

patient **first**

#patientfirst

spring 2014

**Sensory
room for young
patients... p3**

**New lung physio
service... p4**



**'We are extremely
fortunate that he received
such fantastic care from
the staff at Tunbridge
Wells Hospital – I honestly
can't thank them enough'**

Read Kim Woodburn's story on p6

**Twins, George and
Sophie, one year on... p11**

**'The earlier the
better' campaign... p15**

Welcome to the spring edition of Patient first!

In this magazine, you can read about TV personality Kim Woodburn's experience after her husband, Peter, had a stroke and was cared for at Tunbridge Wells Hospital.

We also have stories from Maria Nicklin, a cancer patient, and Joanna McKenzie, who some of our readers may remember from last year, when she was featured with her twins after they were born prematurely – what a difference a year can make!

There is also plenty of news from both our hospitals – including information about a prestigious accreditation for our Endoscopy department at Tunbridge Wells, a makeover for Majors in Maidstone's A&E, a new physio-based lung service, a new art exhibition and much more...

As always, you can try your hand at our quiz, test the delicious recipe from our very own League of Friends cook book, and find practical advice about local services available to you.

Don't forget, we would love to hear from you – all your feedback and suggestions are gratefully received, so please contact us.

We hope you enjoy this edition of **Patient First** and we look forward to hearing from you.

Best wishes for a happy, healthy spring – we'll be back in summer!

The Patient First team

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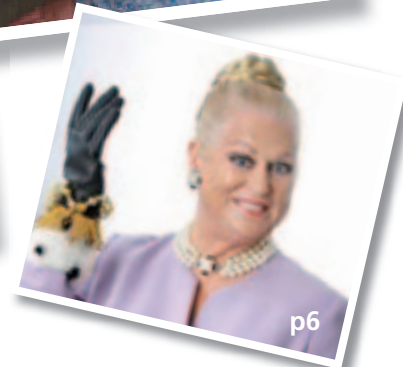
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NEW CHILDREN'S SENSORY ROOM A HUGE HIT WITH YOUNG PATIENTS

A sensory room, funded by the Southborough Rotary Club, has officially opened in one of the children's wards at Tunbridge Wells Hospital.

The room, which is in Hedgehog Ward, provides young patients, especially babies, those with special needs, and those undergoing intensive treatment, with an interesting environment, away from their hospital room.

The equipment in the room includes an LED projector which casts colours and shapes onto the walls, floor and ceiling, and a recordable speaker which has eight sound groups (including animals, numbers, colours, transport and nursery rhymes) as well as the facility to record sounds. There is also a light spreader that projects beautiful colours, and a special cube, which is used to set the colour of a large tube full of bubbles. The room is fitted out with padded mats and borders.

Paediatric Ward Manager, Rochelle Gilder, said: 'For the last

few years, the Southborough Rotary club have kindly provided and put up Christmas decorations for the children's ward. Last Christmas, they said that they would also like to donate something to the ward that would be of benefit to young patients and which they could continue to contribute to over the coming years.

'I mentioned that we were very keen to have a sensory room and they were extremely interested and supportive.

'They raised almost £6000 through local fundraising events and bought us all the equipment for the room which is very much appreciated by staff and patients at Tunbridge Wells Hospital. We can't thank them enough!'

Play Specialist for Hedgehog Ward, Sue Edwards, added: 'This room is a massive asset to the ward. Patients and their families love the environment and the opportunity to have some time away from their rooms. Not only is the sensory room stimulating and exciting for our younger patients, it is also helping them to have some much-needed fun while they are staying with us and receiving treatment.' ■

NEWS FROM YOUR

New service to help lung patients

A new physiotherapy-led service, to help patients with chronic lung conditions, such as chronic obstructive pulmonary disease (COPD), chronic bronchitis and emphysema, has been launched by Maidstone and Tunbridge Wells NHS Trust (MTW).

The courses have been developed by a number of medical professionals within the Trust, including Dr Jennifer Graves, Respiratory Consultant, and Louise Robertson, Respiratory Specialist Nurse, and involve exercise as well as education during every session.

The classes are being held within the community to make it easier for local patients to attend.

The sessions are held in the Capel Morris Centre and Parkwood, Maidstone, Tonbridge and in Sevenoaks Community Centre. Each course lasts for six weeks with patients attending

twice weekly.

Chantelle Beer, Team Lead Physiotherapist for pulmonary rehabilitation, said: "We are looking to expand to more areas as we want these courses to be easily accessible to people who will really benefit from them."

Initially, patients with lung conditions can be referred on to the courses by their GP, hospital consultant or a respiratory professional. They will then have a pre-assessment to ensure they are suitable for the classes and will benefit from them.

Chantelle added: "When someone is approved for the course, they come along twice a week and take part in the exercise class and an education session, which we invite a variety of speakers to."

The courses, which are run by physiotherapists, physiotherapy

assistants and a respiratory nurse, aim to teach people exercises to improve the strength and efficiency of particular muscles in the body which will help them to cope better with their chronic lung condition. It also teaches techniques to control breathlessness which can be frustrating and debilitating for many.

Chantelle said: "While the courses won't fix the individual's condition, they will certainly help them to cope better and have more confidence to do things which may improve their quality of life. So far, the feedback from those attending the courses has been very positive with many saying they are now able to do more than they could before, which has made a significant improvement to their lives."

