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### local families for local children

We're looking for people with childcare experience interested in participating in our Family Link Scheme, which provides periods of daycare or respite care for disabled children of all ages in Bath & North East Somerset.

If you have experience and a few hours to spare we would love to hear from you. You can be single, or with a partner, with or without children. You need energy, common sense and patience. Ongoing training will be provided and you will be paid a small allowance.



Can you help?

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# Welcome



In this latest edition of insight, you can find out how a simple breathing monitor is helping save the lives of critically ill patients, how knitting helps prevent and manage stress, pain and depression and why timely medication for patients with Parkinson's disease is so vitally important.

Dan (left) wins prestigious award – P19

Many of us got caught up in the Royal Wedding celebrations and we are delighted that the cover of insight features the Royal Wedding as seen through the eyes of some of our youngest patients. The picture captures William and Catherine outside Westminster Abbey, and you can see the full mural in all its glory on page 6.

We also tell you about our important plans for the future as we continue our journey to become an NHS Foundation Trust Hospital. We hope to be authorised as an NHS Foundation Trust in April 2012. Since March, we have been talking about our plans to patients, public and staff and if you'd like to know more or become a member, turn to our article on page 18.

Anita Houlding

Senior Communications Officer / Editor

### Editorial dates 2011

You can send your articles for insight via email to anita.houlding@ruh.nhs.uk or communication@ruh.nhs.uk or you can send a paper copy via the internal mail.

Deadline for copy for next issue is **11 August 2011** for publication early in September.

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# in**safehands**

# Together we're **improving patient care**

Patient safety and quality of patient care are the top priorities at the RUH and we like to keep readers updated on the improvements that continue to be made in relation to patient safety.

Recently, a group of doctors, nurses, a therapist, a pharmacist and members of the cleaning team who represented five wards – an orthopaedic, surgical, medical and older people's ward, and the Acute Stroke Unit – came together as they all had ideas on how we could reduce Clostridium *difficile* (C.diff).

Assistant Director of Nursing Jo Miller explains: "The group each identified one aim per ward and put together an action plan. They agreed to look at ways of restricting the use of antibiotics as prolonged use of them can increase the patient's risk of getting C.diff; to ensure that that those patients with reduced mobility who can't get to a sink are offered handwipes which can be used to improve hand hygiene; the way we clean and prepare bed spaces and keep all surfaces and floors clear – all things that will reduce C.diff.

"One of the proven successes is the 'bed space checklist', used once a bed space has been cleaned following a patient being discharged. This checklist, which was developed by Healthcare Assistant Jayne Duggan (see page 14) and trialled in one ward initially, comprises a series of tick boxes which the nurse cleaning and preparing the bed space has to complete and sign. Visitors have been impressed with this simple and effective way of ensuring the bed area is sufficiently prepared for the next patient.

"The end result of this work is that the Acute Stroke Unit hasn't had a single case of C.diff for more than a year and



the number of C.diff cases on the other four wards has significantly reduced. The checklist is now being used in other wards across the hospital."

One of the hospital's cleaning team based on the Respiratory ward – Chris Boulton (above) – suggested that the infection control signs used on the doors of isolation rooms should be colour coded to represent the room's 'status' at any one time, so that cleaners can clearly see what type of cleaning is required without having to ask staff. Chris says: "If it helps save one patient's life, then I've done my job." This great idea has already been put into practice.

Jo says: "It's really encouraging that ideas are coming from staff with differing roles and responsibilities. They're demonstrating that everyone can help make improvements to patient care."

A new group of staff representing four different wards has begun to look at how we can further reduce the incidence of pressure ulcers (more commonly known as bed sores). Last year we were required to reduce the most serious pressure ulcers by 50%. We actually exceeded this target and reduced grade 3 and 4 pressure ulcers by 63%. In addition, we've been rated by Dr Foster as having a 'low' risk score for pressure ulcers – which is a fantastic result. We'll report on further progress in the next issue.

NB. Pressure ulcers are given a grade identifying how deep it is; grades range from grade 1 – an area of discolouration, swelling or heat that won't go away, to grade 4 – a deep wound that may go down to bone.

# **RUH leads the way** in life saving monitor

A BBC television news team spent time in the hospital's Intensive Therapy Unit recently, filming a feature on a how a simple breathing monitor is helping to save the lives of critically ill patients.

A Consultant in Anaesthesia and Intensive Care at the RUH, Dr Tim Cook, is one of the authors of a major UK study on airway complications of anaesthesia. This study also revealed that if a simple breathing monitor, called a capnograph, is used on patients in intensive care, who are being ventilated – more commonly called a life support machine – then their risk of death from airway related problems fell significantly. Capnographs are already widely used in theatres whilst a patient is anaesthetised but so far very few hospitals are recognising the benefits of using them in Intensive Therapy Units.

The survey discovered that the absence of a capnograph contributed to 74% of airway related deaths reported from ITUs. As Dr Cook says: "The report made several recommendations to improve the safety of airway management in the ITU. The single most important change that would save lives is the use of this simple breathing monitor, which would have identified or prevented most of the events that were reported. We recommend that a capnograph is used for all patients receiving help with breathing on ICU; current evidence suggests it is used for only a guarter of such patients. Greater use of this device will save lives."

Capnographs are routinely used in the Intensive Therapy Unit at the RUH. In simple terms, the device will detect airway problems by monitoring exhaled carbon dioxide levels and sound an



alarm, up to three minutes before more traditional monitoring systems and devices. These three minutes could mean the difference between life and death or brain injury.

During the filming, Dr Cook pointed out that the patient, even one who may be conscious, is totally unaware that the capnograph is fitted into their ventilator and he likened it to wearing a seatbelt in alerting ITU staff.

The BBC filmed with Dr Cook and patient, Rosina Rudd. Rosina spent several weeks in our ITU on a ventilator and all through that time had a capnograph monitoring her breathing. Despite finding it difficult to talk, she wanted to take part in the filming and told the journalist how impressed she and her family had been by the care

### "The single most important change that would save lives is the use of this simple breathing monitor."

a car. He said just as seatbelts are worn and most of the time not needed, the same can be said for the capnograph. It sits there, alongside a myriad of equipment surrounding a patient in ITU, passively monitoring breathing. But when there is a breathing problem it comes into its own, sounding an alarm, instantly she had received. She said she was pleased to now know that the capnograph had played such an important part in her care.

The full findings can be found on the website of the Royal College of Anaesthetists, www.rcoa.ac.uk

# in**view**

# Royal Wedding fever

Spirits ran high amongst both staff and patients on Combe ward for the Royal Wedding. The staff pulled together to ensure the patients were able to watch the proceedings on the TV, bunting, balloons and a buffet added to the party atmosphere.

