RETURNING TO NURSING – ONE WOMAN’S STORY

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CREATING THE BEST SPACE FOR PATIENTS – AND STAFF!

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News from around the John Radcliffe Hospital, Horton General Hospital Nuffield Orthopaedic Centre and Churchill Hospital

November 2016
Issue 28

Funding boost for medical research – page 8

Photograph: OMI
Two of our public governors, Sue Woollacott, representing South Oxfordshire, and Jane Doughty, representing West Oxfordshire, stood down earlier this year after their circumstances changed.

Elections for new governors took place over the summer and we had an excellent response from members to our call for nominations for the by-elections.

Both seats were well contested, with 13 people standing in South Oxfordshire and 12 in West Oxfordshire. The results were announced by our independent electoral partner, UK Engage, in September, and our new governors are:

**Dr Simon Clarke**: Public – South Oxfordshire
**Mrs Brenda Churchill**: Public – West Oxfordshire

Our newly-elected governors will take part in an induction programme, which will include information about their role, learning from the experience of other governors, and clarity about their responsibilities and those exercised by the Board of Directors.

The OUH annual staff flu programme began on 19 September, and in just three weeks more than 4,293 frontline staff have been vaccinated.

“We are delighted that so many of our frontline staff have opted to have the flu jab,” said Patricia Poole, Head of the Centre for Occupational Health and Wellbeing, who has the mammoth task of organising flu clinics across the Trust each year.

“This year we have made the flu vaccine available through over 100 temporary clinics running across all four hospital sites. We also offer roaming vaccinators and have a register of 65 volunteer ward vaccinators, ensuring that all staff, whatever their hours, can get vaccinated.”

Patricia said it was important for more staff to get the flu jab, to help protect patients and services throughout the coming flu season: “Many people may not be aware that they can have the flu virus and pass it on, even though they have no obvious symptoms, so it is really important that all frontline staff in particular get vaccinated.”

Dr Tony Berendt, OUH Medical Director, added: “I want to stress how important immunisation against flu is, as the most effective way to protect ourselves, our families and our patients against what can be a very serious, even fatal illness.

“I firmly believe that healthcare professionals in particular have a duty of care, to their patients and their colleagues, to be immunised. The vaccine is not 100% effective – but it’s the best defence we have. I urge all staff to take up the offer.”

As part of the 2016/17 NHS national campaign the following groups of people are also eligible for flu vaccination:

- all children aged two to seven on 31 August 2016
- all primary school-aged children in former primary school pilot areas
- those aged six months to 65 years in clinical risk groups
- pregnant women
- those aged 65 years and over
- those in long-stay residential care homes
- carers.

Information on dates and times of staff flu clinics can be viewed at [www.ouh.nhs.uk/staff-flu](http://www.ouh.nhs.uk/staff-flu)

As well as encouraging the uptake of the flu vaccine among vulnerable groups, the *Stay Well This Winter* campaign says that people over the age of 65 and people with long-term conditions should prepare for the closure of pharmacies over the Christmas period by stocking up on cold weather remedies and getting their prescriptions. It also advises people to seek advice from a pharmacist at the first sign of winter illness.
The Home Assessment Reablement Team (HART) allows people to leave hospital once their medical needs are stable, or to remain at home after a minor accident or illness, rather than being admitted to hospital.

NHS Foundation Trust.

Patients who previously used these services will see no change to their care. New patients can be referred to the service by GPs, district nurses, community hospitals and social care providers, as well as OUH departments.

“The beauty of HART is that it will be run as a single responsive service, with a single multidisciplinary team and a simple referral process,” said Paul Brennan, OUH’s Director of Clinical Services.

The Trust has launched a new service to deliver high-quality care to Oxfordshire patients in their own homes.

The Home Assessment Reablement Team (HART) allows people to leave hospital once their medical needs are stable, or to remain at home after a minor accident or illness, rather than being admitted to hospital.

HART staff will work with patients, their families and informal carers to provide a short period of support – no longer than six weeks and at no cost – to help our patients regain their independence and confidence in the skills they need to live at home safely.

HART, commissioned by Oxfordshire County Council, incorporates and replaces OUH’s Supported Hospital Discharge Service (SHDS) and the Oxfordshire Reablement Service, which was run by Oxford Health NHS Foundation Trust.

“This service is part of our strategy of delivering care to patients in the most appropriate environment for them. Evidence shows that many patients, in particular frail older people, have better outcomes when an inpatient stay is avoided and when they receive integrated support in an environment where they feel more comfortable.

“This approach has the added benefit of freeing up beds in our hospitals for the most seriously ill patients,” he added.

The Trust’s Finance and HR departments relocated from Headington to our new OUH@Cowley at the end of September, the first of several teams that will transfer to these purpose-built offices in the next few months.

The reason for these moves is the ‘Best Space for Patients’ initiative where clinical and clerical departments currently in old, dilapidated or unsuitable buildings will be relocated to better, improved or more suitable accommodation.

With four hospitals, 1.3 million patient contacts a year and 12,500 staff, this is a complex plan where each transfer is dependent on another.

For example, Clinical Genetics will now be able to move out of very poor premises at the Churchill Hospital into the Finance Department’s former offices at the Nuffield Orthopaedic Centre. This standalone building will need very few alterations to provide Clinical Genetics with a vastly improved suite of offices for their clerical work.

Welcoming staff to their new surroundings in Cowley, Catherine Stoddart, Chief Nurse and Executive Director Lead on the Best Space for Patients programme, thanked everyone in HR and Finance for being the first to relocate and paving the way for others to follow.

The reason for these moves is the ‘Best Space for Patients’ initiative where clinical and clerical departments currently in old, dilapidated or unsuitable buildings will be relocated to better, improved or more suitable accommodation.

She said: “We will soon have around 300 staff here so I hope that you become a cohesive community and enjoy working under one roof.”

Catherine also outlined future plans that would provide dedicated administrative space on the Headington campus for staff to return to. The departments that will move to OUH@Cowley in the next phase include Complaints, Elective Access, the Patient Contact Centre and Charitable Funds.
Midwives at Banbury’s Horton General Hospital are welcoming women who have low-risk pregnancies to give birth at the midwifery-led unit.

