



# Birth centre's first delivery

# Welcome

## Hello and welcome to the second edition of The Pulse — our new Trust magazine.

We hope you enjoyed last month's edition and this month we are bringing you the latest news, features, information and advice from around the Trust.

The magazine is packed with stories about members of staff who have been going beyond the call of duty to care for patients.

Many have been working on valuable research studies as well as developing projects that will benefit everyone who uses our services.

The year ahead promises to be full of exciting new developments for staff and the Trust in general.

A new computer system — EMIS Web — is being introduced which will integrate community healthcare. It will ensure secure shared access to a patient's life-long electronic health record.

We also have a ground-breaking trial of a device designed to tackle heart failure. Our hospital teams have been working together to ensure the CardioFit trial is a success.

Such initiatives will ensure that patients receive the most up-to-date services and the highest levels of care.

If you have any suggestions for what you'd like to read about in The Pulse, please get in touch with our Communications team (see page 3).

Thank you all for your continued commitment — and have a good read!

**Gary Doherty, Chief Executive**

# In this issue

## Delight for long-term patient

Brave little Poppy Hughes-Wilson was able to open her Christmas presents in her own home for the first time — **page 9**



## New look for hospital

Ward 1 at Clifton Hospital has reopened after being refurbished and reorganised — **page 14**



## Waging war on Ebola

A research nurse has returned from Liberia in West Africa where he trialled an Ebola drug — **pages 16-17**



## Heart team trials device

A new device designed to tackle heart failure is being trialled at Blackpool Victoria Hospital — **pages 22-23**



## Put your finger on it...

Here's where you'll find our regular features. If you're reading this online you can click the sections and flip straight to the page.

Latest News.....	4-9
News in Pictures.....	10
Viewpoint.....	12
Patient Experience.....	18-19
Team in Focus.....	20-21
Information Governance.....	24
Lessons Learned.....	26-27
Health and Safety.....	28
Blue Skies Hospitals Fund.....	29
Away from the Trust.....	31
Staff Stories.....	32
Under the Spotlight.....	33
Staff Lottery.....	34



# What's your change story?

We're gearing up for this year's NHS Change day on March 11, 2015.

NHS Change Day is an opportunity to come together to make a change. Together each of our small actions will make a big difference in improving the care and wellbeing of those who use the NHS. What will your action be?

Last year hundreds of staff pledged to make small changes such as to smile more or to get patients more involved in

their own care. Over the next month staff will be encouraged to make their pledges, however small they may be.

To inspire people to pledge this year, change day organisers are looking back at stories of previous pledges. We'll be showing off some of our own around the Trust.

We want to know your change story to help inspire others. Over the next month we want to make comic strips depicting

change stories. So get in touch with Nathan Skelton in Communications (details below) to get involved.

Keep an eye on the intranet Change Day section for more inspirational stories and details on how to make a pledge or go to [www.changeday.nhs.uk](http://www.changeday.nhs.uk).

Here's Jenny's Story (view the full comic strip slideshow on the intranet).

Jenny wanted to make a change in the way she worked that would help more women get Skin-to-Skin contact if they wanted it.

Skin-to-Skin contact encourages bonding which, in turn, has been shown to promote better early development of the baby.

"I know," she thought, "I'll write it on the white board in theatres so everyone can see it."

Every day she would write "Skin-to-Skin?" on the noticeboard...

Jenny persisted with her promotion of Skin-to-Skin and became well known for it. She was even asked to give talks on it at conferences and became a social media sensation.

#skintostkin @jennythem

"I'm going to make this change stick" thought Jenny and she wrote the message on the actual wall instead!

This didn't go down well with the management. They gave Jenny what for and removed the writing immediately.

(NB the Trust will take disciplinary action against members of staff who damage Trust property).

There, permanently printed on the boards, was a check box for Skin-to-Skin.

Jenny was so happy. Now, every new mother will be offered the chance to have immediate Skin-to-Skin contact with her baby forming a stronger bond that will enable better early development.

Look at these Jenny.

Then, one day, the Delivery Suite took delivery of some new 'Sign in' boards for the theatres. With a special surprise for Jenny...

Jenny said: "My pledge was to promote Skin-to-Skin and now it's there, as plain as the writing on the wall!"

## Speak directly to your Comms team

For advice and assistance with communications, promotional activities, stories and photographs email:

[Communications@bfwh.nhs.uk](mailto:Communications@bfwh.nhs.uk)



**Derek Quinn,**  
Head of Communications  
01253 95 6941  
[Derek.Quinn@bfwh.nhs.uk](mailto:Derek.Quinn@bfwh.nhs.uk)



**Alison Bott,**  
Communications Officer  
01253 95 3059  
[Alison.Bott@bfwh.nhs.uk](mailto:Alison.Bott@bfwh.nhs.uk)



**Nathan Skelton,**  
Communications Support Officer  
01253 95 3538  
[Nathan.Skelton@bfwh.nhs.uk](mailto:Nathan.Skelton@bfwh.nhs.uk)



**Ingrid Kent,**  
Communications Support Officer  
01253 95 6875  
[Ingrid.Kent@bfwh.nhs.uk](mailto:Ingrid.Kent@bfwh.nhs.uk)

Follow the Trust...Twitter: @BlackpoolHosp Facebook: Facebook.com/BlackpoolHospitals YouTube: www.youtube/BFWHospitals

## Baby makes history

Weighing just 7lbs 14ozs, little Rory Jebson made history when he was born at Blackpool Victoria Hospital.

Rory was the first baby to be born at the hospital's Fylde Coast Birth Centre.

Delighted mum, Gemma Jebson, said they had yet to name the new-born, but said she and husband James were very pleased and privileged to be the first couple to have their baby at the unit.

She said: "It was an amazing experience, the staff were very good and it's a much better environment than a sterile ward to give birth. It really is like a home birth, but without the risks. I felt safe and secure the whole time"

James said the centre, run by Blackpool Teaching Hospitals NHS Foundation Trust, did absolutely everything to involve dads in the birth. "The space in the room is great and the staff involve dads from the off," James, from Lytham, added. "Dads can feel a bit surplus to requirements at the birth, but the midwives really motivate us and let us know how we can be involved."

The new birth centre will take over from the former Midwifery-Led unit and gives four en-suite rooms to improve the options available to women allowing obstetrically low-risk mums-to-be to have the benefits of a home birth within the safety of a hospital setting.

Team leader for the centre, Julie Scholes, said: "We are all very excited at the opening of this new unit. There were 300 births in the Midwifery-Led Unit in its first year and we expect that number to double with the opening of the new birth centre."

The new unit runs alongside the Trust's established delivery suite which is made up of 10 consultant-led rooms.

## Residents urged to act fast to help beat cancer

**Cancer specialists at Blackpool Victoria Hospital are urging people to be aware of signs of gastric cancer as part of a new campaign.**

The national 'Be Clear on Cancer' campaign has been organised by Cancer Research UK and is focusing on cancers of the oesophagus (or gullet).

Dr Peter Isaacs, a leading oesophago-gastric cancer consultant at Blackpool Teaching Hospitals NHS Foundation Trust, said anyone who has had heartburn for three weeks or more should contact their GP.

The campaign started on January 26 and will run until February 22.

There are around 12,600 new cases of oesophageal and gastric cancers every year in England.

Together they cause more than 10,000 deaths each year.

Prolonged heartburn can be a sign of cancer as can difficulties in swallowing and a feeling that the gullet is 'blocked'.

Dr Isaacs said anyone who has these symptoms should tell their doctor because early detection and treatment saves lives.

Dr Isaacs explained: "The main thing with cancer of the oesophagus is getting people to turn up early. The earlier they go to their GP the better.

"Most people with oesophago-gastric cancer have been sitting on it for a while. We are telling people who have symptoms of heartburn for more than three weeks to talk to their GP. Prolonged heartburn can be a sign of early stage oesophago-gastric cancer."

Signs of cancer of the stomach and cancer of the food pipe include heartburn most days for three weeks or more, indigestion most days for more than three weeks, losing weight for no reason and food feeling as if it is stuck in the throat. Signs also include trapped wind and burping a lot, feeling full very quickly, feeling or



Dr Peter Isaacs and Liz Darling, Cancer Nurse Specialist

being sick and stomach pains.

Dr Isaacs said it could be something else that needs treatment and if it is nothing serious patients generally feel much happier.

Dr Isaacs said: "We have increased our outpatient capacity in readiness for a possible influx of patients."

The Gastroenterology Department at the hospital has also increased its capacity for investigating possible cancers.

One of the main ways of detecting cancer is through endoscopy; a procedure where the inside of the oesophagus is examined by clinicians. An endoscope is a long flexible tube with a tiny camera and a light on the end of it. This simple procedure can be carried out quickly and easily by Dr Isaacs and his team.

Dr Isaacs, who lives in Lytham and has worked for the Trust since 1984, said: "These days we are

following up patients with

chronic heartburn and pre-cancerous oesophagus and are sometimes finding very early stage cancers which can be removed through the endoscope.

"We see about 90 patients per year with gullet and stomach cancer. About 15 of them will be suitable for surgery and another five for radiotherapy. Some patients have palliative treatments (aimed to relieve symptoms and slow the advance of the disease). If patients report symptoms early, we are confident that more people will be cured.

Liz Darling, Upper GI (gastro intestinal) Cancer Nurse Specialist, added: "I inform patients of their diagnosis and see them through their treatment. Being aware of a family history of cancer is very important. Lifestyle changes, such as stopping smoking, exercising, drinking less alcohol and losing weight, can also reduce the chances of developing cancer. For more information go to [www.cancerresearch.org.uk](http://www.cancerresearch.org.uk) or see [www.nhs.uk/ogcancer](http://www.nhs.uk/ogcancer).



# Patients give thumbs-up to new hospital Discharge Lounge

**Health bosses have opened a revamped area in Blackpool Victoria Hospital which is helping the organisation cope with winter pressures.**

The area, now known as Ward 3 and run by the hospital's Unscheduled Care team, has been refurbished to include a new Discharge Lounge and will eventually incorporate a Gynaecological Ward.

Keri Graham, Capital Developments Project Manager for Blackpool Teaching Hospitals NHS Foundation Trust, said: "Much of the work has been done to enable us to manage winter pressures.

"People who are ready to be discharged will be able to go home more quickly. We have brought the ward up-to-date and have made it fit for purpose.

"The rooms are all en-suite and have TVs. Everything has had an uplift. It will give patients a much more comfortable experience when they are waiting to go home."

Retired schoolteacher, Joan Putz from Lytham, was one of the first patients to experience the Discharge Lounge. Joan said: "This is a calm waiting area for the transition from hospital to



Joan Putz, a patient from Lytham, with Matron Andrew Heath in the new Discharge Lounge

provide excellent clinical care to patients. A recent external visit from Emergency Care Intensive Support team (ECIST) resulted in the recommendation of a discharge lounge to facilitate the early discharge of patients.

"The lounge will aim to increase the number of patients discharged home prior to lunchtime, therefore enabling a timely flow of patients through the Emergency Department.

"This should also result in a more timely medical review for these patients, thus improving the patient experience.

"Patients will be advised upon admittance to the hospital that at the end of their hospital journey their discharge will be facilitated via the Discharge Lounge."

The Discharge Lounge team is led by Sister Sam Rossi.

Lisa Horkin, Associate Director of Nursing for the Trust, said: "It's a lovely new addition to Unscheduled Care.

"It will take pressure off staff and beds. It will also ensure that we have the right patients in the right place."

Clinical Matron, Andrew Heath, said: "The ward has been upgraded to a really high standard. The benefits are two-fold.

"It will allow smoother movement from Accident and Emergency and other departments. It also provides a calm environment where patients can come prior to discharge. Hopefully it will improve the patients' journey as we go forward."

Talking about future plans for the area, Pauline Tschobotko, Head of Service for Families Division, said: "The team of surgeons, nurses and managers, have all pulled the stops out to maximise opportunities for additional theatre lists.

When the Gynaecology Ward opens, it will ensure there are sufficient beds for women to have their gynaecology surgery when planned."



**Some of the team members from Unscheduled Care. From left: Cathy Allen, Senior Project Manager for Unscheduled Care, Lisa Horkin, Associate Director of Nursing, Natalia Evans, Staff Nurse, Sam Rossi, Sister and Patricia Evans, Ward Clerk**

home. The wards can be quite busy, but it is nice and peaceful in here. I've had excellent treatment and am recovering well."

JE Harrison Builders did the work on the area which was previously used as a private patients' lounge, a clinic, an office and as an early pregnancy unit. Work is continuing on the Gynaecological Ward which will open later in the year.

Cathy Allen, Senior Project Manager for Clinical Workforce Redesign in Unscheduled Care, said: "The availability of a discharge lounge forms an important part of the division's aim to

# African dream comes true for student nurse Charlotte

**Student nurse, Charlotte Lumb, has just returned from a study placement in Arusha, on the edge of the Serengeti in Tanzania. Charlotte has recently completed a variety of placements at Blackpool Victoria Hospital as part of her Adult Nursing Diploma and is currently training in the oncology and haematology department. She funded her trip by selling hundreds of homemade cupcakes as well as other fundraising efforts. In her own words, she describes some of her experiences in Tanzania.**

Wow. Tanzania. Where do I start?

I began this incredible journey in October 2013. The University of Central Lancashire (UCLAN) introduced me to the idea of alternative placements overseas.

There was no question of where I wanted to go. I had always wanted to visit Africa to see the culture, the Maasai tribe, the beautiful scenery and the wildlife.

I could go anywhere in the world, but I thought let's go somewhere they need my help, where resources are low and where healthcare is at completely the other end of the spectrum from the National Health Service in Britain.

I travelled with my good friend, Danielle, who is in the same cohort of nursing as me. I'm so glad she was with me - she's been my rock throughout. When we arrived in Africa in October 2014, Brian the project manager, met us outside, speaking Swahili.

It was hard to believe that I was in Africa. The penny finally dropped and for the first two days I was pretty homesick. I won't miss the bunk-beds (not the best when you are 6ft 2ins tall). The cook at the nurses house was an amazing woman. I felt as if she was my African mum!

One thing I found in Tanzania was that no matter how poor people were, they always had a smile. Everyone was so happy – laughing, smiling and dancing all the time. England could learn a lot from this country.