The patients were heard to compare Catherine Middleton's dress to both Queen Elizabeth's and Princess Anne's wedding dresses, and they all agreed Catherine looked beautiful, "every inch a princess" one of the patients was heard to say. Consultant Geriatrician Dr Chris Dyer said: "I enjoyed the sausages and cake the most!"

Our young patients created their vision of the Royal Wedding in the form of a mural, which covered a wall in the Children's playroom on the Children's unit. Play Specialist Jo Powell says: "We started this project in January which was great, because it meant that every week, regardless of how briefly or how long some of our young patients were in hospital, they could still take part. The mums and dads got involved too – everyone seemed to get caught up in it. It was great fun."



Alice and Emily (left and right) pictured with Jo creating more art. Emily worked on the royal wedding mural: "I made some of the people (in the crowd) and painted the cake – it was fun."

The decorative feature was part of an art project that the children have been taking part in with artist Edwina Bridgeman, funded by a grant from the National Lottery 'Awards For All'. They've been using scrap and recycled materials and transforming them; there is definitely a sense of magic when a small wooden spoon becomes a princess riding a pipe cleaner horse through a cardboard box forest!









RUH Staff Nurse Ben Woodland married physiotherapist Carla Thrush on the same day as William and Catherine and enjoyed a Royal Wedding of their very own. Ben says: "We travelled to the Assembly Rooms in Bath by horse and carriage. Lots of people were waving at us and tourists were taking photographs, it felt really special. Everything went perfectly and it was a great day. I managed to watch most of the Royal Wedding on TV whilst getting ready and I think it added to the general atmosphere. It will be nice to look back and have our special day shared in history by the Royal couple."



# **Changing signs** at the RUH

Patients, staff and visitors have been very complimentary about how tidy and professional the RUH is looking following completion of the new signage system.

The new system divides the hospital into zones, with all the signage in blue and dark blue, with the exception of the Emergency Department, which is in red. On arrival at the RUH, visitors can look up the ward or department they need on the map's directory, find out its unique number, and then follow signs to get to where they need to go.

Howard Jones, Director of Estates & Facilities (above) says: "We listened to feedback from our patients, visitors and staff and used experts to help us come up with the new system which makes navigating the hospital much more logical. The 'wayfinding' system works by providing just enough information at key points to help people find their destination more easily.

"We're aware that some people have been a bit doubtful about the new signs but on the whole we've had some really positive feedback. Our volunteer guides say that the new system is easy to understand and well designed and they're able to direct people well. Others have said they've found the department they needed with ease. We acknowledge that it will take time to become familiar with the new signs, but once people get used to it, I'm sure



that this logical system will make it easier for people to get to where they need to go. The new system is also more sustainable and will allow us to make any future revisions easily and cheaply."

There are wall mounted map directories on the main hospital corridors and leaflet guides will also be available at key points for our visitors. The maps are also being distributed with appointment letters and, once the new patient administration system Millennium is in use in the summer, these letters will be much more helpful directing inpatients and outpatients to the appropriate

car park, zone and department number. The maps are also available to pick up on the wards. If anyone does need help when they get to the hospital, they can ask any of our volunteer guides or members of staff, who will be only too happy to help.

Gate 2 Accident & Emergency

al United Hospital Bath

Zone D Buildings 10 & 11 Maternity Unit

### in**view**

# Focus on Parkinson's patien

The RUH is working with local people with Parkinson's to ensure they can have confidence in the care they receive if they come into hospital.

Every hour, someone in the UK is told they have Parkinson's. About 120,000 people in the UK have it and around 900 in our locality. Up to 20 are admitted each month to the RUH, so most clinical staff will be looking after people with Parkinson's from time to time, whatever their specialty.

Consultant Physician Robin Fackrell says: "It's important that staff understand the problems that Parkinson's causes for people in hospital. A particular challenge is managing medication, which can be complex – and needs to be given strictly at the right time.

"Parkinson's patients are inherently



complex but become more so if not treated. If they don't get their Parkinson's medication on time, symptoms increase and their care needs change. For example they may suddenly not be able to move, get out of bed or feed themselves unaided.

"Hospital can be a terrifying environment

"Parkinson's patients are inherently complex but become more so if not treated. If they don't get their Parkinson's medication on time, symptoms increase and their care needs change."



Staff made a 'trolley dash' around the wards, making a 3-minute unscheduled stop to share information and literature with staff, to raise awareness and intelligence of Parkinson's Disease.

for this group of patients, their routines can be completely destroyed and they can end up in a worse condition. A Parkinson's patient's length of stay is, on average, five days longer than the norm and we can improve this and get patients back to where they need to be, if they get their medication on time."

The RUH recently hosted an awareness event as part of National Parkinson's Week. Over 100 staff had an opportunity to meet and talk to Steve Ford (above left), the Chief Executive of the charity Parkinson's UK, as well as listen to the experience of people who are either living with Parkinson's or who are caring for someone with the condition.

Consultant Physician Dr Dorothy Robertson (above centre), who is a specialist in treating Parkinson's, says: "Parkinson's Disease is often not what brings a patient into hospital, but it can be what keeps them in if we don't get their care right. We want to make sure that if someone with Parkinson's is admitted to the RUH, all our staff know exactly what to look for, what to do and how to access help. The work we are doing with the support of Parkinson's UK is an ongoing process and we will be listening to our staff, patients and their carers to make sure we provide the best possible care." Amongst other initiatives, the RUH Parkinson's project group has put information on the staff intranet with easy access to essential information and 'top tips for care'.

Robin and Dorothy and their colleagues are very passionate about patient care, particularly for this patient group, and their ambition is for Pulteney ward to become a centre of excellence – a flagship that people can turn to for advice. "We have consultants, nurses and therapists who are experienced in Parkinson's and want our patients to be confident that they're going to have a good patient experience."

# ts

# Real life stories

### Being a Carer

"I thought that people with shakey hands and a strange gait were suffering from detox symptoms. Now, as a carer I know what it can involve" says Magda Dunlop. Magda's husband, Brian, was diagnosed with Parkinson's disease in July 2000.

He needs looking after in many ways, mainly dressing and physical help in moving and walking. He also suffers from dyskenesia at night, thrashing out and screaming, but has no memory of this happening the next morning. I can leave



him for a day a week when I work in a bookshop, but I do have to telephone him to make sure he has taken his medication, even though he has a vibrating alarm pill box. We are very aware how important it is that he takes all seven daily doses at the correct times.