Senior midwife Rhian Thomas said: “We are really proud of the service we are able to offer here. Our facilities include a birthing pool and we can give the one-to-one support in labour that enables women to have the kind of birth experience that they want.”

As a midwife-led unit (MLU), the Horton continues to provide a suitable option for pregnant women in the local area who have no medical complications and a low-risk pregnancy. During the first three weeks of October, after becoming a midwife-led unit (MLU), 12 babies were born at the Horton.

Women assessed to have a higher-risk pregnancy are now directed to the maternity unit at the John Radcliffe Hospital in Oxford, where there is the right level of midwifery, obstetric and paediatric care. This decision was taken when it became clear there would be too few obstetricians in post at the Horton to run a safe obstetric service.

Rhian added: “All the midwives at the Horton are experts at caring for women with low-risk pregnancies. We are very happy for any woman expecting a baby to visit the maternity unit at the Horton with their partner and take a look round the facilities we have here. There is always at least one midwife and maternity support worker here – just give us a call on 01295 229 459.”

Rhian explained that women from the Banbury area who give birth at the John Radcliffe Hospital maternity unit can continue to receive their antenatal and postnatal care at the Horton MLU, including their scans, unless they are receiving the specialist Silver Star support.

As well as the MLU, services that are offered to local women and their families at the Horton Maternity Department include:

- **Maternity Assessment Clinic**: open 8am-4pm for women over 16 weeks who have concerns or questions about their or their baby's wellbeing.
- **Banbury Community Midwives**: provide postnatal care every day of the week via a clinic at The Horton, as well as antenatal appointments at local GP surgeries.
- **Antenatal Clinic**: offers services ranging from appointments with an obstetrician (Wednesdays and Fridays) to clinics with midwives on mode of birth or lifestyle issues. Even if you are planning to have your baby at the John Radcliffe, you may still be seen at The Horton Antenatal Clinic.
- **Drop-in clinic**: run by consultant midwives every Wednesday from 10am to 12 noon until the end of December for expectant mothers who are unsure about whether they are suitable to give birth at the Horton.
- **Ultrasound Scan Services**: including routine nuchal/dating scans, fetal anatomy scans and 36-week growth scans. Appointments are held daily from 8.30am to 4pm.
- **Breastfeeding Support**: offered at home or at The Horton. You may also be offered an appointment with our Infant Feeding Team.
- **Newborn Hearing Screening**: with specialist Hearing Screeners.
- **Paediatric Clinic**: run Monday to Friday 9.30am to 4.30pm by paediatric doctors with support from senior staff with special care baby unit experience. The clinic offers newborn examinations, and will see babies with acute jaundice and those with concerns such as feeding, but who are not acutely unwell. Clinic slots can be booked by midwives or your GP.

When the decision was made to temporarily transfer obstetric-led maternity services from the Horton to the John Radcliffe in late August 2016, the Trust said it would review the recruitment situation in October to see if enough middle-grade doctors had been recruited to allow the obstetric-led unit to reopen in January 2017. The unit requires nine middle-grade doctors in post to run safely.

However, following this review, it is clear that it is not possible to reopen the obstetric-led unit at the Horton in January 2017, as there will still not be sufficient doctors in post to run a safe obstetric service. Therefore the midwifery-led unit status will continue at the hospital until March 2017. In the meantime the Trust continues its efforts to recruit the doctors required.

Keep up to date with the latest news about the Horton on our website at [www.ouh.nhs.uk/hortonnews](http://www.ouh.nhs.uk/hortonnews) and on social media at [facebook.com/hortongeneralhospital](http://facebook.com/hortongeneralhospital) and [@ouh_horton](http://twitter.com/ouh_horton) on Twitter.
AGM tells the OUH Story

Around 150 people attended our Annual General Meeting in September to hear about the good work we’ve done over the last year and look ahead to future developments at the Trust.

The AGM, which was also our annual members’ meeting, featured a range of interactive exhibitions that allowed visitors to explore the five themes that make up the vision for the Trust for the coming years, known as the OUH Story: High Quality Costs Less, The Master Plan, Go Digital, Home Sweet Home and Focus on Excellence.

One of the evening’s highlights was the introduction of our new Chief Digital and Information Officer, Peter Knight, who talked about some exciting technological advances for the Trust, such as an iPad-based early warning system for patient monitoring, known as SEND (System for Electronic Notes Documentation).

One of the uses of SEND is detecting the early warning signs of sepsis or blood poisoning. Chief Clinical Information Officer Paul Altman said: “Sepsis often creeps up on people so this is making a good stand in terms of reducing avoidable deaths.”

EYES ON DIABETES ACROSS THE TRUST

It may surprise you to learn that 15% of all our inpatients, including those at our hospitals for unrelated reasons, are diabetic.

This demonstrates how important it is that all our staff are aware how to manage diabetic patients, and know about our dedicated multidisciplinary specialist diabetes team who support our doctors and nurses across the Trust.

Monday 14 to Thursday 17 November – Eyes on Diabetes Care in our hospitals: the diabetes clinical team will be present at all four hospitals giving advice on what you can expect as a patient, and showing staff how to look after high and low blood sugars in patients during illness or routine admissions, as well as how to prevent foot-care problems.

Friday 18 November 2-6pm – Eyes on Diabetes Research and Innovation: the Oxford Centre for Diabetes, Endocrinology and Metabolism (OCDEM) opens its doors to the public for the afternoon. You can hear about diabetes research adopted into clinical practice and how it could change patient care in the future. Meet the people running trials of new treatments and introducing ways to improve diabetes care. Take a tour of our Islet Isolation Facility and clinical research unit and talk to diabetes scientists and healthcare professionals about their work.

How much do you know about diabetes?
An ultrasound scanner has been given to the Urology Department at the Churchill Hospital in memory of a surgeon who worked there.

**Nilay Patel** died suddenly at the age of 36 of viral myocarditis, an inflammation of the heart muscle, in May 2014. He came to Oxford in 2001 as a junior doctor. A consultant for two years, Nilay was part of a three-man team that performed complex renal surgery for conditions like kidney cancer. His work included autotransplants—removing a cancerous kidney, cooling it so it could stay out longer, removing the tumour and returning it to the patient’s body.

He wanted a dedicated scanner at the Churchill to check for complications immediately after surgery in theatre. Previously just one was shared between the Churchill and the JR, causing delays.