Anyone who is interested and thinks they might be suitable to come along and take part should initially speak with their GP, respiratory consultant or respiratory professional."

Excellence in Endoscopy



Tunbridge Wells Hospital's endoscopy unit has received national JAG accreditation for its high standards of quality, safety, patient care and professionalism of its staff.

JAG (The Joint Advisory Group on Gastrointestinal Endoscopy) accreditation is the quality mark for endoscopic services in England. It is so prestigious and of such a high standard just one in three of all endoscopy units in the country, including NHS and independent providers, hold the title. Just one in 10 units are usually accredited following inspection.

Dr Laurence Maiden, lead clinician for endoscopic services at Tunbridge Wells Hospital, said: "Patients can continue to be assured of receiving high quality, safe standards of endoscopic care at Tunbridge Wells Hospital."

Dr Maiden added: "Only around 10% of units pass their JAG accreditation visits first time nationally, so it is a

testament to our endoscopic team's hard work that we were again found to provide high quality patient care."

The Tunbridge Wells Hospital endoscopy unit treats approximately 10,000 patients a year from Maidstone, Tunbridge Wells and surrounding areas, including Sevenoaks, Tonbridge and Malling, and parts of north East Sussex.

It offers a wide range of procedures including diagnostic and therapeutic upper and lower gastrointestinal endoscopy (camera check of the bowel), bronchoscopy (camera check of the lungs), palliative procedures for patients suffering from pancreatic cancer and ultrasound procedures.

The unit is also participating in both the national bowel scope screening service (a service that promotes patients taking early action if they are symptomatic for potential bowel cancer) and the national bowel scope screening for patients aged 55 years



who can voluntarily have a screening scope. JAG accreditation means the unit can continue to participate in these programs as well as scoping symptomatic patients on fast track pathways from local GPs.

JAG assessment reviews the patient environment, the patient journey, the clinical standards of care, patient privacy and dignity, the decontamination processes and the patient satisfaction with the service. It also ensures that high standards of nursing and clinical training are delivered and reviews the clinical governance of the unit.

HOSPITALS

Visiting hours extended at Maidstone Hospital

Visiting hours at Maidstone Hospital have been extended. Visitors are now able to come and see patients from 8am until 8pm every day.

Chief Nurse, Avey Bhatia, said: "I, along with the ward managers at Maidstone, have been keen to formally extend the visiting hours on our wards. The new hours give visitors much more flexibility to arrange to come and see a friend or loved one while enabling our patients to spend more time with friends and relatives - something we know can make a positive contribution to many people's recovery after an operation, injury or illness."

Protected meal times, which are set times used solely for patients to eat meals will remain in place, despite the longer visiting hours. Relatives and friends are welcome to assist with meal times if they wish to do so. There must still be only two visitors to a bed at one time.



You said...

that more recliners and more put-up beds were needed to allow relatives to stay with patients... We have bought some so you can stay with your loved ones.

WORK TO IMPROVE A&E MAJORS AREA

As part of the ongoing redevelopment work at Maidstone Hospital, a project in April will see the Majors section of A&E being refurbished.

The flooring will be completely replaced and other improvements will be made to the area during the three-week initiative.

While the work is carried out, Majors will move across the corridor to the Urgent Medical Ambulatory Unit (UMAU). Patients will see no change in the care they receive.

A spokesperson for A&E said: "The floor in particular is a significant piece of work but will vastly improve the environment in the Majors area of A&E for our patients.

"We want to reassure all our patients and visitors that while the work is going on, they can attend as they would at any other time and will receive the same services and high standards of care we always aim to deliver."

The project is due to start on 11 April 2014.



efm

New Non-Executive Director appointed

Sarah Dunnett has been appointed as a new Non-Executive Director on the Board of Maidstone and Tunbridge Wells NHS Trust.

Sarah comes from Dartford and Gravesham NHS Trust, where she has been Chairman for the past 12 years.

Sarah's contribution to the NHS was recognised in the 2013 Queen's birthday honours list, when she was awarded an OBE.

Tony Jones, Chairman, said: "I would like to welcome Sarah to the Trust. She has a wealth of experience in the NHS and shares our absolute belief in ensuring patients are at the forefront of everything we do."



New artwork on display

Artwork by Jane Fordham is now being exhibited at Tunbridge Wells Hospital.

The series of six landscapes can be found in the main outpatient corridor through the hospital on level 0.

The paintings will remain in place until June, for patients, visitors and staff to enjoy.

Jane has lived in the south east of England since she studied for her degree at the University of Brighton over 25 years ago. Her work spans drawing, painting, mosaic, stone carving, theatre set design and graphic work.

Case Study

LIFE AFTER STROKE

Television celebrity, Kim Woodburn's husband, Peter (68), had always been in good health, until one day in May last year, when he lost feeling in his right side and began to struggle to speak. Kim knew immediately that he had suffered a stroke and Peter was admitted to Tunbridge Wells Hospital for emergency tests and treatment...



Find out about their journey over the last eight months and why, despite the fact that Peter's stroke has completely changed their lives, they both feel very lucky.

Peter has always been in good health – with low blood pressure, low cholesterol, no pills for anything," said Kim. "In 34 years of marriage he has rarely complained of feeling ill so it was strange when, one Saturday evening in May last year, he said he had a bad headache on one side of his head."

