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QE team in Trinidad for transplant first

Hospital specialists are UK's first to perform liver transplant abroad

By Andy Comber

A transplant team from the Queen Elizabeth Hospital in Birmingham has become the first in the UK to travel to another country to perform a live kidney transplant.

The surgeons, doctors and support nurses and theatre technicians were working for TLC (Transplant Links), a UK charity, when they achieved the first successful live kidney transplants for three children on Trinidad in the Caribbean.



■ Transplant recipient Rameal with mum Carlene

The clinical lead for the mission, Consultant Transplant Surgeon Andrew Ready, said: "We have proved that we can perform very complex surgery in a country that does not normally have the means to do it. We now want to extend this to other countries and expect further visits to be made."

Adults have received transplants on Trinidad. But the skills did not exist to expand the service to children. So the Queen Elizabeth Hospital team, working on behalf of TLC, has provided a milestone in paediatric care on the island.

Dr Jennie Jewitt-Harris, founder and Chairman of TLC, said: "It was always the goal of the charity to give parents or close relatives the chance to be able



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We have proved that we can perform very complex surgery in a country that does not normally have the means to do it

— Andrew Ready, Consultant Transplant Surgeon

to save or dramatically improve the lives of their loved ones. To be able to give this gift to these families in Trinidad has been a wonderful experience for everyone involved.

"The transplant team from the Queen Elizabeth Hospital gave up their spare time to come to Trinidad and do this work. They performed the operations and provided after-care and teaching so we can now work towards more children benefiting from transplants in the future. Their contribution has been truly amazing."

The transplants were carried out in collaboration with clinicians at the medical centre on Trinidad on a 14-year-old girl and her uncle, a

13-year-old girl and her mother and an 11-year-old boy and his mother.

Mr Ready, who is Medical Director of TLC, said: "Here in the UK, when patients are diagnosed with kidney failure, they're put onto dialysis and have the opportunity for a transplant, which is something we tend to take for granted.

"That simply doesn't happen in the developing world where people are dying instead of getting treatment. It's great to have finally taken a team to make such a difference elsewhere.

"The principle challenge was to take technology we use here to

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Big day out for Liver transplant recipients

Almost 1,500 people from around the country have been invited to Birmingham to celebrate their new lease of life. Liver transplant recipients from the Queen Elizabeth Hospital will be joined by staff and VIPs at the celebration day hosted by the hospital's Liver Unit at Edgbaston Cricket Ground on Saturday June 14.



■ Eric Darch, the 3,000th liver transplant patient, with wife Lydia.

The invited guests include Eric Darch from mid Glamorgan who last year was the 3,000th patient to receive a liver transplant at the QE since the programme began in 1982.

The Queen Elizabeth's Liver Unit is the second largest liver transplant centre in the UK and one of the largest in Europe. Patients in need of liver transplantation have been referred to the Liver Unit from all parts of the United Kingdom.

Consultant Physician Elwyn Elias, one of the driving forces behind the liver transplant programme, has recently retired. InsideOut talks to him about the team's work on page 3.

Birmingham first for academic health initiative
— See page 5

Burning issue: Wise up to skin danger

Every four hours, someone dies from skin cancer in the United Kingdom. **Inside Out** looks at the Trust's own initiative to promote safe sun care

Skin cancer is the most common cancer in the United Kingdom – every four hours someone in the country dies.

Each year there are more than 72,000 cases of non-melanoma skin cancer and almost 9000 cases of melanoma reported.

Specialists know that these numbers are underreported and the real figures are thought to be nearer 100,000.

Specialists at the Trust are helping to raise awareness about the risks people take and show why early detection can avoid unnecessary problems or even save a life.

Most skin cancers are caused by long term exposure to the sun however there is evidence that "short sharp" exposure, such as that when we get too much sun over a short period, get sunburnt or use sunbeds can lead to the development of melanoma.

Most skin cancers can be easily cured, however for melanoma it is particularly important that it is picked up earlier in order to increase your chance of cure. Some patients will die from skin cancer.

Some people have a greater risk of skin cancer. Those with a higher risk tend to have one or more of the following:

- Fair skin that burns in strong sun
- Red or fair hair
- Lots of moles or freckles
- A personal or family history of skin cancer
- Experience of sunburn, especially when young



■ Promoting sun care awareness at the Trust.

Sun Awareness is the British Association of Dermatologists' annual drive to promote sun safety messages.

The public arm of the campaign focuses on early detection: self-checking for skin cancer and how to spot the signs of a melanoma, using the association's "ABCD-Easy rules of mole checks" and other such user-friendly and easily memorable materials supplied by dermatologists.

The campaign also advises the public on where to seek help, and who to expect to be referred to should there be any concerns.

There are different clues that should alert people to seek medical advice. These include:

- Asymmetry** – the two halves of the area may differ in shape
- Border** – the edges of the area may be irregular or blurred, and sometimes show notches
- Colour** – this may be uneven. Different shades of black, brown and pink may be seen
- Diameter** – most melanomas are at least 6mm in diameter. Report any change in size, shape or diameter to your doctor
- Expert** – if in doubt, check it out! If your GP is concerned about your skin, make sure you see a Consultant Dermatologist, the most expert person to diagnose a skin cancer. A GP can make this referral via the NHS

Sun Care advice sessions

A sun care advice session run by the specialist nursing team gave people an opportunity to find out more about how to reduce the risks.

Helen Williams, a Macmillan Clinical Nurse Specialist, with colleagues Margaret Sherman and Clair McGarr gave invaluable advice during the session at the Cancer Centre. Helen explained: "We asked people to complete a short true/false quiz to highlight current knowledge. We were pleased to find that people knew more than they realised."

The two questions most frequently answered incorrectly related to not realising that skin cancer is the most common cancer in the UK and that T shirts do not adequately protect children's skin when swimming."

The correct choice of skin creams was another big issue – people should opt for Factor 15 or higher with at least a 4 star UVA rating. The choice other than that depends purely on personal preference of brand.

Helen said recognising abnormalities, following the ADCDE rule, and



■ Sunbathers should opt for Factor 15 plus sun cream with at least a 4 star UVA rating.

protecting children from the harmful effects of the sun were other talking points. She said: "We know that we get up to 80 per cent of our lifetime UV exposure before the age of 21 and that many skin cancers are likely to be as a result of long term sun exposure. We also know recognising a skin cancer early means that the majority can be cured with simple surgery."

We provided information leaflets and samples of sun creams for people to take away and everyone

completing the quiz was entered into a prize draw to win a selection of Clarins sun products kindly donated to us." The prize was won by Sylvia Dixon from Outpatients at Selly Oak.

SunSmart is the UK's national skin cancer prevention campaign. Run by Cancer Research UK and now in its 6th year of campaigning. Specific focus of this year's campaign is to raise awareness of sun protection for young adults and teenagers and to highlight the dangers of sunbed use.

Its message is to be SunSmart:

- Spend time in the shade between 11 and 3
- Make sure you never burn
- Aim to cover up with a t-shirt, hat and sunglasses
- Remember to take extra care with children
- Then use factor 15+ sunscreen
- Also report mole changes or unusual skin growths promptly to our doctor

• For more details see the SunSmart link at www.info.cancerresearchuk.org/healthyliving/sunsmart/

Better choice and access for patients

The ongoing challenge to ensure patients have increased choice and access to a wider range of services has enabled more health professionals to prescribe drugs.

The Trust currently has 19 nurse and pharmacist non medical prescribers who prescribe for a wide range of specialist areas such as heart failure, hypertension, pain, rheumatology, HIV, diabetes, nutrition, urology, renal anaemia, hepatitis and haematology.

A further nine have qualified and will soon start prescribing in practice and three are currently undergoing training.

Dawn Homer, Nurse consultant in rheumatology, who is helping to coordinate the growth of the service, with colleagues Louise Beesley (Hypertension Nurse Specialist) and Emma Suggett (Senior Pharmacist).

Dawn explained: "The majority of the prescribers in the Trust provide health professional led clinics for the assessment and treatment of patients and some visit inpatients with full access to prescribing using the Prescribing Information and Communication System.

"Prescribing by these health professionals enables them to utilise their skills and knowledge in order to provide timely care and the information required by

patients to enable them to take control of their medications and improve their compliance."

The hope is that more individuals will now want to undergo the training. Dawn said there were clear benefits for patients who, through quicker access to drugs are benefitting from improvements in their care and treatment.

Dawn: "Non medical prescribers have set up a non medical prescribers forum to share best practice and one of the aims is to raise the profile of non medical prescribing in the Trust by holding a conference later in the year. The conference will help to identify areas where non medical prescribing can be developed, discuss the application process, explore the training requirements, review case studies of best practice and describe the support available to practitioners post qualification."

