

Our Vision



To provide every patient with the care we want for those we love the most

Norfolk and Norwich University Hospitals



Big Society Putting a value on our volunteers, pp6 & 11



All in a heartbeat How sparks for hearts are changing lives, p7

Breaking the taboo Bringing stoma care out of the shadows, pp8 & 9





Seeing double Eye surgeons who are father and son, p10

A magnet for research

The new Clinical Imaging and Research Centre

NEWS ROUND

NORFOLK AND NORWICH UNIVERSITY HOSPITAL

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

Restaurant West Atrium, Level 1, open 7am-8pm

Serco cafe bars Out-patients West and East; Cafe Pure (inside WH Smith, Plaza West) open Mon-Fri 8am-8pm, weekends 10-4pm Deli food2go Plaza (East), open Mon-Fri, WRVS shop East Atrium: open Mon-Fri 8am-8pm and weekends 10am-6pm WH Smith, Plaza (West) - see Cafe Pure, above The Stock Shop (ladies' fashions) open Mon-Fri 9am-5.30pm and Saturdays 12-5pm Serco helpdesk (for housekeeping, porters, catering and maintenance): ext. 3333 IT helpdesk Log a call using the computer icon on the intranet home page

Security ext. 5156 or 5656

Lost property 01603 287468 or ext 3468 **Reception desks**

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

Patient Advice and Liaison Service (PALS) For confidential help and advice about our service to patients call 01603 289036 / 289045 Travel Office for car parking permits, ID badges, keys to cycle sheds, use of pool cars and Trust bicycle, public transport information: ext. 3666 Bank Cash dispenser in East Atrium Level 2 and in WH Smith, Plaza (West) Chapel Open to all. For details of services or to contact the Chaplains, call ext. 3470 Sir Thomas Browne Library open Mon-Thurs: 8.30am-5.30pm, Fri: 8.30am-5pm

CROMER HOSPITAL

Mill Road, Cromer NR27 0BQ Tel: 01263 513571

OTHER TRUST DEPARTMENTS

• Cotman Centre, Norwich Research Park: Cellular Pathology, Radiology Academy

• Innovation Centre, Norwich Research Park: Microbiology

• Francis Centre, Bowthorpe Industrial Estate, Norwich NR5 9JA, ext. 4652: Health Records

• Norwich Community Hospital, Bowthorpe Road, Norwich NR2 3TU: Breast Screening, Pain Management

• 20 Rouen Road, Norwich, NR1 1QQ, ext. 6954: HR, IT services, recruitment, payroll, training, finance, health and wellbeing, out-patient appointments, cancer management, procurement, clinical effectiveness, commissioning team and information services.

• The Norwich Contraception and Sexual Health Clinic, Grove Road, Norwich NR1 3RH. Tel: 01603 287345

Have YOU signed the Pledge?

WITH THE Olympics just around the corner, there's still time to set your own goals for 2012. Whether it's taking up a new sport, quitting smoking or just becoming more aware of your wellbeing, why not pledge your commitment at www.pledge2012.com (Please mention NNUH when registering online).

The Pledge 2012 campaign is led by Active Norfolk, in partnership with Norfolk County Council and NHS

Norfolk and Waveney. The NNUH Trust has also made its own pledge: "To support our employees to become more physically active, improve their diet, stop smoking and improve their mental wellbeing."

Active Norfolk will be holding an Olympic Roadshow on Monday 27 February to encourage staff to make a pledge. Other activities planned by our Workplace Health and Wellbeing team include:

- A Trust choir, led by our own Gareth Malone-style choirleader Hilary Winch, with a singing event planned for April. If you'd like to register your interest email occhealthdutynurse@nnuh.nhs.uk
- Join the Fit4Work challenge from 1 March for the chance to win prizes.
- To coincide with No Smoking Day



ONE OF THE first to sign up to Pledge 2012 was dietitian Bridget Reasbeck, who is running the London Marathon in aid of the charity Phabkids. "I pledged to run a marathon before I was 50 so I was delighted to get a place in the London Marathon and to support Phabkids," says Bridget.

in March, staff will be invited to take a simple breath test to measure the levels of toxic carbon monoxide inhaled from tobacco smoke and other toxins.

- A relay run from Cromer to Norwich will take place on Sunday 4 April to raise funds for the Friends of NNUH.
- A series of events for Women's Health Week in April and Men's Health Week in June.
- In June we aim to break the Women's and Men's 5km Olympic Records as a team relay. Maybe taking part in this event could be your pledge?
- A badminton league, trial archery sessions and subsidised five-a-side football are being organised in conjunction with Active Norfolk.
- With other initiatives, including a variety of health checks and desktop games, 2012 promises to be an exciting and healthy year!

NNUH HAS the biggest roost of

Wagtail heaven

pied wagtails in Norwich and now a group of volunteers led by Dr Iain Barr, a lecturer in conservation biology at the UEA, is helping to catch and ring the birds so their movements can be tracked.

Around 60 pied wagtails have been ringed

and released so far and the volunteers are planning a return visit later in the year to spread the net even wider.

