

# THE Pulse

Issue Number 83  
Autumn 2017

Norfolk and Norwich University Hospitals  
NHS Foundation Trust



Find out about our  
exciting Interventional  
Radiology expansion  
plans p6&7

## NORFOLK AND NORWICH UNIVERSITY HOSPITAL

Colney Lane, Norwich, Norfolk NR4 7UY  
Tel: 01603 286286 [www.nnuh.nhs.uk](http://www.nnuh.nhs.uk)

### Main Restaurant West Atrium, level 1

open Daily from 8:00 to 1:00

### Café Bar Outpatients East. Mon- Fri

open from 7:30am to 16:30

### Little Costa Outpatients West Mon - Fri

open from 7:00 to 18:00

### POD: Plaza east open Mon - Fri from

7:00 - 20:00 Sat 9:00 - 18:00

### Cafe Pure (inside WH Smith, Plaza West)

open Mon-Fri 7:30-18:00, Sat 9:00 -

16:00 and Sun 10:00 -15:00

### WRVS shop East Atrium: open Mon-Fri

8.00- 20:00 and weekends 10:00 -

18:00

### WH Smith Plaza (West) – see Cafe Pure,

### The Stock Shop (ladies' fashions) open

Mon-Fri 9:00 -17:30 and Sat 10:00-

15:30

**Cash Machines** can be found in the East Atrium, Level 2, WH Smith and the Restaurant

### Lost property 01603 287468 or ext

3468

### Patient Advice and Liaison Service

(PALS) For confidential help and advice

call 01603 289036 / 289045

### Chapel Open to all. For details of

services or to contact the Chaplains, call

ext. 3470

Hospital radio on ext 800 on Hospedia

or call 01603 454585

## CROMER HOSPITAL

Mill Road, Cromer NR27 0BQ, Tel: 01603 646200

## OTHER HOSPITAL DEPARTMENTS

• **Cotman Centre**, Norwich Research Park:

• **Innovation Centre**, Norwich Research Park:

• **Norwich Community Hospital**,

Bowthorpe Road, Norwich NR2 3TU

• **20 Rouen Road**, Norwich, NR1 1QQ, ext. 5450

## THE PULSE

### Editor, Media and Communications

**Officer** Sophie Black (ext. 5821)

**Director of Communications** Fiona Devine

(ext. 3200)

### Communications and Membership

**Manager** Janice Bradfield (ext. 3634)

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# Letters

Dear PALS and Mark Davies,

I cannot praise your staff and hospital attitude enough during my recently elongated stay.

I've had the misfortune to have endured many stays throughout Midland and East Anglian based hospitals in recent years, for an open surgery lung biopsy. Gunthorpe ward in the NNUH is by far the most pleasant and best run of all of them by a country mile.

On 21 July I was transferred to yourselves and I have to say right from the moment of being admitted the nursing staff could not have been more professional, caring, humorous and kind hearted.

Every member of the nursing staff, auxiliaries, junior nurses, catering team and junior doctors were fantastic... and all the nursing team are unsung heroes. The whole atmosphere in Gunthorpe and the angiogram lab is a credit to the hospital.

Many thanks and kind regards,  
Ian Reeves



Dear Sir or Madam,

My doctor referred me to your hospital. It was suspected that I might have cancer in the bladder.

My first appointment was with Haematuria and although very unpleasant, I left reassured. The doctor was very efficient and with a sense of humour and the nurses were lovely and sympathetic.

My next appointment was for an ultrasound and the friendly technician reassured me he couldn't find anything to worry about.

Within the space of 11 days, including a weekend I had two surgery appointments.

Could you convey my sincere and genuine thanks to all those involved. Their professionalism and efficiency couldn't be faulted.

Yours faithfully,  
Leonard Shipman

## Social media @NNUH



X-ray on dodgy wrist done @NNUH seen 5 mins early – out in 10 so no car park charge #nhs how you rock

@clare worden, Twitter

A huge thank you to all the staff in Nuclear Medicine and Plastic Surgery Dept at the @NNUH for the fantastic care received yesterday

@Glen\_WHU64, Twitter

So thankful for all the staff at @NNUH you are worth your weight in gold!! Shout out to Mr Kumar #legend #integrity #cares

@x\_Tracymurray\_x, Twitter

Astonished by the care and dedication of @NNUH staff who have phoned twice in two days to check on the progress of my son's thumb #thankful

@rev\_graham, Twitter

Please send your contributions, comments and suggestions to [communications@nnuh.nhs.uk](mailto:communications@nnuh.nhs.uk) or to Communications, NNUH, Colney Lane, Norwich, NR4 7UY

## Alpacas get ready for Christmas Fayre visit

The Christmas Alpacas will be one of the main attractions at the Christmas Fayre being held at the Norfolk and Norwich University Hospital from 4pm to 8pm on Thursday 7th December.

At the fayre, visitors will be able to browse a variety of stalls and purchase books, toys, gifts, clothes and jewellery and Father Christmas will be in his grotto giving gifts to children. There will be plenty of seasonal food to buy including homemade cakes.

Louise Cook, Fundraising Manager at the NNUH said: "There will be something for all age groups and a chance to look for something different as a gift for families and friends, while helping the hospital charity raise funds." There is free entry to the event and free parking on the main hospital site.



For more information about the event, please visit our website at: [www.nnuh.nhs.uk](http://www.nnuh.nhs.uk)

## Patients help support doctors of the future

For more than 10 years NNUH patients have been helping medical students by taking part in structured patient teaching sessions and student clinical exams, and the Clinical Skills Resource Team are looking to recruit more patient volunteers.