Details of the Study Day will be circulated in the near future. Attendance will be welcomed from a multidisciplinary audience who are interested in pursuing non medical prescribing in order to enhance and facilitate their current role. Any enquiries relating to non medical prescribing issues in the meantime can be directed to louise.beesley2@uhb.nhs.uk or dawn.homer@uhb.nhs.uk

Carers' Week offers a helping hand

Challenges facing carers, who have to balance the demands of work and home, are being offered a helping hand and a chance to share their experiences.

Carers Week 2008, that runs from June 9th to 15th June has the theme, 'Carer's Can't afford to be ill'.

The message across the Trust is being supported by Terri Baker-Mills, the Trust's work/life balance co-ordinator, who will be running drop in sessions during the week.

She said: "Coping with the pressures of everyday life can sometimes be a challenge to all of us. But this is a daily occurrence for the six million carers in Britain who care for a loved one, and combine their caring role with a full-time job.

"These are the people that I am here to support. However for various reasons carers often do not wish to be identified, so I hope that by holding the drop-in sessions during Carers' Week staff will be able to pop by and say hello, or book an appointment at a later date for a confidential chat."

The campaign is just part of Terri's ongoing work with teams and individuals across the Trust.

She explained: "Essentially my role is to offer confidential advice and support and I can help in a variety of ways from listening and supporting to empathising and informing."

Terri may work with staff caring for a dependant relative or close friend. This could be a teenager with special needs, autism, Down's Syndrome, a parent with ME or Parkinson's.

Other staff want to improve their work life balance, maybe through flexible working and others might need accessible, affordable quality childcare. This could be through Busy Bees Salary sacrifice scheme or discounted holiday play schemes and day nurseries.

The drop in sessions include Monday, June 9th from 11.30am to 1.30pm at the Porter's Lodge in the main corridor at Queen Elizabeth Hospital and at the Gallery Restaurant at Selly Oak Hospital from noon to 2pm on Wednesday, June 11.

• **If you are unable to make the session but would like advice ring Terri on 07786246397.**

More information about the national programme can be found at: www.carersweek.org

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another country where that technology hasn't been used before. We use keyhole surgery that makes it a lot easier for our donors to recover and reduces the trauma they experience. We wanted to take our expertise and the equipment we use for that technique with us.

"Transplant surgery is not generally available to children in Trinidad. We have a lot of experience operating on children so we wanted to give them the opportunities that a transplant gives children to transform their lives.



It was the experience of a lifetime. We just went out there and did what we always do
— Adrian Shaw, Theatre Technician

"The children had dialysis available to them which was keeping them alive. But for a child, being on dialysis is not ideal. There are problems with bone growth, diet, lack of energy and their life expectancy would be restricted as well.

"This was the first time this has been done by a team from the UK. It was the first time there has been a child transplant in Trinidad and the first time keyhole surgery has been used in a transplant in the Caribbean area. But everything went very well,

the technology worked very well and the donors and children have done very well indeed.

"One of the reasons for our success I think was that we planned everything well in advance, we had plenty of discussions with clinical colleagues in Trinidad before we went. The operating theatres we were using in Trinidad were very good and their staff were also excellent. We had to take some of our own keyhole surgery kit with us and we were very happy with how smoothly it went.

"Nothing happened during the operation to make us anxious. In fact, during the procedures there were times when we had to remind ourselves that we were in the Caribbean rather than Birmingham."

Mr Ready praised the team who went out to Trinidad, which included another surgeon, an anaesthetist, two renal physicians, three theatre technicians and two paediatric nurses. He said: "They were absolutely brilliant and took everything in their stride. They showed skill, resourcefulness and real dedication in getting the job done."

Theatre Technician Adrian Shaw, who was part of the team, said: "It was the experience of a lifetime. We just went out there and did what we always do. It wasn't too difficult. The local teams had a lot of good skills and just needed a little support in getting the job done. They were fantastic.

"I don't think we realised what we had done until we were at the airport and one of the grandmothers said thank you for saving the children. It was very emotional. Then we realised the enormity of what we had done."

TLC now plans to expand its work



■ Top left: Theatre Technician Fleur Kelly shows the way. Top right: Consultant Transplant Surgeon Andrew Ready (left) and Consultant Transplant Surgeon Nick Inston at work. Above: TLC team on day 1.

and take UK teams to other countries in need of help. Dr Jennie Jewitt-Harris said: "Kidney failure is tantamount to a death sentence in many developing countries where there is little or no chance for kidney dialysis or a transplant.

"There are often doctors with the desire to learn though and, through

TLC, we will set up long-term collaborations with experts in the UK to perform transplants and teach the skills." Andrew Ready added: "We have already visited Ghana where there is a desperate need for TLC's help, and once we have raised the funds we plan to take a team there later this year. We are also planning a trip to Nigeria."

■ TLC is a UK registered charity set up by a group of British doctors with the goal to save the lives of children and adults in developing countries who suffer from kidney disease. Through TLC, leading UK surgeons and medical teams take their skills to countries where they are most needed, and dialysis is often not available. They work with medical teams on location helping them to develop their own expertise in running a living transplant programme, allowing one member of a family to save the life of another, often their own child.

TLC relies totally on charitable donations to pay the costs of the travelling medical teams who are all volunteers using their own time.

■ For further information, or to make a donation go to www.transplantlinks.org

Liver Unit's success celebrated by UHB

● 1,500 transplant recipients invited to special occasion

Almost 1,500 people from around the country have been invited to Birmingham to celebrate their new lease of life after undergoing liver transplants.

Liver transplant recipients from the Queen Elizabeth Hospital will be joined by staff and VIPs at the celebration day hosted by the hospital's Liver Unit at Edgbaston Cricket Ground on Saturday June 14.

Consultant Physician Elwyn Elias, one of the driving forces behind the liver unit's success, who has recently retired, reflects on the team's work.

A chance meeting on the steps outside Queen Elizabeth Hospital nearly thirty years ago inspired a handful of young medics to explore new ways of treating liver disease.

Thousands of lives have been saved thanks to the innovative work of a team that had the vision, motivation and ability to develop one of the country's leading units in the United Kingdom caring for patients with liver disease.

Now Consultant Physician Elwyn Elias, who retired on his 65th birthday in January, remembers the moment in the late 1970s when the direction of his future career became so much clearer and he would begin his work with surgeon Paul McMaster.

"I was on the steps when I met Tony Barnes, a surgeon involved in the kidney transplant programme, who told me Paul had been appointed.

"Tony said that Paul had got the job and it was now up to 'you guys' to get going."

Two years later the first liver transplant took place at Queen Elizabeth Hospital.

Elwyn, a calm-speaking Welshman, recalled: "When we first started liver transplants the work was not recognised by the NHS and no funds were allocated to it.

"It seems difficult to believe today that this was the case and many obstacles had to be overcome. Paul had tremendous drive and determination to make it work."



■ Consultant Physician Elwyn Elias.

Elwyn's experience had already included four years as a senior registrar with the celebrated Prof Dame Sheila Sherlock at the Royal Free Hospital before undertaking research in the United States at the University of Chicago and Yale.

"I had a wonderful time there but made the move to Birmingham because of the new opportunities," explained Elwyn.

There were major challenges for

the newly-appointed Consultant Physician.

He said: "It seemed that nobody at the QE was interested in liver disease, the only gastroenterologist being Clifford Hawkins who doubled up as the QE's rheumatologist."

The work with Paul and the creation of a team helped to make the difference.

Elwyn's roles would include referrals to the transplant team but in the early days this was seen as a last resort.

"It was new to us all and obviously there were huge risks and we were only operating on patients in whom it was obvious that without transplantation they had extremely short life expectancy," said Elwyn.

"It was only those in a desperate situation where we could justify the transplant."

Elwyn's package included access to a laboratory where he was able to continue his research work.

"The laboratory work was important to me. I feel doctors should be looking after patients and when we see them use this information to inquire what can be done to better improve their care."

This refreshing approach enabled the team to help thousands of patients and, in many cases, avoid the need for a transplant.

"You get to know the patients and their families, often over many years. I have had more than one letter from patients who had terrible problems 20 years ago with alcohol but have

recovered and never needed a transplant."

On the day before the celebrations in Edgbaston – the Trust will be celebrating his career by holding a scientific meeting, (Festschrift) at which Elwyn will be guest of honour with his wife, Irene.

