

Keeping in Touch

Issue 15 - Spring 2014

“He’s a bloke!”

How does biker Brendan Reid fit into school nursing? - see page 11



Also inside this edition:

Update on sexual health services in Ipswich - page 3

Rapid response service wins 6Cs award - page 9

Welcome to our Spring edition

Looking back over the last 12 months, the Trust has made strong progress in meeting the vast majority of its quality, financial and performance targets.

We are proud to have developed (in collaboration with our commissioners) new high quality services which enable people to receive care closer to their own homes, retain their independence and, where clinically appropriate, avoid a hospital admission. As you'll read later, this commitment to quality was recognised by NHS England's Chief Nurse, who awarded the Trust the national 6Cs story of the month twice in the last six months, an achievement unmatched by any other Trust in the country. This prestigious accolade recognises services that are exemplars of the Chief Nurse's vision for delivering services that embed care, compassion, competence, communication, courage and commitment.

I am delighted to report that the Trust has been awarded the contract to provide integrated sexual health services in Peterborough from July 2014. As the existing provider of the community element of these services, we are looking forward to implementing our exciting proposals to integrate the hospital and community based elements and improve accessibility to these vital services.

Key to our published two year plan is expanding our specialist portfolio of services to offer the same excellent clinical and patient care in neighbouring areas as and when relevant procurements are launched across Norfolk, Suffolk, Essex, Lincolnshire and Bedfordshire in 2014/15.

We'll be hosting our staff excellence awards and AGM on Monday 29 September, 2.00 pm at Burgess Hall, St Ives (light refreshments from 1.15 pm). Do come along and help us celebrate just some of the innovative ways we are supporting people and improving their quality of life and recognise the fabulous care staff undertake 365 days a year.

In the meantime, I hope you enjoy reading this newsletter.

Matthew Winn
Chief Executive



To contact your local Patient Advice and Liaison Service, call:

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Telephone: 01480 355184
Mobile: 07507 195375
Email: ccs-tr.pals@nhs.net

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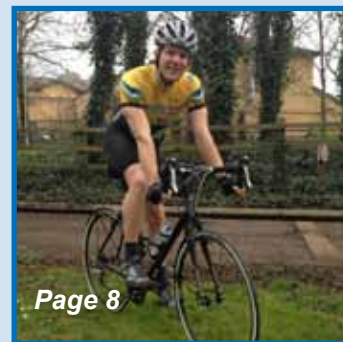
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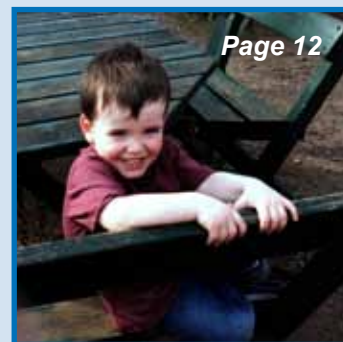
Website:
www.cambscommunityservices.nhs.uk

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Top of the table result for staff survey

One of our key performance indicators as an employer is the outcome of the annual NHS staff survey.

Matthew Winn, chief executive, Cambridgeshire Community Services NHS Trust said:

“The results of the Trust’s annual staff survey published by NHS England in February 2014 were overwhelmingly positive with staff rating the Trust as the most positive in the country when compared to other community trusts in five areas, including staff motivation and the prevalence of staff experiencing work related pressure.

“In addition, 25 of the 28 key findings scored ‘above average’ including satisfaction with the quality of patient care staff are able to deliver and recommending the Trust as a place to work or receive treatment.”

Commenting on the areas where staff experience had improved the most in

the last year, Mr Winn added: *“We have introduced a number of initiatives to support staff and this is reflected in the significant improvements seen in relation to staff job satisfaction and support provided by immediate managers.*

“These are fantastic accolades” he concluded “and completely reflect the excellent staff we employ, their commitment to providing high quality care to local residents and making the Trust a positive place to work.

“Whilst none of the 28 key findings were rated as ‘below average’, we will continue to focus on improving the working lives of our staff in a range of areas to ensure we attract and retain a high quality workforce, including in the three areas rated average: availability of hand washing facilities, percentage of staff receiving job-relevant training and development and the percentage of staff working extra hours.”

Additional messages include:

- None of the 28 key findings had deteriorated from our 2012 results and scores in seven of the key findings had improved.
- The Trust’s overall staff engagement score was ‘above average’ at 3.83. This indicator is scored on a scale of 1-5 with 3.71 the national average for community trusts.
- In response to last year’s results, the Trust developed an improvement plan which focused on eight of the key findings. An improvement was achieved in seven of the eight findings, with one of the findings staying the same.
- Our improvement plan has been reviewed and updated in response to the 2013 results as although our results are positive there is always room for improvement.

The full report can be found at:
<http://www.nhsstaffsurveys.com>

Board Dates for 2014

- 7 May - 09.30 - 12:30
Conference Room, City Care Centre, Thorpe Road,
Peterborough, PE3 6DB
- 4 June - 09.30 - 10.30
Main Meeting Room, The Meadows, St Ives, PE24 4LG
- 2 July - 09.30 - 12:30
Seminar Room 2, The Oak Tree Centre, 1 Oak Drive,
Huntingdon, Cambs, PE29 7HN
- 6 August - 09.30 - 10.30
Main Meeting Room, The Meadows, St Ives, PE24 4LG
- 3 September - 09.30 - 12:30
Co-Op Club, Stockingstone Road, Luton
Bedfordshire LU2 7DE
- 1 October - 09.30 - 10.30
Main Meeting Room, The Meadows, St Ives, PE24 4LG
- 5 November - 09.30 - 12:30
Conference Room, City Care Centre, Thorpe Road,
Peterborough, PE3 6DB
- 3 December - 09.30 - 10.30
Main Meeting Room, The Meadows, St Ives, PE24 4LG

Update on sexual health services in Ipswich

The Trust, which manages Suffolk sexual health services, has confirmed that a new sexual health clinic will open to patients in Ipswich in May.

