

# United Lincolnshire HOSPITALS NEWS

For staff, patients, GPs, volunteers and all local people

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 <p><b>New Director of HR and Communications appointed</b> <b>PAGE 3</b></p>	 <p><b>Sleep apnoea service hailed as a great success</b> <b>PAGE 4</b></p>	 <p><b>New Estates and Facilities Director appointed</b> <b>PAGE 4</b></p>	 <p><b>Falling rates of infection reported by HPA</b> <b>PAGE 6</b></p>
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## New to Lincolnshire: Look Good... Feel Better



■ (back row from left) Kathy Blythe, Macmillan Lead Nurse; Rachel Hill from Yves St Laurent; Chris Froggatt, ULH volunteer; (back row fifth from right) Lyn Tattersall, Area Co-ordinator for LGFB; and (back row far right) Kay Woodhall from Clinique; with ladies who attended the first workshop

**F**emale cancer patients are being given the opportunity to Look Good Feel Better (LGFB) at Lincoln County Hospital this year.

The hospital is working with the charity behind Look Good Feel Better to provide free skin-care and make up workshops for patients at various stages of the cancer journey. The sessions help ladies learn how to best disguise the visible side-effects of their treatment and provide the chance to enjoy an afternoon's pampering.

The first ever session to be held in Lincolnshire took place on 6 February at Lincoln County Hospital. Beauty professionals from the local area provided their time free of charge and together with hospital staff, volunteers and a



**These workshops have proved very successful in other parts of the country and we were keen to bring them to Lincolnshire.**

– Kathy Blythe

representative from LGFB created a relaxed atmosphere for the ladies who attended the first session. Fun, laughter and learning were the key to a successful workshop and it was lauded as a great success. All the ladies agreed it had been absolutely wonderful, a great boost to their self esteem and confidence.

The small group spent two hours learning from the beauty professionals about the right regime, products and how to apply them. The ladies each received a complimentary bag of cosmetics, all donated by the industry, tailored to suit differing skin tones, from light to dark. These were used during the practical demonstrations, so that each participant knew which product to use, when and how, for best effect. The ses-

sion ended with thirteen very glamorous and happy ladies ready to show off their new look and clutching gift bags which were theirs to take home.

Kathy Blythe, Macmillan Lead Nurse for Cancer and Palliative Care at Lincoln, has been leading the introduction of the programme locally, along with the Lincolnshire Cancer Patients and Carers Forum.

She said: "These workshops have proved very successful in other parts of the country and we were keen to bring them to Lincolnshire. They are a great way to help boost morale among patients and increase their self-confidence. The idea is that ladies attending a workshop forget about their illness for an afternoon and enjoy some pampering.

They meet others going through similar experiences and, most importantly, look and feel fabulous when they leave the session."

Kathy also expressed her thanks to everyone involved in arranging and supporting the workshops, including the Look Good Feel Better programme, the beauty consultants and Trust volunteers who assist at the sessions.

The monthly workshops will continue at Lincoln County Hospital throughout 2008, from March to November. They are open to ladies from all over Lincolnshire, at any stage of the cancer journey and are free of charge. If you would like to find out more and/or book a place, contact Wendy Harrison on (01522) 572350 or email [wendy.harrison@ulh.nhs.uk](mailto:wendy.harrison@ulh.nhs.uk).

## Notes from the Editor

As you will be aware United Lincolnshire Hospitals News received a new look for the new year. We hope you liked it.

We are now turning our attention to continuously improving the content and ensuring we are being as inclusive as possible. In this latest edition we've added a new header: 'For staff, patients, GPs, volunteers and all local people' as we expand the range and depth of our content.

We hope you already enjoy reading about the work we do, new services on offer, initiatives we undertake, and the improvements in quality and speed of access we continue to make. Looking forward, we would like to encourage more feedback, comment and suggestions from you so that we can ensure ULH News is providing you with the information you want to read about.

Any suggestions for articles for inclusion are always welcomed. Please contact the Communications Department on ULHcommunications@ulh.nhs.uk, or at Trust HQ, Lincoln County Hospital, Greetwell Road, Lincoln LN2 4AX or on 01522 573986.

We look forward to hearing from you.

## NEWS IN BRIEF

### Expansion of echocardiogram services

The Cardiology Department at Lincoln County Hospital is extending its echocardiography services meaning waiting times will be further reduced.

Echocardiography is used to diagnose cardiovascular diseases. It provides information on the size and shape of the heart, its pumping capacity and the location and extent of any damage to its tissues.

One large room in the hospital is being converted into two, providing additional space for echocardiograms, which are ultrasound scans of the heart, to take place. The new room will also be used to allow for extra pacemaker follow-up clinics to take place.

Nicole Murphy, Cardiology Manager at Lincoln, commented on the new equipment that is also being purchased. "We are buying an echocardiography machine to go into the new room which is being created. This will enable us to run more echocardiogram lists to ensure waiting times are kept down. Patients currently wait for three weeks, but we hope to lower this to two weeks. These times compare very favourably with past performance when, during certain periods, the wait was up to 20 weeks."

The new room will also provide facilities to run an additional pacemaker follow-up clinic, a timely introduction as the number of patients needing clinics such as this has increased four-fold in the last four years.

An Internal Cardiac Defibrillator (ICD) clinic also looks set to be introduced and will be based in the new room. An ICD is a device, inserted into the body, designed to recognise certain types of abnormal heart rhythm and correct them. Staff will be undertaking the necessary training to ensure that more patients can have their ICDs checked locally and not have to travel outside of the county.

Work on the new room starts in March at a cost of £110,000, which includes the purchase of the new equipment, and is being paid for using Capital Funds.

# Trust welcomes



■ Dr Thomas

### Dr Thomas – Consultant Paediatrician

More paediatric diabetes services will soon be available in Lincolnshire thanks to the appointment of a new consultant paediatrician.

Dr Dougie Thomas joined Lincoln County Hospital in January 2007, following five years working within the Trent region, latterly at Nottingham City Hospital. He qualified in Birmingham in 1997. His special interests encompass paediatric diabetes and endocrinology, the branch of medicine that deals with hormone disorders. This is his first consultant post, but he already has plans to expand local provision of diabetic care for babies, children and young adults.

Working as part of the general paediatric team, Dr Thomas treats acutely unwell children and provides support to the neonatal unit, whilst also running paediatric diabetes clinics. One of his aims is to, with the support of his colleagues who care for adult diabetics, bridge the gap between diabetic treatment for children and adults by establishing specialist clinics for adolescents.

Involved in on-going research at Nottingham City Hospital which is looking into ways of best helping teenagers with diabetes to manage their condition, Dr Thomas hopes the development of this research will soon be available to benefit young patients in Lincolnshire.

Dr Thomas commented: "I am excited to be working at Lincoln County Hospital in what is my first consultant role. I am looking forward to expanding and introducing new services for the people of Lincolnshire by working closely with colleagues in both paediatrics and diabetics. As an example, young adults with diabetes are not currently catered for with tailored clinics specific to their needs and, as a team, we would like to fulfil this requirement."

More local provision for shared care for those patients with diabetic and oncology needs is another service Dr Thomas would like to introduce. Treatment is currently provided in tertiary centres, but it is hoped that more provision can be brought into the hospital, meaning more convenient local care and better continuity of care for patients.

Dr Thomas also enjoys sharing his knowledge and teaches Advanced Paediatric Life Support and Child Protection Skills courses. In addition, he trains other colleagues to teach, meaning more locally available instruction for the Trust.



■ Dr Dilnawaz

### I am excited to be working for the Trust and look forward to developing paediatric dermatology services in the region.

– Dr Dilnawaz

### Dr Dilnawaz – Consultant Dermatologist

Young dermatology patients will benefit from specialist clinics following the appointment of Consultant Dermatologist, Dr Mansoor Dilnawaz.

Responsible for the clinical management of dermatology services at United Lincolnshire Hospitals NHS Trust, Dr Dilnawaz brings a wealth of experience in skin surgery and a sound knowledge of skin tumour treatment to Lincolnshire. He has a specialist interest in paediatric dermatology and the treatment of skin complaints in children. As such, he is hoping to introduce new weekly clinics tailored to the specific needs of these young patients.

Born and qualified in Pakistan, Dr Dilnawaz was awarded a Fellowship by the College of Physicians and Surgeons in Pakistan, in 2002, after passing a specialist examination and structured training programme. He has gained broad experience of the administering and monitoring of systemic therapy, including cytotoxic drugs relevant to skin diseases. Systemic therapy utilises treatment which is absorbed through the gut or veins (when administered orally) or through the skin (when administered through a patch) and taken to the affected area by the blood stream. Cytotoxic drugs are drugs that are used to kill the cells of a malignant tumour.

Discussing his appointment, Dr Dilnawaz said: "I am excited to be working for the Trust and look forward to introducing and developing paediatric dermatology services in the region. Skin diseases in children are quite common and in particular it is important that they are seen in separate clinics.

In addition, I will translate my broad experience in dermatology, acquired from overseas and within the UK, into better care for people of all ages and from different backgrounds in this region."

Although based primarily at Pilgrim Hospital, Boston, Dr Dilnawaz will also run weekly clinics at Lincoln County Hospital and in Skegness and Spalding.



