

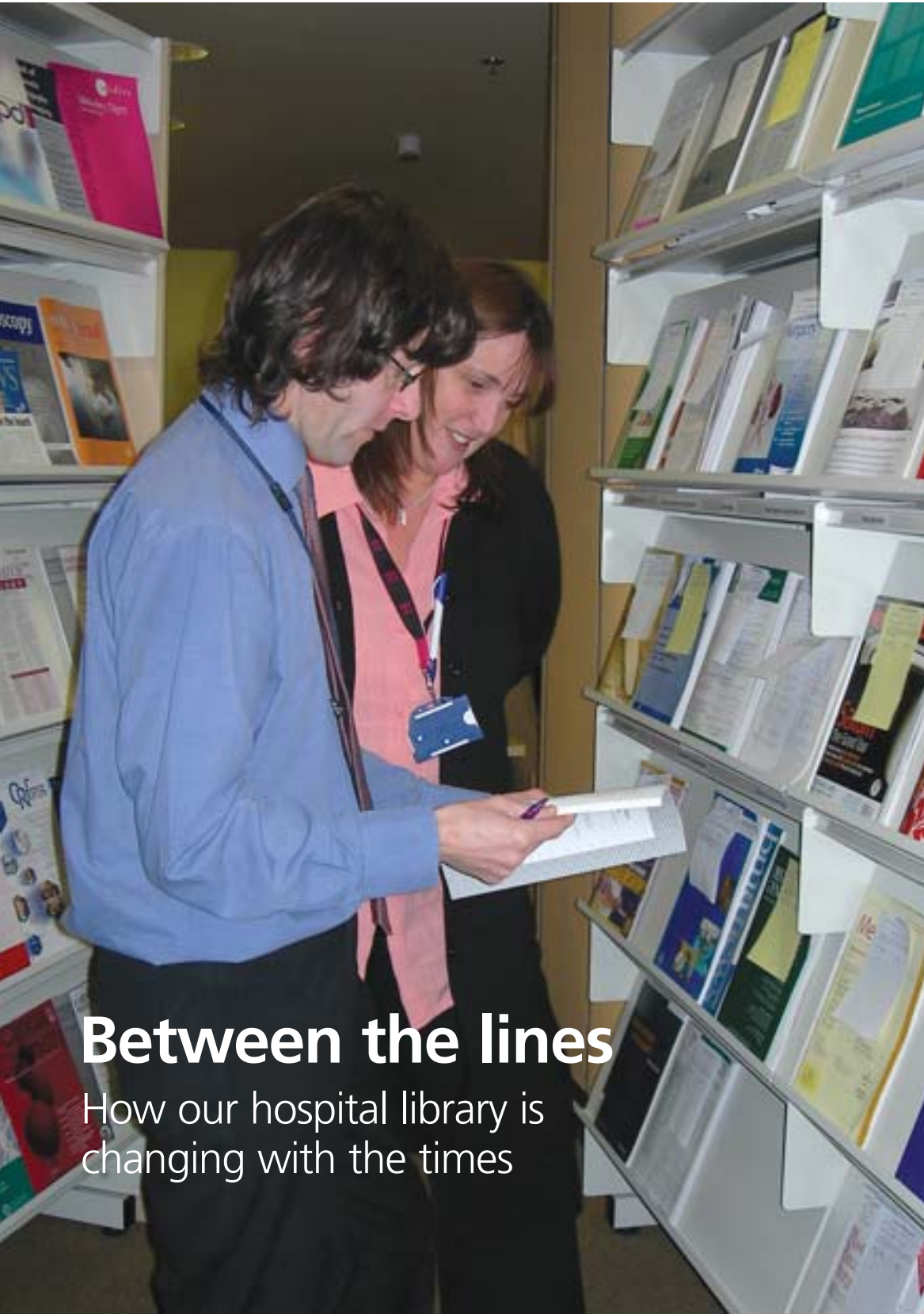
THE Pulse

Issue Number 23
February 2006

Norfolk and Norwich University Hospital



NHS Trust



Between the lines

How our hospital library is changing with the times



Simply the best

Dr Foster guide rates NNUH the best hospital in the eastern region



Sexual health

Why our family planning team is spreading its wings



A life in care

David Wright on learning from experience



Grounds for progress

Cromer's new renal unit starts to take shape

Norfolk and Norwich University Hospital

Colney Lane, Norwich, Norfolk NR4 7UY
Tel: 01603 286286 www.nnuh.nhs.uk

Restaurant

West Atrium Level 1, open daily 7am-2.30am
Serco cafe bars

Outpatients West and Outpatients East,
open Mon-Fri, 9am-5pm

WRVS coffee shop Plaza (East) open Mon-Fri
7am-7pm, weekends 11-5pm

WRVS shops East Atrium, open 8am-8pm
Mon-Fri and 10am-6pm weekends
Plaza (West) open 7am-8pm Mon-Fri
8am-6pm weekends

The Stock Shop (ladies' fashions) open
9am-5.30pm Mon-Fri and 12-5pm Saturdays

Serco helpdesk (for housekeeping, porters,
catering and maintenance). Call ext. 3333

IT helpdesk (for tel./computer faults): Refer
to Intranet homepage or call ext. 5555