For my placement I spent two weeks in the labour ward, three weeks in casualty and one week at the village dispensary.

The labour ward was an eye-opener. It was amazing to see my first natural birth; shocking and also very emotional.

The women of Tanzania are so strong. They go through labour alone, with no pain relief and with very little assistance from midwives until the baby is nearly born.

I found it difficult to understand why the midwives didn't comfort women when they were in pain, but I suppose this was down to their culture.

Casualty was crazy, but this was where I got to use the skills and experience I had gained from the last three years in England.

I enjoyed assisting the Tanzanian doctors to diagnose conditions by giving possible reasons of their symptoms

based on previous cases I had seen. They really appreciated this and we all worked together as a team.

Most of my days were spent in shock. Crazy things happen in Tanzania. There were no real similarities between the hospitals in Tanzania and in England. They couldn't be any further apart.

There seemed to be no structure, no protocols, no dignity or respect and the basic nursing care was not to the standard I like to work to in England. All I know is that my values and beliefs in terms of nursing care are stronger than ever now.

I really enjoyed Wednesdays in the village because it was busy at the clinic and all the mammas came to get their babies weighed. The weighing scales were just hanging from a tree outside. Most of all I enjoyed going to the Baby Home just around the corner from the house. We visited at least twice a week. The children were adorable and I fell in love with one little boy.

I'll never forget the people I met. I will never take for granted anything I have in England and I appreciate the National Health Service we have so much.

I paid for the trip through fundraising and donations from friends and family members. I'd like to thank everyone who supported me. Without them I would have never been able to help the people I met during my six weeks in Africa.



Charlotte Lumb with a young child she met in Africa

# Charity event opened by 'I'm A Celebrity' star raises hundreds

**A community event held in aid of two charities and opened by a former I'm A Celebrity.... Get Me Out of Here! contestant has raised more than £700.**

The event, featuring stalls, a tombola and a raffle, was held at St Alban's Church in St Annes on Saturday, and has raised money for Blue Skies Hospitals Fund – the charity behind Blackpool Teaching Hospitals NHS Foundation Trust – and The Little Princess Trust which makes real hair wigs for children undergoing cancer treatment.

The event was organised by Mary Taylor of St Annes, who is going through treatment for breast cancer having been diagnosed in September last year. It was officially opened by Nadine Dorries, MP for Mid-Bedfordshire and a contestant in ITV's I'm a Celebrity 2012.

Mary said: "We were really pleased with how many people showed up on the day. I can't thank Nadine enough for her help and support and thanks also to all my friends and family who generously gave their time to help out.

"I was overwhelmed with the number of local businesses who donated gifts for our raffle. This event has been very well supported."

Nadine said it was an honour to cut the ribbon, especially as her own mother is currently a patient at Blackpool Victoria Hospital.

She added: "I was not surprised that Mary Taylor organised this event within months of being diagnosed herself with breast cancer.

"Given that I owe Blackpool Victoria Hospital a huge personal debt for the care given to my own mother, when Mary asked me to open her event I was incredibly enthusiastic to get involved as much as I could. One thing about Blackpool Victoria Hospital is that it is local people looking after local people. Whatever that formula is, it works as the care provided there to patients is



**Nadine Dorries MP (front, right) opens the event at St Alban's Church in St Annes**

exceptional. I think, and hope, that local people realise that."

The event raised a total of £703, which will be split between the two charities.

Blue Skies will use the money to enhance care at the Breast Care Centre at Blackpool Victoria Hospital.

Amanda Bennett, head of Fundraising at Blackpool Teaching Hospitals, said: "We are thrilled not only that Nadine was able to take time out of her busy schedule to open this event, but that Mary, who is still undergoing treatment for breast cancer, has chosen to put on this family fundraising event."

## Nurse develops new information guide for staff

A Cardiac Rehab nurse has been praised for her work to improve the services offered to patients with dyslexia.

Helen Duggan has developed an information guide for Occupational Therapy Practice Placement Educators for dealing with patients with dyslexia.

The guide is now in place and being used by Helen's colleagues.

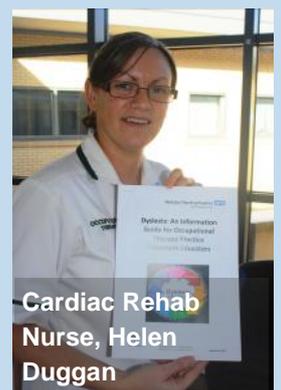
She said: "There is a definite need in the NHS as a whole to improve what we do for people with dyslexia.

"It is the most common form of learning disability there is, but probably one where we have the least amount of understanding and I wanted to see if I could do something about it.

"I am currently doing a course and as part of that was asked to come up with an idea that would help improve the patient experience and this seemed ideal.

"I have worked closely with the Trust's Diversity and Equality Lead, Tina Daniel and had a lot of help and support from my colleagues as well.

"I hope it can be rolled out further and help staff feel more comfortable and competent when dealing with dyslexia."



## News in brief

### Stop smoking

Fylde coast health specialists have backed a new campaign using graphic images to highlight how smoking damages the body in a way similar to rotting.

Public Health England's campaign illustrates the degeneration that smoking causes and highlights the danger of 'roll-up' cigarettes.

For information call 01253 951570, email the service at [stop.smoking@blackpool.nhs.uk](mailto:stop.smoking@blackpool.nhs.uk) or search Facebook, Twitter or the internet.

### Top bursary awarded to lab assistant



Front: Christine Smith with her mentor, Clare Ellis

The Institute of Biomedical Science (IBMS), has awarded the Mary Macdonald Bursary to Christine Smith, a Medical Laboratory Assistant based in the Microbiology department of Blackpool Victoria Hospital.

Christine was delighted at the opportunity offered by the award of the bursary to further develop her career.

During her course she will be mentored by microbiologist Clare Ellis.

Christine said: "I was surprised and delighted to be awarded the bursary.

"I am excited about starting the course and look forward to gaining a greater insight into the work of the lab."

Congratulations Christine!



The new Ward 2 team with Leanne Kay, fourth from right

## Delight as new care of the elderly ward opens

**Ward manager Leanne Kay is delighted with the way her staff have embraced their new role as a care for the elderly ward.**

Just days before Christmas, Ward 2, the former escalation ward, began its new role with two consultants, Dr Gopal and Dr Gbadebo, assigned to the unit.

"There was a need to have more care for the elderly beds," explained Leanne. "And we have already become a busy 19 bedded acute medical ward."

Leanne praised the way her staff had adapted to the changes saying: "I've been surprised and delighted at how quickly the team have bonded and how this has led to excellent patient care. Nurses, doctors and allied professionals are really working well together."

The ward, which is currently all female, takes admissions directly from the Acute Medical Unit and Leanne is keen to ensure staff throughout the Trust, are aware of the ward's new role.

The ward is also able to transfer patients directly to Clifton Hospital allowing a good flow of bed space throughout the unit.

"Many staff in the Trust still think we are an escalation ward, but it is important we get the message out to clinicians so people are making appropriate admissions and transfers," she added.

Leanne is particularly proud of the way the ward handles patients with dementia using the butterfly scheme and implementing the dementia integrated pathway.

"This has given us an excellent tool to work with to ensure dementia patients are getting the best possible care.

"We are also working closely with Clinical Lead for Improvement, Sue Jones, who is helping to focus the team around dementia care."

Leanne also paid tribute to her two new ward sisters, Maria Jennings and Ashley Ward, who she said were bringing positive, new dimensions to the team, patients and their relatives.

The ward manager also said she was eager to enhance the educational opportunities for all staff and already had two members of the team undergoing university courses.

Leanne was also keen to thank Matron Sarah Sloan for her professionalism and care during the transition.

"Sarah has been amazingly supportive to us as a new ward by ensuring we have all the facilities and equipment we need.

"These are exciting new times and challenges which the team are ready to take on and excel at," she added.

# Brave Poppy finally gets to go home for part of Christmas day

**Brave little Poppy Hughes-Wilson, darling of the Children's Ward, finally got to open her Christmas presents in her own home this year.**

Seven-year-old Poppy from Cleveleys is a regular patient at Blackpool Victoria Hospital and much loved by all the staff on the ward for her strong resolve and courage.

Poppy suffers from the extremely rare Ehler Danlos Syndrome and has recently undergone a five organ transplant operation.

While staff are always delighted to see Poppy, they were all hoping the little girl could go home to spend Christmas with her mum Kim and younger sister.

Poppy was finally discharged on Christmas Eve, but unfortunately was readmitted in the evening on Christmas Day.

"She is loads better," said mum Kim. "We had to bring her back in on Christmas Day, but she had most of the day at home, it could have been a lot worse."

Following Poppy's transplant operation, Kim is now keen to stress the importance of organ donation.

Kim said she was extremely grateful to the donor's family and explained that there were many more children waiting for transplant operations.

She said the operation had given Poppy a new lease of life: "Poppy wouldn't be here without her donor. We are very lucky. The call for the transplants came at the right time."

Poppy says she loves her new life.



Poppy with her mum Kim in the Children's Ward

## Heart attack dad is well on his way to recovery

Christopher Baron, the heart attack dad who collapsed in a Blackpool music venue, was well enough to spend a quiet Christmas with his wife and family.

Fifty-six-year-old Chris was at an 80s themed party when he collapsed after leaving the dance floor.

Fortunately a party of bowel cancer nurses were at the venue and rushed to the father-of-three's aid performing CPR and resuscitation until the ambulance team arrived.

The quick-thinking nurses and Chris became media stars as the story made the front pages of newspapers and attracted radio stations from across the region.

Radio Lancashire journalist, Steve Becker (pictured), was one of the many reporters to cover the story.

Speaking from his home in Wigan, Chris praised the actions of the nurses and said he had been able to spend Christmas at home because of their skills and care.

"I am now well on the mend," he said. "I am able to walk the dog daily and even potter around the garden. I cannot put into words



**Chris Baron with Charlie Cookson, Louise Newton and Steve Becker from Radio Lancashire at Blackpool Victoria Hospital**

how grateful I am to those nurses and the cardiac team at Blackpool Victoria."

# Family event recognises our Celebrating Success winners

A special event was held at Blackpool Victoria Hospital to honour the finalists in the Trust's annual Celebrating Success Awards.

Photographs from numbers 1 to 11: **1.** Employee of the Year, Simon Tucker and family; **2.** The Gazette's Patients' Award winner, Dr Nigel Laycock and sons, with Deputy Chief Executive, Wendy Swift; **3.** Chairman's Award winners, the Chaplaincy team, with Wendy Swift; **4.** Clinical Team of the Year runners-up, the Integrated Assessment Team with Chairman, Ian Johnson; **5.** Employee of the Year runner-up, Jane Cairns (right) with her daughter; **6.** Innovation Award winners, the Volunteer Navigators; **7.** Unsung Hero runner-up Eileen Shaw (centre) and colleagues; **8.** Doug Wilson from the Estates and Capital Development team, winners of the Non-Clinical Team of the Year; **9.** Dr Nigel Laycock with the family of a patient; **10.** Clinical Team of the Year, the Care Home Support Team; **11.** Innovation and Service Improvement Award winner, Sandra Singleton and family.



1.



2.



3.



4.



5.



6.



7.



8.



9.



10.



11.



Darren Kirmond (left) describes some of the benefits of the EMIS Web system to members of staff

# New web system will save time and give safer care to patients

**A new web system designed to integrate community healthcare for 470,000 people across the North West has been commissioned by Blackpool Teaching Hospitals NHS Foundation Trust.**

The EMIS Web system enables secure shared access to a patient's whole-life electronic health record. It is the most widely-used GP clinical system in the UK.

EMIS Web will be used by 1,800 clinicians from GPs and health visitors to emergency rapid response and mental health teams.

It will support 24 services across more than 700 km<sup>2</sup>.

Subject to robust local data sharing agreements, community staff will have secure two-way record sharing with local GPs and acute care providers thus enabling safer, more efficient care.

Carol McCann, Associate Director of Nursing at Blackpool Teaching Hospitals, said: "EMIS Web will give community staff a joined-up patient record to enable safer clinical decisions.

"It will save everyone a great deal of time in chasing vital information and it will give us the assurance that we are making decisions with a full understanding of what is happening to that patient across all care settings.

"In short, it is real time data, enabling robust clinical decisions."

Martin Bell, Director of Community, Children's and Mental Health at EMIS, said: "There is no limit to the types of community health services that EMIS Web can support.

"We are very proud to be working with this innovative organisation which has chosen our best of breed technology to provide first-class care in new ways for the NHS."

The web system is part of the EMIS Group, a UK leader in connected healthcare software and services.

The group's systems hold more than 40 million patient records and are used by nearly 6,000 healthcare organisations from GP practices to child and mental health services.



Members of staff and representatives from EMIS Web at Blackpool Victoria Hospital

# Viewpoint

The views and opinions of our Executives Directors



Gary Doherty  
Chief Executive

The NHS has been under a great deal of pressure over recent months and this Trust has been no exception.

It has been an extremely challenging time for staff and I would like to pass my personal thanks to everyone who made sure we provided the best care possible to our patients over that time. I saw for myself just how fantastically well staff responded to the pressures with many people going above and beyond what is expected of them. Despite the pressure we also reached the vast majority of our targets and performed extremely well.

It is that sort of dedication and attitude that often leaves me humbled and makes me really proud to be the Chief Executive of this Trust.

The challenge is set to continue for a while yet so please keep up the brilliant work.



Wendy Swift  
Strategy / Deputy Chief Executive

I would like to say a big thank you to everyone working across the hospitals and community services for all their hard work and commitment particularly over the last few challenging weeks.

This is the time of year when we formalise our plans for the coming year.

During February and March we will be working closely with all our directorates and partners to finalise our operational and financial plans.

We will also be agreeing our Contracts for 2015/16.

Our plans will cover the development of new and enhanced services across the hospitals and community they will also include the key challenges which we will all need to continue to work together to address.



Prof Mark O'Donnell  
Medical Director

The Trust has featured in a national report indicating that despite the progress we have made we are one of only two Trusts in the country declared as an outlier for Standardised Hospital Mortality Indicator (SHMI) rates. We have undertaken a lot of work in this area and our improvement rates are in the top 25 per cent of Trusts nationally. Our rates are down from 119 in June 2014 to 111.9 in December thanks to a lot of hard work which we must maintain.

