

Issue two 2005

NHS

# the pulse

## Hospital food

Just what do patients get for £2.20 a day?

## Awards launched

Are you in line for a Trust 'Oscar'?

## When the bell tolls...



Meet the surgeon ringing the changes

## Prison patients

How the Trust plans to serve the prison

# First word

by Chris Banks  
Chief Executive

**Our first year as a Foundation Trust:** Our first year as a Foundation Trust was exceptional in many other ways. We charted new territory with a new governance structure (including staff governors) and a new way of being funded (payment by results), and we conducted a major



competition to decide who will build our new hospital. We saw a huge rise in the number of people using our

emergency services, and we saw more people in clinics and performed more planned operations than ever before. We were praised in two national patient surveys for our emergency and outpatient services, we achieved the government's major access targets around waiting times and we reduced the waiting time for patients attending A&E. Also, given public concern over hospital acquired infections, we continued to have one of the lowest MRSA rates in the country. These were just some of the highlights; there were many more.

These achievements were made against a background of considerable financial pressure. It was a difficult year but the achievements were outstanding and were solely down to the loyalty, commitment, determination and hard work of staff and volunteers across the Trust, for which I am very grateful.

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New CT scanner provides a much clearer picture of the anatomy

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New equipment helps to speed up X-ray turnaround at Stamford

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The Trust's new £400,000 CT scanner is now up and running - with 300 patients benefiting from the hi-tech equipment during the first month. The Pulse goes behind the scenes to find out more...



**RIGHT:**  
*Superintendent radiographer Jill Anderson with the new hi-tech CT scanner*

# New scanner makes a big difference

“

*This new scanner is able to give a more detailed view of the anatomy. We are able to gain so much more information.*

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A purpose built suite located at the Peterborough District Hospital site, houses a state-of-the-art CT multislice Toshiba Aquilion 16.

The new equipment replaces the 10-year-old scanner, as the Trust moves forward with technology.

On average, around 800 examinations are carried out each month - approximately 300 patients in the first month made use of the scanner.

The radiology team expect this number to be increased to 550 once all staff have been trained to use the new scanner.

Assistant radiology services manager Gill Heath explained: “Technology has moved on so much in the last 10 years, and this new scanner is able to give a much more detailed view of the anatomy - we

gain so much more information.

“Although the scanner itself is faster, the examination from referral to report is not necessarily quicker as there is more detail to see.

“It won't really affect our waiting times - which we have worked hard in previous months to reduce by making changes to our booking system.”

The old scanner has continued to be in used during the transitional period for out of hours emergencies, and to assist at times when staff are training to use the new machine.

Nine radiographers make up the CT team and a training programme is currently underway. Once complete, the new scanner will also be used for out of hours emergencies.” The team recently received a certificate from the Health Enterprise East competition, congratulating them on the service improvement work for CT scanning.

## Staff survey success

THE Trust has now completed its staff survey - achieving one of the highest response rates in the country.

A random sample of 850 staff were invited to complete the questionnaire, designed to find out employees' views on a wide range of issues at work to identify good practice and areas of improvement.

Louise Barnett, assistant director of human resources, said: “In most responses, we scored around the national average but came in the top 20 per cent of acute trusts in the country in several key areas.

“These included the number of staff having well structured appraisals or performance reviews in the last year and those with personal development plans agreed.”

Pulse hopes to bring you more detailed information on the results in the next issue.

**Comic funds:** A big thanks to everyone from pathology who helped to raise around £100 for Red Nose Day. Sweepstakes and swear boxes, cakes and cookies led to the total.



ABOVE: Consultant ophthalmologist Alan Fitt uses the new eye equipment at Stamford Hospital.

LEFT: Staff nurse Lillian Nyirenda (L) and sister Amanda Cooper show off the new tabards.

## Helping to see more clearly

EYE patients in Stamford are benefiting from £15,000 worth of state-of-the-art equipment, bought with cash donated by the Friends of Stamford Hospital.

The Humphrey visual fields analyser - which measures a patient's field of vision - is now successfully up and running in the ophthalmology clinic, treating an average of 100 patients each month.

Consultant ophthalmologist Alan Fitt said: "I would like formally to thank the Friends on behalf of everyone here at the eye department for the very generous donation of the fields analyser.

"This machine is much more user-friendly for both the patient and the operator. The tests are much quicker for the patient than the old machine and also the Humphrey machine is now the 'gold standard' visual field test."

# Drugs tabards get message across

“  
The tabards are making life easier for staff, and limiting any potential error when giving drugs to patients.”

STAFF on medical wards around the Trust have added an extra piece of clothing to their uniform - thanks to a £600 donation from the Friends of Peterborough Hospitals.

Sixty specially-embroidered tabards, displaying the words 'drug round - do not disturb', have been distributed to Peterborough District, Edith Cavell and Stamford hospitals.

The tabards are making life easier for staff, and limiting any potential error when giving drugs to patients.

The purchase comes as a

result of a project undertaken when ward managers highlighted the number of times nurses were distracted or interrupted while giving out medicines.

Assistant general manager - emergency services, Heidi Presland said: "The tabards provide a number of benefits, not only to staff - who say they feel in control and better protected against interruptions - but to patients, who receive their medication in a more effective way as a result of staff being less distracted."

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# Speeding up X-ray results

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*The speedier access granted through the hi-tech system means that a patient's treatment may start sooner.*

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**N**EW technology is giving GPs speedier access to their patients' X-ray results.

The Trust has developed an electronic system allowing GPs to log onto its secure NHS website from their surgery to view a patient's radiology records.

The information gives them a complete history of the radiology examinations and enables results to be emailed to a clinician where further advice is required.

The speedier access granted through the hi-tech system means that a patient's treatment may start sooner. It also allows easier access to results if the patient is seeing a locum GP or has an out-of-hours consultation.

*RIGHT: Senior radiographer Andrew Adams demonstrates the new electronic results service*



Paul Crockatt, radiology informatics manager said: "Previously, if a patient visited their GP and had a query concerning, say an X-ray ordered by a hospital consultant, the GP would not have received those results.

"Likewise, if a patient visits the

GP following an X-ray which a GP had requested, those results may not have been received in the post at the surgery - meaning the GP would have to stop the consultation and telephone the radiology department to find out the result."

## High praise for Stamford pathology

STAMFORD Hospital's pathology services have received praise as part of a national standards accreditation.

Inspectors from Clinical Pathology Accreditation (CPA) UK Ltd have just completed a series of assessments at Stamford laboratory.

The inspectors indicated that a 'normal' inspection of a typical laboratory would throw up around 30 non-compliances - some of which would fall into the category of 'critical' and require significant remedial action before approval and certification of the service.

At Stamford, CPA inspectors highlighted only four non-compliances, none of which are critical.