Security Call ext. 5156 or 5656

Reception

East Atrium Level 1: ext. 5457 or 5458

West Atrium Level 1: ext. 5462 or 5463

Outpatients East Level 2: ext. 5474 or 5475

Outpatients West Level 2: ext. 5472

East Atrium Level 2: ext. 5461

Travel Office Ext. 3666

For car parking permits, ID badges, keys to
the cycle sheds, use of pool cars and the Trust
bicycle. Also information about buses and
other transport services

Bank

Cash dispensers in East Atrium Level 2
and in WRVS shop (west)

Chapel

Open to all. For details of services or to
contact the Chaplains, call ext. 3470

Sir Thomas Browne Library

Mon, Wed, Thurs: 8.30am - 5.30pm,

Tues: 8.30am - 8pm, Fri: 8.30am - 5pm

Holiday Playscheme

At Blackdale Middle School during school
holidays for the children of Trust staff.
Contact Heather Clarke on ext. 2883

Cromer Hospital

Mill Road, Cromer NR27 OBQ

Tel: 01263 513571

Restaurant

7.30am-1.30pm, 2-3.45pm, 5.30-7pm

Other departments are based at:

- **Cotman Centre**, Colney Lane, Norwich
Cellular Pathology, (Histopathology and
Cytology), Radiology Academy

- **Norwich Community Hospital**,
Bowthorpe Road, Norwich NR2 3TU,
Tel: 01603 776776: Breast Screening,
Health Records Library, Diabetes Research,
Pain Management

- **Aldwych House**, Bethel Street, Norwich,
NR2 1NR: Occupational Health (ext.3035):
Outpatient Appointments, Training, Nursing
Practice, Choice team, Norfolk Research Ethics
Committee, some IT services

- **The Norwich Central Family Planning
Clinic**, Grove Road, Norwich NR1 3RH.

Winning Fellow

TRISTAN MCMULLAN (pictured near
right), a Fellow in Oculoplastic Surgery, is
following in the footsteps of his mentor at
NNUH, Bijan Beigi, in being honoured by
the European Society of Oculoplastic and
Reconstructive Surgery (ESOPRS).

Tristan received the Society's prestigious
Junior Award for his research into the
genetic causes of ptosis (droopy eyelids),
12 years after Bijan Beigi became the first
ophthalmologist to receive the award.

"We have come a long way in the
treatment of droopy eyelids and it's been
marvellous to have the opportunity to learn
from Mr Beigi, who is a fantastic surgeon
and a very good teacher," he commented.

"Our particular specialty is relatively new
as it combines the techniques of plastic
surgery with those of ophthalmology. I find



it fascinating as there is always something
new to learn."

Tristan previously trained at
Addenbrooke's Hospital in Cambridge, the
Wessex Regional Genetics Laboratory in
Salisbury and the West Suffolk Hospital
before starting Mr Beigi's prestigious
Fellowship at NNUH.



Titanic boost for air ambulance

SUSAN BURROWS, an auxiliary nurse in
Rheumatology Outpatients, raised £1,000 for
the *East Anglian Air Ambulance* service with
a raffle and a quiz night, when visitors also
paid 50p to see an 8ft model of the Titanic
which her husband had built from scraps of
piping and wood.

"The model took six years to complete and
was quite a talking point!" said Susan, who
is pictured presenting the cheque to Peter
Mendham, fundraising co-ordinator for the
East Anglian Air Ambulance service.

STEPS TO COMBAT FRAUD

MEET OUR local counter fraud specialist,
Robert Brooker (pictured) who is working
with our Director of Resources, Anna
Dugdale, to help foster
an anti-fraud culture
throughout the Trust.



Travel claims are
currently being
investigated and staff are
reminded that they need
to show reasons for their
journey, together with receipts for public
transport, where appropriate, and that all
claims must be authorised.

Under Trust guidelines, mileage from
home to work should *not* be included
(guidelines are available on the intranet)
and ignorance of our expenses policy will in
future be no reason for defence.

- Please report any suspicions of fraud, in
confidence, to Anna Dugdale on ext. 7199
or Robert Brooker on 07721 977523.

Maternity team sets the standard

THE MATERNITY unit at NNUH is the
only maternity unit in Norfolk and Suffolk
to have achieved and maintained Level 2
status after a rigorous assessment by the
Clinical Negligence Scheme for Trusts
(CNST).

Clinical director Mr Edward Morris
commented: "We work in a fantastic
maternity unit, with risk management firmly
embedded in our culture. It was clear that

the assessor picked up from talking to staff
just how motivated we are to reduce risk to
our women and babies."

The eight core areas examined by the
CNST in Maternity are: clinical care,
implementation of clinical risk
management, organisation, learning from
experience, communication, induction,
training and competence, health records and
staffing levels.

NNUH is 'best in the east'

THE INDEPENDENT Dr Foster Hospital Guide has named NNUH as one of the top three hospitals in the country and the best in the East of England.

Overall, we performed significantly better than average on three key aspects of patient care: clinical quality, patient experience and efficiency. We also achieved above average ratings on the Dr Foster standardised mortality rate – the key measure of clinical quality used.

