

patient **first**

#patientfirst autumn 2015

**MTW surgeon
leads the way in
eye surgery** *p3*

**National award for
MTW stoma
nurses** *p4*

**'We can't fault the
treatment Hannah
has had from
both hospitals.
Everyone we
have seen has
been fantastic.'**



Read about baby Rian King's battle with bacterial meningitis *p10*

Welcome to the Autumn edition of Patient First!

In this magazine, we have more real-life case studies – we talk to Hannah Flaherty and her mum, Sophia, about Hannah's experience following the development of a sudden and severe squint. You can also read about little Rian King, who at just one month old, contracted bacterial meningitis.

This edition also includes stories about one of our surgeons leading the way in treating glaucoma, the Moving Forward programme for patients who have been treated for breast cancer, a national award for our stoma nurses, and our forthcoming staff awards event.

There's a reminder about the importance of getting your flu jab from our Medical Director, Paul Sigston, as well as all the latest news from our hospitals.

As always, you can test your general knowledge with our quiz, try the delicious recipe for gingerbread cake from our very own Maidstone Hospital League of Friends cook book, and find practical advice about local services available to you.

Don't forget, we would really like 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 and healthy autumn - we'll see you in winter!

The Patient First team

Contacts

If you have a story to tell us, please contact us.

Communications Team: **01622 228658**

Communications email: **mtw-tr.communications@nhs.net**

For any general enquiries or advice, please contact our Trust switchboard or visit our website.

Maidstone Hospital: **01622 729000**

Tunbridge Wells Hospital: **01892 823535**

Website: **www.mtw.nhs.uk**

Contents

p5



p8



p10



5 Moving Forward

Read about the new course for patients who have had breast cancer treatment.

6 UK Power Networks

Could they help you in a winter emergency?

8 Hannah Flaherty

Find out about 9 year old Hannah's experience with us when she was treated for a sudden and severe eye condition.

10 Rian King

Read about little Rian King's recovery from bacterial meningitis this year.

12 Edith Cavell centenary

Discover the history behind the famous Maidstone nurse whose execution was 100 years ago.

14 Executive Team Update

A reminder from our Medical Director, Paul Sigston, about the importance of having your flu jab.

Find us @MTWnhs #patientfirst



Like us and join in the conversation
www.facebook.com/mymtwhealthcare



Linked In at www.linkedin.com/company/maidstone-and-tunbridge-wells-nhs-trust



MTW SURGEON LEADS THE WAY IN EYE SURGERY

A consultant ophthalmic surgeon from Maidstone and Tunbridge Wells NHS Trust (MTW) is one of only four surgeons in Europe to have carried out a ground-breaking new treatment for glaucoma in over 100 cases.

The treatment, which involves injecting a tiny pliable tube (a XEN gel stent) into the eye to drain excess fluid and relieve pressure, is available at MTW – one of only three NHS hospitals in the UK.

Professor Ejaz Ansari leads an award-winning team from the Trust that completed a Europe-wide research study on the procedure and found very encouraging results.

Over 600,000 people in Britain suffer from glaucoma, a permanent narrowing of vision usually caused by damage to the optic nerve, resulting from an excessive build-up of fluid in the eye. As optic nerve damage gets worse, the visual field progressively narrows. Up until now, this condition has been treated with specialist eye drops, laser eye surgery and surgical procedures such as trabeculectomy and tube shunt surgery.

Trabeculectomy and tube surgery are quite invasive procedures with a long period of recovery. However, the XEN gel stent is delivered directly by hypodermic needle into the eye. The tube is 6mm long and the width of a human hair. Surgery takes no more than a few minutes and is carried out under general or local anaesthetic as a day case procedure.



Professor Ejaz Ansari

Most patients recover fully within four weeks.

Professor Ansari commented: "The technique using the XEN gel stent is much less invasive than other procedures and there tends to be fewer complications and fewer post-operative restrictions for patients. Usually, patients recover quickly and the results are very good.

"I am delighted that we, at MTW, are only one of a handful of centres in the world able to offer this innovative procedure – I think it reinforces that we are committed to researching the latest techniques and doing everything we can to offer the best possible service to our patients."



STAFF STARS AWARDS 2015

The deadline to nominate a member of staff or team for a Staff Star Award is fast approaching – entry forms must be received by 6pm on Monday 5 October.

The categories for awards are:

- Patient First
- Respect
- Innovation
- Delivery
- Excellence
- Sylvia Denton Award for Care and Compassion
- Volunteer of the Year
- Team of the Year
- Employee of the Year

You can vote by visiting: <https://www.surveymonkey.com/r/StaffStarsAwards2015>

This year's Staff Stars Awards ceremony will be held at the Hop Farm in Paddock Wood on Friday 20 November.