Non-compliant areas highlighted included; a clinical issue of blood samples being transported to Peterborough due to the non-replacement of the

blood gas machine, and calls to add the 'guidance and policies for phlebotomy services' to the document control procedure to ensure they are regularly reviewed and updated.

The inspectors described the staff as welcoming, extremely helpful and open. Their overall description of the service was that it was a well run laboratory and highly attuned to the needs of the client.

Trust pathology services manager Nick Mudge said: "This inspection outcome is quite simply superb and an indicator of the quality service the Stamford laboratory offers.

"Our gratitude and congratulations are therefore due to Lesley Lewis, Val Porter and their team and also to David Baxter and Ed Didsbury who oversaw the process."



*Trust pathology services manager Nick Mudge*

# the **pulse**

# letterbox

Pulse welcomes comments, views and letters from staff and patients - whether it's a thank you, a question you would like an answer to or comments about the new style Pulse. Send to communications officer Pam McNicol at Edith Cavell or contact 01733 875201 and we will print as many extracts as possible.

## Thank yous from grateful patients

**ICU:** My mum spent a long time in the intensive care unit. It has been an extremely hard time for her and her family, but we survived because of the fantastic amount of hard work put in by you all. It was a huge comfort for me going home each day knowing that mum was having the best care possible anywhere.

**Rheumatology:** May I take this opportunity to thank your department for the excellent care I received. Everyone was very caring and helpful - it's nice to be able to send compliments rather than criticisms. Thank you again.

**Endoscopy:** I would like to thank the nurses in the endoscopy suite for their kindness and care during my visit. I just want you to know that the care given was very much appreciated.

### **Histopathology services (received from the breast department):**

A patient who has recently finished treatment for breast cancer had a swelling in her axilla which needed to be

biopsied. She was due to go on holiday the next day and pathology

turned around the specimen quickly - fortunately, the results were benign.



Clearly this made a difference not only to the patient, but to her husband and extended family who planned a holiday together to celebrate the end of treatment. The pathology team frequently do not have direct contact with patients but their work is very much appreciated.

**Surgery:** Just a note to express my gratitude to all the staff concerned with my knee operation. I was very well looked after indeed. It is obviously a 'happy camper' atmosphere at Stamford Hospital and as a result, everyone benefits. Efficiency and patient care and concern were very evident.

### **Stamford Hospital day surgery unit:**

Thank you for the extremely high standard of care that I received on my recent visit. My sincere appreciation extends to the entire theatre team together with all nurses and doctors who attended to me post operation. May I also congratulate your domestic staff for the cleanliness that was evident throughout the hospital. It would be difficult to see how the private sector could better your performance and in fact might well learn a few lessons.

## Questions and answers - questions received from governors' surgeries

**Q What is being done to help elderly patients with feeding problems?**

**A:** All wards have a nurse with responsibility for their patients' nutrition.



Patients who are on puree diets also have teaspoons placed on their tray to enable more effective feeding. The equipment library holds boxes of adapted cutlery which wards can request for individual patients.

**Q Is the name of Edith Cavell Hospital being replaced when the new hospital is built?**

**A** The process for naming the new hospital is being considered and there is some time yet before a decision needs to be reached. If staff, patients or visitors have any suggestions, please get in touch with Pulse.

# Children benefit from the changes



Adrian Stone

**Y**OUNG patients and their families are reaping the benefits of recent changes to children's surgery at the Trust. The review of surgical services for children and adolescents has led to a number of changes.

Adrian Stone, general manager for surgery said: "Many of the young patients used to come into Ward 12 for ear, nose and throat (ENT) day surgery." Now the great majority of the children and adolescents are admitted directly to the day surgery unit at the Edith Cavell Hospital where they are treated and subsequently discharged.

Facilities have been identified so that the children are treated in separate areas from adult patients. A small number of children who need to stay in hospital overnight after their operation are admitted to and nursed on Amazon Ward at Peterborough District Hospital, the dedicated inpatient children's ward.

Adrian added: "The children were coming into Ward 12, then taken to the day surgery unit, and taken back to Ward 12 before they went home. We worked with the surgeons, the paediatric team, nurses and other clinical staff to re-organise the process to benefit the children and their families.

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Now,  
youngsters  
only have  
to adjust  
to one  
clinical  
department



ABOVE: Zoe Wilkinson, playleader and Jack Hemfrey in the new children's playroom in day surgery unit.

"They now come directly into the day surgery unit, so the youngsters only have to adjust to one clinical area. A registered sick children's nurse and a qualified play leader are present at all times to look after and reassure the children during their visit."

Inpatient paediatric surgery is now taking place in Peterborough District Hospital's operating theatres, where intensive care is available if needed. Children having surgery at PDH will initially be admitted to Amazon Ward prior to going to theatre - and then back onto the ward after because of the nature of their surgery.

■ Moving paediatric surgery from Ward 12 to the day surgery unit has allowed the surgical team to review their use of beds. Work is underway to move the ENT adult patients from Ward 11 into Ward 12. This will allow the Trust to relocate the general surgical and breast patients from Ward 9 to the larger Ward 11. The Trust will then decide the best use for Ward 9.



## Matron Kay puts best foot forward

PUTTING her best foot forward for a good cause - and in memory of her late sister - is trust matron (orthopaedics) Kay Ruggiero.

With the support of a group of trust colleagues, Kay has just taken part in a 16-mile sponsored walk - from Castor to Ashton along the Nene Way.

Kay, who is based at Edith Cavell Hospital, organised the fund raising event for breast cancer research - after the disease claimed the life of her sister.

Susan Crowson died from breast cancer eight

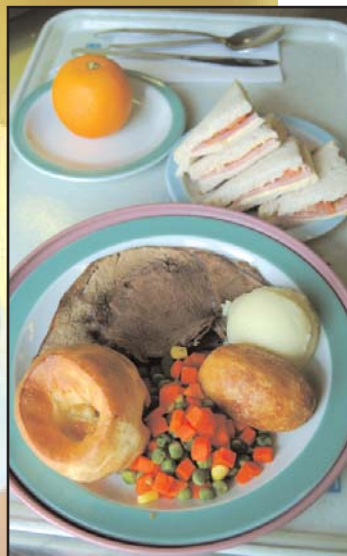
years ago, aged just 42.

Kay said: "I think most people are aware of the importance of breast cancer research which is what we are raising money for.

"However this walk is very personal to me as it was my sister who inspired me and gave me the courage to embark on my conversion course which lead to my diploma - degree and now my masters."

Despite the walk having already taken place, you can still sponsor Kay. Get in touch via email: [kay.ruggiero@pbh-tr.nhs.uk](mailto:kay.ruggiero@pbh-tr.nhs.uk)

Cook Andrew  
Grounds busy  
in the kitchen



Fans of celebrity chef Jamie Oliver will be aware of his latest culinary challenge of trying to change the culture of school dinners around the country - despite some schools receiving just 37 pence per pupil to lay on lunch. In hospitals, the amount given by the government per patient per day is £2.20. Pulse looks at how that money is spent in Peterborough.

