

Update from Alison Jones, GP Engagement

Hospital trusts share improvements made through 'lean' working

The hospital trusts working in partnership with the USA's 'Hospital of the Decade' came together on 26 June to share the improvements they have made through 'lean' working.

The NHS partnership with Virginia Mason Institute (VMI) was launched in 2015 and the five Trusts gathered at SaTH to share how they have developed a lean culture of continuous improvement which puts patients first.

- ◆ Four teams from SaTH gave short presentations. They included the work done throughout the Respiratory Value Stream, which includes a two-day reduction in length of stay, and the Trust's Procurement Team who were nominated for a HSJ Value Award after they made a £1.8m saving.
- ◆ The team from Surrey and Sussex Healthcare NHS Trust gave a presentation on the work they have done to become ranked in the top 20% of hospitals nationally in the most recent national NHS Staff Survey as a place to work and to receive treatment.
- ◆ The team at University Hospitals Coventry and Warwickshire NHS Trust gave a presentation on their work which saw them winning a HSJ Patient Safety Award in 2018.
- ◆ Leeds Teaching Hospitals NHS Trust gave a presentation on the work they have done which resulted in them being named Finance Team of the Year at the National Healthcare Finance Awards after they delivered the largest surplus in its 20-year history in 2017/18.
- ◆ Barking, Havering and Redbridge University Hospitals NHS Trust gave a presentation on their work to introduce cultural change and improve engagement levels with executive and divisional directors.

Mr Tony Fox, Vascular Consultant and the medical lead for SaTH's improvement work in partnership with VMI (pictured right with Louise Brennan, Senior KPO Specialist at SaTH), said:

"To hear so many positive examples of how hospitals across the UK are changing the way they deliver healthcare is incredibly powerful. Sometimes we can think we're alone in the challenges we face but when you listen to stories from other organisations you realise everyone is overcoming issues through really innovative ideas that are being driven from the bottom up. By working collaboratively like this we all learn from one another."

"The challenge going forward is for those of us at the event to engage with the rest of the organisation and spread the messages we heard. Our Transforming Care Production System is here to stay. This is the way we now do things at SaTH and how we will improve."



Representatives from 14 different trusts attended the Sharing Event, organised by SaTH's Kaizen Promotion Office (KPO) Team.



Julie Southcombe, who has worked closely with SaTH to improve ophthalmology services also spoke at the conference, providing a patient's voice. Pictured left with her guide dog Tammy, Julie said: **"I was sceptical and dubious of SaTH's Transforming Care work when I was first asked to get involved. I wanted to have a voice but had concerns it would not be heard amongst the doctors and nurses, but I am so pleased and excited I got involved, as having a patient's voice is of huge value to the Trust and the staff here really appreciate my contribution."**

"I would recommend the process to anyone wanting to get involved. What we have done, and what we hope to achieve in the future, is rewarding, exciting and very constructive. By having different voices from different backgrounds you make sound

decisions. It is also OK to fail because there is no blame culture within the Transforming Care Institute, and by eliminating blame you promote creativity so you can try new ideas in a safe environment."

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Trust appoints first Sepsis Nurse Practitioner

The Trust has appointed its first Sepsis Nurse Practitioner to strengthen and implement the advancements that have already been made in its sepsis care.

Angela Windsor (pictured right), who takes on the role following her work at the Trust as a Resuscitation Officer, will facilitate a push forward in the way SaTH detects and treats sepsis and will ensure that this work is sustainable. She will also focus on the screening and treatment of sepsis patients as well as providing education and training to staff.



Angela said: **"I am incredibly excited to be undertaking the role of Sepsis Nurse Practitioner. I am passionate about ensuring the best possible care for our most vulnerable patients and I am also privileged to work with so many staff who share my passion and are equally dedicated."**

"I believe that we can bring about demonstrable improvements in the quality of care for patients with sepsis and improve patient outcomes by making small changes."

"There is excellent work that has already begun within the Trust and in departments to further enhance sepsis care provision and I hope to be able to work alongside all of the teams to build on this and ensure that these improvements are sustained and stand the test of time."

Sepsis is a serious complication of an infection. It is sometimes referred to as blood poisoning, but this is in fact an effect of sepsis. Sometimes for reasons we don't yet fully understand, the body's immune system attacks the body's own organs and tissues and can lead to organ failure and death.

