EPR: The story so far
Hello and welcome to the April edition of our monthly staff, members and governors’ magazine.

I’d like to start by saying a huge well done to one of our physios, who helped save the life of a squash player who suffered a heart attack. You can read more about the heroics of children’s physio Wendy Levin on page 3.

We are really pleased that the electronic patient record system is improving the experience of staff in many departments across the trust. Turn to page 4 and 5 to read what staff had to say about using the new system.

We were absolutely delighted that campaigner Tommy Whitelaw visited the RFH and spoke so movingly of the experience of caring for his mother Joan, who had dementia. If you weren’t able to attend one of Tommy’s talks, you can read about what he had to say on page 7.

Please remember that if you would like me to visit your ward or department to speak to you and your colleagues, please email rf.communications@nhs.net and we can make the arrangements.

Caroline Clarke
Group chief executive

‘Hero’ physio saves heart attack victim’s life

A Royal Free London physiotherapist has been hailed a hero after her quick-thinking actions helped saved the life of keen squash player Julian Morgan.

Wendy Levin, a community-based children’s physiotherapist, rushed to the aid of the 63-year-old when she realised he was having a heart attack.

She had just finished a game of squash at her local club in Crouch End, when Wendy became aware that Julian was in trouble.

Wendy, with the help of a club first aider, then used the on-site defibrillator to try to restart Julian’s heart before London Ambulance Service paramedics arrived 15 minutes later.

After working to stabilise him for an hour, paramedics transferred Julian, first to the Whittington Hospital and then to the specialist Barts Heart Centre, part of Barts Health NHS Trust.

Wendy, who has worked at the RFL for more than 17 years, said: “I was sitting at the bar after a Friday night practice game when one of the bar staff said someone on the squash courts was having a seizure. “I work with children with severe learning disabilities and I am very familiar with seizures, so I went to see if I could help. As soon as I saw Julian I knew he was having a heart attack, not a seizure. He was going purple and did not have a pulse.”

Wendy said that her medical training took over and she started CPR immediately. “All I could think was that ‘I have got to get this guy going and get a heartbeat’,” she explained.

Julian, who is now well on the road to recovery, said that he feels ‘deeply, deeply grateful’ to Wendy for saving his life. “She is definitely a hero,” he said.

“63 years old with four adult children in their 20s and 30s and I’m just so very grateful to be there to accompany them through the next stages in their lives. Wendy’s swift intervention has made an immense difference, not only to me but to my family as well.”

Wendy added: “I think it’s so important for NHS staff to be trained up and know their CPR thoroughly, you never know when you are going to need it.”
New electronic patient record improving care at Royal Free London

Staff using the new electronic patient record (EPR) system have hailed the end of ‘mountains of patient notes’, which is freeing up clinicians’ time and improving patient care.

Doctors, nurses and other clinicians are now entering details straight to EPR, instead of spending time hunting for and trawling through patient records.

Information from devices such as blood pressure monitors is uploaded to the system automatically and if a patient’s observations are outside the normal range, staff are alerted.

EPR allows clinicians to access up-to-date information about patients, enabling them to deliver better care, improving efficiency and reducing the chance of an error being made. The system also uses patient data to create documents for clinical records and correspondence to GPs and patients.

The system went live at BH, CFH, Edgware Community Hospital, Finchley Memorial Hospital and the maternity department at the RFH in November 2018. It was implemented in just 11 months to enable the opening of the new digital CFH.

Dr Chris Streather, group chief medical officer and chief clinical information officer, said: “Digital innovation is a key priority here at the RFL and we are excited to be leading the way in harnessing technology to increase efficiency, reduce variations in care and improve patient outcomes.

“It has been thanks to the hard work of our staff that EPR has been a success.”

Christine Gracey, a pain management clinical nurse specialist at BH and CFH, said: “I love that there are no longer flaky pastry mountains of notes. We’ve made it to the 21st century. I’m pretty happy about how it’s enhanced my day-to-day work as it’s freeing up precious time.”