# Food, food, glorious food...

**M**ACARONI with smoked haddock and herbs, pasta and lentil bolognese, and liver with braised sweet onions - mouthwatering dishes that could feature on any restaurant menu.

However, these recipes are just some of the many options presented to patients in Peterborough hospitals - as part of the Trust's on-going commitment to provide them with balanced, nutritional and tasty meals.

This is currently being achieved on the government's £2.20 a day per patient, providing them with breakfast, lunch and dinner - as well as seven drinks and any prescribed energy or high calorie drinks they require.

And as a final touch - the allocated amount also stretches to biscuits at bedtime.

At the moment, the catering teams serving Peterborough District, Edith Cavell hospitals and the maternity unit dish up a staggering 1,957 patient meals a day.

All the produce is freshly prepared and cooked in the hospital kitchen, and all ingredients are GM and nut-free.





ABOVE: Assistant head cook David Olley gets to work with the pastry.



WORKING closely with the catering team and the dietetics department is IV and nutrition nurse specialist Mary Bird.

Mary is the Trust's lead on the Essence of Care group - which looks at the basic nutrition offered to patients via their food intake in hospital.

She said: "Hospital food seems to have had a bad press in recent years, but with our involvement with the Essence of Care group and our commitment to other national initiatives like the protected mealtimes - which allows patients to have their food without interruptions - we are moving in the right direction."

"The nutrition team is looking to produce a more robust action plan to focus on the implementation of basic nutrition issues; including providing patients with only metal cutlery, hand wipes on trays and fridges on all sites where patients can have food out of catering hours."

Nutrition link nurses are also available on each ward.

# Putting fresh food first

Trust catering services manager Peter Gregory said: "As part of the better hospital food initiative, each mealtime contains at least one dish created for the NHS by a team of chefs working with Lloyd Grossman.

"We offer healthy eating options, as well as special diets where a patient requires some modification to their eating. We also cater for diabetics and vegetarians, vegans and provide halal meals."

Peter added: "We achieve all of this with good management controls and high quality staff.

"We use cost-effective suppliers through the NHS purchasing and supply agency and local suppliers who comply with codes of practice. With economic use of quality provisions, we strive to improve the service quality to

achieve customer satisfaction."

Latest research shows that on average, 26 per cent of daily food is wasted - that's 57 pence of each patient's £2.20 allocation.

To minimise waste, the Trust offers patients smaller portions if they request them.

A similar level of service is provided at Stamford Hospital.

■ Amid the recent Sudan I food scare, the Trust was also able to reassure patients - and

other restaurant users - that fresh and not processed produce is used in cooking, therefore eliminating any risk of contamination. All dried and crushed or ground chilli which is used in preparation of freshly prepared meals on site has been removed and destroyed, and the Trust is updated regularly on the situation.

## Patient survey comments

- Compliments to the cooks, the food is great - Thursday lunch was extra good! Thank you.
- The catering staff from top to bottom are very good, how they do it on the budget allowed is a total mystery. The food is almost invariably hot and fresh and well worth eating.
- Compliments to the chef for his superb menus
- Food was excellent, well prepared and presented
- Soups very hot and tasty



Ward 8 patient John Wilford tucks into his lunch

“ We offer healthy eating options ”

## Exploring a new way of working

THE Trust's gynaecology inpatient service has changed to a new way of working.

The gynaecology ward (6X) is to move from a seven day to a five day week for elective surgical work. Gynaecology emergency care will still be available seven days a week.

Consultant theatre lists for

major surgery will be on a Monday or Tuesday, and minor surgery will on a Wednesday and Thursday. This will result in a minimal number or no elective patients needing an inpatient stay from Friday evening.

From then until Monday morning, four beds will be used

for emergency admissions and any women who need to stay on the ward to recover after major emergency surgery.

Gynaecology emergency admissions and the early pregnancy assessment unit will still run as a full seven day week service with dedicated gynaecology nursing staff.

To mark National Breastfeeding Awareness Week this month - the Trust is reinforcing its 'breast is best' message to expectant and new mums, co-inciding with the appointment of infant feeding advisor Fiona Elliott.

# Breast is best for babies

## Pulse facts

- Almost three quarters of women in England and Wales (71 per cent) initially breastfeed their babies.
- Figures from 2000 show that 54 per cent of mothers were feeding their baby at two-weeks-old and 22 per cent by six months old.
- Across England and Wales, three-quarters (74 per cent) of first-time mothers breastfeed their babies initially compared with two-thirds (65 per cent) of mothers of subsequent babies.

*RIGHT: Newly appointed infant feeding advisor Fiona Elliott with new mum Rachel Jessup and baby Amy*

**A**MOTHER of three daughters, midwife Fiona Elliott has both a personal and professional interest in the subject of breastfeeding.

Two of her own daughters were born at home, and Fiona made friends with many new mums at post natal groups - where almost all the babies were being breastfed - igniting her interest in the subject.

As the Trust's recently-appointed infant feeding advisor, Fiona will be putting her many years of expertise to use, particularly with new mums who want to feed their babies naturally.

Both locally and nationally, the benefits of breastfeeding to mother and baby are being highlighted through Breastfeeding Awareness Week (May 8-14).

Although just several weeks into the post, Fiona has already re-started the breastfeeding workshops at the maternity unit for expectant and new mums.

Having qualified as a midwife in 1986, Fiona



has been working at the Trust for almost three years, working part-time on delivery suite and Victoria ward.

She said "After seven years at home, being a mum and my youngest daughter at nursery every morning, I was ready to get back to midwifery again.

"I completed my return to practice course in 1994, and breastfeeding was a field I became even more interested in and was thrilled when the opportunity arose to apply for this post."

She added: "Having had such positive childbirth experiences myself, I hope I can encourage and empower women to breastfeed their babies.

"This has to be a team effort and it is my responsibility to train student and new midwives to assist women to breastfeed, and to keep our experienced midwives updated and inspired too."

If you'd like to know more about breastfeeding, ask your midwife.

# Bouncing back after childbirth

*New mum Natalie Gadsby, baby Eleanor with senior II physiotherapist Angela Long.*

**W**ITH many new mums feeling under pressure to get back into shape soon after the birth - the Trust is running postnatal classes to ensure a safe and healthy ease back into exercise.

As well as giving professional and practical advice, the popular classes are also a great way to meet new mums. And what makes them even more special, is that the babies get a look in too!

Feedback from new mums led to the postnatal exercise classes being established - and they are now run on a weekly basis by the women's health team.

Mat work, cardiovascular exercise, gym balls, baby massage and pelvic floor education are some of the topics covered to enable women to regain their fitness as well as gain new skills.

