

# Keeping in Touch

Issue 16 - Autumn 2014

## Staff Awards - who were our winners and runners up?

pages 18/19



### Also inside this edition:

**Mikey Whitehead  
recalls the  
accident that changed  
his life - page 5**



**A sweet anniversary  
celebration - page 12**



**Spotlight on Health  
Visiting services  
- page 7**



## Welcome to our Autumn edition

It's a busy time in the Trust and I am delighted to share here just some of the exciting work underway including the welcome recognition that our services are receiving at a national level and the excellence recognised at our own Annual Staff Awards held in September. Read more later on this well deserved acknowledgement of the important role of community services.

We have recently won a number of multi-million contracts including the provision of drug services in Luton and integrated contraception and sexual health services in Cambridgeshire and Peterborough. As a result, we welcomed staff from South Essex Partnership NHS Trust, Cambridge University Hospitals NHS Foundation Trust and Peterborough & Stamford Hospitals NHS Foundation Trust to CCS and we look forward to delivering these important services to our local communities. We are involved in a number of additional procurements and await the outcome of these.

Preparations are now well underway across the health and social care systems locally to manage the anticipated demand on services over the winter period. We will play a key role in the coming months to support people in their own home and, with partners, ensure we make the best use of NHS resources during this busy time.

I hope you enjoy reading this newsletter.

Best wishes  
Matthew Winn  
Chief Executive



### Board Dates for 2014

5 November - 09.30 - 12:30 - Conference Room, City Care Centre, Thorpe Road, Peterborough, PE3 6DB

3 December - 09.30 - 12.30 - Flexi Rooms, Corn Exchange, The Pavement, St Ives, PE27 5AD

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Telephone: 01480 355184  
Mobile: 07507 195375  
Email: [ccs-tr.pals@nhs.net](mailto:ccs-tr.pals@nhs.net)

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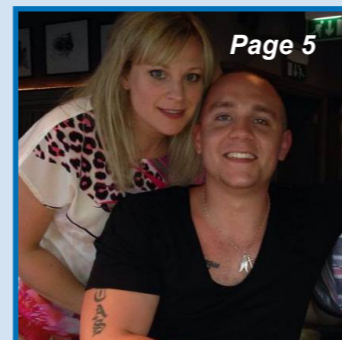
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## Huge thank you sign surprises physiotherapist

**A Southoe man with osteoarthritic knees was so pleased with treatment that has left him pain free for the first time in two years, that he decided to publicly thank his physiotherapist.**

Geoffrey Bowman, 71, built a 8ft x 4ft 'thank you' sign in his front garden and gave a bottle of wine to Alison Taylor, a musculoskeletal physiotherapist with Cambridgeshire Community Services NHS Trust. Alison prescribed steroid injections, which have proved so successful that Geoffrey was recently well enough to go on a trekking holiday in Cuba, where he walked an average of 10 miles each day.

He said: "Since the pain in my knees started five years ago I've seen a number of consultants and have undergone several treatments, including two arthroscopies, which hadn't been entirely successful. I was recently referred to Alison, who said that she thought steroid injections might be the solution. The relief was immediate. Alison mentioned that she cycles past my house every Saturday morning, so I built a sign and left her a bottle of wine to show my appreciation."



Alison added: "I was really surprised when I cycled past his house and saw the sign and a bottle of wine waiting for me – it's a good job I could fit the bottle in my water holder on my bike! The treatment for osteoarthritic knees can vary, so I talked through the options with Geoffrey and we decided that steroid injections might be the answer. I'm delighted the treatment has worked so well in this case. It's very rewarding to help someone to improve the quality of their life."

## How is Marion getting on?

**In our last edition of Keeping in Touch we focussed on the role of the Rehabilitation Instructor Adam Peacock and one of his patients Marion Cundall.**

In this edition we take a look back at Marion's progress and find out how she is getting on today.

Marion has made significant progress, and she had her last appointment with Physiotherapy back in May. Her condition was assessed and she was advised to continue with a progressive resistance based exercise programme and community based exercise, she was also put on a 'SOS' system. Being on an 'SOS' meant that Marion could book herself in with a physiotherapist at any time should she need to.

Marion has continued with her exercises and her mobility is gradually improving. She now attends the Atrium Swimming Club in Ely to swim and walks forwards and backwards in the water to help strengthen her legs. Marion also uses the local Dial a Ride service to help her get around, but lately has managed to walk from the swimming pool to her local Waitrose superstore, a distance of a couple of hundred yards.

Marion said "I am really pleased with my progress, the pain in my knee is getting less and less and the tightness is subsiding. I don't tend to use my stick as much

nowadays, in fact, I carry it around now for confidence, support when I'm tired, and in case my knee gives way. I am now able to walk up and down a few steps, downstairs easier, but walking upstairs is still a challenge as I am not able to put my full weight on my left leg yet. My friends and family have commented on how much better my walking is nowadays too."



Marion Cundall

When Marion's problems first started, she developed a tendency to compensate by using her right side more, but gradually she is learning to stand up and walk straight. The pain is gradually subsiding and she finds she is able to do things nowadays without thinking.

Marion is hoping to continue getting stronger and stronger and one thing is clear, things are more positive and life is much better nowadays.

#### Correction to previous article

In our last edition of KIT, dated Spring 2014, we reported that Marion had an operation on her spine and hip. This was an error on our part and the operation Marion had was on her spine.

## Top marks for Luton's diabetes team

**Diabetes education attendance in Luton is almost five times higher than the England average, according to the National Diabetes Audit 2013.**

This achievement is down to the nurse led integrated community diabetes services in Luton, who support the town's GPs by providing a comprehensive package of structured diabetes education programmes.

Lyn Murphy, Lead Diabetes Specialist Nurse said: "This result is excellent. My team and I are passionate about providing structured diabetes education and the DESMOND programme, particularly the emphasis on empowerment and supporting

*self-management of diabetes. This ethos translates across all of our service provision."*

GPs are able to refer newly diagnosed diabetes patients to the national DESMOND programme, which meets NICE guidelines. Lyn said: "Luton was one of the first adopters of this national programme back in 2006. Due to being able to demonstrate success, we secured funding to expand our services in 2008 and again in 2013, which included expanding the structured education programmes offered."