EPR also improves the patient experience as they no longer need to provide their details multiple times to be entered onto different systems.

With all information in one record, patients no longer face delays or inconvenience because diagnostic results or medication histories are inaccessible. Instead of paper records at the patient’s bedside, computers or laptops are used to view and input information directly. This record is available at hospital sites at any time.

Sarah Fowlkes, midwife in the ante-natal clinic at the RFH, said: “The notes are now easily accessible via EPR and only printed out if requested.

“Previously women had their hand-written and hand-held bundle of notes – this has been eradicated. It’s a lot easier to read a patient’s plan, which can include everything from observations to telephone conversations, and you no longer have the issue of trying to read other people’s hand-writing.

“Crucially if something doesn’t work as well as it previously did we can put in a change request,” she added.

Katie Trott, chief nursing information officer, said: “There are many ways in which EPR helps our staff deliver better care to patients. It improves patient safety by providing alerts for medication protocols and increases efficiency by freeing up clinicians’ time and reducing unnecessary variation in care.”

Jay Mehta, one of the chief medical information officers, said: “The move to EPR is an exciting innovation and I’m proud we’ve taken this important step on our journey to become the most digitally advanced trust in the NHS. I believe EPR will make a significant improvement to patient safety, convenience and staff efficiency.”

Sachin Prabhu, clinical director for anaesthetics, said: “This is a huge difference from before where we were writing down everything from heart rate to blood pressure. Imagine flying an aeroplane with 20 to 30 monitors and having to write it all down.

“I can log in from any computer and the information is there in real time. I can now confirm things instead of having to ask the same questions all over again. If the patient has any allergies to medication it flags it up. In theatre the equipment is integrated so we don’t have to write things down but can interpret the data.”

Philip Shea-Simonds, consultant rheumatologist, said: “We did head into it with a bit of trepidation. We had just moved into a completely new hospital and weeks later we had EPR so people were naturally hesitant.

“Where the trust got it right and listened was in significantly cutting down clinic schedules to allow time for us to see patients but also get to grips with EPR. What also worked was the combined learning and collaboration between disciplines. So it was doctors, nurses and AHPs all learning to use it together and I met lots of people I hadn’t done before. There was a shared desire to get it running and get it right and we had the time to do that.

“Discovering just what it was able to deliver from a functionality aspect was exciting. Being able to view patient notes remotely instead of only being able to do so if I was physically next to them means that I can be involved in patient care without having to be present.

“EPR also enables me to easily access forthcoming appointments and I can pull up scans from radiology straight away. It provides me with the short cuts I need to let me concentrate on patient care.”

Barnet Hospital anaesthesia team, who helped shape the new system.
At the RFL we strive to provide world class care to every single patient who walks through our doors. For the most part we do a very good job and while the quality of the care we provide is good, the same can’t always be said for other important areas. These include our ability to balance the books and consistently meet targets which mean our patients get timely care.

Over the coming year we will turn our focus to ensuring our finances and operational performance are as world class as the care we deliver.

Our money

Many of you will know that we have an annual turnover of just over £1 billion – one of the largest in the NHS. But how many of you know we have an underlying deficit – a big debt like an overdraft – of £90 million which we have to pay back to the government?

In 2019/20 we have to move closer to living within our means by closing the gap between the money we spend on the care we deliver and the funding we are given by our commissioners and NHS England.

What this means

In 2019/20 we, like many other trusts, are really tightening our belts. Divisions, departments and our wholly-owned subsidiaries such as property services, have been working hard to identify areas where we can become more efficient during this financial year, which started on 1 April.

Progress is being reviewed by a new trust financial recovery group (FRG) chaired by Peter Ridley, group chief finance and compliance officer.

We have decided to implement a number of actions to help us reduce our spending. There is more information about this on Freenet.

Let’s talk cancer

The RFL is one of the leading providers of cancer services to people in London and we’ve been learning from our patients about how we can improve their experience.