Brian is a very positive, outgoing person

### Living with Parkinson's

"We just have to get on with it and be positive." says Karen Rose, from Bristol, who experienced Parkinson's symptoms from the age of 34 and was diagnosed at 39.

I've had Parkinson's disease now for 14 years. My dad first noticed something was wrong on holiday, when I couldn't swing my arm properly. The doctors initially thought I had repetitive strain injury or Multiple Sclerosis – it took them more than four years to diagnose Parkinson's. I was devastated. My first thought was that I'm not old enough – that it's a condition for old people. I was very depressed when I realised that it would be with me for the rest of my life.

If I don't take medication regularly then I start to slow up and I become very stiff and I'm unable to do what I want to do. So it's very important to take my medication on time. I have a pill timer which reminds me when I'm due to take a tablet, although sometimes I forget and then I know it.



A specialist at our local hospital put me in touch with the Bristol branch of Parkinson's UK. They were able to give me support and help. Having people to talk to who are going through the same symptoms is so important, as most people just don't understand.

I don't think you ever accept that you have Parkinson's disease but you need to learn to live with it. Don't let it live your life for you. Do what you can, when you can and stay positive because this will always help. and he has a very great sense of humour which helps us to cope, and apart from the occasional angry and frustrated verbal outburst, is able to manage. He is a successful painter and says that as long as he can wield a paintbrush effectively, he can cope with his condition.

Brian says: "The support I've had from consultant Dr Robertson and the local Neurology Nurse Specialist Alison Stephens, has been phenomenal and I cannot thank them enough for the care and attention they have given me over the past ten years. They have this amazing talent to make me feel like I'm the only patient they have."

# What is Parkinson's Disease?

Parkinson's is a progressive neurological condition due to loss of nerve cells within the brain that produce a chemical called dopamine. Without dopamine people can find their movements become slower so it takes longer to do things. There's currently no cure for Parkinson's and we don't know yet why people get the condition. Parkinson's doesn't directly cause people to die, but symptoms do get worse over time. Medication helps by boosting dopamine levels. Most people who get Parkinson's are aged 50 or over, but younger people can get it too. One in 20 is under the age of 40.

The disease is named after an eighteenth century physician, Dr James Parkinson, but records of the symptoms have been found to go back much further. Dr Parkinson was the son of an apothecary/ surgeon, he was born on 11 April 1744, which is why a Parkinson's Awareness Week is held in April each year.

For more information visit the Parkinson's UK website www.parkinsons.org.uk

### in**view**

# Tight knit group

Whether relieving daily stress, lowering blood pressure or managing chronic pain, studies show that knitting, crochet and other repetitive needlework provide a number of important health benefits.

The Stitchlinks knitting group at the hospital's pain clinic, certainly need no convincing of the health benefits of knitting. The group has gone from strength to strength and members enjoy a new and expanded social life as a result of their weekly meetings, something that some didn't have before. One woman hadn't been out of her house for 30 years. Despite being in a wheelchair, she now gets herself in a taxi and comes here every Tuesday.

The group, was originally set up in 2006 by former physiotherapist Betsan Corkhill (top right) with the help of Nurse Practitioner Carol Davidson. Carol says: "The repetitive nature of knitting and the distraction it provides, allows people to be less aware of their pain. It's also a valuable social interaction for our patients, many of whom are isolated because of the chronic nature of their conditions."

Betsan has gathered substantial evidence over the last six years and is launching a scientific study with university researchers on the positive effects of knitting on health. A paper based on a survey of over 3,500 knitters is being presented at the annual conference of Occupational Therapists this July.

Betsan says: "There's something about the rhythmic movements of knitting which helps prevent and manage stress, pain and depression. The rhythm of knitting induces a meditative-like state. Meditation is used to manage longterm conditions, but it's difficult to teach so knitting can enable a wider population to experience the benefits. Knitters experience deep relaxation and whilst they are concentrating on the knitting, they're not focusing on feeling the pain.

"The hospital's Stitchlinks group, sometimes up to 30 strong, is mainly women. Men are a bit reticent at first and we tend to see them individually, though we'd certainly consider setting up a men's group. The knitting seems to facilitate more intimate conversation, encouraging people to talk and this has enhanced the group as some patients had very low social confidence.

"Pain is so complex that we need to look at a person's 'whole life' and the background within which they experience pain to manage it successfully. It intrigues me why some people can manage high levels of pain and problems whilst others seem to sink under fairly minor pain or stress. There are four issues which appear to be significant in this: social isolation,



lack of rewarding occupation, low self esteem and fear or worry. We need to look at these issues in patients with long-term conditions if we are to be successful in helping them manage ill health over the longer term.

"Whilst knitting is an activity that can be done from an armchair, it's often a springboard to doing something else. This small project, knitting, gives a feeling of success, it's something they CAN do – it motivates people,





gets them interested in their own self-management."

Anne who suffers from chronic back pain says: "When you are in the knitting group, you can just relax. Everyone is in the same boat – you can just be honest and not put on a front. If not for this group I don't think I'd be mobile. It's quite a sociable thing and there's a great mixture of chat and laughter."

Kim suffers from depression. She says: "It took me about a year to come. I don't do groups and haven't answered a telephone for years. But since coming here, there's no stopping me. I love it. My husband is totally amazed at the transformation – it's done me a power of good. It was the knitting that encouraged me to make the effort – I even answer the phone now."

RUH Pain Unit Psychologist Mike Osborn says: "The knitting group is a superb example of an activity that works for loads of different reasons, it's physical, productive, social, almost meditative and helps people to engage in meaningful activity – chronic pain can take the meaning out of your life and if you can retrieve some of it through knitting or anything like it, that's a great idea."



# Reputation growing stitch by stitch

The reputation of the RUH pain clinic and its Stitchlinks group is expanding in the 'pain' world as Betsan has been telling others about their success. She has been advising Birmingham South East NHS Trust Pain Services in using knitting and in the setting up of a knitting group for Somali women who are reluctant to communicate due to past trauma.

Betsan has also spoken to members of The North British Pain Society at the Royal College of Physicians in Edinburgh who are all interested in hearing about knitting in health. She's appeared on Radio 4 with Psychologist Claudia Hammond on 'All in the Mind' and with Welsh Poet Laureat Gwyneth Lewis, who uses knitting to manage depression. Betsan has also done a live phone in on Radio Birmingham and recently on Dr Phil Hammond's Saturday Surgery on Radio Bristol. The Charity Pain Concern featured the RUH group in their series 'Airing Pain' and will be using the interviews in their next magazine, which is distributed to pain units throughout the UK. The broadcast can be heard via podcast on www.ableradio.com. Go to Airing Pain and click on Programme 11.

