

## matters: news

Welcome to the summer issue of the Trust's magazine. This edition of Matters focuses on how staff at Addenbrooke's and the Rosie continue to provide high quality and safe care for our community, against a backdrop of financial challenges for the NHS.

On the opposite page you'll find an inspiring story about sterile services, one of the teams working behind the scenes to provide clean, safe hospital equipment. I know our hospitals couldn't continue to function without them, and I thank them for all their hard work and commitment.

We continue to improve our infection control performance year-on-year, but remain vigilant about stopping the spread of serious infections such as MRSA and *C. difficile* – read the story below to find out how you can help.

Our combined strengths in specialist care, teaching and research mean we can translate work from the laboratory back to improved treatments for our patients. That's why innovations such as JCIS (on page five) are so important – the better the information our clinicians can receive, the quicker and safer the diagnosis.

All our staff are committed to providing kind, safe and excellent care, and this is borne out in our patient satisfaction surveys. In the last quarter 94.3% of patients told us that we

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met or exceeded their expectations. One area – the dialysis unit at Hinchingbrooke which is run by Addenbrooke's – recently came second in the UK for patient satisfaction; you can read about this outstanding achievement on page four.

Dr Gareth J Goodier Chief Executive

### **Getting tough on infections**

Tackling infections is a key priority for CUH and our goal is that not a single preventable infection is allowed to develop. We continue to beat tough infection control targets, agreed with NHS Cambridgeshire.

Last year, there were six cases of hospital-acquired MRSA bloodstream infections. This represented 0.02 MRSA bacteraemias per 1,000 bed days, in comparison with 0.06 in 2009/10. Our target for this year is no more than seven. To the end of June, we have had one case of hospital-acquired MRSA.

In terms of Clostridium difficile, last year we achieved a 27% reduction in hospital-acquired cases – from 126 in 2009/10 to 92 in 2010/11. This year's target is no more than 85. So far this year we have had nine.

Lisa Knight, deputy chief nurse, said: "This is great news for patients, but it also highlights the hard work of all staff. We have a zero-tolerance approach to infections, supported by our cleaning, hygiene and handwashing practices.

"Visitors can also help by cleaning their hands, not visiting in large groups, and not sitting on patient beds."

# News in brief



### HRH visits Botswana project

On 4 July Addenbrooke's Abroad was delighted to welcome HRH Princess Anne on a tour of Princess Marina Hospital in Botswana. Since 2007 the project has established active partnerships between CUH and several departments at the hospital in Gabarone.



### Top post for CUH surgeon

Charles Malata, a reconstructive plastic surgeon at the Cambridge Breast Unit since 1999, has been elected president of the European Society for Surgical Research. Mr Malata has been a member of the ESSR since 1996 and has served on the board since 2006.



#### Rosie nurse retires

Connie Taylor has left the Trust after 42 years at the Rosie. Starting in the neonatal unit in 1969, she later joined the special care baby unit. Dr Wilf Kelsall said: "Connie has been fantastic at helping women to breastfeed and in transitional care. Her departure is a great loss."



### Innovation prize

A system that monitors a patient's breathing without any contact with their body has triumphed at the Medical Futures Innovation Awards. The PneumaScan was developed by Dr Richard Iles, a consultant respiratory paediatrician at CUH, along with Cambridge University and local firm PneumaCare.



### **BAFTA for NCCU documentary**

Between Life and Death won the BAFTA for best single documentary in May. It followed three patients under the care of Professor David Menon (left) in the NCCU, including 43-year-old Richard Rudd. He later began to show voluntary eye movement and was able to answer 'yes' or 'no' to questions.



### Rosie hospital extension

Excellent progress is being made on the construction of the three-storey extension to the front of the Rosie hospital. Work is due to be completed next summer but until then patients and visitors should continue to access the Rosie via the Addenbrooke's Treatment Centre.