Focusing on how we can make each contact count, our let’s talk cancer campaign shares six simple and powerful ways we can each make a difference:

Introduce
We’ll introduce ourselves to you and ask you how you’d like to be addressed

Support
We’ll ask you what support you have. Did you know your family member or friend is welcome to join you during your appointment?

Involve
We’ll involve you and your companions in conversations about you.

Confirm
We’ll clearly communicate your diagnosis, care plan and future appointments with you. Please tell us if anything is unclear.

Ask
We’ll ask you what matters to you. Please tell us about your worries and fears.

Provide
We’ll provide you with a named contact should you need advice.

To get involved in the campaign or to find out more, visit Freenet.

‘You have the power to transform lives’ campaigner tells staff

Staff at the RFH were treated to an emotional talk by campaigner Tommy Whitelaw, who told them never to forget their patients were people – not just a person with dementia.

Tommy shared his experiences of being a full-time carer for five years for his mum Joan, who had vascular dementia and who passed away in 2012. Tommy shared with staff his and his mum’s devastating feelings of isolation and fear as the dementia progressed and people stopped dropping by or visiting for a cup of tea. But he also celebrated the work of the NHS. He told staff: “You are part of the most important, useful and beautiful profession.”

Tommy urged staff not to turn a blind eye to colleagues who were not providing care which they would expect for them or their families – explaining that ‘the standard we walk past each day is the standard we accept’ and told them they could all make a difference.

He left staff with a clear message: that they had the power to transform the lives of the people they care for and the colleagues they work beside.

By the end of the hour-long talk there was barely a dry eye in the house and staff were reminded just how important their support and kindness is to so many families.

Tommy concluded: “Celebrate each other, support each other, respect each other. You matter, be kind to you and then think of others."

Tommy gave four talks at the RFH over the day which took his total up to 897 – he has spoken in hospitals, schools and care homes. He has also travelled around the country listening and gathering people’s experiences of caring for people with dementia.
Two major EU research studies involve RFH patients

Patients at the RFH have been recruited to separate EU-wide research studies – one looking at the effectiveness of an anti-cancer drug therapy and the other a new HIV drug therapy.

The ‘A BRAVE’ study, which recruited its first UK patient at the RFH, will test whether a new drug, Avelumab, can stop a protein that camouflages cancer from the body’s immune system. The drug works against the protein, allowing the immune system to recognise tumour cells and attack them.

The trial is designed to target a rare type of breast cancer known as TNBC.

Speaking about her hopes for the research, principal investigator Dr Judy King said: “TNBC remains the most challenging breast cancer subtype to treat. Patients with residual disease present in the breast or lymph nodes after completing primary chemotherapy are at high risk of relapse.”

“The first positive trial of immunotherapy in metastatic TNBC was recently reported at the European Society for Medical Oncology and the A BRAVE study aims to build on this success.”

Elsewhere, the research team at the RFH’s Ian Charleson Day Centre has recruited the first EU patient into an HIV trial.

The WISARD study will examine the effectiveness of combined drug therapy for HIV positive patients who have a drug-resistant version of the virus.

Newer drug therapies such as Dolutegravir and Rilpivirine combined in one pill, may work to suppress HIV in this patient group.

New RFL intranet

The trust’s new intranet, Freenet 2, will be launched this summer, making it easier for staff to access information about the RFL and engage with each other.

The new site will include a vastly improved search function, remote and mobile access, the ability to personalise the information you receive as well as making it much easier for teams, services and projects to update their own pages.

If you’re responsible for a section of Freenet, the communications department will be training ‘content co-ordinators’ so you can learn how to build and edit pages. To register your interest please visit Freenet or email rf.communications@nhs.net.

First look inside our new decontamination unit

Chalkmill Drive decontamination unit will be the biggest and most advanced of its kind in the UK.

Opening in Enfield in June, the new unit is set to transform the way reusable surgical instruments are washed, disinfected and sterilised.

The state-of-the-art unit houses specialist equipment for sterilising instruments that cannot be exposed to water.

