Issue Number 39 October 2008

THE

Norfolk and Norwich University Hospitals **NHS Foundation Trust**

DOCTOR

ICTORINYANG





Going with the flow The high-tech way to keep blood on track, p2



The eyes have it Teaching patients to regain their balance, p5



Keeping Abreast The patients with a vision to help others, p7



Changing views A new perspective for hospital art, p8

The flying consultant

Victor Inyang on staying cool in a crisis

BEST FOR BABY



BLISS, the campaigning babies' charity, has donated a valuable piece of equipment to our neonatal intensive care unit (NICU) to help new mothers express milk for their sick and premature babies. The Medela breast pump is designed to imitate the baby's natural sucking rhythm and is highly portable.

Sharon Stone nurse manager for NICU, commented: "We encourage all new mothers to express breast milk and most are happy to do so as they recognise the value of their babies receiving breastmilk during those vital first weeks.." The donation was made during Breastfeeding Week with support of Candis magazine and Medela.

• OUR BOWEL cancer screening programme is being rolled out to include all Norfolk residents aged between 60 and 75. More than 28,000 people will be invited to use a home testing kit over the next two years, starting in central Norfolk and extending to Great Yarmouth, Waveney and West Norfolk.

The gastro team at NNUH has picked up more than 150 cancer cases since screening began for the over 60s in 2006. Although bowel cancer affects more than one in 20 people, 90 per cent will survive if the disease is caught early enough.

A pinch of salt...

KIDNEY PATIENTS at NNUH were treated to a 'fluid and salt day' by our specialist renal dietitians to stress the need to control their fluid intake. Relatives, carers and ambulance drivers were interested to learn about the amount of salt in everyday foods. Among the prizes on offer was a hamper filled with lots of useful items to help with fluid control, including ice lolly moulds, breath freshener spray, boiled sweets, a lemon and a bulb of garlic!

The dietitians' next event will focus on phosphate control and a festive fare day will be held on 9 December.

2

Technology keeps blood on track

A NEW computerised blood tracking system is being introduced at NNUH to improve the safety of blood transfusions.

There are currently lots of steps involved in the process of assigning blood to patients and the current system relies on staff reading aloud and cross-referencing written information with the patient's own details and information on the blood pack.

When taking a blood sample for cross-matching, staff will now use hand-held

computers to scan information at the bedside. The scanned information is then checked verbally with the patient before barcoded sample labels are printed and sent to the laboratory.

Bring on the salad... and a whole lot more

FROM THIS month (October) patients at NNUH are being offered a greater choice of meals in the evenings, including a range of cold salads.

New catering trolleys with a dual oven system are being introduced to allow different foods to be heated to different temperatures and prevent overcooking. The wards also have refrigerated trolleys offering a choice of salad ingredients and sandwiches.

Some less popular foods have been removed from the menu, including chips which were difficult to regenerate successfully. These are being replaced with pan-fried diced potatoes and jacket potatoes. Some additions have been made to the pudding list, including mincemeat tart and a date and apple crumble.

The new menus have more detailed dietary information to help patients choose meals that are appropriate to their condition.

Serco's diet support manager Debbie Jones said: "We have taken account of patients' comments to come up with menus that cater for the majority of tastes. We are always open to suggestions and welcome feedback as to how our service can be improved." Before a transfusion can begin, the barcodes are scanned again and if they do not to match, the computer flashes a warning to prevent the procedure from taking place.

Experience in other trusts shows that this new technology greatly reduces the risk of errors. It also saves time, cuts paperwork and ensures that all donated blood can be traced

through its entire hospital journey. The project has been led by consultant haematologists

Dr Gill Turner and Dr Martin Auger and facilitated by the IT team. Staff are currently being trained and it is hoped the new tracking system will be up and running by mid 2009.



Chaplain Eleanor Langan (above) was among staff invited to taste the range of patient food on offer when Serco launched the new patient menus in July.

Norfolk's new voice

Volunteers are being sought for Norfolk's Local Involvement Network (LINk), a new, independent group monitoring health and social care services in the county. The group is made up of members of the public and representatives from health and social care groups, including voluntary organisations, who wish to influence the way services are commissioned, provided and delivered. For more information or if you would like to convey your views on health and social care call 01603 883 860 or email: linksinfo@voluntarynorfolk.org.uk.

VIEWPOINT



POETRY IN MOTION

POET Dean Parkin helped to launch a new arts project at NNUH in September with a reading of his poem, Murray Mint.