Since the guide was published we have also succeeded in delivering all our key targets for waiting times. Latest figures show that 80 per cent of patients now wait just three months

for routine treatment, a huge improvement on the picture a few years ago when they could wait up to two years. This success has been complemented by continued delivery of the four-hour A&E waiting time targets and the two-week target for cancer referrals.

Trust chairman David Prior commented: "A great deal of good work is being done across our Trust and it is very pleasing to see that this has been recognised by the most comprehensive, objective and independent hospital guide. Patients in Norfolk and beyond now know that they have one of the best hospitals in the UK on their doorstep, providing an outstanding level of care."

Just what the Doctor ordered

THE NEW YEAR brings new challenges but also some encouraging news for our hardworking staff with the publication of the latest Dr Foster guide to NHS hospitals.



This independent guide – the most respected and comprehensive survey of hospital performance – judged our hospitals to be the best in the eastern region and among the top ten per cent in the UK when assessed in three out of four categories. We were also the only teaching hospital to achieve this accolade.

While on the subject of accolades, we are delighted that our maternity team has once again been awarded Level 2 in the Clinical Negligence Scheme for Trusts after meeting even tougher criteria this year (*see page 2*). The department is the only maternity unit in Norfolk and Suffolk to achieve and maintain such a high level of risk management.

We are determined to ensure that patient safety continues to be our highest priority throughout the Trust and to empower each and every member of staff to raise any concerns they may have without fear of reprisals.

As the chair of our new Health Governance Board, David Wright, points out (*see Profile, page 11*), we all make mistakes occasionally but the important thing is to learn from our experience and to follow the very best examples of good patient care.

We have a robust system in place for escalating your concerns and the new Health Governance Board will ensure that these are considered and acted upon at the very highest level.

The Dr Foster guide is a welcome sign that our hard work is paying off – the challenge now is to ensure that our high standards are maintained.

Paul Forden

Chief Executive, Norfolk and Norwich University Hospital NHS Trust

Patients benefit from hand therapy

OUR NEW hand therapy team at NNUH has achieved national recognition after being shortlisted in the finals of the National Allied Health Professional and Health Scientists awards. The four occupational therapists work alongside orthopaedic surgeons in joint clinics to provide pre and post-operative assessment, advice, education, splinting, exercise and treatment programmes for all orthopaedic patients undergoing hand surgery.

Team leader Debbie Larson commented: "We operate an open door policy so that if a patient needs the services of any of the clinical disciplines they can get it immediately. The key to our success is having the therapy and surgical teams working closely together and the feedback



from our patients has been very positive."

One of the most common conditions that may require hand surgery is Dupuytren's, which leads to thickening and shortening of the connective tissue in the palm of the hand. Around one in six men over 65 in the UK is affected by this condition, which is more common in men than women.



CONGRATULATIONS to NNUH staff who raised £400 for Cancer Research UK when they took part in a 10k charity run at Sandringham in December. They are (from left to right) Rachel Peacock, Richard Wharton, Theresa Bowles, Jane McCulloch, Gabby Thorpe, Kevin Sargen and Chris Speakman.

WELCOME

...to **Mr Gabor Peley**, a general surgeon specialising in breast surgery, who has recently joined the Trust.

FAREWELL

...to the following staff who have left the Trust since 1 December 2005: **Patricia Stiff**, charge nurse in Paediatrics, after 32 years, **Diana Ives**, pre-admission co-

ordinator in Orthopaedics and Trauma, after 31 years, **Anne Bates**, nursery nurse in NICU, after 31 years, **Geoff Bluckert**, project lead on data protection, after 30 years, **Jean Ingham**, staff nurse on Cley Ward, after 27 years, **Sally Bolton**, nursing assistant on Cley ward, after 25 years, and **Hilary Fletcher**, phlebotomy co-ordinator in Cardiology, after 22 years.

LETTERS

WRITE TO SUE JONES, EDITOR, COMMUNICATIONS TEAM, NNUH

A journey to remember

WHEN I come to the NNUH three times a week for beneficial renal dialysis, I travel in a modern car with heating for cold days and air conditioning for the summer months. But this was not always so.

In 1928 we lived on a farm in the village of Stanhoe in North Norfolk, where horsepower literally meant horse power – 15 of them in all, known by their names and pulling power. My father's Rhone mare, Angelina, was so reliable that you could drop the reins and she would get you home from nearby

Docking or faraway Gayton.

When I became ill with an agonising pain in my right ear, my parents were told to 'get that boy to the Norwich Hospital, quickly'. With no other form of transport in the village, Angelina was duly harnessed and put into the gig.

Halfway to Norwich, at Fakenham, we called on the local saddler, Robert Powells, who was at that time the proud



owner of a brand new contraption, a motor car. It had two seats, for the driver and passenger, but two more seats could be provided by opening up the boot, an area known as the 'Dicky'. And so it was that, seated in the 'Dicky' and covered in blankets, I experienced my first car journey, watching the children spinning their tops and playing hop-scotch on the main roads as we sped along to Norwich. No traffic lights, no roundabouts, no zebra crossings...

In Norwich I was soon embraced in the terracotta arms of the old Jenny Lind Hospital where I spent ten days recovering from surgery. I left hospital free of pain and feeling as if I had swallowed the sunshine.