As one third of Luton's population is made up of the South Asian community there is also 'Living with diabetes in Urdu' and 'Living with diabetes in Bengali' and structured education for people who are housebound.

The figures follow the fantastic news that Diabetes UK has recently identified Luton as one of the best performing areas in England for giving people the NHS Health Check.

The tests, measurements and risk management interventions that make up the check, include how to identify and test those at high risk of diabetes.

People identified as at risk of developing diabetes could benefit from the 'Walking-Away' diabetes prevention programme, the latest module to be added to DESMOND.

For more information, visit: <http://www.desmond-project.org.uk>

	Offered	Attended	Offered or Attended
NHS Luton CCG	34.2%	16.9%	43.2%
England	11.8%	3.1%	14.0%

## Launch of the new integrated Contraception and Sexual Health service (iCASH) in Cambridgeshire

**The new integrated Contraception and Sexual Health service (iCASH) in Cambridgeshire launched on 1 October 2014 following the Trust successfully winning this tender.**

From 1 October 2014, for the first time, all aspects of sexual health, including contraception, STI testing and treatment, and genito-urinary medicine (GUM), will be available from easily accessible single locations in Cambridgeshire.

Patients will continue to be able to access high quality services by contacting the new referral line (0300 300 30 30) and an appointment will be booked for them at one of the available locations.

Existing integrated services provided by the Trust in Cambridge, March, Huntingdon, Ely, Wisbech, Ramsey, St Ives and St Neots (and school based services) will continue. Two new premises have opened in Cambridge.

The department of sexual health service previously provided by Cambridge University NHS Hospital Foundation Trust at Addenbrooke's Hospital will also be provided from the more accessible premises across Cambridge. This means that staff at Addenbrooke's department of sexual health transferred to the Trust and Clinic 1a is no longer provided at Addenbrooke's Hospital.

HIV services currently provided by the Trust and Addenbrooke's Hospital are not affected.



Anyone wishing to contact the integrated contraception and sexual health services can do so by ringing 0300 300 30 30 or can access further information at: [www.icash.nhs.uk](http://www.icash.nhs.uk).

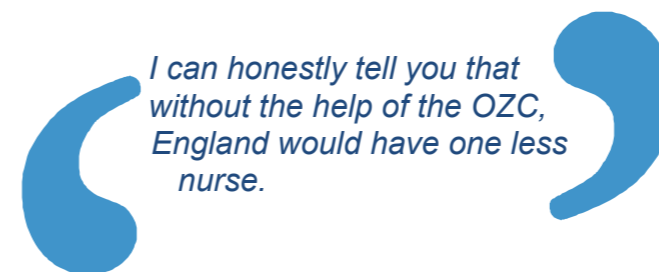
It is anticipated further premises, will open in due course and updates will be sent as these plans develop.

## Without the specialist help he received following a traumatic brain injury, Mikey Whitehead believes he would not be able to continue studying to be a nurse.

Back in April 2012, I was involved in a serious road traffic accident whilst on my honeymoon. The minibus my wife and I were being driven in crashed on the highway and overturned, leaving the van on its roof in a roadside verge.

Luckily my wife, Danielle, was left with no major physical injuries, but she was left with plenty of psychological ones. I, however, sustained a severe brain injury that has left me with a different personality and many other difficulties that I deal with on a daily basis, such as extreme fatigue and agitation.

This is known as a traumatic brain injury (TBI) and when it happened I was kept in a coma as the swelling on my brain subsided to a safe level.



According to Headway, there are an estimated one million people living with the long term effects of a brain injury in the UK. Unlike broken bones or other physical injuries, brain injuries remain largely invisible to the public and the friends and family of the individual affected. This can lead to a multitude of problems socially, cognitively and behaviourally.

Despite the large proportion of people affected by brain injury annually, there is little understanding and very limited resources available to help survivors and their families cope with the effects of living with TBI.

However, there is a special centre based in Cambridge that offers hope to those lucky enough to know of its existence. It's called the Oliver Zangwill Centre (OZC), which is part of Cambridgeshire Community Services NHS Trust, and I was fortunate enough to be one of the lucky few to attend their 18 week specialised brain injury programme. They accept only around 15 people a year on to the programme, this includes individuals who have suffered stroke, brain aneurysm, encephalitis and TBI.

The stance is very much "we know what is wrong with you and the struggles you face, let's now learn how we can get round these problems".

Different strategies are used for different problems, but the staff at OZC focus on finding a way around the difficulties that arise following brain injury. Be they memory problems,



Mikey Whitehead pictured with his wife Danielle

anger or impulsivity, the staff at OZC are armed with strategies to help.

Unfortunately, this highly specialised and uniquely individual approach is not available anywhere else in Brain Injury Therapy services available here. The OZC in the UK, which is what separates OZC from any other, has visiting scholars who come from the far corners of the globe to see this advanced, successful and highly specialised treatment taking place, and see the positive impact it has on those who attend.

The centre comprises an array of professionals, psychologists, speech and language therapy, dedicated admin workers, and occupational therapists. From having worked in just about every area of nursing available, I can honestly say that the commitment in every member of staff in OZC is staggering.

Even the hardworking administration office workers play a key role in the clients' rehabilitation, it really is inter-professional working at its finest!