Around 160 contemporary poems are being displayed on the back of loo doors and in the restaurant as part of 'The Poetry Treatment'. Staff are also invited to take part in poetry reading and writing groups organised by the Poetry Trust. For more details contact Emma Jarvis at the Hospital Arts Project on ext. 3870 or email emma.jarvis@nnuh.nhs.uk

Counting the cost of carbon

NEUROLOGY specialist nurse Bronnie Roper is tackling the credit crunch by using a wireless device to count the cost of electricity used by her family at home.

She is one of three NNUH staff to win a free energy monitor from the Norwich Carbon Trust. "It's very interesting to see how much the cost goes down when you switch off computers, printers and other



electrical items that don't need to keep running," says Bronnie. "When everything is switched on it can go up by as much as £1 an hour, which does encourage you to switch off unnecessary devices!"

Five-year-old son Jacob (*above, with Bronnie*) is keen to join in: "He's learning how to save energy in a fun way and hopefully the lessons will stay with him for life," says his mum.

ARE <u>YOU</u> READY FOR THE FLU?

NNUH is leading the way nationally with a campaign to encourage health workers to be vaccinated against the flu virus. Occupational Health adviser **Hilary Winch** explains why it's important to keep up the good work

I CAN'T QUITE believe a year has passed since we last organised the flu vaccination programme.

Once again the Centre for Occupational Health is co-ordinating the programme and we are looking for volunteer vaccinators – ie professional staff who regularly give

injections as part of their jobs – to help us reach as many members of

staff as possible. For the last two years NNUH has achieved the



highest number of healthcare workers vaccinated against the virus of any NHS trust – a result that could not have been achieved without our willing team of ward and departmentbased vaccinators.

As a result of this success, the Occupational Health team was asked to make a presentation at a conference organised by the Department of Health. Since then, many other Trusts have expressed an interest in our methods and plan to follow our example.

With the ever-present possibility of a flu pandemic leading to illness and death on an unprecedented scale, the DoH is keen to increase significantly the number of health workers who take up the offer of the vaccine.

As health workers, we have a duty to protect the patients we come into contact with, to reduce the risk of transmitting the flu virus to those who are most vulnerable.

While we were delighted with the success of our flu campaign over the last two years, we cannot afford to be

complacent. We may have achieved the number one slot, but only 33.5 per cent of staff rolled up their sleeves to have the jab last year and I am sure we can improve on that figure. So to spur us on and hopefully continue our success, we are offering some incentives this year.

"This year we are offering prizes for the top vaccinator and for the most creative flu campaign"

For the top ward or department "vaccinator" there will be a voucher for The Beauty Rooms at the Maids Head Hotel. Vouchers worth a total of £100 will also be available for the most creative ward vaccination campaigns, sponsored by Wyeth (manufacturers of the flu vaccine).

The Occupational Health team will be visiting some of the areas where staff find it more difficult to attend a flu vaccination clinic. However, if you *are* able to leave your department to get to a clinic, please do so. A free lollipop will be available for all staff who attend an OH clinic for their jab. So please make sure you are prepared for our flu vaccination programme which starts on 20 October. Details of clinic sessions are now available on the Trust intranet.

• Is there a subject you feel strongly about? Please send contributions for the Viewpoint column to Sue Jones, Communications, NNUH, or email sue.jones@nnuh.nhs.uk

LETTERS WRITE TO SUE JONES, EDITOR, COMMUNICATIONS, NNUH

WE WILL MISS YOU

I would like to pay tribute to Julia Dossor who has retired after more than 29 years with the NHS.

Julia has been a superb servant of our Rheumatology Department for all of this time, firstly at St Michael's, Aylsham where she worked for Doctors Cardoe and Wenley and then for their successors, Professor David Scott and Dr Merry, and finally at the Norfolk and Norwich University Hospital, having joined the staff in 1996 as Research Secretary in our department. We will all miss her efficiency, enthusiasm and calm, controlling influence. I personally will miss a friend and colleague with whom it has been both a pleasure and privilege to work for over 20 years.

Julia – we wish you all the best for a happy and long retirement (and many visits to Wimbledon).

Professor David Scott, Rheumatology consultant

Staff survey shows improvement but further action is needed

THE ANNUAL NHS staff survey for 2007 showed an overall improvement in our performance over the previous year but there are still areas where we can improve in relation to other trusts.

A total of 850 Trust staff were asked to take part in the survey and once again there was a high response rate (67 per cent). We were also among the top 20 per cent of trusts for using flexible working options (77 per cent of respondents).