It will be able to decontaminate equipment safely and efficiently, offering a rapid turnaround service meaning our hospitals can have essential items of care equipment back in circulation quickly.

Mark Sibbons, general manager, said: “The work of the sterile services department is often unsung, but it’s essential. We ensure that every patient who is having a procedure is treated with equipment that has been decontaminated to the highest standard.”

Staff from our sterile services departments took a sneak peek inside and gave us their thoughts.

Elizabeeth Milan, sterile services department technician, said: “I’m looking forward to working with colleagues from our other units to deliver a vital service. The biggest difference for me will be the new and modern machines and environment which will assist us greatly in our work.”

Tracey Bryan-Bogle, sterile services department technician, added: “I found the new unit to be amazing and was completely blown away at the size. I am looking forward to working as one big team to share experiences, gain new skills and take part in further training.”

David Dodd, customer and production coordinator, said: “This is an exciting time for the trust. The unit is built to a size to which I have never seen before and with the modern machinery and equipment we will be able to provide a first class service to all our customers.”

Did you know?

• Over 80 members of staff will work in the unit
• The unit will be open 365 days a year
• Each year the unit will clean approximately 4 million instruments and 35,000 flexible endoscopes
• The unit has the ability to do over five times this amount and has the potential to bring in revenue by providing the service to other trusts and private enterprises

For more information please contact Joanne Piercy, decontamination project manager: joanne.piercy1@nhs.net
RFL staff are face of NHS campaign

RFH therapeutic radiographer Caitlin Doyle has become the face of the next phase of a campaign, ‘We are the NHS’, intended to aid recruitment.

Caitlin is one of a number of NHS staff involved in the campaign which has a hard-hitting message: The future of the NHS relies on its people, and their dedication in looking after our health.

A film crew spent half a day filming with Caitlin, finding out how she cares for patients during a normal day at work.

The campaign highlights how patient care is a collaboration between all kinds of NHS staff, including IT and digital professionals, support workers, allied health professionals, nurses, doctors and many more. It emphasises that everyone who works in the NHS has a role to play in supporting patients.

The campaign also illustrates the many stimulating and rewarding roles available across the NHS.

Caitlin said: “I think the best part of the job is knowing you are helping people.

“I sort of discovered it almost by accident. I was looking for something to do that was an allied health profession. I was always quite into physics so my friend suggested this role on the off chance. I looked into it and I thought it was really interesting how it worked. I got to use a little bit of my physics knowledge and to help people, so I thought it would be perfect.”

Helping patients kick the habit

Consultant respiratory physician Anant Patel is one of the RFL’s most ardent advocates for smoking cessation.

He says he has seen “first-hand the human misery, death and disability that tobacco addiction causes for both patients and their loved ones.”

He is keen that both staff and patients understand that tobacco addition is a treatable problem.

Anant said: “With some straightforward training and planning we can provide help to all of our tobacco-addicted patients with pharmacotherapy, better known as nicotine replacement therapy (NRT), and an appropriate referral for psychological help.

“I think we as a trust can get much better at asking patients about their smoking status by asking the question ‘How can we help you give up?’ instead of ‘Do you want to give up?’”

He wants to encourage more staff to have the confidence to prescribe NRT.

“At the moment I am supervising some of our junior doctors who are doing a QI project into optimising treatment for all of our in-patients at the RFH. They are collecting data on whether patients are asked about their smoking status, if they’re offered any pharmacotherapy and if they have been referred.”

“We need to start doing more to help our patients. We need to do a better job of educating our staff on the clinical benefits of treating tobacco addiction in terms of reducing morbidity and mortality, and our managers on how delivering this treatment makes extremely good financial sense in terms of reducing re-admissions.”

Free WiFi access is changing

The free public Hospedia WiFi changed on 28 March from “TheCloud” to “NHS WiFi”.

All staff and members of the public who currently use the public WiFi will need to use the new ‘NHS WiFi’ network to connect to the internet. To reconnect you simply need to use the same details you previously registered with.