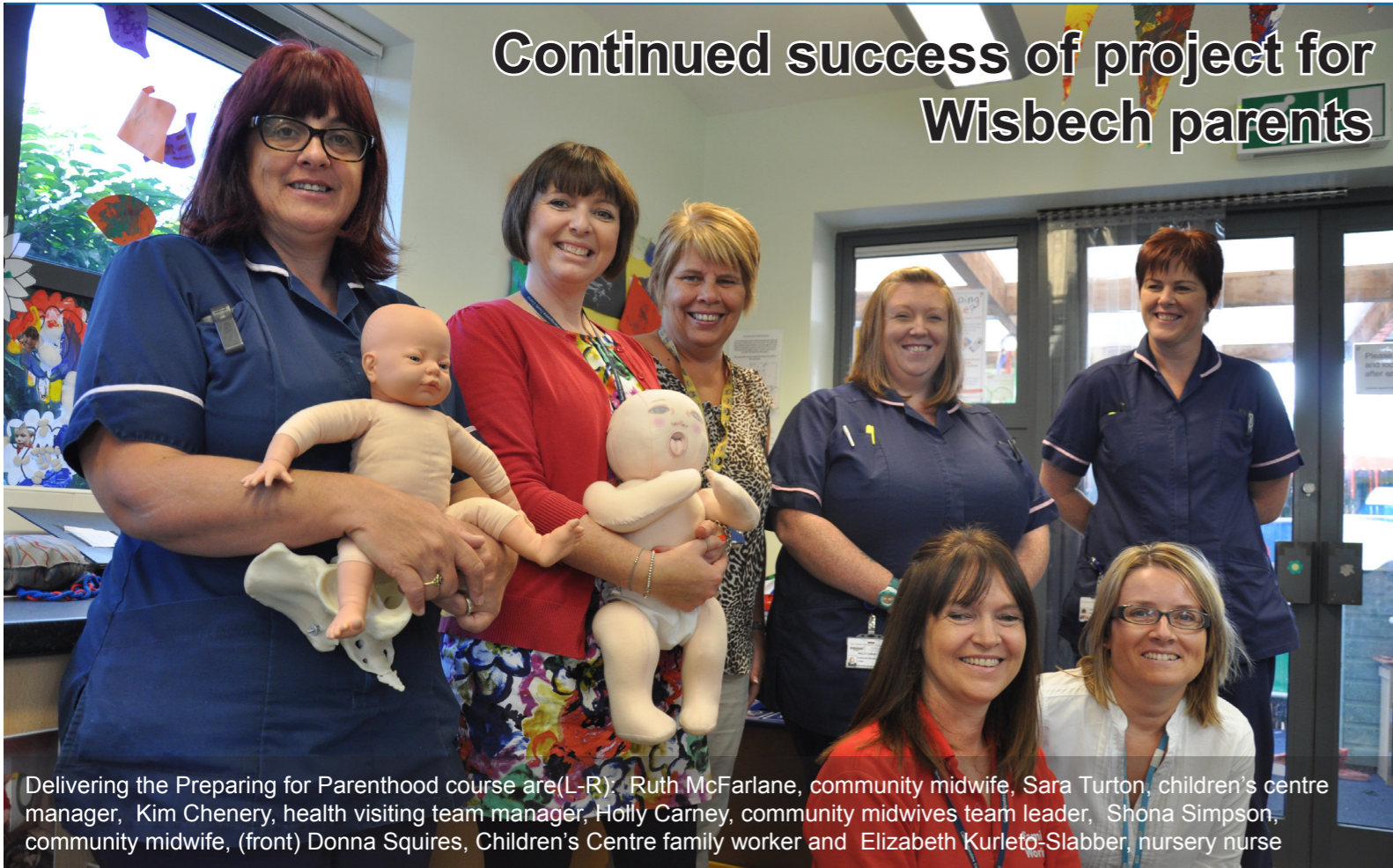
So why, out of one million people affected by brain injury, do only 15 get this type of treatment? The answer is simple: with the ever increasing demands on the financial budget of the NHS, funding is becoming more and more difficult.

I can honestly tell you that without the help of the OZC, England would have one less nurse. I am lucky enough to have been taught the tools and strategies I need to achieve my dream of becoming a paediatric nurse. When I return to university in September, I can go back knowing that I have what it takes to succeed in making my dream come true.

(Article by Mikey Whitehead).

Mikey is a student nurse studying children's nursing.

## Continued success of project for Wisbech parents



Delivering the Preparing for Parenthood course are (L-R): Ruth McFarlane, community midwife, Sara Turton, children's centre manager, Kim Chenery, health visiting team manager, Holly Carney, community midwives team leader, Shona Simpson, community midwife, (front) Donna Squires, Children's Centre family worker and Elizabeth Kurleto-Slabber, nursery nurse

### New parents are being encouraged to take part in an innovative scheme in Wisbech, which involves midwives, health visitors and local children's centres.

New introducing solids sessions are being set up to accompany existing preparing for parenthood sessions, which are jointly funded by the health visiting team from Cambridgeshire Community Services NHS Trust and the children's centres.

The sessions aim to provide advice and information to parents expecting a baby, covering antenatal care, breastfeeding and child health, through to starting a child on solid food.

What sets the sessions apart is that the weekly programme is offered with an interpreter, rotating between Polish, Lithuanian and Latvian, to offer support to parents without English as a first language, through an innovative partnership between midwives from Queen Elizabeth Hospital, Kings Lynn, health visitors from our Trust and children's centre staff from Cambridgeshire County Council.

The preparing for parenthood sessions have now been running for more than a year and its success has led the health visiting team and children's centres to establish similar groups for breastfeeding support and infant weaning.

Kim Chenery, health visiting team manager at Cambridgeshire Community Services NHS Trust, said: "Our evaluation of the project so far shows that we're reaching more than 20% of the population and that parents report feeling better informed about the services available to them.

"We've recently started weekly breastfeeding groups with an interpreter and from September we will also be offering an introduction to solids group for parents with babies aged around four months old. This project has shown how services can work together towards improving the health needs of the local population by offering a service that begins antenatally, delivering the healthy child programme in their own language and encouraging the further use of local services.

"Midwives will be personally inviting expectant parents to the prepare for parenthood sessions, while health visitors

will invite parents of older babies to the Introduction to Solids sessions and we're all looking forward to helping more new parents in Wisbech."

Sara Turton, Wisbech Children's Centres manager, said: "We are absolutely thrilled to have so many new families accessing the children's centres and are excited to be working in partnership with our health colleagues. Prepare for Parenthood is both informative and supportive for mums and dads, feedback from parents of all nationalities is really positive.

"We welcome all families with children under five to come and have a look at what we have to offer, our services are free of charge and open to all."

The preparing for parenthood sessions take place from 9 - 12pm.

The breastfeeding drop in sessions are 10am - 12 noon.

The introducing solids sessions take place between 12.30-1.30pm.

All of the above are held at the Oasis Children's Centre, St Michael's Avenue, Wisbech every Monday.

## St Neots Health Visitors celebrate Buggy Walk success

Enjoying the glorious sunshine in St Neots this July were a group of mums and the health visitors who had brought them together.

Newly qualified health visitors Julie Hazell, Ingrid Wilson and Lisa Wade set up the Love's Farm buggy walk earlier in the year as part of their studies. Their Building Community

Capacity project, which aimed to help mums with young children get exercise and meet others, steadily grew until an average of 20 mums were taking part in the weekly walk.