# matters: focus on

# The clean team

Our sterile services team plays a vital role in keeping the Trust running while making sure every patient is treated with instruments that are safe to use

Described as "the department that never sleeps", the unit works around the clock to supply the Trust, along with external clients such as GP surgeries and neighbouring hospitals, with sterile equipment for use in operating theatres and clinics. Demand for the service is high, with the team cleaning around 24,000 instrument sets or packs every month.

Safety is the department's number one priority and at the heart of everything it does. The environment meets the same high infection control standards as operating theatres, and there are a range of measures in place

to make sure that the sterilisation process has been a success. These include an automatic control system that triggers an alarm if anything goes wrong, and chemical indicator strips that verify when the correct temperature for sterilisation has been reached.

All of the machinery used during the process is tested daily to ensure it is working to the required standard and an electronic record system allows each item to be tracked during the whole process.

"It is our responsibility to provide the Trust and local GP surgeries with a constant supply of medical devices which have

been sterilised to the highest standard and are safe to use." said Michael Binns, the department's quality and training manager.

to ensure that we continue to meet the huge demand for our services. Because of this. we're often described as the department which never sleeps.

"It is incredibly important that the service we provide is reliable, consistent and effective, which is why we have so many safeguards in place to ensure that every item has been sterilised successfully.

patients that the equipment we use meets the very highest safety standards.

"The sterile services team takes great pride in our work and are an essential part of the healthcare system. Without us, the hospital and many other local health services simply wouldn't be able to function."



You made a difference

Each month, two employees are recognised for having made a difference. You can nominate someone on our website www.cuh.org.uk, on the staff intranet Connect or by filling in the form by the comment boxes around the Trust. Recent winners include:

Corinne Parmenter, a staff nurse on ward A4, who was nominated by a relative: "When

I phoned Addenbrooke's, Corinne spoke to me so gently and carefully... she was alert, calm and respectful. I would have felt safe in her hands if I were the patient."

Rachel Lumiss, a porter in the Vascular Access Unit, whose manager said: "Rachel is always kind to patients. She helps set up the unit for the day and makes drinks for patients... Nothing is ever too much trouble."

Gianluca Strippoli, another porter. He was nominated by a patient's mother who said: "Luca took time to show us where to buy TV credit and looked for magazines. Thank you, Luca."

Diane Anstee, who is now chief technician. Dr Andrew Michell said: "Diane maintains an extremely upbeat temperament despite at times coping with great pressure."

**Sonia Grant.** an operational matron A staff nurse said: "She took control of the winter contingency ward in a difficult period for us all... but was always approachable, supportive and unflappable."

Samantha Wilson, a midwife. A colleague nominated her: "Sam was not only professional, caring and a tremendous support to the patient; she also found time to give me hugs and dry my tears."

**Linda Warner**, a nurse in neurosciences, was nominated by a student for her "outstanding role as a mentor... She has shown great dedication to students by always going that extra mile."



## **Patients** praise dialysis unit

An Addenbrooke's dialysis unit based at Hinchingbrooke is celebrating after coming second in a national patient satisfaction survey.

Conducted last September by Fresenius Medical Care, which supplies the satellite unit's equipment, IT and training, the survey asked patients what they thought about the doctors, nurses, discussions about dialysis, environment and transport.

The survey found patients had complete confidence in the nurses; the medical team led by Dr Sanjay Ojha also scored 100%.

The unit, which opened in April 2008, is one of around 60 operated by Fresenius in the UK. It runs 7:00-19:00 Monday to Saturday and sees around 16 patients at once. The Trust also has satellite units in King's Lynn and Bury St Edmunds.

Susan Bell, a senior sister, said: "I don't think we would have got as far without the support of the other two units. We operate independently but I know if we ever have a problem I can pick up the phone and speak to Addenbrooke's staff and the other sisters. Whether I'm looking for advice or it's an emergency any of the staff will look after us. Since I told my team they haven't stopped grinning!"