Two areas showing significant improvements were quality of job design and support from immediate managers. Other improvements include: more staff reporting errors, near misses or incidents; fewer staff experiencing physical violence from other staff; and fewer staff experiencing harassment from patients or relatives. There was a reduction in the number of staff working extra hours (down from 74 per cent to 68 per cent) although this is still higher than the average for all acute trusts. There was also a small reduction in the number of staff suffering work related injuries in the last 12 months.

Areas that could be improved include the number of staff receiving relevant training, learning or development in the last 12 months (72 per cent) and the number of staff reporting well structured appraisals.

The 2008 survey is due to start in September. If you are asked to take part, please do so as the findings help us to focus on areas where we can improve our working conditions and practices. *For more information go to www.healthcarecommission.org.uk*

WELCOME

...to the following consultants who have joined the Trust since 1 August 2008: **Miss Rozina Ali** and **Mr Andrea Figus**, both plastic surgeons; **Dr Helen Goddard**, **Dr Manasi Bhagwat** and **Dr Jeremy Corfe**, all anaesthetists; **Dr Max Dahele**, oncologist; and **Dr Hamish Lyall**, haematologist.

FAREWELL

...to the following long-serving staff who have left the Trust since 1 August 2008: Janet Harper, midwifery sister in Main Theatres, after 38 years; **Pauline** Ware, healthcare assistant in Critical Care, after 35 years; Dr Marek Ostrowski, oncology consultant, Ann Peate, staff nurse in the Day Procedure Unit, and Valerie Button, healthcare assistant on Blakeney Ward, all with 32 years' service; Dr Graham Price, hospital practitioner in Dermatology, after 30 years; Dr John Pilling, radiology consultant, after 28 years; Jean Little, clerical worker at Cromer, after 23 years, Margot Smith, staff nurse on Buxton Ward, after 22 years; and Doreen Child, admin and clerical officer in Clinical Coding, after 20 years.

Foundation Trust membership now tops 10,000



ALLAN TURNER, from Beetley, near Dereham, has become the 10,000th member of the public to sign up to our NHS Foundation Trust. There are now more than 16,600 members, including 6,000 staff.

Mr Turner, 53, commented: "I was pleased to take the opportunity to join the NNUH Foundation Trust. Membership is a positive way of ensuring that the local voice is heard."

Chairman David Prior (*pictured with Mr Turner*) said: "We wish Allan a very warm welcome and we extend our thanks to everyone who has taken the time to become a member of the NHS Foundation Trust. Public membership is important because it builds stronger links between our hospitals and the communities we serve, as well as giving people more democratic input into their local hospital services."

Membership is free and open to anyone over the age of 12 who lives in the Norfolk and Waveney area. To learn more about the Foundation Trust and apply online for membership, go to www.nnuh.nhs.uk.

CARING FOR THE CUSTOMER

All Serco staff at NNUH, from senior managers to domestic staff, are undergoing customer care training. Serco's soft services manager Nayab Haider commented: "Recent PEAT (Patient Environment Action Team) surveys have rated us 'excellent' for our standards of catering and cleanliness but we are always looking for improvements. Our 'Patient Plus' programme is about showing how we can help to make the hospital experience more enjoyable for all our customers, whether they are patients, staff or visitors."

Balancing acts

THIS TIME last year, eighty-three-year-old Joan Temple was frightened to go out in case she lost her balance and collapsed. Now she is able to walk around and enjoy her beloved garden without feeling dizzy or nauseous. For Joan is one of a growing number of patients who have learned to "retrain" their brains to overcome problems caused by conditions that affect the inner ear.

With the help of clinical scientists and hearing therapists in Audiology, Joan has learned to master a series of physical exercises that she could do at home.

"To start with, I just had to stand in the corner of a room with my fingertips touching the walls on each side and my eyes closed," she recalled. "At first this was really difficult but with practice I could keep my eyes closed for up to two minutes without feeling dizzy.

"Another exercise involved standing on foam, which was really disorientating but again, with practice, I could do it quite well. I attended the balance clinic once a month and when I had mastered six of the exercises, I was given six more. It was a gradual process but to my surprise it worked!"

Clinical scientist Debbie Fife says tailoring the exercises to each individual's needs is paying dividends, with many patients reporting a marked improvement after only a few weeks.

"Since we began doing this nearly four

years ago, the proportion of patients who have made an 80-100 per cent recovery has increased from just 13 per cent of referrals to more than half," she said. "The exercises are designed to help the brain to adjust.