Now the health visitors will hand over the running of the walking group to the mums and will evaluate the impact the project has had on families in the area.



To celebrate the handing over of the project, 27 mums joined Julie, Ingrid and Lisa for a lunchtime picnic.

Julie said: "The walks have been really well attended, with new mums joining each

week. Although we're handing over the running of the walk back to the community this week, we're optimistic that they will carry on and we will continue to promote it to new mums when we're on visits or in clinic."

## Cambridge Health Visitor named as one of the first Fellows of the Institute of Health Visiting

A health visitor based in Cambridge has become one of the first five nationally to be named as a Fellow of the Institute of Health Visiting.

Elaine McInnes, a health visiting practice teacher based at the Nuffield Road practice in Cambridge, has been recognised as a senior leader in the profession and, as a Fellow, will be part of a national network of expert health visitor leaders.

Elaine has been a health visitor since 2006, following a successful career as a neonatal sister, working on special care baby units in London and Cambridge and became a practice teacher in 2012.

Elaine is currently on a secondment as the professional development officer at the Institute, which was set up two years ago to support health visitors through education, professional development and networking. During her secondment, she is helping to promote the Institute to health visitors and students, working alongside the Director, Dr Cheryl Adams and project manager on several projects including: Good Practice Points for HVs and Parents, HCP e-learning modules and more

recently National Induction and Preceptorship Frameworks for all newly qualified HVs and return to practice HVs from September 2014.

The Institute has launched a series of 75 fact sheets for health visitors on issues such as safe sleeping, breastfeeding, allergies, working with minority groups and Female Genital Mutilation. These "Good Practice Points," a number of which were written by CCS NHS Trust staff, were officially launched by health minister Dr Dan Poulter at a recent conference in Birmingham.

Elaine is one of the first health visitors to receive the fellowship award, but the institute aims that each NHS Trust employing health visitors should have its own fellow by 2015, meaning there will be around 150 in total.

Elaine said: "I'm delighted to be named as one of the first Fellows of the Institute of Health Visiting. The aim of this prestigious award is to develop professional accountability through raising the HV profile nationally. I'm passionate about education for health visitors and research and my ambition is to be able to undertake a PhD.

"There has been a huge amount of



Elaine McInnes with health minister Dr Dan Poulter

investment in health visiting in recent years, which has led to almost 50% of the workforce being newly qualified. This means it's quite a tough time for the workforce and the Institute is there to support them, by giving them a centre of excellence providing high quality professional resources to ensure every family receives consistent care.

"Nationally, there have been enormous changes in health visiting and Cambridgeshire Community Services NHS Trust has been at the forefront, in terms of delivering numbers of students, developing mentors and upskilling the workforce through outstanding and compassionate leadership."

For more information on the Institute of Health Visiting, visit [www.ihv.org.uk](http://www.ihv.org.uk)



## Life after a brain injury

### The Evelyn Community Head Injury Service (ECHIS) provides specialist holistic neuro rehabilitation for adults in Cambridgeshire who have had a traumatic brain injury.

The service provides bespoke assessments, individual and group sessions for people with head injury and their families. Rehabilitation programmes are tailored to identify individual goals and needs. ECHIS works closely with the neuro rehabilitation specialists in community teams across the regions within CCS and also with external agencies such as Headway and social care to form virtual teams around each client.

ECHIS was set up as part of a neuro rehabilitation grant, funded by the Evelyn Trust. It has benefitted from collaboration between Headway, the University of Cambridge, Cambridge University Hospitals NHS Foundation Trust and the Oliver Zangwill Centre for Neuro-psychological Rehabilitation (Cambridgeshire Community Services NHS Trust). It is now partially funded by the Clinical Commissioning Group (CCG) and fully embedded in CCS.

Having been seen by the neuro rehab consultant at the Addenbrookes Neurotrauma clinic, clients are discussed at the ECHIS team meeting and then invited to an initial assessment if appropriate, together with a family member

or close friend. This helps people remember what was discussed, and can also provide information if people do not yet have full insight into their situation. Realistic goals are identified, such as participating in an activity in the community, returning to work or study.

After this, patients may attend further specialist assessments, individual treatments or therapy sessions. Goals may change over time so are frequently discussed. Outpatient appointments and group sessions are offered across the county, most frequently at Brookfields Hospital, Cambridge or the Princess of Wales Hospital, Ely.

Below we find out more about how these sessions are helping clients to cope with their brain injuries and enabling them to move forward.

A nine week brain injury information group takes place Davison House, Brookfields Hospital. This is often the first group that people attend and gives clients an opportunity to meet different members of the team and develop their own poster, to help them to start making sense of how the brain injury has affected them.

Relatives are also able to attend a similar monthly group, held in the evenings. Clients then attend specific rehabilitation groups focusing on areas such as fatigue management, cognitive strategies and communication, depending on their needs.

A six week attention group also runs at Davison House for two hours a week.

Week five of this programme focuses on the relationship between attention and emotion, clients will listen to an audio track of attention training on a daily basis and monitor progress. A recap of strategies from previous sessions will include the mental blackboard and light house strategy. The group will also discuss how 'Stop Think' can be an effective strategy when an emotional response is interfering with progress towards daily goals. The clients discuss their own experiences and learn from each other about applying some of these strategies to everyday life.

Daniel has been coming to ECHIS and attended many of the rehab groups over the last year. He said: *"I find this group and the people very important. If it wasn't for these people, understanding brain injury wouldn't be possible and I wouldn't be able to cope with this."*

*"A lot of people who have a brain injury do not understand what they are going to go through. Kate and her co-workers give you the information you need to help deal with certain things in recovery."*

Kate Psaila, clinical psychologist, said: *"Brain injury affects everyone in different ways. We have the challenge of using evidence based practice from a small brain injury evidence base or adapting it from other conditions. We have to be as efficient as we can to provide a county wide service with a small team, delivering interventions through groups helps us to do this. It's great to see how people progress towards their goals. The group have bonded over the last few weeks and it is obvious to see that they are all helping each other to understand the frustrations of having a brain injury."*

*"The annual report shows that from the annual reviews of the first 30 clients, 27 reported experiencing an overall improvement in their mood and their ability to cope generally, with many achieving their main ambition to return to work. Measuring outcomes can be a challenge, but the response from patients and their families has been overwhelmingly positive. Patients say feeling supported and understood has helped them progress, increasing their confidence to work towards achieving personal goals enabling them to gain independence to get on with their lives."*

Judith Allanson, Evelyn consultant in neurological rehabilitation said: *"We would like to build on the work already done by creating a head injury registry, to better understand the scale of the issue and by developing a specialised county wide neuro rehabilitation service to use existing expertise and facilitate working with relevant agencies."*

*"This will ensure that people with complex problems resulting from brain injury have access to the specialist advice and interventions that they need."*

## Helen's story

Helen is just one of the people who have been helped by the innovative services provided by ECHIS following her accident in June 2013. Below is her story.