Peter decided to go to bed early to try and shift the headache and then got up as usual the following day to read the Sunday newspapers with Kim.

"He was trying to read something out loud to me and he just couldn't get a word out, it kept coming out wrong. It did seem strange but wasn't enough to set alarm bells ringing at that point," Kim explained. "He didn't tell me that after it happened, he went out into the garden and while out there, he didn't realise his slipper had come off and that he couldn't feel his bare foot on the pebbles underneath. If he had told me, I would have known that something was very wrong. It wasn't until the next day, Monday, that Peter brought two cups of tea out into the garden, where I was sitting, and the tea in the cup in his right hand was spilling all over the place. I asked him what was wrong and he told me he couldn't feel down his right side. I knew immediately what had happened."

Kim called an ambulance which arrived in eight minutes and took Peter from their former home in Crowborough, to Tunbridge Wells Hospital at Pembury.

Kim said: "Within three or four hours of arriving at the hospital, Peter had been given every test under the sun. The staff were absolutely amazing and looked after us from the moment we arrived. They were reassuring, calm, charming and they knew instantly that Peter had suffered a stroke.

"The stroke in itself seemed very strange. Peter has always had low blood pressure so obviously, the thought of him being at risk of a stroke hadn't even entered our minds. However, the doctors did tell us that one of Peter's carotid arteries was much narrower than the others, which is something he may have been born with. As the artery was particularly narrow, this might have caused a problem with blood flow, which then could have caused the stroke."

Fortunately, the stroke was mild and after two days in hospital, Peter was discharged home with medication and instructions to rest.

Over the last eight months, he has regained most of the feeling in his face and arm. His leg is also improving although he still has no feeling in his toes.

While his speech is no longer slurred, he sometimes struggles to say what he wants to.

"Because Peter can't feel the toes on his right foot, he does limp a little bit, although most people wouldn't notice. He can get rather frustrated by the fact that although he knows what he wants to say to me, and can picture the word, he sometimes can't quite get it out and I have to prompt him. It also bothers him that his short-term memory suffered, and is still suffering, following his stroke. He can tell me something he did two or ten years ago in great detail but can find recalling something from a few minutes before very difficult. He also gets tired very easily and he doesn't have a lot of physical strength. It frustrates him hugely that we have to ask for help to lift things or to do small DIY jobs around the house. Even when there are things he can do, I limit how much he takes on because it's so important that he doesn't overdo it while he is still recovering," Kim said.

"Despite the frustrations though, I remember saying to him that however hard it seems, we are lucky. His stroke was a mild one. He can walk, talk and live a fairly normal life. Other people have far worse experiences and we have to remember that. We are also fortunate in

that Peter is a retired policeman, as well as the fact that I have been able to cut down on the work that I do, which means I can be here as much as he needs me to be. We have a lovely home and all the time we need to take it easy and allow Peter to recover. Younger stroke victims might have jobs, mortgages, children and all sorts of other things which make their situation incredibly hard."

A few months after Peter's stroke, he and Kim moved to Cheshire. They had been planning to relocate to the area before Peter became ill, and although they had found a house they loved, Kim's initial instincts were to put the move on hold.

Kim said: "Despite us having found a lovely new home, I nearly called the move off as I didn't want to move away from Tunbridge Wells Hospital as we had received such good care there. So many people said to us that we were incredibly lucky that it had been our local hospital when Peter had his stroke – I couldn't agree more. I honestly believe stroke patients won't receive better care anywhere else. If you are unlucky enough to have a stroke, then that's the place to go.

"But, when I voiced my concerns about moving to Peter, he reminded me that we might not find the right house again and then he said, 'Come on, Kim, it'll be fun!'

"He seemed to be lifted by the idea and because his spirits had been rather low following the stroke, I started to think that it might be just what he needed."

The move went ahead and once they were settled into their new home, Kim encouraged her husband to seek some help to deal with what she was sure was depression, following the stroke.

"It's common for people to feel depressed after a life-changing illness. Peter had been offered medication by the hospital consultant prior to us moving but he had refused it. Once we got to Cheshire, I could see he was struggling and eventually, I suggested he saw our new GP. He did, and he accepted some medication to help him

'You have to accept help from the experts – it's part of the journey to getting better...'

deal with feeling so low. Since he has been taking it, he has been much better and finds he is much more able to deal with his recovery and the associated frustrations than he was before.

"If I have one piece of advice to people in similar situations it would be to get help when you need it, there is no shame in it. Your life changes and it's hard to adjust. You have to accept help from the experts – it's part of the journey to getting better and no one should feel ashamed about it.

"And in terms of advice for those caring for the person who has had the stroke, the most important thing, I would say, is to be patient with them. It can be very hard as you expect them to be like they were before, and able to do the same things in the same way, but they can't. You have to give it time and remember how much they have been through. Try to lighten the situation for them when you can, it's hugely important to stay positive for everyone's benefit."

Since Peter's stroke, Kim has been working to raise awareness of the condition and has linked up with the Stroke Association, a UK based charity which works to support stroke survivors, families and carers and fund research into the prevention and treatment of stroke.

"I feel that it's vital I do everything I can to

ensure people understand strokes," said Kim, "Not only do I want to make sure people know how to reduce their chances of having one, but I also want to make sure people who care for a stroke patient have the help and support they need. Like anything, you can't fully understand something until you have been through it yourself and, I feel that in my position, I can actually try to help others using my own first-hand experience. I am particularly

passionate about ensuring younger families who are affected by stroke are properly supported and have access to the help they need whenever they need it.