"I was hoping to ride off into the sunset quietly but this event has been organised so I am going along with it," explains Elwyn, who intends to continue his research work in between games of golf and work at his local church.

His Christian faith is an important part of his life.

"I have been a Christian since the middle of the sixth form and if I hadn't had this career then I would have been a preacher."

Not that Elwyn has any regrets about the way his life has turned out.

The father of three grown-up sons said: "My ideal dream when I came to Birmingham was to recreate what I had experienced myself at the Royal Free, where we had a world class team providing the best possible care for people with liver disease.

"Combine that with good research that helps us to understand the disease and its treatment and the camaraderie of the people and we had a wonderful place to work."

He adds: "I have enjoyed the way it has worked out and if someone had said 30 years ago that the next 30 years of my life would be like this then I would have grabbed it with both hands."

Infection control project underway

New innovations will promote best practice and improve service

An innovative project by a specially selected team is helping to make a difference to the care of patients across the Trust.

The IV (intravenous) Team was set up in December 2007 at the University Hospital Birmingham NHS Foundation Trust to address ongoing infection control initiatives relating to Peripheral Venous Cannulae (PVC) and Central Venous Access Devices (CVAD) and to promote best practice to all clinicians across the Trust.

Debbie Jackson, the project co-ordinator, with colleagues Bryony Crook, Sara Wells, Pete Taylor and Cpl Grace Eccles are in seconded posts to lead this innovative project.

Debbie explained: "The IV Team has a dual role to promote excellence in clinical practice and to assist in the reduction of Health Care Associated Infections (HCAI). The project is a huge undertaking as it is a Trust wide initiative."

Wide ranging work includes the team undertaking initial demographic audits for both PVC and CVAD care and are currently auditing the care of PVC and CVAD.

Debbie said: "The initial audit findings have enabled the IV Team to develop educational strategies to support staff, highlighting any areas that can be improved and encouraging the maintenance of high



■ Paul Taylor and Debbie Jackson

standards in the clinical setting.

"The education is being well received throughout the Trust. The IV Team's priority is to ensure that education is transferred and implemented into clinical practice, and to empower all staff to take a responsibility in ensuring that this happens.

"In April, a second PVC audit was undertaken, the results are showing improvements and high standards in

clinical practice; however we can not become complacent and must continue to improve, maintain and sustain best practice."

The strategy has looked at a range of issues, including:

- Right device for the right patient, aseptic techniques, ensuring the dressing is correctly applied and remains clean, dry and secure.

Inspection of the insertion site for signs of infection- minimum of eight

hourly PVC and daily for CVAD.

Management and timely removal of the device and ensuring all aspects of care are clearly documented, signed and dated.

The IV Team were instrumental in the successful launch of the new PVC guidelines and updated CVAD guidelines, which were introduced in late March. Changes in equipment have also helped in the prevention and control of infections.

Debbie said: "The IV team have supported the changes and provided education on the use of new products to all grades of health care staff in all clinical areas Trust wide. The team are also co-ordinating key changes in clinical practice and presently setting a group of staff in each clinical area to act as "gatekeepers" to good practice.

The IV Team would like to thank all Trust staff for the help they have given us in achieving this.

"The project provides an exciting opportunity for health care professionals in the Trust; to work collaboratively to maintain and improve high quality patient focussed care.

"Infection prevention and control is vital and can be improved by simple and straight forward actions. To achieve a reduction in HCAI's, hand hygiene is a fundamental element in all aspects of clinical care."

■ The IV Team, which is part of the Clinical Education Team, is based at Oak Tree Lane Offices, Selly Oak Hospital site. Extension 53558 or mobiles via switch.

UHB Nurse's research published

Research undertaken by an experienced nurse has been published in a leading specialist publication. Juliet Whitehead, part of the Cardiology and Vascular Surgery, undertook the research in the summer of 2006, as part of her MSc dissertation at the University of Birmingham.

The work has recently been published in the British Journal of Nursing, co-authored with Dr Herman Wheeler, Lecturer in Health Sciences at the University.

The first article, Patients' experience of privacy and dignity. Part 1: a literature review appeared in British Journal of Nursing 2008, Vol 17, No 6, 381-385. Article 2, the Patient's experience of privacy and dignity. Part 2: an empirical study featured in the British Journal of Nursing 2008, Vol 17, No 7, 458-464.

Juliet said: "The first article reviewed the literature relating to patients' privacy and dignity and the second article which reports a research study carried out to ascertain what a sample of patients on a cardiothoracic ward thought about privacy and dignity."

New award for Armed Forces care

A new national awards scheme to recognise the people who provide excellent healthcare services to the UK Armed Forces, their dependants and veterans has been launched by the Department of Health, Ministry of Defence and the devolved administrations.

The Military and Civilian Health Partnership Awards will recognise people working within the Defence Medical Services, NHS, charities or the private sector.

There are eight award categories:

- Innovation in Service Development Award
- Education and Training Award
- Deployed Healthcare Award
- Health Improvement and Promotion Award
- Mental Health Award
- Healthcare Reservist of the Year
- Care of Veterans Award
- Team of the Year Award: Military and Civilian Health Partnership Award

Individuals may wish to nominate themselves, their team, colleagues or encourage others to put themselves forward for an Award. Full details on how to nominate or apply for the Awards can be found on the Ministry of Defence website. Nominations must be received no later than Saturday 5 July 2008. Winners of the Awards will be announced at a ceremony at the Royal Hospital, Chelsea in October.

Academic health initiative

A partnership led by University Hospital Birmingham NHS Foundation Trust and the University of Birmingham has been named today as the first in the West Midlands to be successfully awarded £10 million in funding to become a centre of excellence for health research. The Birmingham and Black Country Collaboration now have CLAHRC centre status – they are a Collaboration for Leadership in Health Research and Care.

Public Health Minister, Dawn Primarolo, announced that the Birmingham collaborators are one of seven new partnerships between NHS organisations and leading universities who will receive a total of £64 million to conduct research and improve care in major conditions including heart disease, stroke, diabetes and obesity. The Birmingham and Black Country Collaboration has been awarded the maximum amount available of £10 million from the National Institute for

Health Research (NIHR), the R&D wing of the Department of Health.

The Minister said: "This new funding will help to improve health outcomes for patients across England, with particular emphasis on conditions that cause chronic distress to patients and are a significant issue for the NHS to manage."

To be successful, the partnership had to demonstrate an excellent record in undertaking applied health research – particularly targeted at chronic disease and ways of improving public health – and to put forward very strong proposals for new research and for implementing research findings, which were very likely to generate a step change in the way that research is done and research evidence is implemented into practice.

Director of the Birmingham Clinical Research Academy, Professor Richard Lilford, said: "We're delighted to have secured this award and status to put

the West Midlands firmly on the map as a world leader in applied medical research. The great attraction of this award is that the NIHR funding complements matched funding from local NHS organisations. This will allow us to conduct prospective evaluations of measures that are being put in place to improve the quality of health services.

"We will pursue a number of research themes that will deliver a real impact on the lives of our diverse community, including implementing effective community care for those with diabetes, evaluating paediatric outreach services, early detection and interventions in psychosis, redesigning maternity support services for multi-ethnic disadvantaged groups and improving patient safety."

Julie Moore, Chief Executive of University Hospital Birmingham NHS Foundation Trust, commented: "I am extremely proud that the Birmingham

& Black Country Collaboration bid, led by University Hospital Birmingham and the University of Birmingham, has been selected as one of only seven health research partnerships in the country, and the first in the West Midlands. It is great news for Birmingham and, more importantly, even better news for our patients. Our projects, which partner with other health organisations across the city, will undertake high-quality research and turn the science into substance improving outcomes for our patients."

Professor Michael Sheppard, the University of Birmingham's Pro-Vice-Chancellor for Resources, said: "The most important aspect of this news is that we can now go ahead with nine ground-breaking projects that will have a real impact on the wellbeing of our local community. We can now put our plans and proposals into action, transferring world-class medical research to patient bedside."

Division 4 showcases professional practice

Teams across the Trust got an insight into the varied work of Division 4 at a half day showcase that celebrated good practice.

The event organised by Lisa Magill, Practice Development Nurse for Division 4, and Alison Simons and Natalie Harvey both Professional Development Nurses for the division, got a positive reaction from visitors. The showcase's key aims were to:

- celebrate good practice in division 4
- Illustrate the diversity within the division
- Allow the staff / departments within the division and Trust to illustrate their good practice and share with colleagues



It was interesting to see so much information of the good practice that is occurring

— Lisa Magill, Practice Development Nurse

Lisa said: "Staff and departments were invited to take part but it was up to them how they chose to present their work. Everyone had put a lot of effort into their presentations. We really would like to say a big thank you to everyone who contributed to the day."