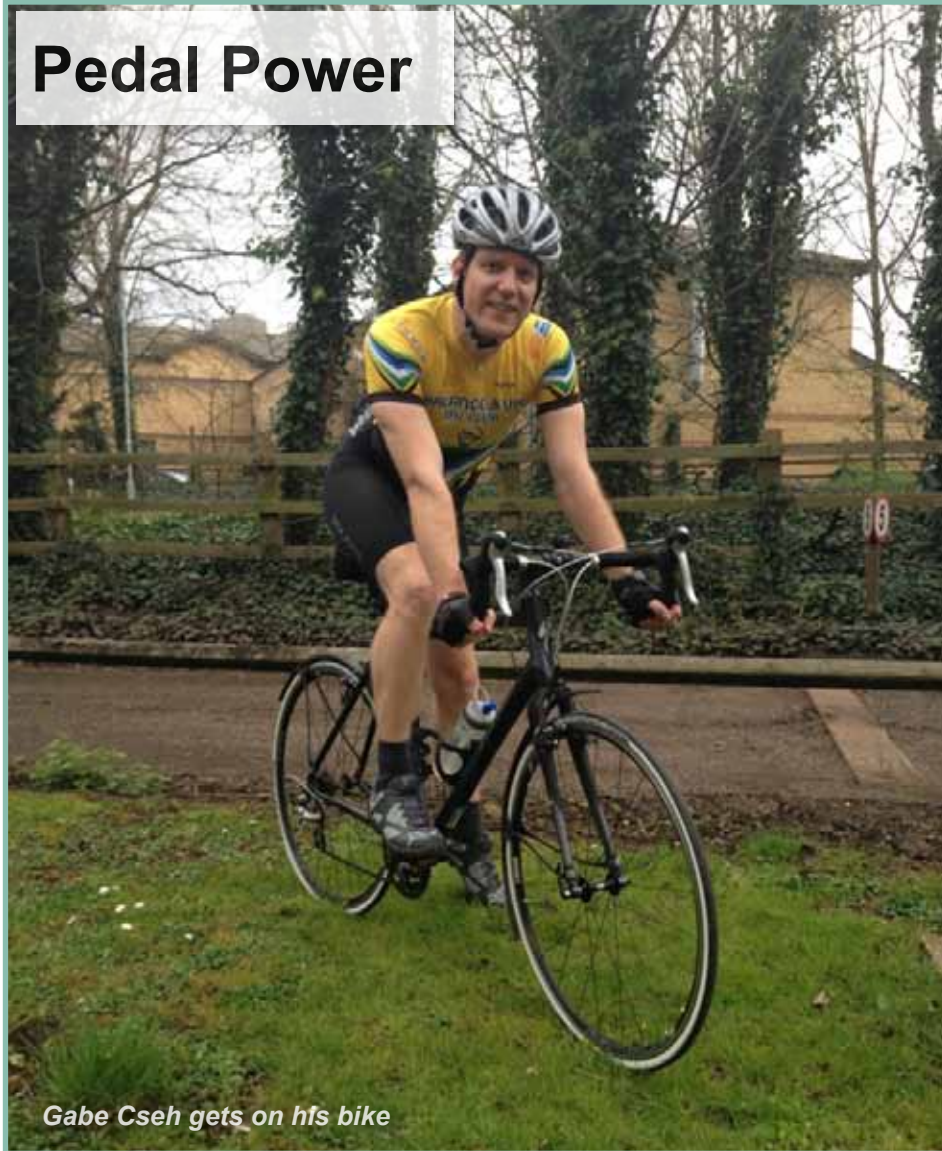
The Orwell clinic will be on the former Holywells School site, Lindberg Road and brings together the two existing clinics, located at Ipswich Hospital and Trotman Court. It means that patients will be able to access all aspects of sexual health, including contraception, HIV care and STI testing and treatment in a single location in Ipswich for the first time.

It follows interim arrangements that have been in place since October 2013, after the lease ended on the existing premises at Ipswich Hospital, to allow the hospital to cope with expected pressures over the winter period. The Trust has therefore been working with Suffolk County Council, who commission the service, to identify alternative accommodation to ensure that community sexual health services are sustainable.

Other clinics and services run by Suffolk sexual health services remain unaffected.

Patients should still contact the Suffolk sexual health central number for the Ipswich service on 0300 123 3650 so that they can be offered advice and be sign posted to the most appropriate service, or for more information about all services and clinics go to www.suffolksexualhealth.com.

Pedal Power



Gabe Cseh gets on his bike

Staff from Cambridgeshire Community Services NHS Trust swapped the car for active journeys as part of the workplace challenge and have been rewarded for their efforts.

Claire Lockwood from the community child health team came top of the female table in the national CO2 challenge, by logging walks and cycling on the free online tool. Her partner Gabe Cseh from finance beat the competition to finish third place in the men's table.

Claire won a Red Letter Day Orange Experience Gift Pack and Gabe took away £50 restaurant vouchers.

Claire's cycle to work takes around 45 minutes and is nine miles. She

said: *"I was cycling to work anyway so I thought I'd put it on the website, so it counted for something. It feels fantastic to win.*

"It makes all of those cold, wet and windy commutes on my bike worth it!"