"As I said before, in many ways, Peter and I are lucky to be in the situation we are in, with time and stability on our side to aid his recovery. While he will never be exactly the same as he was before the stroke, I am confident that with the right medication and my support he will continue to improve. We are extremely fortunate that he received such fantastic care from the staff at Tunbridge Wells Hospital – I honestly can't thank them enough." ■



WHAT IS A STROKE?

A stroke is a serious medical condition that occurs when the blood supply to part of the brain is cut off.

Strokes are a medical emergency and prompt treatment is essential because the sooner a person receives treatment for a stroke, the less damage is likely to happen.

If you suspect that you or someone else is having a stroke, phone 999 immediately and ask for an ambulance.

Recognising signs and symptoms

The signs and symptoms of a stroke vary from person to person but usually begin suddenly. As different parts of your brain control different parts of your body, your symptoms will depend upon the part of your brain affected and the extent of the damage.

The main stroke symptoms can be remembered with the word FAST: Face-Arms-Speech-Time.

Face – the face may have dropped on one side, the person may not be able to smile or their mouth or eye may have drooped

Arms – the person with suspected stroke may not be able to lift one or both arms and keep them up because of arm weakness or numbness

Speech – their speech may be slurred or garbled, or the person

may not be able to talk at all despite appearing to be awake

Time – it is time to dial 999 immediately if you see any of these signs or symptoms

It is important for everyone to be aware of these signs and symptoms. If you live with or care for somebody in a high-risk group, such as someone who is elderly or has diabetes or high blood pressure, being aware of the symptoms is even more important.

Symptoms in the FAST test identify about nine out of 10 strokes.

Other signs and symptoms may include:

- numbness or weakness resulting in complete paralysis of one side of the body
- sudden loss of vision
- dizziness
- communication problems, difficulty talking and understanding what others are saying
- problems with balance and coordination
- difficulty swallowing
- sudden and severe headache, unlike any the person has had before, especially if associated with neck stiffness
- blacking out (in severe cases)

For more information, please visit www.nhs.uk/conditions/stroke or www.stroke.org.uk ■

The Stroke Association and Kim Woodburn's top five tips to help reduce the risk of stroke:

1. Know your blood pressure. Around half of strokes could be prevented if people with high blood pressure took steps to control it. Have yours checked at your pharmacy or GP surgery.
2. Check your pulse. Atrial fibrillation is the most common type of irregular heartbeat and it can increase your risk of a stroke by up to five times. Visit your GP if you think you may have an irregular pulse.
3. Stop smoking. It doubles your risk of a stroke.
4. Take regular exercise. A brisk walk for half an hour five days a week can reduce your risk. Or, even better, why not try something a bit more ambitious? The Stroke Association hosts resolution runs all over the country: visit stroke.org.uk/resolution to join in.
5. Eat less salt. It can increase blood pressure so try to eat a healthy balanced diet.

- Every year there are approximately 152,000 strokes in the UK. That's one stroke every five minutes. Most people affected are over 65, but anyone can have a stroke.
- It can have a huge effect on you and your family and you will be likely to want to know as much as you can about what practical, emotional and financial support is available.
- Visit the Stroke Association website for more information and advice – www.stroke.org.uk

You said...

the chairs in the Ophthalmology Outpatients Department waiting area were uncomfortable...

We have replaced these chairs to improve levels of comfort while you wait for your appointment.

Therapy groups on stroke ward help patients' recovery

Ward-based therapy groups are helping stroke patients with their rehabilitation. Four sessions are run every week by the occupational therapy, physiotherapy and speech and language teams on the stroke unit to develop physical strength, improve fine motor and cognitive skills, and develop communication skills.



Each group, which includes up to eight patients at any one time, focuses on a specific area to help with the recovery process. The games group sees patients playing bingo, cards and Guess Who, which encourages social interaction and language skills.

Exercise sessions are used to boost patient fitness and stamina, while a craft group involves patients in art and cooking projects to assist with physical and cognitive skills. A breakfast club, in which patients make breakfast and hot drinks, takes place weekly too.

Frances Williams, Acting Clinical Lead Occupational Therapist, said: "In a group environment patients can participate in a task within a social, supportive environment that allows the therapist to complete assessment and intervention.

"The groups enable the patients to focus on regaining physical

and cognitive skills that will allow them to live as independently as possible. The effect of neurological conditions varies from individual to individual, so the therapist has to tailor their rehabilitation programme according to their needs.

"We offer patients the opportunity to join groups that will most benefit them and reflect their individual goals. We then can adapt each activity to improve skills affected by stroke, promote confidence and encourage independence."

Patient, Phil Debnam, who has attended a number of the groups as part of his rehabilitation, added: "Taking part in the therapy groups has helped me better prepare for going home. The groups have made me more confident and I've enjoyed doing things I haven't done before, such as making cards and shakers, and cooking." ■

New clinical lead nurse for stroke joins Maidstone Hospital

A nurse who specialises in providing dedicated care and advice to stroke patients and their relatives and carers has started work at Maidstone Hospital.

Caroline Bates has joined the medical team on the Stroke Unit to help develop and enhance the frontline service for stroke patients at the Trust.

