines management, which bring some of the biggest safety benefits.

**Supporting our work with the NOC**

The NOC is an early adopter of the EPR software that we will be using (called Cerner Millennium), and has been running an early version of this for a number of years. The NOC plans to upgrade the software this spring, which will mean that when we go live at the ORH, we will have a unified system for the Oxfordshire acute hospitals.

**Find out the truth at:**

- EPR Offices on 01865 572111
- http://orh.oxnet.nhs.uk/EPR
- true@orh.nhs.uk

The EPR software, Cerner Millennium, has been tried and tested in thousands of healthcare facilities worldwide. It is also the software that the ORH originally planned to acquire before we became part of the National Programme for Information Technology. However, a tool is only as good as the people and the systems that use it, and we must not just move our paper processes to electronic ones. This process presents a unique opportunity to rethink and remap clinical pathways, and identify the best processes.
**Young Carers’ ‘Hospital Pack’**

The South and Vale Young Carers Project has been working with young carers to help develop a new ‘Hospital Pack’. The pack provides guidance for young carers when they are attending hospital appointments or visiting family members.

The pack contains information about young carers in general, lots of useful hospital information and also some fun things to keep them occupied. It is available from the hospital Patient and Liaison Services (PALS) offices.

For more information about the project please contact:
Sarah Noviss (Young Carers Development Worker)
South and Vale Carers Centre 01235 510212
sarah@svcarers.org.uk

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**Oxford Radcliffe Hospitals focused on improvement**

The Care Quality Commission (CQC) carried out a review of the John Radcliffe, Churchill and Horton General Hospitals in the Autumn of 2010 as part of the regular inspection process.

The Commission’s reports were published in January.

The CQC took over responsibility for regulating hospitals from the Healthcare Commission last year and will be inspecting all hospital trusts in the country as well as social care providers.
During their visits representatives from the Commission observed staff and patients and spoke with them about their experiences.

The ORH, like all trusts, is measured by the Commission on 16 ‘quality outcomes’ or standards. Part of the review process is for the Trust to let the Commission know of any areas where it thinks it might not be fully meeting the requirements. The Trust did this in four areas. The Trust was also able to let the Commission know what improvements it had already put in place to tackle these areas or what action plans were in place to address them.

The Commission’s report can be seen on the CQC website at www.cqc.org.uk and the Trust’s Action Plan can be seen on the Trust website at www.oxfordradcliffe.nhs.uk in the Board papers for 28 February 2011.

The Commission’s reports also recognised areas of good performance against these national quality standards and particularly how much the Trust’s services and staff are valued and praised by patients.

The four areas for improvement the Trust highlighted to the Commission were:

**Staffing levels**
The report highlighted shortages in staffing levels that the ORH has been working to address. Since the visit in September, monitoring has shown a real improvement in staffing levels, including in the areas highlighted in the report.

**“Delayed transfers of care” and waiting times in 18 weeks and cancer**

Pressure on services and staffing at our hospitals has been increased by the fact that the ORH has been experiencing large numbers of “delayed transfers of care” – patients who no longer need hospital care, but are unable to leave because they are waiting for the provision of care services within the community or closer to home. The unusually high number of patients experiencing delayed discharge has meant that the ORH had to open extra beds and employ a higher than expected number of agency staff to look after patients. The CQC recognises this as a system-wide issue, with the biggest reasons for delays being “the provision of care services being provided in people’s homes and delays obtaining care home placement.” These problems were present at the time of the CQC inspection and continue to be the subject of detailed discussions between the Trust, the PCT and the Social Services Department of the local authority.

In the last year the Trust has found it difficult in some clinical specialties to see patients as quickly as it would want to. The number of patients coming to hospital has been above planned levels, and prioritising emergency patients has had an impact on non-urgent cases. The issue of delayed transfers of care also negatively affects 18 week waits, and makes it difficult for the Trust to provide beds for other patients waiting for treatment. To help ensure the patients who have already been waiting a long time, are now seen as quickly as possible, the ORH has introduced additional weekday and weekend operating sessions across all three hospitals, as well as offering patients the option of attending other hospitals for quicker treatment where this is possible. The Trust has already significantly reduced the number of patients waiting over 18 weeks.

There has been a steady rise in referrals of patients with suspected cancer and the Trust needs to improve its ability to respond to this increase. The Trust has an excellent new cancer centre at the Churchill Hospital, with world class facilities and clinicians, and many of our clinical outcomes are above the national average. The Trust has been working with a specialist team from the Department of Health to improve the speed of testing and treatment of patients with cancer. Steps taken include: combining patients’ appointments so they have more investigations and treatments on a single visit; improving administration systems; making more operating time and outpatient clinics available; continuing to work with GPs to ensure that patients referred under fast track two week arrangements understand the importance of being seen in this timeframe and are able to attend these rapid appointments.

**Training and appraisals**
The report showed that not all staff had completed mandatory training and annual appraisal. Clinical divisions are working with their teams to improve attendance at statutory and mandatory training (that is training over and above clinical qualification), and further action plans to improve the uptake of this training are being developed. The roll out of the appraisals process continues, and the Board has approved new procedures, including a revised appraisal policy.