You can find out more about knitting in health by visiting www.stitchlinks.com



### in**view**

# Yours sincerely

It's always pleasing to receive positive feedback from patients and their relatives for the support and care they receive from our staff and the Trust frequently receives letters of praise and thanks. Some also appear in the local press. Here are extracts from a few.

### Mr Jones from Corston wrote

"I'd like to thank staff on Phillip Yeoman ward. I was really pleased with their professionalism and skill. There was a real sense of purpose and team work about the way I was looked after. A stand-alone ward for elective surgery works very well for many reasons, but I felt it really contributed to the sense of team work I experienced. Whenever I asked for help, even for the most trivial of tasks, it was done without any delay, and there was lots of smiling, cheerfulness and humour from the ward staff. And there was a quality in the way you communicate with your patients - I could see that sometimes you deliberately give them space to be independent and other times you give them a sense of involvement, but either way, you always listened to them. The bottom line is that anyone coming into hospital really hopes to be looked after with both medical skill and a sense of being cared about, and my time on the ward had both in abundance."

### Mrs J Escott from Bradford on Avon wrote "I have never been keen on the idea of hospitals – but I must say my stay on Robin Smith was wonderful. The staff were so friendly and caring that when it was time to go home I was rather upset. Nobody will hear a bad word about the RUH from me."

### Mr Hardman from

Bristol wrote

"My late mother spent three days in the Medical Assessment Unit and the level of care and concern from the doctors and nurses can only be described as exceptional. My wife, daughter and I were afforded exceptional support by nursing staff, in particular Staff Nurse Charlotte and Nurse Emily (I didn't note their surnames) and would want to commend their sensitivity and sense of humanity. During her final evening, my mother was moved to Midford ward, where we spent her last hours with her. Once again the degree of support, care and sensitivity shown to us by all staff was exceptional and I would particularly wish to express our thanks to Staff Nurse Diane, Nurse Elaine, Nurse Alex and Juliette for all they did for us."

### Mr H Bang from Bath wrote

"Please thank the staff of the Emergency Department and Acute Stroke Unit for their tremendous service, care and attention which was better than first class. I was also impressed by the thorough cleanliness in the hospital. The people of Bath are very fortunate to have such an outstanding emergency service."

### Mr C M from Melksham

wrote "I am writing to express my gratitude for the superb treatment that I have received at the Dept. of Urology. I have to commend and thank the staff who so sympathetically helped me through. They explained the process fully to me in such a disarmingly 'matter of fact' way that their confidence left me in no doubt that I was in good hands. Uro/Oncology Nurse Specialist Miranda Benney and Mr Jon McFarlane were superb. I found the nursing and ancillary staff on Cheselden ward wonderfully friendly, cheerful, very caring and highly professional. The ward was clean and very well managed and the quality of care I received exceeded my expectations in every way."

### Mr D Harrold from

**Malmesbury** wrote "... my sincere thanks at the wonderful service and attention from all the nurses and sisters in the Cardiac ward. I cannot speak highly enough in the way I was looked after. Special thanks to Sister Liz Burton."

**Mr A Langton from Bath** wrote "I wish to record my appreciation and thanks to everyone, without exception, who has dealt with me to date. In the nature of my treatment I have had far more contact with the radiographers than with anyone else. They are brilliant; professional, meticulous but at the same time friendly and human."

# in**person**

# Just a minute..

### With Lisa Harvey, ESR and Appraisal Trainer

- Name one thing you couldn't do without in your job.
- A My Smartcard.
- What possession could you not live without?
- A Lipstick my colleagues laugh at me because I always re-apply before a training session.
- Q Give one example of something you've overcome.
- Speaking in front of large groups of people.
- Q What talent do you wish you had?

- To sing and play the piano, but when I sang at a Karaoke my husband asked for the plug to be pulled out so I'm not holding out to be the next Susan Boyle.
- Name three ideal dinner guests (past or present) and why you'd invite them.
- A Gok Wan to dress me, Alan Carr to make me laugh and Michel Roux to cook seafood.
- What was the last book you read?
- Climb every mountain Shirley MacLaine.



### • How would you like to be remembered?

A With a smile.

### Team of the Month winners

The team who care for our patients as they come through the 'front door' of the RUH, were nominated as Team of the Month in recognition of all their hard work to ensure that 98% of the patients who come in to the Emergency Department are seen (and admitted if necessary) within 4 hours. Staff in the Emergency Department, Medical Assessment Unit and Ambulatory Care successfully achieved this challenging target, during a particularly intense period, dealing with an increased number of patients admitted to the hospital. Their excellent team work, alongside the support they received from the GP Out of Hours service, has improved the service our patients experience when they arrive unexpectedly at our front door.



### in**person**

# Chief Executive's Customer Service Award winners



Congratulations to Vicky Cooper on receiving the Chief Executive's Customer Service Award. Vicky has been praised for her professionalism when tending to a patient in cardiac arrest recently. Vicky had been travelling back to the hospital in an ambulance following a routine patient transfer, when the crew was called to the emergency. Vicky brought her skills to the fore immediately to assist the patient and support the patient's family. Sadly the outcome was unsuccessful but Vicky's skills and professionalism were highly praised by the Great Western Ambulance Service team.

lain Herrin has been recognised for the work he has done to streamline administrative activities, which help individuals and departments to concentrate on delivering first-class healthcare. In particular, he has worked hard on the Physiotherapy electronic referral system, which has not only improved the way patient referrals are managed within this department but has also made a cost saving. As well as his normal day job, lain has been involved with the plans to replace the old patient administration system with CRS Millennium. He is a great ambassador for the IT department and his skills are greatly appreciated by colleagues across the hospital. (lain asked not to be photographed.)

Jayne Duggan, who is a Healthcare Assistant on Forrester Brown ward, participated with her colleagues in a Clostridium *difficile* project. Jayne identified areas of improvement within the ward area, developing a 'bed space checklist' to be used, once a bed space had been cleaned following a patient being discharged. The checklist comprised a series of tick boxes which the nurse cleaning and preparing the bed space has to complete and sign. The checklist is now being used in other wards. Visitors have been impressed with this simple and effective way of ensuring the bed area is sufficiently prepared for the next patient and the number of C.diff cases on Forrester Brown ward has significantly reduced. Well done Jayne.