Her role will focus on offering specialist advice on the range of treatment

options available which will enable individuals and their families to access relevant information, supporting patients through rehabilitation and preparing them and their carers for discharge from the ward.

Caroline said: "Evidence shows that giving patients dedicated and specialist stroke care significantly improves their recovery.

"My role is to support patients and their families after a stroke, and to provide advice and information to make sure individuals receive the very best care and treatment. It's also important to make sure they feel informed and ready to go home after a stay in hospital."

Caroline joins the Trust's other clinical nurse specialist for stroke, Amanda Martin. Together they will work to spearhead new initiatives to enhance standards of stroke care across the Trust. ■



Case Study

MARIA NICKLIN



When former nurse, Maria Nicklin, started to suffer with pains in her lower stomach, she thought she may have pulled a muscle putting up Christmas decorations.

Numerous tests and scans later confirmed the worst – Maria had cancer in her ovaries.

During the last twelve months, Maria has undergone chemotherapy, surgery and blood transfusions.

Read her story to find out why, in spite of everything she has been through, she feels positive about her experience.

64-year-old Maria Nicklin, lives in Maidstone with her husband Marcus. She has always led a healthy life and has never had any major health problems so it came as a surprise when at Christmas in 2012, she began to suffer with pains in her lower stomach.

Maria said: "I remember the pain being especially bad after I had been to communion at our local church on Christmas eve. I thought I might have pulled a muscle putting the decorations up but the pain got worse and by the weekend, I was doubled up in pain and walking with a stick and eventually went to A&E at Maidstone Hospital."

At the hospital, Maria was found to have high blood pressure and due to the pain she was experiencing, was given a chest and stomach x-ray. She was diagnosed with suspected diverticulitis and given medication. She also went to see her GP as suggested by the doctor at the hospital who continued treating her for constipation and told her to come back if the pain persisted.

The pain did persist and Maria was referred to the surgical team at

Tunbridge Wells Hospital.

She was given a CT scan but the results proved to be inconclusive and she admitted on to Ward 11 for more tests.

During the five days she stayed as an inpatient, Maria underwent numerous tests, exploratory treatment and a biopsy.

It was confirmed, before she went home, that she had cancer in her ovaries and also in the lining of her omentum.

Following her discharge, she was referred to see a Consultant Oncologist at Maidstone Hospital.

Maria said: "Originally, the plan was for me to have three rounds of chemotherapy, a hysterectomy and then three more rounds of chemo. I also looked in to being part of a clinical trial – Karen, Sandra, Vicki, Gaynor and Kelly, the Macmillan nurses were absolutely wonderful. I can't praise them enough."

However, during her course of chemotherapy, Maria was called in unexpectedly for a transfusion because her white platelets were extremely low.

She was kept in overnight on Chaucer Ward following the procedure.

Maria ended up having a further two transfusions until her white blood count improved.

Maria said: "I was a nurse, so had a lot of questions about why my white platelets had been so low. I wondered if there was an underlying cause."

Maria was referred to Dr Rassam, consultant haematologist, and he ordered a pelvic biopsy and some blood tests, which he sent to Guy's and Kings college Hospitals for analysis. The test confirmed that Maria was allergic to one of the components of the chemotherapy.

Maria's chemotherapy was stopped for two months. After that, she started a course of chemotherapy using different drugs, which suited her much better. Between June and September of last year, Maria had five sessions of chemotherapy and then a CT scan. It was positive news. The cancer cells had reduced significantly.

Maria's hysterectomy took place on 21 October, with her cervix, uterus, ovaries, fallopian tubes, omentum and appendix removed. The surgery took four hours and Maria was taken directly to the Intensive Care Unit from theatre.

She spent two weeks in Maidstone Hospital and was moved from Intensive care to Cornwallis Ward.

"I was very poorly for the first week and I couldn't keep anything down. I also had a urine and chest infection and problems with my wound healing. I had a CT scan and a small blood clot was found in my right lung so I was given injections to disperse it, which had to carry on after I went home. "Gradually, I began to get better and in the second week, after my medication had been adjusted and in fact, reduced, I was able to get out of bed and work with the physiotherapist. I started off walking round my bed, then I managed to get along the corridor and eventually, I could climb the stairs and have a shower on my own. I progressed very quickly which was really encouraging."

Maria's most recent CT scan brought positive results and her future is looking bright.

"I can't stress enough how wonderful the care and attention I



ONE YEAR ON...

Last year, Patient First covered the amazing story of Joanna and Dan McKenzie and their twins, George and Sophie, who were born prematurely when Joanna developed pre-eclampsia.

This follow-up shows just what a difference a year can make!

When the McKenzie twins were born five and a half weeks' early on 25 January 2013, George weighed 4lbs 12oz and Sophie 4lbs 9oz. They were

transferred straight to the neo-natal unit where they both stayed for over a week.

Twelve months later and there is no sign that the twins had a rather bumpy start. They are pulling themselves up to standing, sleeping through the night and keeping their mum and dad very much on their toes.

"They are both developing beautifully," said Joanna, "I can't believe the difference a year has made, and how much they have grown and changed."

After the babies were born and due to some struggles with breastfeeding, Joanna chose to exclusively express milk to feed them.

"One thing I would say, from my own experience, is the importance of people knowing the options they have, and asking for as much information as possible. A lot of people think the only options for feeding are breast or bottle but that certainly wasn't the case for me. Expressing worked really well and I want to remind other mums that it is a viable option.