Each year, NNUH hosts around 800 medical students for clinical teaching, and the patient teaching sessions have proved invaluable to the students by giving them opportunities to learn from patients and shape their knowledge and skills for their future careers.

Professor Lesley Bowker, Clinical Skills Director said: "The participation of our patients has been absolutely vital in supporting our students' learning, and we are so very grateful for their time," Professor Bowker added.

"To be involved, patients should have previous or ongoing care at NNUH but be currently reasonably well in themselves. Patients may then be asked to help either with student exams or teaching sessions.

"We are looking for people who have long term, manageable conditions, particularly if they have



stable clinical signs such as a heart murmur, joint problems, skin lumps or rashes."

This experience can bring the medical text books to life and is much more useful for the student than just reading about conditions.

Anne Gotts has been taking part in the patient teaching sessions since September 2016, where she has spared a few hours each time to assist medical students at NNUH.

She said: "I had a kidney transplant 37 years ago after being born with polycystic kidneys, so I have a lot to be grateful for. Participating in the sessions is a form of saying 'thank you' to all those who have helped me."

For details, call Caroline Coombs, Medical School Administrator on 01603 286618 or email [caroline.coombs@nnuh.nhs.uk](mailto:caroline.coombs@nnuh.nhs.uk)

It was with great sadness that we learned of the deaths last month of two people who made an invaluable contribution to our hospitals.



Many of you will remember Sandra Meaden who was instrumental in the redevelopment of Cromer Hospital and was a key figure in the running of the first Arthur South Day Procedure Unit at the NNUH.

We look back at some of her many achievements on page 5 of this edition of the Pulse.

On page 16, friends and colleagues also pay tribute to Mary Northway, fundraiser and Chairman of the Cromer Community and Hospital Friends. She touched the lives of so many people and her contribution to Cromer Hospital will not be forgotten.

I would also like to highlight the feature on pages 6 and 7 following the approval by the Trust Board of a major expansion of interventional facilities.

A great deal of work has been carried out to get to this stage but we are sure you will agree the end result will be worth waiting for and will transform the services we offer our patients both within interventional radiology and cardiology.

As you can see from the artist impressions, the new Interventional Radiology Unit will be situated on the roof of the current building and, with construction taking place off site, disruption to services would be minimal.

Finally, on pages 8 and 9 you can meet our Patient Research Ambassadors. We often forget that there are hundreds of research studies taking place at the hospital at any one time and they are all vital in improving the care we provide to patients. You can read about the work carried out by these Ambassadors and two of those currently in the role reveal their experiences.

**Mark Davies**  
Chief Executive  
Norfolk and Norwich University  
Hospitals NHS Foundation Trust



Here are just a few of the many generous people who have given and supported different areas of the hospital charity over the past few months.

## Our thanks to...

Friends and family of Eric Warnes who raised over £1,300 for our Coronary Care Complex in his memory. Members of Eric's family pictured with Senior Sister Helen Huson.



The Jarrold's beauty team for raising £1,200 in memory of their colleague Richard Rose. This donation will go towards the Diabetes Transition Young Adult project.



Professor Jeremy Turner and Senior Childrens Diabetes Nurse Suzanne Lee are pictured saying thank you.

Wez and Laura, parents of Georgie Mai who did the Five Peak Challenge to raise over £2,000 for our NICU fund. As you can see Georgie Mai enjoyed meeting the team.



Mya, Katie and the Wild Stallion Dance Ranch who raised £400,000 for our NICU Fund. Mya having fun in the playground after handing over the cheque.



Emily for the lovely gift of Lush goody bags which we can give to our patients who may find themselves in need of emergency toiletries.



**If you would like to support the hospital charity then please contact Louise Cook on 01603 287107 or email [fundraising@nnuh.nhs.uk](mailto:fundraising@nnuh.nhs.uk)**

## Annual bike ride raises £3,500 for hospital charity

This year's annual bike ride raised £3,500 from registration fees.

On 16th July 2017, 550 cyclists took to the roads of Norfolk for the NNUH Tour Sportive in order to raise money for the hospital charity. The bike ride took participants through South Norfolk and North Suffolk with 30, 60 and 100 mile routes



to choose from, which proved challenging yet gave riders lovely scenic views.

## Wing-walking 70-year-old takes to the skies

Jenny Holland completed a wing walk on top of a 1940s Boeing Stearman Biplane during which the 70-year-old was flown around at speeds of up to 135mph. The trip



involved a variety of flypasts and manoeuvres, including a terrifying drop dive of 500ft. Jenny was raising money for our Eye Clinic, where she regularly receives treatment from Dr Andrew Glenn.

## Baby clinic opens

A new clinic dedicated to carrying out standard baby checks on newborns has opened within Blakeney Ward thanks to charity funds.

The clinic will provide a separate space for new families while routine baby checks are carried out, giving families the opportunity to spend time with a doctor or midwife, asking questions before they return home from hospital.

Jenny Copeland benefitted from the new baby clinic after the birth of her daughter Adelyn in July.



## Fantastic donations

Zoe Ryder raised £2,387.50 for the oncology team at NNUH in memory of her brother Lee Parker who received treatment from the hospital's cancer centre.

Thank you to the family and friends of Jack Baker who held a craft and coffee morning for our NICU Fund raising over £1,700.

Thank you to the family and friends of Harper Sharrocks for raising £225 at her christening for our NICU Fund in lieu of gifts. Harper came in on her 1st birthday so we could say thank you.