■ Dr Jaggernauth

### Dr Jaggernauth – Consultant Anaesthetist

Dr Villon Jaggernauth, Consultant Anaesthetist, has been newly appointed to work at Lincoln County Hospital. He is particularly keen to expand the hospital's obstetric anaesthesia services and complement work already being undertaken to implement advanced methods of pain relief for women in labour.

Born and qualified in Trinidad and Tobago, Dr Jaggernauth joins the Trust from Leicester Royal Infirmary where he completed his higher training in anaesthesia and subspecialty training in obstetric anaesthesia, which is the anaesthetic practice involving the care of a mother and child.

He commented on his enthusiasm regarding the use of regional anaesthetic blocks for women in labour, as well as for patients in other specialties. "Regional and local nerve blocks are becoming more popular, as they can allow patients to recover from their operation more quickly and return home faster. It is already clear that regional blocks are safer for pregnant women and I am certain these blocks have a broader application in other specialties," he said. Regional anaesthetic blocks numb an area of the body, such as a limb. Local nerve blocks refer to the injection of a local anaesthetic around a peripheral nerve in the body which subsequently numbs the whole area supplied by the nerve.

During his research attachment at the University of Leicester he presented data on nerve block infusions to a national Anaesthetic Research Society meeting. His studies demonstrated the effectiveness of these blocks for post-operative pain relief and this triggered his interest in this area.

Dr Jaggernauth also has an interest in mobile computers and their clinical usage. Whilst training, he developed and maintained an Internet resource for anaesthetists relating to handheld computers. He also developed software for handheld PDA's that can be utilised in patient pre-operative assessment.

He explained how he felt new technologies could be embraced to improve the patient experience. "Computers and technology now encroach on practically every aspect of our home and working lives. We clinicians must learn to embrace new resources available to us for the benefit of our patients and their care."

Dr Jaggernauth concluded: "I am thrilled to be working with United Lincolnshire Hospitals NHS Trust and look forward to contributing to the excellent obstetric anaesthesia service already available within the Trust."



■ Mr Knapp

### Mr Knapp – Oculoplastic Surgeon

Advanced forms of eyelid surgery will be available in Lincolnshire for the first time following the appointment of a new Oculoplastic Surgeon.

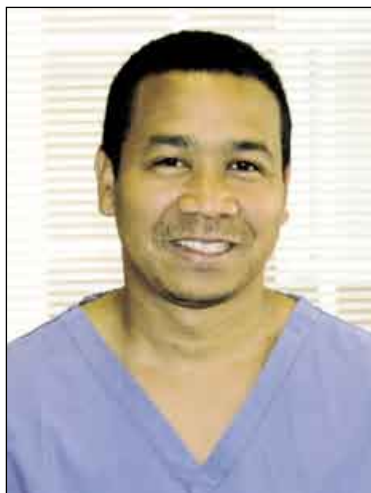
Mr Christopher Knapp, a Consultant Ophthalmologist who has undertaken additional, specialist training in order to work as an Oculoplastic Surgeon, recently joined Lincoln County Hospital, but will also be providing services at Grantham and District Hospital. He hopes to offer new treatments and services to the people of Lincolnshire and also build on the work of his predecessor, well-known Consultant Ophthalmologist, Peter Drummond. His special interests encompass the eyelids and the lacrimal (tear duct) system.

"My main area of interest is Oculoplastic surgery," Mr Knapp explained. "This involves treating eyelid lesions including tumours, eyelid abnormalities, such as: entropion, where an eyelid turns outwards; ectropion, an inward turning eyelid; ptosis, referring to a droop in the eyelid; and dermatochalasis, an excess of skin on the upper or lower eyelid. I am also involved in the treatment of watery eyes and orbital inflammation."

Prior to gaining his medical degree, Mr Knapp trained and worked as an Optometrist. During this period his interest in medical and surgical aspects of treating the eye grew and he decided to pursue a career as a doctor. Upon graduation he worked in various medical specialties before commencing training in ophthalmology in 1999. He recently completed his training at the Queen's Medical Centre in Nottingham, having previously trained at the Leicester Royal Infirmary. During this period, he also worked as a clinical lecturer and conducted research into Optokinetic nystagmus, a condition where an image moves across the retina of the eye. Mr Knapp has presented to several national and international ophthalmology meetings, had numerous papers published and contributed several chapters to an upcoming ophthalmology book.

"I am excited to be working for United Lincolnshire Hospitals NHS Trust," he said, "and look forward to introducing and developing treatments not previously available in Lincolnshire, such as ptosis surgery and more modern reconstruction techniques to repair eyelid defects, including skin grafts and skin flaps."

# new consultants



■ Mr Lee Chong



**I hope to expand on the vascular services in the county and also introduce endovascular surgery.**

– Mr Lee Chong

#### Mr Lee Chong – Consultant Vascular Surgeon

Mr Peter Lee Chong, Consultant Vascular Surgeon, has recently joined United Lincolnshire Hospitals NHS Trust. His appointment will enhance the provision of vascular services and introduce methods that were not previously available in the county, including endovascular surgery to repair aneurysms.

Vascular surgery relates to the management and treatment of diseases of the vascular system, that is the veins and arteries, mainly through surgical intervention.

Mr Lee Chong joins the Trust after completing his post-graduate training via the Sheffield Higher Surgical Training Scheme. He comes from Trinidad and Tobago and moved to the UK following his qualification as a doctor in the West Indies. He gained much of his experience in General Surgery, as well as Vascular Surgery, in Doncaster and the surrounding area. He will be based primarily at Lincoln County Hospital, but will also be providing services at the John Coupland Hospital, Gainsborough.

Discussing the services he will provide, Mr Lee Chong said: "I hope to expand on the vascular services in the county and also introduce endovascular surgery, minimally invasive approaches for aneurysm repair, to Lincolnshire. Endovascular refers to the treatment of vascular disease from inside the blood vessel. This method can be beneficial in some cases as recovery times for patients can be quickened and surgical risk can be less than that of more conventional surgery."

Mr Lee Chong also has a special interest in carotid surgery, a procedure which aims to restore adequate blood flow to the brain when it has been blocked by a build up of fat and cholesterol in the internal carotid arteries. This procedure can prove effective in the prevention of strokes.

Discussing his appointment, he concluded: "I am delighted to be part of a developing and progressive NHS Trust such as this. Being able to make a significant contribution to the health and wellbeing of the people of Lincolnshire gives me considerable satisfaction."



■ Dr Burli

#### Dr Burli - Consultant Radiologist

The appointment of Dr Pradeep Burli, Consultant Radiologist, means that some patients could avoid having to go through open surgery for certain treatments.

Dr Burli has a special interest in interventional radiology, in which minimally invasive procedures are performed using image guidance rather than open surgery. For example, pictures are used to direct procedures such as angiograms and angioplasties inside the body. He aims to introduce some new techniques in vascular and non-vascular interventional radiology not previously available in Lincolnshire, for the benefit of local patients.

Dr Burli, who was born and qualified in India, completed a masters degree in radiology prior to coming to the UK. He undertook his postgraduate training at the East of England Deanery where, during his final year, he gained experience in interventional radiology at Addenbrooke's Hospital, Cambridge.

"Radiology in general and interventional radiology in particular have made rapid advances in recent times. Many procedures which once required major operations can now be performed through x-ray guidance, which has the potential to speed up healing times for patients," he said.

Dr Burli is already working with colleagues in other specialties in order to bring more new services and treatments to the Trust. "Working very closely with vascular surgeons we hope to start treatment of abdominal aortic aneurysm through stenting," he said. Abdominal aortic aneurysm refers to an aneurysm (a blood vessel which has become abnormally large or has ballooned outward) occurring on the abdominal aorta, a large blood vessel that supplies blood to the abdomen, pelvis and legs. Stenting describes the insertion of a wire metal mesh tube into an artery to prop it open.

"I am actively working with my colleagues in the radiology department, as well as other clinical specialties, to start more new services," Dr Burli continued. "Embolisation of uterine fibroids and management of fistulas in renal failure patients were previously not available within the Trust, so we look forward to offering these in the future." Embolisation of uterine fibroids is a new way of treating fibroid tumours of the uterus. With this method of treatment, a catheter is placed in each of the two uterine arteries and small particles are injected to block the arterial branches that supply blood to the fibroids. The fibroid tissue dies, the masses shrink, and in most cases symptoms are relieved. Fistulas are surgically enlarged veins (usually located in the wrist or elbow) that provide access to the bloodstream for haemodialysis in kidney patients.



■ Mr Gvaramadze

#### Mr Gvaramadze – Consultant Breast Surgeon

The recent appointment of a new Consultant Breast Surgeon at Lincoln County Hospital will bring more advanced breast reconstructive surgery to Lincolnshire.

Mr Anzors Gvaramadze, who was born and qualified in Latvia, hopes to bring new and more advanced forms of breast reconstruction surgery to local breast cancer patients. One of his primary aims will be to perform reconstructive surgery during the same operation in which a patient's cancer is removed, in order to make the entire process quicker and less distressing.