"The other thing that has been key for us is routine. I stuck with the one I started while I was in hospital and again, it has worked really well."

Although since leaving hospital, the twins have gone from strength to strength, Joanna and Dan have faced the challenges which arise for

any new parents, as well as some other unexpected events. Sophie was diagnosed with hip dysplasia and spent over four months in a harness, Joanna found herself with a kidney infection last year which meant a five day stay in hospital, and Sophie also battled a chest infection and bronchiolitis.

"It hasn't all been easy," said Joanna, "You just have to face each challenge and make the best of the situation, and more importantly, ask for help when you need it. One thing I would say to new parents is ask lots of questions and utilise the fantastic staff in the hospital. They know so much and can really pass on their expertise to help you deal with any situation you find yourself in."

Although for the time being Joanna is staying at home as a full time mum to George and Sophie, she plans to eventually retrain as a midwife and currently gives regular talks and inputs about her own experiences to the Twins and Multiple Births Association (TAMBA).

"The last year has been so special. It's been inspiring and emotional. Dan and I are different people – for the better. I think I am actually more laid back than before I had the twins, and Dan is a fantastic dad, I think he has surprised himself with how well he has taken to being a parent.

"We enjoy every moment we have with the twins and we don't take anything for granted, we know how lucky we are. The last year has had its ups and downs but overall, it has been absolutely fantastic and I wouldn't change a single thing."

In July, Joanna is taking part in a 10k run to raise money for TAMBA – for more details and to support her, please visit www.virginmoneygiving.com/joanna.mackenzie@me.com ■



received on the wards and at Kent Oncology Centre really was. From the receptionists, domestics and chaplain, to the doctors and nurses, everyone made me feel welcome and as though they wanted to help me. The hospital is spotlessly clean, and that in itself, makes you feel confident that you are in the right place," said Maria.

"I want other patients, particularly those in a situation similar to the one I was in, that they should be reassured that they will receive the very best care from the very best people. I describe my hospital stay as a package holiday – just without the sun, sea and sand! But, I really did have everything I needed. The nurses can't do enough for you.

"This sort of experience is very daunting and chemotherapy is hard but my advice is, hang in there, it will be worth it in the end, and the people who work at the Trust will make it as positive an experience as they can for you.

"If I could, I would thank everyone by name, individually, for what they have done for me, but there are too many. However, I do want to mention Dr Remi and her secretary, Mr Montalto, Dr Rassam and his secretary Lynne, the staff on Charles Dickens ward, all of the nurses on all of the wards I stayed on and the CT department who were excellent and treated me with total dignity and compassion. I honestly couldn't have asked for more." ■

Birdspotting

Around Pembury Hospital there is a good chance of spotting quite a few different species of birds. The hospital is surrounded by conifer and deciduous woods and woodland birds are frequent visitors. For example, you might see a green woodpecker, which nests in oak, ash or birch.

Easily identified by its red capped head and yellow green rump, the green woodpecker feeds on insects it extracts using its long sticky tongue from trees or posts. It makes characteristic hopping movements as it feeds on the ground

The hospital puts out feeders, and they attract a variety of birds, especially in the winter. The greater spotted woodpecker with its black and white markings, red head and rump is a frequent visitor. This solitary bird makes its presence felt by drumming on tree trunks and gives a loud "kck kck" cry.

You might also spot a nuthatch, which nests in trees in deciduous woodland and is the size of a small woodpecker. Its upper body is grey and it has a long pointed black bill, and a black stripe like the Lone Ranger's mask running across each eye. The nuthatch gives a "tuit tuit" cry and nests in holes in trees. Watch out for the way it scrambles down trees head first – no other British bird does this.

Blue tits are frequent visitors to deciduous woods and they hang upside down in the branches to feed and are regulars at bird feeders. They are easily recognisable by their blue capped heads and wings, and bright yellow belly. In the breeding season the blue tit may join groups of other birds such as great tits to look for food.

Great tits also live in broadleaved woodland and they are distinguished from blue tits by their black head cap, collar

and throat, and a black line running down their yellow breast and belly. They are also frequent visitors to bird feeders and have a wide variety of cries, ranging from a "cha-cha-cha" to a softer "tsee" call when in a flock.

Finally, you might catch a glimpse of a tiny tree creeper, which is relatively common in the UK and likes conifer and deciduous woods. About the size of a mouse with a long stiff feathered tail and a downward curved beak, the tree creeper is very active in its search for insects and can be seen moving rapidly up trees. The tree creeper also visits bird feeders for a top-up of seeds during the winter.

Visit <http://www.rspb.org.uk/> for more information.

To find out how you can support the RSPB's work by becoming a member go to: <http://www.rspb.org.uk/supporting/join/> ■



Drive to minimise last-minute op cancellations

An awareness campaign to minimise the number of operations being cancelled at the last minute has been launched by Maidstone & Tunbridge Wells NHS Trust.

Latest figures show that, on average, over 110 elective surgical procedures each month are cancelled on the day the operation is due to take place and many more in the run up to the operation date. Our booking team always try to offer the appointment to another patient but often patients are unable to attend for a procedure at short notice.

Operations cancelled unnecessarily cause other patients to wait longer and the Trust loses thousands of pounds as a result.