Specialist teams who took part in the four hour session in the boardroom at the Queen Elizabeth Hospital came from 14 different clinical areas and departments. These were Tracheostomy Care Nurse Specialist, Bereavement Care, Supportive Care Pathway team, IV team, Radiotherapy, Breast Screening Unit, UKNEQAS, Haematology wards, Young Person's Unit, Haematology Clinical Nurse Specialists and Research Nurses, Pain Management Team, Palliative Care Team, Professional Development and Practice Development.

Lisa said: "We received some really positive feedback and many people said it was interesting to see so much information of the good practice that is occurring and how good it was to see presentations from the many different areas within the division and beyond. It was an excellent opportunity and really interesting for people to learn about the different roles and practices."



■ Sue Stevenson, Supportive Care Pathway Facilitator discusses the pathway with Oncology Out-Patient staff Cathy Hill and Nigel Mann.



■ Division 4 Patient Council members Shirley Turner and Betty Allcock chat with Sandra Pendry, Deputy Superintendent Radiographer for the Breast Screening Unit.

A&E brushes up

Rooms transformed by paint developed to resist the growth of MRSA

An over eager four-year-old helped to celebrate the transformation of drab treatment rooms in Accident and Emergency. The youngster, with the help of Sister Denise Wixey, was able to cut the ribbon to mark the end of the project at Selly Oak Hospital.

The work in the two treatment rooms, set aside for children, was undertaken by Johnstone's Decorating Centre using paint that has been developed to resist the growth of MRSA.

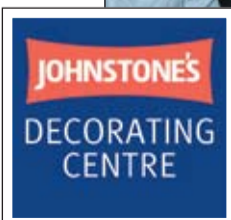
Denise said: "The paediatric rooms in accident and emergency have been transformed from a dismal depressing canary yellow and green, into bright and refreshing treatment areas."

"Selly Oak firm Johnstone's Decorating Centre, generously donated materials and labour in order to carry out the work, and also kindly gave the nurses' coffee room a much needed lick of paint."

"We are really delighted with the



■ Tony James of Durant James Ltd, Peter Ashfield (Regional Manager, Johnstone's), Sister Denise Wixey, Jason Rudge (Decorating Centre Manager, Johnstone's) and John Duckworth (Territory Manager, Johnstone's).



end results and grateful for the company's support."

The firm have also kindly offered a 20 per cent discount on all of their products bought by Trust employees.

The offer runs until the end of July and to qualify, employees are asked to produce their Trust id card at Johnstone's Decorating Centre, Unit 8, Birkdale Avenue, off Heeley Road, Selly Oak, B29 6UB.

Police help promote security awareness

Police officers are supporting the Trust's continuing commitment to promote security awareness.

PC Sally Thompson, the Trust Community Police Officer, will be running the following crime prevention, security advice surgeries from noon to 2pm.

Wednesday July 23rd at Selly Oak Hospital's Gallery restaurant and on Wednesday, June 25th at the Cellar restaurant at Queen Elizabeth Hospital.

Staff who wish to discuss any aspect of crime prevention, security advice or any other police related matters are encouraged to attend one of these surgeries. In addition, PC Thompson will also be selling discounted cycle locks for £5.

Due to the expected high demand, this offer is limited to one per person, and staff need to bring their ID badge to demonstrate that they work for the Trust.

Religious festivals

Monday 9th June

Jewish Shavuot

Shavuot marks the time when the first harvest was taken to the Temple. Also known as the Festival of Weeks.

Monday 16th June

Sikh Martyrdom of Guru Arjan Dev (Nanakshahi calendar)

Guru Arjan Dev was the fifth Sikh Guru and the first Sikh martyr. He also compiled all of the past Gurus' writings into one book, which is now the Sikh holy scripture: the Guru Granth Sahib.

Friday 20th June

Pagan Summer Solstice – Litha, the longest day of the year

Sunday 29th

Christian St Peter's Day

Observed by Roman Catholic, Anglican, and Lutheran churches. One of the oldest saints' days.

Training courses available to staff

A range of City and Guild courses are available to staff to enhance their knowledge and skills.

These courses are nationally recognised and also count towards the KSF/PDRS.

To find out more about these courses available or for details on how to apply, follow the link: [City and Guild courses at uhhhome/TrainingandDevelopment/CityAndGuild](http://CityandGuild.com/TrainingandDevelopment/CityAndGuild)

Health and Social Care NVQ levels 2 and 3 are also now available from the Vocational Development Department.

• For more information about these courses follow the link at uhhhome/TrainingandDevelopment/CityAndGuild/Nurses

Chief Executive's Hotline

Do you have a burning question or query that you would like an answer to?

If so, please contact me, Julie Moore, Chief Executive.

Telephone 0121 204 1880 or x8080 for internal calls



InsideOut listening to you

Contact the editor: Annie Roberts, InsideOut, Trust HQ, QE Medical Centre, Edgbaston, B15 2PR. annr@dircon.co.uk

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Creating clear directions for new hospital

International wayfinding specialists planning signage solutions

Making sure patients and visitors can find their way round the new hospital easily and quickly is a major priority. Carol Rawlings, Associate Director for Patient Affairs, explains how simple and effective signage is designed to make wayfinding child's play.

We all know what it is like when we move into a new house or flat. It takes a while to settle in and find out where everything is. So imagine what it is going to be like for all our patients, visitors and staff when we move into the new hospital!

With the help of Modulex, a company founded by the LEGO Group (yes, the company that makes those little coloured building bricks!) in 1963, we are planning the wayfinding and signage that will be needed to



ensure everyone stays calm and is confident of finding their destination by following the right directions.

Modulex is an international authority in wayfinding and signage and has already successfully completed 50 healthcare projects.

It has proposed a sign solution based on the principle of providing only the precise amount of information people needed at key wayfinding points. This "less is more" approach reduces the number of signs to a minimum, so the hospital is as simple as possible to get around, and looks clean and uncluttered.

Of course, wayfinding is not just about signage. The information we provide for our patients through letters, maps and pre-visit information all need to be co-ordinated to ensure it reflects the journey patients will have getting to the hospital and once they are inside.

Understanding how departments work is key to the wayfinding solutions for each area. So, over the next couple of months the team will be meeting with staff to better understand this. At the same time, the views of patients and members of the public will be gathered to ensure their different information needs are also incorporated into the design.

The first meeting with patients and the public took place last month to test assumptions and potential solutions to signage problems. It was a really lively meeting with lots of discussion. The main focus was on the fact that the signage will be used predominantly for patients and visitors, and so this needs to be considered when naming departments.

Therefore, those attending the meeting agreed that language for department names needs to be simple

and clear, not written in NHS jargon.

Signage should not be considered in isolation, as there are other factors that help get the patient to where they need to be. That is why letters need to give the right information so that the patient is clear about where to go. When someone is anxious they need simple instructions.

And when visitors arrive at the new hospital there needs to be a clear reception desk at the main entrance, with pleasant, approachable receptionists. Sometimes people want to ask a person, not look at a map.



When someone is anxious they need simple instructions

– Carol Rawlings, Associate Director of Patient affairs

A clear message from this first meeting was that once the name of a department is decided, everyone needs to use it, all the time. Abbreviating department names is confusing and unhelpful.

This has been a fascinating meeting. I didn't know there was so much to consider when planning wayfinding and signage. As healthcare professionals, I don't think we always consider who the signage is really for.

It has been very interesting hearing the views of the patients and public who will be trying to find their way around our new hospital.



A year in the making: New hospital 12 months on...

May 07



July 07



Sept 07



Dec 07



May 08



■ Medical Laboratory Assistant Naomi Shipman operates the new sample tracking system.

Cutting edge system will speed up sample processing at Trust

UHB has become the first teaching hospital in the country to use an automated sample handling and tracking system to improve the processing of microbiological testing.

The machine is designed to speed up the processing of samples. It is an example of the kind of technology that is vital to plans to redesign services ready for the new hospital.

Chief Executive Julie Moore officially launched the Kiestra Automatic Tracked System, installed at the Queen Elizabeth Hospital, on Wednesday May 7.

She said: "This confirms our determination to use innovative methods to provide the best patient care and improve the working environment for our staff. This is cutting edge technology and we are among the first in the country to use it."

It works by storing the dishes of culture media, in which test samples are grown, selecting the appropriate media and sending the dish along a track to the member of staff preparing the samples. The sample dish is then forwarded to a storage area, ready to be loaded into an



■ Chief Executive Julie Moore, left, is shown the new system by Biomedical Scientist Katie Dedicoat.