Helen had a car accident where she was rescued by a man (Alan) who climbed into her overturned car and managed to get her out. The gentleman concerned was given a national award from the fire service in London for his outstanding bravery.

Helen said: "Alan rescued me along with two other members of the public. After Alan got me out, Chris and Nicky, who both work for the RAF, got me breathing again and kept me in the right position until the air ambulance arrived.

"All three saved my life and all three need to be recognised. It's a year and two weeks since I had my accident and I am now standing here and being a little bit braver every day. I have had lots of hospital appointments, but I feel good and I am now making my way forward."

ITV has been in touch with Helen to do a programme called "Saving a Stranger" and Helen has agreed to take part along with Alan, Chris and Nicky who all played an important role in her rescue.

The ECHIS team consists of:

- Sarah Moss, occupational therapist
- Rachel Thomson, speech and language therapist
- Dr Kate Psaila, clinical psychologist
- Nicola Metcalf, assistant psychologist
- Helen Howe, administrator
- Dr Judith Allanson, consultant in neuro rehab and ECHIS clinical lead
- Dr Andrew Bateman, service manager.

The clinicians also receive clinical supervision from CCS's Oliver Zangwill Neuro-Rehabilitation team.

For further information please contact:  
The Evelyn Community Head Injury Service  
The Old Chapel  
Brookfields Hospital  
Cambridge CB1 3DF

Tel: 01223 732177  
Email: echis@ccs.nhs.uk

# One sport, 9 days and one excited physio



**Rugby teams competing in the Commonwealth Games were in the caring hands of one of the Trust's Luton based physiotherapists.**

Louise Armstrong, from the Community Assessment and Rehabilitation Team (CART) was accepted to be one of the first contact physios at the games in Glasgow in August. This involved general sport physiotherapy, which was mainly strapping of joints, injury assessment on the field and referral to the Commonwealth Village Polyclinic for further input where required.

Louise worked with six teams from around the world - England, Wales, Canada, Trinidad & Tobago, Papua New Guinea and Barbados. She said: "I had a brilliant time, so much so I'm hoping to head off to Rio 2016 to work for the Olympics!"

"One of my best bits would have to be having some fun and laughs with the Barbados rugby team, who would bring me stashes of Iron Bru from the Commonwealth Village because they found out I was partial to it."

Although she didn't get to see any of the competition games, Louise watched training games from the best seat in the house, standing at the touch line.

Not to be outdone by the team clashes on the pitch, Louise took part in an ice bath challenge. Ice baths regulated to between 6-7 degrees were at the training venue and players would have to sit in them for around 3-5 minutes after training to help with recovery.

Louise said: "We decided as a group that we would try it and it became a little competitive to see who could last the longest. I won with a time of four minutes with an ice bath temperature of 6.5 degrees."



The advert asking for volunteers appeared in the Chartered Society of Physiotherapists magazine last year and Louise applied for the opportunity on a whim. She said: "It was just like applying for a job; I filled in the forms and had an interview. I feel immensely proud and honoured to have been picked. There were so many people that applied and just to be part of that small amount chosen I feel very grateful."

"I get to say that I was part of the Commonwealth Games."

# Pilot scheme is ensuring people get the help they need at home

**Sarah Short, 45, from Needingworth, recently found herself in the accident and emergency department at Hinchingbrooke Hospital in the early hours after suffering a fall at home.**

X-rays showed that although she hadn't broken anything, she had suffered serious ligament damage.

It wasn't the first fall she had suffered, as last year she was diagnosed with myalgic encephalomyelitis (ME). The main symptom is profound and continued fatigue and exhaustion which does not go away with sleep or rest. Although there is no miracle cure, early diagnosis, pacing rest with activity, targeted drugs to control certain symptoms and self-help may aid recovery.

Sarah said: "In my case I don't tend to have mental fatigue, but I do suffer from severe tremors and muscle pain, which

means I can't walk very far as my legs feel shaky. I'm a virtual PA so am able to work from home, but some days I find it difficult to do every day tasks, which is so frustrating.

After the x-ray results, Sarah was visited by Nikki Tatham an occupational therapist with the intermediate care team from Cambridgeshire Community Services NHS Trust. The team is leading a pilot scheme with Hinchingbrooke Healthcare NHS Trust aimed at improving the co-ordination of services between the hospital and the community to ensure people who are well enough to leave hospital, but may need extra support at home, get the help they need.

Sarah said: "Nikki and her team were amazing and have since organised everything I needed to return home and recover from my accident. She didn't just look at my ankle. She initially saw me for around 45 minutes

**Myalgic Encephalomyelitis (ME).**

**Myalgia is muscle pain and encephalomyelitis refers to inflammation and dysfunction of the brain and spinal cord.**

*to assess how mobile I was and how well I could stand up and sit down. My arms aren't very strong, so using crutches is difficult and we looked at walking frames, different types of crutches and a perch stool. We also looked at ankle supports.*

*"She also arranged for a physiotherapist from her team to visit me at home to look at what extra help I needed there. It was so well organised that I was discharged from hospital on the Friday and Laura Neale visited me at home on the Monday.*

*"She talked to me about exercises I could do at home to strengthen the ankle and so aid my recovery. She then visited me every week to check how I was progressing, which was really reassuring."*

Nikki also arranged for carers to visit Sarah when she first returned home.

Sarah said: "My husband is my main carer, but still has to work, so Nikki organised a carer to visit me once a week to help with bathing and washing my hair, which made such a big difference. I now have a bath/shower seat, so that I can wash my own hair, as I cannot stand for very long."