The Oxford-based charity Urology Cancer Research and Education (UCARE) raised £30,000 for the new scanner, with donations coming from many of Nilay’s former patients. Nilay’s wife, Seetal, and daughters Nahla, five, and Suraya, eight, were there to see the scanner handed over, along with one of his former patients, Bob Simmons.

Mr Simmons, now a member of UCARE, was treated by Nilay and the team in 2009 after being diagnosed with kidney cancer. He said: “I don’t think I could get better service anywhere in the world. It was outstanding.”

His wife, Jean, added: “Nilay was extraordinary. You couldn’t meet a nicer man or think of a greater loss. That this machine is in his name is absolutely appropriate.”

“I think Nilay would be absolutely delighted that this kind of machine is now available in the department, progressing what’s already a very impressive unit,” said Mark Sullivan, neurological surgeon in the Urology Department. “It’s a brilliant effort to have raised all this money and we’re of course delighted to accept it.”

OUH is the national referral centre for complex cancers in solitary kidneys.

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**Endometriosis** is a common disease in women during their reproductive lives, causing severe pelvic pain and reduced fertility.

The Women’s Centre, a national referral centre for the management of endometriosis, works in collaboration with the University of Oxford’s Nuffield Department of Obstetrics and Gynaecology.

Oxford is the largest Endometriosis Centre in the UK, and one of 49 to be accredited by the British Society for Gynaecological Endoscopy. To receive accreditation each centre has to treat at least 12 cases per year.

“This accreditation shows that we are up to speed with our surgical techniques for these quite complicated cases,” says consultant gynaecologist Christian Becker, who leads the service.

“This is a great achievement and only possible as part of a team effort. It further supports Oxford’s leading role in endometriosis patient care and research.”

Any woman with symptoms of endometriosis can be seen at the Oxford Endometriosis Clinic, which runs weekly on a Monday afternoon on Level 1 of the JR Women’s Centre.

Common symptoms include very painful periods, pelvic pain during sexual intercourse, cyclical pains elsewhere or, rarely, cyclical bleeding elsewhere such as from the rectum or the lungs.
In an innovative step to improve the treatment of cancer patients, three therapeutic radiographers at the Churchill Hospital will train to become independent prescribers.

The move, believed to be the first of its kind in the UK, follows a change in the law earlier in the year. It means therapeutic radiographers will be able to prescribe medicines that might be given before, during or after radiotherapy, where there is a service demand.

Jan Keenan, Consultant Nurse Cardiology and Non-medical Prescribing Lead, said: “We have a group of experienced radiographers who were eager to become prescribers. They are seeing their own patients, making treatment decisions and advising on the management of their symptoms, but not actually able to do it themselves.

A course with Oxford Brookes University was approved over the summer and three radiographers have now enrolled.

One of them is Consultant Radiotherapy Practitioner Heather Nisbet, whose role is to review patients undergoing radiotherapy treatment and help manage side-effects of radiotherapy, including advising on medication.

She said: “Currently we need to speak to the doctor if we want anything prescribed. It’s a very time-consuming process. The new legislation gives us the opportunity to make this flow much smoother for patients and give them a better quality of care. We are already assessing and diagnosing; now we can prescribe without having to ask someone else to do it for us.”

There are already around 180 non-medical prescribers at the Trust, most of them nurses and pharmacists. Now, the new training for advanced practitioner radiographers will be rolled out.

The course involves a taught component, consisting of a day a week at Brookes University for one semester and a minimum of 10 days supervised clinical practice.

This training could have further benefits; studies show that not only is it better for patients, who can access the right medication quickly and avoid unnecessary visits to GPs, but non-medical prescribing can result in reductions in cost.

Karen was named the Outstanding Educator in Diabetes at the Quality in Care Diabetes awards. The award was based on a public online vote.

“I was chuffed to bits to win,” Karen said. “Initially, I was taken aback just to be nominated. It’s obviously very special when your team nominates you for an award like this – and to find that patients and colleagues voted for me made it even more special.”

The Diabetes Education Programme focuses on educating and empowering families living with Type 1 diabetes. The service supports around 350 children and their families each year.

Karen, who joined the diabetes team as a Paediatric Diabetes Specialist Dietitian in 1993, won her award shortly after returning from the service’s annual trip with children to the Calshot Activities Centre, near Southampton.

The trip provides young children with the first opportunity to go away without parents and learn to manage their diabetes independently; and older children a chance to develop peer support and try out new activities.
More than £113.7m is to be invested in ground-breaking Oxfordshire medical research to tackle conditions such as cancer, diabetes and stroke.

The NIHR Oxford Biomedical Research Centre (BRC) was awarded the funding from the National Institute for Health Research (NIHR) for 2017 to 2022, a 19% increase on previous funding. Many BRC studies involve patients at Trust hospitals and have included decoding DNA through whole genome sequencing, tests that led to changes in stroke guidelines and Ebola vaccine trials.

The new BRC will conduct research in 20 research themes, including heart conditions, surgery, bones, joints and muscles, and genetics.

Trust Chief Executive Dr Bruno Holthof said: “This continued support for the NIHR Oxford Biomedical Research Centre is a testament to the close working between the Trust, the University of Oxford and industry to bring innovation in research to the patient’s bedside.”

Director of the BRC Prof Keith Channon said: “I’m delighted that our Biomedical Research Centre has been successful in winning this major additional funding for a further five years – reflecting the scale, scope and excellence of our clinical research.”

Among the new theme leaders is Prof Anna Gloyn, who leads on Diabetes and Metabolism. She said: “Our continued NIHR funding will support scientists and healthcare professionals working together to develop, test and implement new treatments and technologies for patients with diabetes.

“I am looking forward to working with colleagues in Oxford and beyond to translate scientific discoveries into breakthroughs at the bedside.”

The BRC, established in 2007 to support research that can directly benefit the NHS, will work closely with a newly-awarded BRC in mental health at Oxford Health NHS Foundation Trust. This means total NIHR funding to the Oxford BRCs amounts to £126m between 2017 and 2022.