"For instance, people can rely too heavily on visual information to maintain their balance when their inner ear is affected, so

THE EYES HAVE IT

In the balance clinic, state-of the-art equipment enables audiologists to track the patients' response to different stimulae and see their eye movements on a computer screen at the same time. Debbie Fife (right) demonstrates the video nystamography (VNS) machine, bought recently at a cost of £26,000 to help identify patients who might benefit from vestibular rehabilitation.

when they are in the dark or have their eyes closed their balance is worse. By keeping their eyes closed they are forced to rely more on signals from the inner ears, feet and legs, which helps the brain to adapt to the inner ear problem and to rely less heavily on input from the eyes. With practice, this can improve balance."

Balance problems can be caused by anything from a virus to physical trauma. Patients referred from ENT or Neurology first undergo a vestibular assessment, which





involves up to two hours of testing using specialised VNS equipment (see above). Of 231 patients who were referred to the Norwich Balance Clinic, 60 per cent went on to receive vestibular rehabilitation.

"For some people it can be a life-changing experience," said Debbie. "They are able to throw away the drugs they've been taking for their condition and they have the confidence to go out and about, sometimes for the first time in years. We would urge anyone with balancing difficulties to discuss the problem with their GP."

Joan Temple agrees: "Before, I was not only housebound but bedbound too. Now I have a lot more confidence and I have started to enjoy life again."

CANCER TZAR IN NORWICH

THE 20TH Norfolk Palliative Care Conference takes place at the John Innes Centre on Tuesday 11 November when the speakers will include the national cancer tzar, Prof. Mike Richards, and Baroness Finlay of Llandaff, chair of the House of Lords Science Committee. Subjects to be discussed will include the future of palliative care, symptom control and research, as well as the Mental Capacity Act. For more information call 01603 287227.

Ferrari fun day raises £300

WHEN TWO of their colleagues died from lung cancer, staff at the Asda superstore in Norwich decided to hold a charity event to raise money for NNUH patients suffering from the disease. With support from two tyre companies, they staged a 'Ferarri fun weekend' in the Asda car park, offering customers the chance to have their photograph taken next to a replica of a Ferrari racing car. The event raised £300 for the respiratory equipment fund and was also designed to raise awareness of road safety.



FOCUS ON THE 18-WEEK TARGET

COUNTDOWN ...to the 18-week patient pathway

WHEN THE 18-week wait was originally mentioned in the NHS Plan in 2000, it was against a background of patients waiting up to 18 months for a routine operation. If outpatient appointments or diagnostic tests were required, the wait for some patients could be even longer.

As patients tend to measure their own waiting time from when they first see their GP, it makes sense for hospitals to work in the same way.

From December this year, 90 per cent of patients who require surgery and 95 per cent of outpatients will start treatment within 18 weeks of the referral letter being received. This is a revolution in patient care and one that has involved many hours of hard work by hospital staff.

There is hardly an area of the NNUH Foundation Trust which has not been affected by the change. Wards and laboratories have been busier and diagnostic services have also reduced waiting times dramatically.

Michele Bacon, business support manager for the Medical Division, explains how the change has been achieved. She says:

"At first the 18 week target was seen just as a surgical target when in fact it covers medical treatments such as drug therapies, injections and other treatments which don't involve surgery.

"New technology means there are many complex treatment pathways for patients and

The new 18-week target has far reaching implications for both patients and staff, involving a completely new way of working for all NHS hospitals

tracking each of these has been a challenge. For each one, we have had to look at how it could be streamlined and redesigned to deliver the dramatic improvement in waiting times that was needed.

"New technology means there are many complex treatment pathways for patients and tracking each of these has been a challenge"

"We started with an awareness presentation to our administrative staff and clinicians who are heavily involved in making the system work, and gradually progressed through a comprehensive project plan.

"It has involved a complete change in the way we work and systems we have used for many years have been re-engineered."

Other developments which have helped us to deliver the 18-week target include the

How patients can help us to hit the target

THERE ARE a number of things patients can do to help us meet the 18-week treatment pathway. Please:

- Keep appointments because patients who do not attend are referred back to their GP.
- Let us know if your health changes, requiring you to see another health professional, or if this is likely to affect your availability for treatment.
- Tell your GP if you are about to get

on an extended holiday. This is because you need to be available for out-patient appointments and tests within weeks of your referral. If you are likely to be away it would be better to ask for a referral when you return home.

 Keep us informed of any changes in your contact details so we can get hold of you quickly to progress with your care. introduction of digital dictation, which has improved the turnaround time for letters to GPs, plus electronic discharge procedures for when patients leave hospital.

Chris Cobb, business support manager for the Medical Division says: "Medical secretaries have played a vital role in managing patients through the 18-week pathway and making sure the decision of the consultant is properly recorded.

"Many patients with long term health conditions are receiving treatment much more quickly than in the past. About 93 per cent of our patients start medical treatment within 18 weeks, which is a great credit to our staff and all their hard work over the last two years."