One of the main ways we can make improvements is clinical engagement and we have appointed Dr Andrea Whitfield to the role of Associate Medical Director – Medical Engagement and Leadership.

A clinically-led Trust requires active engagement from clinicians at all levels, but especially those who are consultants and I look forward to everyone working closely with Andrea.



Marie Thompson  
Nursing and Quality

I would like to take this opportunity to thank everyone who worked so tirelessly over the busy Christmas and New Year period.

It was a particularly challenging time and I saw and heard of so many people who went over and above their job role to support compassionate care to our patients and their families that it was quite humbling at times.

I would like to reassure all our nursing staff especially that we realise the pressures they face and we are still working hard on our recruitment drive.

With that in mind I was delighted to welcome new nurses from Italy and Romania who started with us recently and I wish them well for their future here.



Pat Oliver  
Operations

Everyone will have noticed how busy the Trust has been over the past couple of months.

Despite unprecedented demand, however, I am delighted to report that we have performed extremely well in all key measures.

Our A&E performance was highlighted by both the Prime Minister and Andy Burnham and we achieved the Quarter 3 standard of 95% which is something many Trusts didn't achieve.

The fact we also achieved targets such as the 62 Day Cancer and 18 weeks treatment standards were excellent.

We did this by working superbly together despite the pressure. I would like to say a big 'thank you' on behalf of all the board for your efforts.



Nicky Ingham  
Workforce & Organisational Development

We have recently launched our 'Proud to be' campaign where we are asking staff to share their stories as to why they are proud of the work they do here. If you or a colleague wishes to participate in this please contact Derek Quinn, Head of Communications.

Since the last issue, I have been lucky enough to shadow one of the Cardiac Anaesthetists in cardiac theatre and experience the challenging work we undertake everyday to improve the quality of lives for our patients.

I have also had the opportunity to shadow a fabulous Team Leader for Therapies in the Community at Lancaster and observed members of the team interacting with a number of patients both in their own home and in a rehabilitation care home. I was humbled by the whole experience seeing our staff live our value of compassion.



Tim Bennett  
Finance & Performance

The Trust is facing some very challenging financial targets.

In the current year we are forecasting we will spend more than we earn by £3m, despite delivering £20m in efficiencies and savings.

Selling some of the buildings we no longer use (such as Wesham) has helped fund the deficit this year, but we know this is only a short term fix and the outlook for next year is even more challenging as we have to save another £20m. To do that we need to develop new services and alternatives to hospital based care by working even more closely with other partners and enhancing our own services where we can.

We have made an excellent start with some great ideas so far so please help us maintain the focus next year with your ideas for improvements.

# Staff back the launch of new Vision and Values for the Trust



Blackpool Teaching Hospitals NHS Foundation Trust

## Our Values

### People Centred

- Serving people is the focus of everything we do

### Excellence

- Continually striving to provide the best care possible

### Compassion

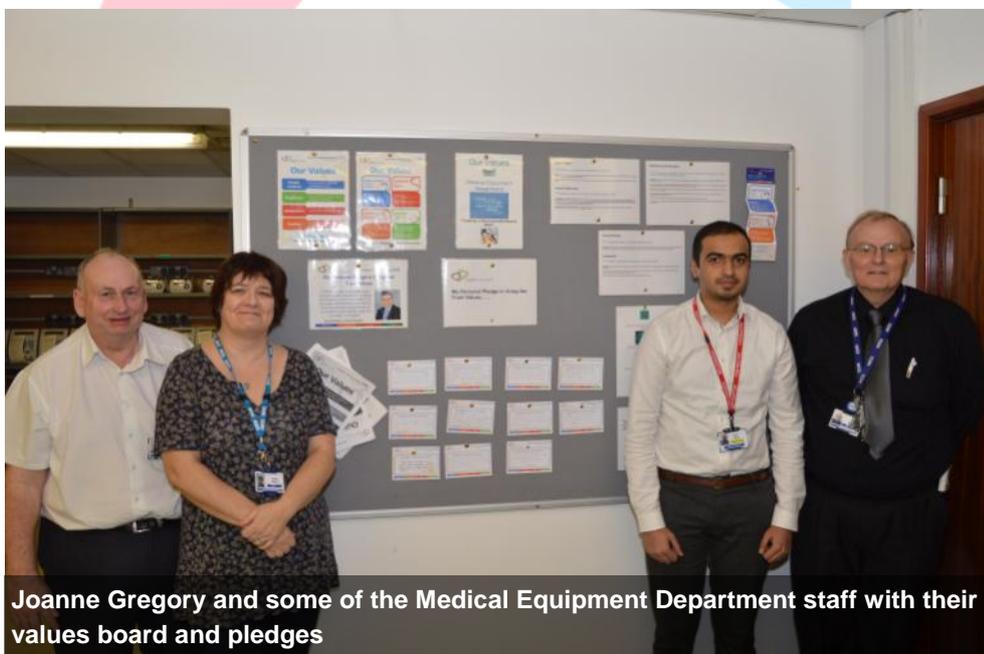
- Always demonstrating we care

### Positive

- Having a can do response whatever the situation

## The Trust Way

"Creating a Great and Safe Place to Work"



Joanne Gregory and some of the Medical Equipment Department staff with their values board and pledges

**The new Visions and Values for the Trust have been launched — and they have exceeded expectations in terms of pick-up by staff.**

Departments all over the Trust have been sharing the Visions and Values with staff and attending awareness events throughout December.

Hundreds of pledge cards have been filled in by staff who have promised to uphold those values in a way unique to them and their work. We'll be getting back to those pledge cards when it comes to this year's Change Day in March (see page 3).

Nicky Ingham, Director of Workforce and Organisational Development, said: "It's been really encouraging to see how our staff have engaged with the new values and got behind them.



The Pharmacy team's values board focussed on compassion last month

"We did a lot of work through the focus group events we held to make sure they were suitable and I think that has made more people empathise with what we are trying to achieve through them. I am so proud to work here and support teams in living the values and bringing them to life."

Two such departments that have used the Visions and Values in different ways are the medical equipment team and the pharmacy team.

Joanne Gregory, Medical Equipment Library Manager, has had a new notice board put in place which outlines the values and has a section where the whole team have added their own pledge cards.

Their aim is to use the values as a basis for planning their future activity and to unite the team during a critical period of change.

Joanne said: "Our department has undergone a lot of upheaval recently and I felt the values could help us to make a 'fresh start' and provide an opportunity to consider how we wish to move forward within the department.

"The team feels they have worked hard to adhere to the values already and agreed that they should underpin the team's development going forward.

"The values give us an opportunity to create a more positive and pro-active approach to our work."

The Pharmacy Clinical Trials team has been doing a monthly themed board in their offices focussing on one of the values each month.

The board is designed to inspire staff in the department and to make them think about what that value means to them. It is hoped it will make them think about instilling that value into their daily routine.

# Splash of colour and a new gym for hospital

Ward 1 at Clifton Hospital has reopened with a completely new paint scheme, layout and flooring.

There is now a reception area for the ward to welcome visitors along with a new nurses station. The day room has been opened up to create more space and easier access for patients. It also features a patio doorway into the gardens so nurses can take patients for walks outside.

Matron at the hospital, Courtney Bickerdike, has been working closely with the King's Fund Enhancing the Healing Environment Programme to transform patients' experience through improvements to the physical environment.

Courtney said: "The new layout of the ward makes it easier for us, but by far the biggest changes are actually the simplest.

"The cosmetic changes make the biggest difference to the patients who mostly suffer with dementia and so have very different needs.

"The flooring, for example, is non-reflective yet still hygienic. This seems an insignificant detail, but people with dementia can find reflective floors confusing, mistaking it for water which can make them distressed. Likewise we have used colour to orientate patients and create barriers and to guide them around the ward."

Ward 1 was closed in October and patients moved to Ward 2 during the renovation project and reopened to patients in



Physiotherapist Alex Sklepowicz, Courtney Bickerdike and Occupational Therapist Lindsay Hetko in the new gym

November. At the same time a new rehabilitation and occupational therapy gym has been created.

The new room boasts new equipment specially designed to help with the rehabilitation role the hospital plays. It features parallel bars to help patients with walking, a small staircase, exercise machines and a physiotherapy bed.

Lindsay Hetko the Clinical Lead Therapist at Clifton Hospital, said: "The new therapy gym has great potential to allow the Physiotherapy team to extend the rehabilitation at Clifton, for example group exercise sessions.

"The gym can also be used for functional assessment by the Occupational Therapist, for example, bed transfers in a standard bed."

Staff changing facilities have been moved to another part of the hospital to make way for the gym. In addition to the gym, the therapy kitchen has been extended which provides a more suitable environment to complete kitchen practises.

There will be more opportunities to offer rehabilitation in activities of daily living such as meals preparation and hot drinks. This assists with preparing people to return to their home environment.

The refurbishment is being further enhanced thanks to an appeal by Blue Skies Hospitals Fund, the Trust's charity. The £30,000 Peace of Mind dementia appeal will pay for the creation of a memory corridor at Clifton, as well as other hospital sites across the Fylde coast, a secure and interactive garden at Clifton Hospital and will help make sure hospital sites are easy to navigate.

In December the Mayor of Fylde, Councillor Kevin Eastham, made the annual mayoral visit and tour around the hospital

He said: "There has been so much care and consideration given to the scheme which I hope brings great benefits to the treatment of the patients who clearly have very special and significant extra care needs."



Matron Courtney Bickerdike with the Mayor and Mayoress of Fylde

## Before and After



# Delight as 100th patient signs up for national clinical trial



Emma Brennan, Critical Care Research Nurse, Sam Guest, Emergency Department Consultant, Dottie O'Donnell, Ward Clerk and Simon Tucker, Emergency Department Consultant

## The 100th recruit for an international clinical trial has been secured by the research team at Blackpool Teaching Hospitals NHS Foundation Trust.

Dottie O'Donnell, a Ward Clerk from the Surgical Assessment Unit (SAU) at Blackpool Victoria Hospital, helped to recruit the 100th patient.

Staff working on the 'HALT-IT' trial have been looking at treatments for patients who have suffered gastrointestinal (GI) bleeding.

Mr Simon Tucker, Emergency Department Consultant, said: "To have recruited 100 patients for HALT-IT in just over 12 months is a fantastic achievement and secures our position as one of the top recruiting Trusts on this international clinical trial.

"I want to congratulate Dottie on helping us to recruit the 100th patient and am grateful for her assistance. She has been an important asset on the SAU and Ward 10.

"I know Dottie has been contacting the research team directly when patients are being admitted to Ward 10 with lower GI bleeds.

"The fact the 100th patient has been recruited by a non-clinical staff member also reflects the efforts made by the research team in educating staff in the key targeted areas.

"Well done Dottie - keep up the good work!"

Dottie said: "I always try to help where I can and it was a nice surprise to hear that I had nominated the 100th person."

The HALT-IT trial is looking at the effects of tranexamic acid for the treatment of gastrointestinal haemorrhage.

It is a randomised, double blind placebo-controlled trial.

Gastrointestinal bleeding is a common emergency that causes many deaths worldwide.

The most frequent causes of upper GI bleeding are peptic ulcers, swollen veins in the gullet and mucosal disease.

Acute upper GI bleeding accounts for approximately 60,000 hospital admissions each year in the UK and causes the death of about 10 per cent of these patients.

Lower GI bleeding accounts for a further 15,000 admissions each year and leads to the death of approximately 15 per cent of patients.

The HALT-IT trial is continuing and there will be a bottle of wine for the staff member who recruits the 150th patient.

If anyone wishes to have more information on the HALT-IT trial please contact Emma Brennan, Critical Care Research Nurse, on 01253 951 519 or email [emma.brennan@bfwhospitals.nhs.uk](mailto:emma.brennan@bfwhospitals.nhs.uk)

## Research nurse on frontline of



Peter Scott with his team mates at the Elwa 3 treatment centre in Liberia

### A research nurse from Thornton is part of a small army of volunteers waging war against Ebola.

Peter Scott, 34, has just returned from a five-week stint at the 'Elwa 3' treatment centre in Monrovia, Liberia, where he was the field coordinator for a research trial of a new anti-viral drug.

Peter, who has a seven-year-old son, is now helping to recruit more people to go to West Africa to fight Ebola and is planning to return there in March.

He said the RAPIDE (Rapid Assessment of Potential Interventions and Drugs for Ebola) studies are hugely important as at present there are no proven treatments for Ebola.

He explained: "If healthcare workers have an enemy it is Ebola; as we are fighting Ebola, it fights us back."

"We are trialling new drugs to fight Ebola. We went with Medecins Sans Frontieres (MSF).

"We had to put on layers of protection – it's like putting on armour. If you don't you expose yourself and others to risk and anxiety."

Peter said one of the first things the disease did was wipe out a huge number of healthcare workers.

"In West Africa so far it has killed more than 500 healthcare workers – in some regions this is half the total amount of healthcare workers in the area," he said.

"We went over there to fill the gaps that have been left. This is why it's so important that people from the UK go out there to help."

Peter, who trained and worked at Blackpool Victoria Hospital and North Lancashire Primary Care Trust before setting up his own freelance company, went to Monrovia in December with five other research experts (three doctors and two nurses).

Despite the risks, Peter was determined to go to Liberia to fight Ebola. "I had been following the Ebola outbreak and was hoping I would be able to do something," he said.

"If it looks difficult and risky, it's like holding a red rag to a bull for me."

"It was a case of, could I turn around and say I wouldn't do it - could I carry on watching it on TV and at the same time look myself in the mirror if I did nothing."

"I had my son to think of and it was near Christmas, but I couldn't justify not going."

# war against deadly Ebola virus

Before travelling to Africa to test the new anti-viral drug 'Brincidofovir', Peter flew out to Amsterdam where rigorous training by MSF took place.

The training involved learning how to put on and remove Personal Protective Equipment (PPE).

He explained: "They told us the key message with Ebola is that the first priority isn't the patient – the first thing is to protect people that don't have Ebola.

"The stakes are high. It's not like catching a cold – there's a good chance it could kill you.

"However, when people recover, they generally recover very well."