"According to British guidelines, all patients who are offered a mastectomy should also be offered breast reconstruction. I aim to try and offer this at the same time as the mastectomy operation for selected patients. This increases the chances of achieving better cosmetic results from the reconstruction without negative impact on cancer treatment," he said. "It is becoming increasingly important that breast reconstructive surgery is available locally and as quickly as possible due to changes in patients' expectations and demand, and because it plays a significant role in a woman's physical, emotional and psychological recovery from breast cancer."

Dr Gvaramadze also hopes to be able to now offer the vast majority of modern breast oncological and reconstructive surgery within Lincolnshire, as opposed to patients having to be referred outside of the county for this work. Breast oncological surgery combines a plastic surgical procedure with breast conserving treatment to improve final cosmetic results.

"One of my areas of special interest is breast conserving surgery, since poor planning in breast conservation can result in unacceptable deformity. Special plastic surgery techniques can be used to remodel the conserved breast and surgery to the opposite breast can be anticipated to achieve better symmetry."

Having studied and practiced breast surgery, with a special interest in breast reconstruction, at the Royal Marsden Hospital in London, Dr Gvaramadze is a recognised specialist. Shortly before he joined United Lincolnshire Hospitals NHS Trust he gained very specialised experience in breast reconstruction at Europe's leading breast cancer centres: The European Institute of Oncology in Milan and The Breast Cancer Centre in Paris.



■ Dr Rao

#### Dr Rao – Consultant Paediatrician & Lead Neonatologist

More local provision and treatment for premature babies will be available following the appointment of Consultant Paediatrician, Dr Sudhakar Rao.

Dr Rao, who has 20 years experience in Paediatrics, has also been appointed Lead Neonatologist for Lincoln County Hospital. In this role Dr Rao will be working within his field of special interest encompassing the care of newborn and premature babies. His main objectives involve working with his team to extend and develop services within the Neonatal Unit at Lincoln and, in particular, implementing more specialist care for local premature babies. He explained further: "At present, premature babies born prior to 32 weeks gestation are transferred to Nottingham and other centres for specialist care. My long-term aim will be to offer more local provision for these babies."

As Lead Neonatologist, Dr Rao will also be responsible for overseeing all neonatal cases at the hospital and the effective running of the Neonatal Unit.

Born and qualified in South India, Dr Rao completed his Postgraduate Diploma in Child Health before moving to the UK to continue his training. He obtained his MRCP (Membership of the Royal College of Physicians) in Paediatrics in 1997. Prior to joining United Lincolnshire Hospitals NHS Trust Dr Rao worked as a Locum Consultant Paediatrician in Dewsbury. He also enjoyed a two-year period working as a Consultant in India.

Discussing his new post, Dr Rao said: "I am really delighted with my appointment in Lincoln and am looking forward to offering my paediatric skills, knowledge and expertise, gained over almost 20 years, for the benefit of local babies and their parents."



**I am really delighted with my appointment in Lincoln and am looking forward to offering my paediatric skills, knowledge and expertise.**

– Dr Rao



■ Ros Edwards

#### New Director of HR and Communications appointed

Staff management and organisation in United Lincolnshire Hospitals NHS Trust will be improved thanks to the appointment of a new Director of Human Resources and Communications. Ros Edwards is to join the Trust in July 2008.

Mrs Edwards, who currently works as Director of Human Resources at Sheffield Hallam University, brings a proven track record in HR to the Trust and hopes to help transform the role of HR within the county's hospitals.

In her current role, Ros led Sheffield Hallam University in achieving the Times Higher 'Employer of the Year' award in 2005 and helped the HR team to be recognised for 'Excellence in the Public and Not for Profit Sector' in 2006 at the national HR Excellence Awards. Prior to this, Ros was Head of Human Resources and Head of Customer Service for Marks and Spencer Financial Services. She is also Deputy Chair of the North East Region HR Directors Group, which provides a networking opportunity for HR Directors in Higher Education across the region.

Mrs Edwards said: "I am delighted to be joining United Lincolnshire Hospitals NHS Trust. I believe Human Resources has a central role to play to support the challenges of the NHS reform agenda. I look forward to building strong relationships with staff and managers across the Trust."

Chief Executive of United Lincolnshire Hospitals NHS Trust, Gary Walker, said: "We are extremely pleased that Ros will be joining the Trust and we look forward to her starting work. Ros brings with her a wealth of experience gained in many sectors and a new perspective on how we might transform the role of HR."

#### NEWS IN BRIEF

#### Extension of GP Direct Access

With effect from 1 November 2007, GP Direct Access was extended to DEXA scanning and certain MRI and CT scans (under agreed protocols.) This development adds to the comprehensive range of imaging tests which are already available for request by GPs.

This new provision supports the 18 week Referral To Treatment programme by allowing more diagnostic tests to be undertaken at the beginning of the patient pathway. The waiting time for all diagnostic imaging is currently a maximum of four weeks, with the intention that by the end of March 2008, a large percentage of patients will experience an average wait of 2 weeks.

Full details and supporting information has already been provided to GPs.



■ Mike Speakman

## New Estates and Facilities Director appointed

Mike Speakman has been appointed as Director of Estates and Facilities for United Lincolnshire Hospitals NHS Trust and will commence working for the Trust in April.

Mr Speakman joins the Trust from Nottingham Healthcare NHS Trust and will work on developing buildings and facilities across all of the Trust's hospital sites. Commenting on his appointment, he said: "I'm delighted. It's an exciting time to be joining United Lincolnshire Hospitals NHS Trust and I'm really looking forward to starting my new role.

I'm passionate about the contribution that estates and facilities services make in supporting patient care and helping to improve the services we provide to the people of Lincolnshire. The experience of patients is very important to me and I'll be bringing my experience and leadership to build on the existing achievements of the estates and facilities teams. I also look forward to working with our clinical teams to make sure we provide the best service we can."

Mr Speakman has worked in the NHS since 1984 and spent the latter two years at director level. He brings significant experience and knowledge of NHS estates and facilities management, gained across both the mental and acute health care sectors, having worked at Glenfield Hospital, Leicester Royal Infirmary and Rampton Hospital.

Mr Speakman is actively involved with the national NHS Estates and Facilities Association and is currently its regional Chair. He holds a BEng (Hons) and an MBA.

Chief Executive for ULH, Gary Walker said: "We are delighted to welcome Mr Speakman to the Trust. It is fantastic that he will be coming to work with us as he is a leader in his field."

## NEWS IN BRIEF

### Blood taking service for children

Lincoln Ward at Lincoln County Hospital offers a blood taking service specifically for children who require a blood test requested by their GP. This service is available from Monday to Friday between 8.30am and 6pm and is run by appointment only. GPs can either book an appointment themselves or give the child's parents the contact information so they can do so. The service is available to children of all ages, from 0 to 16 years. It should be noted that the haematology lab do not take blood from anyone under the age of 16, hence the provision of this service by Lincoln Ward.

# Sleep apnoea service hailed as a great success

A good night's sleep is being enjoyed by more and more patients thanks to the sleep apnoea service introduced 18 months ago at Pilgrim Hospital, Boston.

More than 400 people have been successfully diagnosed and treated with what is a fairly common condition, but one which can really disrupt the lives of sufferers, their families and sometimes other people around them. For example, sleep apnoea is believed by many to be a contributory factor in some road accidents, possibly linking the condition with Lincolnshire's high number of road fatalities.

Sleep apnoea causes a person's airway to narrow as the muscles which normally hold the throat open relax. This can result in pauses during breathing, disrupting a good night's sleep for the sufferer, meaning they run the risk of falling asleep for very short periods during the day, including behind the wheel if they are driving. Symptoms can be present for years without the patient realising, during which time they may become conditioned to the daytime sleepiness and fatigue associated with significant levels of sleep disturbance.

Ear, Nose and Throat Consultant at Pilgrim Hospital, Mr Michael Oko, said he and a team of other consultants set

up the service because sleep apnoea affects up to one in 25 people and can be treated relatively easily.

"Of the patients we see, I would say about 11% of them need surgery to correct the problems that they have, but approximately three quarters of patients can benefit from a treatment we use called CPAP," he said. "This is a treatment that can be done at home.

A patient uses a machine, during the night, which provides a continuous stream of air pressure into their mouth to keep the airways open. It works extremely well and can transform people's lives. At the moment we have about 120 Lincolnshire patients using CPAP and being monitored on their progress at home using our computer system."

Lorry driver Ian Bacon from Sleaford, who drives 50,000 miles a year in his job as a truck tyre wholesaler, said using the CPAP machine to treat his sleep apnoea has changed his life around.

"For four or five years I struggled to sleep and I used to need two naps just to get through the day. I drive a lot for work and often found myself dropping asleep at the wheel and having to get someone else to drive," he said.

"When I told my GP about my trouble sleeping he referred me to Mr Oko. Within weeks he got me on a CPAP machine, which I use every night, and I've never looked back. It's made a huge difference to my life. From the very first day I used it I felt better. I'm getting a good night's sleep and so is my wife who was always disrupted by my snoring before. I feel so much safer when driving. I never need a nap in the day anymore and I feel alert all the time."

Mr Bacon would urge others who think they may be affected by sleep apnoea to come forward. "It scares me to think how many undiagnosed people there might be driving on the roads with this condition. It isn't safe at all. It needs to be taken seriously," he said.