**Governance and leadership**
The Trust highlighted to the Commission that it had reviewed its governance procedures this year and found them to be too complex. The Trust has already made significant and positive changes to change this. These include the appointment of a new Chief Executive and new Executive Directors (including very recently the appointment of a new Director of Assurance). The Trust has also undertaken a significant reorganisation of its clinical management structure in November 2010 so that doctors and nurses have direct authority and responsibility for the running of clinical services.
The event, held at Oxford’s Kassam Stadium in January, gave clinicians, local councillors and members of the public a chance to discuss the commissioning changes that are a big part of the government’s reorganisation of the management of the NHS.

The Oxfordshire consortium is a Pathfinder Consortium meaning it is one of the first to explore how best to take over the functions and responsibilities of the PCT.

It is also the largest consortium to be set up so far, representing the whole of the county.

Over the coming months the GP consortium will be developing a ‘shadow’ organisation. The aim is to manage the changes as carefully as possible to ensure continuity and stability for the healthcare system.

An Oxfordshire GP Consortium Board has been established and will be responsible for developing a work programme through the transition period. Board membership includes GPs and members of NHS Oxfordshires executive team.

In West Oxfordshire, GPs are developing a community endoscopy service at the new Witney Diagnostic Centre. Tender documentation is currently being produced and we hope it will start in February 2012. Community ultrasound services are being set up in Wantage, Banbury, Bicester and Brackley and are due to start soon. Once ultrasound is in place, we will be able to set up ‘one stop shop’ gynaecology and urology clinics in these areas.

Andrew Stevens, Director of Planning and Information at the Oxford Radcliffe Hospitals NHS Trust said, “The event at the Kassam Stadium was really well attended and it was great to see so many members of the public taking a real interest in what is happening in the health service. These changes affect all of us and could result in the shift of more routine services away from big hospitals and into the community.

“People want to have convenient access to diagnostic tests and treatments closer to where they live. The hospital Trust is supportive of this need. We already run hundreds of satellite clinics all over Oxfordshire, and in neighbouring counties, so that people can see our specialist teams without the need to come into Oxford.

“More opportunities to provide access to regional clinics has got to be good news for patients.”

Public Talk

Ankylosing Spondilitis and Musculoskeletal research

With Professor Paul Wordsworth from the Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal research.

Tuesday, 24 May at 6.00pm  Light refreshments served from 5.30pm

Main lecture theatre, level 1.

Nuffield Orthopaedic Centre, Windmill Road, Headington OX3 7LD.

For more information contact either Fiona.parker@ndorms.ox.ac.uk or alison.barnes@orh.nhs.uk
Sextuplets home for Christmas

In May 2010, the birth of six babies at the John Radcliffe Hospital, the first sextuplets to be born in England in 17 years, made international news. ORH News catches up with the Lamb family looking forward to 2011.

On a Friday night, with over 25 staff waiting for them, six babies, Layla, Ellen, Eric, Rose, Matthew and Pippa, arrived into the world. The babies were born at 26 weeks gestation (14 weeks early). They each weighed between 1lb 5oz and 1lb 15oz.

The following days and weeks were a rollercoaster of emotions for their mum and dad, Vicky and Andy Lamb from Abingdon. Their babies were treated and cared for by the Neonatal Intensive Care Unit, High Dependency Unit and then Special Care Baby Unit before going home. “Those weeks when the babies were fighting for their lives in hospital were the most traumatic, not knowing if they would survive,” said Vicky.

Sadly, Matthew and Pippa lost their fight for life, but gradually their brother and sisters grew, gained strength and one by one were discharged from hospital. “Somehow you have to find the strength to carry on,” Vicky said. “When they smile, all the pain and heartbreak has been worth it. Sometimes I just can’t believe that these four lovely babies are really ours.”

Now all four babies are at home with Andy, Vicky and their five year old big sister, Grace. “When we look at them all sleeping peacefully, sometimes we just can’t believe they are finally here, home with us,” said Vicky. “For us, 2010 was such an emotional, life-changing, traumatic year. So what we are hoping for in 2011 is health and happiness for our children.”
BEATING BOWEL CANCER

Bowel Cancer is the UK’s second biggest cancer killer – yet many people are still too embarrassed to talk about it.

Staff took part in Beating Bowel Cancer’s ‘Be Loud Be Clear’ Week in January to spread the word about bowel cancer.

Helen Savage, Screening Centre Manager and Lead Practitioner from the Bowel Screening Programme at the Horton General Hospital, visited the House of Commons to spread the word about bowel cancer.

Along with representatives from Bowel Cancer Screening centres across the UK, Helen met with MPs, Peers, charity staff, trustees, patients and key supporters at Beating Bowel Cancer’s Annual Parliamentary reception.

This year, it focused on the NHS bowel cancer screening programme to encourage people over 60 to take part in bowel cancer screening.

Helen said, “Bowel cancer is the UK’s second biggest cancer killer so screening is important to make sure that it is detected early. At the moment about half of those who are sent a screening kit do not return it. It’s so simple and it really could save your life.”