Both Claire and Gabe have active lifestyles - running, walking and hitting the gym - and they share a competitive streak, grabbing the chance to go head to head with each other and their colleagues.

Gabe said: *"I signed up first and told Claire about it. I had fun. It makes you feel a lot happier and feel more energised through the day, which helps you to sleep better.*

"We even did the weekly shop on our bikes too, packing things into backpacks, but we had to make two trips because we couldn't carry as much."

The pair admitted that taking part in the winter months may have looked crazy to others and that grey, drizzly days took that extra push to get on the bike. Gabe said: "I fell off my bike on the ice and broke my thumb, but I got back on and carried on cycling."

The task was just one aspect of a wider eight week contest, the County Sports Partnership Network (CSPN) Workplace Challenge, encouraging staff to get active.

The free online activity log helped you to record the activity you have done, how long for and how intensely to find out:

- how many points you've earned (which roughly equates to calories burned)
- how much carbon dioxide you've saved (if you are travelling actively, by cycling, for example)
- track your weight (privately).

The more active an individual or organisation was, the more points earned and we all know that points make prizes!

The challenge may have ended but as the sun shines, both Gabe and Claire are happy to keep trading the car for the bike. Claire said: "It's the best thing for stress relief. People don't realise - it's nice to see what's going on around you, instead of being stuck in the car."

Gabe recommends an active lifestyle. He said: *"Almost everyone has a bike, you just need to dust it off and do it once. The first couple of weeks are tiring but then it becomes natural. It gets easier. Also, I've probably saved £30 per week on petrol, which is better spent on a nice meal you'll enjoy."*



Gabe with his partner Claire

New service joins up end of life care in Luton

End of life patients across Luton will be supported by a new linked up service, which was launched on Monday 27 January at Keech Hospice Care.

The My Care Co-ordination Team will maintain the central electronic register of patients who are towards the end of life. Patients will consent to go on the register that will have information about aspects of end of life care, including the patients' preferences and wishes.

This will mean that the health professionals caring for your loved ones, who are unfamiliar with their details can have quick access to information, which may help to provide more individualised care. The team will also provide the administration behind setting up complex care packages and support by working closely with hospital, community, hospice and social care colleagues.

Clare Hearnshaw, the Trust's Macmillan lead nurse for cancer and palliative care said: *"It is fantastic to see the team launched. End of life care is often delivered by many health and social care providers and sometimes it can*

seem confusing to patients and families, but now their care will be more co-ordinated, which will improve their experience as well as the communication between providers."



Clare Hearnshaw, presenting at the launch

In addition to the new administrative team, there has been extra investment in the rapid response palliative care support worker service meaning more patients will receive the help they need in their own homes, thereby improving patient and carer experience and potentially reducing unplanned emergency admissions.

This project has been developed in collaboration with Luton Clinical Commissioning Group, Luton and Dunstable University Hospital and Keech Hospice Care.

For advice or to request an information pack, telephone 0808 1807788. This is a freephone number if dialled from a landline and is available for support 24 hours a day.

'Share my Care' project improves care co-ordination in Cambridgeshire

An innovative project which enables a wide range of health professionals looking after patients in the last year of their life to share information 24/7, is improving the co-ordination of their care.

The 'Share my Care' project run by the Trust has developed a template that allows GPs, paramedics, community matrons, district nurses, Macmillan nurses and specialist services to see at a glance, what discussions have taken place with the patient and what care plans are in place.

This can include details about whether they wish to be resuscitated in an emergency, their preferred place of care, medications and other important information.

The project is part of a national Commissioning for Quality and Innovation (CQUIN) target which has been met by the Trust, and has been piloted in Cambridgeshire, Peterborough and Huntingdon.

Liz Webb, head of palliative care, said: *"The template enables different professionals involved in looking after people as they near the end of their lives to understand their choices and plans."*

Do you know your SPA numbers?

Use our single point of access (SPA) number to contact district nursing, community matron and palliative care teams in Luton.

If you live or work in Luton and would like to speak to any of the teams above, please call 0333 405 3000, then:

- **Press 1** - Patients
- **Press 2** - GP surgeries
- **Press 3** - East of England ambulance or paramedic personnel

Cambridgeshire Community Services NHS Trust

Single Point of Access (SPA)

SPA is a single point of access for community adult services, which has been introduced to streamline the referral process for GPs and provide a single point of contact for patients.

Tel: 0333 4053000

The phone line is open 24 hours a day, 7 days a week.
Calls charged at local rate.

Phase one of the Luton Adult Services Single Point of Access (SPA) has now been rolled out across Luton.

There is now just one phone number to refer to the following services:

- District Nursing
- Community Matrons
- Palliative Care

To access the dedicated line for GPs locally, just press 2 after the message.

If the service is busy please leave a message and you will be contacted if required.

Electronic referrals are also accepted using the following email address:
ccs-tr.lutonSPAreferrals@nhs.net

If the call is urgent for a visit on the day to avoid an admission your call will be passed to the Unplanned Care Team for assessment and agreement of next steps.

Rehabilitation Instructor joins team at Princess of Wales Hospital, Ely

An innovative new role has been developed by the MSK physiotherapy service to help patients complete their recovery during and after physiotherapy treatment.

Adam Peacock joined the Team, located at the Princess of Wales Hospital, Ely in January 2014 as a full time rehabilitation instructor. The aim is to help patients keep mobile and active to reduce the risk of them needing physiotherapy in the future. Adam is currently in the process of organising “Knee and Hip”, “Back” and “Swissball Conditioning” classes.