"We estimate that there are 500 pied wagtails

roosting in one of the hospital courtyards and the numbers are rising, whereas they seem to be dwindling in the city centre," says Iain. "This may be because it's warmer in the courtyard and they are safe from predators." "Wagtails are charismatic creatures and

little is known about them. They come here to roost from all over Norfolk and some have been found to migrate to Europe."

they are fascinating to study because so

Iain has a special licence to be able to catch the birds using a large net. However, patients and staff can be assured

> that they remain unharmed throughout the process. Over 65,000 birds of all species have

been ringed in Norfolk and a national database is being compiled to help conservationists understand more about their chosen habitats.





WELCOME

Friends step in with new equipment

MORE PATIENTS are benefiting from keyhole surgery at NNUH - thanks to charity donations and a little help from our Friends.

The Friends of NNUH have stepped in with extra funds to help provide £58,000 laparoscopic equipment for use in gynaecological cancer surgery.

Consultant gynaecologist Mr Tim Duncan said: "The care of patients with gynaecological cancers is changing rapidly with the advancement of key-hole approaches to treatment. Some of these advances have been introduced over

• THE SALE of Christmas cards for the Friends of NNUH raised over £1,500 last year. Friends' events planned for 2012 include a sponsored adventure trail in April and a Midsummer Ball at the Norfolk Show on 22 June. If you would like to help sponsor the ball, buy tickets or learn more about charities based at NNUH, please email: fundraising@ nnuh.nhs.uk or call 01603 287107

the last two years at NNUH, leading to faster recovery rates, fewer complications and an improved quality of life for patients.

"From the feedback we have received, patients really value this type of approach so we are delighted the Friends are helping us to offer keyhole techniques to a greater number of patients with a wider range of problems."

Other recent donations by the Friends include a new ultrasound machine for the assessment of critically ill patients in the Acute Medical Unit. Ultrasound scanning



RUBY TUESDAY When Sylvie and Moe Jacobs celebrated their Ruby wedding in October they requested donations in lieu of gifts in memory of Sylvie's brother, Paul Knights. As a result they collected over £800 to provide a new plasma screen TV and digital radio for Mulbarton Ward, where Paul had been a patient. "We would like to thank everyone who contributed," said Mrs Jacobs.



Dr Al Green (right) and Dr Nicola Hemingway with the new ultrasound machine on the Acute Medical Unit (AMU)

is a non-invasive technique that can rapidly reveal abnormalities such as fluid, air or tumours in the internal organs.

The Friends of NNUH aim to raise money for amenities that will improve patient care and enhance the well-being of patients, visitors and staff. Decisions about how to spend the available funds are made by the Trustees at their bimonthly meetings.

Director of resources Julie Cave commented: "We are extremely grateful for the many contributions that help the Friends of NNUH to support the hospital. Donations from members of the public always go directly towards equipment and services that can make a real difference for our patients. They are especially welcome at a time when we are trying so hard to make essential cost savings in our hospitals."

Children wanted for "bendy" study

WE ARE seeking volunteers for a research project involving children with unusually "bendy" joints. The aim is to discover whether a targeted programme of physiotherapy and occupational therapy can improve the outcome for children with benign joint hypermobility.

Around 30 per cent of children are believed to have the condition. Symptoms may include musculoskeletal aches and pains and co-ordination difficulties.

• To take part in the study, please ask your GP for a referral to paediatrician Dr Kate Armon. For more information about the study call 01603 597271 or email: laura.watts@nnuh.nhs.uk.

A GIANT LEAP FOR NORWICH

2012 PROMISES to be a memorable year for many reasons – and not just because of the London Olympics. It also marks the strengthening alliance



between NNUH and our partners on the Norwich Research Park, whose established international reputation for excellence acts as a springboard to further ground-breaking research.

As you can read on page 5, the new Clinical Imaging and Research Centre is home to one of the most powerful MRI scanners in the world, providing opportunities for visualising the interaction between drugs, food and bacteria as never before.

With some of the world's leading experts in this field working here on our doorstep, there is a good chance that this collaborative research will have a significant impact on health care in the future, providing insights into how we can best manage some of the big health issues of the 21st century.

Of course this will not be achieved overnight and there are bound to be setbacks along the way to success. But that is true of any worthwhile endeavour, whether it's striving for an Olympic medal, raising funds for a good cause or struggling with a more modest new year resolution.

Our Workplace Health and Wellbeing team (formerly occupational health) are encouraging everyone to be inspired by the Olympics and set their own goals for 2012 (see page 2). By signing up to Pledge 2012 and keeping a record of our "journey", we can celebrate the accumulative progress we have made and keep our hopes and dreams alive.

As the Chinese philosopher Lao Tzu wrote, "The journey of a thousand miles begins with a single step". I have set my own goals for 2012 and I will try to remember those words when the going gets tough. I wish you luck with your own endeavours for 2012.

ANNA DUGDALE

Chief Executive, Norfolk and Norwich University Hospitals NHS Foundation Trust

Jamie takes ICE to a new level

IT SUPPORT engineer Jamie Kent has won a prestigious innovation award for his work in developing an integrated computer system that provides a vital link between our clinicians, neighbouring hospitals and local GPs.