Due to her ME, Sarah has also been supported by a neuro-physiotherapist who has developed a graded exercise plan to help her cope better with her symptoms, such as walking for ten minutes every other day.

She added: "I now have an appointment with a neuro-consultant to assess my ME and what else can be done to help me."



Sarah Short

## A sweet anniversary celebration



Staff at Moorland Gardens Care Home in Luton hosted a tea party to celebrate the first anniversary of the introduction of rehabilitation beds there.

Current staff from Moorland, NHS therapists, Luton Borough Council social workers and past and present patients marked the occasion on 1 August with cake and stories.

Annelies Brouwer, a physio from the Community Assessment Rehabilitation Team (CART) said: "One year ago we started our local physical rehabilitation service with a new partner (Lifestyle Care who run Moorland Gardens care home) so staff had to be trained and accept the concept of rehab rather than care. Everyone has done really well and so far the new partnership has been successful so we thought it was worth a celebration."

Since 1 July 2013, 213 patients have been admitted to the rehab beds at Moorland Gardens. More than 70% of those discharged were able enough to return to their own homes, maintaining their independence.

Annelies said: "The impact of a debilitating event, such as stroke, is massive. Things once taken for granted, such as walking or getting out of bed unaided are changed forever."

"These figures and the lovely thank you cards we receive, show how much difference we make to the lives of our patients, setting goals to track their reablement journey to their new normal."

'Thanks for looking after me whilst in your care. May God reward all of you. I felt so loved and blessed. Thank you for all your help' - Veronica.

'Every time we've visited him, the staff have attended to him with the utmost care, and all with a smile on their faces' - Peter's daughter.

## Trust's community nursing services recognised at 10 Downing Street reception

Two innovative community services that have both won the national Chief Nurse's 6Cs award were celebrated at a reception for Nurses, Carers and other Health Professionals at 10 Downing Street on 6 October.

Mags Hirst, Jenni Sherman and Vicky Amiss-Smith from Cambridgeshire Community Services NHS Trust's children's community nursing team (CCNT), together with Lucy Stewart and Ben Bowers from the Ely and Fenland community rapid response team were invited to the reception with Prime Minister, David Cameron

and Jeremy Hunt, Secretary of State for Health.

Mandy Renton, chief nurse, Cambridgeshire Community Services NHS Trust said: "I am really proud of both of these teams. To be recognised for not one, but two 6Cs awards in one year is a tremendous achievement and highlights the fantastic work that the Trust is doing to improve the quality of life of those we care for."

Commenting on the reception, Lucy Stewart, community matron for the community rapidresponse team said: "I met other Queen's nurses and it was a really useful way to network and converse with health



Mags Hirst, Jenni Sherman and Vicky Amiss-Smith outside the door of 10 Downing Street

professionals from across the country. Mr Cameron spoke with passion about the current state of the NHS and thanked us all for our continued dedication and commitment to providing quality care for all."

## Physiotherapist diagnoses rare condition



Melodie Francis, from Hemingford Abbots was an active 58 year old who a year ago suddenly developed a debilitating condition, "Brachial Neuritis."

The physiotherapy team in Huntingdon have helped to diagnose a rare condition that left Melodie Francis, with severe pain in her shoulder, which initially left medics puzzled.

She was referred to Emma James, extended scope practitioner with the Trust, by her GP after he prescribed a number of medications which did little to alleviate Melodie's pain. But Emma suspected a rare condition called Brachial Neuritis, which is caused by inflammation of the nerves that control the shoulder, arm and hand. This can eventually damage muscles, which sometimes reduces movement and mobility.

Emma explained. "Brachial Neuritis usually only affects men and I've seen just four cases in the last year. It can be very difficult to diagnose because severe shoulder pain can have lots of different causes.

"But Melodie told me that she had recently suffered a series of chest infections and Brachial Neuritis is often preceded by a viral infection, so I arranged for a series of tests that were needed to confirm my suspicions and rule out other conditions."

Melodie said: "I started feeling pain in my shoulder after leaving work one evening, but by the next day the pain was unbearable. It took some time for a confirmed diagnosis, but I'm really grateful to Emma for her expert help.

"Unfortunately, there is no cure, but the right medication can help alleviate the symptoms and people do sometimes improve over time. The condition has left me with some disability and weakness in my shoulder, but I consider myself lucky as it can lead to paralysis."

Every day tasks are more difficult for Melodie now, but she has learned to compensate and just get on with life.

Melodie continued: "My grandchildren know that 'grandma has a poorly arm' and even the youngest ones know to go to my right side now. I can't swim anymore but I go to the gym and 'spinning' helps my mobility.

"I also have difficulty sitting for long periods or travelling, as the condition has left me with a protruded shoulder blade which makes it uncomfortable.

"Sadly, I've had to retire as a nurse as I couldn't cope with the physical aspects of the job anymore, but I'm setting up a small business to train people in public speaking."

Melodie has now been discharged from the physiotherapy service but can self refer if she needs to.

**Brachial Neuritis (also known as Parsonage-Turner syndrome) is an inflammation of the nerves that control the shoulder, arm and hand, causing severe pain.**

**This condition is uncommon in women and usually affects men between the ages of 20 and 60.**

## Preparing for modern community nursing



### Building a quality community workforce to meet the health needs of Luton's adult population was a driving force behind us getting involved in nurse education.

Working with the University of Bedfordshire gave CCS the opportunity to identify modules that fit in with Nursing and Midwifery Council (NMC) requirements and marry them with the needs of the Luton community.

The Specialist Practitioner – District Nursing course is available at degree or masters level; we chose masters because, as Debbie Taylor, practice development lead nurse for district nursing in Luton unit said: "All registered nurses from now are being trained at degree level, so there's no benefit teaching your specialist nurse to the same level that staff nurses are qualifying at."

"It has been tough because some of our staff are not trained to degree level but it's an important development when planning for our future workforce. We, at Luton, always strive to be in front rather than catching up."

"We're constantly in contact with the university to discuss any issues we're having in practice and issues they're having at university to adapt the course for the benefit of the students."

"The first cohort of four students started the specialist practitioner course part time two years ago. Last year another two students started and this year there is funding for another two."