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## Be a part of the Rosie Hospital Campaign

ACT, the charity for patients at Addenbrooke's and the Rosie, is calling on the local community to help make a difference.

ACT launched its Rosie Hospital campaign in January to support an extension that will see our hospital for maternity, women's and neonatal services double in size to help meet the needs of our expanding population. So far ACT has raised £3.6m of its £7m target towards the cost of the

build. We're very grateful to local business, individuals and members of the community for getting behind this very special campaign.

There are many ways to be a part of it – our fabulous supporters have run ultra-marathons, held tea parties and 33 of our staff tackled the Three Peaks Challenge!

Karen Hayes, dietitian at the Rosie, said: "Since the Campaign was launched so many people have been raising funds to help

us increase the size of the Rosie, and treat more mothers, babies and their families across the region."

Why not be a part of it and join this year's Chariots of Fire race? Find out more at www.chariots-of-fire.co.uk, visit www.therosiecampaign.org.uk or contact: ACT, Box 126 Addenbrooke's Hospital, Hills Road, Cambridge CB2 0QQ 01223 217757

Registered charity number: 1048868



Fundraisers for the Rosie line up for Chariots of Fire

### 'We're focused on reducing patient falls'

For some patients, their illness, condition and treatment can make them unsteady on their feet and vulnerable to falling.

If a patient does fall, it can delay their discharge and affect their confidence and mobility when they do go home. So one of the Trust's priorities has been to prevent falls by inpatients.

The hospital has developed new procedures to care for patients who have fallen, which will be launched in

the autumn. For example, a full body assessment will be performed while the patient is still on the floor, so that any spinal injuries are treated appropriately.

Debra Quartermaine, the falls prevention coordinator, says: "The new protocols follow on from guidance issued by the National Patient Safety Agency. These ensure all patients receive the same standard of care. The positive aspect is that we have the support of doctors and the Moving and Handling team too."

The Trust saw a rise in falls in April: 140 compared with 115 last year. This may have been due to the unusually warm weather; dehydration is a contributing factor in falls. May saw better results, with 113 falls reported compared to 104 in May 2010. "The Trust is focused on continuously reducing the number of falls by patients," says Debbie, "and we have committed to a 10% reduction in all falls as a target for the year. There is still much work to do."

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# Smart solution improves waiting times



The Trust's joint clinical information system is transforming the way we care for our patients

The system (JCIS) was developed in-house with the West Anglia Cancer Network and University of Cambridge to manage the treatment and diagnosis of cancer patients. At the click of a mouse, clinicians can call up a patient's entire case history. It is fast, secure and, most importantly, has improved the waiting times between diagnosis and treatment.

Dr Hugo Ford, divisional director for cancer, says: "We use it to run our multidisciplinary team meetings, where everyone involved in a patient's care and treatment comes together. When we call up each patient on JCIS, we can immediately see all their results and then decide how to proceed. The results of these

discussions can be viewed by clinicians anywhere in the Trust or other network hospitals, so there is no risk of paper going astray.

"More importantly, we have been able to collect information on more than 350,000 patients, so that we can demonstrate the quality of the treatments we provide for national performance audits. In the future, patients and their doctors may be able to use this sort of information to decide where and how they wish to be treated."

The Cambridge Breast Unit, for example, is accurately identifying 99.6% of cancers, in part because of JCIS. Peter Britton, consultant radiologist, says: "We rely on it for absolutely everything, from booking clinics to clinical information and

radiology reporting." He says the system caused a stir when he demonstrated it at the national radiologists' conference in June. "No other hospital has anything as developed as this... the crucial thing is that, through single

### 'From a research point of view it's a gold mine for extracting data'

sign-on, the programs are glued together – if you call up one patient you can flip into our other electronic systems for images, correspondence and test results, without having to log in each time."

The system was commissioned in 2002 from Brighton-based firm Dataline and funded by Cancer Research UK and the government's biomedical research centre. "We have a very accurate data set with more than 4,000 breast cancer patients on there, showing survival rates over five and 10 years," says Dr Britton.