He received the award from Sunquest, owners of the web-based ICE reporting system that was originally developed at NNUH and is now used by over 100 NHS trusts across the country.

Since he joined the IT Department four years ago, Jamie has taken the original concept to a new level, bringing benefits for both clinicians and patients.

ICE Desktop has evolved into one of the key systems used by hospitals to request tests and services – anything from blood tests to clinical images and occupational therapy. Results and discharge information can now be accessed online and conveyed directly to GPs through a secure online link, removing the need for extra tests and paperwork that could easily be lost or misread due to illegible handwriting. The system is even being used to monitor potential causes of delayed discharges.

Jamie has worked closely with Sunquest to develop a method of accessing ICE Desktop through existing clinical systems, including giving clinicians access to essential patient information at the bedside for the critically ill.

Patients on home dialysis are able to view their blood test results online at home, and NNUH is also leading the way with ICE-to-ICE functionality, allowing hospitals within the region to connect directly into our healthcare services.

"There is a huge amount of potential within the ICE system," says Jamie, who started his NHS career as an assistant



technical officer in Pharmacy. "I work closely with the clinicians to learn how to meet their needs – it helps to have a background in pharmacy rather than seeing things purely from an IT perspective."

Holistic approach has proven benefits

PATIENTS FITTED with hearing

aids for the first time at NNUH are far more likely to keep on wearing them than the national target, according to research carried out by our audiology team.

Studies over the course of last year show that patients wore their hearing aids on average 87 per cent of the time compared to the national target of 60 per cent. In addition, patients report residual hearing difficulties of only 10 per cent after they have had their hearing aids fitted, compared to the national target of under 35 per cent or less.

Reasons for these excellent outcomes are thought to be the holistic approach taken by the audiology team and rigorous testing to ensure that the hearing aids are programmed accurately to each individual's hearing test results. Every patient undergoes a series



of "Real Ear Measurements" to take into account the size and shape of their ear canals.

"We also take the time to talk to patients and alter the settings for each individual patient," explains lead clinical scientist Rachel Stevenson. "For instance, some patients spend most of their time at home, while others attend busy meetings and parties where there is a lot of background noise. We can recommend equipment such as a wire to connect their hearing aids to an MP3 player, a compatible telephone or loop system."

New and better digital hearing aids have had a positive impact for patients, with around 3,000 new hearing aids being fitted at NNUH every year.

The outcomes were measured using a new analysis tool developed jointly by Rachel and

HEARING AID SERVICE CLOSER TO HOME

THE AUDIOLOGY team at NNUH has launched a new hearing aid clinic, based at the Thetford Community Healthy Living Centre, to cater for patients living in the Thetford, Watton, Swaffham, Attleborough and Diss areas. Patients still need to be referred by their GP and should request the Thetford clinic when making an appointment via the Choose and Book system.

Dr John FitzGerald, head of audiological services at NNUH, said "We are pleased to offer our services from this excellent facility at Thetford, where appointments are available within days of referral by a GP. "We hope to provide more local clinics in the coming year across our catchment area."

John FitzGerald, head of audiology services at NNUH.

"The results are very pleasing because they show that providing a good quality service really does make a difference for patients," said John. "The Government is keen to measure treatment outcomes and our analysis tool allows us to show that our holistic approach to hearing aid fitting achieves excellent outcomes for patients."

New imaging centre will be a magnet for research

A NEW Clinical Imaging and Research Centre has opened at NNUH, equipped with one of the most powerful MRI scanners in the world. The £5 million project is the result of close collaboration between the NNUH Foundation Trust and the University of East Anglia.

Designed to accommodate two brand new scanners - CT and MRI - along with clinical support, the new centre will provide much-needed extra scanning capacity for our patients as well as a focus for research partners across the Norwich Research Park.

The Discovery MR750w 3 Tesla MRI scanner from GE Healthcare is the first system of its kind in the UK. It has a magnetic field strength twice as great as a traditional MRI scanner and offers a more comfortable patient experience for those who fear enclosed spaces, with a wider opening and the opportunity to go into the scanner feet first for all kinds of scans.

Dr Paul Malcolm, MRI lead for NNUH and honorary lecturer at the UEA, says: "Imaging of the gut without the need for X-rays is increasingly important in understanding how the gut and digestion work. The ability to assess fat in the liver and



other tissues with MRI is essential as we try to understand and tackle the problems of obesity."

Professor Andrew Stewart Coats, chief executive of the Norwich Research Park, commented: "We have already begun attracting world-leading clinicians and scientists in gut and bone disease, microbiology and wasting disorders to Norwich, with eight new professors appointed in the last two years.

"With the technology to visualise the interaction between drugs, food and bacteria in the gut, this really is a quantum leap in our ability to understand how we can maintain healthy bone and muscle as we age or develop chronic diseases.

"This adds a new dimension to the world-leading science that already exists on the Norwich Research Park in plant and microbial sciences and in food research."

Designed by LSI Architects and built by Morgan Sindall, the new building has an exterior cladding of coloured glass which is the first of its kind in the UK.