"Following a review of the challenges our current staff have faced completing the course whilst managing a caseload, this year we are training Band 5 nurses and preparing them ready for a Band 6 post in the future."

"We offer pre registration students the opportunity for placements in all three years of their training each tailored to their learning needs. The formula is working well as some student nurses have chosen to come back to Luton to do their management placement and subsequently been employed as staff nurses."

Lynn Pantling, community staff nurse, didn't have any preconceived ideas of where she wanted to work once she qualified. She said: "Out of nine placements during the course at the University of Bedfordshire – three of them were in the community."

*"I love my job, no two days are ever the same, I feel as though I make a difference to patient's lives. I work in a supportive, dynamic, friendly organisation. I never stop learning."*

"From my first placement in the community, I loved it; I knew community was where I wanted to be. I qualified in September 2012 with a degree and I was very lucky to then be offered a job with CCS in Luton."

In October CCS will support Lynn to study for the PGDip Community Specialist Practitioner course with the University of Bedfordshire. She said: "I love my job, no two days are ever the same, I feel as though I make a difference to patients' lives. I work in a supportive, dynamic, friendly organisation. I never stop learning."

"If you are lucky enough to get a placement at CCS, my advice would be embrace it and use it as a massive learning opportunity."

"The integrated nursing team in Luton has a vast array of experience and are always happy to have an enthusiastic student to pass their knowledge on to. There is also a misconception that newly qualified nurses cannot work in the community; not true. CCS has a comprehensive preceptorship and training programme to support newly qualified nurses."

In addition to the competency and development pack, Debbie Taylor and Chris Simpkins, practice development nurse, have established a two day introduction to community nursing, where new starters meet and have education sessions from specialist nurses and colleagues across all other adult services in Luton.

This has helped them to gain an insight into the multi skilled services available to the patients of Luton and enabled the staff nurses to think wider than their own role when assessing and reviewing patient care packages. Debbie said: "Luton is very diverse and has quite defined needs compared to other areas around here."

"The university knows the complexities of Luton, so when it comes to doing the practice profile they can support students in looking at the right areas."

"We're training our staff to work in Luton, so we want them to focus on Luton."

The modern community nurse needs to have a wider ranging skillset than before, to deliver the ever evolving and changing policy of the NHS; diabetes care, end of life care, syringe drivers, long term conditions care, intravenous therapies, tissue viability, pressure ulcer and compression therapy are just some of the responsibilities and tasks considered part of the day job for adult community nurses in Luton.

**Lynn Pantling**  
community staff nurse



These together with holistic assessment of the patients and carers needs, the use of new technology and empowering patients to manage their own health care, will enable Luton adult nursing services to deliver high quality care closer to home, cost effectively and efficiently.

**The Luton District Nursing Team can be contacted at:**  
  
**District Nursing Service**  
**Randstad Court**  
**4th Floor**  
**Laporte Way**  
**Luton LU4 8SB**  
  
**Telephone: 0333 405 3000**



## Helping people live with cancer

**It's estimated that more than 1.5 million people in England have cancer, which is expected to increase to around four million people by 2030.**

Thanks to improved treatments more and more people are living with cancer for longer. The changing profile of cancer patients and the length of time over which they are treated has resulted in different pressures on patients and services.

There are concerns that the existing system of follow up care is not meeting people's needs and will struggle to cope as the number of people living with cancer continues to increase as predicted.

Cambridgeshire Community Services NHS Trust and Cambridge University Hospitals NHS Foundation Trust joined forces in 2013 to take part in a national project aimed at bridging this gap.

One of seven pilots across the region, the Cambridgeshire Community Cancer support service is a two year project exploring the best ways to offer support in the community to people with cancer. It initially aimed at supporting those with secondary colorectal or breast cancer.

Kay Hardwick, community cancer nurse specialist, Cambridgeshire Community Services NHS Trust, who is leading the project, explained: "The team are specialist nurses and support workers who help cancer patients and their families on a one-to-one basis,

*working closely with their GP, community services and hospital doctors to support their needs.*

*"One of the main aims of the project is to support people with the challenges of living with cancer and help them manage their condition in a holistic way. This can include care planning, post-treatment support, lifestyle advice and help for their carers, but we also look at financial, emotional and other support."*

Since the pilot started, more than 100 people have been seen by the team.

We talk to just one.

Four years ago Sally Adams, 50, from Waterbeach, was given the all clear from breast cancer after she underwent a mastectomy.

But at the start of 2014 she found a worrying lump under her arm pit and visited her GP. After tests, her worst fears were confirmed when she was told that the breast cancer had returned.

Sally had also been suffering pains in her legs and doctors initially suspected sciatica. But she was dealt another blow when they found that the cancer had spread to her bones, which had resulted in fractures in her pelvis.

She had radiotherapy and the hospital's oncology team referred her to the community cancer support team. She now has bone infusion treatment every four weeks and hormone tablets to strengthen her bones, which means she is currently feeling well and pain free.

Sally explained: "I was originally diagnosed with just breast cancer, so I thought that as I'd beaten it once I could battle it again. But learning I also had bone cancer was a real body blow and damaged my confidence. I'm used to being self sufficient, so I find it difficult to ask for help.

*Sam Smith, a specialist nurse from the cancer support team, visited me to talk through my treatment and has supported me emotionally. She asked me if there was anything in particular that I was worried about. It was great to talk to a third party about what I was going through. My family have been really supportive, but I usually end up comforting them as they get upset, so having Sam is great."*

A payroll officer at Cambridgeshire County Council, Sally recently decided to take ill health retirement and has started to do things she has never done before.

She said: "I asked Sam if there was anything I shouldn't do because of the cancer, but she just said go for it if I can. So I've stayed at the Ritz because I've never done that, although they charge £9.50 for half a pint of Guinness! I like going to West End musicals, so I decided to see a play for a change.

*"The doctors say I might expect another five years, but who knows? It's reassuring that I can phone Sam at any time if I have concerns or need expert advice. She and the team provide an invaluable safety net for people like me living with cancer."*



Sally Adams

## Tissue Viability nurse named as Health Worker of the Year by Cambridge News

The Pride of Cambridge Community Awards 2014 were held at Downing College, Cambridge recently at an oscar styled ceremony, in front of family and friends. Anne-Marie Perrin, lead community tissue viability nurse was named as Health Worker of the Year by the Cambridge News.