Fran Staples, Lead Practitioner in Pre-assessment Clinic & Admissions, said: "Please only cancel or change your appointment or operation date if you have no other option. The more notice we have, the easier it is for us to find you a more suitable date, and to find another patient who is able to fill your original appointment.

"It is particularly important that you speak with the pre-assessment clinic if you've been ill, such as with a cold or sickness and diarrhoea, up to 48 hours before an operation. The nurse will ask you about your symptoms and advise you of any action that needs to be taken."

For advice and information about cancelling or rescheduling an elective surgical procedure, call us on telephone:

Maidstone Preoperative Assessment - 01622 224079

TWH Preoperative Assessment - 01892 635854

Women & Children's - 01622 228222
ENT - 01622 228218

Ophthalmology - 01622 226238



Recipe

Try this mouth-watering recipe from our very own **Maidstone Hospital League of Friends Cook Book...**



Chocolate Orange Drizzle Cake

Ingredients

- 4oz margarine
- 6oz caster sugar
- 4oz sieved self raising flour
- ½ tsp baking powder
- 2oz cocoa
- 2 large eggs
- 4 tbsp milk
- Zest of one orange
- Orange juice from one orange
- 3 tbsp of sieved icing sugar

The Maidstone Hospital League of Friends Cook Book is available from The League of Friends Shop near the main entrance of Maidstone Hospital and is priced at £5.

Method

Pre-heat oven to gas mark 4, 350°F, or 180°C.

Mix all the ingredients together except the juice of the orange and sieved icing sugar. Beat the mixture well until it changes colour and then put into a greased 7" cake tin.

Cook for one hour exactly.

Mix orange juice and sieved icing sugar together.

When the cake is cooked, immediately pour the icing sugar and orange juice mixture over the cake.

Let the mixture soak in well before taking the cake out of the tin.

This cake is very soft so leave it in the tin for a good ten minutes before removing, otherwise it will fall apart.

You said...

that Tunbridge Wells Hospital needed a better facility for refreshments to be provided for visitors to wards...

Tea trolleys are now available on the wards or in the day rooms with an 'honesty box' for contributions towards refreshments.

patientfirst SPRING QUIZ

Geography

- Q. Which artistic Italian city was almost destroyed by flooding in 1966?
- Q. The Adriatic and Aegean are arms of which sea?

History

- Q. In World War II, on what exact date did D-Day occur?
- Q. By which name or nickname was King Richard I also known as?

Literature

- Q. Crime writer Robert Galbraith is better known by which world famous name?
- Q. Which famous author wrote 'The Tale of Benjamin Bunny' and 'The Tale of Mr Jeremy Fisher'?

Food/Dining

- Q. Which famous Italian chef owns a chain of restaurants and delicatessens across the UK?
- Q. Calvados is a brandy made from which fruit?

Entertainment

- Q. In the film 'Forrest Gump', what did Forrest compare life to?
- Q. In the Superman stories, what was Lois Lane's job?

Sport

- Q. Who was named World Soccer Player of the Year for the second time in 2013?
- Q. In which country did the sport of bobsledding originate?

(Answers to be published in the Summer edition)

Executive Team Update

Avey Bhatia, Chief Nurse



Maidstone and Tunbridge Wells NHS Trust (MTW) has just launched its Quality Strategy for the next three years. This new strategy recognises that quality must be at the centre of all that we do. We understand that the delivery of high quality services can only be achieved by staff and patients, and their families/carers working together and keeping quality central to the services we deliver.

We are always looking at ways we can improve the quality of services we deliver, at the same time as ensuring our approach is cost-effective and sustainable.

Our Quality Strategy sets the context, framework and direction for the way in which we deliver services to patients and makes a commitment to the fact that we will always do this with care and compassion.

As part of our ongoing work on this strategy, we would like to ask for your feedback. We would like to know what 'care and compassion' means to you – please email your comments to mtw-tr.communications@nhs.net

Your thoughts and observations will help us to mould the care we give in the future. Acting on the feedback we are given by our patients, visitors and staff

is a top priority for MTW and we have already made significant changes and improvements as a direct result of comments you have made. Look out for our '**you said, we did...**' boxes dotted within this magazine, to see what sorts of things we have been doing.

We hope we can work with you in the coming months to ensure we deliver the best possible care to our patients and that our approach is consistently of a high quality and always undertaken with care and compassion, as our strategy sets out.

Avey

Financial challenges will not compromise quality of care

The Trust is expecting to finish its financial year at the end of March with an overspend of around £9.6 million.

While this is disappointing news for everyone, and will need to be carried forward into the next financial year, we are confident the organisation as a whole can steadily return to financial balance within the next year or two.

The overspend has occurred for different reasons, but mainly as a consequence of the Trust being paid less for treating patients using some of our biggest and busiest services, while increasing our own use of expensive agency doctors and nurses to meet demand.

Our use of agency staff, though expensive, is necessary to ensure we can

provide our services efficiently and care for our patients to a high standard. We are currently in the process of actively recruiting our own clinical staff to the posts in question, which is both more cost effective and raises standards of care even further.

While the financial challenges we face going forward over the coming months will not be easy to resolve, we must emphasise that we will not compromise on the quality of care we provide you, our patients.