The women's health team runs the classes, and currently consists of clinical lead/clinical specialist physiotherapist Jane Dixon and women's health and senior II

physiotherapist Angela Long.

Angela, who sees both ante and postnatal mums, treats musculoskeletal problems of pregnancy and childbirth, and some pelvic floor dysfunction cases, said: "The classes are proving to be a great success and

## Class aims

- Teach new mums how to exercise their stomach muscles correctly
- Provide information on returning to exercise
- Regain the stability in the pelvis which may have been lost during pregnancy
- Provide valuable information regarding training of pelvic floor muscles

very popular. As well as learning to relax, exercise properly and practising baby massage, it provides the women with a perfect



opportunity to socialise with other new mums."

One of the new mums who recently attended the class is Natalie Gadsby - who started coming to the classes soon after giving birth to daughter Eleanor.

She said: "The group has given me the opportunity to exercise correctly following the birth of my baby. It has also given me the chance to learn baby massage and include Eleanor in the weekly exercise session. It was lovely to meet other new mums and chat about motherhood!"

The classes run each Thursday, and places are limited to 10 mums per week. Mums can attend immediately after a normal delivery or from four weeks after a caesarean section.

- For more information, call **01733 875923**.

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*The classes are proving to be a great success and very popular*  
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## Maternity unit video

AN information video giving expectant parents a virtual tour of the maternity unit and its facilities before their baby is born is soon to become available.

The 30-minute video has been funded by the maternity services liaison committee (MSLC), the local Sure Start programmes and Caverstede Early Excellence Centre, produced in conjunction with the Trust.

The video will follow an expectant mum through the various stages of pregnancy; preparing for the birth, attending the labour ward, moving to the postnatal ward transferring home and new-born screening.

Pam Setterfield of the MSLC explained: "Many expectant parents want the opportunity to visit the hospital and have a look at the facilities before their delivery date - but this is not always possible to achieve in a single visit.

"The purpose of the video is to offer a 'virtual tour' of the hospital - providing an opportunity to see inside the unit and provides an insight on what to expect at the maternity unit.

"Once complete we hope to be able to distribute the videos to show at parentcraft events and also loan them to new parents - or parents who want a reminder if having another baby."



The Trust has now selected the consortium that will build Peterborough's new multi-million pound hospital. International company Progress Health will be responsible for city's biggest ever investment in healthcare facilities. Pulse takes a pictorial look at what's in store...

# Stepping into the future



*This is great news for Peterborough - £300 million of new capital investment in health by 2010*



OVER the next five years, the city's healthcare facilities will undergo a major transformation. After 14 months of detailed planning and design by two preferred bidders - and consultation with health representatives and the public - the consortium selected to take on the massive project has been announced.

Progress Health have a wealth of experience in designing and building hospitals around the world.

It is a consortium sponsored by global wholesale bank ABN AMRO and the Multiplex Group - a major force in construction, development and infrastructure across Australia, Asia, the Middle East and the UK.

Their innovative designs for the new-look acute hospital, integrated care centre and mental health unit will firmly establish Peterborough's healthcare facilities in the 21st century and beyond - offering a state-of-the-art look, as well as some of the most hi-tech medical equipment currently available.

The new facilities will be built by Multiplex Construction Ltd, estates and ground services will be provided by Multiplex FM, with cleaning, catering, laundry, security and portering being provided by Medirest.

Progress Health architects are Nightingales Associates and the healthcare planners are RKW.

Trust chief executive Chris Banks said: "This is great news for Peterborough - £300 million of new capital investment in health by 2010. This is by far the biggest single investment Peterborough will see in the next five years. We have achieved another project milestone on time, and now we go into the final leg of detailed planning and approvals in the expectation that building work on the new health facilities will start around March next year."

Staff design user groups restarted in April and will work through

the detailed design.

Pat Cannon, director of Multiplex Infrastructure (UK), for the Multiplex Group (pictured above far left with chief executive Chris Banks), added: "The Progress Health team has worked closely with the trusts to develop an innovative design solution that will produce healthcare facilities

the community can be proud of. "We also believe our proposals will enable the trusts to deliver the very best healthcare in the future by providing optimum clinical functionality within a welcoming environment."

Having worked closely with Progress Health over recent months, Greater Peterborough Health Investment Plan project director St Clair Armitage added his support to the decision. "I have no doubt that we have established a relationship with the consortium and a standard of design that will ensure that together we deliver a first class service to our patients."

## At a glance

- The new integrated care centre will be built on the site of Fenland Wing at Peterborough District Hospital and will include; 40 specialist rehabilitation beds, pharmacy, outpatient diagnostic and treatment centre, general rehabilitation services and children's care centre - due for completion early 2008.

- The new mental health unit, to be built on the Edith Cavell Hospital site, will include; 50-bed adult acute unit, 42-bed older people's unit, psychiatric intensive care unit, 10-bed learning disabilities unit, centralised dining, fitness, recreational and staff facilities, garden areas - due for completion early 2008.

- The new acute hospital to be built on the Edith Cavell site will include; 762 inpatient beds, emergency care centre, hi-tech diagnostics unit, women and children's unit, cancer unit, specialist rehabilitation unit, renal dialysis and multi-disciplinary education and training centre - due for completion mid-2009.

## In brief...

**Donation:** Young oncology patients are to benefit from a £20,000 donation from Crowland Cancer Care. The group has raised the cash for the Trust's Amazon ward to provide ensuite bathroom facilities. Work is currently under way on the project.

**National assessor:**

Well done to postgraduate medical centre (PGMC) manager Barbara Petrie on achieving national assessor status. She successfully completed the National Association for Medical Education Management training programme - accredited by Middlesex University. The programme covers all aspects of running a PGMC – managerial, educational, financial, personnel, and the recognition now enables Barbara to assess submissions from colleagues across the country.



# Trust Oscars: to recognise high achievers

**T**HE Trust has unveiled details of its very own 'Oscars' - aimed at rewarding high achievers and unsung heroes throughout Peterborough and Stamford hospitals.

The annual outstanding achievement awards will honour staff who have excelled in their role, as well as praising the team of the year - culminating in a presentation ceremony towards the end of the year.

The awards were suggested by staff and have been developed by the human resources department as part of the Trust's commitment to improving working lives. And as this scheme complements the current unsung hero awards, individuals and teams

Barnett explained: "As a trust, we are committed to attracting, developing and retaining good quality staff.

"We feel that an important part of this is rewarding, recognising and valuing those staff who demonstrate outstanding good work.

"This staff recognition scheme will be trust-wide and will be made up of a maximum of five individual awards and one team of the year award."

Volunteers, and non-trust staff who are working for the hospital, will also be eligible to receive awards.

Louise added: "To be eligible, participants will need to have performed their duties in an outstanding manner, far beyond that which would normally be expected for their grade, training and experience."