Thanks to all who supported the Lawrie McKenzie Memorial Match which raised £650.00 towards purchasing a vein illuminator for use in our Colney Centre.

## Voice Kids star backs skin cancer fund

Thanks to Perry Cooke, his family and all who supported the Kenny Cooke Annual Fundraiser which raised £6,000 for our Skin Cancer Fund. Perry, who



featured in the Voice Kids, who won inspirational young fundraiser of the year at the NNUH Fundraising Awards is pictured with Marc Moncrieff and Jennifer Garioch, from our skin cancer team.

**We are sorry not to be able to mention everyone who has helped or supported the hospital charity but we are truly grateful for all your support.**

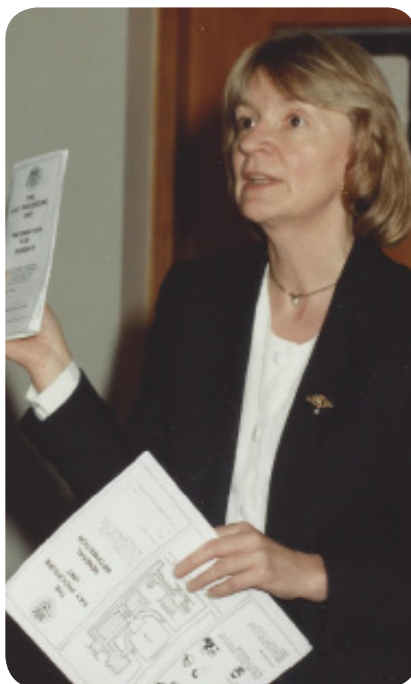
## Remarkable achievements of Sandra Meaden

Many colleagues will remember Sandra Meaden who sadly died in August. Sandra's nursing career was committed to the development of day surgery and she achieved a huge amount both locally in Norwich and nationally.

Sandra's first achievement was the opening of the first short-stay ward at the old Norfolk and Norwich hospital - Claxton ward. Following that success, she was appointed as Day Procedure Unit Nurse Manager and, together with David Ralphs, the first Director of Day Surgery, she was a key figure in the commissioning and subsequent running of the first Arthur South Day Procedure Unit which was a truly innovative unit and forerunner of many of the day surgery units now in existence in nearly every hospital in the UK.

Her experience in day surgery was recognised with her election as a Council member to the British Association of Day Surgery Council (BADS) in 1995 and subsequently as Treasurer and as a founder member of the Royal College of Nursing Day Surgery Forum. Her colleagues in BADS remember her for her wealth of experience, the ability to deliver any project she was asked to undertake and as treasurer, an efficient and conscientious custodian of the Association's finances. Sandra's skills in management were continuing to develop and she became the service manager for DPU and plastic surgery and achieved an MBA in Business Studies in 1997. She was actively involved in the planning and commissioning of the six-theatre Arthur South Day Procedure Unit at the new NNUH.

The fact that together these two units were awarded three Charter Marks over a 12-year period reflects Sandra's ability to build a dedicated team that provided excellent care. She was subsequently appointed as general manager for service improvement and, inevitably, the development of day surgery services remained a key focus. Sandra was always prepared to take on a



new challenge, however difficult, and give it her best shot, and her commitment to the introduction of Choose and Book in Norwich in 2001 was one such project.

Her final major project was to lead the rebuild and planning of the new Cromer Hospital between 2003 and 2012.

She worked closely with the operational team, architects and the construction company, spending hours planning and developing existing and new services that would be suitable for transfer into the new day case facility. Under her leadership services such as pain management, simple chemotherapy, laser varicose vein treatments and one-stop urology sessions were introduced in the new Cromer hospital ensuring treatment closer to home for patients. In the first three years it was open, the new Cromer hospital saw a large increase in day procedure treatments - treating its 500,000th patient in autumn of 2015.

Sandra began her well-earned retirement when the new Cromer hospital opened on 20 March 2012 and Sandra retired on 31 March 2012 - her vision achieved.

After her retirement, she continued to contribute with her work for the Friends of the Hospital.

## Dates for your diary

### Christmas Fayre

December 7th 2017, 4pm-8pm at NNUH

Watch out for news of our Send a Smile with Santa Appeal coming soon.

### Trust Board meeting

Next Trust Board in Public meeting takes place on 24th November at 9am in the Board Room at NNUH.

If you wish to attend, please email [communications@nnuh.nhs.uk](mailto:communications@nnuh.nhs.uk)

## Ex-chairman and trustee retires



Trustees of the friends of NNUHT met Richard Drew and his wife Bobbie in August 2017 to thank them both for their work to support the group for the past 23 years.

Richard has been chairman as well as trustee and has worked steadfastly to publicise the work of the group and to help raise thousands of pounds to assist the purchase of equipment to enhance the care of patients, their carers and staff.

The trustees presented Richard with a garden voucher to support his enjoyment of his garden and bought flowers for his wife, Bobbie, who has also been a great support in all activities.

Richard is pictured above with his wife Bobbie, trustees Mary Dolding and Judith Harbers and secretary and treasurer Debbie Cooper.



# Expansion plans

The Trust Board has given its approval for a major expansion of interventional facilities at the NNUH.

The plans, which were presented to the Board earlier this year, would see the construction of a new Interventional Radiology Unit (IRU) containing four labs on the roof of the East wing to replace the current 1.4 IRU labs.

The vacated IRU space would then be used by Cardiology to increase the number of Cath labs from 2.6 to four.

The additional capacity is required for both IRU and Cath lab as a result of an unsustainable demand on services.