We have many plans in place to save money while maintaining and improving the services we provide. We are currently working closely with West Kent Clinical Commissioning Group and other partners to help lead in the development of more community-based care too. Our aim is to take



more of our care out to our patients to avoid hospitalisation where we can and, of course, when appropriate.

We hope that this and many other initiatives will help us to recover our financial position. In the meantime, what we can say with confidence is that you remain our priority, and whatever the situation, we will always strive to provide you with the best possible care and services at Maidstone and Tunbridge Wells Hospitals. ■

Winter edition QUIZ Answers

GEOGRAPHY • Name three of the coldest ten countries in the world... - **Antarctica, Russia, Canada, America (particularly Alaska), Greenland, Estonia, Finland, Kazakhstan, Iceland and Mongolia** • In which country is Santa Claus known as Babbo Natale? - **Italy** **HISTORY** • To which century can Father Christmas be traced back (in England)? - **The 16th Century** • Was the carol 'Silent Night' composed in 1746, 1818 or 1912? - **1818** **LITERATURE** • In the 'Twelve Days of Christmas', what did the 'true love' send on the seventh day? - **Seven swans-a-swimming** • Fill in the missing four words in this famous festive poem: 'Twas the night before Christmas, when all through the house, not a creature was stirring... - **Not even a mouse** **FOOD** • Which fruit based sauce is often served with turkey at Christmas? - **Cranberry** • What is it traditional to put in the centre of a Christmas pudding? - **A sixpence or silver coin** **ENTERTAINMENT** • Who played the character raised as an elf in the 2003 film 'Elf'? - **Will Ferrell** • Which of the following celebrities celebrate their birthday on Christmas Day? - **Annie Lennox (singer and part of the Eurythmics), Helena Christensen (super model), Shane MacGowan (The Pogues) and Alastair Cook (cricketer)** - **All of them** **SPORT** • In which country will the 2014 Winter Olympics be held? - **Russia** • Aspen, Chamonix, St Moritz and Courchevel all boast world famous resorts for which winter sport? - **Skiing**

Choose **well...**

Get the right NHS treatment. If you're not sure what's best, phone before you go.

Self-care

NHS 111

Medical advice 24/7

www.nhs.uk/111

Call 111

Emotional support

Mental Health Matters helpline

Confidential emotional support

0800 107 0160

GP and dentist out of hours

Call 111

Pharmacy

Late night and Sunday pharmacies

Maidstone

Morrisons Pharmacy, Sutton Road – 01622 661750

Sainsbury's Pharmacy, Quarry Wood, Aylesford –
01622 790223

Tesco Pharmacy, Lunsford Park, Larkfield –
01622 701449

Sevenoaks

Sainsbury's, Otford Road – 01732 469198

Tonbridge and Tunbridge Wells

Boots, Calverley Road – 01892 526486

Sainsbury's, Linden Park Road – 01892 532569

Minor injuries units

Edenbridge Hospital

Mill Hill, Edenbridge, TN8 5DA

Tel: 01732 863164

Open 8.30am to 8pm, 365 days a year

X-ray available from Monday to Friday 9am to 2.30pm

Sevenoaks Hospital

Hospital Road, Sevenoaks, TN13 3PG

Tel: 01732 470200

Open 8am to 8pm, 365 days a year

X-ray available from Monday to Friday 9am to 5pm

Crowborough War Memorial Hospital

Southview Road, Crowborough, TN6 1HB

Tel: 01892 603602

Open 8am to 8pm, 365 days a year

Some GP practices also offer a minor injury service.
To find out who, visit www.nhs.uk

Emergency Care Centres and Accident and Emergency

For critical or life threatening emergencies, call 999 or go to your nearest Accident and Emergency, open 24 hours a day.

Maidstone Hospital, Hermitage Lane, Maidstone, Kent ME16 9QQ

Tel: 01622 729000

Tunbridge Wells Hospital, Tonbridge Road, Pembury, Tunbridge Wells, Kent TN2 4QJ

Tel: 01892 823535

Nip health problems in the bud – 'the earlier the better'

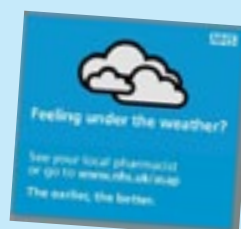
If you are feeling under the weather and are over 60 – get help as soon as possible. That is the message from doctors and health workers across Kent and Medway who are urging all older people to seek help for health problems sooner rather than later, and not store them up until they get worse.

Senior clinicians have been concerned over the rising number of older people who are admitted to hospital because of respiratory or other chronic conditions which are usually worsened by immobility, the cold and viral illnesses.

And, you don't always have to visit a doctor in order to get early advice.

Did you know that:

- You can get advice on minor ailments from your local pharmacy, they can provide expert advice to manage long term conditions or a bad cough, wheezing, or cold and sore throat. They can also provide the free flu jab if you are over 65 or are in any of the other high risk groups. They have longer opening hours than GP



practices and most have private consultation areas – and they will tell you if you need to see a doctor.

- Talk to your friends or your carers – they will be able to point you in the right direction or help you get early help.
- You can also access self-care information about minor illnesses and ailments from the NHS Choices website.
- Call 111 for health advice when it's not an emergency. In an emergency, always call 999.

- 
- 1 Receptionist
 - 7 Nurses
 - 3 Doctors
 - 2 Specialist Consultants
 - 1 Tonsil operation
 - 1 Yummy ice cream

Together we make it work