The final touches are currently being made to the scheme and a selection process will choose the winners - which will be ratified by the board of governors.

They will then be invited to attend an awards ceremony to receive their certificates and/or trophy.



*ABOVE: Human resources Fiona Tullie gets into the award spirit*

receiving these awards can also be recommended for the new-style trust awards.

Assistant director of human resources, Louise

“  
*We are committed to attracting, developing and retaining good quality staff and feel that an important part of this is rewarding, recognising and valuing those staff who demonstrate outstanding good work.*  
”

# Prison patients



**W**ITH the city's £65 million prison (pictured) now open, the Trust - along with other service professionals - will play its part in the delivery of healthcare to inmates.

HMP Peterborough is the first dual jail in the country, and has capacity for 480 male and 360 female prisoners - including a mother and baby unit.

Both the male and female sides of the prison will have a separate healthcare centre, and in essence will be two prisons functioning as one.

Over the past 18 months, discussions have taken place with UKDS, the private prison provider, prison healthcare staff, primary care and hospital staff to the provision of healthcare for inmates.

UKDS is commissioning its nursing service for Peterborough Prison from Greater Peterborough

## Trust provides health service to prisoners

Primary Care Partnership (GPPCP); while staff will be employed by the NHS, the prison will be their working base.

Mental health services will be commissioned by GPPCP from Cambridgeshire and

Peterborough Mental Health Partnership Trust on behalf of UKDS and the maternity, emergency and elective services are being provided through the hospital.

Meanwhile, the Trust's pharmacy staff will be providing a dispensing service in the prison. Trust general manager Di Sheppard said: "In the main, the prison population will access hospital services in the same way as the rest of the population.

Emergency admissions will attend A&E, medical admissions and surgical admission areas. Elective patients will be referred by the prison GPs to any of the outpatient specialities."

**Allergy week: Over half of the population suffers from some sort of allergy - with common symptoms ranging from skin**

**rashes and sneezing to shortness of breath. This month's National Allergy Week (16-20 May) is helping to raise**

**awareness of how people can**

**find out more about their allergy, or be tested for a suspected allergy. A one-stop clinic to confirm or eliminate allergies has also proved successful over the past three years. Clinical nurse leader/allergy nurse Yvonne Whitehead (pictured) sees patients referred from ear, nose and throat doctors or GPs. She said: "These clinics are on the increase. The most common allergies are house dust mites, grass and cats."**



Maternity and gynaecology services have been working with the prison and the primary care partnership to design a service to meet the needs of the women and babies.

The mother and baby unit has space for 12 mothers and 13 babies to accommodate a mother with twins. Babies may stay in the unit for up to 18 months.

## In brief...

**Diary date:** The healthcare governance annual general meeting is being held on May 25. Speakers will include Liz Mulvaney, head of healthcare at a branch of solicitors, and Leicester consultant gynaecologist Nick Naftalin OBE. To book a place, contact Anne Shipp on ext 4036.

**Courses:** New course dates focusing on customer care have been arranged by the learning and development centre. Designed to enhance awareness and understanding of the need for good customer care within the Trust. The next date for your diary is Friday, 13 May. For details and dates of future courses, contact ext 4597.

**Degrees:** Well done to nurses Claire Brown and Karen Booth who have achieved 2:1 Bachelor of Science (Honours) degrees from the South Bank University for their studies in occupational health.

Multiple Sclerosis (MS) is an incurable neurological condition which usually strikes in the prime of life. As yet, there is no known cause and no known cure. The UK has around 85,000 sufferers - whose plight, care and needs have been highlighted during the recent National MS Week. Pulse takes a look at the impact of MS on people locally...

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*Our aim is to be proactive instead of reactive in preventing hospital admissions, re-admissions and helping patients who are experiencing a relapse of their condition.*

”

# How we support MS patients

**M**ULTIPLE Sclerosis (MS) is one of the most common diseases of the central nervous system affecting young adults.

It is a complex condition often requiring a multi-disciplinary team approach in disease management.

However, there is still a huge lack of understanding about the condition, and multiple sclerosis nurse specialist Clare Lennon is working with the Trust and community staff locally to raise awareness.

Her work with the estimated 400 MS patients in the greater Peterborough area sees Clare offering support, advice, information and education to them and their families.

She also acts as the vital link between patients, healthcare and social care professionals, among others, to ensure that patients receive timely intervention in relation to symptom and pain management, provision of care and equipment, access to benefits and assistance to remain in work. Clare explained: "Apart from running clinics and seeing patients at home when



ABOVE: Multiple sclerosis nurse specialist Clare Lennon (right) is pictured with carer Lorraine Standbrook.

## Pulse facts

- MS is the greatest cause of disability in young adults.
- Clare is one of just 200 MS nurse specialists around the UK.
- Around 50 new cases of MS are diagnosed each week - mainly in the 20-40 age group.
- If you would like more details on MS or what support is available to patients and their carers, contact MS nurse specialist Clare Lennon at the Trust on 875206 or the local branch of the MS Society on 01733 567714. Alternatively, log on to: [www.mssociety.org.uk](http://www.mssociety.org.uk)

**MS**  
Multiple Sclerosis Society

required, there are also many other elements to my role - setting up and running self-help support groups for patients and carers, to running courses for newly diagnosed patients, teaching, providing study days and keeping up to date with research - to lift the profile of the condition to a wider audience.

"Our aim is to be proactive instead of reactive in preventing hospital admissions, re-admissions and helping patients who are experiencing a relapse of their condition.

"It is vital that patients know the service is there to help them when they need it."

## The patient

● JASON Jakes is a lively, outgoing 30-year-old who enjoys socialising with his mates over a drink or game of snooker.

At 17, Jason was diagnosed with MS. Despite spending the past 13 years battling both MS and the arthritis he was born with, Jason sees himself as 'one of the lucky ones'.

He explains: "I woke up one morning not being able to feel my arm - it was numb from my shoulder down to my fingertips. I went to



see the doctor who sent me for tests and I was later diagnosed with MS.

"I was in complete shock - I had visions of being wheelchair bound and thought I was the only person in the world to have MS. But the support I receive now is fantastic, especially the young persons group which meets regularly.

"I do occasionally have relapses - mainly brought on by stress - which involve some degree of numbness either down the side or the lower half of my body.

"The numbness means I have great difficulty in walking even short distances and I get very tired - you have no control over your legs and feel like a puppet with no strings. To the ordinary person, someone with MS can look like they have nothing wrong with them on the face of it - but things like the feeling of being drained are invisible.

"I've never been a quitter and I'm not going to start now. I don't like looking back and look to much on the bad times - I try to remain positive and look as far forward as possible."

“  
*The support I receive now is fantastic, especially the young persons group which meets regularly.*  
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## The carer

● SEVEN years go - Keith Standbrook was out for a walk with wife Lorraine when one of his legs gave way.