Both services are currently implementing interim and temporary measures to keep waiting times within government targets which are not sustainable in the medium to long term.

The project will directly benefit patients by reducing waiting times for procedures in both IRU and Cath lab which in turn will lead to better clinical outcomes for patients and reduce the likelihood of a delayed routine procedure developing into an emergency procedure.

The project would also enable new services to be offered, including stroke thrombectomy.

Dr Richard Goodwin, Chief of Service, said: "It's long-awaited and much-needed and we have been looking into it for some time.



*Bird's eye view from North West*

It will reinforce the N&N status as a major vascular centre for the region, allowing us to support our neighbouring Trusts and the wider region, including the prospect of a regional on-call, out-of-hours IR service.

"Having our own recovery area means we can admit patients and discharge them straight away from IR rather than having to wait for ward beds.

"That makes our ability to deliver day case work a great deal easier. It's a fundamental step change in our ability to deliver vascular services at the N&N.

"It will also enable us to do a lot more collaborative working with the vascular surgeons on cases and

bring the two specialties together." MTX architects have been appointed and have prepared impressions of how the new purpose-built building on the roof will look.

The Final Business Case should be ready by the end of 2017 when the Board will be asked to give final sign-off. It is anticipated that first work on the development could begin in early 2018 with the new service ready to go live by April 2019.

We will be bringing you more details of the plans as they progress in the coming months, including further details of how the other teams in the hospital will benefit from the expansion.



*West elevation*

# s move forward

## Expansion will transform service for patients and staff

Dr Mike Crawford, Consultant Radiologist and Interventional Lead, said the expansion would transform the service for both patients and staff.

He said: "The immediate benefit for patients will be reduced waiting times.

"We have one of the biggest vascular units in the country and our IR capacity hasn't increased for the past 10 years in terms of the number of suites we have, while demand has increased each year.

"So we have made a number of interim changes, like extending the day and weekend working.

"The increased capacity will enable us to get through our backlog and patients will be seen and treated more quickly."

He said the expansion would also allow the service to further develop in areas where it has previously been restricted due to capacity.

"There are patients with some conditions who are treated at other Trusts who, in the future would be able to be treated here.

"It opens the door for us to do more, including the opportunity for us to offer new stroke treatments.

There is mounting evidence that suggests stroke thrombectomy procedures to remove clots can significantly improve chances of recovery for some patients [using drugs to remove clots is the alternative treatment] so that is something we are keen to develop.

"The service pretty much touches every speciality in the hospital in terms of what we do. For example we are doing more and more oncology work. There are lots of new treatments for people with cancer which involve minimally-invasive delivery of chemotherapy but capacity is always an issue.

"We hope that with the expansion, the pressure on staff will ease. They have been asked to work extra lists and volunteer to work weekend lists so we are confident they will enjoy the benefits of the new unit.

"A planned day case unit will allow us to admit our own patients, treat them and send them home the same day, which will free up space in the hospital generally.

"Ultimately, patients are going to get a fantastic service and that's the most important thing."



*Street approach from North West*

# Meet our Patient Res

With almost 400 research studies currently taking place within the hospital, research is central to the way we develop our services and deliver excellent patient care at NNUH.

Teams from across the hospital are involved in facilitating research with staff in all disciplines and roles working together to bring the latest treatments to patients. An important role within our research teams which may be less well known is that of

the Patient Research Ambassador or PRA.

Patient Research Ambassadors help promote research, improve access and make research more patient-focussed. They can be a patient, service user, or lay person who is enthusiastic about health research and willing to communicate that to other patients and public as well as healthcare professionals.

At NNUH, our PRAs get involved in various research based activities;

interacting with patients, reviewing study documentation and representing the Trust at events and stakeholder groups. PRAs will take part in the NNUH volunteer induction in preparation for undertaking their important role, which is a varied one and provides a wealth of opportunities to get involved in the research taking place across the hospital.

Here, two of our current PRAs share their experiences...

## Noreen Neal uses her background to raise awareness of research at NNUH

With a background of more than 25 years in research and knowing that once she retired she would like to do some volunteering, the PRA role was a perfect fit for Noreen Neal. Noreen, pictured below, had worked in administrative roles at the Institute of Food Research (IFR) and in the seven years prior to her retirement she worked as a Senior Administrator on various studies including the Norfolk Diabetes Prevention Study (NDPS), a study which screened more than 13,000 participants at risk of developing Type 2 Diabetes.

"I'm passionate about raising awareness of research," says Noreen. "We benefit today from all the research that has taken place in the past, antibiotics are a great example; and as science progresses, research is integral to ensuring we can use these developments to improve patient care."

"There's lots of research which goes on across the hospital and as a PRA you can get involved in so many different things."

The PRA role is a broad one and volunteers can get involved in



research in a variety of different ways including interaction with patients, involvement in preparing patient information and attending meetings with counterparts from other Trusts to share ideas.

Noreen adds: "I particularly enjoyed being involved in this year's International Clinical Trials Day event at NNUH. We ran an information stand and spoke with visitors about research in general, asking them if they knew research went on at the hospital; we were

surprised and heartened by how many people told us they did!

"People were really interested to hear about the variety of research which goes on at the hospital though. It's a myth that research is something which only happens in a laboratory. Research encompasses so much; there's the development of curative medications and those that help with the management of long-term conditions. There's also research which focusses on the support, therapeutic and psychological, available to patients."

Having been involved in research from a professional perspective, Noreen particularly enjoys following the progress of a study from inception through to the publishing of results, and involving participants as advocates throughout the process.