When he first arrived at the Elwa 3 treatment centre he found it "fascinating".

He explained: "It's a very big unit with multiple large tents.

"There were psycho social teams who gave psychological support and helped people to reintegrate.

"Outreach teams did 'contact tracing'. They went into the community to find out who the patients had been in contact with and follow up on survivors.

"I also worked with the local medical staff. Many of them had lost colleagues to Ebola. I had a huge amount of respect for them.

"It was incredibly hot in the protective clothing and we worked 12 to 13 hours each day. I saw patients when they were confirmed as having Ebola. They were very poorly.

"One boy came in with his mother and father. The boy and his mother survived, but the father died right next to them. It's a devastating disease."

**"We are all inspired by his dedication and enthusiasm in this important role and we are glad we could follow his work on the ground in Liberia via Twitter and see the impact Peter has made."**

Michelle Stephens, Research and Development Manager for Blackpool Teaching Hospitals

Peter said he only felt afraid when he started to realise that he was getting used to the procedures for putting on and taking off his protective clothing.

He explained: "It had become routine and I had to be careful not to drop my guard. I had to slow everything down. In our training we had a mantra: 'You're not in a hurry to die'."

Peter said clinical trials and research could be the key to beating Ebola. "This Ebola drug trial has the potential to really wake people up to what clinical research can do in the modern age.

"Before we went there, nobody had tried recruiting patients into a clinical trial in an Ebola treatment unit. Ebola is always going to be there, but we can learn to manage cases and prevent the outbreaks. That is why the drug trials are so important."



**Peter Scott (left), with West African healthcare workers at the Ebola treatment centre in Monrovia**

Michelle Stephens, Research and Development Manager for Blackpool Teaching Hospitals NHS Foundation Trust, said: "Peter began his nursing and research career here at Blackpool Teaching Hospitals in 2007.

"He was a research nurse working in a number of areas including, cardiology, infectious diseases and gastroenterology for two years before he moved on.

"It has been good to watch him and his career growing over the years. When we heard about his plans to go Liberia as part of a research team we were amazed with his bravery and commitment.

"It is vital that ground-breaking research projects can take place in tackling this outbreak and with research staff - these projects have the potential to transform lives.

"We are all inspired by his dedication and enthusiasm in this important role and we are glad we could follow his work on the ground in Liberia via Twitter and to see the impact Peter has made."

When Peter was in Africa, Time magazine named all of the Ebola health workers 'Person of the Year'. Peter met Ella Watson-Stryker, one of the health workers to be featured on Time magazine's front cover.

The former Hodgson High School pupil added: "My dad is very proud of what I'm doing.

"The only negative thing is that health workers who go to fight Ebola can be stigmatised. My time in Liberia hasn't put me off going back there. I often speak to people who are thinking about going there.

"Many who go there make some sort of sacrifice. I haven't spoken to anyone who has regretted it.

"It is easily the most rewarding thing I have done by a long way."

# Crippling illness taught me how to be a better clinician



Nurse Michaela Beckwith outside the main entrance to Blackpool Victoria Hospital where she received treatment

**Michaela Beckwith always had a strong passion to become a nurse, but the 10 weeks she spent as a critically ill patient made her a better clinician.**

Michaela spent 63 days on ICU due to E coli sepsis which led to multiple organ failure. She sustained a combination of ARDS (Acute Respiratory Disorder Syndrome), cardiac failure and acute kidney injury. Although her illness left her profoundly weak and in a considerable amount of pain, she says the one thing that will always stay with her is how frightening it is that someone's life can be changed by illness.

Michaela was working as an HCA in Unscheduled Care at Blackpool Victoria Hospital when she started experiencing stomach problems, she lost one-and-a-half stones in weight and a gastroscopy led to a diagnosis of an ulcer.

But while she was waiting for her procedure, her condition deteriorated: "I was vomiting, unable to keep fluid down and eventually unable to hold my head up, all my joints hurt.

"On Monday June 2nd I was taken to A&E by my parents, where I was admitted and taken to the Acute Medical Ward. The next day I was taken for a second gastroscopy, but after the procedure my family became concerned about my breathing, which seemed to be laboured. Unfortunately from this point I have no recollection of my time spent in hospital."

She asked her parents to try to remember as much as they could of the time spent in hospital. The following is their account as told to Michaela.

"The next day my parents were woken at 5.30am with a phone call from ICU, I had been put onto life support due to serious breathing difficulties. At this time it was thought my oesophagus had been damaged during the gastroscopy, although this was proven later not to be the case.

"My parents were told I had multi organ failure and the hospital was not sure if I would pull through the next 24 hours. I was sedated and on a ventilator with lines in my neck and arms. Twenty four hours passed and I remained in a life threatening, critical state. Each day brought more bad news as my symptoms got worse. My lungs had collapsed and other symptoms indicated there were also problems with my kidneys and liver.

"My family sat by my bedside daily and were encouraged by the ICU nurses to talk to me, as evidence suggests that people who are sedated and ventilated may be able to hear. The nurses used to have to change my position every two hours to prevent me getting pressure sores, this required three nurses due to all the lines from me to the machines, each time this was done my heart rate and oxygen stats went to dangerous levels which caused great concern. I was told even though this happened the nurses were very thorough with their care.

# ght nurse linician



The Intensive Care Unit gave excellent care to Michaela

“My condition remained critical and my lungs were deteriorating. The consultants suggested putting me into the prone position to see if that helped take the pressure off my lungs. My parents described their horror when they saw me the following day as my face and eyelids had swollen from lying on my face.”

In the second week Michaela was put onto a kidney machine to filter her blood, but her temperature dropped dangerously low so an insulated body sheet was used. This had to be repeated three times over the next few days.

“The weeks went into a month and I was still sedated, still on the ventilator and still causing concern every time I was turned,” Michaela added. “The consultants were still baffled about the cause of my illness, and after a scan around the heart they thought that I may have a condition called Mediastinitis, an acute disease marked by inflammation of tissues in the mid chest which often occurs from an infection.

“A decision was made to carry out a tracheostomy. One Monday morning, after six weeks in ICU, one of the consultants arranged for another scan and found there was an air bubble around my heart that was restricting the function of my lungs. Further medication was given and my condition slowly improved.

**“I feel this experience, no matter how traumatic, has made me a better nurse.” Michaela Beckwith**

“The ventilator oxygen levels and sedation were slowly reduced, the physiotherapists began to work with me, my bed was moved over to a window so as I could get used to night and day. But, as I regained consciousness, I was becoming very frustrated, I could not speak and was struggling to communicate with anyone. I found that I could not move my lips enough to enable anyone to lip read, this annoyed me and upset my parents who had looked forward to being able to communicate after so long.

“Each day became an enormous struggle. Being moved and washed hurt, and as time went by I got to identify which nurses wouldn’t hurt me when being rolled or washed. Sometimes I got so frustrated I wished I had not survived. I was still finding it very hard to communicate, my parents kept telling me to move my lips and mime the words I wanted to say. But I just didn’t have the strength and had no co-ordination of my lips.

“Now I was awake the days seemed very long. The nurses brought me a television and set it up at the side of my bed. But they couldn’t get it to work so they got me a radio, but after a while it got on my nerves and I couldn’t turn it off.

“With excellent work from the physiotherapists, I grew stronger and progressed from sitting up in bed, to sitting on the edge of the bed to eventually standing up. After eight weeks in ICU I was transferred to HDU. My daily physiotherapy continued and I started to try to walk, first with the aid of a walking frame, but eventually I managed to walk a short distance alone.

“After six days on HDU I was transferred onto a ward. This was a big shock as the nursing care went down to one nurse to a unit of eight beds. The nurse whose unit I was on didn’t know anything of my background and didn’t realise my lack of mobility. The nurse didn’t have time to follow the daily physiotherapy plan and I soon realised that I would have to try to learn to be as independent as I could. Thinking of this now, I would ask if this was the right ward for me to be put on.

When I went home neither myself or my parents realised the difficulties that lay ahead, I was still in a lot of pain, especially from my shoulder and hip which kept on dislocating from muscle wastage.

The physiotherapist who visited daily saw how I was struggling and called in the occupational health to advise on any aids that would assist me in my daily activities. They suggested getting a wheelchair, but they did not supply them so I managed to borrow one. This turned out to be invaluable as without this I would have been housebound over the next few weeks.

This experience has been a very daunting journey which has been both physically and mentally hard, for me and my family. I cannot express how much gratitude I feel for all the care and treatment I received from the consultants, nurses and physiotherapist in the ICU/HDU and at home.

Without the treatment and care I have received from all these people I would not be able to pursue my nursing career. I am now back at work and I feel that this experience, no matter how traumatic, has made me a better nurse.

# Risky Business for Incident

## Team



**Every time a patient, visitor, or staff member comes to any kind of harm, or when something goes wrong within our organisation, an incident report is submitted. But where do these incidents go and what happens next? We've spent some time with the Incident Team to find out.**

In addition to patient harm, there are multiple reporting categories such as violence/abuse incidents, staff incidents, information security and infrastructure concerns.

Once an incident form has been submitted to the SAFEGUARD incident system it falls into the hands of the Incident Team, managed by Helena Lee. It is their job to make sure all incidents are dealt with appropriately and effectively so lessons can be learned, risks minimised and, in cases of moderate and serious harm, or high level organisational incidents, investigations are carried out.

The first step for the team is to ensure that all the information required is on the form and the severity level has been recorded appropriately. One in six forms have to be sent back for checking because something has been missed (for example patient details) or been incorrectly added.

Once the details are checked the data can then be used to create reports for divisions to help with their management of risk. Trends and themes of incidents and lessons learned from Serious Untoward Incidents (SUI) are reported back to

divisions on a monthly basis. Patient stories, involving incidents, are featured within the Lessons Learned section of The Pulse.

Helena Lee, Governance, Risk & Patient Safety Manager says: "All incidents need reporting, preferably within 24 hours of the incident occurring and these incidents need to be investigated and signed off by managers within a 20 day timeframe for level 1 & 2 incidents (low risk), 30 days for level 3 incidents (moderate risk) and 45 or 60 days for level 4/5 incidents (high risk), depending on their category."

The team are also guardians of the process, keeping a watch on the actions and recommendations identified from incidents and checking to ensure these are carried out in a timely manner and documented for audit purposes.

**One in six forms have to be sent back for checking because something has been missed (for example patient details) or incorrectly added.**

Helena continues: "The team deal with approximately 300 incidents each week and out of these, 25 incidents are escalated for further review and investigation.

"If an incident is identified as a level 4/5 (high risk) incident, a SUI investigation is

initiated and carried out by an executive-led multidisciplinary team."

A SUI is triggered when serious harm or unexpected death has occurred, stage 3 or 4 pressure ulcers are identified, allegations of abuse, adverse media coverage or scenarios that prevent or threaten the organisation's ability to continue to deliver healthcare services are present.

Stressing the role of the investigation Helena added: "The investigation process is not to place blame or to get anyone into trouble in any way, but to understand what has gone wrong, why the incident has occurred and what can be done to prevent it happening again."

The SUI investigation is a longer, more detailed process and a full investigation report is required to be completed within 45 or 60 days dependent on the category. Approximately nine incidents per month are recorded as SUIs, which are reportable on StEIS (Strategic Executive Information System). StEIS is a reporting system used by NHS England and the Clinical Commissioning Groups (CCGs) to monitor the services being delivered by provider Trusts and to share national learning. All StEIS reportable incidents must be submitted to the system within 48 hours. All SUI reports are then monitored by the relevant CCGs.

**Continues, page 21**

Helena said: "Delays in closure affects our reporting to the NRLS (National Reporting and Learning System) which in turn affects our reporting performance with the National Patient Safety Agency.

"More importantly, this delays our learning from incidents and putting in place measures to prevent these incidents from happening again."

Some learning points from a recent SUI are given as an example at the end of this story.

The Risk Management Team have had a new training programme for incident reporting in place since July 2014 and the interactive sessions are on-going with new dates now set for this year. A new training programme for managers who sign off incidents and complete RCA's will be rolled out soon.

The Risk Management Site, accessed through the Intranet, contains useful information on incident reporting, triggers for reporting, risk management (including risk assessments) and SUIs. Signed off SUI reports can be viewed and accessed through this site, to use as learning tools.



The incident reporting team can also provide staff with one to one advice or training on how to manage incidents and complete RCAs. There is a dedicated phone line and email for staff to use if they have any enquiries regarding incident reporting.

Incident Helpline Ext: 01253 95(3667)  
[Incident.helpline@bfwhospitals.nhs.uk](mailto:Incident.helpline@bfwhospitals.nhs.uk)

All enquiries are welcome.

**See page 26 for the results of the Incident reporting team's staff survey.**

## Lessons Learned from Serious Untoward Incident 111493:

The initial incident was found when the patient attended following a positive Chlamydia test result via a postal testing kit requested. It was found on reviewing her clinical records that a previous positive result had not been correctly actioned.

The service still relies on paper records as the lablink does not import directly onto the IT system. It is thought that the paper report from the laboratory was manually inputted incorrectly as chlamydia not detected, but this cannot be verified as paper reports are destroyed after three months following data inputting. This resulted in a delay in treatment for this patient.

Lessons Learned:

- Double checks should have been in place and clinicians should have been involved in the lab report checking process
- Protected time should have been allocated to the data inputting task.
- Audit should be undertaken to see if other results matched the report.
- Importing of data from Cyberlab would significantly reduce the risk from human error.

### UNTOWARD INCIDENT REPORT TRAINING – INTERACTIVE SESSIONS – TO BE HELD IN HPEC – LIFELONG LEARNING SUITE

The Risk Management Team are offering **Incident Reporting Training** throughout the Trust either as refresher training or for new users to familiarise themselves with the system. The sessions will approximately last 2 hours and we are offering both morning and afternoon sessions to make the training more accessible.

Please note, this is **NOT** a drop in session. We can facilitate training sessions to a maximum of 7 members of staff per session due to the number of PC's available in the training room. We require all members of staff to please book in advance using the choice of contact details below with your preferred date and time from the programme. If your initial choice of date is fully committed, we will offer you the next available session.