Listening to our patients

OUR VOLUNTEERS

and Governors helped to canvass the views of more than 2,200 patients in the largest ever survey carried out at NNUH. The results will be used to help us improve our services to patients.

The survey showed that 91 per cent of patients were satisfied or very satisfied with their care. The main concerns were about the time spent waiting in clinics or to be discharged, and about car parking.

Chief Executive Anna Dugdale said: "Meeting our vision depends on delivering



consistently high standards of patient care. Even if one per cent of our patients have a poor experience that amounts to 7,000 people."

With the help of Serco, we are now launching a new patient experience

survey aimed at capturing the views of 3,000 patients every month using an electronic tablet. The results will provide a much more detailed picture than before.

• Volunteers are pictured learning how to use the new tablet so they can encourage patients to record their views.

NNUH wins clean hospital award

NNUH and Serco have won a national clean hospital Award in the Health Business Awards 2011. It follows an unannounced inspection by the judges, coupled with data from organisations such as the National Patient Safety Agency.

Anna Dugdale, Chief Executive commented: "Everybody works hard to keep the hospital clean and this award is the result of successful teamwork with our Serco colleagues, who have great expertise in this area."

Innovations by the cleaning teams include the use of highly advanced micro-fibre cleaning systems, electronic hand sanitisers and Dyson 'Air Blade' hand-dryers. Regular audits and scientific testing for the presence of micro-organisms help to ensure that our high cleaning standards are maintained.

OBITUARIES



MARTIN BROOKES

Colleagues from across NNUH gathered for a memorial service to pay tribute to their colleague Martin Brookes, who died tragically in December at the age of 42.

Martin had worked in the hospital post room for 14 years and was always cheerful and helpful. A keen Everton supporter, he adored football and took an active part in his local community in Newton Flotman. He leaves a wife, Hayley, and children Ellie and Joel.

PETRA LeGRICE

A memorial service was held at NNUH to remember Petra LeGrice, a staff nurse on Brundall Ward who died from



cancer in December 2011 at the age of 50.

Petra joined the Trust in March 2003, after completing her training at NNUH. Prior to that she had worked in care homes. She was loved, valued and respected by the ward team and is sadly missed by all of her colleagues.

Petra loved caravanning and dancing. She leaves a husband, Keith, and son Stephen.

NNUH has been awarded the Investing in Volunteers Quality Standard, recognising the value we place on our volunteers.

Similar to "Investors in People", the quality standard is awarded to organisations which can prove that they value their volunteers and provide them with appropriate training and support.

A QUALITY INVESTMENT

To achieve the award, NNUH was independently assessed against a range of best practice standards. We were found to excel in all aspects of working with our volunteers.

The assessors found that many of our volunteers had a relationship with the hospital, either as a patient or supporting a partner. A typical comment was:

"They've (the hospital) done so much for me it's nice to give something back."

Other volunteers were keen to gain work experience. One commented: "I'm learning each and every day and I hope it will help me to make a career change."



Ready and willing: some of the many volunteers who help out at NNUH. Here they are preparing to canvas patients' views on their hospital experience using a new electronic tablet. (see page 5).

Pictures and words by Sally Knights (see also Sally's Viewpoint on p11)

OF THE VOLUNTEER G E

OUR VOLUNTEERS are probably the most diverse group of people you will ever find in a hospital. We currently have nearly 600 who

span a huge age range - from 16 right up to 93 - and who come from all walks of life.



The oldest is 93-year-old Eve Chandler who was honoured in our Staff Awards last year for her work on behalf of the Norfolk and

Norwich Association for the Blind. She comes to the Eye Clinic by bus two and a half days a week, whatever the weather, "because I hate staying at home and I love to meet and talk to people."

With her 14 years' service Eve is a mere beginner, however, compared to Nora Long, who at Christmas celebrated a remarkable 40 years of hospital

volunteering. Nora, 86, helps out one day a week in the Day Procedure Unit and is described by her colleagues as "a national treasure". She began volunteering when her two children started school: "I offer the patients a cup of tea and run errands for the staff. I like to be helpful - if I was being paid, I'm



sure I wouldn't enjoy the work as much as I do."

A familiar face in the Outpatients East reception area is 89-year old Lyn Turner, affectionately

known as "the oracle" by her colleagues due to her wealth of knowledge and experience. She has been volunteering for 20 years and would recommend it to anyone. "Going in to hospital can be frightening for some people. If we can put them at their ease and lend a

helping hand it makes a great deal of difference and it's a lovely hospital," she says

Colin Websdell, 68, says the kindness of the staff has helped him to overcome his disability and learning difficulties: "It brightens up my life."



Clockwise from near left: Matthew Kett and Armend Visoka, Colin Websdell, Nora Long, Eve Chandler and Lyn Turner

Students Matthew Kett and Armend Visoka joined the volunteers at the tender age of 16. They are both on the UEA Medical Aspirations Programme, designed to support AS-level students from groups that are under-represented in higher education.

As well as gaining valuable hospital experience for their studies, Matthew and

> Armend have brought energy and enthusiasm to their roles as "Bleep Buddies".