Adam said: *“I applied for the role as it is more hands on than my previous job and allows me to utilise more of my qualifications, experience and skills. I’ve only been in post a short space of time but it has already proven to be very rewarding and offers a great deal of satisfaction due to the variety of the work. It’s an exciting opportunity for me as it is a new post which offers the chance to devise and establish fresh approaches to treating and aiding people’s recovery/rehabilitation.”*

Another initiative that Adam is keen to get off the ground in the Ely area is a walking group “Walking for Health”, (jointly run with Cambridgeshire County Council) for patients, which will be run by volunteers. These groups may also have advantages for volunteers and patients – by forming social groups, and also to aid preventative physio and physio avoidance in the future.

Adam is currently looking for volunteers to do “walk leader training” to support the “Walking for Health” Group, volunteers would need to be physically active, of any age, and would be given first aid training.

Adam previously worked at St Georges Medical Centre as a health trainer and he still works as a retained firefighter for Cambridgeshire Fire and Rescue Service.

Kevin Boyle, senior physiotherapist said: *‘Adam will play a key role in making sure more patients are managed in the community by the third sector (leisure industry; voluntary sector etc) and help empower sustainable long term self-management amongst patients, thereby reducing the overall demand for MSK physiotherapy. Part of his role will be treating patients within the hospital setting, and the rest will be doing outreach work into the community’*

Case Study

Marion Cundall, 78, from Wilburton still needs help moving around after a serious spine and hip operation.

Marion said: *“Before the operation a few weeks ago, I couldn’t even raise my right leg, I am still scared to do things, but mainly because it still hurts where all the screws are which were fixed to stabilise my spine. I used to have dreadful pain from my buttocks that extended right down to my toes.*

“I have had surgery on my spine and hip and I still do get some pain from the knee downwards to my ankle. To start with it felt as though I had a band around my knee and ankle – this is gradually loosening and the pain is less due to the exercises. I do still sometimes get pains in my legs, but things are getting better.

“I am so grateful for the help I am now getting from the physiotherapy team and Adam. I couldn’t have done this before, in fact I couldn’t even bear the weight of a sheet on my knee just a few weeks ago.

“The exercises that I am doing with Adam are really helping to ease the pain and making it easier for me to do normal activities like sitting down and getting out of bed.

“Adam is hoping that after about six to eight weeks of following this treatment plan I should be able to use my legs to stand up and get up out of a chair without having to use my arms to help me.”



Adam Peacock shows Marion Cundall one of the exercises that will help here with her mobility.

We will be hoping to follow Marion’s progress over the next few weeks, watch out for an update in our next edition.

Helping patients put their best foot forward

Luton physiotherapist Annelies Brouwer has designed a simple tool to help stroke patients.

The Brouwer strap consists of two loops and a sturdy handle that can be adjusted to suit the heights of the patient and therapist. One loop of the strap attaches around the patients heel, secured with Velcro. The other loop is attached around the ball of the foot. The therapist, standing slightly behind the patient, uses the handle to control the movement of the leg to enable the normal rhythm of walking.

Annelies is based at Moorland Gardens Care Home in Luton and has been working with stroke patients for 17 years. She said: *"The strap doesn't do anything new; it's just a more pleasant way to motivate and encourage patients. Patients*

tell me that they enjoy the rehabilitation more. It could also help prevent back problems in therapists."

Having the strap patented and mass produced was explored but not pursued as this process is expensive, which would reflect in the price of the strap, making it inaccessible to those who need it.

However, Annelies still wanted to share her design so wrote an article, which was published in Synapse - the journal of the Association of Chartered Physios in Neurology (ACPIN).

Annelies said: *"I wanted to show that it's ok to rethink routine practices to improve your practice. I've shared my design with people so that they can create their own if they feel it's a good idea. It's great to see The Brouwer strap in print."*



The Brouwer strap - The ACPIN Executive Committee praised the article by Annelies as one of the best submitted to Synapse last year.

Bridging the gap between podiatry and MSK Physiotherapy in the Trust

New recruit Nicola Wilson will work for both teams as an extended scope podiatrist (ESP). She will be supporting patients with biomechanical podiatry conditions, which means they find it difficult to move their feet as a result of muscle and bone related problems.

Nicola will be based at the OakTree Centre, in Huntingdon, but she will also be holding clinics in Peterborough.

Once these clinics are established there are plans for them to expand across the rest of Cambridgeshire.

Sara Hill, podiatry business manager said: *"Having Nicola working across both Podiatry and MSK services is a real*

asset to the teams and our patients. We have the potential to improve health outcomes while reducing waiting periods and inappropriate referrals for all our biomechanic and surgery patients.

"It will pave the way for full integration of our services in time and shows a dedicated collaboration between Sarah Saul, MSK business manager, and myself to support this approach."

Referrals are mainly via the podiatry and physiotherapy teams, but Nicola will also be accepting referrals via Choose and Book, GPs and consultants.

Nicola previously worked for 13 years as an MSK specialist at Buckinghamshire Health Care Trust.



Nicola Wilson

Cutting the Sugar - what is the real message?

Dietitians and nutritionists from the Trust have responded to patient and public concerns raised about the recent WHO recommendation on halving your daily intake of sugar.

Almost all recent articles have failed to highlight that the new recommendation is to reduce “free sugars” only, so our experts share what it really means for you.

The vast majority of free sugar will be table sugar (sucrose) and this is added to a great many processed foods.

“Free sugars are all sugar (granular and liquid) added to foods by the manufacturer, cook, or consumer, plus sugars naturally present in honey, syrups, and fruit juices.”

For the consumer it is difficult to assess their free sugar intake, as our food labelling does not differentiate between free sugars and those naturally occurring in foods such as milk, whole fruit and vegetables or grains that do not count towards the free sugar.