Anyone concerned that they may have sleep apnoea should visit their GP for advice in the first instance.



■ ENT Consultant, Mr Michael Oko

## New cardiac camera promises to cut waiting times

A new cardiac Gamma camera looks set to dramatically reduce waiting times for cardiac imaging at United Lincolnshire Hospitals NHS Trust.

The £300,000 camera will be used for the diagnosis and management of coronary artery disease. It will specifically perform Myocardial Perfusion Imaging (MPI), a non-invasive test that examines blood flow to the heart, carried out to determine if patients are: at risk of a heart attack; candidates for coronary angiography, angioplasty or heart surgery; as well as identify which areas of the heart have an inadequate blood supply.

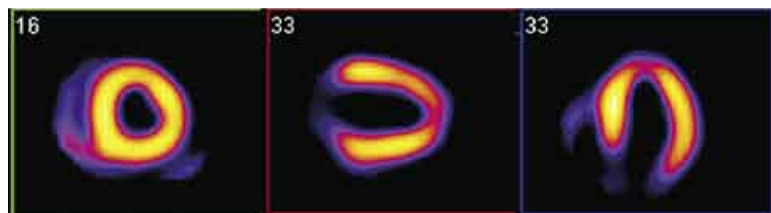
General Manager for Diagnostics at the Trust, Teresa Cope, explained that MPI examinations are currently carried out on general Gamma cameras at Lincoln, Pilgrim Hospital, Boston and Grantham and District Hospital.

"This arrangement compromises the ability of both the MPI service and the non-cardiac nuclear medicine service to meet waiting time targets. As a result waiting times for MPI are currently over 13 weeks at two of the hospital sites," she said. "Reducing these waiting times can be very costly as we have to arrange weekend sessions to ensure everyone is seen. It has cost about £80,000 to date.

This new camera will take the pressure off the existing ones and mean that patients are seen much more quickly. It will also save a lot of money."

Based at Lincoln County Hospital, the camera will meet the particularly high level of demand in the area for this service. Demand also looks set to increase further according to a report from the British Cardiovascular Society Working Group. The group estimates that the number of scans per million population will increase considerably by 2020, with the number of scans for Lincolnshire expected to increase from 1,400 per annum now to 2,250 in 2010 and 5,040 in 2020.

The availability of the new Gamma camera, which is being purchased using Capital Funds, will mean that capacity for MPI scans within the Trust will almost quadruple, rising from 600 a year to at least 2,000.



■ The Gamma camera and a sample image

## New staff rest rooms for Louth

Staff at County Hospital Louth are benefiting from new rest rooms, thanks to Improving Working Lives funding.

A former doctors' library, a room which has not been used for many years, has been transformed for use by Louth's Porters. Their rest room, known as 'The Porters Lodge,' had been located in an unsuitable room and Pete Kerman, Facilities Team Leader at Louth, was keen to find a better solution, which took some time.

He said: "It's great now that the Porters have somewhere more suitable that they can go to and have a rest whilst they are on a break from their work. Improving Working Lives funds has paid for the walls to be repaired and decorated, new furniture and a

sink, all of which has created a really pleasant room."

Radiology staff at Louth have also received Improving Working Lives money which has funded new furniture for their existing rest room. The whole team are delighted with the results.

Susan Smith, Radiographer, commented: "Our rest room is used by all radiology staff, both clinical and non-clinical. The furniture we used to have was very old, uncomfortable canvas chairs and sofa. It was starting to look quite grubby and definitely needed changing. I only recently found out that the fund existed and it's a good idea. It's made a real difference to the radiology staff and they are all pleased with the change."



■ (l - r) Susan Smith, Helen Salt and Mary Jeeves enjoying their new sofa



■ Sharon Cole, Senior Staff Nurse, with Karen Burton, an F2 doctor, on the EAU

## Profile: Grantham Emergency Assessment Unit

It's a crisp, bright day and light is streaming into the Emergency Assessment Unit at Grantham and District Hospital. Doctors, nurses and supporting staff go about their business on a relatively quiet morning. Quiet for the moment as the busy period starts at around noon when GP surgeries close for the morning and those people needing further, specialised assessment are booked into the EAU.

Emergency Assessment Units are a relatively new feature within the NHS, but the Grantham one has been open for three years now. It was the first of its kind within United Lincolnshire Hospitals NHS Trust, but the Units have been subsequently introduced at Lincoln County and Pilgrim Hospital, Boston.

Rachel Ryder, Sister in EAU, explains the role of the department: "GPs refer patients to EAU when they need further assessment. We are able to perform a complete range of assessments, everything from x-rays to ECGs to bloods, in one place. It saves patients having to visit various departments in the hospital and allows a quick and efficient assessment service. This all ensures that they end up in the right place to best care for them and also prevents unnecessary admissions, creating a much better patient journey overall."

The Unit has a total of 26 beds and additional trolley and seating assessment areas. The same day discharge rate is relatively high, approximately 35%, meaning that of the 10 to 20 patients seen each day about a third are able to safely go home, on the same day, without being admitted for inpatient care. Their on-going treatment might mean visits to the EAU as a ward attender, outpatient clinic attendance, or continuation of care from their GP. For the remaining patients, decisions can be rapidly and effectively made regarding the most appropriate next course of care and treatment. This might mean admission to a specialist



**Some patients come in for assessment prepared for a lengthy stay in the hospital and in many cases this is unnecessary.**

— Rachel Ryder

ward at Grantham, for example, if they have suffered a stroke, or transfer to a specialist treatment centre. A few patients need to remain in the EAU for further assessment, but a maximum stay of 48 hours is the time the team try to work towards.

All preliminary assessments are usually completed within a four hour period, so the Unit does achieve a fast turnaround. Senior doctors and consultants are always available, including via an on-call overnight service.

The EAU takes general medicine, surgery and orthopaedic patients who range in age from 16 upwards. People coming in to the Unit do so with a variety of conditions, most commonly chest pains; angina, whereby a heart attack needs to either be diagnosed or ruled out and the Unit has the facilities to cardiac monitor patients; diabetic patients who need a correct blood picture; as well as ward attenders. Some patients, such as those with Deep Vein Thrombosis, use the facility as a clinic and come in for blood thinning medication.

All of the nurses on the Unit, as well as some of the Health Care Support Workers, are trained to take blood, as well as cannulate and catheterise (both processes for draining fluids from the body), preliminary tasks which junior doctors used to have to perform prior to taking a patient's history. Pressure

on the doctors is thus relieved and the assessment process is quickened for the benefit of patients.

Since attending Drive for Improvement sessions, a Trust-wide initiative aimed at understanding and recognising where improvements in delivery of service and care can be achieved, Rachel and the EAU team have developed a system to help relieve some of the pressures experienced by Grantham's busy Accident and Emergency Department.

People attending A&E have a varied assortment of injuries, conditions and needs. Some of these patients will require extensive assessment and this can now be supported by the EAU. EAU nurses operate a triage system and have observation beds available, thus providing valuable support to A&E in busy periods, ensuring patients are seen and assessed as quickly as possible. Strict criteria is agreed and applied in conjunction with colleagues in the A&E Department. The EAU is currently able to see approximately 16 A&E patients a month and this has helped A&E meet the required four hour target particularly during recent pressures over the winter period.

Rachel concluded by explaining how patients and GPs can further assist the EAU: "Some patients come in for assessment prepared for a lengthy stay in the hospital and in many cases this is unnecessary. We wanted to make that message clear to our patients, so they are fully aware that they are attending for an assessment initially."

GPs can also further help us and their patients by aiming to call us to book a patient in as soon as they have seen that person. Many GPs will wait until their surgery has closed, which does lead to many patients all arriving at once in the EAU. By calling in stages, if at all possible, this would help relieve pressure on transport, on the Unit at busy times and also ensure patients are seen more quickly."

## Friends of Lincoln Hospitals Association



Since its formation in 1948, the Friends of Lincoln Hospitals Association has raised money to provide amenities and comforts for the patients and staff of Lincoln County Hospital.

In the past five years alone the Association has raised funds amounting to more than £250,000. This incredible sum has been spent on a variety of projects throughout the hospital. These include grants allocated to fund: Christmas activities on wards; signage to help visitors and patients find their way more easily around the hospital; cancer research programmes and refurbishment of the Recreation Hall floor.

Susan Fletcher, Chair and Secretary of the Association, said: "The Friends of Lincoln Hospitals seek to ensure that, where income has been received, we will continue to encourage hospital departments to seek assistance from us. It is rare that we turn down any genuine request."

In the early days most of the funds were donated by employees of local engineering companies. This is still a

source of income, but has been supplemented over the years by legacies, gifts and donations from the families and friends of patients, as well as funds raised from numerous events and occasions. The Association also manage a shop located at the entrance to the hospital's Outpatient Department, providing a handy place to buy gifts, drinks, papers, magazines and confectionery for patients, visitors and staff alike. The shop is operated entirely by volunteers, with Marjorie Woodcock, also Vice Chair of the Association, organising all the logistics behind the scenes, making sure it runs smoothly.

The Association also has a membership scheme, which aims to bring together everyone who has an interest and affection for their local hospital.