"From a research point of view it's a gold mine for extracting information that's accessible, so that we know how effective and safe our practice and performance is."

The system is catching on in other areas, too, such as rheumatology and palliative care. All of this means quicker, safer diagnosis, more data for researchers and better outcomes for all our patients.

### Ladies-only dances raise £13,000 for cancer

A chance encounter in the school playground has spurred one Sawston woman to raise more than £13,000 for breast cancer research.

When Angela Finlayson started treatment for breast cancer at Addenbrooke's in 2006 she told another mother at her daughter's school. Naomi Froment decided to start fundraising – and the Glitz and Glamour dinner dances were born. She says: "There was a group of us who did the Race for Life, but I hate running! I decided to do a ladies-only evening of fun, so booked the venue, and thought if I get 50 mums that will be great. I sold over 200 tickets, and every year it's got bigger."

"It's a chance to come out and really dress up. The DJ told me it's the only event where the women dance to the very end – perhaps because they don't have to worry about their partner. This year we had 300 tickets and the whole lot sold out in two weeks."

Naomi approached members of the Abington cricket team to be shirtless waiters for the night: "They love it – can you imagine 20 men with 300 women?"

The balls are held in Cambridge each May and have raised £13,000 for breast cancer research. Naomi swears that every dance will be her last. "It's hard work to organise, but when I came into the Breast Unit and saw what those ladies

go through, I thought, 'This could happen to anyone.'"

Angela Finlayson says of Naomi's fundraising: "She wanted to do something to help out and she's been fantastic. I have treatment at the hospital every three weeks and every time I think of the people who have paid for it by going to the dances."

If you wish to raise money for a particular department in the hospital

From left: Angela Finlayson, consultant Luke Hughes-Davies, nurse Carol McQuade and Naomi Froment or specific research, we would be delighted to provide advice. Please contact ACT on 01223 217757 or act@addenbrookes.nhs.uk



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# A hands-on healthcare experience

How the Trust is helping young people to discover what it's like to work in the NHS

# Applications are now open for the Trust's popular work opportunity schemes.

More than 250 placements are available for students in Year 10 and above in health care science; caring in the NHS; nursing and midwifery; access to medicine (Year 12 only); as well as non-clinical roles.

Ben Scratcher, who runs the project, says: "The placements can help students answer the question, 'Is a career in the NHS for me?' It can firm up their decision and help them get experience."

The opportunities range from one-day placements to two-week programmes.

"These programmes are absolutely worth doing," says Bellerbys College student Maria Rozhko, who completed the medical work experience programme. "They provide you with new knowledge and an unforgettable experience. It gives you a rare chance to shadow the professionals at work in the Trust." Carol Abraham, from the City of Ely Community College, says: "This experience has driven me to pursue medicine and not to give up!"

To apply, see the Work
Experience section
on www.cuh.org.
uk. Placements
must be
signed off by
a teacher
at the
student's
school.

A CRC student with Emma Broughall and Jamie Bossard at the society and healthcare diploma day



From left: specialist nurse Claire Pesterfield helps to answer the out of hours support line. She is pictured with Dr Nadeem Abdullah and network co-ordinator Kate Wilson

# Support when children really need it

A pilot service for paediatric diabetes patients led by an Addenbrooke's consultant has been hailed a success

### The 16-week scheme involved the Trust and four other hospitals delivering out of hours specialist telephone support for young people with type 1 diabetes.

A team of paediatric diabetes clinicians provided advice to improve patient experience and ensure families get the support they need without having to come to hospital.

Some comments from families included: "It is essential, especially for newly diagnosed patients"; "Keep it going, very helpful"; and "I hope this service continues, it's very helpful".

This service was a result of work by the East of England paediatric diabetes network,

of which the Trust is a member. The network consists of the 17 units across the region and aims to help them work together and provide consistent care.