The changes took place at the RFH (and surrounding buildings), BH, CFH, Tottenham Hale, ECC, Mary Rankin, Hadley Wood and Oak Lane.

New joint deputy group chief executives

The two most senior clinicians at the trust have been named joint deputy group chief executives.

Group chief nurse Deborah Sanders and group chief medical officer Dr Chris Streather have taken up the joint post while retaining their existing roles.

The decision follows the appointment of Caroline Clarke, the previous deputy, as RFL group chief executive.

Caroline said: “I’m delighted that Debbie and Chris, with more than 60 years of experience as clinicians between them, are going to help lead us in the next stage of our journey.

“We have an extremely talented set of executive leaders across our hospitals and group services, and together we are going to continue our work towards providing the best possible care for our patients.”

Deborah’s focus will be to develop and deliver the RFL people strategy and to help support sites in delivering key operational standards while Chris will oversee population health, commercial and strategic priorities.
Can you introduce yourself and tell us about your background?
I’m thrilled to have joined the RFL in January as the lead for the group corporate shared services.
I’ve enjoyed more than 20 years in managed and shared services, in industries as diverse as car rental, telecommunications and nuclear power.
I’ve previously worked with organisations including NHS Shared Business Services, designing and deploying finance and accounting, and IT services across more than 40 trusts.

Tell us about your role?
My role is new within the trust, and the result of putting the group strategy into action. My remit is to pull together a number of back-office support services into a shared services model for the group.
One example of what we are doing is the investment in the new robot or ‘robotic process automation’ – a new technology which is supporting our finance and HR teams to automate some tasks.

Can you describe an average day?
I commute from Birmingham so I spend a lot of time on the train. This might deter some, but I’ve done it for many years and I really appreciate the quiet time to catch-up on email, review committee papers and plan for the day ahead. I have the privilege of working with a wide variety of teams, so a typical day will be a mixture of meetings and team visits. I try to spend the day at one site at a time and I like to base myself at ECC for two or three days per week at least.

What do you most enjoy about your job?
Lots. The variety of work is so interesting I learn something new every day, there is such a broad scope.
Most of all it’s the people I meet and get to work with. I really appreciate working across so many teams, and harnessing our collective brainpower for a common objective is so stimulating. It’s my dream job.

What is the biggest challenge in your job?
I feel passionately about supporting patients and ensuring they have the best experience possible. Right now we have some challenging systems that don’t always work the way we and our colleagues need them to, and that’s a cause of frustration.

What can’t you live without?
My wonderful family and Formula 1.

Tell us something about you that very few people know?
I run a half-marathon every Saturday before breakfast, for fun.

Chief executives’ briefings
This is your opportunity to hear the latest news from around the trust and ask any questions you may have. Please see Freenet for the dates of upcoming chief executives’ briefings.

NHS pre-retirement webinar
NHS Shared Business Services has scheduled webinars to help employees and employers understand the process of retiring and claiming benefits from the NHS Pension Scheme and when to submit a retirement application. The next webinar is on 15 May, 6-7.30pm

RFL rounds
30 April, 1-2pm, Peter Samuel Hall, RFH
Lunch and refreshments will be available. For more information, please contact: rf.medicaleducation@nhs.net.

Values and behaviours videos – at the RFH
All staff are invited to watch the new values and behaviours videos, 14 May from 4-5pm, in the Peter Samuel Hall, RFH.
As part of our commitment to stamp out bullying and harassment, a series of videos depicting fictional storylines around bullying and harassment in the workplace have been produced. All the scenarios have been taken from staff survey data, so they are real and have happened.

First medicine for members event at the new CFH
30 April, 6-8pm, zone Q, CFH
The event, A Hospital for the Future, will be an opportunity to hear about the building project and the services offered at the hospital.
You will hear how new innovations such as interactive self-check-in kiosks are being used at CFH.
To book your place at this event, please contact rf.membership@nhs.net