Anne-Marie said: "I am very proud and humble to have received this award. It is recognition of all the work that the tissue viability team has achieved over the years. It would not

*have been possible without the support and help from colleagues, patients and the Trust."*

She was nominated by her tissue viability colleagues in the Trust, and also colleagues from Addenbrooke's and Papworth Hospitals, who have worked together for many years putting all their resources together to develop the service.



Anne-Marie Perrin receiving her award from Andy Williams, MedImmune

Anne-Marie's job has involved setting up special clinics for people suffering from ulcers, and also teaching and motivating many other nurses to follow in her footsteps.

## CCS team named finalists in innovation awards

One of our teams is celebrating being named finalists in the 2014 Innovation Competition organised by Health Enterprise East, a leading NHS Innovation Hub.

Dr Stephen Barclay and his team were recognised in the Software/ICT/Assistive Technology category for Data Sharing in End of Life Care.

Jane Crawford-White, CCS NHS Trust clinical systems programme lead said: "We were delighted to be recognised as finalists in Health Enterprise East's Innovation Awards. The electronic record system we have introduced is designed to provide better care for patients approaching the end of their lives, transforming the way information is shared (with patient consent) and ensuring that care needs and preferences are known by all the professionals involved, enabling informed decisions in line with the patient's wishes."

As of July 2014, more than 800 patients had data shared through the project, from more than 70 GP practices, most district nursing teams, all local hospices and all community palliative care teams.



Pictured left to right: Look East presenter Susie Fowler-Watt, Bill Wilson, Dr Stephen Barclay, Charlie Young and Jane Crawford-White

Also, more than 320 health professionals, primarily district nurses, GPs and out of hours clinicians, have been trained in the use of the data sharing template and associated aspects of End of Life Care. The NHS Innovation Awards Ceremony was hosted by BBC Look East presenter Susie Fowler-Watt on 24 September at Girton College, Cambridge.

Dr Anne Blackwood, Health Enterprise East Chief Executive said: "As Health Enterprise East approaches its tenth anniversary next month, it remains our great privilege to work in a region with such a world-renowned reputation for research and innovation."

## Staff excellence recognised

Dedicated volunteers and staff had their moment in the spotlight at the Cambridgeshire Community Services NHS Trust Staff Excellence awards held at Burgess Hall in St Ives recently.

Matthew Winn, Chief Executive at the Trust said: "I would like to thank all of the staff at our Trust for providing high quality care, close to those who need it, on a daily basis. These awards recognise our unsung heroes who make a real difference to people's lives. They were nominated by their colleagues and the many compliments and thanks our staff receive from patients, clients and relatives are testimony to the high standards of care they deliver."



### Staff Innovation and Excellence Awards 2014

#### Leadership

##### Isobel Wilkerson, Community Matron, Cambridge City/ South Cambridgeshire

Isobel led on the development and attainment of the multi-disciplinary team (MDT) CQUINs in the City and South area, enabling the team to achieve the full year targets for CQUINs 2, 3 and 4 within five months. Isobel is passionate about MDT working and the benefits it provides for patients regarding integration of care.

#### Quality

##### Nicky Sennitt, Childrens Community Nursing Team, Cambridge

In her new innovative role as a palliative care nurse, co-employed by CCS and the East Anglia Children's Hospices, Nicky provided an essential bridging role for children and families receiving palliative care in Cambridgeshire.

#### Promoting Dignity in Care

##### Developmental Care Group - Special Care Baby Unit (SCBU)

This small group of staff was particularly concerned about the potentially detrimental impact of the SCBU environment upon babies and their families and took it upon themselves to form a Developmental Care Group in order to improve practice and neonatal outcomes.

#### Going the Extra Mile

##### Gordon Stewart, Therapy Driver, Brookfield's Hospital, Cambridge

Gordon performs his day-to-day duties with a smile on his face and a friendly word for everyone. He always looks for ways to support other team members and improve patients' experience. His approach engenders a positive experience and patients' feedback includes: "He is a lovely bloke", "I can't praise him enough" and "he has the right temperament for the golden oldies."



#### Behind the Scenes

##### Sarah Carter, Special Care Baby Unit

Sarah embodies the very definition of dedication – she is totally devoted to improving the service that the team delivers. She has established and maintained a thriving Parents Support Group (recognised by the Neonatal Network as being one of the best and most consistent groups of its type in the region). Parents attending have expressed the value to them at a time when they felt isolated, hopeless or depressed. Parents that have been through the inpatient/SCBU journey are also invited, providing assurance that there is a 'light at the end of the tunnel'.

#### Involvement of Service User and/or Carer

##### Community Cancer Support Team, Bernard Reiss Centre, Brookfields Hospital

The team was developed with patient groups and shaped from the start using service user feedback. Patient representatives were approached to identify what services they would have liked to support them, to help cope effectively at home and self manage their condition where possible. The steering group is attended by patient representatives who bring their wealth of experience, to ensure future service decisions respect and meet service users' expectations and wishes. In response to patient feedback, the service has adopted the patient led and validated 'National Cancer Survivorship Initiative,' which is completed and periodically reviewed in partnership with patients.

#### Volunteer or Charity of the Year

##### Care Network

Care Network provided a prompt response to client need and assessment of a patient referred within 48 hours. They gave confidence that they were attending to the patient's urgent needs and responded appropriately to the changing and ongoing medical and social requirements of the patient. They quickly formed a good rapport with the client and next of kin and we are convinced that without this volunteer organisation, there was a high likelihood this client would have required an acute admission due to the complexity of his health and social difficulties.

#### Shine a Light Winner of the Year Award

##### Young Person's Shared Care Drug Service, Luton

The team provided support with the issues the patient was experiencing and also provided food. The service has made a lot of difference to this person's life by reducing their Methadone, helping them to eat, walk and smile again.



#### Long Service

This year we celebrated and thanked 26 members of staff who have collectively achieved 590 years of committed service to the NHS.



# #hello my name is...

Inspired by Dr Kate Granger, a doctor and terminally ill cancer patient, CCS has signed up to the #hello my name is campaign introduced by Kate after a hospital stay where many staff looking after her did not introduce themselves

As Kate says *"it is not just about knowing someone's name, but it runs much deeper. It is about making a human connection..."*