Soon it will be time to set off once again in the warm car. No Angelina, no Jenny Lind, but with a life still full of sunshine.

Clifford Shinn, West Runton

Joining forces to deal with dementia

A GROUP of staff at NNUH have undergone training to help them care for patients suffering from dementia.

Such patients often become more confused when admitted to hospital, which can complicate their treatment and subsequent recovery. The three half-day

workshops were arranged in conjunction with Norfolk and Waveney Mental Health Partnership NHS Trust.

Mental health liaison nurse Alex Wells says: "Many of my referrals are for elderly patients with dementia and I think it is important for staff on the wards who are

caring for these people to be as equipped as possible to respond to their needs."

Dementia and cognitive impairment accounts for 43 per cent of mental health patients and delirium accounts for a further 17 per cent.



THE RULE OF THREE

Did you know that 50 million working days are lost each year from smoking-related illness. If you are trying to give up, remember the Rule of Three:

- Cravings last three minutes
- The worst day is the third
- Missing the habit lasts three weeks
- If they manage to quit for three months, most smokers will quit for life.
- Nicotine replacement therapy and counselling can greatly increase your chances of success. These are available free of charge to all at NNUH. Call James Wade on 0791 9543709 for details.

New executive director

WELCOME TO Mr Anthony Habgood, currently chairman of Bunzl plc and chairman of Whitbread plc, who has been appointed a Non-executive Director to the NNUH Trust by the NHS Appointments Commission. He takes up his new role in April.

Mr Habgood, who lives near Stalham, is also the Senior Independent Director of SVG Capital plc. He commented: "I am delighted to be joining NNUH at a time of fundamental and positive change for the Trust." Mr Habgood's appointment carries a remuneration of £5,673 a year.

35 years of volunteering



NORA LONG, 75, celebrated 35 years as a volunteer at NNUH with a presentation from Trust Chief Executive Paul Forden. Nora, who helps out two days a week in the Day Procedure Unit, was one of 17 volunteers who received certificates for their long service. She began volunteering when her two children started school: "I offer the patients a cup of tea and run errands for the staff," she says. "I like to be helpful – if I was being paid, I'm sure I wouldn't enjoy the work as much as I do."

The volunteers were treated to a special Christmas buffet prepared by Serco.



NUCLEAR SCENE

Christmas came early to Nuclear Medicine when two very generous gifts were handed over. The first was a donation from The Friends of the hospital, via the Hospital Arts Project, to brighten up the windowless walls with photographs of local scenes by two artists, Harry Cory Wright and Faye Chamberlin. The other gift was a portable DVD player donated by Panks Auto Electrical, of Heigham Street, to entertain and distract younger patients while they are undergoing tests.

A joined-up approach to patient care

LORRAINE SANDERSON has been appointed to lead our new Integrated Discharge Team, which brings together specialist discharge nurses, social workers, health visitors and the community liaison team at NNUH.

This new initiative, funded jointly by the Trust, Primary Care and Adult Social Services, is designed to smooth the process of discharging patients from hospital.



Lorraine, who has worked across health and social care for over 18 years and was previously the adult social services manager at NNUH, commented: "I am looking forward to developing this new way of working that will help to address the problems associated with discharge planning and ensure patients have the most appropriate care for their needs."

Food is 'excellent'

INSPECTORS from the DOH have announced that both Cromer Hospital and NNUH offer patients an excellent standard of food. The NHS Estates Patient Environment Action Team (PEAT) found that food standards at NNUH had improved (from good last year) and the patient environment was judged to be good (the same as last year). At Cromer the food was found to be excellent (a big jump from acceptable last year) and the environment was acceptable (the same as last year).

Norman Cooker, a member of the NNUH Patient and Public Involvement (PPI) Forum, said: "Our own interviews with patients suggest they are pleased with the choice and quality of the food on offer."

If you can't sort it, report it!

NEW ARRANGEMENTS for reporting and investigating incidents are being introduced during January. The move reflects a growing emphasis nationally on patient safety and the need to re-assess how we respond to and learn from adverse events.

A single policy and procedure in two parts will replace the previous two documents covering incidents, near-misses and serious untoward incidents. The time limit for

submitting incident report forms has increased to three working days and there are significant changes for senior managers, including the need to grade incidents.

You can find the new Policy and Procedure on the Trust intranet and a special edition of the *Airlines* newsletter will provide more detailed guidance.

So remember: *If you spot it, sort it... if you can't sort it, report it!*

Ella's first taste of Christmas

AFTER EIGHT months of intravenous feeding at NNUH, Christmas dinner at home was a very special occasion for 16-month-old Ella McIlroy and her family.

Ella, who was born with a bowel abnormality, had her first operation within hours of her birth and this was followed by three more procedures to remove damaged areas of her bowel. She later underwent medical treatment for a rare digestive disorder and is only now enjoying a full range of solid foods.

"She became the ward mascot - everyone loved her because she's such a happy little girl!" said dietitian Rachel Pereira.

Paediatric surgeon Milind Kulkarni said her remarkable progress was an example of great teamwork: "It shows that the children's services at NNUH are geared to take on complex challenges and provide great results."