"This confirms our determination to use innovative methods to provide the best patient care" – Julie Moore

incubator. In a future version, the machine will load the incubators itself and automatically select positive samples, ready for further checking.

Barcodes ensure all samples are tracked and electronically recorded.

Microbiology Laboratory Manager Tom Johnson said: "Last

year we tested 500,000 microbiology samples. In the last six months, because of MRSA screening, the number of tests has increased rapidly. This equipment will help us keep up with demand and allow qualified staff to concentrate on work better suited to their skills."

New role for Consultant Physician



■ Consultant Physician Bob Walt

Consultant Physician Bob Walt has been made the Associate Divisional Director (ADD) for Physiological Measurement.

He is the seventh ADD to be appointed. There are also four supporting ADDs.

Dr Walt, a gastroenterologist and clinical service lead for endoscopy, will be leading work to coordinate the physiological measurement functions in the new hospital.

These include cardio-vascular physiology, lung function, neurophysiology, GI physiology, audiology and ophthalmology.

He said: "We have world class physiological measurement services at UHB. At the moment

these specialities are spread across the Trust.

"There is an opportunity for them to work much closer together. For example, we can coordinate patients having multiple tests, such as ECGs and lung function. And in the new hospital that means also being able to locate these diagnostic services together as well.

"This will make things much easier for the patient and for staff. It is also a major part of our commitment to speeding up access to both inpatient and outpatient care."

Dr Walt, said introduction of new IT systems for coordinating and tracking appointments would be important to this work.

Clinical guidelines launched by Trust

Evidence based practice is fundamental in the provision of sound patient care. In order to guide healthcare staff at University Hospital Birmingham in the provision of evidence based quality care, the following clinical guidelines have been launched:

- Guidelines for the Care of Patients with a Tracheostomy
- Guidelines for Cleaning Nebulisers
- Oral Hygiene guidelines

These have all been developed in collaboration with a number of experts across the Trust and external organisations. Practice Development Nurses Martina Morris and Louise Denner, who were both involved in the development of these guidelines, organised the launch at both hospital sites in collaboration with Maria Rogers-ENT Clinical Nurse Specialist, Edith Buglass – Head and Neck Macmillan Nurse, Critical Care Outreach and Infection Control Teams.

The sessions included support from Sue Howles from Cambridge Laboratories suppliers of Gelclair which manufacture products for oral hygiene and Anne Kavannah from Kapitex Healthcare Ltd which manufactures tracheostomy tubes.

Martina Morris said: "The aim of both launches was to inform staff across the Trust of the available guidance. In addition, any changes in



■ Martina Morris explaining the nebuliser cleaning process to a staff member of the Operating Theatre Department.

practice that have been introduced with the introduction of these guidelines were highlighted and discussed.

"Staff were also afforded the opportunity to ask any questions and raise concerns. Leaflets with up to date information, and other educational aids were available for staff to take away.

"Both launches proved to be successful with the representation from most clinical areas across the Trust. All three guidelines are now available for staff to access on the Trust intranet."



■ Maria Rogers explains the new guidelines for the care of patients with a tracheostomy.



■ Edith Buglass discussing the implications of the new Oral Hygiene Guidelines.

Immunisation programme helping to prevent illness

The Government's national immunisation programme has prevented well over 3,000 cases of death or serious illness and has ensured that young people are not at risk from Meningitis, according to a new report.

The Director of Immunisation's report reveals that, for the first time, there were no deaths in the under 19's from MenC (Meningococcal C/ meningitis) last year. Previously MenC has killed up to 78 people a year and left serious complications such as brain damage and amputations in survivors. The report underlines the importance of the Government's focus on preventing ill health and proves that immunisation prevents more serious illness and much bigger costs in years to come.

The report also states that:

- A recent survey (November 2007) found that 73 per cent of parents feel the MMR vaccine is safe, compared to 63 per cent in 2003;
- Since its introduction in 2006, the pneumococcal conjugate vaccine (PCV) has prevented an estimated 470 cases of serious illness or deaths in young children (such as meningitis, septicaemia and severe pneumonia);

■ Cases of MenC in children have reduced by 95 per cent since the introduction of the meningococcal C conjugate vaccine in 1999 - and over 500 deaths have been prevented;

■ Just over 85 per cent of children now receive one dose of MMR vaccine by their second birthday; and

■ 74 per cent of people aged 65 and over in England received their flu vaccine in 2006/07. There were no delays with the vaccine supply this year.

Professor David Salisbury said: "This report highlights some of the recent successes and new challenges for our immunisation programme. It is published during the World Health Organization European Immunisation Week as our work links in with the international efforts to protect our children from vaccine preventable diseases. However, it is imperative that we continue to do all we can to encourage take up of vaccines - particularly MMR.

"The evidence on MMR is clear. Population studies and studies in individual children show no link between the vaccine and autism. We need to put that scare behind us and make sure our children are as well protected as possible".

Dawn Primarolo, Public Health Minister said: "This report underlines the need for vaccination and proves that our programme is helping to halt diseases in their tracks. It is proof that the UK has one of the most successful immunisation programmes in the world, thanks to the hard work of NHS staff.

"The childhood immunisation programme continues to be a cornerstone of public health protection in this country. Parents can be confident that making sure their children have their routine jabs is the best way to protect them."

A fact sheet, also published today, which sets out the picture since immunisation was introduced in the 1950's shows that:

- Today there are NO cases of paralysis from polio – 8,000 people a year were previously paralysed by the disease;
 - There are NO cases of diphtheria today – this previously killed 3,000 people a year
 - Since the year 2000 the MenC vaccine has prevented over 500 deaths
- **Parents and health professionals can access further information about vaccines from www.immunisation.nhs.uk**

Groups offer help

Patients, families and staff can turn to support from a range of support groups at the Trust.

■ ABC – After Breast Care

Held on the 2nd Wednesday of every month (except August) 7pm-9pm in the Cancer Centre – QEH.

■ Arthritis Care

A support group for people with arthritis www.arthritiscare.org.uk
Telephone Ruth Grant 0121-475-2959 or Doris Spiers 0121-382-6143

■ Breast Clinical Nurse Specialists

0121 627 2203

■ Birmingham Arthritis resource Centre

The resource centre is located at Birmingham Central Library, Chamberlain Square, Central Birmingham 0121 464 2708

■ Breathe Easy

This group meets on the fourth Wednesday of the month from 2.00-4.00pm in the lecture theatre at Moseley Hall Hospital 0121 627 2089

■ British Sjogren's Syndrome Association

Support group for sufferers of the auto-immune rheumatic disease
0121 455 6549

■ Busy B's

Support group for people with stomas and bowel disease
0121 627 8945

■ Cystitis & Overactive Bladder Foundation

A national group which runs local groups
01908 569 169

■ Get-a-head

Fundraising and support group for patients who have had head and neck cancer
Justine Baldwin 0121 697 8371 www.getahead.org.uk

■ Grown-up Congenital Heart Patients' Association

Supports young people and adults born with a heart condition
0800 854 759

■ Head and Neck patients support group

Meets Bi-monthly at the Morris Centre Club QEH
Contact Des McGuire Head and Neck Counsellor 0121 472 1311 Ext: 3221
www.getahead.org.uk

■ Headstart Birmingham

Aneurysm and Arteriovenous Malformation Support Group
Meetings are held on the first Friday of the month between 7pm and 9pm
Neurosciences Meeting room, at end of main corridor at top of the ramp
Contact: Patricia Hewlett – 0121 459 7147

■ Heart to Heart

The Cardiac patient group meets in the QE Board room on the 1st and 3rd Tuesday of every month
0121 472 1311 Ext: 3977

■ Kidney Patients' Association

Runs local groups across the West Midlands
01922 644982 flintnf@aol.com www.kidneymatters.co.uk

■ Laryngectomy support group

Meets monthly at British Legion social club, Quarry Lane, Northfield.
A patient led group. Organised speakers at each session
0121 627 2360/0121 627 2248

■ Let's Face It

Support group for people with any form of facial disfigurement
01843 833 724

■ Military patients

Military patients will be visited by a representative from the Royal Centre for Defence Medicine (RCDM) who will attend to their administrative, welfare, pastoral and spiritual needs.