For more information about the Friends of Lincoln Hospitals Association, their membership scheme, the work they do and how you might be able to help and support them, please contact Mr D A Ward, Hon Treasurer, 16 Fen Lane, North Hykeham, Lincoln LN6 8UY.



■ (l-r) Doug Ward, Treasurer; Josie Moreton, Committee Member; Marjorie Woodcock, Vice Chair and Susan Fletcher, Chair and Secretary

## New system for theatres introduced

Cancelled operations will be reduced and patients given more choice of operation date thanks to the introduction of a new theatre management tool across United Lincolnshire Hospitals NHS Trust.

ORMIS (Operating Room Management Information System) enables computerised management of operating theatre services and equipment, which allows for better forward planning of theatre lists, identification and management of theatre capacity and electronic recording of clinical information. These benefits promise to improve the patient experience and care through greater efficiencies, quicker access to information and more effective planning. It is being implemented throughout the Trust at Lincoln County Hospital, Pilgrim Hospital, Boston, Grantham and District Hospital and County Hospital Louth.

A member of the project team explained how the ORMIS system will improve planning by more effectively scheduling operations,

which should result in a reduction in cancelled surgery. "As an example, if a particular piece of equipment is needed for three operations on the same day, ORMIS can flag this conflict, avoiding late cancellations due to equipment unavailability."

Theatre scheduling can be undertaken and the operation list made available much earlier in the process. As a result, staff allocations and other resources can be planned with greater flexibility around the patients. Having one centrally held electronic list ensures that everyone is aware if late changes are made, which might happen with the scheduling of an emergency patient, for example. In addition, as the system is electronic, a patient's relatives will be able to get information more quickly as ward staff can easily view a patient's progress through theatres from the ward."

The new system was introduced in theatres throughout the Trust between January and March 2008, with surgical wards following later.

## Introduction of a new nurse-led service at Grantham

Cardiac patients are benefiting from faster, more efficient assessments thanks to the introduction of a new, nurse-led service at Grantham and District Hospital.

Cardiac nurses who work on the Critical Care Unit recognised an opportunity to make a real difference to patients by training to offer Exercise Tolerance Tests (ETTs.) A year later and half a dozen nurses are qualified to offer ETTs and patients have already benefited from the service, which was introduced in September 2007.

ETTs are one diagnostic tool necessary to understand how best to progress treatment for patients who have been admitted with cardiac pain. The test examines how much exercise a high-risk cardiac patient can tolerate before symptoms are experienced. Treadmills are used to monitor a patient five days after a heart attack. Tests start off very slowly and speed is gently increased, all whilst a heart monitor records levels of stress. The Cardiac Technician monitors all the results, whilst the Cardiac Nurse ensures optimum patient safety throughout the ETT and also during the recovery phase.

Catherine Scott, Sister on the Critical Care Unit, explained what benefits are being realised now that cardiac nurses are trained to offer ETTs. "The patient journey has certainly been expedited and continuity of care has been enhanced. Further treatment or discharge needs can be assessed in a more timely fashion as we do not have to wait for a cardiologist to be available to oversee the ETT. Those patients who receive a negative ETT are able to be discharged more quickly, reducing their length of stay in hospital. If a positive ETT is recorded, further treatment and care, whether that would be within the hospital itself or at a specialist centre, can be more rapidly assessed and actioned."

The change to a nurse-led service has relieved pressure on the medics and, in turn, meant new professional development opportunities for nurses who would like to train to offer this service. Relationships between the various departments involved, particularly Medical Physics and CCU, have also been enhanced. It was a multi-disciplinary team meeting, involving cardiac nurses, consultants and medical physics technicians, that led to plans to introduce nurse-led supervision of ETTs.

A great deal of hard work and effort was required by the nurses who volunteered to undertake the training to meet the necessary criteria to offer the service safely and effectively. The qualification procedure demands that nurses have a minimum of three years cardiac experience, a current Advanced Lifesaving Certificate, have completed a checklist provided by Medical Physics and observed ETTs.

# Chief Nursing Officer visits Lincolnshire

'Dignity and care' was the theme for the day when Christine Beasley, CBE, the Department of Health's Chief Nursing Officer, visited Lincolnshire on 8 February.

Christine met representatives from Lincolnshire's NHS organisations, including United Lincolnshire Hospitals NHS Trust, and the County Council during her visit. Her focus for the day was to learn about the efforts being made to improve and maintain levels of dignity in care in the county.

A number of excellent initiatives being undertaken by NHS and Council staff were on the agenda for the day. These included ULH's Patient Wellbeing Champions project which supports staff in developing their care with regards to patients' emotional and psychological needs, including aspects of the patient experience relating to privacy and dignity, spirituality and specialist bereavement care. Christine met with some of the Trust staff who have taken part in this innovative programme and discussed the projects they have been encouraged to develop within their own areas that will promote improved dignity and care for patients.

Senior Clinical Tutor at the Trust, Marie McDermott, said: "We were delighted that Lincolnshire was selected to represent the national Dignity in

Care Agenda. This recognised all the work we as an organisation have done around dignity in care, the vision of our staff and the ethos of the Patient Wellbeing Champions, who are in pursuit of

excellence for all service users."

Christine was appointed Chief Nursing Officer in October 2004 and is the Director General within the Department of Health for Professional Leadership,

including Allied Health Professions and Healthcare Scientists, and for Partnerships for Children, Families and Maternity. She is also the lead director for Reducing Health Associated Infections, as well as the Cleaner Hospitals Programme, and leads on the Voluntary Sector and the People and Partnership Programmes for the Department of Health. The London Standing Conference, which engages nurses across the capital in leading service improvement and contributing to improvements in clinical practice across the country, was established by Christine.

Following her visit, Christine commented: "I was delighted to spend a day in Lincolnshire meeting many staff and hearing about the excellent services that are provided in a wide range of settings. I was particularly pleased to officially open Lincolnshire Partnership NHS Foundation Trust Practice Development Unit and learn about the journey clients and nurses took together to achieve their success. I was also impressed by the work of the United Lincolnshire Hospitals NHS Trust and the work they have done to develop patient champions. It was a pleasure to meet so many of these champions and hear of the initiatives they are involved in."



■ Patient Wellbeing Champions and ULH representatives meet Christine Beasley (second left.) Marie McDermott (fourth left); Sylvia Knight, ULH Chief Nurse (fifth left); Tim Couchman, Trust-wide Senior and Managing Chaplain (centre); and Jean Burgess, Chairman of the ULH Patient and Public Involvement Forum (far right.)

## Falling rates of infection reported by HPA

Recent Health Protection Agency figures report that United Lincolnshire Hospitals NHS Trust is performing well in its bid to fight Hospital Acquired Infections.

The HPA's quarterly (July to September 2007) performance report on Hospital Acquired Infections show a marked reduction in the number of MRSA and Clostridium difficile infections in ULH hospitals.

The figures reveal that the Trust is maintaining one of the lowest C diff rates in the country and that MRSA cases are falling. There were 111 cases of C diff throughout Lincolnshire between July and September 2007, including 26 infections where specimens were taken by GPs. This compares with 113 cases recorded just in hospitals in the three months previously. MRSA cases have seen a reduction also, with 14 cases recorded between July and September 2007, compared with 16 cases in the three months prior.

Of the C diff cases reported between July and September 2007, 89 were in patients aged over 65, 19 of which were reported from specimens taken in other Trusts or elsewhere by GPs. The additional 22 cases of C diff reported were among patients aged 2 to 64 years. Of these, 7 were reported from specimens taken in other Trusts or elsewhere by GPs and were, therefore, unlikely to be hospital acquired.

Of the 14 MRSA cases reported during the same quarter, 50% were cases where patients were found to be positive either on or within 48 hours of admission to ULH hospitals and, as such, were unlikely to be hospital acquired.

The Trust's Chief Nurse, Sylvia Knight, noted that these figures reflect the hard work being undertaken within the



**We have maintained one of the lowest rates of Clostridium difficile in the country for the past two years.**

— Sylvia Knight

Trust to cut the rates of infections. "We have maintained one of the lowest rates of Clostridium difficile in the country for the past two years and these new figures show that we are continuing to perform well," she said. "Not only that, but our own figures report that the number of infections in our hospitals has dropped since September. We continue to work hard to maintain this performance."

In the first half of this financial year (April-September 2007) there were 20% fewer MRSA cases and 28% less C diff cases, in the over 65 age group, within ULH compared to the same period in 2006.

The Trust continues to combat Hospital Acquired Infections through various methods, including continued investment, for example, £250,000 of Capital Funds for new ward hand cleansing stations and cleaning equipment. £500,000 of additional Government investment was also received this year which has paid for staff training, cleaning equipment and new wash basins, amongst other things.



■ Ward cleaning at Louth



■ Lesley Bradley, Marney Clair De Lune and Trudy Askew watch the kit being loaded at RAF Waddington

## Indonesian babies benefit from ULH generosity

Thousands of pounds worth of equipment, which can no longer be used by United Lincolnshire Hospitals NHS Trust, has been donated to a hospital in Indonesia.