Oxford BRC funding has supported projects including:

- Replacing bedside paper charts with tablet computers to identify at-risk patients at OUH hospitals
- Oxford University research to develop an Ebola vaccine
- Pioneering whole-genome sequencing – a process to decode a person’s DNA – for rare diseases and cancer
- Recruiting 10,000 people who have had strokes and ‘mini strokes’ to develop new guidelines and treatments
- A “bionic eye” retinal implant for patients with retinitis pigmentosa
- A smartphone app for pregnant women with gestational diabetes to monitor blood glucose and send information to health professionals.
Surgeons at the John Radcliffe Hospital have performed the world’s first operation inside an eye using a robot.

Prof Robert MacLaren’s team used the remotely controlled robot to lift a membrane 100th of a millimetre thick from the retina at the back of the right eye of the Revd Dr William Beaver.

The surgeon used a joystick and touchscreen to control the robot while looking through a microscope during the University of Oxford research trial, which involved 12 people.

The operation involves the robot’s mechanical hand holding a needle which enters a hole in the eye less than 1mm wide and moves as little as 1000th of a millimetre inside.

Significant movements of the joystick result in tiny movements of the robot, eliminating unwanted tremors in the surgeon’s hand, such as through their pulse.

As well as lifting the membrane, the trial, co-funded by the NIHR Oxford Biomedical Research Centre (see opposite), is looking at injecting fluid under the retina in the hope this could be later used for gene therapy to treat blindness.

Father Beaver, 70, had a membrane growing on the surface of the retina that led to distorted vision.

He said: “My sight is coming back. I am delighted that my surgery went so well and I feel honoured to be part of this pioneering research project.”

Professor MacLaren (pictured right) said after the first procedure: “There is no doubt in my mind that we have just witnessed a vision of eye surgery in the future.

“Current technology with laser scanners and microscopes allows us to monitor retinal diseases at the microscopic level, but the things we see are beyond the physiological limit of what the human hand can operate on.

“With a robotic system, we open up a whole new chapter of eye operations that currently cannot be performed.”

The Robotic Retinal Dissection Device (R2D2) was developed by Preceyes BV, a Dutch medical robotics firm established by the University of Eindhoven. The trial was also funded by Dutch choroideremia charity Zizoz.

New obesity research programme

A new area of research at the NIHR Oxford Biomedical Research Centre will aim to help society tackle obesity.

Obesity, Diet and Lifestyle is one of the 20 research themes to be addressed from April 2017 with the £113.7m funding (see story opposite) from the National Institute for Health Research (NIHR).

The research will analyse large amounts of data to better identify people at risk of obesity-related diseases and those who will benefit most from weight loss.

Theme lead Prof Susan Jebb (pictured right) said: “Our research has identified ways to support people to lose weight and we now want to embed this into the health services we provide, focusing initially on those people who are most at risk. This will bring direct benefits to patients and to the NHS.”
Jules Stockbridge: Lead Nurse for the Patient Pathway Coordination Team

Happy to be busy, bleeped and phoned

There’s a good chance that, if you’re a member of OUH staff or have been in one of our hospitals, you will have seen Jules Stockbridge.

Jules leads operational services and bed management across the Trust’s four hospital sites; she is often seen dashing somewhere to help resolve all manner of issues. Strong relationships are the foundation of her work.

“It’s our job to ensure patients get to the right place at the right time. In the Operations Team (Ops) we work closely with Security, with Estates and the Resuscitation Team; anyone who collapses outside the wards is part of the Ops role. If there is a leak somewhere we will go and support the staff. If there is a fire somewhere we’ll be one of the first at the scene, so we have to build up good relationships because we can see and deal with incidents every day. They are all part of our work,” she says.

“If somebody says ‘we haven’t seen an Ops manager for an hour’, we could be dealing with a fire somewhere. I’ve attended two cardiac arrests in the car park since I’ve been in the post. We may be dealing with a complaint, distressed relatives or any manner of site or patient issues.”

Jules has worked at the Trust since 1989. She spent 26 years working in the Emergency Department before moving to service improvement, which involved reviewing processes and improving pathways.

“I realised within the first week that it wasn’t for me. I was used to having a queue of people wanting to see me in the Emergency Department. I do like to be busy, I like to be bleeped and I like to be phoned.”

The desire to be busy led Jules to the role of Lead Nurse for the Patient Pathway Coordination team in February 2013. She now oversees a team of 24 Ops managers.

“Although I’m predominately based at the John Radcliffe, I need to be in regular contact with the team at the Churchill, the NOC and the Horton.

“If there’s a challenge at another site, I need to decide if I should leave the JR to go there, or should I do it by phone. We also use Skype so that we can support each other face-to-face.”

Last year, Jules was elected as a Clinical Governor at the Trust, which she describes as a huge honour: “I absolutely love it. I like the fact that staff can come and talk to me about all sorts of things, ranging from salaries to why the toilet isn’t working! “Because of the relationships I have across the Trust, if I can’t help with something I’ll know somebody who can.”

Jules says there are times when she is faced with making difficult decisions and she constantly has to “juggle lots of balls in the air to find solutions that are best for the patient” and says adrenaline plays a big part in her work. But she says it is the staff she meets that inspire her.

“Every day I look at them and think ‘I couldn’t do your job’. The relationships I’ve built up over the last three years show that people are willing to go that extra mile for me to help the patients.

“I couldn’t imagine doing anything else. I do get frustrated at times, such as when we’re not keeping the flow going through the organisation, but would I consider doing any other job? No.”

Patients attending the Oxford Cancer and Haematology Outpatients department can now access information on their smartphone or tablet device via a new app.

The OCHO app provides direct links to the cancer and haematology sites on the OUH website, giving patients information about their medical condition and treatment, as well as useful tips on getting to hospital and using public transport.

The app, which can be downloaded onto iPhones and Android smartphones, shows any clinic that is running more than an hour late and also any delays to radiotherapy treatment times so the patient feels more in control and less anxious when they arrive.

OCHO links to the outpatient waiting room and radiotherapy machine screens, which are in real time.

New app for cancer and haematology patients

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Need more information? Be Smart!

OCHO gives you:
• Links to our external website for general information about cancer and blood disorders
• Search for Oxford Cancer & Haematology Outpatient clinic details
• Search for Oxford Cancer & Haematology Radiotherapy Machine details
• Track your outpatient appointment on your smartphone

Search for Oxford Cancer & Haematology Outpatient on the App Store

Be Smart!