Across SaTH, sepsis is detected and treated in a number of ways. The hospitals' admission areas are equipped with sepsis trolleys which allow clinicians to immediately deliver the necessary care for a patient with suspected sepsis. Sepsis boxes have been introduced in other areas of the hospital



that can quickly be grabbed, and plans are being finalised to roll out a Sepsis PGD (Patient Group Directive), which will allow senior nurses to quickly initiate the drugs and fluids required

to treat sepsis within a one hour time frame.

SaTH also has a growing team of Sepsis Champions from wards and departments at PRH and RSH who meet each month to learn about the ongoing improvements around sepsis and share this learning with their teams.

Staff also celebrated *Wear Red Day* on 19 July ...

SaTH goes red to raise awareness of Sepsis

Across the Trust scores of staff donned an item of red clothing on 19 July to join in with *Wear Red Day*, which was organised by the UK Sepsis Trust to help raise awareness of sepsis.

There are around 250,000 cases of sepsis a year in the UK according to the UK Sepsis Trust, and at least 46,000 people die every year as a result of the condition.

Angela Windsor, SaTH's Sepsis Nurse Practitioner, said: **"I am so thrilled at how many people got involved in today's *Wear Red Day* – it was great to see so many colleagues helping to share the message."**



Prizes were given out for the best-dressed teams, individuals and best-decorated sepsis displays.

Electronic transfer of clinic letters to GP practices

We are pleased to advise that the roll out of electronic transfer of clinical documents from SaTH to GP practices in Shropshire, Telford and north Powys has now begun. These are documents such as outpatient letters and other correspondence typed by the medical secretaries. A substantial amount of work has gone on between the project team and medical secretaries over a period of time to get to this successful outcome.

Several GP practices have supported the Trust with the testing process over recent weeks, which went well, and for which we are extremely grateful – thank you.

The first specialty to 'Go Live' was ENT and from 4 July practices started to receive clinical documents from ENT electronically via Docman. These documents are clearly marked as originating from SaTH and indicate the correspondence type, such as 'SaTH outpatient letter' and the specialty is also clearly displayed.

The roll out will take place on a specialty by specialty basis. When we are ready for the next area to 'Go Live' we will contact practices with the details. During the transition period as each specialty is 'switched on', practices will receive some paper documents which will be documents that have already been created and are awaiting the clinician's signature. Once these outstanding documents have been sent, all future letters will be sent electronically. It is anticipated that it will take between 6 – 12 months for all specialties to be sending their correspondence electronically.

Please contact Sally Gray, System Support Officer/Project Lead at SaTH if you have any questions, on (01743) 261427 or at sally.gray8@nhs.net Many thanks to everyone for their support for, and cooperation with, this project.



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NHS Charity Fun Day is hailed a great success

A Charity Fun Day hosted by the Trust on 6 July has been hailed a great success.

Hundreds of people gathered at the Shropshire Conference Centre in the grounds of the Royal Shrewsbury Hospital for the annual event, which is held to mark the birth of the NHS.

The fun day, which was preceded by a 5km fun run, was raising money for SaTH Charity's *Living Well With Dementia Fund* and the end of life care *Swan Fund*.

Staff and patients at the Royal Shrewsbury Hospital who couldn't make it to the fun day were not forgotten either. The Rapid Relief Team, which ran the barbecue at the fun day, donated food for staff working in A&E, while refreshment stand The Watering Hole took drinks to staff and patients on the wards. Staff members Lottie Barker and Lizzie Harper used their break to take drinks to their patients on the Surgical Assessment Ward.

At the Princess Royal Hospital refreshments were laid on for staff who were working and therefore could not attend the event.

Julia Clarke, Director of Corporate Governance at the Trust, said: **"Our fun day was yet again a fabulous occasion with hundreds of people enjoying all of the attractions on offer. I would like to say a big thank you to all the businesses and individuals who donated their time or goods to the fun day to help us make as much money for our charity as possible, and to the 150 runners who took part in the fun run on what was, despite the cloud, another very warm day."**

"We do not have a final total yet, but the money raised will do a tremendous amount to help patients and families in our hospitals."