■ Pituitary Foundation

This group meets at the QE hospital
0121 697 8446

■ QE Liver Transplant support group

The group meets at 7.30pm on the 3rd Monday of every month (except July and August) in the Seminar Room, QE Hospital
0121 627 2089/01788 814 906 (after 7.30pm)

■ Roy Castle Lung Cancer Support Group

Held 1st Tuesday of every month, Birmingham Heartlands Hospital
0121 424 1433 Contact: Barbara Leung

■ The National Osteoporosis Society

The National Osteoporosis Society runs a local support group based in Birmingham
0121 429 7366 www.nos.org.uk www.freetocharities.org.uk/wmbnos

■ Tracheotomy Support

New group for patients following tracheotomy
0121 627 2248

■ Vasculitis Support Group West Midlands (VSGWM)

Support group for sufferers of Systemic Vasculitis (e.g. Wegener's granulomatosis) as well as support for carers. The VSGWM circulates useful information and ideas, with friendly meetings held at least once a year
0121 243 5621

■ West Midlands Lupus Group

A support group for people with Systemic Lupus Erythematosus (Lupus)
01902 498 236 www.westmidlandslupus.co.uk

Medical history in the making at UHB Trust

New surgical technique for bladder cancer will revolutionise treatment

An operation that promises to revolutionise the surgical treatment of bladder cancer has been carried out for the first time in the Midlands at the Queen Elizabeth Hospital.

Consultant Urological Surgeon Alan Doherty removed a bladder using keyhole surgery – and said doing the procedure was the surgical equivalent of getting off his bike and driving a car.

He carried out the technique, called a laparoscopic cystectomy, to treat John Busk, 74, from Northfield, in Birmingham, who had bladder cancer.

Mr Doherty said: "Given that it was the first time we had used this technique, it went extremely well. In fact, it went more smoothly than I thought it might. Operating on the bladder laparoscopically will definitely be the first option for our patients from now on."

The new keyhole operation had only been done in a handful of other hospitals in the country, until now. Previously, the only surgical option for patients with bladder cancer was a major operation which required the opening up of the lower body.

Mr Doherty said: "It is the biggest urological procedure we do and the riskiest, carrying the same mortality rate as open heart surgery. Because of the nature of the operation it carries high risks of infection. The patient usually requires a spell in intensive care after the operation and spends up to



Bladder cancer patient John Busk thanks Consultant Urological Surgeon Alan Doherty.

three weeks in hospital recovering.

"But doing the same procedure laparoscopically is very different. We only make four small cuts so the risk of infection is much lower. We don't expect patients to require intensive care and we expect patients to be able to go home after a week. I expect the outcomes from this technique, compared with traditional open surgery, will be much better.

"The difference is quite dramatic. I am really excited about what this means we can do for our patients. It's fantastic to be able to offer such a step change in improved care. It's the surgical equivalent of getting off your bike and driving away in a car, it's that much better."

Mr Doherty is one of the UK's most experienced urological keyhole surgeons. He has developed his expertise by carrying out more than 400 operations to remove prostates using the technique.

He said around 20 patients need to have their bladder removed at the Queen Elizabeth Hospital every year – and he expects two-thirds of them will benefit from the new keyhole technique.

Mr Busk, a retired bricklayer, previously had radiotherapy, chemotherapy and immune therapy. He took part in making medical history at the Queen Elizabeth Hospital quite calmly – and was particularly pleased to be able to go home less than a week after the operation.

He said: "I've never been special so this makes quite a change for me. I was told that my operation would be a little unconventional but Mr Doherty would revert to the traditional way of doing the operation if he needed to. I am glad it has gone well, so what has been done for me can now help other people as well. All you want as a patient is the best care."

TV chat show host fronts Dignity in Care campaign

Celebrated chat show host, Sir Michael Parkinson has become National Dignity Ambassador – part of the Government's drive to ensure that all older people using care and health services are treated with dignity and respect at all times.

The journalist's role will include taking part in a National Dignity Tour that will visit Birmingham in the autumn. The aim of the tour is to raise the profile of the Dignity in Care campaign, launched last year, and encourage more people to become Dignity Champions, spreading best practice and giving advice to other health and social care workers.

Through the campaign, the Government wants to inspire and equip people – service users, carers, relatives or care staff – with the information, advice and support they need to drive up care standards with respect to dignity for the individual.

Care services Minister Ivan Lewis said: "I want NHS and Social Care services to apply a simple test – if it wouldn't be good enough for my



Sir Michael Parkinson.

Mum and Dad why should it be good enough for someone else's?

"Our Dignity in Care campaign has struck a real chord with older people, their families and front line staff. Too often, they themselves describe experiences that are not acceptable.

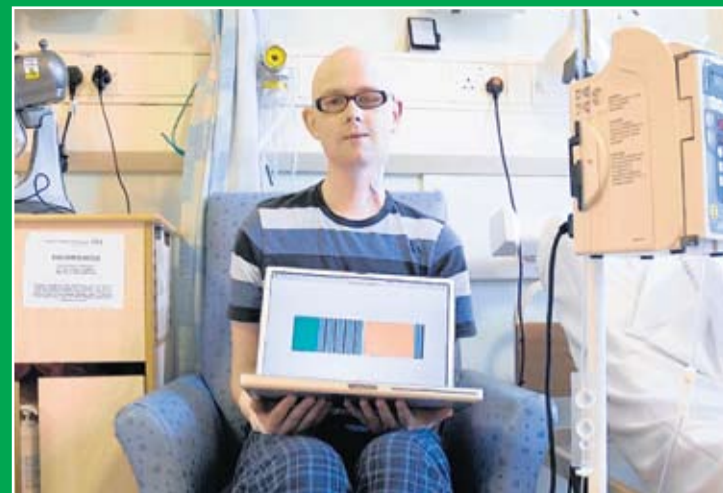
"We have made progress but this has to be a long-term partnership between government, managers, front-line staff, families and the wider community to ensure dignity and

respect are at the heart of care in NHS wards, care homes and home care services. In the same way as investing in the younger generation will determine the success of our country, our treatment of older people will determine its character."

The new Dignity Ambassador Sir Michael Parkinson said: "I have always had immense respect for the contribution older people have made to our country. Like many others I have experienced the care system in the past as the son of elderly parents.

"Dignity is about being treated as an individual with respect and compassion. I intend to use my role to make a real difference and ensure the issue of dignity moves to the heart of all NHS and care services."

To support the dignity campaign further, the Department of Health will be launching a revamped website this summer to support Dignity Champions. Full of new features, the website will enable champions to become more effective in sharing best practice and networking locally with each other.



Geoff Smallman visualises his cancer experience through multi-coloured art.

Living colour

Artwork that explores the experiences of patients who are being treated for cancers is being created. The Trust has been awarded this year's hospital artist's residency being funded by the Alexandra Reinhardt Trust in collaboration with Paintings in Hospitals. The residency is being led by artist Jeremy Hutchison, who has been selected from over 100 high quality applicants. Jeremy is planning a project to take place on the young people's unit in the Cancer Centre.

The ten-week project is called Colourcodes and will be a digital/web-based project giving the patients and staff on YPU the opportunity to engage in a project that explores the patients' experience of their cancer journey.

Jeremy said: "University Hospital Birmingham is full of personal stories of adversity, courage and victory. I propose to create a process whereby these experiences can be shared and honoured, where patients can translate their own stories into powerful, multi-

coloured visual symbols.

"Firstly I would create an interactive website. This would be an extremely user-friendly programme that would allow the user to click and drag colours of their choice onto a rectangular canvas. They could change the thickness of the colour bands and re-arrange them according to their personal taste. Next they would state a reason for each choice.

"The colourbands would build up over the residency, the site being accessible to patients and staff and could be collated together to form a Hero ribbon – an ever-evolving digital fabric full of intricate textures and colours."

Jessica Kent said: "The project will be very inspiring and colourful and we hope that the end result will be a vibrant symbol of collective creativity by the young people."

• Jeremy will be in the hospital on Tuesdays starting in late May. For more information on the project contact Jessica Kent, The Arts Manager on 07876 564280.

Monthly healthcare seminars

Each month UHB holds healthcare seminars which all members of the Foundation Trust are invited to attend. The seminars cover many different topics from healthcare issues such as diabetes, eye conditions and looking after your heart, MRSA & infection control, and rheumatology to information about new technology and developments in medical treatment. The monthly events feature an hour long presentation and a thirty minute question and answer session to enable members to air their views and ask our experts that all important question that they've always wanted to know the answer to.

The monthly sessions are also a great opportunity for our governors to meet people from our membership. Seminars are informal and feedback has shown that people welcome the chance to talk to staff, patient and public governors about their experiences and queries. Carol Rawlings, Associate Director of Patient Affairs, hosts the events, which are generally attended by around 60 people. If you would like to find out more, please contact Anne Waller:

Tel: 0121 627 1627, extension 51618 Email: anne.waller@uhb.nhs.uk

We're always delighted to see both new and familiar faces. Therefore, if you haven't been to a seminar before please do come along. Registration couldn't be easier; simply call Anne Waller on the above telephone number.