Rebecca Hulme, operational manager for head and neck services, says closer working with GPs is key to bringing about the new target: "We need everyone to be aware of the 18-week process and the difficulties in moving patients through the pathway in a timely way.

"At the time of referral, patients need to know that appointments and possible treatment will begin in a matter of weeks. It is also important for people to let us know if their circumstances change and to keep in touch. For example, if someone is not available to attend hospital we may have to remove them from the 18 week pathway and it's vital that they return our telephone calls or respond to letters.

"We have had to become much more focused on data collection to ensure that we can demonstrate that patients have access to all diagnostic appointments and treatment within the 18-week timescale."

• For more information on the 18-week target, visit the national End Waiting, Change Lives website: www.18weeks.nhs.uk/endwaiting

BREAST CANCER AWARENESS

In Breast Cancer Awareness month (October), we celebrate the support groups that provide extra help and advice for our patients

Keeping abreast



WHEN BEVERLEY Birritteri and Anna Beckingham began corresponding on the Breast Cancer Care website, they had never met face-to-face. They both live in Norfolk and Beverley had undergone breast reconstruction surgery a year before Anna was due to have a similar operation.

Beverley supported her friend over the internet and even visited her in hospital. The two kept in touch afterwards and discussed the need for a support group where women could talk to each other about breast reconstruction.

With the help of Ruth Harcourt, the breast reconstruction nurse at NNUH,



"Norfolk has a high intensity of breast reconstruction because the surgeons here are so good," says Beverley. "Seeing the results in other women can be a great comfort for those about to undergo surgery."

The group has attracted interest from other areas and Beverley and Anna have big plans for the future. They recently received a further grant from Macmillan and with local support they would like to provide home-help services for women after breast surgery.

"We're also looking at counselling provision, child care support for women with young families and we want to start a bra bank to give women access to cheaper bras," says Anna.

This article first appeared in Exchange, the Macmillan cancer support magazine.
Like other patient support groups (see below) Keeping Abreast relies on grants and donations to fund its activities. For more information visit www.keepingabreast.co.uk

BREAST CANCER GROUPS MAY RUN OUT OF FUNDS

OUR SPECIALIST breast care nurses at NNUH recommend the following support groups for patients diagnosed with breast cancer. However, many of these groups rely on charitable donations and bequests and some may be forced to close without further funding.

- Art therapy group (*pictured*) meets at the Big C Centre every Thursday morning, led by trained art therapists. Contact Joann McGrath: 01603 286732.
- **The Rosemary Group** offers a programme of guest speakers and outings for women living with breast or gynaecological cancer. Meets weekly at Mangreen Hall, near Norwich. Contact Karin Abram or Ruth Porter: 0776 6851178.
- **Breast care volunteers** Former patients who are trained to offer support and advice, either by phone or face-to-face. Contact Beryl Keen: 01508 550357.



- **Breathing space** A six-week course in relaxation therapy, diet and stress awareness. Contact Lynne Priestley: 01603 286732.
- Action after breast surgery Aqua-aerobics, badminton and yoga sessions held at the UEA Sportspark. Contact Coral Warren: 01603 788912.
- Young Women's Group Meets monthly. Contact Joann McGrath: 001603 286732,

or Anna Evans: 01603 615106. Life After Breast Cancer An exercise and relaxation group that meets in Norwich each Friday morning. Contact Vivien Horobin: 01328 830591

Look Good Feel Better Monthly skincare and make-up workshops at the Big C Centre, supported by the cosmetics industry. Contact Mary Wood: 01603 286732. Sheringham Exercise and Relaxation Group Meets 2nd and

4th Thursday evenings at St Joseph's Church Hall. Contact Judith Rushmer: 01692 536157.

- **Big C Centre,** near NNUH, offers information and support in an informal setting. Open 10am to 3.30pm Monday to Friday or call 01603 287048.
- If you would like more information or to offer your support for these groups, please contact the breast care team: 01603 286732.

FOCUS ON HOSPITAL ARTS



There is much more to hospital art than meets the eye, as our arts co-ordinator **Emma Jarvis** explains

Changing

THE HOSPITAL Arts Project at NNUH is designed to enhance the hospital environment for everyone, whether they are patients, staff or visitors. But it's not just about traditional arts and crafts –



we aim to give staff a visual or mental break from the busy hospital routine. The project includes gardens, interior design, events, performances and workshops, as well as exhibitions and displays. We also care for the hospital's collection of historic artefacts.