Thanks to the hard work of a network of people and organisations, including a Neonatal Sister who works at Lincoln County Hospital, babies in areas of real need will benefit from hi-tech equipment that otherwise wouldn't be available to them.

Five years ago the first project with Indonesia got off the ground when Sister Lesley Bradley, who works on Nocton Ward, was approached by a group of fundraisers keen to re-use any redundant equipment the hospital had. The timing coincided with Lesley's own interest in re-using this equipment. She also works with the charity BABIES to raise money for new, state-of-the-art incubators for Lincoln County Hospital and had been looking into possibilities for re-using the replaced equipment.

Lesley commented: "I wasn't sure what happened to any retired equipment, so I started researching options. After a great deal of investigating and organisation two retired incubators from our hospital were flown out to Indonesia, thanks also to the generosity of Singapore Airlines. These incubators

provided the first pieces of equipment for the tiny hospital in Bitung, which is run by just 11 nuns. Their only means of warming a baby previously was by placing the cot under a light bulb."

The latest batch of donated equipment: 14 cots; 3 incubators; 3 ventilators; 4 O<sub>2</sub> analysers, which measure oxygen levels in a baby's body; a blood pressure machine; and out of date disposables, was flown out to the hospital just in time for Christmas 2007. Trudy Askew, a Flight Lieutenant at RAF Waddington, had worked with Lesley on fundraising for Lincoln County Hospital and was keen to get the Base involved. As such, RAF Waddington helped to transport the equipment by lorry to Heathrow, where it was then flown to Indonesia by Singapore Airlines, completely free of charge.

In January 2008, a team, including Lesley and Staff Nurse, Marney Clair De Lune from Ruston Ward, went out to the Bitung hospital to set-up the equipment and show the nuns how to use it.

Lesley added: "We are keen to observe the way a small hospital runs with little or no equipment. On our return I feel this will be an amazing learning and teaching experience for my colleagues within our unit."

## NVQ and Patient Wellbeing Champion awards

The annual Presentation of Awards ceremony, which marks the achievements of hospital staff who have successfully completed NVQ or Patient Wellbeing Champion training, took place on 15 February in the Hospital Chapel at Pilgrim Hospital, Boston.

Kevin Teasdale, Training Manager for United Lincolnshire Hospitals NHS Trust, introduced the event and was joined by Sylvia Knight, the Trust's Chief Nurse, who presented the awards.

Denise Tointon, Clinical Trainer, introduced staff who have gained NVQ Assessor or NVQ Candidate (in areas such as Health and Social Care, Customer Care) qualifications. Marie McDermott, Senior Clinical Tutor, introduced the third cohort of Patient Wellbeing Champions to receive awards.

Those presented with awards were:

NVQ Assessors	NVQ Candidates	Patient Wellbeing Champions
Sam Brewster	Claire Bamford	Barbara Bambro
Jane Curtis	John Baxter	Martin Birchenall
Carol Elson	Margaret Crunkhorn	Janet Blakey
	Steve Curtis	Pauline Gale
	Carol Gildersleeves	Emily Greaves
	Angie Gourlay	Vivienne Hildred
	Josephine Kent	Vi King
	Julie Kirk	Diane Muxlow
	Wendy Potter	Maggie Scatcliffe
	Carol Walker	Sharon Taylor
	Julia Walker	
	Rebecca Crowley	

Kevin Teasdale concluded the event by thanking everyone involved in its organisation, the presenters and, of course, all the candidates and those who have supported them. "All of you who earned awards today have shown a willingness to learn, intelligence, an open attitude to new ideas and tenacity in successfully completing your training. Well done to everyone for their achievements."



■ Sylvia Knight (third from right) and Kevin Teasdale (second from right) with some of the award winners



■ The RAF Digby team part way through their 800km fundraising effort

## RAF Digby runs for Waddington Unit

Airmen from RAF Digby swapped their planes for foot and pedal power in a bid to raise money for the Waddington Unit at Lincoln County Hospital.

The team of 12 successfully covered 800km in total using only bikes and treadmills during the event which took place on 8 February. The distance was covered in just over five hours. The fundraising continued into the night with a raffle and quiz in the social club. The total monies raised, which at the latest count was just over £3,000, will buy new equipment for use by the cancer care unit.

Sergeant Steven Mearns from the base explained why they were undertaking this gruelling physical challenge: "Senior aircraftsman Darren Swift was treated for cancer on the Waddington Unit. He has now recovered and is back at work and we wanted to thank the hospital for all they have done for Darren. We thought this would be a great way to do that. A dozen of us took part, including myself and Darren, and we ran and cycled 800km between us in one day. That's the distance from RAF Digby to Sword Beach in Normandy. We had originally thought we would try to cover the distance to Iraq but when we calculated it we realised we'd be there all week trying to cover that distance! We had enough sore legs between us the day after as it was."

Sister Ann Spencer from the Waddington Unit expressed thanks and gratitude to everyone at RAF Digby who took part and everyone who sponsored and supported them. She commented that the money raised will be used to buy a Dynamap machine, which costs approximately £2,500, and some stands for chemotherapy drips.

"We already have one Dynamap on the ward, which is used to monitor the vital signs of patients undergoing chemotherapy including blood pressure, temperature, pulse and oxygen saturation. However, the number of patients we see is rising, so a second Dynamap will come in very handy," she said.

"It will help patients because they won't have to wait for their vitals to be taken if one machine is in use. Plus, it will help staff to run the unit more easily. We are also in need of new drip stands, as the old ones get a bit rickety after a while and it is nicer for patients to have new ones."

Prizes for the raffle which also contributed to the total funds raised were generously donated by Mowgli Restaurant and the Scarf and Goggles Restaurant (both in Metheringham), Blankney Golf Course, Eden Hall Spa, Lincoln City Football Club and Peterborough United Football Club.

## "Better performing" maternity services for Lincolnshire

The Health Commission's first ever Maternity Services Review has ranked United Lincolnshire Hospitals NHS Trust as one of the "better performing" trusts in the country.

The report, published on 25 January, reveals that local mums and mums-to-be are receiving a high level of maternity care, being supported by well-trained, capable and effective staff, given good choices about where to give birth and that clinical guidelines are being met.

The Maternity Services Review rated hospitals on a four-point scale from 'least well performing' to 'fair



■ How the 148 NHS trusts reviewed were ranked

performing' to 'better performing' to 'best performing.' Better performing trusts demonstrated good performance in some key areas, i.e., better than many others, but there was scope for improvement in some areas.

The Trust was assessed on performance against 25 targets on a scale of one to five (five being the highest, one being the lowest score), grouped into three areas. The Trust achieved 3.375 for "clinical focus", 2.75 for "women-centred care" and 3.222 for "efficiency and capability."

Areas of the Review in which the Trust scored particularly highly included:

Five for: 'The extent that staff are trained in core maternity skills;' 'Delivery of hospital-based antenatal care.'

Four for: 'Women offered an informed choice for screening tests;' 'Support for infant feeding;' 'Appropriate use of caesarean sections;' 'Extent of choice in labour;' 'Staffing levels;' 'Women who considered their length of stay was about right.'

Trust Head of Midwifery, Pat Appleby, was pleased with the outcome of the review, commenting that a great deal of work has gone into ensuring maternity services across Lincolnshire are of the best possible quality.



"One part of the review was a patient survey, where women who had used our maternity services were asked about the quality of care they received. We were particularly pleased that those surveyed said they felt they were given a choice of where to have their baby and that they had confidence and trust in the staff working with them as a patient's needs naturally always come first," she said. "This review has also highlighted areas where we can work to improve our services even more and we are pleased that we will now be able to address these issues."

## Hospital thieves jailed: A reminder to be security aware

Two men were jailed recently following an organised crime spree which specifically targeted hospitals across the country.

Liaison between the police, the NHS Security Management Service and local NHS security management specialists ensured that the true extent of the crimes was established and that substantial evidence was brought to bear during both the investigation and resulting court case.

The men were sentenced in February 2008 for conspiracy to steal and commit frauds in excess of £100,000.

The thieves, smartly dressed and wearing NHS ID badges, entered offices and staff changing rooms. They raided staff lockers and stole personal items, including credit cards. Attempts were then made, within hours of the crimes, to access funds using these cards. Following one such theft, the thieves telephoned the card holder and obtained their Personal Identity Number (PIN) by pretending to be from their bank and £1900 was stolen from their bank account.

United Lincolnshire Hospitals NHS Trust was also targeted by the perpetrators of these crimes causing distress and disruption to the individuals affected.

Incidents such as this serve as a reminder to all hospital staff to remain vigilant and security aware.

Useful points to consider:

- Individuals should never offer personal information, such as address details, PIN numbers, date of birth, etc., over the telephone or by email.
- A bank, for example, will never ask you to divulge your PIN number to them or to anyone else.
- If you receive a call from your bank it is best to return the call using the number you have for your branch/call centre.
- If you receive an unsolicited email asking for information it is often a scam. If in doubt call the sender and confirm their identity.

### If in doubt, do not give out personal information.

The Trust's Local Security Management Specialist, Lance Morgan, said: "Sadly, healthcare premises and other public buildings can provide easy pickings for opportunist thieves." He urged staff to be vigilant and follow all security procedures in their areas of work, reminding staff: "If you see anything suspicious, report it immediately to the hospital security staff or your manager."