Karen Breese, Dementia Nurse Specialist at the Trust, said: **"The money raised from this event can help us do even more work to help patients with dementia, as well as their loved ones and their carers. We have come a long way in this area in a very short time, but there is always more we can do."**

Jules Lewis, the Trust's End of Life Care Facilitator, added: **"I want to thank everyone who came to the fun day, took part in the fun run, helped organised the event or who donated to it. This has been a real team and community effort and it just shows the high regard that the public has for our hospitals. All the money raised will go to improve patient experience, which is what we are all about."**

Karen Breese, Dementia Nurse Specialist (pictured far left) with Andrew James from SaTH Charity, Shrewsbury Town's Josh Laurent who opened the fun run, and Julia Clarke, Director of Corporate Governance

Interim Chief Executive Paula Clark takes up her post at SaTH

Interim Chief Executive Paula Clark took up her post at the Trust on 1 July. Paula is the former Chief Executive at University Hospitals of North Midlands NHS Trust (UHNM). She joined UHNM in October 2016, having previously been Chief Executive of the Dudley Group Foundation Trust and before that Burton Hospitals Foundation Trust.

Paula said: **"I'm really delighted to be joining The Shrewsbury and Telford Hospital NHS Trust as Interim Chief Executive. I've been working in the NHS in the West Midlands since 2005. I do, therefore, understand the challenges facing our Trust and other healthcare providers across Shropshire, Telford & Wrekin and mid Wales. These are similar to those facing the NHS nationally, but for rural trusts such as ours they are even more acute."**

"I recognise that this is a time of further change, and this is not easy for the teams out in the organisation who continue to care for patients each day. As an interim appointment, it means that I'm not going to be with the Trust in the long-term. However, even though I won't be with the Trust for a long time, I'm committed to working with everyone to ensure that we develop a plan for a better winter performance. In addition, I will be working with my new executive team colleagues to tackle many of the long-standing issues that face all of our teams. I want to make sure I spend as much time as I can out with the teams to hear first-hand what they have got to say and what they think needs to be done to make things better. As the people delivering and supporting services, they are best placed to help with that endeavour, so I want them to be open and honest with me."

"I also want to know what they are really proud of so we can make sure we get a balanced view."



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New model of care launched for joint replacement patients

A new model of care has been launched at Shropshire's acute hospitals to improve outcomes and reduce the length of stay in hospital for patients undergoing hip and knee replacements. It follows a successful year-long pilot of an Enhanced Recovery programme at the Princess Royal Hospital for those having elective surgery for joint replacements.

This new approach aims to improve the patient's experience and recovery and halve the amount of time they spend in hospital by making them active in their own recovery, and helping to ensure that they are better prepared to manage when back at home.

The MSK (Musculoskeletal) team at the Trust is behind the launch of the project. It involves a multidisciplinary team - including orthopaedic consultants, specialist nurses and therapists - working together to ensure a patient is discharged from hospital following their joint replacement as quickly and as safely as possible. The aim is to reduce a patient's length of stay in hospital from an average of 6.3 days to 3 days.

Under the programme, the new model of care has:

- ◆ A new orthopaedic ring-fenced bedded ward at PRH (in Ward 8, and the team is pictured right) dedicated to Enhanced Recovery for hip and knee replacement patients
- ◆ A new Joint School which will educate patients and prepare them for their surgery and rehabilitation at home. They, and their 'buddy', (a relative, carer or friend) will also be able to meet the team involved in their treatment
- ◆ New protocol written for anaesthetic pathways to aid recovery
- ◆ New booklet developed to guide patients through their pathway.



Mr Ralph Perkins, Consultant Arthroplasty Lead for the project, said: **"The aim of Enhanced Recovery is to improve the pathway and experience for patients requiring joint replacement by giving patients better information and involving them in the process, and optimising patients pre-operatively. We involve the patients by providing a 'Joint School', which is run by physiotherapists and occupational therapists, and provide comprehensive booklets to inform patients about the procedure they are to have.**

"We also have in place Senior Specialist Nurse-led consenting clinics where patients can obtain additional information and have the time to discuss their treatment with them. The aim is to achieve better outcomes and greater patient satisfaction along with a shorter stay in hospital. This reduces the waiting time for the patients and the cost to the NHS."

Hazel Hughes, Trauma & Orthopaedics Operations Manager at SaTH, praised the Enhanced Recovery Programme team who worked diligently to make it happen. She said: **"The Trust has been very keen to implement an Enhanced Recovery pathway for our joint patients for some time. Now, through commitment, drive and dedication from all members of the multi-disciplinary team, this has finally been realised."**

Nigel Lee, Chief Operating Officer at the Trust, said: **"The whole MSK team has worked incredibly hard over the last 12 months to ensure that the Enhanced Recovery project was successful in its pilot stage to enable it to be officially rolled out. This will be of great benefit to all of our patients who need hip and knee replacement surgery. Not only will it improve clinical outcomes, it will streamline and improve their experience at what can be a stressful time and enable them to get home, where they want to be, much quicker. This is a real success story for SaTH."**

Pupils raise more than £3,700 for the Trust's end of life care fund

Pupils at a school in Shrewsbury have donated more than £3,700 to a fund set up to benefit patients at the end of life at SaTH. The Priory School presented a cheque for £3,732.32 to SaTH's Swan Fund earlier this month. The Trust intends to use the



money to create a new Swan Room which allows patients and their families to have privacy and dignity at the end of life, as well as other end of life care improvements.