After suffering a similar attack within the space of a few months, he sought medical advice and underwent tests.

"At first we thought the whole thing was down to stress, as we had recently moved house.

However, we weren't prepared for the diagnosis and our world fell apart," said Lorraine (49).

Keith, now 51, is still working, and continues to drive and retain a degree of independence - although the household has undergone some changes to help make life more comfortable.

Lorraine said: "I have to do more of the physical things around the house, which Keith found frustrating in the beginning -

having always been the one to do the decorating and DIY.

"As a carer of someone with MS, all you want to do is help them without resistance - and every new

experience you have to deal with is like turning a page. It does get a little easier and we are taking one step at a time.

Lorraine has the support not only of her three grown up children, but of the local MS group - where she has formed friendships with other carers. We still enjoy our outings to the theatre and holidays in this country - they just take a little more planning than they used to."



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*We weren't prepared for the diagnosis and our world fell apart*

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## The professional

● MIDWIFE and recently appointed trust infant feeding advisor Fiona Elliott (pictured) was diagnosed with MS in 1997.

"At first it was quite easy to ignore the condition as apart from affecting the distance and pace of my walking sometimes, MS didn't really affect my life," she said.



"However, now the MS is affecting my life, and there are more limitations to what I can do. This is sad and frustrating, but I try to focus on what I can still do, and

think through alternative activities to replace those that I can't."

Excited by her new role with the Trust, Fiona

added: "I'm lucky to still be working, and my new post in midwifery is not quite so energetic.

"I am able to achieve a healthy work-life balance, which is vital to pacing my activities, and hopefully reduce stress, even if I have a busy husband and three teenage daughters!

"The MS support group is a place where we can give each other moral support, and have a laugh, knowing that there is understanding too. MS is very subtle, and different for each person affected. The more others are aware of the condition, the easier it will be for us to carry on in work and live as active lives as possible."

“

*At first it was quite easy to ignore the condition... now the MS is affecting my life, and there are more limitations to what I can do.*

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## In brief...

**Stamford tour:** Trust governors were given a tour of Stamford Hospital to meet with staff and look at the facilities.

Ken Wright, Keith Smith, Arthur Critchley and John Dawson joined the then hospital manager Paula Gorst for a tour of Greenwood day surgery unit, the minor injuries unit, outpatients and an inpatient ward.

Two of the governors had fond memories of being cared for at Stamford Hospital in the past.

■ Another recent visitor to Stamford Hospital was newly-appointed non-executive



director Sarah Raper (pictured above).

Sarah said: "It was most interesting to tour Stamford Hospital and see the facilities, including the minor injuries unit. I was impressed by cleanliness throughout the hospital, and by the friendliness and professionalism of staff."

As Peterborough and Stamford hospitals celebrate the first anniversary of being a Foundation Trust - Pulse catches up with Heather Hanlon (pictured) - one of the 26 public, partner and staff governors - about her role.



# Governors and what they do

**Name:** Heather Hanlon

**Job title:** Partner governor and volunteer co-ordinator, Stamford Hospital

**What are your main duties/responsibilities as a partner governor?**

I joined the Trust last year as a partner governor, representing the volunteer sector. I am required to attend board meetings and read relevant paperwork. I sit on the patient and public involvement and the members communications and recruitment committees.

**How have the past 12 months been for you in this role?**

When the board of governors was first formed, I think that we were all curious as to what our role would be in the newly established foundation trust. As the months have passed we have become more actively involved. Most of us serve on at least two committees, and the executive makes every effort to keep us abreast of, and involved in, current issues, whenever possible.

**What excites you most about the future?**

I am particularly excited about the Stamford Hospital Investment Partnership, which is now well under way. A clinical strategy for the hospital has already been put in place, and it is hoped that plans will soon be drawn up to bring facilities in line with the strategy.

**Tell us a little about your work / life away from the Trust?**

I took over as volunteer co-ordinator at Stamford Hospital just under a year ago, having worked as a volunteer for five years. We have a wonderful team of 30 volunteers who do a marvellous job meeting and greeting patients and generally helping out in outpatients. I am training to be a First Responder. This is a local volunteer who is able to provide life-saving treatment to people who are critically injured or ill in the first few minutes prior to the arrival of an ambulance.

**What are your hobbies and interests?**

My grandchildren, and overseas travel.

“

*I am particularly excited about the Stamford Hospital Investment Plan, which is now well under way.*

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Front line staff from across the Trust are putting themselves in the shoes of disabled patients and visitors coming into hospital.

# Staff get a close-up view of disability



“  
*This further demonstrates our commitment to all our hospital users, and ensures that our staff and volunteers acquire the skills needed to assist all people with disabilities entering the Trust*  
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**D**ISABILITY awareness workshops have been running at the Trust for the past eight years, helping to equip staff with the knowledge to assist people who have a physical disability or a mental illness.

The sessions involve staff becoming a wheelchair user in order to navigate the hospital, or being blindfolded to experience life as a visually impaired person.

The workshops - attended by nursing and medical staff, porters, receptionists, ward clerks and volunteers (to name a few) - are now recognised as part of the improving working lives (IWL) commitment.

The two-day course consists of a mixture of lectures, practical sessions and presentations from professional staff and disabled service users.

To date, 354 members of staff

have attended the workshops

Mary Martin, workshop facilitator, said: “We’re delighted that the workshops have been so well supported. This further demonstrates our commitment to all our hospital users, and ensures that our staff and volunteers acquire the skills needed to enable them to assist all people with disabilities entering the Trust.”

For further information, or to book a place on the next course on May 22/23, contact the clinical and life support service unit on ext 5218 or email Janet Darke or Christine Gregory. The trust also has a disability advisory group which meets on a regular basis.

*PICTURED ABOVE: Mary Martin, workshop facilitator, and Janet Darke from clinical and life support unit put themselves in the shoes of disabled patients and visitors.*

*LEFT: Mary Martin, workshop facilitator, with one of the hearing loop systems.*

## Representing the disabled

ENSURING that the needs of disabled and impaired hospital users are promoted and met is the Trust’s disability advisory group.

Set up in 1997, the group comprising staff representatives, former patients, young person’s representatives and members from MIND, Deafblind UK, Mencap and DIAL meets quarterly and is chaired by Di Sheppard, general manager for clinical and life support services.

The aims are to:

- Act as an effective forum to promote disability/impairment issues, inside and outside the Trust.
- Facilitate and monitor compliance with the Disability Discrimination Act.
- Ensure all services, facilities and information allow equal access where reasonable.
- Support disability/impairment awareness and equality training among staff.
- Take action on disability related issues and promote awareness of the group and its role in the Trust. The group has been involved in a number of projects, including: installing hearing loops in several key areas around the Trust, like main receptions, outpatients, therapy services, maternity unit and X-ray.