"I get a real sense of achievement from my role as a PRA; there's lots to do and we can get involved in tasks which are of particular interests to us individuals. The role really is what you make it!

We'd be delighted to hear from anyone who might want to join us and get involved as a PRA."



# Research Ambassadors

## Ros Bailey explains how research can change people's lives

Ros Bailey became a PRA in late 2015. Having worked at both the John Innes Centre and the Institute of Food Research (IFR), she had been exposed to research in her professional life working alongside researchers and clinicians within the Norwich Research Park.

"I knew how important research was to improving lives. From a personal perspective, we all know someone with a medical condition or who has suffered from illness during their life and the benefits that historical research have had for these people are huge."

Ros has been involved in reviewing patient literature for a variety of studies, ensuring that information is free of jargon and provides all a prospective participant may need. She also speaks with patients in the clinical setting alongside research nurses, making initial contact regarding research studies.

"I particularly enjoy meeting with other regional PRAs as a research ambassador and sharing ideas on exciting new ways we can get the word out there about the benefits of



research," says Ros. "Building strong links with local support groups is also something I'm really keen to develop for the benefit of both patients and clinicians."

Ros has taken part in research projects herself, most recently volunteering to provide information to a large scale database accessible to researchers investigating dementia.

She has also participated in studies on dementia run by the UEA involving interviews and spatial awareness tests.

She said: "I enjoy feeling like I'm making a difference."

"Sometimes having someone who is not a clinician available to help with explaining what research entails is really useful."

"Patients feel comfortable asking us things and our experiences of research really help us to understand what's likely to be important to a prospective participant."

When asked what she'd say to anyone who has the opportunity to participate in research, Ros said: "Ask lots of questions and give it consideration."

"Research really does change people's lives for the better, not only those participating but also others suffering from similar conditions who will benefit from the resulting advancements in treatments in the future."

Ros would be happy to speak with anyone who would like to get involved as a PRA.

Please contact the Research Team on the number below, who will be happy to put you in contact with Ros.



If you are interested in becoming a Patient Research Ambassador at NNUH, or would like more information on the role, please contact our Research and Development Office on 01603 289808

# Success for NNUH Integrated Discharge Team

The Integrated Discharge Team was set up 18 months ago to improve the discharge process for patients and support the ward teams. It has achieved spectacular results, improving the experience of patients, forging better relationships with care homes and saving the Trust £3.3m. The additional support and expertise has helped NNUH to reduce the length of stay for 'stranded' patients – those with a hospital stay of over 14 days – from more than 300 patients to just over 120 patients. This has made a great difference to the smooth operation of the hospital and to our ability to admit patients from the Emergency Department to a bed in a timely manner.

Danny Edmonds, Matron leading the Integrated Discharge Team, says: "We want our patients to know that we value their time and that we will make sure any delays in our processes are resolved as quickly as possible to support their recovery and move towards discharge. In particular, older patients can lose their mobility and independence if they spend an extended period in hospital."

## Discharge hub

The Integrated Discharge Team consists of 17 discharge co-ordinators, 10 nurses working on continuing healthcare and five specialist nurses involved in discharge planning. They all work from a discharge hub which also includes colleagues in Social Services, Norfolk First Support which

helps patients with reablement, plus a Community Liaison Team which links the community hospitals and other community-based services.

This year, the team has expanded to include CHS Healthcare which has four advisers helping patients and their families to find and choose long and short-term care, in the community and at home, reducing delays to discharge. The Red2Green initiative is also part of the Integrated Discharge Team, led by Improvement Matron Sarah Balderstone. Red2Green is a national initiative that ensures every patient knows what is happening to them every day to progress their care and avoid unnecessary waiting.

## Support for patients

NNUH is also the first Trust in the country to trial a new service to support patients when they leave hospital, called District Direct, which involves having District Council housing officers based here as part of the Integrated Discharge Team.

The service consists of six housing officers who can advise patients on any difficulties they may have such as getting in and around their home, general housing queries, employment or financial problems or social isolation.

Danny says: "The most successful initiative for the team was the introduction of the discharge to assess pathway in March 2017. This enabled us to support discharges for those likely to receive ongoing health funding within



L-R: Donald Lane and Ian Mobbs both Ex-Coordination and Graham Culyer, Expert L

72 hours. Previously this assessment process was a long and lengthy process often causing significant delays in discharge from the hospital." It has been a very busy 18 months, says Danny. Our next plan is to implement the "single point referral" this year, which will mean one referral from the wards to support a discharge rather than multiple referrals, saving significant nursing time. Our aim is always to ensure a timely and safe discharge."

## 'Holistic approach'

Michael Emeney, the Homeless/Housing Outreach Project (HHOP) co-ordinator from NNUH says: "The project

## Helping homeless patients on discharge

Patients admitted to NNUH who are homeless are one of the most vulnerable patient groups admitted and often have complex physical and mental health needs.

Homeless people contribute to the high number of frequent attenders in A&E.

Homelessness and bad health can often go hand in hand. In a study published in Homeless Link in 2014, 73% of homeless people reported physical health problems and 80% reported some form of mental health

problems. The average age of death for a homeless man is 47 and 43 years for a homeless woman.

Within Norwich, the number of homeless people increased from 13 in November 2016 to 34 in November 2016. (These are the figures from central Norwich in one night.)

The safe discharge of homeless patients from the Norfolk and Norwich Hospital requires co-ordinating services to provide a supported discharge: where possible providing accommodation and

medical follow up in the community but without delaying discharge.