There are around 2,800 children or young people with diabetes in the East of England; CUH sees around 284 patients. During the pilot 193 calls were received and 63 hospital attendances were avoided.

Dr Nadeem Abdullah, who led the project, said: "The project was very successful and saw huge national interest. We would be planning to set up this permanently across the whole of East Anglia. It really is a wonderful example of working together and sharing resources."

## Trust takes action on pressure sores

One of the Trust's priorities this year is reducing avoidable pressure ulcers. Many patients are at a greater risk of developing them while in hospital, due to lack of mobility and their condition.

Lisa Knight, deputy chief nurse, said: "Pressure sores can cause great discomfort for patients, and there's lots of evidence to show

that when they occur patients also take longer to recover. They can seriously affect quality of life, so we are taking measures to prevent them where possible."

These measures have included:

- A specialist nurse has been chosen on every ward to attend regular tissue viability training, provide advice to colleagues
- and ensure all the necessary procedures to prevent pressure ulcers are followed.
- A tissue viability nurse has been hired specifically to prevent ulcers and manage pressure-relieving equipment.
- All serious (grade 3 or 4) pressure ulcers are analysed to understand why they have

happened, and individual ward action plans are written to prevent them from recurring. This year, the Trust has started monthly reporting of all hospital-acquired pressure ulcers by grade, which will enable us to chart progress on our target – providing kind, safe and excellent care for our patients.

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# Major trauma transformed



Addenbrooke's has been designated the region's Major Trauma Centre, and will provide world-class emergency care to the most severely injured patients from across the east of England.

In this area of the country alone, up to 800 people every year receive major trauma injuries. Major trauma is the leading cause of death for people under the age of 40 in the UK.

Currently, these patients are taken to local emergency departments – but hospitals

### 'International research shows that patients get better outcomes if dedicated major trauma centres are available'

often see no more than one patient a week. That means that the skills and knowledge they need to treat the most serious injuries are not as well-developed as other types of emergency medicine.

Dr Robert Winter, chair of the East of England major trauma



The Secretary of State for Health meets the team (from left): Basil Matta, Richard Kendall, Andrew Lansley, Holly Sutherland and Rod MacKenzie

network, said: "Providing expert trauma care in every emergency department is incredibly difficult. In the East of England, major trauma cases account for only around 1% of all the work emergency departments do.

"There is a wealth of international research showing that more patients will get better outcomes if dedicated centres, with a wide range of specialties on one site, are available."

### **Complex treatment**

A series of reviews recommended that every NHS region in England should have a dedicated Major Trauma Centre – known as an MTC – in place by the end of this financial year.

Dr Gareth Goodier, chief executive of Cambridge University Hospitals, said: "The decision to establish Addenbrooke's as the region's Major Trauma Centre means that we can make sure that the most complex trauma patients get the best possible specialist treatment.

"The evidence shows that trauma patients are more likely to do well if they are looked after by a highly trained and specialised team. We already have those experts in major trauma – and we will be working in close partnership with the region's hospitals to look after the serious cases which will be transferred to Cambridge.

"Our emergency department will, of course, continue to provide the usual A&E service to every patient who needs it."

In addition, the MTC will work with other hospitals to share learning and expertise. The aim is to improve each hospital's ability to stabilise patients before they are transferred to the MTC, and to make it possible for patients to move back to a local hospital after initial treatment and receive the rest of their care closer to home.

# What does it mean for you?

The centre will support the existing work of the region's accident and emergency departments.

There will be no changes to accident and emergency provision at any of the region's acute hospitals – and the emergency department at Addenbrooke's will continue to treat other patients as usual.

The NHS continues to ask patients to 'Choose Well' when it comes to healthcare. Christine Macleod, medical director of NHS Cambridgeshire, said: "It's important that, when you have a minor accident or feel unwell, you don't automatically dial 999 or head off to A&E. Start off with a well-stocked medicine cabinet, and make use of services like NHS Direct (0845 4647 or www.nhsdirect.nhs.uk), your pharmacist, your GP, and local NHS walk-in centres or minor injury units when you need help with a minor illness or injury."