FORTHCOMING SEMINARS

All sessions will be from 10am to noon in the Lecture Theatre, Post Graduate Medical Centre, Queen Elizabeth Hospital.

Date	Seminar
Monday 23 June	All you needed to know about Choose & Book and what we're doing to get to know your GP
Tuesday 29 July	New hospital update
Tuesday 23 September	Trauma and A&E Team
Thursday 30 October	Facts on diabetes
Friday 28 November	What is HIV and Aids and how is it treated?
Monday 15 December	Dermatology – common skin conditions



■ John Morrison, Head of Medicines Management, Heart of Birmingham TPCT; Morag Inglis, Clinical Lead Speech and Language Therapist, UHB; Lucie Wright, Medical Secretary, UHB; Helena Pickin, Locality Prescribing Adviser, Heart of Birmingham TPCT; Sarah Perkins, GP; Jane Dunton, Speech and Language Therapist, UHB; Helen Tomes, OT; Maria Kidd, Ladywood Team Leader, Heart of Birmingham TPCT.

Is there a doctor in 'the house'?

● UHB staff make guest appearance in a different kind of theatre

Anyone attending Argosy Musical Theatre Companies production of Singin' in the Rain should have no worries about being taken ill during the production.

Nine of the cast are currently working for the NHS, including three from UHB; Speech and Language Therapists Morag Inglis and Jane Dunton, and Medical Secretary Lucie Wright.

"We've always had a couple of NHS employees but there seems to have been an influx over the last couple of years," said committee member and Heart of Birmingham TPCT Head of Medicines Management John Morrison. "We now have a fair collection of disciplines on stage; a GP, a health visitor, two pharmacists, three speech and language therapists, an OT and a medical secretary."

Adapted from the classic 1952 movie of the same name, the plot

closely adheres to the original. Set in Hollywood in the waning days of the silent screen era, it focuses on romantic lead Don Lockwood, his sidekick Cosmo Brown, aspiring actress Kathy Selden, and Lockwood's leading



We now have a fair collection of disciplines on stage; a GP, a health visitor, two pharmacists, three speech and language therapists, an OT and a medical secretary

– John Morrison, Heart of Birmingham

lady Lina Lamont, whose less-than-dulcet vocal tones make her an unlikely candidate for stardom in talking pictures (strangely enough the lady with the awful voice is being played by UHB Speech and Language Therapist Jane Dunton; a case of do as I say, not as I do).

Full of great numbers, such as "Good Morning", "Make 'em laugh" and "Broadway Melody", as well as the famous title song, the show is full of lively dance and some fantastic comic moments.

The show runs from Tuesday 17th to Saturday 21st June at the Crescent Theatre, Brindley Place, Birmingham.

Why not go along and support your colleagues? You never know maybe you'll catch the bug too and AMTC's NHS numbers will hit double figures next year.

• To purchase tickets visit the website www.crescent-theatre.co.uk



■ Mark Gallagher, Clinical Specialist in Podiatry, SOH; Alistair Nicol, Consultant in Sports and Exercise; Emma Batchelor Clinical Specialist in Physiotherapy, SOH; Emma Williams Senior Dietician, SOH; Gabrielle Smith, Senior Occupational Therapy, SOH; Clare Travis, Clinical Specialist in Occupational Therapy, SOH

Experts from the Trust played a key role in the 9th International Trauma Conference coordinated by Consultant Keith Porter. The Trust team from a wide range of specialisms, provided expert opinion for panel discussion in a multidisciplinary forum addressing the rehabilitation and recovery for victims of major trauma. Emma Batchelor, Physiotherapy – Clinical Specialist in Sports and Musculoskeletal said: "This trust has a vast experience by virtue of its civilian and military patients and can be regarded as a national leader in this respect."



A dedicated nurse has retired after nearly 40 years service. Noreen Baxter was a permanent night staff and retired as an E grade nurse in ward S7. Baskaran Subramaniam, Charge Nurse on S7 that offers elderly care, said: "Noreen is always cheerful and enjoyed her nursing career in our ward."

"All the staff in ward S7 really miss a great character. Whenever nurses worked with Noreen they felt less stressful and enjoyed working with her. We would like to wish her lots of luck and best wishes from the team on S7."

Staff suggestions help to make a difference

A steady stream of suggestions coming through to the Make It Count email address and the Make It Count telephone number are helping to make a difference to the Trust. More than 150 suggestions have been made in the year since the creation of the staff suggestion email address and telephone contact.

Here are just a few examples of suggestions what they are and what has happened with them. One of the most recent ideas was for bikes to be included in the salary sacrifice scheme that the Trust runs. We were able to go back to the individual that suggested this with a positive response, as the



Trust is already putting this in place. A case of great minds think alike.

Over the last few months there have been quite a few infection control suggestions from staff on how we can improve hand washing facilities and identifying when staff are not washing their hands. A couple of ideas submitted have included

having bigger hand gel dispensers and improved placement of hand washing posters.

Shena added: "Some suggestions we have been able to act on and another suggestions we have not been able to implement for various reasons. These reasons can be due to cost, feasibility and at other times because the idea is not practical within the hospital setting."

We will continue to pursue your ideas and comments, so please keep them coming. Ideas can be emailed to makeitcount@uhb.nhs.uk or leave a message on 07879624429 and someone will get back to you.

Hike for Heart Foundation

The Hearts First Hike is a 14 mile trek of the Brecon Beacons on Saturday June 21st to raise money for the British Heart Foundation. Staff from IT Services, Liday Ratschkewycz and Amanda Turner will be taking part this year. If you would like to sponsor them and support the British Heart Foundation follow the link www.justgiving.com/lydiaratschkewycz

Send us your stories about staff retirements and achievements

The team at InsideOut welcomes news about staff's retirements, achievements and successes.