Search for Oxford Cancer & Haematology Radiotherapy Machine on the App Store

Be Smart!
10,000th patient for pioneering heart service

The largest NHS-based centre to identify genetic causes of heart disease has welcomed its 10,000th patient.

The Churchill Hospital’s Oxford Medical Genetics Laboratory was the first accredited NHS diagnostic genetic testing service for inherited cardiac conditions in the UK, building on British Heart Foundation-funded research at the University of Oxford.

It has identified thousands of people at risk of developing inherited heart conditions such as cardiomyopathy and arrhythmia since starting work in 2003.

Scientists examine over 70 genes shown to cause inherited heart disease using a blood sample. Family members of those found to have faulty genes are also offered testing.

Among the families helped by the service – which tests about 1,200 people a year – are relatives of Jason Laman, who died after collapsing while playing rugby for Wheatley RFC aged 42 in 2013.

Tissue collected from Jason found that he carried a gene change that causes a type of cardiomyopathy, which increases the chances of a dangerous heart rhythm.

Seven family members were tested and the condition was found in his father, Clive, while the causative gene was found in Jason’s son, Aaron.

Clive Laman said: “The staff have been wonderful. What they are doing for me and Aaron is unbelievable.”

Laboratory Director Dr Anneke Seller said: “Our NHS laboratory staff are proud to be working at the forefront of clinical science to provide state-of-the-art genetic diagnosis that informs the management of patients and their families with these conditions.”

Immunology Team celebrates 30 years providing home therapy

The Clinical Immunology team at the John Radcliffe Hospital is celebrating the 30th anniversary of offering home therapy to its patients.

The celebration coincided with a patient day, held on 8 October. The day, attended by around 100 paediatric and adult patients and their carers (pictured), featured workshops on issues related to immune deficiency and its treatment.

Most of the 200 patients under the care of the Clinical Immunology Team have antibody deficiencies and therefore find it difficult to fight off infections. The introduction in 1986 of a home therapy programme, whereby patients can treat themselves with regular infusions of antibodies, or ‘immunoglobulins’, at home, was revolutionary in the UK.

“Before its introduction, patients had to come into hospital for an infusion,” said Consultant Immunologist Smita Patel. “Today, they have much more freedom to live a normal life, and even go on holiday abroad. Some of the patients and their loved ones are often better at cannulation than doctors!”

Home therapy involves an intensive training period during which the patient and their carers learn how to deliver infusions safely. Nurses are present at the first session and follow up regularly with patients, both in clinic and at home therapy reviews.

Home therapy means the team can treat ten times the number of patients with the same clinic and staff resources.

The JR was the first hospital in the UK to offer immunology home therapy, and its approach has served as the basis for other hospitals’ programmes. It is an important tertiary referral centre, is one of the largest units for adult immunology in the UK and is one of very few to offer home therapy for patients with neurological conditions.
A team of 24 friends and staff from across Oxford University Hospitals has conquered Mount Snowdon at a charity climb.

The group – which included clinicians, support and estates staff – raised over £4,000 for the hospital charity’s latest appeal celebrating the tenth anniversary of the Children’s Hospital.

Edel Wyse, who helped organise the expedition, said: “We are incredibly proud of the whole group that took part as we are such a mix of hospital staff and friends, but the climb really brought us together.

“Led by Maria Moore, the Trust’s Director of Operational Finance, we took a tougher-than-usual route, as we wanted to really challenge ourselves – and we certainly achieved that!

“It is an event none of us will ever forget and we are all thrilled to have conquered Mount Snowdon and raised funds for a project that we are passionate about’

Head of Fundraising at the hospital charity, Eleanor Jones, said: “Next year there will be a big campaign to raise funds to celebrate the 10th Anniversary of the Children’s Hospital.

“Part of that fundraising will go towards building a new accommodation facility for parents who have children being treated at the hospital. Staff were keen to support this and we are delighted that they wanted to kick things off with this very special climb.

“We are always thrilled to see staff getting involved in fundraising and know how much effort goes into organising a challenge like this. It’s great to have this support and we hope this will inspire other local groups and businesses to think about supporting our big appeal next year celebrating the 10th anniversary of the Children’s Hospital.”

Dorchester Christmas Concert

The Dorchester Abbey Christmas Concert is a fabulous evening of choral song and readings. Since the first event in 2006 the concerts have raised over £250,000 for Oxford Children’s Hospital, helping to provide extra medical equipment and new facilities for our young patients.

Tickets for the Thursday 1 December concert, which starts at 7.00pm, are priced from £25 to £70, and this includes wine and food.

The Winchester Cathedral Choir will be performing once more, and they will be joined by a number of high profile readers, including the BBC’s John Simpson and actor Patricia Hodge.

Call 01865 743444 to reserve your place or visit www.hospitalcharity.co.uk/dorchesterconcert

You can still donate to the team by visiting www.justgiving.com/fundraising/msnowdenclimb

To find out more about fundraising for Oxford Children’s Hospital email eleanor.jones@ouh.nhs.uk or call 01865 743442
Eighty abseilers braved lashing rain to take part in our latest hospital challenge this September.

Staff, patients and hospital supporters came down the 100ft wall of the John Radcliffe Hospital Women’s Centre.

The day kicked off with a team supporting Oxford Eye Hospital, followed by a large group of staff, from the JR’s Adult Emergency Assessment Unit.

Karen Loveridge from the department said: “It was brilliant to have so many members of our team taking part. The atmosphere was just fantastic and I was so proud at how well they all did.”

Next on the ropes was Silver Star, which had 20 people abseiling in support of the unit that helps parents through complicated pregnancies. Among them was Luke Froide, taking part with a group of friends from Banbury.

Luke and his wife Gemma were helped by the Silver Star Unit after losing their 18-week-old son Finnley in 2010. Their second baby, Henry, is now 20 weeks old and Luke abseiled with his best friends to say thank you for the care they have received.

“We cannot thank the medical team enough,” Gemma said. “They were so brilliant and because of everything we had been through with Finnley we knew everyone, and they understood us. We really wanted to support Silver Star at the abseil, because without them we wouldn’t have Henry. He’s our little miracle.”