From the ingredients for digestive biscuits (see opposite) we can tell that there are two sources of free sugar, the sugar and the partially inverted sugar syrup.

There are three sources of naturally occurring sugar (wheat flour, wholemeal and cultured skimmed milk). These natural sources contribute less than two grams of the total shown in the ‘of which sugars’ column opposite. The rest (approx. 15 grams) comes from free sugar sources. Two biscuits weighing 30 grams would provide 4.7grams or just over a teaspoon of free sugar.

Apples do not contribute to free sugar.

However, if 100g of apple was juiced, it would contain 19 grams (just under four teaspoons) of free sugar. Juicing breaks down the outer layer of sugar cells allowing it to be absorbed into the body more quickly.

Label reading is time consuming and frustrating but making sensible changes can reduce your intake:

- Don’t add sugar to foods or drinks as you make or consume them.
- Fruit juices and smoothies should be limited to no more than 200ml per day. A 400ml smoothie is the equivalent of eating eight oranges.

Fruit juice is not part of your five a day.

- Avoid sugar sweetened drinks of any sort, have water or milk as an alternative, or if you wish to consume sweet drinks have no-added sugar squashes or diet drinks.
- Swap your cereal to a minimally processed cereal such as porridge (though check the labels of instant porridge mixes) or the cereals that contain less than 10g per 100g ‘of which sugars’ on the relevant food label.
- If you like sweeter cereals add fresh or dried fruit (without sugar coating) or fruit cooked without sugar.
- Look for breads with less than 5g per 100g sugars.
- Use natural yoghurt and add your own fruit – which could be fresh, frozen or cooked without sugar.
- Consider using a reduced sugar jam, but also limit the portion of that jam.
- If you need to eat snacks, they should be foods like milk, bread, fruit or low sugar breakfast cereal.
- Foods like biscuits, cake, chocolate, sweets and ice-cream are treats to be eaten occasionally and in small portions.

With all dietary changes, it can take time to adapt to the change of taste. Six to eight weeks of following a reduced sugar intake will adapt you to the lower level of sweetness. Dietary balance is still important and excess calories will result in weight gain. If you wish to see a dietitian for advice, you can be referred by your GP practice.

Apple:

Ingredients: Apple (100%)

Typical Values	per 100g
Energy	1975k
Energy	95kcal
Protein	0.0g
Carbohydrate	25.0g
of which sugars	19.0g
Fat	0.0g
of which saturates	0.0g
Fibre	4.0g
Sodium	0.02g

Digestive Biscuits:

Ingredients: Wheat Flour (54%), Vegetable Oil, Wholemeal (16%), Sugar, Cultured Skimmed Milk, Partially Inverted Sugar Syrup, Raising Agents (Sodium Bicarbonate, Tartaric Acid, Malic Acid), Salt.

Typical Values	per 100g
Energy	1975k
Energy	470kcal
Protein	7.1g
Carbohydrate	62.8g
of which sugars	16.6g
Fat	21.3g
of which saturates	10.1g
Fibre	3.6g
Sodium	0.5g



Community rapid response service pilot wins NHS England's monthly 6Cs Live! award

A new pilot service helping unwell older people in Wisbech and Ely get the urgent support they need to be cared for at home when they need it has won a national award.

The community rapid response scheme run by Cambridgeshire Community Services NHS Trust has beaten off fierce competition to scoop NHS England's 6Cs Live! March Story of the Month.

The service was chosen after the care given to an Ely couple who have been married for more than seventy years, and are both 95 years old, have been able to stay together at home. In this case the couple were supported by Lucy Stewart, community matron.

The Trust is the only organisation to have won the monthly award twice, having previously been recognised for its children's community nursing service.

The year long community rapid response scheme is for patients registered with GP practices in the Ely area and Wisbech. GPs, paramedics and other medical professionals can contact a senior nurse

who will arrange for the most appropriate professional from the multi-disciplinary service to visit their patient at home. They will then assess them to determine the type of care and support they need to recover – either at home or a short stay in a community hospital.

The multi-disciplinary service includes nurses, occupational therapists, physiotherapists social care managers, a consultant geriatrician, pharmacists, multi-skilled healthcare assistants and others.

The service provides same day assessment for people in crisis and works as part of the wider community services provided by the Trust, referring on within seven days once the patient has stabilised.

Mandy Renton, chief nurse, CCS NHS Trust, said: *"The patient has fed back that nothing is too much trouble for Lucy. She takes the time to listen and explains everything.*

"The service was launched in November 2013. Data from November shows 156 acute hospital admissions avoided out of a total of 347 referrals. A staggering

45% of referrals were enabled to stay at home by the rapid response service where otherwise they would have been admitted to acute care."

Mike Passfield, head of nursing (Unplanned Care), CCS NHS Trust, said: *"Although the 6Cs is a nursing and midwifery model the rapid response service, including our physiotherapy, occupational therapy and pharmacist members have actively adopted the model and are committed to improve the quality and the experience of the patients, showing that the 6Cs values and behaviours can be practised by all clinicians to ensure safe care is delivered to patients with respect and dignity."*

Sam Sherrington, head of nursing and midwifery strategy at NHS England, said: *"This heart-warming story shows an integrated team delivering the values and behaviours of compassion, especially when patients and families are anxious, vulnerable, and need our care and compassion the most. Respect and the promotion of dignity are at the centre of the care they need and which Lucy and her team so clearly provide."*



Christine Cranfield, 70, from Soham, used to be an active gardener and keen crafter who loved cooking and walking her dog.