An access audit has also been carried out to review the Trust’s access for disabled people - highlighting several areas across all sites which need improvement. The Trust website is being updated with information for users of services who have a disability.

# Preparing for all eventualities

CHEMICAL suits and a mobile decontamination unit - this may look like a scene from a hard-hitting television drama, but thankfully it is all part of the Trust's on-going training.

Staff from around the Trust have recently completed a specially-organised decontamination training day, including hands-on practical exercises as well as written theory.

It is part and parcel of the Trust's training commitment to dealing with a

major accident or incident - as outlined in its major incident plan.

Trust accident and emergency lead nurse, sister Celia Kendrick explained: "There is a chance patients may present themselves to A&E who have been contaminated by chemical substances.



"The A&E staff have to decontaminate casualties before they enter the building."

Celia added: "To do this safely, staff must protect themselves and wear protective suits that meet agreed specifications."

# It's all change...

Service improvement team will review the way we do things

IT'S all change for the transformation team, which is being relaunched as the service improvement team. It will be headed up by Paula Gorst.

Its key objective will be to lead a programme to review and reorganise services to meet the challenges presented to the Trust going forward.

This will support the Trust's service priority to be the 'hospitals of choice' for the local population and a best practice example to the rest of the NHS.

There are four key areas the team will initially be working with operational colleagues to address:

- Booking and choice arrangements, including the production of a directory of our services.
- Changes required to medical and surgical patient pathways, including support services; focusing on length of stay.
- Utilisation of theatres, in particular the need to perform a higher percentage of procedures as day cases.

■ Need to improve efficiency and value for money of our administrative processes.

Paula, recently appointed associate director of service improvement, said: "The team hopes to enable a 'joined up' approach to service improvement. This will be by developing a database of service improvement initiatives; standardising documentation and supporting individuals striving to achieve change across the organisation."

- Plans for improving patient pathways include:
- Increasing day surgery rate to 75 per cent
  - Decreasing the length of stay of medical patients
  - Reducing the number of patients admitted unnecessarily the day before surgery
  - Improving patient flows
  - Developing a comprehensive pre-assessment service
  - Using information for service improvement



Paula Gorst



Mandy Renton

## Mandy's Stamford role

PAULA was appointed to the post from her position as manager of Stamford Hospital.

Meanwhile, the trust executive team has appointed Mandy Renton as the new hospital manager - a role she will take on in addition to her current job of general manager of the woman and child service unit.

Mandy said: "I am really pleased to have this opportunity to further develop the relationship between woman and child services and Stamford Hospital - as well as from a personal level, to learn much more about the broad agenda at Stamford and being in the position to steer the hospital forward."



*I'd really like to pay tribute to the dedication of my small team of staff who work very hard in trying to serve the needs of the multi-disciplinary teams. Collecting data is no mean task across so many different specialties and personnel*



# Gill says her final farewells



ABOVE: Left to right - Rebecca Hardy, Gill Coffey and Jo Catlin.

**A**FTER quarter of a century's service to the Trust - cancer services manager Gill Coffey retires this month.

Friends and colleagues will bid a fond farewell to Gill, whose dedication and commitment to the cause has allowed the role to evolve and develop over the past five years.

Wide-spread staff, patient and carer

involvement has enabled Peterborough to put its cancer services work on the map both locally and regionally.

Gill started her career at St Andrew's Hospital, Northampton as a medical secretary in 1968. She arrived at Peterborough in 1980 as orthopaedic secretary, and took up post as the first medical secretary manager.

In 1998 when the Edith Cavell Hospital opened, she was appointed medical records/administration manager. And after a

spell as business manager working with director of operations Bill Stevenson, she moved to the post of cancer services manager.

Working across all cancer specialities, Gill has successfully promoted the service to a multi-disciplinary audience across the Trust and indeed the West Anglia Cancer Network, where she acted as the Trust's link.

She has also been fundamental to the setting up of the cancer patient/carer involvement group which meets regularly at the Macmillan Day Centre.

Gill said: "I'd really like to pay tribute to the dedication of my small team of staff who work very hard in trying to serve the needs of the multi-disciplinary teams.

Collecting data is no mean task across so many different specialities and personnel."

## ...and Rebecca steps into her shoes

FOLLOWING Gill's retirement, Rebecca Hardy - assistant general manager for cancer and specialist services, will take on the more strategic elements of Gill's current role.

This will include acting as the main managerial link with the West Anglia Cancer Network and the Cancer Service Improvement Partnership and also overseeing the peer review and waiting times work - something which Gill helped to initiate.

Rebecca will continue to manage the cancer/palliative care specialist nurses in the medical service unit, as well as the Macmillan Day Centre, the clinical trials team and the matron for haematology/oncology.

She will be supported by Jo Catlin, the new cancer services manager, who will take on the other elements of Gill's role.

Lyndsay Carter has also recently joined the team as the lead cancer and palliative care nurse.

## Change agenda

THE Agenda For Change team is making good progress with matching jobs within the Trust to national profiles - and are around half-way through some 1,500 staff and their roles.

The first group of 46 D/E grade nurses received their basic Agenda for Change pay in April, with arrears to follow this month.

Meanwhile, staff are being reminded about the importance of keeping the team informed of any changes to address details.

## In brief...

**Donation:** Specialist new equipment to be used in patient blood transfusions has been donated to the Trust by Jehovah's Witnesses - East of England Bloodless Society. The Sorin cell salvage machine can be used to store and clean a person's own blood and then give it back to them.

Primarily used for Jehovah's Witness patients it can also be used for other patients undergoing surgery where blood loss is anticipated.

### SCBU donation:

Members of the Belsize Woodston and Fletton Cubs and Beavers visited the special care baby unit in April to present a cheque for £250 which they had raised by holding a sponsored silence.

**New consultants:** The Trust welcomes Dr Cilla Reid, A&E; Dr Brendan Pearmain, anaesthetics and Dr Seema Brij, respiratory medicine.

### Cleaning certificates:

Well done to the 52-strong group of ISS Mediclean staff (the Trust domestic contractors) on receiving their NVQ level 1 certificate.

# PROFILE

Away from his work in theatres - long-serving consultant anaesthetist Paul Reed is bowled over by bells! Pulse catches up with the bell-ringing cricket fan...



**Name:** Dr Paul Reed

**Job title and where based?** Consultant anaesthetist, Peterborough and Stamford hospitals.

**What are your main duties/responsibilities?** Routine and emergency anaesthetic services and responsibility for one of the busiest hyperbaric units in the country.

**How long have you been doing this job and what did you do before?**

I've been a consultant in Peterborough for 17 years. I was previously a senior registrar in Leicester, but initially trained in anaesthetics in the army, starting in 1980.