Ella is pictured with mum Laura Stenning and (left) dietitian Rachel Pereira

HEART PATIENTS and their families were invited to a Cardiology open day on 28 January to raise awareness of our cardiac services and to preview balloon angioplasty – a procedure to dilate narrowed heart arteries using a tiny balloon – which will be available at NNUH from June this year. The open day also marked the launch of the Norfolk Heart Trust Balloon Appeal to help support this new service as it develops over the next seven years. Donations so far include £25,000 from the Norfolk Heart Trust, £125,000 from the Friends of Norwich Hospitals and a further £25,000 from an anonymous donor.

The continuing rise in teenage pregnancies and sexually transmitted infections has had a corresponding impact on our hospital services. Now the Trust is reaching out to give young people the help and advice they need to protect themselves

TEEN effort

AROUND 10,000 people attend our family planning clinics in Norfolk each year. Most are seeking contraceptive services, but a growing number are taking advantage of a simple new screening service for chlamydia, one of the most common sexually transmitted infections.

The new screening service is just one of a range of national initiatives designed to promote sexual health among young people. And to ensure that the message is getting across, our specialist nurses are visiting schools, colleges and community centres to

meet the students and answer their questions.

“Family planning services provide advice and clinical support for large numbers of any young people, but despite this there are still high local rates of unwanted pregnancies and undiagnosed infections,” explains family planning consultant Kate Nash.

“Our screening programme in Norfolk has shown that around one in 11 teenagers have chlamydia without realising it, as the infection is often symptom-free. It’s

important that they get treatment for themselves and their partners before spreading it further.

“Fortunately, treatment for chlamydia is quite straightforward so it can be safely prescribed by our specialist nurses and GPs. We also work closely with the Grove Clinic for genito-urinary medicine, based at NNUH, and with the sexual health team based at St Andrews House in Norwich.”



‘It’s not just about dishing out

SPECIALIST NURSE Ruth Hine (*pictured above and left*) is enlisting the support of local youth workers to create a drop-in service for young people in schools and community centres. “Lots of youngsters are surprisingly ignorant about sexual health matters and often they are too embarrassed to ask for help,” she says.

“They get a lot of mixed messages from the media – some TV soaps give the impression that people are having sex all the time, and at an increasingly young age, but a recent MORI poll showed that the average age at which people have sex for the first time has actually gone up, from just over 17 in 2002 to nearer 18.

“This new service is designed to provide

information and advice that is appropriate for each individual. It’s not just about dishing out condoms, pregnancy tests and emergency contraception (the morning after pill) – although we do provide these free of charge – but also about talking and listening, building up the youngsters’ confidence so they feel comfortable about the choices they make.”

Ruth’s post is being funded for two years by the national Teenage Pregnancy Unit as part of a bid to halve the rate of pregnancy among the under 20s by 2010.

In Norwich in 2002 (the last year for which figures are available) the conception rate among 15-17-year-old girls was 4.2 per cent, compared to a



Above: Specialist Nurse Ruth Hine (centre) with Norfolk youth workers Geraldine McNulty and Sam Hope at the Bowthorpe Sure Start Centre and (right) two of the posters designed to make youngsters more aware of their own sexual health

Chlamydia: the facts

Chlamydia is spread by having sex and is symptom-free in 50 per cent of men and 80 per cent of women. If left untreated it can lead to infertility.

- The infection is a major cause of ectopic pregnancy and may also cause miscarriage, premature birth and eye problems in newborn babies
- Nationally, one in 10 young people between 16 and 25 are infected with chlamydia – in Norfolk the rate is currently higher at nearly 11 per cent, probably because screening services are more difficult to access in

rural communities.

- A simplified urine test is now available for all under-25-year-olds, with no need for a physical examination. Older age groups are referred to the Grove Clinic at NNUH for tests.
- Test results are available within two weeks and are communicated by text to a mobile phone, if negative, or by phone if positive. Antibiotic treatment consists of a single dose of four tablets and the effect is instant.

For details of clinic times, contact the Norwich Central Family Planning Clinic on 01603 287345



'We have a huge task ahead of us'

CHLAMYDIA SCREENING was first piloted nationally in 1999 and was launched in Norfolk in January 2005, funded by Great Yarmouth Primary Care Trust for a consortium of Norfolk Primary Care Trusts.

"We have a huge task ahead of us because we are targeting GP surgeries, schools, colleges and military bases throughout Norfolk," says Sue Oakley, one of two specialist nurses leading the chlamydia screening programme in Norfolk.

"The response to our 'pee in a pot' sessions has been tremendous – particularly from young men who are really keen to take the test. By Christmas we had processed 2,310 samples

and 274 (one in 11) were positive.

"We always phone the patient if the test is positive and we also contact their sexual partners to request that they take a test. It's important that we do this because the chances of complications increase with reinfection. Chlamydia is a major cause of ectopic pregnancies and can lead to miscarriage, premature birth and fertility problems.

"The young people we speak to are often very shocked when they get a positive result and say they feel 'unclean', but our results show you don't need to have lots of sex or be promiscuous to be infected – most of the young people we see have had only two or three partners.

"Chlamydia affects people of all ages and backgrounds – the good news is that the treatment is very simple and cures the problem instantly."

condoms'

national average of 4.3 per cent, although in Norfolk as a whole the figure was 3.5 per cent.