Lance should be the first point of contact for staff who have any security concerns or require advice. He can be contacted on 07874 745728 or at lance.morgan@ulh.nhs.uk.

# Handheld devices audit cleanliness



■ Beverly Hurst, Auditor for the Trust, using one of the new Auditrac handheld devices

## NEWS IN BRIEF

### New switchboard for Lincoln

Telephone calls to Lincoln County Hospital will be handled more quickly and efficiently following the installation of a new switchboard at the site.

The new switchboard system was installed at the beginning of February as part of a programme to modernise telephony services at the hospital. It will provide much more streamlined call-taking services.

The implementation of the new system and Direct Dial In services will also mean that more telephone calls can be made to individual departments without callers having to go through the switchboard system. The main telephone number for the hospital will remain the same (01522) 512512.

Facilities Business Manager for United Lincolnshire Hospitals NHS Trust, Claire Hall, said the old telephone system was lacking capacity to cope with the numbers of calls coming through. "There have been problems in the past with people trying to contact the hospital and getting a seemingly constant engaged tone. This was mainly because there was not enough capacity to deal with the number of calls coming in," she said. "This new system and associated improvements to telephony services at the Trust should mean that this issue will be a thing of the past. The new system will also mean calls can be directed more easily, making the whole process much more efficient."

The switchboard systems at both Pilgrim Hospital, Boston and Grantham and District Hospital were upgraded three years ago. Now Lincoln has followed suit.

Every room and all of their contents throughout United Lincolnshire Hospitals NHS

Trust will be thoroughly monitored for cleanliness thanks to the introduction of a new audit system.

The new hi-tech system, Auditrac, makes use of easy-to-use handheld devices, which have the contents of each of the rooms at each of the Trust sites logged onto them. This means that rooms and every item in them can be comprehensively assessed and checked against National Standards for Cleanliness. Information gathered by the machines is fed back into a computer and used to produce reports which detail what changes need to be made to make the area as clean as possible.

Hotel Services Manager for Lincoln County Hospital, Wayne McIntosh, explained that the Auditrac devices were introduced in January 2008. "Staff have already begun to use the new system and it is proving to be an amazing tool that will help support us in ensuring that every area in each hospital is kept clean. We hope that by the end of March this year every area in the Trust will have

been audited and assessed against national cleanliness guidelines at least once," he said.

Chief Nurse, Sylvia Knight, commented on how the new system will make a huge difference because of the importance ward and department cleanliness plays in reducing the risk of infection. "This new software will give us immediate, comprehensive results on our standards of cleanliness. The system will help ward sisters, matrons and house-keeping staff to take quick action to address any areas that do not fully meet the new National Standards of Cleanliness."

The new devices cost £17,000 and have been purchased using infection control money, which totalled £500,000, awarded to the Trust by the Department of Health in September 2007. The funds were also spent on staff training, cleaning equipment and new wash basins amongst other things. The Auditrac devices have been allocated as follows: Lincoln County Hospital – 3; Pilgrim Hospital, Boston – 3; Grantham and District Hospital – 2; and County Hospital Louth – 2.

## NEWS IN BRIEF

### Equality and Diversity: LGBT History Month

February 2008 marked the fourth celebration of Lesbian, Gay, Bisexual and Transgender (LGBT) History Month in the UK.

LGBT History Month is a national campaign which celebrates the achievements, successes and history of the lesbian, gay, bisexual and transgender communities. It is an opportunity to commemorate their struggle for equality, as well as increase understanding amongst different communities.

Rachel Taylor, Diversity Manager for United Lincolnshire Hospitals NHS Trust, commented on some of the difficulties that are faced by these groups. "Lesbian, gay and bisexual people can have unique healthcare concerns. Discrimination, homophobia and heterosexism, the belief that heterosexuality is naturally superior to homosexuality and bisexuality, does sometimes have an impact on their everyday lives and they are often more likely to be victims of violence and verbal abuse. Transgender people may have similar health concerns relating to discrimination and can experience social isolation, as well as face limited understanding of their lives. LGBT History Month is one way in which their needs and concerns can be highlighted and discussed with members from all communities."

ULH has already begun work on its Single Equality Scheme, of which sexual orientation is a key strand. The Trust will also be launching a policy on Transgender Issues in the Workplace to ensure that transgender employees have the right to equal treatment and protection from discrimination at work.

The Trust is committed to equality of treatment and equality of opportunity for all. There should be no discrimination against any person on grounds of sexual orientation or gender. If any member of staff feels that they have been discriminated against on these grounds they should contact Rachel at Grantham and District Hospital, ext. 4483 or via email to Rachel.Taylor2@ulh.nhs.uk. Rachel is also keen to organise a LGBT staff network. Anyone interested in finding out more should contact her. All enquiries will be treated in confidence.

More information about LGBT History Month is available from their website: <http://www.lgbthistory-month.org.uk/index.htm>.

## Staff Lottery Winners

### January 2008

Prize	Number	Name	Dept	Site
£1,000	601	Elizabeth Denniss	Panton Ward	Lincoln
£500	298	Janice Cole	Dixon Ward	Lincoln
£250	1518	Anonymous		Lincoln

### December 2007

Prize	Number	Name	Dept	Site
Car	1022	Susan Cragg	CCU	Grantham
£1,000	2032	Hayley Niner	Occupational Therapy	Lincoln
£500	1882	Janet Kilford	Radiology	Lincoln
£250	90	Anonymous		Lincoln

# Dr Jai Wali Award

**D**r Emma Wilmot was awarded the Jai Wali prize at Pilgrim Hospital, Boston, on 13 February. The prize is presented to the most outstanding doctor in training of the previous year and voted for by all of Pilgrim's consultants and career grade doctors.

Dr Wali was a promising young doctor who worked at Pilgrim Hospital before his life was cut tragically short. Dr Wali's family decided to bequeath an award in his memory, which comprises of a cheque for £200 and a certificate.

Mr Derek Turner, Consultant Urologist and one of award trustees, the other being Mr Ewan Chalmers, Consultant Anaesthetist, presented the award. He said: "It is a source of great pleasure and pride for us to present this prize in honour of Dr Wali and we are extremely grateful to the Wali family for their kindness in bequeathing the award to Pilgrim Hospital. It is, perhaps, one of a kind in that it recognises a promising

trainee young doctor and is voted for by their consultant and career-grade colleagues. Many nominations were received for this year's prize and I am delighted to be able to present the certificate and cheque to the winning nominee, Dr Emma Wilmot."

"It was a fantastic learning opportunity for me at Pilgrim," Emma said, "which included lots of exposure to many different illnesses. Everyone I worked with was very supportive, especially the consultant team. It's a great privilege to receive this award and I would like to thank everyone who nominated me."

Emma worked at Pilgrim as part of her medical training from August 2006 to August 2007. It was her second year as a Registrar for Diabetes and Endocrinology and she received excellent reports regarding her work. She has now moved on to Derby Royal Infirmary to continue her training, before undertaking diabetes research for three years.



■ (l - r) Mr Derek Turner, Dr Emma Wilmot and Teri Green, Pilgrim Hospital's General Manager for Emergency Care

## Lincoln Vocational Training Scheme for General Practice

The Lincoln Vocational Training Scheme for General Practice was established in 1973 and had an intake of just two trainees. By August 2007, the annual intake had increased to nine and now trainee numbers on the scheme total 26.

Throughout their three year training GP Specialty Registrars (GPSTRs) or 'GP Stars', as they are affectionately known, are attached to one of the eight excellent training practices which cover a geographical spread, including six rural dispensing practices and two urban practices.

Trainees attend half-day release teaching in the Postgraduate Medical Education Centre at Lincoln County Hospital. These sessions consist of a rich variety of in-house teaching facilitated by the three experienced Programme Directors and presentations from expert staff from the Trust and the wider local health community (including a number of local GPs.) Other expert resources from further afield also contribute, for example, the Leicester Patient Simulation Unit, who will shortly facilitate a training session on conducting the telephone consultation. Upcoming Study Days include the annual Dermatology Study Day in March, presented by Dr Hepburn and his team. Trainees from the Boston VTS based at Pilgrim Hospital will also join this session. The inaugural Child Protection Issues Study Day is

scheduled for September 2008.

The Lincoln Trainers' Workshop is a strong and cohesive group of programme directors, trainers and prospective trainers which meets every two months for business/educational meetings. Recent speakers include experts from the East Midlands Healthcare Workforce Deanery (under whose auspices the scheme is run) to deliver training on the nMRCGP and a forthcoming speaker who will conduct training on the Use of the Arts in GP Teaching.

The Lincoln VTS is currently undergoing transition in order to accommodate the changes required by the Modernising Medical Careers initiative, which is phasing out six month hospital posts and replacing them with four month posts. This means that all GPSTRs now have experience in Medicine; Obstetrics and Gynaecology; Paediatrics; Accident and Emergency; and Psychiatry posts. At the same time, experience in GP Training Practices is increasing from 12 to 16 months. Consultants, trainers and trainees have all proved very adaptable in accommodating these changes.