# Just a minute.



- Q Give one example of something vou've overcome.
- A My fear of flying I can now look forward to a holiday.
- What talent do you wish you had?
- A To be able to illustrate books like Ouentin Blake.
- What do you fear the most?
- England beating Wales at rugby!
- Who was the last person to thank you and why?
- A patient who had forgotten where he'd parked his car. I found

his car and assisted him with his car parking ticket.

- **Q** Name three ideal dinner guests (past or present) and why you'd invite them.
- A Rugby player Stephen Jones, the Founder of the NHS Aneurin Bevan, and my dad - as long as he cooks the curry.

#### **Q** How would you like to be remembered?

A As someone who looks out for my family and friends and an avid Welsh rugby fan.



### Team of the Month winners

Congratulations to the staff on the Critical Care Unit who worked together to deliver high quality care to our patients over a period of unprecedented demand, during an outbreak of H1N1 influenza in January 2011. The unit responded beyond the call of duty, first by moving into escalation and secondly by working with neighbouring critical care units in a position of mutual aid. The team cared for both increased levels of patients and with increased levels of illness, ensuring that high levels of patient care were maintained and relatives kept well informed.



### in**person**

# People moves

We welcome two new non-executive directors to the RUH. They are Joanna Hole and Roger Newton, who have both been appointed by the Appointments Commission to serve on the Trust's Board from 1 April 2011 to 31 March 2015.



Joanna, who lives in Bath, is a former senior civil servant whose last appointment was in Whitehall as Head of Safety, Sustainable Development and Business Continuity

at the Ministry of Defence. Prior to that Joanna worked predominantly in the areas of corporate governance, human resources and estate policy and delivery. Joanna says: "I enjoy the opportunity to make a difference and get the most from working relationships and am delighted to have joined the RUH team."



East Asia. He later became a Non-Executive Director with NHS Wiltshire. Roger says: "I feel very proud to be associated with the RUH. The standards of patient experience and clinical excellence which the RUH has achieved in recent years have been phenomenal. I'm looking forward to serving the board and being part of this community of staff in delivering healthcare you can trust."

Roger, who lives in Calne, Wiltshire, worked for Oxfam for 18 years holding a variety of management positions, before joining Save the Children as Regional Director for

Rebecca Bowen, who joined our Medical Oncology team as a Consultant. Rebecca came to us from The Royal Marsden NHS Trust in Sutton where she worked as a Specialist Registrar. Before that she worked as a Clinical Research Fellow. specialising in the molecular characterisation of breast cancer, with particular reference to ethnic minorities in Britain at Barts and The London School of Medicine & Dentistry, part of the Queen Mary University of London. Rebecca's special interests include breast and gynaecological malignancies.

We also welcome Dr

### Team of the Month winners

The Discharge and Therapeutic Evaluation (DATE) service team are winners of the Team of the Month Award. This award recognises their successful team work to ensure a support plan is in place for the safe discharge of our patients, from the very time they are admitted to hospital.

A patient's needs are often complex and the DATE team will gather vital information about the patient's circumstances, such as mobility, and ability to care for themselves once they leave hospital, from key people including the patient, their carer or relative. This information is then shared with colleagues on the ward, with health and social care partners in the Primary Care Trusts, social services and carers, who all work together to ensure appropriate support is in place prior to patients being discharged. This team work has greatly improved the efficiency of the discharge process for patients and staff.



### Team of the Month winners

The Optometrists have been recognised for their part in developing a Lucentis\* service; providing a monthly assessment for patients with wet age-related macular degeneration\* who receive this specialist treatment. The team has also developed skills in the assessment and treatment of glaucoma\*, providing a shared care glaucoma service. The increase in the number of available appointments has greatly reduced waiting times and has freed up time for other medical staff to attend to see more complex cases. Their ability to manage a wide range of assessments and treatments has greatly enhanced and improved the service that patients experience in the Eye department.

- \* Lucentis is the name of the drug to treat the condition.
- \* Wet age-related macular degeneration a condition that usually affects older adults that results in loss of vision in the centre of the visual field.



Head Optometrist Sarah Canning, Chief Executive James Scott, Mandy Cover, Helen Broadbent, Tara Eliasieh

\* Glaucoma an eye disorder in which the optic nerve suffers damage, permanently impacting vision in the affected eye.

# Just a minute...

### With Cathy Caple, Foundation Trust Project Manager

- Name one thing you couldn't do without in your job.
- A My project plan.
- Q What possession could you not live without?
- A Sadly, my iPhone.
- Q Give one example of something you've overcome.
- My fear of heights; I managed to climb some scarey mountain ridges, but not sure if I could do it now.
- If you could change one thing about working at the RUH, what would it be?
- A 'staff only' eating area.



- What talent do you wish you had?
- A bility to compose music my Dad didn't pass that talent on to me.
- Name three ideal dinner guests (past or present) and why you'd invite them.
- Nelson Mandela (doesn't everyone want him?), and David Attenborough and Paula Radcliffe – my heroes.

### • What's your favourite purchase and why?

My fantastic holidays – you have the great memories for ever.



Congratulations to Cathy on her recent marriage to Andy.

### • How would you like to be remembered?

A As a genuine person.

# in**theknow**

# **A hospital with history** – and an exciting future

Providing health and hospital care based on the needs of the local community, is something that Bath has been doing since the 1700's.

Inspirational institutions such as The Bath City Infirmary and Dispensary, and the Bath Casualty Hospital, were established in the late 18th Century out of a need to provide free healthcare – albeit rudimentary.

The Infirmary provided medical and inpatient treatment for the city's poor. Before this time, paid for treatment was offered to visitors to the city at the General Hospital and doctors would visit wealthy residents in their home. The Infirmary however, didn't offer surgical treatment – that was left to the Casualty Hospital, founded in 1788. Although it had an average of just eight beds, it was kept extremely busy treating the alarming number of injuries sustained by labourers during the Georgian housing 'boom' of the late 18th Century. Eventually the two hospitals joined and the Bath United Hospital opened in 1826.

Fast-forward to 2011 and look how modern medicine has moved on.

Today the RUH is the city's largest NHS hospital, occupying a 52-acre site at Combe Park, providing acute and emergency care for half a million people – not just in Bath, but also in North and West Wiltshire, North East Somerset, South Gloucestershire and the Mendip area of Somerset.