"It has to be said that some girls are happy about becoming pregnant and there are plenty of good mothers in this age group. However, there are those who would have made different decisions if they had known more about the consequences of unprotected sex, and it's those young people we want to reach.

"We are not judgmental – the service is confidential and we encourage the young people to take responsibility for their own health, to consult their GP if they need to, and to make sensible choices about their own lifestyle."



Pot luck: Specialist nurses Jayne Johnson and Sue Oakley stress that you don't have to have lots of sex or be promiscuous to test positive for chlamydia

READ ALL ABOUT IT

The Sir Thomas Browne Library is open to everyone and it's not just about books... Bridget Cole explains how the library is keeping pace with modern technology to play a vital role in health education and research

THE ROLE of 'librarian' conjures for many people an image of a bespectacled woman in twin-set and pearls who spends all day stamping books and saying 'Shhh...'

While we do still stamp books in the Sir Thomas Browne Library, technology has changed much of the work we do (and you won't see any of us wearing twin-sets!)

We now use a sophisticated Library Management System, linked to the UEA, to issue books and allow readers to reserve or renew their books online. Our library catalogue is available on the internet and literature searches can be done at the touch of a button.

We still need to organise our resources so visitors can find them, but we also have an important role to play in educating readers to use the technology effectively to search for the material they require.

A typical day starts at 8.30am when the first member of staff arrives to 'open' the library, although the library is never technically closed as all staff with a Trust ID badge may access the library at any time to use the computers or books and journals.

The opening routine involves making sure all the public computers are switched on, the photocopier is up and running and, most importantly, the computer passwords are reset from the previous day. These passwords allow visitors without Trust usernames and passwords to use our public terminals – an essential resource for some of our UEA students.

Although we share the workload, we all have our own areas of expertise: Eleanor does all our book ordering; Harriet's main

area of responsibility is photocopying; Lesley is responsible for sending out those awful reminder letters for overdue books and fines; John is the expert at tracking down obscure research papers; and Bridget deals with requests for literature searches and queries with Athens passwords.

Andy Parrett, the library skills facilitator for Norfolk, Suffolk and Cambridgeshire, visits most Wednesdays to do training sessions, and William Jones, the health librarian from the UEA, helps us develop our book and journal collections to complement the stock at the UEA.

Our library staff need to have some understanding of medical terminology – hypochondria is a common ailment when they first start to work here! – and a sense of humour is a valuable asset.

There is no pattern to a typical day; requests range from patients in pyjamas looking for the latest Catherine Cookson (we do not stock fiction) to junior doctors desperate to find papers for a presentation they are preparing. One caller asked to speak to Sir Thomas Browne – rather



difficult as he died 400 years ago!

Requests from journals published before 1999 involve a daily car journey to our overflow bookstore at the Cotman Centre on the Norwich Research Park – its third home since the hospital moved to Colney four years ago.

Here, the articles are photocopied before being forwarded to the requestor. We have recently purchased software to enable us to scan and send urgent items electronically from the bookstore, a service we already provide from the main library.

We pride ourselves on being able to meet

Facts about the Sir Thomas Browne library

- The Sir Thomas Browne Library contains 8,650 books related to healthcare and subscribes to nearly 200 current journals.
- On average, we have 210 visitors per day and there are currently 3,065 registered readers.
- Last year we issued 11,540 books

and downloaded 957 articles from electronic sources,

- We supplied copies of more than 2,600 articles to staff and students, plus another 1,900 articles to the Eden network, a co-operative library scheme covering the whole of the east of England.



Taking stock (clockwise from left): Librarian John Lolasso helps Beverley Myhill find a research paper for the palliative care team; library manager Bridget Cole (standing) with admin assistant Eleanor Fisher in reception; thoracic surgeon Nathen Balacumaraswami takes a moment to browse; library skills facilitator Andy Parret explains how staff can access journals at home using an NHS password; and clerical officer Rachel Barns uses the library to surf the internet



around 95 per cent of your requests within a few days. We have electronic access to libraries at the BMA, the Royal College of Surgeons and the British Library, and we belong to several co-operative schemes.

Last year we sourced more than 4,000 articles – some in electronic format – and a large part of our work involves downloading material or explaining to readers how they can do this for themselves.

Bridget and John both have professional library qualifications and John is our technology ‘expert’ – he can help with anything from transferring material via a USB memory stick to inserting images into your PowerPoint presentation.

Many enquiries relate to the use of clinical databases, such as Medline and Cinahl, which enable all NHS staff with an Athens password (available from the

library) to access up to 1,500 healthcare journals around the world. If necessary, special two-hour training sessions can be booked with Andy and these take place most Wednesdays.

We have close links with the UEA and any of our staff can borrow books from the main university library on presentation of their Trust ID badge and green NNUH library card, which we provide on registration.

Contrary to popular belief, our services are not restricted to medical staff – anyone is welcome to use the library facilities for research or study purposes. It is even

possible to study for the internationally recognised ECDL (European Computer Driving Licence) using the public computer terminals.

You can find out more about our services on the Trust intranet. Contact us via email: library@nnuh.nhs.uk, or call us on ext. 2890.