All our projects are funded by grants and charitable donations so no money is taken from healthcare budgets. Fundraising is therefore essential for our work and we are extremely grateful to all those who



support our projects. As part of the Facilities department, we work closely with our contractors and partners, including Serco and



Octagon, and we value feedback and support from our Hospital Arts Committee and volunteers, as well as the Friends of Norwich Hospitals.

We recently collaborated on a new colour palette for the hospital, inspired by the Norfolk landscape – land, sea, sky, coast and the changing seasons. The colours are reflected in many of the artworks displayed around the hospital.

As well as NNUH, we provide a service for the Trust's satellite sites such as the Francis Centre (Health Records), the Cotman Centre (cellular pathology laboratories) and Aldwych House in the city centre. We strive to strike a balance between creating a holistic feel and identity to the hospital and providing an environment to suit the specific needs of each department.

EXHIBITIONS are selected formally by the Hospital Arts Committee and most of the artworks are for sale, with price lists and details available from the HAP (Hospital Arts Project) office.

We aim for a mix of artwork from professional artists, community groups

and our own hospital staff. We like to vary the exhibits: embroidery, pastels, photographs, prints and weaving have



all featured recently. Whatever is displayed, we like to maintain the same high standard of work.

If you are interested in exhibiting, please see our website (*details below*).

IF YOU would like to know more about the Hospital Arts Project or book places on our staff workshops, go to the Hospital Arts pages on the NNUH website: NNUH.nhs.uk



Commissioned artwork at NNUH includes this colourful beach scene by Hannah Giffard for the children's play area in A&E. Workshops, performances and classes in tai chi, yoga and pilates also feature as part of our Hospital Arts Project.

views



STAFF WORKSHOPS are devised with the aim of improving the working day so that staff can relax, take a quality break and seize the opportunity to learn something new. Past workshops have included Indian head massage, tai chi, dance and drumming. This year's programme includes yoga, poetry, pilates, weaving and line dancing.

Most of the workshops are held at lunchtime or directly after work as these have proved to be the most convenient and popular times for our staff. They last for up to one and a half hours, depending on the type of workshop, and all operate on a nonprofit-making, "pay as you go" basis.

We also warmly invite staff from neighbouring organisations based on the Norwich Research Park to attend the workshops.





GARDENS For those needing to escape from the busy hospital environment, the gardens at NNUH offer a welcome alternative. Together with Serco and

> Octagon, we help to plan new garden areas and seating and the Hospital Arts Project ensures that records are kept of all donations of trees, plants and outdoor furniture.

PERFORMANCES We host a wide variety of events at

NNUH, including theatre, film, performance art and music. Performances take place in either the West and East Atrium or in the Gooch Hall. All are open to patients, staff and visitors. Salon

COMMISSIONS Our commissioned artworks are specifically designed to suit the needs of the department for which they are being commissioned. Wherever possible we link this with our redecoration programme so the new environment is created as a harmonious whole.

Commissioned projects may take over 18 months to come to fruition as they are dependent on thorough consultation processes and on specific funding being raised from external sources. We work closely with our artists and staff to ensure we comply with health and safety and infection control requirements. Artists are formally selected and interviewed for all commissioned projects by the HAP Committee.



COMMUNITY INVOLVEMENT The Hospital Arts Project involves our local community through partnership projects with a diverse range of groups and organisations, from schools and colleges to charities and local radio.



PROFILE

INFO

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 Out-patients West and Out-patients East, open Mon-Fri, 9am-5pm Deli coffee shop Plaza (East), open Mon-Fri 7am-7pm and weekends 11am-5pm WRVS shops East Atrium, open Mon-Fri 8am-8pm and weekends 10am-6pm. Plaza (West) open Mon-Fri 7am-8pm and weekends 8am-6pm

The Stock Shop (ladies' fashions) open Mon-Fri 9am-5.30pm, Saturdays 12-5pm Serco helpdesk Ext. 3333 for porters, housekeeping, catering and maintenance IT helpdesk Log a call using the computer icon on the intranet home page Security Ext. 5156 or 5656

Reception

East Atrium Level 1: ext. 5457 or 5458 West Atrium Level 1: ext. 5462 or 5463 Out-patients East Level 2: ext. 5474 or 5475 Out-patients West Level 2: ext. 5472 East Atrium Level 2: ext. 5461

Travel Office Ext. 3666

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

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: 9am-5.30pm, Tues: 9am-8pm, Fri: 9am-5pm

Cromer Hospital Mill Road, Cromer NR27 0BQ Tel: 01263 513571

Restaurant open 7.45am-6.45pm

Other Trust departments are based at: • **Cotman Centre**, Colney Lane, Norwich Cellular Pathology, Histopathology and Cytology), Radiology Academy