But that all changed on 22 April 2013, as she was admitted to Addenbrooke's Hospital after suffering a stroke, which affected both her speech and movement on her right hand side. Christine had no recollection of the stroke happening so it was her husband Ken who dialled 999.

Ken said: *"The response to my call was outstanding. A first responder from Soham was in the house before I even knew he was there. He was shortly followed by two paramedics, two ambulance staff and two friends from church."*

"The paramedic knelt in front of Christine and explained that she had had a stroke. He was very reassuring and absolutely wonderful. We were in total shock but they were there so quickly and we had great faith in them."

Following a four week stay at Addenbrooke's Hospital, Christine was discharged to Welney Ward at the Princess of Wales Hospital, Ely, on 22 May 2013. The community rehabilitation ward, run by Cambridgeshire Community Services NHS Trust, provides a community inpatient service, which avoids unnecessary admissions to and supports facilitated transfer from acute hospitals.

On admission, the multi disciplinary team assess the patient, identify treatment goals and agree a provisional length of stay. These goals are then reviewed and progress charted on a weekly basis.

Physio treatment on the ward focused on Christine's transfers (e.g. from the chair into bed) and progressed to walking as she became stronger, including working in the therapy gym.

Kayleigh Golding, neuro physiotherapist said: *"The neuro rehab community team were able to commence their assessment and treatment with Christine while she was on Welney Ward, to ensure high quality specialist treatment and a smooth transition of care on discharge home."*

"On discharge from Welney Ward Christine continued her rehabilitation, initially on a one to one basis. She was very engaging with therapy and achieved her physio goals."

Christine was discharged on 26 June 2013 once she was able to walk on her own, with support from reablement and the East Cambs neuro community therapy team, receiving both neuro occupational therapy and neuro physiotherapy.

As she progressed, Christine attended the neuro rehabilitation exercise group. This boost helped to reach her main goal - to be able to walk with the aid of stick, before her 70th birthday in July 2013.

Christine's achievements didn't stop there, her amazing progress helped her to manage steps, all transfers (bed, chair, toilet, bath and car), being able to wash and dress herself, and working on increasing the movement and managing the muscle tone in her right arm.

Sara Cunnington, neuro occupational therapist said: *"Christine is a highly motivated individual who has worked hard to regain her independence and worked on improving the movement in her arm. I initially provided equipment at home including a commode, grab rails and bath lift to enable Christine to manage independent transfers such as toileting and showering, while also focusing on functional rehabilitation. We then continued to work on her upper limb rehabilitation using arm exercises, which started on the ward."*

"The stroke has changed my life but I am making good progress and I can now even feed the dog and let him in and out of the house which is great exercise four times and day!"

"It's important that the patient sets their own specific goals and we helped educate Christine and her husband Ken on the symptoms of a stroke and how they needed to adapt to this significant life change."

Like many patients Christine didn't feel that she had made much progress until she looked back and talked about her experience. This has made her realise she had come much further than she first thought.

She said: *"I had no recollection of the stroke taking place but the care I received at the hospital and the subsequent carer's visits at home have been brilliant."*

"I was quite upset and very tearful on the ward and didn't want to be a nuisance to anyone. The nurse told me nothing would be too much trouble for them and she was right, nothing was for the whole six weeks I was there."

"All of the staff are caring and understanding and do not put any pressure on you. They are firm when it comes to my treatment but you can laugh and joke with them making light of what has actually happened."

As well as the support from the hospital, Ken, Christine's husband is the one person who can see the huge progress she is making. He said: *"Being the closest person to Christine makes it more difficult to notice the day-to-day improvements but when I look at this over a longer period of time, I can point out to Christine the things she couldn't do last week but can this week."*

"All of the staff at the hospital have been wonderful, and should be praised for the work they do. Having gone through this experience has given us a different perspective on life."

Christine has recently reached all of the goals she set herself with the help of the East Cambs neuro community therapy team and continues to improve at home.

Stroke Helpline and Information Service

Whether you're a stroke survivor yourself, a member of your family or a friend has had a stroke, you work with people affected by stroke or you want to know how to prevent a stroke, contact the Stroke Association on 0300 3033 100 or have a look at their website: www.stroke.org.uk



Sara Cunnington (left) and Kayleigh Golding (right)

“You’re a bloke!”

Dressed in biker gear, Brendan Reid walks into reception at a local school and says “Hello, I’m your school nurse.”

You’d be forgiven for doing a double take, as Brendan is only one of eight male school nurses in the country. Brendan is based at Chesterton Medical Centre in Cambridge, working with three colleagues to cover all of the primary and secondary schools in the area.

With 14 years experience in child and adolescent mental health services (CAMHS) working on wards and in the community, Brendan is used to being the only man in the team. He said: *“I guess my experience has been that wherever I’ve tended to work, I’ve always been in the minority, I was the only bloke working in the community team in Huntingdon.”*

“Within CAMHS it’s just how it is and is not necessarily remarked upon but coming into a service where it is seemingly so much more unique, the main comment I get is ‘you’re a bloke.’ The amount of comments, putting aside the obvious observation, is probably more that it speaks to the lack of male role models that exist in kids lives outside the home.”

Seeking a challenge, Brendan saw that Cambridgeshire Community Services NHS Trust specified registered mental nurses in the job specification, which is unusual. Four months later, Brendan has settled into supporting schools and the physical, emotional and mental wellbeing of their students.

The daily trials of youngsters differ with age, so no two days are the same. In primary schools, Brendan provides reassurance to parent worries about healthy living and sleep patterns, whereas secondary school students have concerns about exams and friendships.