The afternoon saw people abseiling for Oxford Children’s Hospital. They included Russ McGuire, from Poole, who is the father of 18-month-old triplets, Rosie, Woody and Hugo. Rosie recently had craniofacial surgery at the hospital, which is a specialist centre for this procedure.

He explained: “Rosie has been to Oxford Children’s Hospital a lot and we are totally in awe of how the craniofacial team were able to help her. It’s made a huge difference and this abseil was our chance to say a little thank you for this very special care.”

The abseil looks set to raise over £20,000 for all these hospital causes. We are so grateful to all who took part.
OUH has taken steps to improve the treatment and care of patients who need a tracheostomy by holding specialised training for staff from departments across the Trust.

A tracheostomy is an opening created at the front of the neck so a tube can be inserted into the windpipe (trachea) in order to help them breathe after an injury or accident, or if their throat is blocked by swelling or a tumour.

Last year, 204 patients with a tracheostomy were cared for in a number of departments across the Trust.

Study days have been developed for a core group of staff to facilitate their clinical skills and confidence in managing patients with tracheostomies. This was in response to the national publication ‘On the Right Trach?’ by the National Confidential Enquiry into Patient Outcome and Death (NCEPOD), which highlighted the risks of managing patients with tracheostomies in acute hospitals.

Aurora Ruiz Del Castillo, a staff nurse in the Cardiac and Thoracic Critical Care Unit at the John Radcliffe, said the training had been very useful: “I’ve learnt more about the management of tracheostomies and the different types of complications we may encounter, which makes it easier to detect any problems in advance.”

Liz Wright, Deputy Chief Nurse, said: “The Trust has established a truly engaged team of clinical staff to ensure that the recommendations are taken forward and the elements that affect patient safety are addressed.

“This includes staff being able to achieve a level of competency and skills to be confident in their care, through theory and simulation, followed up by competency assessment in their clinical settings”.

The OUH Sarcoma Service at the Nuffield Orthopaedic Centre has been presented with a donation of £5,530 from the grateful father of a young patient.

The money, which will be used for further bone tumour research, was presented by Alan Fielder, whose son, Ian, was treated by the unit last year. Ian, aged 19 at the time, had a sarcoma which resulted in him having his hip and a large part of his femur replaced.

“We felt as a family that we were staring down the barrel of something quite nasty, and these wonderful people gave Ian his life back,” Alan said.

The funds were raised at a charity golf event organised by Alan’s company, Edgetech UK. “They heard Ian’s story and rallied together and raised this amount, which we’re here to hand over to these people to carry on their wonderful work,” Alan added.

OUH is one of the world’s leading centres for rare musculoskeletal disorders, and one of only five nationally approved centres for the treatment of rare primary bone tumours and sarcomas.
AN INSIDE LOOK AT OUH APPRENTICESHIPS

At an apprenticeship recruitment event in May, we hired 18 young apprentices to join us in a range of clinical and non-clinical roles across the Trust.

Now that they have started their new jobs, business admin apprentice Jesh Simmons from our HR team talks about his first few weeks working at OUH.

**What appealed to you about this apprenticeship?**

Prior to this, I was studying for a level 3 BTEC qualification in sports, which was very good, but I didn’t suit it. What attracted me to this apprenticeship was the NHS. The organisation has a great reputation and OUH were offering a great level of experience.

**How are you finding it so far?**

I’ve now been here for just over a month and it’s met my expectations of being a really friendly and supportive place. I’ve achieved a lot of things I thought I wouldn’t have so soon. The NVQ is also very beneficial and will help my progress. I’m hoping that my apprenticeship will lead to a very successful career!

**Would you recommend an apprenticeship at OUH?**

Definitely. It was a great decision that has opened up lots of different experiences for me.

HEALTHCARE INNOVATORS GET BACKING FROM ‘DRAGONS’

Six innovative ideas to harness digital technology to deliver better healthcare were selected at a ‘Dragons’ Den’-style panel at Oxford’s new digital health hub, The Hill.

In total, 38 people outlined their proposals to six judges at the John Radcliffe Hospital in September.

The Hill is Oxford’s new digital healthcare ideas laboratory for patients, carers, healthcare professionals, entrepreneurs and others. It aims to provide support and inspiration in solving today’s big healthcare challenges.

It ran a series of events between June and September, with over 400 people attending, including frontline NHS staff, computer and software developers and digital health companies.

The best idea selected by the panel, which featured the Trust’s Chief Information and Digital Officer, Peter Knight, was a web-based programme to improve the care and quality of life of patients with severe haemophilia. The programme was developed by John Willan, a haematologist at OUH.

This, and the following five entries, will now be tested further to see if they can bring real benefits to the NHS.

- **Locum’s Nest** – mobile phone app to match locums through local hospital banks
- **Medimentor** – mobile phone app to match medical students with relevant mentors in particular specialist fields
- **AMI project** – online community website to align volunteers with vulnerable people
- **Signly** – mobile phone sign language interpreter app
- **ERAS project** – support app and website for patients following elective surgery.

As well as OUH, The Hill is backed by the Oxford Academic Health Science Network and Digital Oxford. More at: thehill.co
OUH honoured at research awards

Staff and teams who work for and closely with the Trust were honoured at the inaugural Thames Valley Health Research Awards, held at St Hilda’s College in Oxford on 12 October.

The event was hosted by the NIHR Clinical Research Network: Thames Valley and South Midlands, the clinical research delivery arm of the NHS, which is hosted by OUH.