Further information is available from: <http://www.ulh.nhs.uk> and information about applying for General Practice training - through The National Recruitment Office for General Practice Training - can be found at [www.gprecruitment.org.uk](http://www.gprecruitment.org.uk).

## Pharmacy Information for GPs

Please will GPs remind all patients coming into hospital, whether for a planned treatment procedure or a clinic appointment and, if possible, in an emergency, to bring all their medication with them. This includes medicines bought from a Community Pharmacy or products from a Health Food Shop.

The majority of GPs will be contacted, soon after the admission, to send written confirmation of the medication that the patient is on, but having their medicines with them on arrival is a benefit to the patient for the following reasons:

**The patient can continue taking the medicine without interruption on admission to hospital, if the hospital doctor considers it is still appropriate**

Hospitals routinely only stock products on the Trust Medicines Formulary and therefore might not have the drugs the patient needs at the time of admission.

**Sight of the patient's own drugs may help the hospital discover a reason for the emergency admission**

1. Close scrutiny of the drugs brought in occasionally reveals dispensing mistakes, such as the drug in the container is not the same drug as named on the Dispenser's label, or the drug dispensed is not as prescribed by the GP. Therefore, the admission to hospital might be because the patient is suffering ill effects from the wrong drug or the wrong dose.

2. Assessment of the quantities of the patient's own drugs brought in reveals which medicines might

not have been taken regularly so the doctor can see that the patient has not been receiving the treatment as prescribed. Therefore, admission to hospital might be because of the deterioration of the patient's condition due to lack of medication.

### Commonly asked questions:

**What happens to the patient's own drugs brought into hospital?**

If appropriate for continued treatment, they are stored in lockable cabinets at the patient's bedside. They are then administered by the nursing staff, or by the patients themselves, according to Trust Policy.

**What happens as the supply of the patient's own drugs is used up?**

As the supply is used up, it is topped-up by Pharmacy to last the length of stay plus a minimum of 14-days after discharge (unless treatment course is less, or patients say that they have further supplies at home)

**What happens if their own medicines are no longer appropriate for use?**

If not appropriate for treatment, then the patient is asked to sign to give permission for Pharmacy to take the medicines away for destruction. Drugs brought in by patients are not re-dispensed for others because there is no guarantee of appropriate storage in patients' homes to maintain quality and potency of the medicines.

Medicines discontinued by the hospital doctor are removed from the bedside cabinet after explanation to the patient.

Judith Varley, Trust Chief Pharmacist

## HR: Staff Survey update

Thank you to everyone who participated in the 2007 Staff Survey. In total, 878 surveys were returned, equating to a response rate of 53% and a marked improvement on last year's return rate of 48%. A particularly good response was received from staff in Women and Children's, Diagnostics, Corporate and Chief Nurse Directorates.

The survey was returned to an independent organisation called Quality Health. The purpose of using an independent company was to ensure anonymity for all responders which should mean open, honest feedback has been received.

Quality Health will provide United Lincolnshire Hospitals NHS Trust with:

- Thorough analysis of the responses received.
- Comparison with the Trust's results from previous years.
- Benchmarking against results from similar trusts.

Key areas for action will be identified by the Human Resources team and a draft action plan developed by early March. Consultation with staff-side and a range of staff from across the Trust will then take place to ensure that the action plan appropriately addresses the key areas for improvement.

Progress and results will be reported regularly through postmaster, Team Brief, the Intranet, etc., and, of course, in ULH News, so watch this space for more information.

## New cleaning equipment purchased

Additional cleaning equipment costing £100,000 has been purchased by United Lincolnshire Hospitals NHS Trust to ensure its hospitals stay spotless.

Items on order include: One ride on sweeper; a ride on scrubber; vacuum cleaners; carpet shampoo machines and four floor scrubbing machines for Grantham and District Hospital. Pilgrim Hospital, Boston will receive: One ride on burnisher; a ride on scrubber dryer; one carpet shampoo machine; six rotary floor machines; three wet/dry pick up machines; six vacuum cleaners and spring loaded mobile steps to enable staff to safely clean in high areas, change curtains, etc.

Rotary scrubber driers; wet suction machines; steam cleaners and a steam mop microfibre head for wall washing; rotawash machines for floor and carpet use; vacuum cleaners; scrubber drier machines for larger vinyl floor areas are being purchased for Lincoln County Hospital and County Hospital Louth.

Hotel Services Manager at Grantham and District Hospital, Ian Hayden, said: "The new ride-on machines will replace walk-behind machines and will help to maintain the cleanliness of the corridors and improve the task for Trust staff. All of this equipment is vital in ensuring that our hospitals are kept as clean as possible and, of course, cleanliness is extremely important in the battle against infections."

## New DEXA scanner

Bone density scans will be carried out faster and more effectively thanks to the purchase of new scanning equipment. The Axial DEXA (dual energy x-ray absorptiometry) scanner, which costs £114,000, measures bone density, usually at the spine and hip, and is useful in helping to diagnose osteoporosis (loss of bone strength) and other brittle bone diseases.

A DEXA scan works by using low energy x-rays which are sent from two different sources. Bone blocks these x-rays in varying degrees depending on bone density and the amount of blockage is measured by a detector. The detector is linked to a computer to calculate average density of the bone. By using two different x-ray sources, rather than just one, accuracy of measuring density is greatly improved.

General Manager for Diagnostics at United Lincolnshire Hospitals NHS Trust, Teresa Cope, said the new equipment is being purchased to replace the current system which is reaching the end of its useful life.

"The existing computer is unreliable and slow. Patient results are also only available as a hard copy because the system does not link up to our new

Picture Archiving and Communications system. The PACs system allows images, such as x-rays, to be stored electronically and easily accessed from anywhere within the Trust," she said.

"In addition, scan duration with the old system is approximately 3 times longer than it needs to be because patient results have to be printed before the next patient can be started. This new equipment will solve all of these problems, speeding up the process and enabling easier and quicker scanning, reporting and archiving of results."

The purchase of the new scanner, which will be based at Lincoln County Hospital and will be paid for using Capital Funds, comes at just the right time as it is apparent that the number of scans needed each year is growing rapidly. In the last decade the number of patients requiring DEXA scans has risen from almost 400 to almost 2,000.

The new system should also provide safer archiving of previous patient data. This promises to allow for follow up comparison, improved efficiency and reliability, as well as guaranteed continuance of the DEXA service in Lincolnshire.



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# Lincoln Minster Townswomen's Guild raise funds for oncology

Hospital staff at Lincoln County Hospital who care for cancer patients have received a generous donation from a group of local ladies.

The Lincoln Minster Townswomen's Guild raises money each year for a different charity and the Oncology Department at Lincoln was the very fortunate recipient for funds raised throughout 2007. £620 was raised in total and a presentation took place on 13 February at Bailgate Methodist Chapel.

Janet Allsworth, a Guild member, said they have known many people who have received wonderful care from the oncology team and felt that they would like to give something back to the hospital. "Each year we pick a charity to raise funds for and we felt that the hospital would benefit from our donation," she said. "We hold coffee mornings, tea parties and luncheons all year round in order to raise money.

The people we know who have been treated at the oncology department have always spoken of the kindness and expertise of the staff caring for them."

The Guild were keen to see the monies raised contribute to staff training in the department, to ensure that staff are continuously educated on new developments and techniques in cancer care. Janet explained: "We would like the money to be spent on staff training so

that other patients can receive the same level of care and so that all future staff will be as well trained as the ones we have dealt with."

One of the Guild's members, Mary Daulton, has had first hand experience of how skilled the staff are as her husband was treated for throat cancer. "The service provided was wonderful. People go to those wards feeling scared and unsure before receiving their treatment, but the staff at the Oncology Department at Lincoln could not be faulted," she said. "They were calm and reassuring with knowledge about the treatments at their fingertips."

Clinical Services Manager for Oncology and Haematology at United Lincolnshire Hospitals NHS Trust, Margaret Swaby said: "We are absolutely delighted with this incredibly generous donation from the Lincoln Minster Townswomen's Guild.

Staff training is, of course, an essential requirement to ensure patients receive high quality care and treatment and all Trust staff receive regular training updates in new techniques and practices. This is particularly relevant in the area of oncology, where new advances, often technological, are always being developed in the treatment for cancer, requiring new levels of skill and expertise."



■ (l-r) Margaret Hogarth, Chair and Margaret Graves, Treasurer

## NHS Retirement Fellowship: Boston Branch

Social activities, outings and gatherings with expert speakers and demonstrators are just some of the things on offer to NHS staff who are about to, or have already, retired.

The Boston Branch of the NHS Retirement Fellowship has been in existence for over 30 years and has a growing membership, which currently stands at 50 people. The Fellowship is made up of retired NHS staff, so the chances are that new members may well know someone who is already a member.

The group meet on the third Thursday of every month from 1.30pm to 3.30pm, usually at the Pilgrim Hospital Conference Centre. Membership is £7 per year and £1 payable each month that you attend. This covers admission, raffle tickets, tea and biscuits.

NHS staff you are about to retire or have recently retired would be more than welcome to come along to a meeting to find out more. Enquiries can be directed to Margaret Stanhope, the group's Membership Secretary, on 01205 365473.



■ Fellowship members at a recent meeting

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