Matthew, now 17, is working one day a week on the Jack Pryor Unit and Armend will also be able to help out on the wards when he is 17-and-a-half.



FOCUS ON ELECTROPHYSIOLOGY

Sparks in a heart beat

We are treating more heart patients than ever before, thanks to specialist EP techniques introduced recently at NNUH

AS FEBRUARY is National Heart Month, it's worth reflecting on how far we have come as a specialist heart centre, treating more of our patients closer to home.

One of the most recent innovations is electrophysiology (EP) for patients suffering from palpitations, or fast heart beat (*see below*).



Since June 2011, more than 100 patients have been treated using specialist EP techniques that were previously only available at Papworth and London. There are now plans to expand the service to include more complex EP procedures.

Palpitations without high risk may settle with simple tablet treatment. Where they fail to respond successfully, or the problem poses a potential risk, an EP study and ablation procedure may help.

"A key to successful diagnosis of an arrhythmia is to record the attacks on a heart tracing (ECG) while they are happening," explains heart rhythm specialist Julian Boullin. "This provides information about the nature of the arrhythmia, any potential risk, and the possibilities of successful treatment.

"Electrophysiology techniques can be used to treat a wide range of heart problems that generally relate to fast heart rhythms. In some cases they can also be used to diagnose problems with blackouts, or to assess patients at risk of sudden cardiac death who may benefit from a pacemaker or defibrillator."



started suffering palpitations two years ago. Then
last summer she had a lengthy attack in the early
hours of the morning when her husband was away
and her two young children, Owen and Rosie,
were asleep in bed. "I collapsed on the bedroom
floor and had to ask a neighbour to come and look
after my children at 2am while I went to A&E by
ambulance," she recalled.

After a series of tests, Emma, 39, was diagnosed with supraventricular tachycardia (SVT) and offered EP treatment at NNUH.

"I found the prospect of heart surgery quite frightening, especially when I learned that I would be awake the whole time. However, Jayne Woods, the specialist nurse, was very reassuring and explained it wasn't going to be open-heart surgery, that the risks were quite small and there was a chance I could be completely cured afterwards. The only alternative was to be on medication for the rest of my life.

"It was all over very quickly and although it wasn't pleasant it was nowhere near as bad as I was expecting. Also, I haven't had a single attack since June so the treatment has clearly been a success.

"It was brilliant to have the procedure so close to home instead of having to travel to Papworth – I was even home in time for the school run."

HOW SPARKS FOR HEARTS CAN CHANGE LIVES

Supraventricular tachycardia (SVT), is the most common type of symptomatic heart rhythm problem, with 2.3 out of every 1000 people experiencing an episode during their lifetime. All age groups may be affected and the condition is slightly more common in females.

In around 85 per cent of cases, symptoms may be reduced or even eliminated using electrophysiology.

The procedure involves making a small incision into the groin and feeding catheters with electrodes through the vein into the top of the heart. The electrodes are then used to map out the activity of the heart cells and apply heat to "ablate" the areas that are conducting abnormally.

Patients are sedated but conscious throughout the procedure and are usually well enough to go home after four hours.

ABOUT SPARKS4HEARTS

Following on from the highly successful Balloons4Hearts charity appeal, Sparks4Hearts has raised £290,000 towards the £400,000 target to provide vital new equipment for electrophysiology.

"Having their treatment closer to home makes a huge difference for our heart patients and we really hope people will choose to support sparks4hearts for their chosen charity or event this year," says consultant cardiologist Dr Leisa Freeman.

Fundraising events planned for 2012 include an acoustic night at the Norwich Puppet Theatre on 11 February, organised by cardiology specialist nurse Simon Bowles and featuring two of our staff in a line-up of talented musicians. Call 01603 629 921 for tickets.

• For more information go to www. norfolkhearttrust.co.uk. Cheques should be made payable to Norfolk Heart Trust (Sparks4Hearts) c/o the treasurer Dr A. Page, 215 Unthank Road, Norwich NR2 2PH

"I was home in time for the school run"

EMMA MAY, from Rockland St Mary, was blissfully unaware of any problems with her heart until she

FOCUS ON STOMA CARE

WHAT IS A STOMA?

A STOMA is an opening created surgically in the abdomen to enable waste to be discharged. This may become necessary when disease or trauma has compromised the body's natural elimination process.

There are three main types of stoma: • Colostomy - from the colon (large bowel)

• lleostomy - from the ileum (small bowel)

• Urostomy – to drain urine from the kidneys.

For some patients the stoma may be temporary, allowing the bowel to heal before the stoma is reversed.

Special stoma bags are used to collect the waste. These fit over the stoma and fit discreetly under clothing. They are easily changed and are designed not to leak or smell.

STOMA SURGERY THE FACTS

LAST YEAR 340 patients

underwent stoma surgery at NNUH – around half as a result of cancer and the rest for congenital abnormalities and conditions such as severe Crohns or diverticular disease. The numbers are increasing because NNUH is a centre of excellence for bowel cancer surgery and patients are referred from all over Norfolk and parts of Suffolk There are now over 2,500 people, including children and babies, living with a stoma in the area covered by NHS Norfolk and Waveney.