OUH-related winners:

- **Inspirational Team Leader**: Gail Lang, Research Manager, Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences
- **Inspirational Team Leader**: Alexina Fantato, Clinical Research Nurse Manager, Eye Research Group Oxford
- **Inspirational Team Leader**: Sharon Westcar, Nurse Co-ordinator for Children’s Research, Thames Valley, Department of Paediatrics
- **Star Research Nurse**: Jo Cook, Cardiac Surgery Trials Group
- **Star Research Nurse**: Rosita Broderick, Late Phase Oncology Research Team
- **Star Research Nurse**: Ana Cavey, Multiple Sclerosis Clinical Trials Unit
- **Outstanding Research Practitioner**: Jasleen Jolly, Specialist Research Optometrist, Nuffield Department of Clinical Neurosciences and Optometry, Oxford Eye Hospital
- **Exceptional Principal Investigator**: Matthew Snape, Consultant in General Paediatrics and Vaccinology at Oxford Vaccine Group
- **Outstanding Press Impact**: Oliver Evans, Communications Manager (Research and Development)
- **Exceptionally effective recruitment strategy**: VAST study team, Oxford Vaccine Group
- **Exceptional performance in recruitment to commercial studies**: Gastroenterology Team
- **Highest recruitment in a commercial study**: capillary blood glucose and ketone testing study, OCDEM Diabetes Research Team
- **Highest recruiting non-commercial study**: Newborn Cross-Sectional Study, Nuffield Department of Obstetrics and Gynaecology
- **Outstanding performance on a commercial study**: Study to Investigate the Use of Biotelemetry in Subjects with ALS, GSK Motor Neurone Disease Study Team
- **All-round high performing team**: Oxford Cardiovascular Research Team

COMMENDABLE EFFORT BY OUH CARDIAC REHABILITATION TEAM

An OUH patient booklet, ‘Cardiac Rehabilitation with Planner’ — Information Booklet and Personal Plan’, developed by our Cardiac Rehabilitation Team, was ‘Highly Commended’ at the 2016 BMA Patient Information Awards on 12 September.

The awards were set up to encourage accessible, well-designed and clinically-balanced information which increases understanding of health issues and patient choice.

“The team receives positive feedback from patients about the booklet, so we are delighted to be given this recognition by the BMA,” said Kate Blayney, Cardiac Rehabilitation Manager at the John Radcliffe Hospital.

Also ‘Commended’ on the night were two videos created by the Trust’s in-house audiovisual department, Oxford Medical Illustration, including one, ‘What is it like having a PET Scan’, that was filmed with the Oxford Academic Health Science Network (AHSN) at the Churchill Hospital.

OUH has an approved process and policy for staff wanting to produce written or video information for patients: if you are thinking of creating a leaflet or short film, please visit the Patient Information intranet site for full details.
THINKING ABOUT RETURNING TO NURSING?

As part of its Come Back campaign, Health Education England is supporting qualified nurses who have taken a break from the profession to return to nursing. One of these ‘lapsed’ nurses is Kim Corbey, currently working in the Renal Department at the Churchill Hospital. As she explains, it was the death of her husband that prompted her to come back to nursing.

“I qualified as a nurse in 1979 and worked in various roles – in paediatric surgery, outpatients, gynaecology and in a GP practice. But I haven’t been in full-time nursing for 25 years.

I completed a return to nursing course 15 years ago, but when my husband was made redundant, I decided to work in the pharmaceutical industry because the pay was better. I’d always wanted to come back to nursing, but it was not viable.

My husband, Martyn, was a doctor and we met in a hospital. Last September, he was diagnosed with inoperable cancer and he passed away in February this year. That’s why I’m back. During that time we were at the Churchill at least three times a week. I got to like this hospital in particular. The Churchill is a wonderful place – the care and attention we received was phenomenal.

I looked after my husband for the whole time he was ill and the nursing staff that I met were absolutely wonderful, and I thought: ‘I could do that’. I always missed being a nurse and thought if I came back, at least I’d have something to take with me. Depending on where I go and what I do, I can take it anywhere. It’s a very useful qualification to have.

I’m effectively a third-year student nurse. It’s a condensed, 14-week course to refresh your skills and knowledge. A lot of it comes back really quickly. I actually worked for a couple of months on Wytham Ward (at the Churchill) as a healthcare assistant. I’d been out so long, I thought I’d better get some practice in and it was absolutely amazing.

I have to do a minimum of 110 hours on the wards and then every other Wednesday is spent at the Uni. While we’re doing that, we have a lot of coursework to do – and I’m not used to writing essays.

The staff have been amazing; really helpful. They don’t have a problem with return to nursing students at all. They treat you like a grown-up. They recognise that you might be rusty, but you know things.

The basics of nursing haven’t changed. It is familiar. There are new things – like the digital side, the zapping of the wristband, for example – but that’s quite fun. Another difference I have noticed is that nurses today spend more time reflecting on the care they give to their patients and their families, rather than just following procedures, and that it is a positive change.

People say they admire me, but this is what I like doing. It feels like coming home. It’s like coming full circle. This is what I’m going to be doing until I retire.”

If you are a ‘lapsed’ nurse and would like more information about coming back to nursing in the Thames Valley region, please visit [http://comeback.hee.nhs.uk/Apply/Thames-Valley](http://comeback.hee.nhs.uk/Apply/Thames-Valley)

OCCUPATIONAL HEALTH SERVICE “SHINING EXAMPLE”

The Trust’s Centre for Occupational Health and Wellbeing (COHWB) has been awarded national accreditation confirming the high standard of the services it provides.

The centre received the SEQOHS (Safe, Effective, Quality Occupational Health Service) accreditation from the Royal College of Physicians of London.

The COHWB aims to help in reducing sickness absence and optimise staff performance and productivity by providing health and wellbeing services to Trust staff, from physiotherapy and counselling to mindfulness and resilience training workshops.

The SEQOHS accreditation report states that the range of support offered to staff is a “shining example of best practice” and that there was a “high standard of engagement and leadership within the team”.

Dr Evie Kemp, Lead Consultant Occupational Health Physician, said: “We are delighted to be awarded the SEQOHS accreditation. The entire team works extremely hard to ensure standards are met and we’re incredibly proud that our services have been formally recognised as high quality at a national level.”
Cyclists get up to speed on bike security

Staff, patients and visitors who cycle to our hospitals are being encouraged to tighten up security on their bikes to deter potential thieves.

PCSO Kerry Yaxley from Thames Valley Police held a drop-in session recently to advise cyclists how to keep their bikes secure, and the benefits of registering them online at www.bikeregister.com.

“You can upload the make, model, serial number and colour of your bike. We’ll then be made aware of this information if the bike is stolen and we can keep a look out for it in our local area,” said PCSO Yaxley.