• Francis Centre Health Records Library Bowthorpe Industrial Estate, Norwich NR5 9JA. Tel: 01603 288652

Norwich Community Hospital, Poutherne Read, Nerwich NR2, 2TL

Bowthorpe Road, Norwich NR2 3TU, Tel. 01603 776776: Breast Screening, Pain Management. Also Microbiology: Tel. 01603 288588

• Aldwych House, Bethel Street, Norwich, NR2 1NR: Occupational Health (ext. 3035): HR Recruitment (ext 3578), Outpatient Appointments, Training, Choice team, Norfolk Research Ethics Committee and some IT services

• The Norwich Central Family Planning Clinic, Grove Road, Norwich NR1 3RH. Tel: 01603 287345.

The FLV

Coping with the demands of emergency medicine calls for professionals who are cool in a crisis. A&E Consultant **Victor Inyang** tells Sue Jones how working with helicopter crews gives doctors a valuable insight into our emergency services

AS A CONSULTANT in emergency

medicine, Victor Inyang is always prepared for the unexpected. Indeed, he positively thrives on the challenge of working in a high-risk environment and believes we have much to learn from the aviation industry, not to mention the paramedics who do so much to save patients' lives.

This is why he is proud to be medical director for the East Anglian Air Ambulance service and to volunteer twice a month as a regular "flying doctor".

The defining moment in his career came soon after he qualified in Lagos, Nigeria, when he was faced with 13 patients brought into A&E with gunshot wounds. The experience triggered a lifelong interest in emergency medicine – in particular the need to make decisions quickly in stressful circumstances.

"At 23 it was a life changing experience. I had to grow up fast and learn to cope with whatever came through those doors," he recalls. "I am still fascinated by how teams perform and how the decision-making process is affected by stress."

Victor moved to London from Nigeria and requalified with the General Medical Council before continuing his studies in Dewsbury, Norfolk, London and Cambridge.

"At the time, emergency consultant posts were few and far between and competition was fierce. But if I'm told something is difficult or impossible it just makes me even more determined to succeed!"

It was a thirst for experience that led Victor to take up a specialist training post with the A&E helicopter service attached to the Royal London Hospital, leading to an eventful four-month stint as a flying doctor in the heart of the capital. "We were dealing with the extreme end of the emergency spectrum, a lethal mix of turf wars, stabbings and shootings, people falling out of buildings or being crushed under cars or trains. Our job was to get on to the scene quickly, to stabilise the patients and get them to hospital without delay.

"It was fantastic experience but also extremely stressful. We often found ourselves in the middle of gang warfare and were frequently pelted with bottles and stones.

"I became fascinated by how teams perform and how the decisionmaking process is affected by stress"

"We had a resident psychologist on the team so we could talk about any emotional issues arising from the work. I found I could deal with terrible injuries every day and not be affected at all, while a child hit by a car would suddenly tear at my emotions. I learned that you can never become completely hardened to human suffering.

"I also learned that it's important to recognise the signs of stress and to take a step back if things get too much. It's a true saying that if you fall out with more than one person a week, you probably need a holiday.

"In the helicopter service events were routinely videoed and each day we would have a debriefing session when we could go through what happened and discuss how we could do things better."

NG consultant



Like the East Anglia Air Ambulance, the London service, known as HEMS (helicopter emergency medical system) is supported by charitable donations and strictly regulated by the aviation authority.

"For air crews it is compulsory to be trained every year in procedures to reduce the risk of errors. The idea is that each member of the team is empowered to speak up and ask questions if they notice something untoward, without being subjected to ridicule, criticism or recriminations. I believe that hospital teams have much to learn from this approach."

Victor would have stayed longer with the helicopter service if he had not been offered a consultant's post with the James Paget Hospital, where a few years earlier he had met his wife, Bridget, an intensive care nurse. The move was extremely welcome, he says, as the couple had already made their home in Norfolk.

Now 42, with four boys ranging in age from 5 to 15, Victor was delighted earlier this year to be offered a consultant post at NNUH, where the caseload is sufficiently challenging to keep him on his toes.

"When I first became a consultant I thought I could change the world but I now realise the NHS doesn't quite work like that," he says with a smile. "There are lots of things I want to do – for one thing, I believe we could be much slicker in the design of our patient pathway. There could be just one front for all our emergency patients, with experienced triage nurses ensuring they are assigned to the right specialty straight away. However, I am fully aware of the dangers of rushing ahead with ideas and projects that could have unintended consequences. I am passionate about the need to involve the whole team and to respect the views of experienced people."