**We have spaces available on:**

- Thursday 19<sup>th</sup> February at 9.30am
- Tuesday 24<sup>th</sup> February at 2.30 pm
- Thursday 5<sup>th</sup> March 9.30 am
- Tuesday 10<sup>th</sup> March at 2.30 pm
- Thursday 19<sup>th</sup> March 9.30 am
- Tuesday 24<sup>th</sup> March 2.30 pm

If you wish to book on please contact the Incident Helpline Telephone Extension: **3667**  
[Incident.helpline@bfwhospitals.nhs.uk](mailto:Incident.helpline@bfwhospitals.nhs.uk)

# Trust team is first in North West to fit new heart failure device



Patient John Oates with members of the cardiac team with Andy Kershaw, third from left on back row, from medical agency Dot which provides the CardioFit device

**Blackpool Victoria Hospital has carried out the North West's first operation to fit a patient with a new device designed to tackle heart failure.**

John Oates is delighted to have received the CardioFit device as part of the pioneering 'INOVATE-HF' research project.

John, 63, who lives in Cleveleys, said: "It has been an excellent experience so far.

"I have a pacemaker on my left hand side and the CardioFit device on my right hand side – I'm a bionic man!"

"Since I've had the device in, it's been fine. I was allowed home the following day. I am hoping my quality of life will improve significantly."

The CardioFit device is designed to increase the effect of the body's parasympathetic nervous system. It has a 'stimulator', similar to a pacemaker, which is implanted in skin under the upper chest.

A 'stimulation lead' (a flexible insulated wire) transmits electrical signals from the stimulator to the vagus nerve in the patient's neck.

The stimulator also has a standard pacemaker lead which is passed through a vein into the lower chamber of the heart. It is connected to the stimulator and senses the heartbeat. The CardioFit device calms the heart rate down so it can pump more

effectively. Researchers will compare the safety and effectiveness of the Cardio-Fit system when used in conjunction with medical therapy against the use of medical therapy alone.

John first suffered a heart attack in 2005 when he was on holiday in Spain. He had a quadruple heart bypass in Spain and returned to the UK for further treatment.

At that time John was living in Manchester with his wife Margaret. They moved to Blackpool and since then John has been cared for at the Lancashire Cardiac Centre which is based in Blackpool Victoria Hospital.

He said: "I'd had a pacemaker since 2006. That was replaced at Blackpool in 2007."

John was referred to the heart failure team at Blackpool Victoria Hospital for on-going assessment.

He said: "A member of the heart failure team thought I would be a suitable person for the CardioFit study.

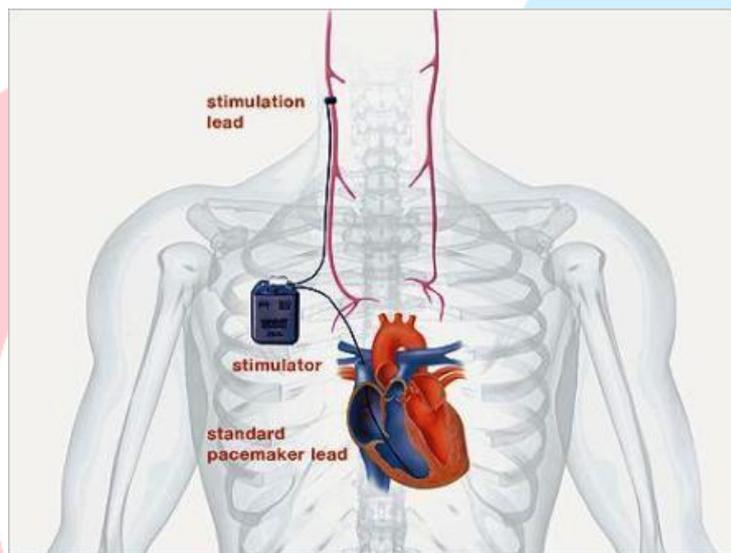
"It had never been done here before. The first thing I did was look on the internet. It seemed quite interesting and positive.

"Anything that can improve your quality of life is worth trying.

"I feel lucky to be on this trial."

Dr Alison Seed, Consultant Cardiologist with a Special Interest in Heart Failure, is leading the INOVATE-HF project in Blackpool.

Dr Seed said the project is one of 10 randomised studies in the UK which have the potential to radically transform the treatment



**Dr Alison Seed, who is leading the INOVATE-HF clinical trial and (right), an illustration of the Cardio-Fit device**

of heart failure - one of the fastest growing cardiovascular disorders in the UK. It is hoped that many more patients like John will choose to participate in this important study.

Dr Seed explained: "While patients with heart failure often develop significant symptoms, limiting their exercise tolerance and seriously affecting their quality of life as a result of the heart's inability to pump enough blood to meet the body's needs, it is a condition we are now able to control for the majority of patients."

"Even for those patients whose symptoms are difficult to control, there are new developments, such as INOVATE-HF, coming on board all the time."

"By coming to a cardiac centre like ours you can be sure you're being considered for cutting-edge treatment."

Mr Ajay Nigam, an Ear, Nose and Throat Surgeon with a wealth of experience in head and neck surgery, is a leading expert on the project. Mr Nigam is using his wealth of expertise to look at the most effective ways of implanting the stimulation lead around the vagus nerve and connecting it to the CardioFit device.

Dr Seed explained that the brain aims to control the workload and function of the heart through two parts of the nervous systems. The sympathetic nervous system activates the 'fight or flight' response during stress, increasing the heart rate and blood pressure and influencing the circulation.

The parasympathetic nervous system has a calming effect through signals carried from the brain to the heart and circulation predominantly by the vagus nerve. Normally the two systems are in balance.

However, in heart failure there is an imbalance. The sympathetic system is in overdrive while the parasympathetic system is underactive.

Some heart failure medications help to slow down the sympathetic system, but currently there are no proven treatments that help the underactive parasympathetic branch.

Dr Seed, who has worked for the Trust since 2009, trained in specialist heart failure centres with leading international experts before returning to the Fylde where she grew up.

Dr Seed added: "As a leading cardiac centre, we are delighted

to be able to provide this opportunity for patients and to be a centre that attracts patients from across the North of England seeking ground-breaking treatments."

John said: "My big 'switch-on' was on December 18. I've been fine so far."

His progress is being monitored on a regular basis and the device will continue to be 'fine-tuned' to his needs. He will have the device for life, just like his pacemaker.

Anita Elbasser, ENT Nurse Practitioner for the Trust, said: "It has been fantastic that the ENT and Cardiology teams have

**"By coming to a centre like ours you can be sure you're being considered for cutting-edge treatment" - Dr Alison Seed**

come together to work on this.

"We had 16 people in the theatre when John's device was being fitted. It was a big logistical operation."

"We're delighted that John has taken part in the study. If we didn't have people like John who were willing to participate, our knowledge would never advance. We like to be the first to try something new. It's great for the Trust."

Paula Black, Cardiac Research Nurse, said: "It's fantastic to see John doing so well."

"It's nice because John embraces what we are trying to achieve. We are trying to make research part of everyday practice so all patients understand that if there is a study they will be offered the opportunity to take part."

"It is very unusual to have the ENT team and the Cardiac teams working together. There has been great teamwork. If the CardioFit device proves to be beneficial, hopefully it will be offered to everybody who needs it."

John is now looking forward to more long walks with his dogs, Dexter and Floyd.

He added: "If anybody is considering being part of the study, I would be happy to speak to them about it. I would highly recommend it."

## Reporting a breach of confidentiality

It is imperative that all breaches of confidentiality must be reported via the untoward incident reporting system. You must also inform the HR department immediately who will then liaise with the Information Governance department.

## Do not share login details

Please do not share login details with other staff members including temporary or agency staff, locums, students and so on under any circumstances. If you feel pressured into this by other members of staff or line management, please contact the Information Governance department in the strictest confidence for advice.



## Do not divulge!

Please refrain from releasing any information over the phone about names of staff and colleagues to other organisations.

If you are approached by the public about a patient who is no longer in hospital for comments about their care whilst in hospital please do not give out any information. Instead, please ensure you follow the process for anyone requesting access to information by asking them to contact the Data Access Team on 01253 953537.

## Purchasing a new system or upgrading an existing one?

Please do not purchase a new system or agree to implement any changes to an existing system without contacting either the IG helpdesk or IT services. There are a number of important screening activities and documents that you need to fill in and get approval from the Health Informatics Committee before you can proceed.

# Information Governance aims for a full house

In March the Information Governance (IG) Department will submit a percentage of staff compliant for IG mandatory training.

The Trust is aiming for 100 per cent but currently running at 83.5 per cent compliance, with almost 1,000 showing as non-compliant.

Here are some of the things the team is doing to capture these staff:

- All staff who have not completed or are due to complete mandatory training are informed at least once either directly or via an email to their line managers.
- Liaising with all directorate and divisional leads to ensure staff are alerted to the requirement for completing their training.
- Distributing packs for all wards together with a date to return the packs or make them ready for collection.
- Contacting all other departments within the organisation.
- Offering assistance for any area or department to help ensure that their staff are up to date.

The Health Informatics Committee has

## The Information Commissioner's powers

The Information Commissioner's Office (ICO) has recently written to the Trust in response to a recent investigation involving the loss of patient information. In this case, the ICO did not want to take any further action, however, there are a number of powers available to the commissioner in respect of breaches of the Data Protection Act such as:

- Providing practical **advice** to organisations.
- Issuing **undertakings** committing an organisation to a particular course of action to improve its compliance.
- Serving **enforcement notices** where



recently approved a process whereby the IG team can revoke PC access for those staff showing as non-compliant if failing to complete this training as requested.

Staff are asked to act upon any email they may have received and inform the IG team if they believe their records are incorrect.

It is each individual staff member's responsibility to ensure they are up to date with their IG mandatory training.

It is the line manager's responsibility for each team to ensure their staff are up to date with this training.

If you have staff in your area who are non-compliant for IG, then your department is running an information security risk. The Information Commissioner monitors compliance with IG e-learning via untoward incidents.

there has been a breach.

- Conducting **consensual assessments** (audits) to check compliance.
- Serving **assessment notices** to conduct compulsory audits for assessments.
- Issuing **monetary penalty notices** requiring organisations to pay up to £500,000 for serious breaches of the Data Protection Act.
- **Prosecuting** those who commit criminal offences under the Act.



## Counting the cost of poor documentation

Since April 2014, the Trust has received numerous claims for patients' lost items, including spectacles, dentures and other personal items. To date, these losses have totalled a pay-out of approximately £7,000, with a possibility of reaching approximately £15,000 by year end.

It is vital that the Patient Property Disclaimer Form is completed by patients or their relatives, accompanied by a signature. This will help not only to safeguard our patients' property but will also assist to reduce future claims.



We should also encourage patients to send any large amounts of money and/or valuable items home with a family member/carer to prevent the risk of loss or theft.

## Health Records Audit

The Health Records Committee completed an Acute Health Record Folder Retrieval Audit in September.

The results of the audit showed two per cent of folders could not be located and Temporary Folders were created for the patient's attendance.

The Trust's Acute Health Record Folder retrieval target is 99 per cent availability meaning we are slightly below target.

Managers are reminded that the Medical Records Department provides Health Record Management training for staff. Complete the [Health Records Management Training Request Form](#)

It is most important to trace Acute Health Record Folders on the HISS system at the time of transfer to ensure retrieval staff know where they are located.

# Advice to tackle time management fraud

The Trust's Local Counter Fraud Specialist (LCFS) has recently investigated a referral relating to time management abuse. The person in question was allegedly finishing work long before the times she was quoting on her timesheet.



The investigative process identified evidence from numerous internal sources which collectively proved there was a case to answer. As such, the subject of the investigation was formally interviewed "under caution" and appropriate action was subsequently taken, which resulted in a police resolution being issued to the subject as the appropriate outcome to the investigation.

However, the procedural weakness the investigation process identified was that the staff member worked at a different site than her line manager. Therefore, the subject's timesheets had been signed without the authorising officer being able to confirm the accuracy of the start and finish times quoted.

As such, the LCFS would remind all managers that if their staff work at a different site, work outside normal working hours or predominantly start or finish before or after the manager does, then arrangements must be put in place to confirm the staff member's actual start and finish times. For example, the staff member could e-mail or ring their manager when they arrive and leave, thereby allowing a recordable methodology to confirm their arrival and finish times.

Whilst the above examples may not be applicable for all members of staff, the LCFS is available for advice or help in countering the fraud risk in regard to such situations.

## Two North West NHS managers jailed for £229,000 procurement fraud

The work of a Local Counter Fraud Specialist (LCFS) team has resulted in two fraudsters being jailed.

John Leigh, 54, and Deborah Hancox, 44, both of Rochdale, pleaded guilty to conspiracy to defraud the NHS.

The couple were jailed for more than five years each after being arrested in December 2013 for a systematic fraud that took place between 2003 and 2008.

The pair used three companies that sold

IT equipment to the health authority at inflated prices. Leigh and Hancox had links to all of the companies, but neither made any declaration of interest to the health authority.



Following an anonymous tip off, the matter was investigated by the LCFS, before being referred to NHS Protect who worked with Greater Manchester police to bring about the arrest.

### In Brief...

#### Bribery and Corruption

The LCFS would remind all staff that the counter fraud area of the Intranet (<http://fcsharepoint/divisions/global/counterfraud/Pages/default.aspx>) includes a full section on Bribery and Corruption including information on the Bribery Act 2010, guidance notes, FAQ's, leaflets and presentations.

### Pow Wow Water

Pow Wow Water went into administration in March of 2010. However, numerous NHS health bodies (BTH included) have received letters threatening legal action if the Trust does not pay an alleged outstanding debt.

Such letters are not genuine and if any member of staff receives correspondence relating to such matters please forward all correspondence to John Marsden, the Trust's Local Counter Fraud Specialist.

## You said we did - Incident Reporting staff survey feedback

In April 2014, the Incident Reporting Team asked staff to respond to a survey in order to seek staff views on the current Incident Reporting system and to ensure the Risk Management Team were meeting the needs of staff through delivery of an effective reporting service.

A report was compiled from the feedback and recommendations were identified to move the service forward. We are pleased to report the majority of these recommendations have now been actioned and we would like to share with you the work we have carried out, following the survey feedback.