- *Congratulations to the winners of our recent quiz, sponsored by the National Library for Health. Alistair Bolt (Pharmacy), Simon Clements (Pathology) and David Fraser (Obstetrics and Gynaecology) all won vouchers for Chapelfield shopping centre.*

David Wright is passionate about the need for a joined-up approach to healthcare governance. Here he explains to Sue Jones why it is vital for us all to learn from each other

A life in CARE

IT WAS A holiday job working in a psychiatric hospital in Essex that inspired David Wright to pursue a career in social work: “I was fascinated by the whole area of mental health – the idea that you could work with families to make a real difference to their lives was very attractive to me.”

After qualifying as a social worker in London in 1969, he returned to social services in Essex and quickly progressed through the ranks, moving from Colchester to Braintree, Maldon, then Thurrock and eventually Norfolk, where he became Director of Social Services in 1990 after five years as deputy.

“It was tremendously rewarding to be a social worker in the seventies and eighties, as there was so much freedom to push the boundaries and develop new ideas,” he recalled. “Without centrally imposed targets, we could decide for ourselves how much or how little time we spent with clients, depending on their very different needs. We had a huge workload, but we also had the freedom to manage it in our own way.”

The move to Norfolk brought new challenges. “We had two major pieces of legislation to contend with – the Children Act of 1989 and the Community Care Act of 1990 – with all that this implied. Still, we created some worthwhile partnerships, particularly with the voluntary sector but also with the health service.

For example, I am very proud of the work we did to help reduce bed blocking by fast tracking hospital patients – for a time our record in this respect in Norfolk was second to none.”

Sadly, David’s 18 years with Norfolk Social Services were marred by personal tragedy – his wife Anne died from cancer in 1995 – and in 2000 his department faced searching questions following the death of

six-year-old Lauren Wright at the hands of her stepmother.

“It was a very difficult five years but I learned some valuable lessons during that time. For one thing, as a carer I was experiencing life as a consumer, rather than a provider of services, which was

“My decision to stand up and admit that we got it wrong brought the wrath of the media on my head. But I have no regrets about that”

enlightening as well as being truly humbling. Also, the Lauren Wright case was devastating in that a child whom we could have protected had died. However, this tragedy helped to highlight the difficult work that social workers do and assisted in

opening a worthwhile national debate about the risks and pressures on social workers.

“My decision to stand up and admit that we got it wrong brought the wrath of the media on my head. But I have no regrets about that. Such issues are never simple and, with Lauren, a complex network of factors led staff in all agencies to fail to see the danger signals. I stayed on as Director for another two years to deal with the problems because I believe it is vital to learn from our mistakes – there was never any question of running away.”

It is precisely because of David’s experience following the Lauren Wright case that he is now so passionate about the need for a joined-up governance strategy across the NNUH Trust (see box below).

“Healthcare Governance is not just about ticking boxes or meeting targets, it is about providing a mechanism whereby we can learn from each other,” he says. “We want to create a culture where all staff feel able to

What is the Healthcare Governance Board?

THE NEWLY CREATED Health Governance Board co-ordinates the work of three separate committees covering Clinical Governance, Environmental Governance and Resource Governance.

Chaired by non-executive director David Wright, the group includes the Trust’s Chief Executive and the executive chairs of the three governance committees, along with representatives from our Patient and Public Involvement (PPI) Forum and primary care.

“We all want the very best for our

patients. We all want to be associated with a hospital that is and is seen to be one of the best in the country,” says David Wright. “I am satisfied that there are adequate and appropriate controls and monitoring arrangements in place in our organisation, including staff appraisals. But these are just the building blocks. A good system of governance provides a mechanism for honest communication throughout the organisation so that staff feel pride in their work and confident that they will be supported in their efforts to improve patient care.”



acknowledge and learn from the best and the worst of what we do here, but without having the finger of blame pointed at them when things go wrong, as they will from time to time."

Since leaving Norfolk Social Services in 2003, David has been an active non-executive director of the NNUH Trust and he is National Chairman of Crossroads, an organisation that supports some 35,000 carers in the UK. He is a Trustee of the Norfolk Community Foundation, which was set up recently to raise charity funds that will always be available for good causes in Norfolk, and he serves on the Committee of the General Social Care Council for the regulation of social workers. A committed member of the Norwich Voices Against Violence forum, he has recently completed a review of six domestic homicides in Norfolk.

On a personal level, David has found happiness again with his Australian wife, Sue Spooner, a social researcher, and now divides his time between his work interests and his extended family of two daughters, two stepchildren and two grandchildren living here and in Australia.

"It's wonderful to have time to take life easily, to read, travel and potter at home, and although I am conscious that it sounds a bit pretentious, I am also very aware that my experience may be of use to other people. I am determined to make a difference to the lives of those who are unable to speak up for themselves.

"Overall I have been very privileged in my life and I feel a strong need to continue to use that positive experience where it may be of benefit."

COULD YOU BE THE VOICE OF CANCER PATIENTS?

Coral Warren, a member of the Norfolk and Waveney Cancer Network's Patient Partnership Group, explains how sharing experiences and voicing patients' concerns can make a real difference for all cancer sufferers



IT IS SAID that if you want to get something done, ask a busy person – and this is certainly true of the Norfolk and Waveney Cancer Network's Patient Partnership Group.