The Trust was one of the three charities chosen by the students who raised the money from trips and events including a visit to Area 51, cake sales and a colour run.

Jules Lewis, End of Life Care Facilitator at SaTH and Julia Clarke, Director of Corporate Governance at SaTH, were presented with the cheque at a school assembly. Jules said: **"I would like to say a huge thank you to everyone at the Priory School for this very generous donation. We have one chance to get it**

right, and this donation will make a real difference to our patients who are receiving end of life care at our hospitals. We intend to invite the students from the school into the hospitals so that they can see for themselves just how their fundraising has benefited our patients and their loved ones at the hardest of times."



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Maternity Movement Bracelet launched to raise awareness of baby movements during pregnancy

A new Maternity Movement Bracelet has been launched to help pregnant women under the care of Shropshire's two acute hospitals track the movements of their unborn baby. Funded and supported by The Local Maternity System (LMS) in Shropshire and Telford & Wrekin, the Maternity Movement Bracelet will be given to expectant mothers at 24 weeks of pregnancy who are under the care of the Trust.

The Maternity Movement Bracelet has 14 beads to mark the start of the day. Expectant mothers then simply move a small hoop around each bead on the bracelet when an episode of movement is experienced. By doing this they should find it easier to notice their baby's pattern of movement and also understand when to expect to feel movement. The bracelet was developed by Louise Macleod who works for the LMS. Louise (pictured below) said: **"I came up with the idea of the bracelet when I was pregnant but couldn't find anything to help me monitor my baby's movements. I created a beaded bracelet using craft supplies and wore it from 25 weeks onwards. I found it particularly reassuring on busy days when I couldn't concentrate on my baby's movements as I normally would, and it helped me notice patterns of movement I don't think I would have otherwise have found. Once my son arrived and I was breastfeeding, I used the bracelet to remind me which side I needed to feed on next by swapping it from wrist to wrist, and it was great at the beginning to help me monitor how many times he had fed each day."**



Anthea Gregory-Page, Deputy Head of Midwifery at the Trust, said: **"By using the bracelet we hope that any changes to a baby's movements will be noticed at the earliest opportunity and encourage expectant mothers to contact their midwife if they have any concerns. The bracelet comes with instructions on how to use it and information on who to contact should any changes or reduced movement be experienced."**

Fiona Ellis, Programme Manager for Shropshire and Telford & Wrekin LMS, said: **"The aim of the Maternity Movement Bracelet is to encourage women to monitor their baby's movements and know what to do if they are worried. Feeling your baby move is a sign they are well, so it is really important if you notice your baby isn't moving as much as usual or if there has been a change in the movement patterns that you call the Obstetric Triage Unit at the Women and Children's Centre on (01952) 565948/(01952) 565712 for help and advice."**

For the last few weeks, a number of expectant mothers under the care of local maternity services have been involved in a pilot scheme for the Maternity Movement Bracelet, and all have reported feeling very reassured by using the bracelet.

The launch of the Maternity Movement Bracelet forms part of a wider campaign started earlier this year to raise awareness of the importance of monitoring baby movements. Expectant mothers can find out more about monitoring their baby's movements at www.tommys.org.uk and for more information on the Maternity Movement Bracelet please contact louise.macleod5@nhs.net

Breast imaging department moves to new location to improve patient care

The Breast imaging department at the Princess Royal Hospital has moved to a new, dedicated location to improve care for patients. The new department brings breast imaging services at PRH into one location which includes a new private waiting area and changing cubicles as well as a new mammography suite. The aim is to help streamline the breast cancer care patient pathway at the Princess Royal Hospital, and also give patients much more privacy, improving their hospital experience. The department covers four dedicated breast clinics each week, as well as performing breast biopsies, pre-theatre interventional procedures and mammograms. Breast imaging services are also provided at the Royal Shrewsbury Hospital.