You said	We did
Consider developing a focus group to review the Untoward Incident reporting system.	We consulted with the Quality Managers from each division on the efficiency of current incident reporting systems and they attended training and awareness sessions with the system provider. The LIRC committee has also been involved in all aspects of the untoward incident reporting systems to provide input into developments and improvements. A separate action plan is ongoing with the Incident Team in relation to ongoing system improvements.
Consider how literature to help staff understand the untoward incident and Serious Untoward Incident (SUI) reporting process could be better distributed and cover the main processes of those systems.  Consider including information on updates and changes in policy on the incident reporting and root cause analysis (RCA) system possibly through the Lessons Learned Newsletter.	An information leaflet is being produced to inform and assist staff with all aspects of incident reporting and the Incident Reporting procedure is being reviewed and updated.  Notifications of system improvements and changes will be published in the new 'Pulse' Magazine.
The Risk Management Team should consider reviewing the content of training.	A new incident reporting training package was rolled out in July 2014 with interactive training; and dates are in place up until April 2015. A new training package for managers has now also been completed and is being rolled out to assist managers to manage incidents and complete RCAs.
The Risk Management Team should ensure all staff receive feedback automatically from their incidents.	All staff now receive automatic feedback from incidents they have reported, through a mandatory feedback section in the Manager's Form, which is automatically sent to the reporter on closure of the incident.
The Risk Management Team should ensure the organisational hierarchies are reviewed periodically regarding departments and staff and make users aware of the update times.	A notification list has been sent out to all areas for populating. Notifications are being updated by the Incident Team on receipt. The notifications list for incidents is now being refreshed and updated on a regular ongoing basis.
The Risk Management Team should consider reducing the number of managers an incident is sent to.	A new notification list was sent out to all areas for updating. This required a manager and deputy for each area, therefore reducing the number of managers for each incident. Additional notifiers are added as required for individual incidents.
The Risk Management Team should consider clarifying how incidents should be managed that occurs outside the Trust with other organisations.	A new escalation process has been initiated whereby incidents which have been reported on the Safeguard system which have occurred outside the Trust are then sent to that provider for investigation and feedback. Feedback is then attached to the incident on the system. This process now works both ways and we receive incidents reported at other Trusts for us to investigate and feedback.
The Risk Management Team should consider reviewing the access permissions for senior management within the divisions to manage and extract data on their areas of responsibility.	Ad-hoc one to one training has taken place with Quality Managers and other senior managers on the web extractor system. Standardised reports have been compiled for divisions giving direct access to the live data on the system. Data requirements are discussed at the monthly Quality Managers meeting and at the bi-monthly LIRC meetings. A six month review has now taken place through LIRC and feedback has been positive.

You said	We did
The Risk Management Team and Information Technology Team should consider how the reporting of patient details (NHS numbers) for community staff is dealt with.	The system currently uses a search engine for hospital numbers and NHS numbers and also allows manual entry of patient details (Name, Date of Birth, Hospital and NHS numbers).
The Information Technology Team should consider reviewing the speed of the Safeguard server.	Funding was approved for an upgrade of the server supporting the Incident Reporting system and this upgrade has now taken place and the system speed has improved.
The Information Technology Team should consider reviewing the connectivity problems for the North Locality.	IT has rolled out the domain upgrade programme for the North of the patch and this project is due to be completed by March 2015. Alternative reporting processes are in place until completion.
Managers should ensure the down-grading of incidents is explained on the incident form so staff understand the rationale.	This has been incorporated into the Managers' Training Package.
Managers should ensure that feedback on the incident form is objective and focuses on the difference that has been made to the patients experience by the reporting the incident.	This has now been incorporated into the Managers' Training Package and also the Incident Reporting Training Package.
Medical Staff need to become more engaged with the incident reporting process.	Heads of departments receive all incidents which involve medical staff and the Medical Director is working on new structures to help improve medical staff engagement with all aspects of risk management.
All staff need to ensure they provide all the relevant incident information so a comprehensive investigation can be done by the manager.	This is incorporated into the reporting Training Package and the Manager Training Package. As part of the incident process incidents are returned to reporters or managers notified (dependant on status of incident) when further details are required.

# Simulation tests viral procedure

The Insitu Simulation team conducted a simulation just prior to Christmas to assist the Emergency Department team to assess specific areas of their emergency procedures.

The Trust had recently initiated an emergency procedure for the Management of Viral Haemorrhagic Fever (VHF) including Ebola. Alongside this a dedicated programme of training for 'Donning & Doffing' the Personal Protective Equipment had been developed and delivered. Insitu simulation was undertaken to evaluate clinical and non-clinical procedures, in actual working environments to ensure that future actions and recommendations were realistic to patients and staff's needs.

In the scenario participants were

presented with a patient actor in the first instance and then a high fidelity simulation manikin. Participants were asked to complete the Viral Haemorrhagic Fever procedure. A number of positive areas of practice were highlighted:

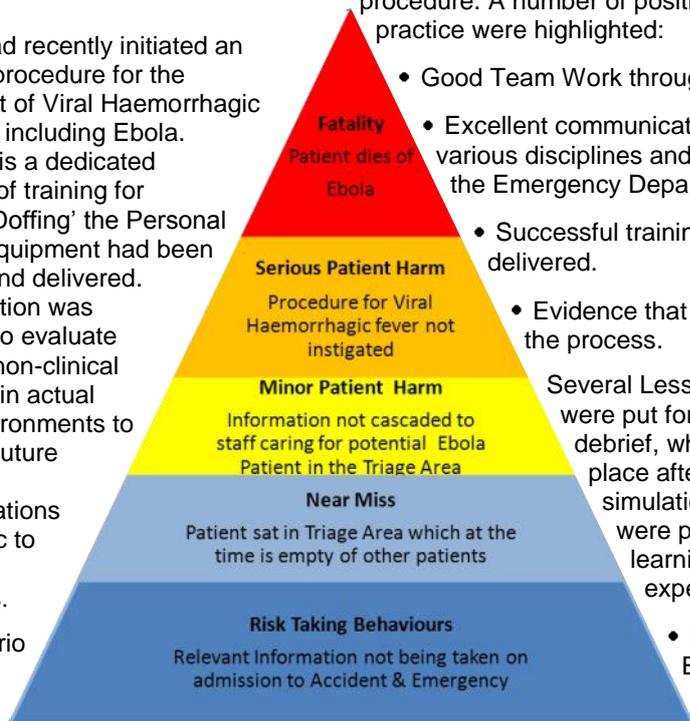
- Good Team Work throughout.
- Excellent communication between various disciplines and areas within the Emergency Department.
- Successful training had been delivered.
- Evidence that staff knew the process.

Several Lessons learnt were put forward at the debrief, which took place after the simulation. These were put into learning experiences:

- Staffing - Escalating roles

between the 'donning' nurse and trained observer swiftly to ensure the patient is dealt with quickly and efficiently.

- Equipment - There were a number of items sent for during the scenario therefore a pack of essential equipment is going to be made to reduce delays in sending for equipment.
- Environment – Waiting areas for patients ensure that essential equipment is available. A Patient pack will be made up and kept for this procedure.
- Action Cards – Changes were identified as necessary now the procedure has been trialled.
- Procedure – identification of the specific areas utilised in this procedure were needed, such as the entrance for the patient to the isolation room.
- Logistics – Staff needed practice at doing some tasks while wearing Protective Clothing.
- Communication – need a speaker telephone in the patient isolation room to make communication more effective.



# Man fined for abuse of hospital workers

Two of the Trust's security team members attended Blackpool Magistrates' Court in December to provide evidence regarding a Section 5 public order offence committed by a man in September 2014.

The man had been verbally and physically aggressive towards Emergency Department staff at Blackpool Victoria Hospital. Members of staff called for the internal security team. The man was given a medical check-up and the security staff then asked him to leave the premises. He became violent towards the security staff so he was restrained before being handed over to police. He was later detained and arrested.

The man pleaded guilty at Blackpool Magistrates' Court and

was fined £200 along with £40 costs and a £20 victim surcharge.

It was through the professionalism of the security team that the prosecution was achieved.



## Conflict resolution and breakaway techniques refresher training

Available to frontline staff who have face to face contact with patients and the public who have previously undertaken the Trust's Conflict Resolution course.

Clinical Skills Room – Moor Lane Mills, Lancaster.

- Tuesday, February 10, 2015
- Thursday, February 26, 2015
- Monday, March 9, 2015
- Thursday, March 28, 2015

Training Room 2, Derby Road Offices, Wehsam

- Friday, February 6, 2015
- Monday, February 16, 2015
- Tuesday, March 3, 2015
- Friday, March 20, 2015

There are two sessions each day: 10am-12.30pm and 1.30pm-4pm

To book your place contact Learning and Development on 01253 953175 or email [OLM@bfwhospitals.nhs.uk](mailto:OLM@bfwhospitals.nhs.uk)

## 2013-14 figures released for reported physical assaults against NHS staff



191, from 1,458 to 1,649 – a rise of 13.1 per cent. Overall, there was a rise of 8.7 per cent in total reported assaults from 63,199 in 2012/13 to 68,683 in 2013/14.

Richard Hampton, Head of External Engagement and Services at NHS Protect, said:

*“No NHS staff should be physically assaulted and we encourage staff who are victims of violence to press charges against assailants.*

*“Those who work in the NHS have the right to provide care in a safe environment. Employers must do all they can to support staff in preventing incidents and pursuing offenders.*

NHS Protect has released the 2013-14 figures for reported physical assaults against NHS staff in England. These figures were collated from 266 health bodies across the country.

The number of criminal sanctions following reported assaults has risen by

## Important Security Advice

Staff are reminded to adhere to procedures on access and the use of security equipment. Staff should not lend access cards to others, wedge doors open and always be aware of the possibility of 'tailgating'.

Where number pads or similar locking devices are used, codes should be changed on a regular basis and codes not divulged to those who are not entitled to access those areas.

## Is that right?

Whilst at work if you hear or see someone or something suspicious or out of place please don't ignore it - report it to your LSMS's on ext 5616/1217 or call the Security Manager on ext 5192. If you are on the Victoria Hospital site call internal security on ext 3063.

## Annual bereavement appeal

More than £2,800 has been raised to benefit bereavement care on the Fylde coast, thanks to an annual appeal.

The Tree of Lights Appeal gives people the chance to remember their lost loved ones at Christmas while raising money for an important cause.

This year the appeal, which includes the Tree of Lights ceremony and hospital staff who donate by sending their Christmas Wishes through an online donation, raised a staggering £2,807. The appeal is organised by Trust charity, Blue Skies Hospitals Fund and the Chaplaincy team.

Head of Fundraising, Amanda Bennett, said: "We are thrilled that once again so much has been raised. This money will be used to help those who find themselves in extremely difficult circumstances. We would like to say a massive 'thank you' to everyone who made a donation."

The money will be spent on Comfort Care Packs, which include snacks, drinks and toiletries. They will be given to the families of critically ill patients.

## Skydive in memory of dad

**A charitable teenager has raised a staggering £640 for the Lancashire Cardiac Centre in memory of her dad.**

Freya Joensen, 17, from Fleetwood, had always spoken to her dad, Paul, about doing a skydive. The pair were talking about Freya finally taking the plunge when Paul died in April last year.

Mr Joensen, 51, had suffered a heart condition for 14 years and had attended Wythenshawe Hospital to undergo a transplant operation. Unfortunately, doctors said he was too poorly to have the procedure and he died at the hospital a short time later.

Freya, a photography, creative media and ancient history student at Blackpool Sixth Form College, decided she would do her skydive in her dad's memory and use it to raise money in thanks for the many years of care he received at Blackpool Victoria Hospital.

Freya said: "It wasn't long after dad died that I decided to do something in his memory. We'd always talked about me doing a skydive and it's something I'd



always wanted to do, so it made sense to do it for dad. The dive itself was fantastic."

Freya's dive raised a total of £642, which has been given to Blue Skies Hospitals Fund, the charity behind Blackpool Teaching Hospitals NHS Foundation Trust, for its Heart of Gold Charitable Fund – supporting the Lancashire Cardiac Centre.

Head of Fundraising, Amanda Bennett, said: "What Freya has done – turning her grief for her dad into a positive charitable experience – is truly remarkable."

## Volunteers

Compassion

## Make a difference and become a Trust volunteer

A major recruitment drive is underway to encourage more people to become volunteers for the Trust.

Volunteers play a hugely important role in the work of the Trust and new recruits are always welcome.

The Trust is looking for people from different backgrounds to work in various roles.

One of the roles involves working on the Blue Skies Trolley. Volunteers for the service help to manage the trolley as it makes its rounds of the hospital, providing refreshments for patients.

The Chaplaincy team seeks to be available to people in need of spiritual support during their stay in hospital. Chaplaincy volunteers are drawn from a wide variety of local faith communities. They support the hospital Chaplains on their visits to patients, relatives and friends.

Volunteer Health mentors give health tips to patients, visitors and staff at Blackpool Victoria Hospital. They engage with people at Health Information Points and with the mobile information trolley on hospital wards.

The Library Trolley visits wards and offers a wide selection of books. 'The Listeners' are Patient Experience Volunteers who help to distribute and collect Patient Experience surveys.

Volunteer Navigators are the first point of contact for patients and visitors entering the hospital.



**Volunteer Navigators at the official opening of Blackpool Victoria Hospital's new main entrance**

The Trust has a Reader Panel of volunteers who proof read information leaflets and booklets. Star Buddies offer support to breast-feeding mums on the maternity wards at Blackpool Victoria Hospital. Department helpers are based in areas such as A&E, community hospitals and many more.

If you're interested in volunteering look on the website [www.bfwh.nhs.uk](http://www.bfwh.nhs.uk), email Catherine Henshaw at [Catherine.henshaw@bfwhospitals.nhs.uk](mailto:Catherine.henshaw@bfwhospitals.nhs.uk) or call 01253 957994 and leave a message.

# Humanitarian surgeon honoured by Prime Minister

**Mr Steve Mannion, a Consultant Orthopaedic and Trauma Surgeon at Blackpool Teaching Hospitals, met with Prime Minister David Cameron on January 12 at a reception held at 10 Downing Street.**

The celebration was held to honour UK humanitarian workers who have helped people overseas.

Steve combines his work as an orthopaedic consultant with being the surgical lead for the UK's Civilian Humanitarian Field Hospital.