We're one of the leading hospitals nationally in stroke care and prostate cancer care and we've gone from strength to strength over the past five years, making the RUH a leading hospital in terms of patient safety and standards of care. For instance, we



Karen John (above left) is Home Services Co-ordinator for Age Concern and Tina Williams is the day centre team leader. They attended a recent meeting to find out more about our plans to become an NHS Foundation Trust. Karen said: "Support the RUH, it should be patient lead so think seriously about becoming a member of the hospital."

have substantially reduced healthcare associated infections. There hasn't been a single case of the so called 'super bug' MRSA for six months, and only two in the past financial year. Cases of Clostridium *difficile* reduced from 17 in January 2010 to just three in January this year. These figures put us among the best hospitals in the country for standards of safety and infection levels.

You may already be familiar with the RUH. You could be one of the 68,000 people who attended our emergency department last year, or one of the 270,000 who received an outpatient appointment.

#### Whoever you are, whatever you do, we have some exciting changes planned at the RUH and we'd like you to be involved in them....

We want to further develop our hospital in three key areas; strengthen our role in the care of those with suspected or confirmed cancer, improve the hospital site to ensure it's responsive to our changing service and clinical needs and consider the possibility of a merger with the Royal National Hospital for Rheumatic Diseases NHS Foundation Trust (The Min). By joining forces, we believe we could deliver better services for patients and release funds for improved support and patient care.

Continuing the theme of providing care based on local need....the hospital is planning to become an NHS Foundation Trust and we want members of our local communities to be part of a successful hospital by becoming members of the Trust. We remain part of the NHS but with greater freedom on how we spend our monies and what services we provide, and we'll be accountable to members for our standards of care. So becoming an NHS Foundation Trust member means you'll have more of a say in how the hospital is run and the services we offer. Join us, and you can directly influence the sort of healthcare you want to see at your local NHS hospital.

For further details, or to apply for membership visit www.ruh.nhs.uk/ foundationtrust or telephone the Foundation Trust office on 01225 821299 if you would like to have information posted to you. You can email us your comments at foundationtrust@ruh.nhs.uk

### Bright ideas for making things better

Hospital staff have been coming up with some bright ideas to make efficiency savings at the RUH.

Director of Operations James Rimmer says: "We know from past experience that the best ideas come from our staff, so we invited them to submit their bright ideas for how the Trust could make efficiency savings. No saving was considered too small or insignificant. Numerous suggestions were received, and while not all were feasible, many have provided the catalyst for further efficiency work, which is great."

Some key themes arose from the ideas submitted and as a result the hospital is looking at how it can make efficiencies around such things as energy consumption, food waste and purchasing.

Patients and visitors can see that we've replaced many of the old windows in the Trust and changed some of the lighting to help reduce heat loss and energy consumption.

Better communication between ward and catering staff means more patients are getting first meal choice therefore reducing food waste.

Staff can also visit the Bright Ideas web page on the hospital's intranet to see the suggestions received so far and how these are being progressed.

# RUH Junior Doctor **wins prestigious award**

Dr Dan Magnus, one of our Paediatric Registrars, has been voted Junior Doctor of the Year.

Dan was one of just three finalists nominated for the British Medical Journal (BMJ) Junior Doctor of the Year award, which acknowledges the doctor in training who has done most to improve the world we live in, or to inspire others. Dan was selected from more than 600 nominees.

As well as working as a Paediatrician at the RUH in Bath, Dan is also a cofounder of the Kenyan Orphan Project, a UK charity supporting health, education and social welfare projects for orphans and vulnerable children in Kenya. He also helped to develop global child health teaching for medical students at the University of Bristol and has lectured extensively around the UK to teach and inspire a new generation of doctors and professionals on the health and protection of children around the world.

Dan said: "It's so humbling to have won. Working hard to improve the health and lives of children in the UK and in developing countries, is something in which I believe passionately and I must pay tribute to my friends and colleagues who work with me, both as a paediatrician in the RUH and in our work in Africa. This recognition means a great deal and is a wonderful acknowledgement for all those working towards a better world for children."

Two of Dan's colleagues at the RUH, both Consultant Paediatricians and Neonatologists, paid their tributes. Dr Bernie Marden says: "Dan contributes to Paediatrics in so many different ways, whether it be running an undergraduate course on international childhood diseases, to his charitable work with



the Kenyan Orphan Project. But I know Dan best as a hardworking, enthusiastic paediatric trainee who always gives 110% – he's truly outstanding."

Dr Stephen Jones, who is also Clinical Lead for Paediatrics at the RUH says: "Dan is an exceptional doctor and human being and it's a real privilege to work with him. He's the kind of person you only meet once or twice in your life."

Dan's wife Kerri, who is an Emergency Nurse Practitioner at the RUH, nominated Dan for the award and she was at his side at the ceremony: "It wasn't guite the Oscars but it was pretty close. Ever since we met I knew that he was going to go far. He has drive, energy and determination. He's passionate about life and helping others. He's an ambassador for his fellow colleagues with his spirit to improve the way we view global health and how just one person can make a difference. When he stood on the stage I was so proud of him. Winning the award was something Dan could only have dreamt of. What a lovely acknowledgement of his work."

To find out more about the Kenyan Orphan Project visit www.kopafrica.org

# in**theknow**

# Equal healthcare for all

Sister in Quality Improvement for Mental Health & Learning Disability, Gemma Box, is working with staff to ensure that the RUH is meeting the needs of people who may have a mental health need or learning difficulties whilst needing acute care.

Gemma says: "People with learning difficulties or mental health needs can have many special healthcare requirements that need to be addressed. We want to ensure that these patients have the best possible experience whilst in our hospital.

"I'm working with staff, community teams, carers and voluntary organisations and listening to people with learning difficulties or a mental health need to understand more about the challenges they face in every day life, so that we can make sure that our patients feel that their needs have been met, that our staff feel well prepared, carers feel valued and listened to and that we create strong links with community teams around discharge planning for when patients leave hospital.

"Work is already underway to create 'easy read' information for the wards to use; easy read uses large print, brief explanations, pictures and colour. I've been helping our catering staff to put together an easy read menu; taking photographs of the food choices we serve so that patients can chose from a pictorial menu. Easy read isn't just for people with learning disabilities, it also helps people that are hard of hearing, or when English isn't their first language, or if they have a cognitive impairment such as Dementia.

"A training plan to raise awareness of learning disability and mental health issues is also being devised, which will include using 'everyday'



language as people with learning disabilities may not understand all the words we use in hospital and some phrases can be confusing.

"Some actions will take time, such as training for staff, but progress in some areas can be delivered immediately, such "We hope that this work will make the hospital easier to use not only for those with a learning difficulty, but also for those with sensory impairments, a mental health need, communication difficulties, or those who may have a limited understanding of English."