To support the safe discharge of this vulnerable group of people, the Norfolk and Norwich Hospital has worked in partnership with City Reach Norwich and developed the NNUH Homeless/Housing Outreach Project (HHOP), which co-ordinates the discharge and ongoing community support for homeless people.

# Integrated Discharge Team



Experts by Experience, Michael Emeney HHOP Discharge  
Expert by Experience

The HHOP project aims to:

- Ensure homeless people are treated well and not discriminated against
- To support staff within the NNUH by providing training and education regarding the management of homeless patients and the support that is available
- To promote a multi-agency approach to support homeless people before and after discharge
- To expedite appropriate discharge through the co-ordination of services.

adopts an holistic approach which looks at patients' circumstances to ensure a robust discharge plan is in place. We like to take referrals on admission, so that discharge planning starts immediately.

"By adopting a multi-agency approach involving a number of key stakeholders, we are frequently able to provide temporary accommodation and support on discharge

Within eight months of starting the project, 120 homeless people have been supported by HHOP on discharge from NNUH. HHOP is developing a proactive Expert by Experience Group, people who have been homeless, suffered with health problems, but now, through support, have got their lives back on

track, are housed and many are working.

Currently working on a project with Michael is Graham Culyer. Graham is an Expert by Experience who has spent the last five years talking to health professionals about his experiences of being homeless and helps them to understand the best ways of helping patients.

## Homeless patients

Graham says: "I spent many years being homeless and when I finally got a place to live, I spent the first few days in the dark because I didn't have any money for the electricity meter. Now I volunteer and talk to health

professionals about the issues facing people who are homeless and also support those who are homeless to see that there is a future."

On leaving hospital, homeless patients without a GP are initially registered with City Reach Health Services in Norwich which helps marginalised and vulnerable adults. Without a fixed address, many patients struggle to register with a GP practice and can end up returning to A&E.

Michael said: "It is possible to make a real difference to people's lives and help them to get back on track by providing the right support when they leave hospital.

## Case study

**Mr A**, a man aged in his early 50s, was admitted to the NNUH following a road traffic accident in which he sustained serious fractures and a deep wound to his arm. The patient also suffered with other long term health conditions.

Previous to his admission the patient had been lodging at a local address but was unable to return as his 'tenancy' would not be renewed after the initial six months. This news was relayed to him by his landlords whilst an in-patient and his belongings had been removed from the property. Prior to his accident he had been employed. The patient was referred to the HHOP Discharge

Coordinator for an assessment who involved the hospital's occupational therapy team to assess the patient's needs in terms of temporary accommodation as his mobility was severely reduced following the accident.

The Red Cross service at the hospital was also involved to provide assistance on discharge and to initiate the patient's benefit claim as he would not be able to work for the next few months.

HHOP Discharge Coordinator made a case for guaranteed temporary accommodation on discharge to negate the possibility of the patient rough sleeping which would be detrimental and potentially dangerous during his recovery.

The district council sourced suitable B&B accommodation.



# Collaborative Learning

## Our pioneering study

In May 2014, NNUH adopted a new model for the education of pre-registration nurses at the Trust. This adapted model now known as CLiP (Collaborative Learning in Practice) places coaching and collaboration central to its ethos and was originally developed in the Netherlands.

As well as enhancing the quality of learning at the Trust, the model has helped to double the number of placements which can be offered to students. The scheme has also

consistently received great feedback from students since its inception, helping to build confidence and equip pre-registration nurses with the necessary professional skills prior to qualification as a registered nurse.

On a CLiP placement, a student has a dedicated Staff Nurse as their 'coach' and will also receive additional support from a 'buddy', another student nurse, at a different stage in their training. CLiP encourages the Registered Nurse to 'step back', allowing students to

take the lead, developing nursing skills within the clinical setting, whilst pulling on their coach for support when required.

Students also receive additional support from two dedicated CLiP Clinical Educators at the Trust ensuring that holistic support is available throughout the student's learning journey.

We hear from two newly-qualified nurses who have benefited from CLiP over the course of their studies...



### Newly-qualified Polly Rayner describes her "positive learning experience"

the wider nursing team.

On a CLiP ward, the 30-year-old third-year student will be running a bay and will delegate tasks as appropriate to their first or second year Buddy.

Over the course of their studies, nursing students are required to evidence leadership and management skills.

The CLiP programme empowers students to care for a group of patients with support from their mentor as required.

Polly said: "From the moment you arrive at your placement, you're physically in the role of a Staff Nurse. When you have questions,

the teams work through the answer with you encouraging you to feed in what you know."

A cardiology placement at NNUH gave Polly the opportunity to support a less experienced student nurse as a mentor.

Having recently graduated, Polly is due to start her first role as a qualified Staff Nurse within the Gastroenterology Unit at NNUH this month.

Polly added: "Participating in CLiP has been such a positive learning experience for me.

"Everyone has been so approachable and this breeds a culture of continuous learning and improvement. I'd say to anyone who is lucky enough to get the chance to do a CLiP placement, to grab it with both hands and make the most of every opportunity you're presented with."

Polly Rayner, from Norwich, had her first CLiP placement on Docking Ward at NNUH. She benefited from the collegiate approach of working alongside both her Buddy and Coach.

Polly explained: "As far as possible you're on the same shifts as your Buddy and work together alongside your Mentor, as part of

# Learning in Practice: Student learning model

## Ruth Stone reflects on her experience of CLiP programme

Ruth Stone completed the final placement of her nursing studies at NNUH in August. Having completed her first degree in History of Art and Literature, Ruth had plans to become a primary school teacher.