Rachel Hammond, Senior Breast Mammographer at the Trust, said it would help improve privacy for patients attending appointments at PRH. She said: **"Previously ladies sat in an open waiting area off the main x-ray corridor at PRH which is very busy. They would be required to cross the corridor if they needed an ultrasound following their mammogram whilst dressed in a hospital cape. The new department has addressed this issue, and we now have a dedicated breast department that is only accessible to patients requiring breast imaging either for breast screening or as part of the symptomatic pathway."**

Linda Deane, Breast Imaging Consultant Radiographer at SaTH, said: **"The new department at PRH has allowed us to create a private waiting area, three enclosed private changing cubicles, a new mammography suite and a second new, additional ultrasound room. We also have a second ultrasound scanner which was generously provided by donations given to breast clinical charitable funds. Through these improvements we are able to ensure that the patient pathway is more streamlined and patient-focused, directly answering patient care by being in one location. We are also adjacent to the breast clinic waiting room enabling our patients to stay together with their relatives for the majority of their visit. We have already had positive feedback from some of our patients who have been coming over several years, who are full of praise for the new, improved facilities."**



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Introducing the Research and Innovation /Clinical Trials Team

Who are we?

We are the Research and Innovation/Clinical Trials Team (*some of whom are pictured right*) who work across both hospital sites to deliver national and international clinical trials and studies to our patients. The R&I Director is Dr Nigel Capps, Consultant Chemical Pathologist, and both Sr Helen Moore (Trust Lead Research Nurse/Clinical Trials Manager) and Kelly Hard (R&I Manager) manage the day-to-day set-up and delivery of the research. There are five delivery teams: Cancer, Generic at Shrewsbury, Generic at Telford, Paediatric and Reproductive Health. We also have an administration team who support the clinical teams.



Did you know that in 2018/19 over 800,000 patients entered nationally approved studies in the UK? This is the highest number since records began. What a great way to celebrate 70 years of the NHS! Clinical research is “core business”, and at SATH over 2000 patients were entered into studies across most specialties.

All patients should be offered a study/trial if there is one available for them. It is the only way we can help identify methods of diagnosis and treatments to improve outcomes and experience for our patients.

Trusts which are research-active have overall reduced mortality rates. Patients who enter clinical trials do better than patients who don't, even if they receive the standard treatment. The CQC are also now looking at research as part of their inspections and will be asking wards and departments whether their patients have access to research.

What do we do?

We currently have over 110 open studies across most specialties. Half of the studies are interventional, such as drug trials and the other half are non-interventional, where patients ‘gift’ a blood, tissue or saliva sample or complete questionnaires.

The Clinical Trials Team provides the infrastructure to allow clinicians to run the trials/studies. We screen, offer the study to patients and support the adherence to the protocol throughout. The team provides support to colleagues to help formulate and move forward with their own research ideas.

SaTH has consistently been in the top 100 trusts out of 450 offering numbers of trials to patients and number of participants recruited. We are often in the top 10 of national recruiters into our studies.

The Clinical Trials Team has a great reputation with industry allowing the opportunity for our patients to enter novel therapy trials locally often when standard treatments have failed.

What our team say:

“Working in clinical research is just the best job; working every day at the forefront of medicine is such a privilege.”

“Seeing drugs we trialed in the past now standard care is so rewarding.”

“Giving patients more options is wonderful.”

“Knowing we are saving lives each day is the best feeling....it is what we came into nursing to do.”

What our patients say:

“I really enjoyed being part of the Big Baby study.”

“I will probably have a better health outcome being in the study.”

“I have no hesitation in getting involved in the trials programme...if I can play a small part, then I am very happy to do that.”

“I would definitely recommend going into a trial.”

“We need people to take part in trials to get drugs through to standard care.”

“Without research, we are not going to progress.”

How to contact the team

If anyone wants to know more about the studies we have open, then please e-mail sath.research@nhs.net or contact:

Clinical Trials Manager: Sr Helen Moore 01743 261000 ext 2379 or email h.moore1@nhs.net

Research & Innovation Manager: Kelly Hard 01743 261646 or email sath.research@nhs.net

Research & Innovation Director: Dr Nigel Capps email nigel.capps1@nhs.net

Some useful website links

www.bepartofresearch.nihr.ac.uk – this is for both healthcare professionals and patients to find out what trials are available.

<https://learn.nihr.ac.uk> - this is for healthcare professionals who want to be involved in offering research to their patients.

Good Clinical Practice is mandatory. Please follow the link to book yourself on to local free training.

www.cancerresearchuk.org/about-cancer/find-a-clinical-trial - for cancer patients and their families to find out what trials may be available.



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