"We're listening to people with learning difficulties or a mental health need to understand more about the challenges they face in every day life."

as involving family members and carers in a person's care and treatment if they wish to be involved.

"Much of the good work we'll be doing will be highlighted during Learning Disability Week towards the end of June and there will be an information day to celebrate world Mental Health Day on 10 October. If you, or the person you care for, needs patient information in an easy read/ picture format, or you wish to contact Gemma to discuss specific needs, or to suggest improvements in practice, please contact her on 01225 824246 or email gemma.box@nhs.net

Gemma's details are also on the hospital website www.ruh.nhs.uk/patients

# inaddition

# What would you like to see in **insight**?

We want to ensure that insight continues to have interesting articles and features relevant to our readers. We'd like to know if the magazine meets with your expectations, or are there things we could change or improve? We'd like to hear your views.

Please complete the form below and return it to Main Reception in the Atrium, or post to Communications office, C19, RUH, Combe Park, Bath BA1 3NG by 30 July 2011. Thank you in anticipation.

#### Your details

Name:										
Hospital ward / department (if applicable) / your nearest town:										
Are you: Staff 🔲 GP 🔲 Member of public 🖵 Other (please state)										
Content										
1. Do you think the number of articles we feature on the following subjects is:	About right	Not enough	Too much							
(a) The hospital's performance & progress										
(b) Research & development or clinical advances										
(c) Articles on the wider NHS										
(d) Patient stories										
(e) Features on departments/individual staff members										
(f) 'Thank you' letters page										
(g) 'Just a minute with' (60 second interviews)										
(h) Art										
(i) Awards and celebrations										
(j) Charitable donations/fundraising										
(k) Puzzles										

(I) What else would you like to see featured?

# in**addition**

# What would you like to see in **insight**?

0:0

Design/appearance			
2. Do you like the way insight looks?	Yes 🗌	No	
3. Do you think the number of photos is:	About right 🖵	Too many 🛄	Not enough 🖵
4. We plan to continue printing insight as a magazine and putting it on our website. Do you think this is a good idea?	Yes	No	
If 'no', please tell us what format you would like to see instead?			
5. insight is currently written for our staff and the public. What do you	think about this? (Pl	ease tick one only)	
I think you should continue with the current approach $\Box$			
I think there should be separate magazines for staff and the public $\Box$			
Distribution			
6. insight comes out quarterly – how many issues a year do you see?			
7. Do you think it should come out: The same number of times $\Box$ Me	ore often 🗋 Less	often 🛄	
8. From where do you pick up your copy of insight?			

### **Other comments**

9. Thank you for taking the time to answer our questions. If there is anything else you would like to tell us please add your comments below:

We'll let you know how people responded in our Autumn issue, due out early September.

### Friends of the RUH Giving us a helping hand

### Let's party!

This year the Friends are holding a Summer Garden Party on Sunday 26 June, from 1pm until 5pm, in a beautiful garden at 9 Church Road, Weston Village (not far from the hospital). This lovely garden is one of several you can visit as part of the national 'open garden' scheme.

The Summer Garden Party is something a little different from the usual Summer Fete and we hope you all enjoy the change.

Tickets are £4, payable in advance or £5 on the day. The price includes a cream tea or a cuppa with a slice of delicious home made cake. You can stroll around the informal garden, which covers one third of an acre, tucked away in a beautiful part of Bath. Entertainment includes a classical singer, a harpist and some lovely choral music and you can browse the stalls to pick up a bargain. Money raised from the Summer Garden Party will go towards the purchase of specialist equipment for our Dementia patients.

If you wish to purchase tickets please call 01225 824046 and we can post them to you, or you can pop into the Friends office, Zone B, B18. Numbers are limited so buy your tickets now to avoid disappointment.





### A big 'thank you' knees-up

The Friends of the RUH held their annual volunteer 'thank you' party recently.

The party was an opportunity to thank the volunteers for all their hard work throughout the year. It took place at Walcot Old Boys RFC and entertainment was provided by Samantha Nolan (below).

It was a great chance for all our volunteers to catch up with one another and exchange news and to really let their hair down. A great time was had by all.





### A guiding **hand**

We're really grateful to the dedicated team of volunteer guides, who have been a fantastic help in guiding our visitors around the hospital. It's taking a little time to become accustomed to the new wayfinding changes, but feedback has mostly been positive and the hospital is looking really smart.

The guides meet and greet patients and relatives daily with a welcome smile and an offer of help if directions are needed. Volunteer guide Gerald Mathews (below centre), said: "I've enjoyed exercising my brain learning the new system - it seems quite good. One of our ward volunteers Maureen Boots has set herself the challenge of learning all the new ward and clinic numbers. Each week she lets me know the ward details before I can even look them up!"



# **Are you interested** in volunteering?

If you would like to be a member of the volunteer team, please contact Jayne Watkins on 01225 824046 to find out what's involved.

# in**addition**



### at the Heart of the RUH

#### Stand back and admire the new art on display in the hospital by artists Brian Elwell, Anthony Holden, Diana Matthews, Andy Peters and Richard Sibley.

A full-sized replica of a 19th century ship's figurehead, thought to portray Pocahontas, has been lifted into the Central Courtyard (zone B) at the RUH as part of the launch preparations for our latest summer art exhibition.

The figurehead is the work of Andy Peters, an expert wood carver who specialises in Tall Ships work and who is one of the six artists whose work will be on view at the RUH – Bath's biggest art exhibition space – from now until August.

Curator Tony Smith says: "The original of the figurehead used to adorn the bow of HMS Chesapeake, a steamship built in 1855 which saw service in the Opium Wars. Sadly, the ship and the carving were allowed to rot so Andy Peters set about rebuilding it, drawing on naval history, historical records and expertise. The research process was so interesting that Tall Ships photographer Richard Sibley documented it in photographs which we are also exhibiting."

As a result, visitors will be able to follow all the stages and see for themselves why Andy and Richard are convinced the figurehead portrays Pocahontas, the Native American, credited with helping Europeans to gain a foothold in North America and a popular icon long before Disney made an animated musical about her.

Other well-known characters in the exhibition include the World War One veteran Harry Patch, Desmond Tutu and Derek Jacobi – personal heroes of the Bath-based painter Brian Elwell, whose fans include the actor Stephanie Cole and broadcaster John Sergeant, and showing here alongside a number of his









highly evocative cityscapes.

The line-up of artists is completed by veteran painter Diana Matthews, a Fellow of the Royal Society of Art, presenting still life abstracts inspired by everyday objects and music; Anthony Holden's oils and mixed media depictions of nature and the seasons, and Jo McCarron, a landscape artist who seeks to convey an atmospheric sense of place, space and time.