Between them, our team of four specialist stoma care nurses aim see all newly diagnosed patients at NNUH. They hold four clinics each week in addition to attending to patients on the hospital wards and in the community.

A key part of their role is to educate ward staff so they can help patients with a stoma to change their pouch. The team run a stoma care foundation programme, sponsored by Coloplast.

• For information about stoma care training contact the team on ext. 2441

THE GREAT

More than 2,500 people in our region are living with a stoma after undergoing life-changing surgery. Theresa Bowles, a specialist stoma care nurse at NNUH, believes it's time to bring the subject out of the shadows and talk about "the great taboo"

WHEN ASKED what she does for a living, Theresa Bowles is used to dealing with the shocked reaction: "A stoma care specialist nurse? Doesn't that involve emptying bags of... er... poo?"

Well yes it does, but that's only a small part of the job and it's not as bad as you might think. In fact, convincing patients it's not as bad as they might think is a much more important part of the role and that, for Theresa, is what makes the work so satisfying.

"It really is a fabulous job," she says. "We see patients straight after their diagnosis, when they are in a very dark place, and it's a privilege to be able to help them overcome their fears and learn to love their bodies again.

"Yes, they are very frightened at first and many patients find the whole idea of a stoma bag quite repulsive. Even for their families, talking about 'poo' is still the great taboo.

"A lot of what we do is about breaking down those barriers and putting people straight. The internet is a wonderful tool but it can be dangerous in the wrong hands – the information can be misleading and is often quite negative.

"We explain very frankly, but sensitively, what's involved and eventually the patients realise that it's not all bad, that life goes on as before and they can learn to deal with the



physical and psychological demands of living with a stoma.

"Some children and newborn babies require stomas, which can be very difficult for their parents, and of course teenagers have their own worries and concerns. We have to be skilled relationship counsellors, sex therapists – and sometimes just a shoulder to cry on. We explain that you can still do sports, go swimming and clubbing and have loving relationships if you want to. It doesn't have to eat away at your quality of life.

"We get to know the patients well because

we know what they are going through and can offer practical advice and support. We see them before, during and after their hospital stay, initially at home and then in clinic if they have any ongoing problems.

"It's great to see them when they've recovered from their surgery and are just getting on with their lives. It's fantastic how well some people cope."



TABOO



SIXTEEEN-YEAR-old Alice Hurn, from Attleborough, battled ulcerative colitis for four years before undergoing an ileostomy at the age of 11. Despite suffering complications that required further lifesaving surgery, she recovered well and is now a happy to talk about her experience and raise funds for research into bowel disease.

"The British are shy about discussing wee and poo because they say it's too disgusting, but that kind of response can leave you feeling really isolated," says Alice. "I'm living proof that you can lead a normal life

with a stoma and I want other people to be reassured by that.

"I was really scared of my stoma to begin with and it took a while for me to accept the 'new' me. It seemed like I was two different people – the sporty little girl who loved synchronised swimming and ballet, and the person I had become, who couldn't do any of those things.

"My mum (Tracey) took months off work to stay and care for me and I had fantastic "Swimming is still my passion and I can dress in figure hugging clothes just like any other teenager"

support from the rest of my family, especially my grandparents, and also from teachers and close friends.

"Three years on, swimming is still my passion and I am able to wear figure-hugging clothes and be like any other teenager. I even won a 'best-dressed female' competition at my school prom this June."

Now studying for A-levels at Attleborough High School, Alice intends to pursue a career in the health service: "I thought about doing occupational therapy but now I think I'd like to work in stoma care, as I have personal experience and I want to help others in the same situation as myself," she says. "Theresa (Bowles), my stoma nurse, has been an inspiration to me



and has been a real support in getting me to the stage I am now – I couldn't have got through it all without her."



"The operation gave me my life back"

BY THE TIME Anthony Schindler, 63, underwent an ileostomy in June last year, he was severely ill with ulcerative colitis.

"It got to the stage where I couldn't go out because I needed to go to the toilet about 25 times a day and I was extremely weak from passing so much blood," he recalled.

"Initially it was a shock to learn that I needed a stoma – somehow you never think it's going to happen to you – but once I got used to the idea it wasn't such an ordeal. In fact the operation gave me my life back. I was able to put on weight and get back to gardening, playing golf and keeping fit."

As secretary of the Norfolk and Suffolk branch of the Ileostomy Association, Anthony now provides help and support for other patients going through a similar experience. "Some people just don't want to talk about it; they shut the door on the problem and hide away at home. But I think it helps to learn how other people are coping, that there is hope for the future and you are not alone."

A retired plumber, Anthony says his wife Valerie has been "a tremendous support" and he also pays tribute to the specialist nurses who "work incredibly hard". "Once you get home you are pretty much on your own, which can be difficult, but you can leave a message for the stoma nurses and they will answer as soon as they can."

NEWS ROUND

WE ARE FAN



IT IS NOT unusual to find family members working in the same hospital but the similarities between Mr Puvana (Papa) Chandra and his son Mr Narman Puvanachandra may well be unique.