Many of our members are current or former cancer patients and carers who have played a vital role in the group since it was formed in 2001. Meetings are held every two months and discussions centre on issues that concern both patients and professionals, with the aim of finding ways to improve the patient journey for *all* cancer sufferers.

Patient members who attend these meetings believe their voices and opinions are heard and in many cases acted upon; sometimes immediate improvements can be made.

We are extremely proud of our achievements so far, which include reviewing our wig fitting service for chemotherapy patients – one member of the group made a dressing table for use in the hospital – and improving the facilities for patients who are undergoing chemotherapy.

Locally, there is a buddy scheme for patients suffering cancer of the oesophagus, and a visiting scheme for cancer patients in hospital. Support groups organised by some of the members include Pandora's Box, for gynaecological cancer patients, and a post-surgery support group provides organised badminton, yoga and aqua-stretch exercises at the UEA SportsPark for breast and gynae cancer patients, with some financial help from the Norwich Breast Cancer Resource Fund.

The Louisa Hamilton Centre Trust Bursary Fund provides financial help for

cancer sufferers who may wish to receive alternative treatments provided by the Bristol Cancer Help Centre. (There are hopes that a similar centre may be established locally.)

The Patient Partnership Group is lucky to receive financial support from the MacMillan Fund.

Some of our members represent patients' views at Cancer Network board meetings and at meetings concerned with site-specific cancers, such as breast and gynaecological. Some also volunteer to represent patients at national level,



An Aqua-stretch session at the UEA SportsPark for breast and gynae cancer sufferers

for instance for the Macmillan (Department of Health) Partnership, national genetic pilot projects and patient liaison groups at the Royal College of Radiologists, to name a few!

If you would like to join us, please do not imagine that you would be expected to become one of these very active members. All we ask is that you come along to support the group and make your voice heard.

• For more information contact Wendy Marchant at the Cancer Information Centre at NNUH. Tel: 01603 287048

The Viewpoint column is written from a personal perspective and does not necessarily reflect the views of the Trust. If there is a subject you feel strongly about, please send your contribution to Sue Jones, Editor, Communications dept, NNUH.

The prefabricated buildings that will house Cromer's new kidney dialysis unit are now being fitted out and should be fully operational by the end of April



The view from here

THE START of 2006 brought snow to North Norfolk but luckily this did nothing to delay building work at Cromer Hospital. The large modular buildings



that will house the eight-bed renal unit arrived in January and are due to be completed by the end of April. When operational, these facilities will make a huge difference to the kidney patients from North Norfolk who need regular, lifesaving dialysis and who currently travel to Norwich for their treatment.

The unit will be fully staffed by nursing and support staff who are now working in Norwich. We are also working with the Renal team to recruit volunteers who can support patients with transport and refreshments.

The X-ray and Ultrasound rooms arrived in the second weekend of January ready for the MRI scanner to be installed. We hope soon to have news of when this will be fully operational

Working alongside our chosen architects for the new Cromer Hospital, Murphy Philipps, the main user groups are meeting monthly to review and comment on the architectural plans, to develop operational policies and to begin work on the equipment schedules.

The groups include family teams and staff from day surgery, ophthalmology, outpatients, endoscopy, the Minor Injuries Unit, inpatient rehabilitation, administration, patient services, support services, renal services and imaging, as well as the GP practice and community management teams who will be working alongside us.

Many staff involved in these groups are able to draw on their experience of the move from the old N&N site to Colney Lane.

These are chilly but exciting and challenging times for our patients and staff. We look forward to the many new developments at Cromer that have been talked about for so long.

Helen Lloyd

Service Manager, Cromer Hospital

Just call for Fred

GOING BY the title of Estates Handyman, Fred Betz enjoys every minute of his day at Cromer Hospital. Whether he is changing a light bulb, checking the boilers or touching up paintwork, he is always ready to smile and pass the time of day.

"The staff pull my leg about whistling while I work, but I can't help it - I'm just happy!" says Fred, 61, who learned his maintenance skills in the US Air Force.

Originally from California, he came to Bedfordshire in the 1960s and decided to stay in England after meeting his English wife, Jill.

"I love the climate here. I love the people, the countryside, the whole way of life," he says. And working at Cromer hospital is great because we're like a big family. Everybody helps each other out and that makes you happy to



help them out too. Also, there's always something to do here, whether it's routine maintenance or fixing a piece of equipment, so I'm never bored."

With three children and a grandchild, Fred is fascinated by family history and has traced his wife's roots back to European royalty. He also loves gardening and has enjoyed flower arranging ever since he was a small boy. "It's a joy

to see the first snowdrops coming up and we even have orchids growing here in the hospital grounds."

After moving to Cromer in 2001, his wife Jill ran a bed and breakfast business and she is now about to join the hospital 'family' herself, as a volunteer.

"We both enjoy watching the competitions organised by the Friends of Norfolk Dialect – learning the local language is one of the challenges of living abroad," laughs Fred.

THE PULSE

Head of Communications, NNUH

Andrew Stronach (ext.3200)

Editor Sue Jones (ext.5944)

Pictures Medical Illustration, Sue Jones
Communications Officer

Hayley Gerrard (ext. 5821)

Please send your contributions for the April issue by 9 March 2006.