He was deployed as a member of the United Kingdom International Emergency Trauma Register (UKIETR) to Typhoon devastated Tacloban in the Philippines in 2013 and as part of the UK's humanitarian assessment team to the Gaza conflict in 2014. He also works as a consultant to the international physical disability charity CBM, teaching and training surgeons in the less developed world in the treatment of musculoskeletal

conditions. In 2014 he visited projects in Laos, Ghana, Malawi, the Democratic Republic of the Congo, Myanmar and Papua New Guinea. He is

also the Medical Director of the Global Clubfoot Initiative, a consortium of non-governmental organisations dedicated to the elimination of clubfoot disability worldwide.

Steve said: "I was honoured to be invited to the Prime Minister's reception and valued the opportunity to discuss with him, and Justine Greening, Secretary of State for International Development, further improvement of the UK's International humanitarian surgical response."



Mr Steve Mannion meets David Cameron at Downing Street

## Life changing weight loss thanks to support

Two members of staff have lost life changing amounts of weight thanks to the support they received from the Trust and their colleagues.

Shelley Cooper, Strategy & Business Development Administrator, has lost more than five stone in the last year. She has thanked the Trust's Occupational Health and Physiotherapy departments for their support and giving her the push she needed to make a change to her life.

Shelley said: "I was having problems with my back and referred myself for physio. They advised me that to make it better I would need to lose some weight."

Shelley then took advantage of the Slimming World sessions offered by the Trust and from then she hasn't looked back with the weight, slowly but continually dropping off.

She said: "I started my classes on January 15, 2014, and they made a massive difference to my life because they taught me I didn't have to be on a diet all the time and starve."



"You do have to make lifestyle changes. I now often walk the five miles round trip to work and I actually enjoy it. I have started yoga as well to help my back and I feel the best I have in years."

"I should have done this years ago and I would really like people to know the support really is there. My

Physio, Deidre McCormick, was a massive help and I owe her a lot.

"It's never too late and, although it may seem daunting at first, a few small changes can make a massive difference."

Meanwhile a domestic at Blackpool Victoria Hospital is gearing up for his first half marathon after a dramatic change in lifestyle.

John Dugdale, 43, has lost an amazing four stone since August last year and is getting set for his first endurance run which takes place in Blackpool in February.



He said: "I had reached 17 stone four pounds, the heaviest I had ever been, and I just decided one day that enough was enough."

"I decided to start running. I had two weeks off and went for it."

"It was really hard at first but I soon got better and within those two weeks I had lost two stone."

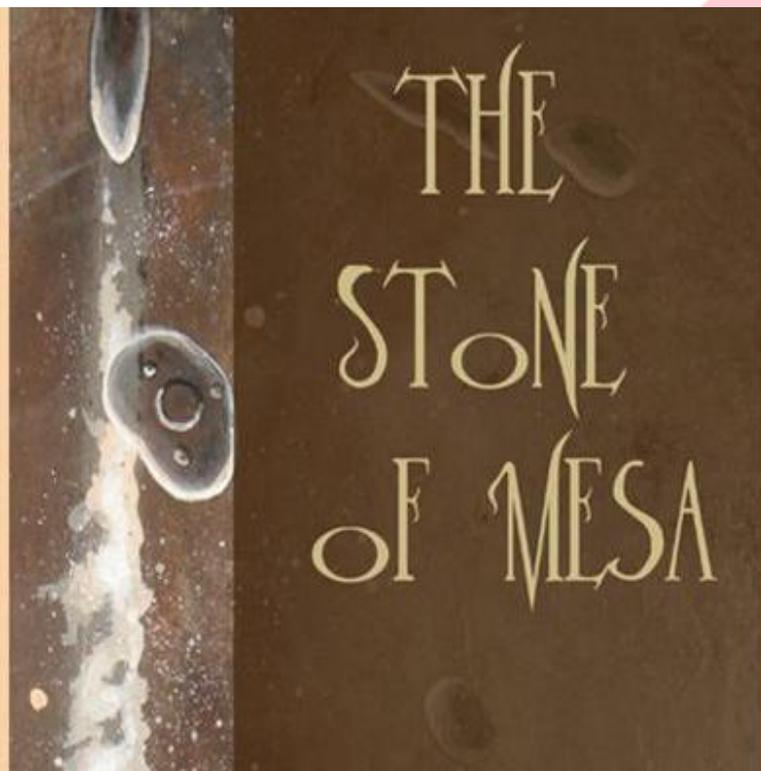
"The reaction I got was amazing. People were telling me how well I looked and it felt good and encouraged me to do even more."

"One lap of Stanley Park became two and so on and I am now up to five. I go running six times a week and can't wait to get out there no matter what the weather. I feel so much better and it has turned my life around so much."

John said he was really grateful for the support of his colleagues on Ward 19.

John is running the Blackpool Half Marathon on February 22 and is raising money for Trinity Hospice. If you would like to sponsor him please contact the ward on 01253 953419.

## Fantasy life is a novel success



Helen Duncan and (left), the cover of one of her books

### From nursing specialist to published author, Helen Duncan is leading a life that many people fantasise about.

Helen, who currently works as a Team Leader for the Trust's Pulmonary Rehabilitation Service in Lancaster, has just launched the second book in her fantasy fiction trilogy.

The Stone of Mesa was released on November 29 and she is already working on the final novel in the Myriar Trilogy.

Helen says she feels incredibly lucky to work in nursing as well as being a published author of supernatural thrillers.

Originally from Ireland, Helen grew up in Manchester and has lived in Carnforth for the last 24 years. Based at the Trust's Slyne Road offices, Helen also works in Practice Education Development.

She said: "I have always written. I come from a big Irish family of six kids. Writing was where I found my space."

Working part time for the Trust means Helen has time to pursue her passion for writing. Her nom de plume is Frion Farrell and the first book in the trilogy – The Round Spear – received critical acclaim in online reviews.

The Round Spear tells the story of Helen's heroine Kier Morton and an ancient and malignant artefact, which is reshaped and hidden in Peru, but is inadvertently moved to Northern England. Along the way a secret world is revealed and the artefact threatens to make the earth uninhabitable to humans. The Stone of Mesa continues the story of Kier Morton who regroups with a diverse collection of individuals.

"I would call it contemporary fantasy," said Helen. "It's the genre I read the most. The reason I have chosen it is that it's a tool for the exploration of ideas. In fantasy the questions you can explore are fundamental. It's not escapism. It's a way of exploring the intricacies of reality."

"The Stone of Mesa is partly about everyday violence that corrupts without seeming to corrupt. It's an exploration of inner challenges and how the characters try to find their own identity."

Inspired by writers such as Orson Scott Card, Tolkien and David Eddings, Helen uses places such as Morecambe (named Pulton in The Stone of Mesa) and North Yorkshire as locations for her books.

She studied English Literature at Lampeter University in Wales and also did teacher training at St Martin's University in Lancaster. Her husband Alan Duncan is a teacher at Morecambe High School.

Helen decided on a change of direction and studied nursing in Chester. She was a Practice Nurse in Widness before moving to the Morecambe Health Centre.

Helen said: "I worked at Morecambe Health Centre for 20 years. I have been a mentor and I have worked in nursing education."

"Practice Nursing is an incredible branch of nursing. It is so varied and it includes so many specialisms. You get to build long-term relationships with families and the community. It's a wonderful job as long as you want to carry on learning. I have been very fortunate to work with a very distinguished group of people in Morecambe and Lancaster."

Helen has two children; Matthew, 28 and Jenny 25. Matthew has followed in his mum's footsteps and has done a Creative Writing degree. He has been able to give Helen some valuable advice about getting published.

She added: "It's tremendously gratifying to know that you have written something that someone wants to publish."

The Myiar Series is available through Word Branch Publishing, Amazon, Barnes and Noble, Kindle and other bookshops worldwide.

## Hard work pays off as Naomi gains her Masters degree

A member of the Community Brain Injury team has seen her hard work come to fruition after collecting her Masters degree.

Naomi Saul graduated from Birmingham University recently after studying part time for two years and says that although it was hard work she would encourage other members of staff to undertake a similar course.

After receiving a Merit for her MSc in Brain Injury Rehabilitation she said: "I

was delighted to pass because it is a great achievement.

"It is hard work doing something like this on top of a normal job and having a family, but it really is worth it.

"If I can do it anyone can do it and it does give you a real sense of achievement and undoubtedly improves the way you see things at work and improves the quality of service you can give your patients."



Naomi Saul with her certificate

## Charities' £20k boost thanks to Trust secretary

**A CHARITY ball organised by a member of staff in memory of her late brother raised more than £20,000.**

Judith Oates, Foundation Trust Secretary, organised The David Oates Memorial Charity Ball at Blackpool Football Club after the death of her brother who was a well known BBC sports commentator.

David's tragic death in February 2013, at the early age of 50, was caused by a rare form of air-born virus resulting in Myocarditis.

The event, which was attended by football broadcasting names and former BBC 5 Live Sport colleagues including Jimmy Armfield (CBE), Dave Woods, Mark Chapman, Sir Trevor Brooking, Mark Lawrenson, Eleanor Oldroyd, Mark Pougatch and John Murray, raised a total of £20,336 (from ticket sales and proceeds from a live auction, sealed bids auction and raffle). All proceeds were donated to charity – the British Heart Foundation (£8,086) and the Blackpool Branch of the Royal National Lifeboat Institution (£12,250).

David was a keen runner and ran several marathons, with one of his chosen charities being RNLI Blackpool. The donation to the BHF will go towards research into Myocarditis.

Match of The Day 2 host Mark Chapman was compere for the evening – he was an office junior at BBC Radio Manchester in the early 1990s where David showed him the ropes of the broadcasting world.

BFC Legend Jimmy Armfield gave a light hearted speech on the contrast between playing conditions in his prime compared to the present day – David had been a friend of the Armfield family since age 11 and circumstances led to Jimmy and



Imogen and Kate Oates, together with close family and friends, present a cheque to the RNLI Chairman Charles Hunter-Pease

David working together in sports media in Manchester from the mid-1980s. Numbers at the Ball were swelled by a large contingent from Ealing in West London, where David lived with his wife Charlotte and their two young daughters, Imogen and Kate, and where he played an active role in the community.

Judith said: "As one of the main organisers of the event, I was delighted that we raised so much money – it was significantly more than we anticipated and the two charities (British Heart Foundation and RNLI Blackpool Branch) were extremely grateful.

"I would like to thank those who attended and purchased raffle tickets. Those attending from the Trust included Wendy Swift, Tony Shaw, Karen Crowshaw, Rebecca Bridge, Cheryl Blofeld, Anita Ivett, Megan Fraser and Hayley Blofeld, together with other NHS colleagues including Louise Talbot, Anne Cardwell, Dorothy Gardiner, Shirley White and Sue Tootell. Special thanks to Rebecca and Louise for arranging their tables and

promoting the sale of raffle tickets. I would also like to thank Derek Quinn for contributing to the raffle prizes (tickets for football matches at both Fleetwood and Morecambe)."

Amongst the star prizes were a host of VIP tickets including Centre Court at Wimbledon, Cricket Test Match at Lords, Grand National, Rugby League Grand Final, England versus Peru Football Match at Wembley, 2014 Tour of Britain Hospitality, Shrek on Tour, Football Hospitality Packages, Williams F1 & Experian Factory & Museum Tour, Radio Two Hyde Park Concert, Clare Balding Tour Package and Pet Shop Boys Concert. In addition, there were signed shirts from Lewis Hamilton/Nico Rosberg, the England Football Squad and several Premier League Football Clubs.

The British Heart Foundation's local Fundraising Manager, Barbara Dunn, said: "We'd like to thank David's family and friends for organising such a fantastic event and for presenting us with such a generous donation."

# Under the Spotlight

**This month's guest is Tom Rushworth who is responsible for A&E and AMU rotas**

**Where was your place of birth and where do you live now?**

I was born in Blackpool Victoria Hospital and I now live in Staining.

**Best childhood memory?**

I'm a huge theme park fan so I would have to say visiting Florida and seeing Mickey Mouse in Disneyland – though I was slightly scared of the costumes they were dressed in.

**How long have you been working with the Trust and what is your present post? If you weren't doing the job you're doing now, what would you have liked to pursue a career in?**

I've worked for the Trust for just over a year. I started in the Stroke Unit where I feel I made a positive impact. I now organise the doctors' rotas in A & E and AMU. My greatest regret was not taking A-Level Chemistry at School which is a pre-requisite for studying medicine. I would really like to have become a doctor.

**Who is, or has been, the most inspirational figure in your life?**

Aside from obvious family members I would have to say Blackburn Rovers Turkish star Tugay, who is my all-time footballing idol. He was still playing at the top level when nearly 40 years old.

**Alive, or dead, from any period of time, which three dinner guests would you like to invite round for a meal or a chat?**

Most definitely the late Jack Walker for one. I'm sure I'd be able to talk all day about football with him. Being a huge boxing fan, the world super middle weight champion Carl Froch would have to be on the list. Despite his fame he seems very cool and down to earth.

Charles Darwin, one of the greatest legends in the field of biology would be definitely a guest.

**Most frequented restaurant and absolute favourite dish?**

Poulton has some great restaurants. I love Rico's and Thai Mews. My favourite dishes are the mixed starters and Thai Red Curry.

**What food would you really turn your nose up at?**

Mushrooms – can't stand them – texture or taste!



**What is always in your fridge at home?**

Milk – the drink of champions.

**Any historical event, if you could put yourself there, what would it be?**

The Christmas Truce of 1914. In the face of brutality, humanity amongst fiercest enemies lies within.

**Sport; do you support any clubs/ individuals, or maybe participate?**

As you will already tell, I'm a huge Blackburn Rovers fan and a season ticket holder. I've played football ever since I can remember. I currently play 5 a side at Vida every Tuesday and used to be quite a competitive badminton player during my school days.

**Any situation or event, what is the most terrified you have been? What is your greatest fear?**

Fortunately I've not been in too many distressing situations, but coming face to face about 10 feet from a Rhino in the South African bush was quite daunting! The most turbulent flight home I've ever experienced did nothing for my fear of flying either!!