Besides sharing a name, they are both consultant eye surgeons at NNUH; they share an office, both live (separately) in Norwich and both are married to psychiatrists. Indeed, they often see the same patients, albeit at different times, which can be a little confusing for their patients and colleagues.

"With cataract patients it is not unusual for me to operate on one eye and my dad to operate on their other eye at a later date," explains Narman (*pictured*, *left*).

"Some of the patients return many times to the hospital so we get to know them quite well – my dad is known here as "Papa" Chandra, which helps to set us apart.

While "Papa" Chandra, 64, may have the

JANUARY 6 marked the end of an era for twins Marion Baxter and Margaret Askew when they retired from NNUH after 63 years' service between them.

Marion was the first to join the hospital's admin staff in 1966. She was joined by her sister in 1992 and for the past 20 years they have pursued parallel careers – Marion retired as office manager in Medical Illustration and Margaret was a PA and directorate secretary in Oncology and Haematology.

Both married with families, they live 10 miles apart and took the opportunity to meet for lunch most days, often choosing the same food. Both are active churchgoers – Marion is a preacher on the Norwich Methodist Circuit – and both sing in local choirs.

"As children we dressed alike and were encouraged to do everything together," says Marion. "Our father even suggested we train together as secretaries because we'd never be

"Our father suggested we train as secretaries so we'd never be out of work"



out of work – it turns out he was right about that!"

While Margaret took the lead academically at school, the twins have each developed their hospital roles and in 2009 Marion was awarded a Fellowship by The Institute of Administrative Management after years of studying in her spare time. In the London audience was an extremely proud Margaret: "There is no sibling rivalry between us – we really are each other's best friends," she said. Naturally the twins chose the same day to retire but the family association with the hospital will continue – Marion's daughter Andrea works in Medical Illustration as an administrative assistant, and Marion herself is planning to return as a hospital volunteer.

With two children and five grandchildren, Margaret expects to be too busy for volunteering, but who knows? We may spot the lookalikes lunching together again before too long. "Mum will sometimes prepare a packed lunch

for both of us!"

edge in terms of experience, it is Narman who was first to join our ophthalmology team as a consultant in 2009. A year later Puvana was persuaded to come out of retirement to join his son in Norwich – a journey he was more than happy to make after a long and distinguished career in North Wales.

In fact Norwich has a special significance for both men as Puvana spent a year here as a trainee in 1980 and his daughter was born at the old N&N when Narman was three years old. "We lived in doctors' accommodation in Norwich and I have happy memories of learning to cycle and visiting my baby sister in the hospital," says Narman, who trained in Cambridge and went on to specialise in paediatric ophthalmology.

"After I joined NNUH and a locum post became available here, my dad was the perfect choice because he has an excellent reputation as an ophthalmologist. I feel incredibly privileged that our careers are overlapping in this way. Also, from a family point of view I have three children of my own so it's great for them to have their grandparents around."

Puvana agrees: "I'd been a consultant at HM Stanley Hospital in St Asaph, North Wales, for 26 years and headed the ophthalmology team but now I'm happy to take a back seat professionally. Narman keeps me up to date and I'm incredibly proud of him."

So do they ever disagree? "No, we may have some intense discussions about politics or whatever but we actually enjoy working together," says Narman. "I find it quite amusing that my mum will sometimes prepare a packed lunch for both of us. However, I did have to draw the line about sharing a desk as that would be an administrative nightmare for everybody!"

WHY WE NEED THIS BIG SOCIETY

Volunteers are here to help, not take our jobs, and we should welcome them with open arms, says voluntary services manager **Sally Knights**

THE WINTER I turned 16, while deciding whether to go to college or find a job, I spent many an hour in a dusty store room piled high with bulging bin bags. I volunteered for a charity shop and I loved unpacking the donations of clothes and shoes, tatty old books, unachievable jigsaw puzzles and castanets from some long forgotten Spanish holiday.

I really enjoyed volunteering and continued to seek out new

opportunities... I helped at a Brownie group, listened to children read at a local school, served teas and coffees at a retirement home and helped the homeless on

Christmas day, a truly worthwhile and rewarding experience.

Eventually I started a career in retail management, working very long hours to fund the responsibilities of a house and family, with the inevitable result that some of my volunteering had to go.

I am not alone. The main reasons people give for not volunteering is a lack of time. Most are working every available hour, caught on the treadmill of cash in, cash out and thankful simply to have a job.

However, volunteering is more necessary now than ever. It's been very much in the news as a result of the Government's vision of a Big Society. But this has also brought with it an element of scepticism from public sector workers who worry about being replaced by volunteers.

Their suspicion is misplaced. The most common reason people give for

volunteering is unsurprisingly a desire to help others – and that includes our hardworking staff as well as our patients.

In my experience as voluntary services manager at NNUH, most of the people who offer their time are here because volunteering helps them too. Many are lonely after losing a partner and want to give something back to the nurses and staff who cared so well for their loved ones.