He said: *“In secondary schools I take direct referrals with the needs and worries that young people might have from sex, weight issues and smoking, all the way up to self harm and not wanting to live.”*

“The schools nurses to some degree tend to be the first people from a health perspective that the kids might come and speak to and perhaps at times might even be the first people they come and speak to about it full stop. As much as we work in schools, we are separate to them; we’re a confidential, discreet service.”

Contrasting this role with those he’s done in the past, Brendan finds the simple pleasures are the greatest gift. He said: *“The best bit is going in and seeing kids who are generally happy with ordinary worries, certainly in primary schools, in spite of the context of their lives.”*



**Brendan Reid
School Nurse**

Tiny steps for tiny tots

Our first toddler trail took place at Milton Country Park on Wednesday 2 April. It was a huge success with over thirty children along with their parents, child minders and friends taking part.

The "Toddler Trail" has been set up by newly qualified health visitors based in Cambourne and Longstanton to encourage parents and their pre-school aged children to make the most of the spring weather and take more exercise.

The initiative is part of the health visitors' "Building Community Capacity" project, where newly qualified health visitors are encouraged to develop projects that contribute to the wellbeing of the communities they serve.

As part of the project, families were asked about what they felt was lacking in their local community, leading to the suggestion of an outdoor activity.

Helen Muncey, one of the newly qualified health visitors, said: *"It'd be great to see as many parents, childminders, guardians and children as possible coming along to Milton Country Park to enjoy the outdoors, socialise and get some great exercise."*

"We aim to support this weekly walk for the first few months, then we will hand the project over for the community to run itself from June."

The trail will take place every Wednesday from 10.30am to 11.30am with different activities, including an Easter themed event which took place on Wednesday 16 April.

Further information about the Toddler Trails is available on the website: <http://www.miltoncountrypark.org/> activities.



Mums and tots get ready for the start of the "Toddler Trail"

Looking after your pearly whites

Youngsters in Cambridgeshire learn how to keep their smiles brilliant white with the help of "Magic" the dragon.

The cuddly toy is just one of the props used by Cambridgeshire Community Services NHS Trust's oral hygiene educator Sara Jackson.

Her colleague Sylvia Low, also an oral hygiene educator, opts for a kangaroo called "Roo" to teach children how to look after their teeth.

Sara said: "I let the children take turns to brush Magic's teeth depending on the class size, then I tell them a story about a boy who doesn't like his toothbrush. The class seem to enjoy it and it makes it fun."

"The reason we do this is because tooth decay and gum disease are common but also preventable."

The session includes top tips on diet and the importance of regular visits to your dentist.

Sara said: "We're trying to encourage people to drink water instead of fizzy drinks. If you have to have something sweet, limit fizzy drinks/fruit juice and sweet food to meal times, as food acts as a buffer."

At the end of the session, each child gets a sticker and a letter from the tooth fairy to take home to remind them of what they've learned.

Sara and Sylvia are based at Brookfields and offer the free service across Cambridgeshire.

Playgroups, mums and tots groups, Special need groups primary and secondary schools have been among the target audiences for the pair for 10 years. They also work with a wide range of carers, to enable them to assist with toothbrushing on a daily basis.

Oral hygiene educator Sara Jackson teaches Jack how to clean teeth at the Burwell early learner group.



A heartfelt message

Ask anyone in clinical roles in the health service why they do their job and they will undoubtedly say, because of my patients.

Our nurses support people at a time in their life when things haven't gone the way they were expected to. Sometimes it's hard to know and is certainly something not expected, how much of an impact you have on the lives of those you treat.

Two of our nurses certainly made an impression, inspiring patients to put pen to paper to share their gratitude.

The first is Pete Almond, aka Pierre le Pan, who wrote "Yes I've got Parkinson's (but it ain't got me)". Diagnosed in 2005, the book shares his experiences, through symptoms, medication and support he did (or didn't) receive.

In his acknowledgements he wrote: "Ruth Shaw – my friend, colleague and Parkinson's

specialist nurse, a lady that I have great respect for, a truly professional nurse who is dedicated to improve the lives of us, her patients, which she does with fiery determination, compassionate kindness and with humour too!"

Ruth is part of the Trust's intermediate care team in Luton. She said: "I suppose bemused was my first reaction, as I was only doing my job"

The second is Terence O'Mahoney, who wrote the poem, 'Attention! Stand by your beds' about Luton community matron Sue Phillips. Sue said: "*Terry wrote the poem and put it in a Xmas card to me. He told me he was trying to write a poem about me but was having trouble getting it to rhyme. When I opened up the card and read it, I felt that it was, dare I say, much better than a box of chocolates, as it was a carefully considered and hopefully heartfelt appreciation.*"

Attention! Stand By Your Beds!! By Terence O'Mahoney

Soopee is a spritely little elf
Who regularly comes to check my health
She comes loaded down (like the Royal Marines!)
With prods and probes and electronic machines.

She often seems to be somewhat bemused
And perhaps not always quite amused
By my off-the-clock diurnal rhythms
And my ironic puns, jokes and witticisms.

I think she sees me as a "hopeless case"
Not quite in sync with the human race
And, perhaps, an incurable pessimist.
For the world of me I can't see why,
I am after all positive I am going to die!

Whereas she must be a hopeless optimist!
Forever dealing with incurable cases
With their ailing souls and dying faces.
But she soldiers on and once in a while
She even manages to make me smile!!

She is patient and kind, but firm – even bossy-ish
As befits officers in a national elf service!
But, really, Soopee, you don't fool me
At heart, I believe, you're a big softie!

And while the going ahead may yet get rough
I'll settle for you – you've got the right stuff
And if the Elf Service ever awards medals
I'll recommend you for a Matrons Cross – with petals!