The Colorectal Nursing team at the John Radcliffe Hospital organised a tombola to raise awareness about bowel cancer and to promote healthy eating.

Jay Bradbury, Clinical Nurse Specialist, said, “Unfortunately, many people are embarrassed to talk about bottoms and bowels; this stigma needs to be overcome in order for us to start really saving lives from bowel cancer by picking the disease up in time.”

Bowel 1 2 3

1 – Look after No.1
Make time to do the simple test that you will receive by post to your home. It could save your life.

2 – Yes, it’s about No. 2s
If aged between 60 and 74 and registered with a GP, you will be sent your screening test kit. Collect samples as instructed, then post the test back. It’s that simple.

3 – 3 times in one week, for a few minutes
Once you’ve completed and posted it, the results will be returned to you within two weeks. The test does not diagnose bowel cancer but will show whether further investigation is needed.

Trust Board meetings are held in public.

Each meeting has multiple documents which are available as pdf files on the Trust website in the ‘About us’ section: www.oxfordradcliffe.nhs.uk

The next Trust Board meeting will be held in April. Please see the website for details about time and venue.

Everyone is welcome.
Celebrating apprenticeships

The Learning and Development team celebrated the success of apprentices from across the Trust, as part of Apprenticeship Week 2011 in February.

Apprenticeships bring together work-based training and classroom-based education to give members of staff a nationally recognised qualification to help them develop their skills and progress in their careers.

The Learning and Development team offers apprenticeships in both clinical and non-clinical subjects, such as Health, Pharmacy, Customer Service, Pathology and Business and Administration.

Claire Wardle, from the Learning and Development team leads the Clinical Apprenticeships programme. She told ORH News, “Across the country apprenticeships are making a real difference to NHS staff and their employers.

“As the NHS changes, jobs change too. By taking part in the apprenticeships, staff can gain more skills to help them progress in their career as well as helping to increase efficiency and improve patient care.”

Helen Galia-Schupfer, a Clinical Support Worker based in Cardiac Angiography, has just completed an Advanced Apprenticeship. She heard about apprenticeships through the information stand in 2008. “The apprenticeship has helped me in so many ways, it has improved my maths and english knowledge, but also made me more confident to assert myself in work,” Helen said. “I would recommend to anyone to apply to do an apprenticeship. It’s hard work, but it’s worth it.”

Staff who would like more information about apprenticeships, should contact:

Claire Wardle
(Clinical Apprenticeships)
claire.wardle@orh.nhs.uk or 01865 225016

Sue Wells
(Non-Clinical Apprenticeships)
sue.wells@orh.nhs.uk or 01295 229023

Would you like to help staff like Helen achieve their qualifications? Become an NVQ assessor.
Contact the apprenticeship team to talk about how you could get involved.

Hole in the wall

There are now cash machines available on all our hospital sites

Locations:

**John Radcliffe Hospital**
Main Hospital
Outside the Amigo shop and Blue Outpatients, Level 2 main corridor
West Wing
Outside the Amigo shop, West Wing Atrium, Lower Ground (LG) 2

**Churchill Hospital**
In WH Smith, near New Main Entrance, Oxford Cancer Centre. Please note this machine can only be accessed during WH Smith’s opening times which are:
- Monday to Friday: 7.00am - 6.30pm
- Saturday: 10.00am - 5.00pm
- Sunday: 10.00am - 2.00pm

**Horton General Hospital**
On the main corridor near reception.
What’s new on www.oxfordradcliffe.nhs.uk

**New for 2011**

The Oxford Eye Hospital website: www.oxfordradcliffe.nhs.uk/eyehospital

Women’s services have a new section on the ORH website. This includes maternity, gynaecology and links to related sections such as sexual health. www.oxfordradcliffe.nhs.uk/women

About the Oxford Radcliffe Hospitals website

The ORH website comprises over 1,000 pages, and is continually changing to reflect changes in the Trust.

**Who uses our website?**

We have software that can tell us how many people are using the ORH website. Visitors come to our website from every continent, but mainly from Europe and North America. We can even tell if somebody looks at the website more than once, or if it is new people looking at it each time.

In the last week of January 2011, 29,550 separate people visited the website, looking at about three pages each: there were also around 30,000 downloads of documents from the site.

Sometimes events cause a big increase in visits. The snow in early January 2010 brought many visitors to the site – and there was another big jump on the day that ORH News went online in the spring!

Our most popular areas on the website

- ‘Find us / contact us’ – which includes maps and travel information
- ‘About us’ – general information about our Trust, hospitals and how we are organised
- ‘For clinicians’ – which includes referral information and the Postgraduate Education site
- ‘For patients’ – in particular ward contact details
- ‘Get involved’ – where you can find information about Charitable Funds and volunteering.

Are your details up-to-date?

You can check your department’s details on the website by typing the name of your department into the ‘Search’ box in the top right hand corner.

Please email any website changes to Frances Bonney at frances.bonney@orh.nhs.uk or call 01865 2 31474.