Art at The Heart of the RUH's summer show is open to the public daily from 8am to 8pm until Wednesday 10 August. Admission is free and all are welcome.

For more information on Art at the Heart of the RUH, visit www.ruh.nhs. uk/art or contact Exhibitions Curator tonysmith3@nhs.net or Arts Programme Manager hetty.dupays@nhs.net. Or you can telephone 01225 824987.





# in**addition**

# Forever Friends – update

Read about the latest activities of the Forever Friends Appeal and their supporters in and around Bath and find out about forthcoming events in their fundraising calendar.

### Bath Rugby Players spread a little happiness

Players from Bath Rugby have made a number of visits to various departments within the RUH lately and we are always happy to see them.

They recently met patients and staff on Forrester Brown Ward. Michael Claassens, Mark Lilley and Nick Scott stayed to chat to their ardent Bath Rugby fans for over an hour.



A visit to Theatres (left) proved interesting for seven of the players who had sustained injuries at some point or another and who needed some surgical assistance. Theatre staff were all delighted to catch up with their former patients – something that happens rarely.

### The Mad Dash 2011

The Mad Dash is back by popular demand after a successful event last year. You can join in on Sunday 10 July 2011 for the Forester's Mad Dash and take part in a 10k, 2k or 200m toddle event at Bath Spa University.

Bring all the family along and maybe even make a day of it with a picnic in the beautiful surroundings of the University campus. Sign up today by calling 01225 821535 or visit www.foreverfriendsappeal.co.uk and help them raise funds for state-ofthe-art medical equipment to care for cancer patients at the RUH.



### **Ted's Big Day Out!** 2011 Flower Power

Our annual fundraising day, Ted's Big Day Out! is taking place on Friday 14 October when hundreds of groups and individuals will be taking their teddies out for the day and donning their fancy dress in aid of cancer patients at the RUH.

The theme for this year's event is Flower Power, so whether it's simply a flowery tie or the full 'child of the sixties' look, put the date in your diary to support Ted and our new Cancer Care Campaign. Call 01225 825825 for more information.

# Supporting the RUH Breast Unit

It's probably the first time in football history, when losers still had something to celebrate! We're referring to a game of football between Keynsham Town FC Coaches and a team of doctors from the RUH. Despite losing 4-2, the gentlemen-players of Keynsham (who coach the KTFC Juniors teams in their spare time), were happy to have raised £375 from the charity event to donate to the Breast Unit. The donation was presented to Consultant in Diagnostic Breast Imaging Dr Dorothy Goddard and Consultant Pathologist (and player-manager of the Doctors team) Andrew Taylor. Many thanks to everyone involved in the event. Dr Goddard said: "We are very grateful to all those who have so kindly donated money to the breast unit fund. This will help us to purchase state of the art diagnostic equipment."



### Take a break

#### Answers to last issue's puzzles

#### Crossword

#### Across

8 Avocado 9 Hanoi 10 Monks 11 Predict 12 Eyed 13 Reverent 16 Surveyor 19 Hurt 22 Saintly 23 Amble 24 Swing 25 Enlarge

#### Down

1 Harmless 2 Pounce 3 Harsh 4 Corpse 5 Wheeled 6 Unripe 7 Wilt 14 Tethered 15 Vertigo 17 Raisin 18 Oxygen 20 Unborn 21 Daily 22 Sash

### Guess who?

Kate Adie



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www.solonswha.co.uk A referral form can be downloaded from the website or you can contact Rackfield direct on telephone number 01225 339742.

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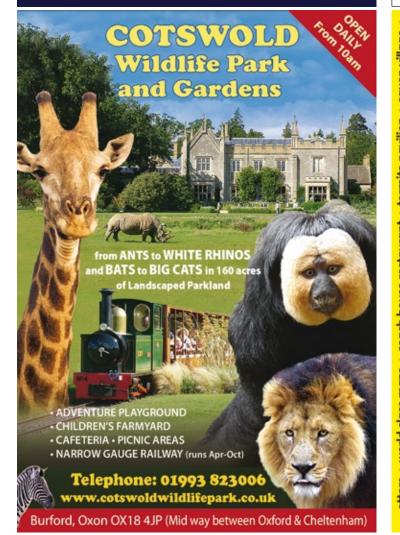


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Everything in your garden could be lovely this year. Simply enter our competition to win gift vouchers to the value of £40 to spend at Whitehall Garden Centre (Lacock or Whitchurch, Bristol). Complete ALL the puzzles correctly and return this page to the Communications Office (C19), by 22 July 2011.

1		2	3		4		5	6	
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#### Across

- 1. Glass containers
- 5. Manure
- 8. Elfish
- 9. Garment worn by dancers
- 10. Untidy
- 12. Make whiter
- 15. Prescribed doctrine
- 18. Respect
- 20. Nervous
- 23. Ruler of an empire
- 25. Dental filling
- 26. Tax
- 27. Pertaining to a nucleus

### Down

- 1. Roar
- 2. Typographical error
- 3. Situated
- 4. Sows
- 5. Postpone
- 6. File for the fingernails
- 7. Republic in East Africa
- 11. Draws near
- 13. Supply with water
- 14. Snack
- 16. Sterile
- 17. Wander
- 19. Reflecting surface
- 21. Cautious
- 22. Republic in Saudi Arabia
- 24. Vex

# Guess who?

I was born on New Year's Eve 1937 to parents Muriel and Richard Arthur.

Growing up, I was a sensitive child, happier drawing, painting and playing the piano (I'm now a virtuoso) than hanging with the other kids. I was dyslexic and very poor academically. Instead I used to love watching films, coming to idolise stars like Bogart, Cagney and Richard Burton.

Following my dream, I left school to enrol in the Cardiff College of music and drama and after graduation, took a job with the Arts Council. Following a stint of National Service, I returned to my parents' new place in Laleston, near Brigend and, getting back into drama, appeared in several local plays, making my professional debut in Have a Cigarette at the Palace Theatre, Swansea.

I won a place at RADA and spent the 1970s and 80s flitting between theatre and the big screen. I've played many diverse roles, from a secret serviceman in When Eight Bells Toll to Captain Bligh in The Bounty. In the 1990s the big one came out of the blue and I won an Oscar for my role in this film. (If I named the film it would give the game away!)

### Who am I?

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Contact details:

### Congratulations

Congratulations to last edition's winner, Roy Jones from the RICE centre. Roy won £50 worth of House of Fraser shopping vouchers.