* Le Pan, P, 2013, Yes I've got Parkinson's (but it ain't got me) CreateSpace Independent Publishing Platform

Charity looks forward to a clearer future

Furniture donated by Cambridgeshire Community Services NHS Trust will help to realise a charity's dream to provide a permanent vision centre in Africa.

Mission for Vision is an innovative charity committed to keeping those living in the deprived areas of the developing world, seeing clearly.

Ian Squire from Mission for Vision hopes to have the centre, the first of its kind in the country, established by the latter part of this year. He said: "*The DR Congo has very little in the way of optometry services and we're now making plans to set up permanent vision centres in the country beginning in Kinshasa. The beds and*

furniture donated by the Trust are a fantastic contribution towards achieving these plans."

Beds, bookshelves, chairs, wardrobes and lockers were packed up ready for the next phase of the project. Matthew Winn, chief executive, CCS NHS Trust said: "*Having recently refurbished some of our inpatient facilities, we are delighted to donate this surplus equipment to help Mission for Vision establish longer*



Peterborough GPs urged to think “Firm First”

A successful scheme to help keep Peterborough patients out of hospital is planning its next phase.

The Firm First programme allows GPs, local hospitals or social care to refer unwell patients to the Firm First team, to receive support in their own homes and arrangements are being put in place to have GP support in the community on five days per week.

Previously, the GP cover had been centred on patients needing care in the Intermediate Care Unit, based at the City Care Centre, but with this development, the plan is to help more patients in their own homes.

Support can include short term nursing and assistance or visits from physiotherapists and occupational therapists, while patients too unwell to be cared for at home can stay for a short while in a local nursing or residential home or a bed in the Intermediate Care Services Unit at the City Care Centre.

Lead GP for Firm First, Dr Gillie Evans, said: “Many elderly people

would prefer to be treated at home or outside of a hospital and Firm First provides the services and support to make this possible. Over the original six month pilot, Firm First prevented 194 A&E admissions, which is a not only a great achievement, but a significant saving of over half a million pounds.”

Christine Cooper, Peterborough’s community nursing services service manager at Cambridgeshire Community Services NHS Trust, said: *“We’re working closely with GPs and other local healthcare providers to ask them to “Think Firm First” when caring for older people with a condition that may require a hospital stay and soon we will be able to support a patient’s own GP with a Firm First GP in the community.*

“Close working between GPs, the hospitals and our community services is key to ensuring that we provide the best care for patients in the best environment for their needs, whether that is at home, in a nursing home or at the Intermediate Care Unit or, if appropriate, in hospital.”

New monitors for sick children thanks to Rotary Club donation

Members of the Rotary Club of Kimbolton Castle presented Holly Ward children’s unit with a cheque for £6,316 for four heart rate and oxygen monitors.

The monitors allow a child’s heart rate and oxygen levels to be measured in their own home, preventing regular visits or stays in hospital, as their health can be monitored in the community.

Rotarian Tony Moss, of the Rotary Club of Kimbolton Castle, acts as a liaison between the club and ‘dreamdrops’ and said: “These funds have been raised over a number of years through various fundraising events and we’re very pleased to be able to support ‘dreamdrops’ in this way. We hope these monitors will make a real difference to the children and families that use them.”



Christine Luckham, Holly Ward manager (right) and Siobhan Weaver, Lead Nurse Children’s Continuing Care (centre) receive a cheque for £6,316 from the Rotary Club.

term facilities for consultations, spectacle glazing and training in Africa.

“I was impressed with the Charity’s sustainable approach, which includes equipping individuals from the rural communities with the ability to carry out basic but effective eye care services. Their task is immense and the Trust is happy to support the charity in this small way. We wish them luck with their endeavours.”

Mission for Vision has optometrists and dispensing opticians who volunteer their skills, time and money to improve the quality of life for others. In 2013, the charity spent a week in the DR Congo dispensing thousands of pairs of glasses, sunglasses to protect against UV and delay the onset of cataracts, referring people for cataract and glaucoma related issues and funding operations.

You can help too by digging out and collecting up and pairs of glasses you

have lying around that you no longer need. Please send them to Mission for Vision, 11 Station Approach, Shepperton, Middlesex TW17 8AR. Collections of old spectacles will be taken on missions and handed directly to the people the Charity helps.

Alternatively, just £15 would provide someone with a life transforming cataract operation. Donations can be made at: <http://www.missionforvision.com>.



If you need medical help fast, but it is not life threatening – call



What is ?

If you need medical help fast but it's not a life-threatening situation, you can now call the new NHS 111 number. When you call 111, a trained adviser will ask you questions to find out what's wrong, give you medical advice and direct you to someone who can help you, like an out-of-hour doctor or a community nurse.

If the adviser thinks your condition is more serious, they will direct you to hospital or send an ambulance. If you don't speak English, tell the adviser what language you want to speak and they will get you an interpreter. You can call 111 any time of the day. The call is free, from landlines and mobiles.

When do I use it?

You should only call 999 in an emergency – for example, when someone's life is at risk or someone is seriously injured or critically ill.

Call 111 if you need medical help fast, but it's not life-threatening – for example, if you:

- think you need to go to hospital
- don't know who to call for medical help
- don't have a GP to call
- need medical advice or reassurance about what to do next

For health needs that are not urgent, you should call your GP.

If a health professional has given you a number to call for a particular condition, you should continue to use that number.

Who can use it?

The NHS 111 number is currently only available in certain areas of England.

If you're outside of these areas, you should call NHS Direct on 0845 4647.



**when it's less
urgent than 999**

More information

For more information on where the NHS 111 service is available or to get this leaflet in other languages, visit www.nhs.uk/111