Victor is also passionate about our emergency services and believes registrars could learn a lot from spending time on the road with ambulance crews. "It would help to get another perspective and to see that paramedics have valuable information about the patient – we should listen to what they have to say."

The future of our air ambulance service is currently under review and MPs have recently been debating the need for a centrally-funded system of pre-hospital care, rather than relying on ad-hoc charities run by volunteers.

"It's difficult to quantify the benefits of a helicopter ambulance service but I do know that if I was lying badly injured in a ditch in North Norfolk I would like to think that help would arrive in the shortest possible time," says Victor.

He is medical officer for the Snetterton racetrack and finds an "escape valve" from the pressures of work on the golf course, though even there he admits to a competitive streak. "Once you've mastered the basics, competitive golf is all about mind games," he says. "My son frequently beats me at golf but we are both on the same club team, which is just as well... he's a much better player than me!"

East Anglian Air Ambulance

BASED AT Norwich Airport, the East Anglian Air Ambulance covers Norfolk, Suffolk, Cambridgeshire and (since August 2007) Bedfordshire, with support from the East Anglian NHS Ambulance Trust and medical volunteers.

Both the air ambulance and Magpas

the Cambridge-based emergency medical team, are charities that rely on donations from the public and the goodwill of volunteers to continue their services.

 For more information go to www.eastanglianairambulance.org.uk or call 08450 669 999

New hospital gets go-ahead

An ambitious new £26 million treatment and diagnostic centre is planned to replace the old Cromer and District Hospital by 2011

THE NEW HOSPITAL will replace the original Mill Road building which first opened in 1932. It will be designed for outpatients, day case operations, extended diagnostic services, dynamic therapy services and minor injuries care, and will be completed in 2011.

The Board of Directors has allocated £12 million of the NHS Foundation Trust's funds to invest in the new Cromer Hospital to supplement the Bernstein and other legacies totalling £14 million. The Board is supporting the option of a more ambitious hospital offering an extended range of services than had previously been planned.

The £26 million project is subject to a full business case which will come back to the board in mid-2009. The project will see the building of a new hospital to include two general anaesthetic operating theatres, an out-patient procedure room and an ophthalmic theatre. New diagnostic services will include permanent on-site mammography (breast screening) and a DEXA scanner for osteoporosis diagnosis as well as facilities for a mobile MRI scanner.

Chairman David Prior said: "As a NHS Foundation Trust we are in the very welcome position of being able to use our new-found financial freedoms to invest money into a long-awaited new hospital for the people of North Norfolk. We believe that

THE BERNSTEIN LEGACY

The late Sagle Bernstein left a total of £11.4 to Cromer Hospital in 2001. Mrs Bernstein was a local resident and her sister had been a patient at Cromer Hospital.

Nearly £3 million has already been used to pay for state-of-the-art equipment at Cromer and the value of the remainder, which is held on deposit, currently stands at £13 million.





local people will benefit from the wider range of services we aim to be able to provide at Cromer from out-patient services, day case surgery, to minor injuries and therapy services.

"The Board believes that we need to invest in modern facilities that will meet the

OUTLINE PLANS for the new Cromer Hospital will be on display at the Community Centre (formerly the WI Hall) in Garden Street, Cromer, from 10am to 8pm on Thursday 23 October.

needs and expectations of local people and our staff, and accordingly has committed £12 million to the project. We also remain very grateful for the Bernstein legacy which will help us deliver an exciting new hospital."

North Norfolk MP, Norman Lamb, said: "I am delighted with this news. It is really positive for North Norfolk residents. It will mean fewer journeys to the Norfolk and Norwich Iniversity Hospital, and to have state-of-the-art medical facilities in North



New for old: Cromer Hospital's outdated buildings will be demolished to make way for a new state-of-the art hospital

Norfolk is a major advance."

In late 2007 a tendering process led to the appointment of a Mansell construction team, part of the Balfour Beatty Group, which includes award-winning Norfolk architect David Bissonnet. The planning application process is due to start in the next few weeks, with the full business case going to the Board in mid-2009 and work due to start in the summer of 2009, due for completion in 2011.

THE PULSE

Editor Sue Jones (ext. 5944) Pictures Medical Illustration and Sue Jones Head of Communications Andrew Stronach (ext. 3200) Communications and Membership Manager Janice Bradfield (ext. 3634) Communications Officer Hayley Gerrard (ext. 5821) Please send your contributions for the December issue to Sue Jones (Communications) by 9 November 2008.• The Pulse *is funded entirely from donations and not from NHS funds*