**Outside of the work environment, what subjects interest you?**

I love sports in general but my greatest interests are football and boxing. I also like cinema, listening to music, dogs, and a good night out!

**One item, object, appliance you use daily, you couldn't do without?**

My car.

**What is the best piece of advice you were ever given?**

If you fail to prepare, prepare to fail.

## Bands night is a hit



**Mark Taylor (centre) with friends at the charity event**

A hospital worker, who promotes bands in his own time, held a gig night for his 50<sup>th</sup> birthday to raise money for the care of premature babies.

Mark Taylor from Blackpool, Assistant Stores Manager at the Trust, promotes bands through his popular Facebook page.

Mark put on ten bands over one weekend at Uncle Tom's Cabin in the resort and raised more than £1,500 for the Trust's Special Care Baby Unit (Neonatal Unit) at Blackpool Victoria Hospital.

He said: "It was well supported by staff from the Neonatal Unit."

Shelley Piper, Neonatal Lead Nurse, said: "The unit is very appreciative of Mark's efforts"

## Dive for baby unit

It seems to have been a season for sky dives recently as another staff member took a leap from a plane.

Tracy Caines, a staff nurse from Clifton Hospital, took part in a tandem sky dive.

She said: "A friend approached me and said 'I have a challenge for you.'" His granddaughter had been in the special care baby unit when she was a baby about six years ago and he raises money through blue skies for the unit.

"My own son, who is now 20 years old and in the army, was born five weeks premature and spent five days in the Special Care Baby Unit (SCBU) so I just said 'yes!'"

"I was determined to do it even though I was terrified."

Tracy recalls: "I was introduced to the instructor and fitted for my jump suit and harness.

"It was very frightening when we did the free fall. I fell for 60 seconds.

"I thought I was going to die. It was a very surreal experience – frightening and thrilling all at the same time.

"I enjoyed the jump once the parachute was opened. I wouldn't do it again it was a once only experience."

# Announcements

## Hat trick of retirement parties

Three wards have held retirement parties for their colleagues as they left the Trust over the last couple of months.

Clinical Improvement Matron Jayne Hunt retired in December after 40 years with the Trust

Jayne started working here in 1974 as a cadet nurse and after qualifying worked on the gynaecology ward.

Jayne had a range of roles taking time to train for each. She took RN training to move on to a position in Theatre Recovery. She then became a Sister and took a position as a trainee Nurse practitioner, qualifying in late 2000. She undertook work in the pre-operative unit but also trained as a Surgeon's Assistant for the next five years.

In 2007 she was asked to set up a Vascular Nursing Service and worked within this role until mid 2013 when she took the post of Clinical Improvement Matron.



**Jayne Hunt says farewell to ward staff.**

Alison Crowder has not only been in the Trust for the length of her career which started when she was 18 years old, but has spent the entirety of it on the same cardiothoracic ward.

When asked for her top tip to making a happy career Alison said: "Love thy neighbour. Remember that everyone has off days so forgive them for those and just get along with people. If you can do that then colleagues become family and coming to work every day becomes a joy. I can't thank them all enough for the



**Alison Crowder retires after spending her entire career on the same ward.**

support they have given me."

Also retiring at the end of last year was Shirley Scholes from the Haematology department after being with the hospital since 1970.

It's not the first retirement for Shirley; she left shift work some years ago but came out of retirement to start back in the department following its restructure.

She told colleagues how she has been amazed and excited by the changes in technology from using mouth pipettes to move blood samples to the automated systems of today.

Shirley was presented with a framed print of an old picture of the hospital which showed the department in its heyday and the on call rooms where she would sit at night and try to sleep.

## Staff Lottery

Christmas overspend is no longer a worry as 2015 starts on a winning note for the lucky winners of the staff lottery in January.

Kieran Gallagher has taken the top spot winning a tremendous £2,080.

He is thrilled with his win and has been bragging about it to his office colleagues in the IT department. He said: "It's perfectly timed really with all the extra Christmas expense to account for. I don't have to worry about that now."

It's left Kieran able to look ahead to the rest of the year positively too. He added:

To join the Lottery this month go to <http://bfgwnet/departments/lottery/>

"I've got a couple of family holidays booked for later in the year so that's those paid for now too."

Second prize of £590 went to an unnamed winner whilst Annie Bucknill from Occupational Health scooped 3<sup>rd</sup> Prize of £290.



**Winner Kieran Gallager is happy with his win**

## Welcome to our new starters

Vijdan Gani Abdul-Majeed, Mohammed Ahmed, Christine Allen, Amy Anderson, Sarah Anderson, Sajjad Anwar, Jacqueline Ashton, Paula Bagshaw, Melanie Baines, Mary Bamber, Vivienne Banner, Warren Beal, Shannon Beavers, Chantelle Bell, Alexander Blackmore, Jessica Blyth, Claire Bradshaw, Linda Brennan, Kim Bridges, Liam Bromley, Pauline Brown, Sean Buckland, Melissa Buddo, Viorela Carp, Claudia Catacchio, Manisha Chauhan, Rajan Chopra, Tiberiu Cirstea, Pamela Collier, Melanie Coy, Debbie Croft, Megan Daly, Leanne Davis, Zara Dixon, Mahmoud Elkaramany, Anca Enache, Edward Estlin, Jennifer Field, Martin Foster, Yoko Fox, Zak Francis, Megan Fraser, Dominika Froehlich Jeziorek, Kevin Furniss, Adedolapo Gbadebo, Caroline Glynn, Tamlynn Gradwell, Rebecca Greaves, Jade Grigg, Michelle Grogan, Ann Halsted, Charlotte Hamer, Jane Harrop, Mondy Hikmat, Barbara Hilder, Lee Holden-Levett, Victoria Holehouse, Alice Hunter, Roberto Iavarone, Natalie Jackson, Rachel Jalil, Asima Javed, Jade Johnson, Mollykutty Joseph, Prabjot Kaur, Angela Keane, Stuart Kennedy, Michelle Lewis, Catherine Loftus, Natasha Manning, Craig Marshall, Judith Marshall, Sally Marshall, Dawn McCalla, Oriana Milia, Spanu Mitroi, Dalal Mohamed, Karen Molloy, Sam Morgan, Anthea Morton, Amy Muckalt, Toni Murphy, Lynne Murray, Terence Murtagh, Julie Myers, Tahir Nazir, Mihaela Neacsu, Christopher Needham, Nisha Nisha, Stella Ogala-Echejoh, Marina Oprea, Laura Pankhurst, Elliot Parish, Mark Pearson, Scarlett Peat, Rosemary Peel, Susan Pegler, Jennifer Pepper, Massimiliano Petrucci, Ewelina Pilarska, Oliver Pilkington, Reginald Potter, Lynn Potts, Marian Purgel, Catalin Racovita, Anne Radcliffe, Elle Rigg, Shirlane Roberts, Matthew John Roberts, Helen Robinson, Scott Robinson, Carolyn Robinson, Sally Robson, Michelle Rodgers, Helen Rogerson, David Rose, Rebecca Rutter, Kathleen Shaw, Martin Sheppard, Patience Shumba, Jane Sinclair, Amanda Smith, Ian Smith, Andreea Spoiala, Rachel Stephens, Nicola Stobbs, Pamela Sumner, Linda Swindail-Wright, Amy Theaker, Jade Traynor, Denise Ward, Laura Watts, Melanie Wharton, Leila Williams, Diane Williamson, Mary Wilson, Catriona Wood, Agness Woods, Lisa Worrall, Natalie Worthington.

## And goodbye to those retiring

Paul Charlesworth, Susan Edwards, Jean Fitch, Susan Grimshaw, Maureen Johnson, Michele Kelly, Dorothy Ronson, Judith Stafford, Lindsay Campbell, Lavinia Olsson, Patricia Reid, Shirley Wheeler, Mary Wilson

Wish You Were Here!

# Holiday Loans



Now You Can Be!



Loans from £200 - £15,000  
Call in or telephone 01253 478827



Blackpool Finance & More Credit Union is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm Reference No: 478917. Co-operative No: 7420-19 Birey Street, Blackpool, Lancashire, FY1 1EG. \*Loans subject to status. Visit our website for more details: www.bfmcu.co.uk



Blackpool Teaching Hospitals NHS Foundation Trust

## LEARNING & DEVELOPMENT FEBRUARY 2015 DROP-IN DAY

Dear All  
Just a reminder that the Learning & Development team are hosting the second of their 2015 monthly 'Drop-In Days' on:

**Monday 16<sup>th</sup> February 2015 @ the Simulation Skills Centre, BVH  
9.00am – 5.00pm**

If you are not sure where you are with your Mandatory Training, you are non-compliant or approaching non-compliance in some or all subjects, please come along. We can check your compliance and advise you with the next steps.

Practical Training is also available on the day, please see below:-

### Moving & Handling Update / Full Training (Booking Required)

There will be three 2 hour sessions during the day:-  
10.00am,  
1.00pm,  
3.00pm

You do need to book onto these by emailing [OLM@bfwhospitals.nhs.uk](mailto:OLM@bfwhospitals.nhs.uk) or phoning the booking lines 01253 95 5392 / 95 3175

Please turn up at least 5 minutes before the start of the session.

### Basic Life Support Update Training

There will be a trainer available from 9.00am - 4.00pm,  
There is **no requirement to book**, please drop in between the above times.

There may be a short wait. (Each session is 20-30minutes)

### Workbooks

You can collect workbooks from us and we can also sign them off for you once completed. We do have a quiet room available for anyone who would like to come along and complete the workbook



Blackpool Teaching Hospitals NHS Foundation Trust

# PREVENT Training - Terrorism awareness

For all front line staff (with face to face patient/public contact)

This is **COMPULSORY** training for staff attendance—there will be further dates to follow during the rest of the year

**Room S6- Football Stadium- Blackpool:**

Monday 16<sup>th</sup> February 2015 PM Session  
Monday 9<sup>th</sup> March 2015 PM Session

**Blackpool Victoria Hospital Education Centre:**

Monday 23<sup>rd</sup> February 2015 AM Session (Room 4)  
Tuesday 24<sup>th</sup> March 2015 PM Session (Lecture Theatre)

Session Times: AM Sessions: 9.30 -11.30am, PM Session: 2 - 4pm

**Objectives of this Training:** To ensure you understand the basic principles of the PREVENT agenda, including:

- What is CONTEST
- How vulnerable people are radicalised
- Signs and Symptoms of someone being radicalised
- What to do - the PREVENT referral process
- Understanding the CHANNEL process

This training is being delivered as workshop sessions

Please book through L&D Dept on 01253 955294

Or by E Mail: [olm@bfwhospitals.nhs.uk](mailto:olm@bfwhospitals.nhs.uk)

People Centred

Positive

Compassion

Excellence



Blackpool Teaching Hospitals NHS Foundation Trust

## Transforming End of Life Care Study Days - 2015



### Morning: 9.30am - 12.30pm End of Life Care Workshop

By the end of this session you will:

- Be able to identify the national 5 key enablers
- Describe what a plan of care for the dying person includes
- Understand the importance of advanced care planning
- Know how to apply the AMBER Care Bundle to improve patient care on your ward
- Demonstrate how the above can be put into practice

### Afternoon: 1.30pm - 4.30pm Sage & Thyme

This foundation level communication course is designed to:

- Help recognise psychological distress
- Communicate honestly and compassionately

This course is available to all staff, whatever your role is in the Trust.

### Dates & Venue

Thursday 22 <sup>nd</sup> January	Wednesday 24 <sup>th</sup> June
Wednesday 25 <sup>th</sup> February	Wednesday 16 <sup>th</sup> September
Monday 30 <sup>th</sup> March	Wednesday 21 <sup>st</sup> October
Wednesday 22 <sup>nd</sup> April	Wednesday 18 <sup>th</sup> November
Wednesday 27 <sup>th</sup> May	Friday 4 <sup>th</sup> December

All in rooms 3 & 4, HPEC (Education Centre) at Blackpool Victoria Hospital

To register on either or both of the sessions please email OLM at: [OLM@bfwhospitals.nhs.uk](mailto:OLM@bfwhospitals.nhs.uk)  
Please specify which session you wish to attend in your email.

Certificates will be provided to delegates who complete each session.

People Centred

Positive

Compassion

Excellence



People Centred - Excellence - Compassion - Positive

# Competitions and Games

## LOGO-A-GO-GO

Shown opposite are eight portions of well known logos, all you have to do is name the companies they represent?

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....
- 6.....
- 7.....
- 8.....

Name
.....
Dep't
.....
Contact No
.....

Return your answers by the closing date shown to:

Competitions,  
Communications Department,  
Home 15,  
BVH.

The first all correct entry drawn will win a £50 gift voucher courtesy of CDC Printers of Poulton

**Closing Date:**  
**Monday, 30th March, 2015**



Congratulations to Steve Mercer who works for the IT Department - he won the last edition's Pulse 'It All Adds Up' picture quiz.

Steve receives a £50 gift voucher courtesy of CDC Printers of Poulton.



The answers were:

- 1 + 3, Money Supermarket
- 2 + 10, Coca Cola
- 4 + 8, Birdseye
- 5 + 7, Guinness
- 6 + 9, McVities

## Recipe

### Chinese Beef and Peppers

#### Ingredients:

- 1 kg thin rump steak cut into strips
- oil for frying
- 2 medium onions chopped
- 3 or 4 peppers cut into slivers
- 3/4 cup of sherry
- 3/4 cup soy sauce
- 2 heaped tablespoons corn flour
- packet of bean sprouts
- 3 cloves of garlic



#### Method:

Fry the steak until slightly brown and add the garlic. Add half of the sherry and half of the soy sauce to the steak and cook for about 5 minutes.

Add 1 heaped tablespoon of corn flour mixed with a little water and mix through. Remove from pan and put to one side.

In a separate pan fry the chopped onions and peppers. Add the remaining sherry and soy sauce and corn flour and season to taste.

When cooked, add to the steak and heat through, adding the bean sprouts just before serving.

Serve with rice and enjoy!

## And finally...

We've been talking to research nurse, Peter Scott, who used to work for the Trust, about his work in Liberia where he coordinated the trial of a new Ebola drug (see pages 16 and 17). He told us people in the treatment centre liken health workers to 'Minions' from the animated film, thanks to the protective suits they wear. We can see why!