The experience of an x-ray at NNUH and the care she had seen others receive from nurses at the hospital helped to change her mind and she embarked upon a journey back to university which would see her qualify as a nurse just before her 33rd birthday.

As part of her studies, Ruth completed placements at the three Norfolk hospitals and within community nursing, where she had her first experience of the CLiP programme.

"I really benefited from the hands-off coaching approach," said Ruth. "It was a little daunting at first, but it encouraged me to think on my feet and knowing that there was as much support on hand as I needed, I really thrived. The



buddy I had during my placement there remains one of my closest friends." She said: "It's really helpful to have a Buddy who knows what you're going through and is still learning themselves. The collaboration that brings is something that's so useful later on and it creates such a positive and supportive learning environment."

As part of the programme, students are also encouraged to complete Learning Logs, helping

them to document the progress they have made. These Logs are used as a means of collecting formal feedback and charting development, and also help students to reflect on their experiences.

Ruth finished her final placement on the Day Procedure Unit (DPU) at NNUH in August, and was encouraged to help define her learning objectives as part of her CLiP placement.

Ruth said: "I've really enjoyed all my placements, but those where I've been lucky enough to get involved with CLiP have been really special. I'm really passionate that student nurses should put themselves out there and be open to as many new experiences as possible during their training; CLiP really facilitates that."

Having completed her studies, Ruth will be starting her first qualified post at Addenbrookes in September. She will be joining the Oncology Department on a two-year rotational programme.

## Nicola Taylor and Stuart Callow, Clinical Educators for CLiP

"We have had the privilege to initiate the CLiP education model here at the NNUH; the model has been an integral part of student nurse education since we introduced the pilot in May 2014.

"Within that time we have seen 750 students pass through these placements. CLiP encourages a real life learning experience, developing nurses.

"The success of the programme is driven by the dedicated multidisciplinary teams who have adopted the model with great enthusiasm and commitment.

"As CLiP clinical educators we have had the pleasure to support each and every one of these students and we're delighted to see them flourish and grow into the nurses of the future."



## NUH rated among top three Trusts in East of England by Junior Doctors

In a national survey, NNUH Junior Doctors rated the Trust among the top three for overall satisfaction in the East of England and top within Norfolk and Suffolk.

Each year the General Medical Council (GMC) asks every doctor in postgraduate training what they think about the quality of their training, and the results show NNUH to be rated very highly.

Some of the areas which the survey looked at were clinical supervision, work load, experience and handover during shifts, curriculum coverage, educational supervision and feedback.

Every year between 350 and 400 post graduate doctors train at the NNUH. Medha Sule, Director of Medical Education and Consultant

Gynaecologist at NNUH said: "We are absolutely delighted to have received such high results in the survey once again. It shows how hard our staff work to deliver high quality training and the support they give to our junior doctors. The national training surveys are crucial to making sure doctors in training receive high quality education and training in a safe and effective clinical environment."

Medha added: "Taking a look at the feedback supplied by the survey is very important to us. We always look at what areas we have particularly excelled in so that we can share with other teams, but equally, we look at the areas where we may need to adapt our training programmes."



*NNUH Junior Doctors, with Dr*

## Top prize for NNUH Doctor in Training for quality improvement project

A NNUH Paediatric Doctor in Training has been awarded a top prize for his exceptional work on a quality improvement project as part of a regional programme.

Dr. Vivek Kalra submitted the project as part of The Chief Residents' Leadership and Management Programme which is run by Judge Business School, Cambridge University and sponsored by Health Education England- East of England.

His project looked at restructuring the delivery of the nurse-led service on the Children's Day

Ward at NNUH, and was not only acknowledged by the Programme as being exceptional, but it is already seeing huge benefits for patients and for the Trust.

The project introduced a new booking system, a new electronic referral system, more dedicated medical cover and a new pathway of care. The benefits of his project include enhanced patient experience, improvements in patient flow and an increase in the number of specialised paediatric procedures carried out. Dr Kalra said: "I am thrilled to have received the top

prize for the project. I have really enjoyed being part of the Chief Residents' Programme as it has been an opportunity to build on my own skills and enhance the service delivered on the Children's Day Ward.

"I've been supported by a fantastic team during the programme, and I'd like to thank all those who have assisted with the project. Medha Sule, NNUH Director of Medical Education said: "We are delighted that Vivek has received first prize in the Chief Residents' Leadership and Management Programme. The dedicated work from Vivek and all Chief Residents from NNUH has been absolutely fantastic. As a big teaching hospital, this programme has allowed us to provide NNUH staff with a great opportunity to continue learning and developing their skills within their role."

Mark Davies, NNUH Chief Executive said: "It is important that our staff are offered additional teaching opportunities to support their role, and The Chief Residents' Programme reflects how much we value training and education at the trust. A massive congratulations to Vivek for receiving the top prize."



*Dr Vivek Kalra, left, pictured with colleagues on the Children's Day Ward*



## NNUH tackles UK's leading cause of blindness



Medha Sule, second from left

NNUH is recruiting participants with Wet AMD until December 2017. If you or someone you know suffers with the condition and might be interested in taking part in the study or would like more information, please contact NNUH Ophthalmology Research Team on 01603 288870.

NNUH is taking part in a ground-breaking nationwide research study, 'STAR', which aims to reduce or remove the need for ongoing eye injections for patients with Wet Age-Related Macular Degeneration (AMD) – a leading cause for blindness in the UK.