# PAILS

Patient Advice and Liaison Service

**PALS** is the service dedicated to the hospital's patients and their relatives and carers. PALS is there to provide help, advice, support and information and to listen to your concerns and suggestions about any aspect of care or hospital services.

### Drop in and see us...

The PALS office is located in the Information Centre close to the hospital's main reception. We are open 09:00 to 17:00 Monday to Friday and 13:00 to 16:00 on Saturday and Sunday.

#### Write to us at:

Patient Advice and Liaison Service Box 53, Addenbrooke's Hospital Hills Road, Cambridge, CB2 0QQ

**Call us at:** 01223 216756

### Email us at:

pals@addenbrookes.nhs.uk www.cuh.org.uk/pals

### Tell us what you think

Let us know what you think about this publication. We welcome your comments, suggestions, questions and observations.

### Write to:

PR & Communications, Box 53, Addenbrooke's Hospital, Hills Road, Cambridge, CB2 0QQ

Call us: 01223 274470

### Email us:

press@addenbrookes.nhs.uk

### Visit our website:

www.cuh.org.uk

If you would like to receive this publication in another format, please contact PR & Communications on Tel: 01223 274470.

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# **Busway** comes to hospital

The Guided Busway has officially opened – and is now giving patients, staff and visitors another way of getting to the hospitals.

The Huntingdon to Trumpington service runs from Monday to Saturday and provides a direct, traffic-free route between the Trumpington Park & Ride, the hospital campus and Cambridge railway station. There are several stops around the hospitals including the outpatients department and the Addenbrooke's Treatment Centre.

Dr Mary Archer, chairman of CUH, said: "We have always encouraged people to consider alternatives to driving to help ease congestion and reduce the pressure on parking spaces, and this new service is an excellent addition to our existing transport arrangements."

lan Bates, a Cambridgeshire County councillor (below, with



Dr Archer and his wife Doreen), said: "My wife has needed regular treatment at Addenbrooke's over the past few years and we are always

overwhelmed by the fantastic service we receive. However, getting Doreen to appointments when Cambridge traffic is at its peak is not a happy experience. With the Busway in full service it will be the best option for us in future and I'm sure many more people visiting the hospital will follow suit to take all the hassle out of their journeys."

For more information visit www.cambridgeshire.gov.uk/transport/around/thebusway/

# Midwives touch base

A reorganisation of community midwifery at the Rosie means improvements for everyone concerned –



midwives, pregnant women, and babies – with simpler communication, less travelling for patients and staff, and improved quality of care.

Eight new midwifery teams, each based in one of the county's Children's Centres, are now responsible for much smaller areas than the four larger teams which previously existed.

The old pager system for contacting midwives has been

replaced with a new messaging service – so appointments will no longer be interrupted by phone calls. Urgent enquiries will still go to straight to the Rosie.

Jan Butler, consultant midwife, said: "Mums should find that it's much easier to get in touch with their local team. The smaller areas will mean women and their babies have better continuity, with fewer midwives sharing responsibility for their care."

Morning meeting (from left): midwives Christine Calder, Siobhan Taylor and Lisa Borthwick discuss the day ahead

# Call for pregnant volunteers

If you are pregnant and your baby is due to arrive between November 2011 and early March 2012, you may be interested in taking part in a programme in which medical students learn from expectant mothers. Over the last eight years more than 1,000 women have helped students develop a wider understanding of the experience of pregnancy and childbirth by hearing directly from mothersto-be. (No physical examination is involved).

If you are interested in hearing more about this opportunity to contribute to the education of our future doctors please contact: Jean-Baptiste Fourcade Telephone 01223 769288 E-mail pregnancy@ medschl.cam.ac.uk