"The most common reason for volunteering is a desire to help others – and that includes our hardworking staff"

Some have lost confidence after a break away from work and just want some assurance that they haven't been left on the scrap heap of life.

Students volunteer to enhance their prospects of gaining a place at university and to help them make important, long-term career decisions.

And people with learning difficulties and disabilities, or those facing early retirement due to ill health, often find that offering some basic help for just a few hours each week can bring a sense of self worth and value.

Volunteers are not recruited "instead of" but "as well as" our paid workforce, to take off some of the pressure and enhance our working lives.

Volunteers should be embraced... they are an extremely valuable resource with a wealth of knowledge and life skills that, if utilised properly, can truly make a difference.



NEWS FROM CROMER

Trauma care

A MEDICINE for Members evening will be held in April on the theme of trauma care. Two of our consultants will talk about our team approach to the treatment of patients with severe injuries following a serious car crash or riding accident.

The event will take place from 6pm to 8pm on 19 April in the Benjamin Gooch Lecture Theatre, when the speakers will be Dr Victor Inyang, consultant in A&E, and Mr Ben Davis, consultant orthopaedic surgeon.

To book a place, contact the Membership Office on 01603 287634.

COUNCIL OF GOVERNOR MEETINGS FOR 2012

Our Council of Governors meets regularly to discuss the latest issues facing our hospitals. Dates for future meetings are below. If you would like to attend, please contact the Membership Office on 01603 287634.

- 2 4pm on 22 March
- 5 -7pm on 17 May
- 5 7pm on 26 July
- 12 -2.30pm on 27 September
- 2 4pm on 22 November

GOVERNOR ACTIVITIES

• A group of eight Governors visited one of our main food suppliers, Anglia Crown, in December to see for themselves how patient meals are prepared. They are also spending time with the Serco catering staff to see how the service works on the wards.

• Five of our Governors have been involved in auditing hospital wards in line with the Care Quality Commission standards. The audits have involved a number of external organisations, such as Age Concern Norfolk and the Norfolk Local Involvement Network, to provide feedback to ward staff and help improve our service to patients.

THE PULSE

12

Editor Sue Jones (ext. 5944) Communications and Membership Manager Janice Bradfield (ext. 3634) Communications Officer Hayley Gerrard (ext. 5821) Please send your contributions for the February issue to Sue Jones (Communications) by 9 January 2012 • THE PULSE is funded entirely from donations and not from NHS funds

First patients for new hospital

NEXT MONTH (March) heralds a new era for Cromer Hospital when the new building opens to patients for the first time.

The move has been carefully planned to take place over the course of three weekends to help minimise any disruption for patients visiting the hospital.

First to make the move will be the Minor Injuries Unit (MIU), imaging department and administrative offices, followed by the ophthalmology department, day procedure room and treatment bays. Last to move will be the out-patient areas and audiology department.

It's expected there will be no change to the MIU opening hours over the move period.

Our services have already been revised to reflect the capacity and facilities available in the new building, with some new out-patient clinics, diagnostics and local anaesthetic procedures being introduced at Cromer (*see box, right*). However, all endoscopy and any surgery requiring a general anaesthetic is now being carried out at NNUH.

The weeks leading up to the move will be spent installing and commissioning new equipment including imaging equipment supplied by Fuji and Siemens.

Clinical cleaning will also be carried out to ensure that all the treatment areas are safe for patients.

After the move we will continue to face challenges while the old building is being demolished. The main contractor, Mansell, is working closely with us to help minimise the impact on patients. Where possible, large building materials are being delivered outside working hours and patients are being directed by our volunteers along safe walkways close to the construction site.

The area to the rear of the building is also being landscaped to create pathways, service areas and a garden for staff.



ONE OF THE latest innovations at Cromer is abdominal aortic aneurysm (AAA) screening, which is being rolled out nationally. Around 8,000 men who turn 65 during 2012/13 are being invited to have the ultrasound examination at various centres in the Norfolk and Waveney area.

Other new services will include a weekly eye casualty clinic, while some hand surgery and therapy will be added to the list of specialist orthopaedic procedures available at Cromer.

In June the list of diagnostic procedures will be increased to include dexa (bone) scanning and a year-round mammography service will replace the existing mobile mammography unit.

WELCOME

...to the following consultants who have recently joined the Trust: **Mr Anish Sanghrajka**, paediatric surgeon, **Mr David Loveday**, trauma and orthopaedic surgeon, **Mr Pinaki Sen**, maxillofacial surgeon, and **Mr Ramez Nassif**, ear nose and throat (ENT surgeon

FAREWELL

...to the following long-serving staff who have recently left the Trust: **Ruth Foyster**, staff nurse on Hethel Ward, after 38 years, **Eileen O'Rourke**, community midwife, and Keith Fulleylove, biomedical scientist, both with 30 years' service, Diane Wade, staff nurse in gastroenterology, after 29 years, Sarah Paul, theatre sister, after 26 years, Yvonne Ford, sister on Cromer Hospital's Davison Ward, after 25 years, Margaret Gay, receptionist in obstetrics and gynaecology, after 23 years, and Janet Duffield, senior pharmacy assistant, after 20 years.