**Tell us a bit about your hobby of bell ringing.**

I started ringing about 10 years ago at St Kyneburgha's Church in Castor, but I am now based at St John's Church, Cathedral Square. In this area, Castor has the best bells upon which to learn. St John's has the heaviest and most pleasant sounding bells, I may be biased as I am tower captain at St John's. I do worship at St John's, but Christian faith is not essential, bellringing is a pastime open to all, irrespective of religion.

Nearly anyone can become a proficient bellringer. Mastering the basics takes some time, patience and perseverance. Once the

basic technique is mastered it is more intellectually challenging than physically demanding. Most ringing does, however, work up a thirst. The replacement of lost fluid is, for many, an integral part of this leisure pursuit. I will never become an expert, starting too late in life, but I am able to ring to a reasonable standard and am actively involved in teaching others in the Peterborough area.

**Has bell ringing become more popular?**

There was a surge of interest in ringing at the time of the millennium, co-incident with a concerted national recruitment drive and lottery funding. This brought new life and opportunities to the ringing community, but rather like the post-war baby boom, it has created problems. I guess the ringers of the millennium "baby boom" are now at the awkward adolescent stage!



**What are your other hobbies/interests?**

My other interests include organising the hospital cricket team.

For more information on either the cricket team or bellringing, please contact me by email, new recruits are needed for both.

# Strictly sterile

Vital service used by other hospitals

**S**PECIALIST work in preparing chemotherapy and other drugs in a strict sterile environment is being practised at the Trust - and that expertise is being enjoyed by surrounding hospitals.

There are three 'clean rooms' are at the Edith Cavell Hospital, where the process of aseptic manufacturing takes place.

This involves taking previously sterilised components to prepare products ready for administration to the patient - often necessary for intravenous nutrition and chemotherapy.

Tracey Sharman, aseptic services manager for the pharmacy department, explained: "To reduce the chance of contamination during this aseptic transfer, manufacturing is undertaken in highly specialised cabinets within a clean room environment where the operator has to wear a special suit in order to enter and manufacture the product.

"Each operator is specially trained and validated to ensure they can carry out this process without contaminating the product."

The manufacturing unit currently holds a "specials" licence and follows very strict rules and regulations in order to comply with its requirements.

It also offers the flexibility to work more efficiently and generate income from other trusts and organisations. Current customers include Papworth and Hinchingsbrooke hospitals and Healthcare at Home.



ABOVE: Pharmacy's Catherine Mandaza (left) and Melanie Hutchinson in the aseptic manufacturing area.

“

*To reduce the chance of contamination during this aseptic transfer, manufacturing is undertaken in highly specialised cabinets within a clean room environment where the operator has to wear a special suit in order to enter and manufacture the product.*

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## Pre-packing services

A separate area within manufacturing, but run by the same team is pre-packing.

This involves re-packaging or over labelling patient ready packs to allow dispensing of items outside pharmacy working hours.

Areas with a high usage of these packs include A&E and the Walk in Centre at Rivergate.

Pre-packing services also service and maintain all the emergency trays and packs used within the hospital and community.

## In brief...

**Fond farewell:** The Trust has said farewell and good luck to assistant general manager performance, Mark Roberts.

Mark, who has been at the Trust for 13 years,



is moving to pastures new as associate director - imaging, haematology and oncology at United Lincolnshire Hospitals NHS Trust.

Mark (pictured) began his Trust career in radiology and then the surgical unit.

Taking over from Mark at the Trust is Rob Heywood, appointed to the role of assistant general manager - PDH specialties within the surgical service unit. Steve Cumley, operations services manager will act into the assistant general manager role until Rob takes up the post.

**Fit to walk:** Want to keep fit but don't do sport or want to join a gym? Walking is the easiest, safest and cheapest form of physical activity - and Peterborough Health Walks want to hear from you! Walks are suitable for pushchairs and wheelchairs. Contact paul.moulding@greaterpboropcp.nhs.uk for details.

Everyone has a point of view on:

# Trust travel options

“HOSPITAL staff, patients and visitors have had their say over trust plans to address parking congestion and other travel issues through its travel options consultation.

*This has been a very worthwhile exercise*

”

The consultation is now closed, and the replies are being analysed by the Trust's travel plan group before putting recommendations to the Trust board of directors at the end of May.

The Trust invited the views of its 3,600 members of staff and 5,100 public foundation trust members on its travel options.

These include; proposed car parking charge increases, provision of additional

disabled parking, consulting bus companies over saver tickets for hospital users, launching a staff car sharing scheme and introducing pool cycles to enable staff to travel between sites.

Trust chief executive Chris Banks said: "This has been a worthwhile exercise, with the aim of gathering the views of as many of our hospital users as possible before any decisions are made.

"The proposals upon which people were invited to comment have taken into account a number of actions which impact on staff, patients and visitors."

Pulse hopes to update you on the travel option plan in the next issue.



## Fair swap? School for work

**TOP LEFT:**  
*Twins Thomas and Rebecca Allam get to grips with working life in radiology with their dad Steve*



**MIDDLE:** *Thomas Didsbury gives his mum Helen a helping hand in the haematology lab*



**BOTTOM:**  
*Pharmacy's Julie Dawes shows son Matthew the ropes*

YOUNGSTERS of staff from around the Trust swapped classrooms and playgrounds for labs and hospital wards - as part of an initiative to give children a taste of the working environment.

The popular 'take our sons and daughters to work day' saw around 15 children accompanying their parents to work - in areas including catering, clinical audit, haematology, pharmacy and radiology.

The Trust has taken part in the initiative for a number of years, and it is committed to giving children the opportunity to see what their mums and dads get up to at work.

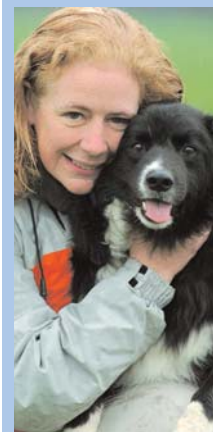
Trust recruitment manager, Keith Batterbee said: "The scheme is regarded as a valuable way for children to be introduced to the idea of working in the NHS. Previous attendees have come back to complete a full two week work experience placement because they enjoyed the day so much."

## Dog's life for D'Arcy

HELPING to make a dream come true for theatres specialist support worker Sally Parker recently was her very own 'Mr D'Arcy'.

D'Arcy is in fact Sally's border collie - and the dream day out was at this year's Crufts dog show. Sally and six-year-old D'Arcy competed in the agility finals of the Eukanuba Mini/Maxi Pairs Challenge, and were among just 15 pairs from 300 to qualify. However, their first place was snatched from them following a single mistake on the course.

She explained: "It had always been a lifetime's dream to go to Crufts with my own dog, D'Arcy made my dream come true. "We had a great day and a fantastic experience."



*Sally Parker and D'Arcy.*