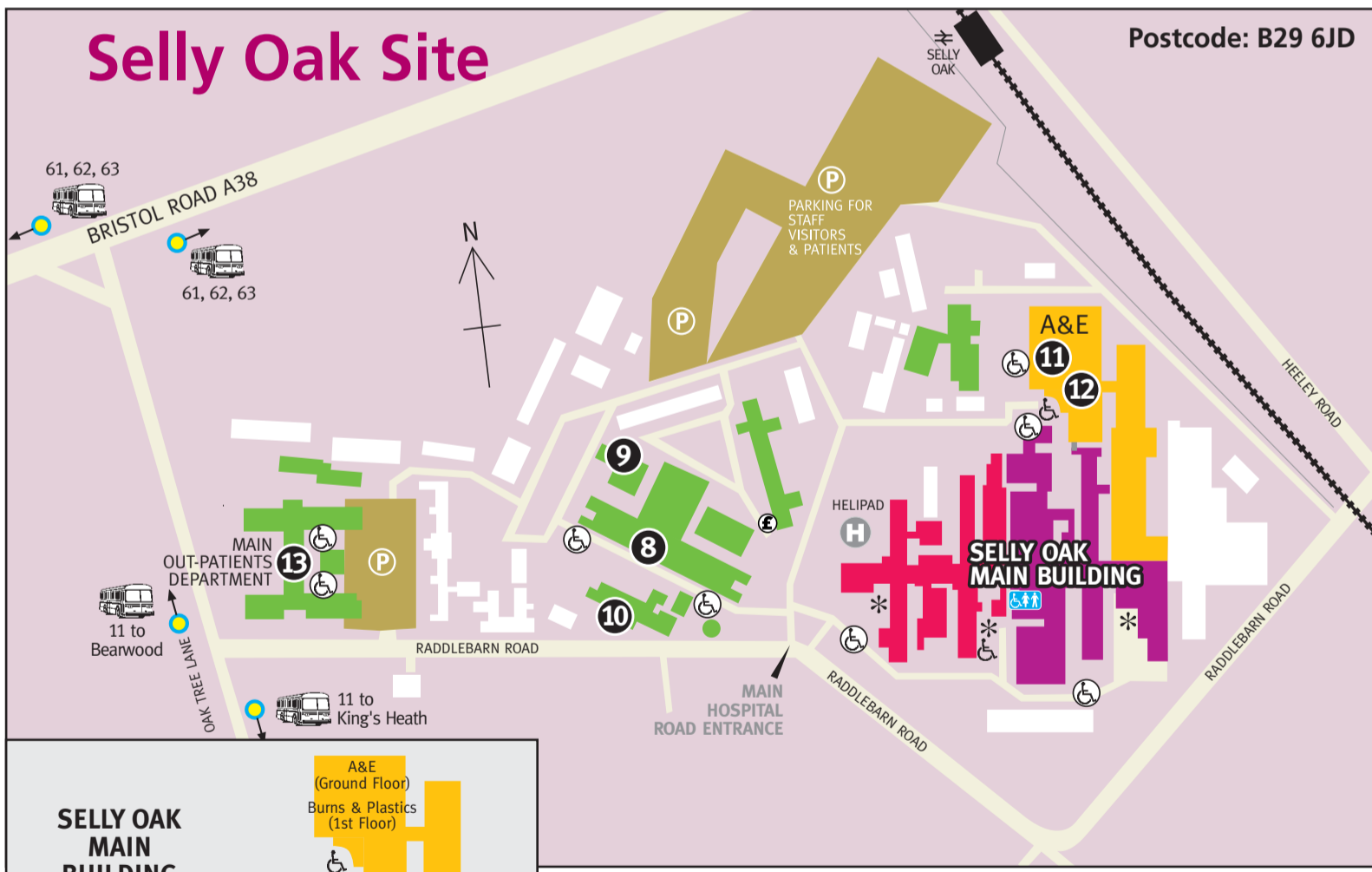
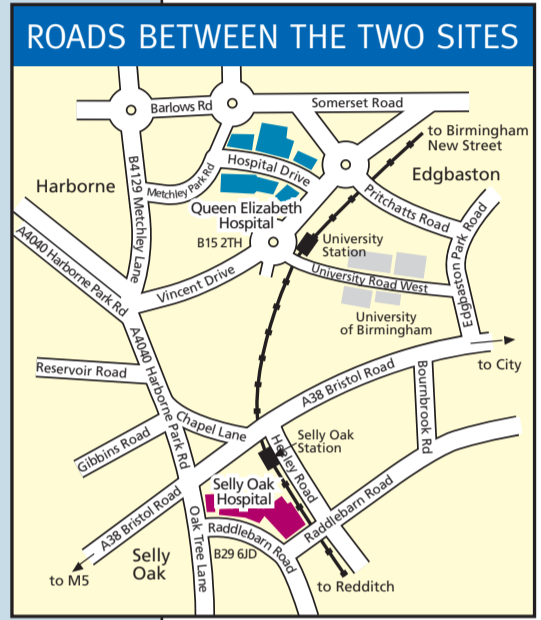
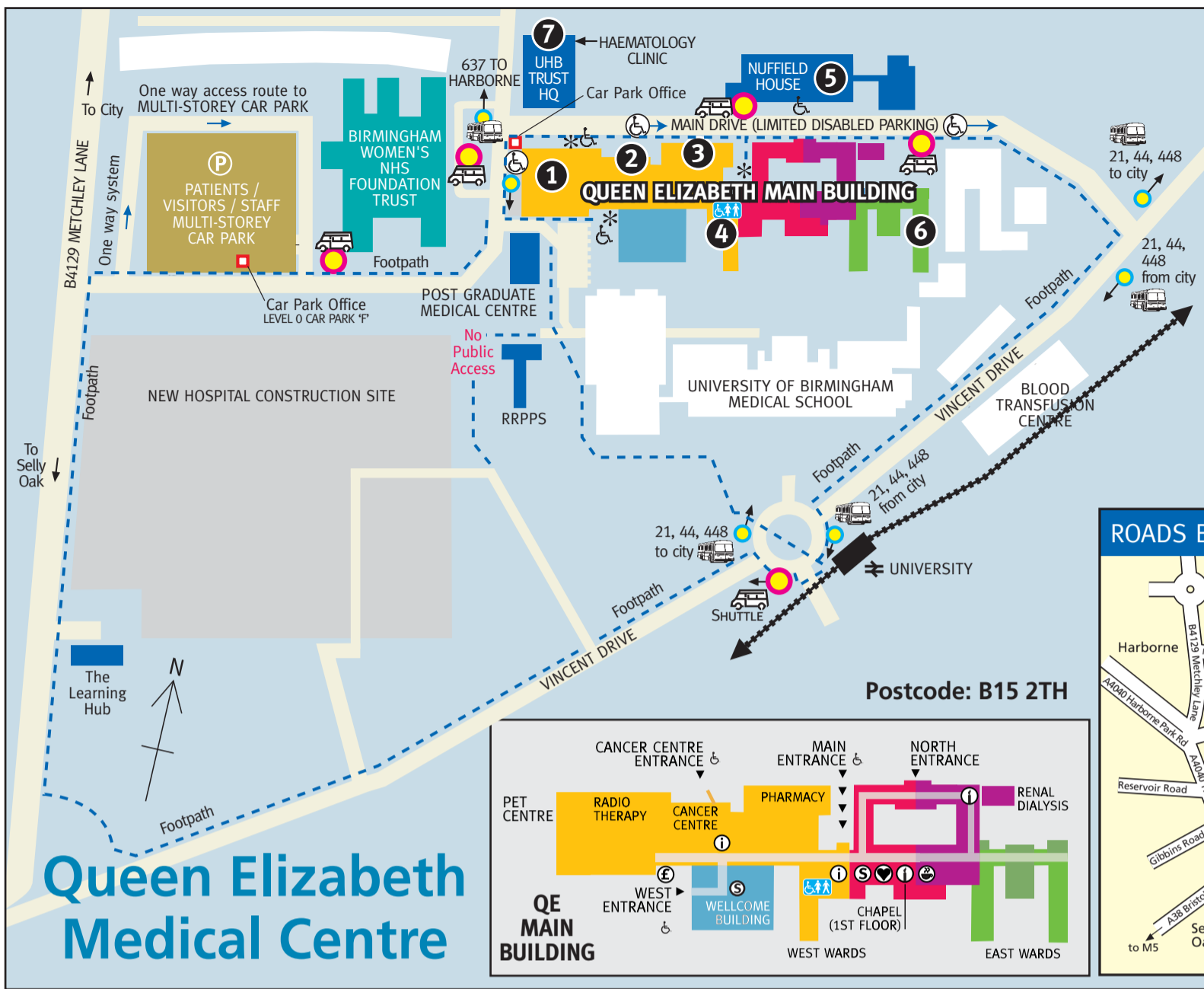
Information can be sent direct to the editor Annie Roberts at annr@dircon.co.uk

It helps if there are brief details about the staff member's career, their role and any leisure interests. A comment from a manager or other team member is always

welcome and it would be appreciated if permission can be obtained before submission.

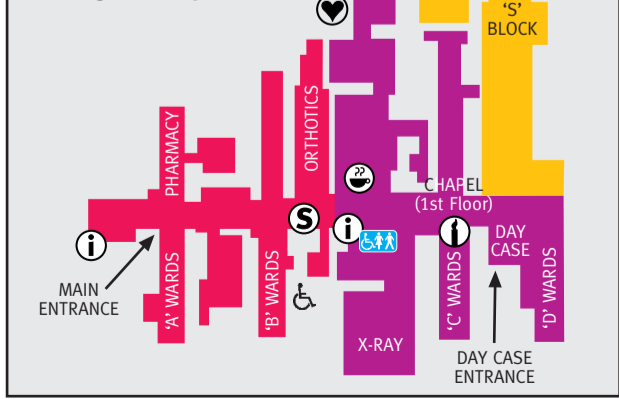
On occasions photographs can be organised but submitted photos are welcome – please send to the same email and don't forget to include the person's name in the subject box.

For further inquiries please send an email to Annie.



CAR PARKING CHARGES (For both sites)

0 - 1HR	£2.20
1 - 2HRS	£2.90
2 - 3HRS	£3.30
3 - 4HRS	£3.90
4 - 5HRS	£4.50
5 - 6HRS	£5.00
6 - 8 HRS	£5.60
OVER 8HRS	£11.20
DAILY TICKET	£5.60
WEEKLY PASS	£15.60



KEY

Green Zone	Bus Stop Centre / WM	Hospital Entrance	Toilets (incl. disabled)
Red Zone	Shuttle Bus Stop* (Pick-up and drop off 7am to 7pm Mon-Fri)	Disabled Entrance	Shops
Purple Zone		Disabled Parking	Cafes and Restaurants
Orange Zone		Parking	Bereavement Care
Other Zones		Information	Chaplaincy
			Railway Station

*The QE Shuttle Bus is a free service and is available from various locations around the QE site to transport patients and visitors to the main QE hospital, BWH hospital and QEP hospital buildings