About 15 bicycles a year are reported stolen from our hospitals. Although this accounts for less than one per cent of overall bike thefts in Oxford, following these tips may help to reduce that figure even further:

• Use two locks to secure your bike, with at least one being a good quality ‘D’ Lock. If you’re a Trust employee, you can use the Cycle to Work scheme to buy a better quality lock at a cheaper cost through salary sacrifice
• Secure your bike through the frame and both wheels, and then lock it to a bike rack
• Remove any quick-release or detachable items from your bike, including bags and helmets
• Report anyone acting suspiciously to Security or a member of staff immediately.

Rachel Collins, Trust Security Manager, said: “Our security team and CCTV Operators actively monitor areas where bikes are stored. In the last few months they successfully apprehended a thief who has now received a custodial sentence.”

Volunteers Ian Pinnell, Richard Gosling, Peter Clift, Richard Simmons and Peta Simmons receive their long-service awards from HBA President June Snowden (third from right)

Nine volunteers with Radio Cherwell have been awarded long-service certificates from the Hospital Broadcasting Association.

Between them the nine have volunteered for a total of 230 years. They include Richard and Peta Simmons, who have each completed 45 years of service, and Peter Clift and Richard Gosling, who have both volunteered for 35 years.

The station, based at the Churchill Hospital and run solely by volunteers, also broadcasts to the John Radcliffe Hospital, Nuffield Orthopaedic Centre and online via www.radiocherwell.com and the TuneIn radio app for smartphones.

Radio Cherwell’s Chairman, Neil Stockton, said: “The long-term commitment of our members is crucial to the longevity of the station, but all members contribute to the team and every commitment makes for a successful hospital radio station.”

The station celebrates its 50th birthday in 2017 and celebrations are planned throughout the year.

If you are interested in volunteering with Radio Cherwell, visit www.radiocherwell.com or call 01865 225522.
NEW CHIEF FINANCE OFFICER JOINS OUH

The Trust has appointed Jason Dorsett as its new Chief Finance Officer to develop and implement the financial management strategy supporting OUH’s ambition to deliver excellent patient services.

Previously Director of Finance, Reporting and Risk at the foundation trust regulator, Monitor, Jason’s extensive experience includes three years as Deputy Finance Director at University College London Hospitals NHS Foundation Trust, and senior roles within HM Treasury, and major audit and professional services companies.

Jason, who completed a doctorate in modern history at the University of Oxford, succeeds Mark Mansfield, who stepped down in May after five highly successful years in post.

The Trust’s Chief Executive, Dr Bruno Holthof, said: “We are delighted that Jason has joined Oxford University Hospitals. He brings significant financial expertise and understanding of the regulatory framework. In a challenging operational and funding environment, he will greatly contribute to the development of high quality services that are financially sustainable.”

Jason said: “I am immensely proud to join OUH as it continues to take a lead in building an NHS in Oxfordshire that delivers excellent care for the local population. I very much look forward to working alongside both staff and patients.”

GREEN-FINGERED VOLUNTEERS REFURBISH WOMEN’S CENTRE GARDEN

A garden at the John Radcliffe Hospital Women’s Centre has been revitalised thanks to a group of volunteers from Unipart, one of Europe’s leading manufacturing, logistics and consultancy companies.

Under the guidance of Sheena Marsh at Oxford Garden Design, more than 50 volunteers from Unipart’s consulting division, Unipart Expert Practices, planted around 500 plants to transform the previously disused garden in the outpatients department into an attractive area for staff and patients.

Marie Sims, Gynaecology Outpatients Sister, said: “The garden looks amazing. It is a far more welcoming environment for women to sit in and enjoy. On behalf of all the staff and the women who use our services, I would like to thank the team from Unipart for all their hard work.”

Alan Kelly, Managing Director of Unipart Expert Practices, said: “I’m really proud of the hard work our team has put in to this project. At Unipart, we believe in empowering our employees, we find solutions that work for our business as well as for the communities in which we operate.”

The garden was completed with two sculptures – a large flower and a smaller one – designed by Christopher Townsend, whose two sons were born at the centre. “My wife and I spent many weeks looking at an overgrown garden, so it’s great to see the garden looking so well cared for now. The two flowers represent my boys, but they could also represent a mother and child. I hope the sculptures further enhance the garden to provide staff and patients with a tranquil environment.”

Marie Sims opens the new garden
One of the Trust’s most experienced biomedical scientists has retired after 45 years. David Bishop is a well-known figure not only on the wards at the OUH’s four hospitals, but also in community hospitals in Oxfordshire.

David started working at the Horton General Hospital as a 16-year-old in 1971, before moving to the John Radcliffe in 1979. For the latter part of his career, he has been a senior member of the Point of Care service in the Biochemistry Department.

His job covers everything from programming hand-held meters and training and supporting users to logging and analysing the data. “You get to work in the lab, but you also go out and meet people around the hospitals, and that’s a fantastic job to have. People recognise me wherever I go,” David said.

His boss, Ian Smith, praised David’s dedication and the great service he has given over the years: “David’s career has followed the development of pathology. He started with test tubes and Bunsen burners, went on to automated equipment and big laboratories and now we’re testing using hand-held devices.”

David added: “I’ve seen so much change in 45 years. When I started, we tested 75 samples a day. Today we have a machine that can do thousands. To process an urgent result back then took a week. Now you can do it in ten minutes. It’s been like going from the invention of the wheel to landing on the moon. It’s been a fantastic journey.”

JULIE BIDS FAREWELL AFTER DECADE OF SUPPORTING SSNAP

Staff at the John Radcliffe’s Newborn Intensive Care Unit (NICU) gave a fond farewell to Julie da Silva Moore from the charity SSNAP (Support for the sick newborn and their parents) after ten years in charge of fundraising.

One in 10 babies needs specialist medical care at birth. SSNAP was founded in 1982 to give support to parents of sick and premature babies who are being cared for in the NICU.

In her time with SSNAP, Julie (pictured left) has overseen fundraising worth several million pounds and seen the NICU expand enormously. She said: “It’s time for me to move on, but I would like to thank all the families whose courage has been so inspirational to me over the years. Their fundraising and support enables SSNAP to make a difference in people’s lives at what is a very difficult time for them.

“Having been through this experience with my first-born I can empathise with the challenges that they are facing.”

Consultant Neonatologist Dr Eleri Adams said: “We will all miss Julie. I would like to thank her for the huge support she has been to staff, parents and their children over the years. We will of course continue to work closely with SSNAP and our other fantastic fundraising supporters.”