Age-related macular degeneration (AMD) is an eye condition that causes a loss in central vision, where eyesight becomes increasingly blurred, and means reading becomes difficult, people's faces are difficult to recognise and colours appear less vibrant. Wet AMD develops when abnormal blood vessels form underneath the macula – the small area at the centre of the retina responsible for what we see straight in front of us – and damage its cells. Without treatment, vision can deteriorate within days.

The national study is being led by clinicians at King's College Hospital, London, and involves a robotically-controlled system to deliver highly-targeted, low-dose radiotherapy to treat those with the condition with the hope of significantly reducing or diminishing the need for eye injections.

Aseema Misra, NNUH Consultant Ophthalmologist and Principal

Investigator on the STAR study said: "We are absolutely delighted to be taking part in this study. Wet AMD affects patients over 50 years old, and as Norfolk has a significantly older population, I feel it is very important we are involved in this research. Patients with Wet AMD have to dedicate a significant amount of time to hospital visits for their eye injections. If we can reduce this in any way, it would be fantastic for our patients."

Currently those with Wet AMD require regular eye injections every 6-8 weeks to ensure their vision does not deteriorate.

In the new one-off, non-invasive treatment, three rays of radiotherapy are beamed through the white of the eye to overlap at the macula. The therapy is delivered using a robotically-controlled machine to ensure precision treatment.

Milind Kulkarni, Chief of Surgical Division at NNUH said: "It is important that our teams are at the forefront of advancements in treatments for patients. This research study is a big step forward for those patients affected by Wet AMD, and we are delighted to be taking part."

## Pam Brown explains her experiences as research programme participant

It was on a Tuesday morning back in April 2016 when Pam Brown, 78, noticed something a little different about her vision. "I had closed my right eye to apply make-up when I noticed that all I could see was a big orange globe. I was preparing for a three-day trip away with friends so I ignored it and carried on getting ready," she explained.

On Pam's journey back home to Norwich she had noticed that the colour green on shrubs and trees looked slightly different and that she had also been feeling constantly tired and lethargic. That week, Pam decided to call her opticians to relay her symptoms. "The lady on the other end of



the phone instructed me to go immediately to A&E", she said.

Pam was diagnosed with the condition Wet AMD and it was then when she started receiving monthly injections to help preserve her vision. Pam said: "It really was a massive shock for

me, as I felt fit. Well, as fit as a 78-year-old feels – no pain, just the usual geriatric twinges."

"I was asked by a member of the STAR Research Team at NNUH if I would be willing to take part in the research programme.

Pam went to London to participate in the study in December 2016.

"The day was very straightforward and I was very supported by all the people I met. What happens now can improve the vision of future generations, and I was very willing and only too happy to help. I am very grateful to everyone I have met, and will continue to meet, during my STAR experience."

## Tributes paid to Cromer Hospital stalwart Mary Northway

Dedicated fundraiser and Chairman of the Cromer Community and Hospital Friends, Mary Northway, has sadly died.

Mary, who grew up in Sheringham, was known for her fundraising efforts within the community and led her team in organising various events to raise money for the hospital. Mary used to say that raising money for the hospital was a way of saying thank you for the care given to her late husband.

Anita Martins, Matron at Cromer Hospital said: "Mary will always be fondly remembered for all her fundraising efforts. Even on a cold day she would sit in the entrance, wrapped in a blanket selling raffle tickets and chatting to everyone who came in. Her engagement, enthusiasm and ideas for the fete were always outstanding. This



year, her determination to have a ride on the merry go round and enjoy the fun really does stand out. She will be sadly missed by us all." Iain Young, Cromer Hospital Operational Manager said: "Mary's selflessness and drive to fundraise

for Cromer & District hospital will never be matched. The amount of equipment purchased by the Cromer Community and Hospital Friends is down to her efforts supported fully by the Friend's committee who will miss her greatly. In the very short time I have been in post at Cromer I was amazed by her passion for supporting healthcare in the Cromer area and her contribution to the Hospital will certainly not be forgotten."

Mark Davies, Chief Executive at NNUH said: "We will remember Mary for her tremendous support over many years in her role as Chair of the Cromer Community & Hospital Friends. Mary was such a caring person; she truly touched so many lives with her work in the community and especially her fundraising for Cromer and District Hospital."

## Exciting future as plans drawn up for Cromer development

This year, Cromer & District Hospital marked its 150th anniversary and it was one of the main presentations at this year's AGM.

Cromer Hospital currently treats more than 139,000 patients each year, up from 126,000 in 2014, and since 2012, activity on the site has increased by 10% with lots of new services being introduced to enhance the delivery of care to the people of north Norfolk.

These services include a new andrology service, portable chemotherapy packs for cancer patients and a One Stop Urology service to name but a few.

There is also a Minor Injuries Unit which operates seven days a week.

Plans are currently being drawn up to show how the hospital is going to expand its services, which you will hear more about at this in the coming weeks. Iain

Young, Operational Manager at Cromer Hospital said: "With the increase in population and property development in the local area, we recognise that there is a need to develop more services in the coming years.

"We are always looking at innovative and different ways to provide care closer to home, which has been reflected in how much we have expanded over the last five years."

James Herson, NNUH Consultant Surgeon and Service Director at Cromer Hospital said: "For patients living in north Norfolk, Cromer Hospital is a fantastic facility which



*Cromer & District Hospital provides a range of services in the Muriel Thoms Procedure Unit.*

ensures that people are able to receive care a lot closer to their doorstep.

"The work carried out at Cromer Hospital really emphasises how patient care is at the forefront of everything we do and we are very excited to see how services develop."