NEWS FROM YOUR

Providing support to cardiac patients in hospital and at home

Cardiac nurses, based in hospitals and the community, are now working more closely than ever to ensure patients recovering from, or living with, heart problems receive the best possible care and support when they return home from hospital, as well as while they are hospital in-patients.

Maidstone and Tunbridge Wells NHS Trust's Cardiac Rehabilitation service ensures patients and their carers are provided with quality advice, information and support, during recovery from cardiac events, whether the patients are in hospital or back at home.

The advice and information, together with a supervised exercise programme, is provided either within the hospitals, in local sport centres or via home monitoring. It helps patients understand their diagnosis and treatment, improve their overall health and fitness and look forward to returning to work or resuming an active and positive life.

Diane Kidman, Senior Cardiac Nurse at the Trust, said: "It is always an emotional and stressful time for patients and carers



after a diagnosis of heart disease. Understanding the treatments available, such as medicine, stents, cardiac surgery such as coronary artery bypass grafts, replacement cardiac valve surgery or indeed devices such as pacemakers, can be very daunting. Cardiac nurses can help a patient to make sense of these treatments and options, and are able to support patients through diagnosis, treatment and recovery phases.

"Our new and improved service means we are now able to offer our patients a health education programme, with a team of pharmacists, dieticians, resuscitation officers, occupational therapists and psychologists as well as cardiac nurses.

"During the programme, we discuss everything – from medication, healthy eating, relaxation, stress management and other areas such as cardiac investigations, to CPR, holiday safety, insurance concerns following heart events, blood pressure control and any other areas of concern, to aid recovery and to make sure patients feel well-informed and supported at all times."

Patients can be referred onto the programme by their GP or practice nurse, cardiologist, cardiac rehabilitation teams following cardiac surgery, heart failure nurse or any other primary care professionals.



National award for MTW Stoma Nurses

Two of our Stoma Nurses have won a national award, which recognises 'outstanding stoma care and exemplary service within a stoma care department'.

Judy Mallett and Kirsty Craven were presented with the Colostomy Association Purple Iris award in July when they attended the charity's open day and annual gala dinner in Reading.

The award nominations are made by patients who want to recognise outstanding care they have received from individuals or departments.



Fundraising success!

The Maidstone Hospital League of Friends book shop has passed £250,000 in book sales!

The shop is based in the main reception area of the hospital and is run entirely by volunteers. It was established in the mid-1980s.

Olive Barton, the volunteer manager of the bookshop said: "Reaching £250,000 in book sales is a fantastic achievement of which we are very proud. I wish to thank all our customers who have supported the League of Friends bookshop for many years and also, my team of dedicated volunteers."

Also, the Maidstone Hospital League of Friends summer fete held in early September raised an impressive £3248! Thanks to everyone who came and contributed.

Anyone who is interested in volunteering for the Maidstone Hospital League of Friends should contact Joyce Langton, Chairman, on 01622 224326.

HOSPITALS

Maidstone Hospital League of Friends donate equipment for cancer patients

Some brand new, specialist equipment was officially handed over by the Maidstone Hospital League of Friends to staff from the Kent Oncology Centre last week.

The nasendoscope and light source, which cost £10,000, were purchased and donated by the League of Friends to benefit patients with head and neck cancer.

Jayne Goddard, a nurse in Head and Neck Outpatients, said, "We are thrilled to have received a flexible nasendoscope and light source from the League of Friends. The equipment will be used in the diagnosis and follow-up care for our head and neck cancer patients. It will help us examine the throat and vocal cords quickly and effectively so will be of

huge benefit to the department, and most importantly, those we care for. We can't thank the League of Friends enough for their continued support and generosity."

Joyce Langton, Chairman of the Maidstone Hospital League of Friends said: "We are delighted to be able to donate this equipment to the Head and Neck Outpatients department and we hope it will be of great use and assistance to patients."



Moving Forward course for patients who have recently undergone breast cancer treatment

A new programme for patients who have been treated for breast cancer will start at Maidstone and Tunbridge Wells NHS Trust (MTW) in October.

The Moving Forward programme, in association with Breast Cancer Care, will provide information, support and professional guidance on how to cope with, and adjust to, life after breast cancer treatment.

The course will be run in partnership with national charity, Breast Cancer Care, and is delivered as half day sessions over three or four weeks at both Maidstone and Tunbridge Wells hospitals. It will be run by the clinical teams at the hospitals. A range of expert speakers will speak with patients on topics including healthy eating, exercise, cancer fatigue and relationships.

It's open to all patients with a recent diagnosis of primary breast cancer who are coming to the end of, or who have



recently completed, their hospital-based treatment.

Consultant Clinical Oncologist, Dr Rema Jyothirmayi, said: "It can be difficult to adapt to life

after treatment for breast cancer and some people need support in adjusting. Whether someone is experiencing physical side effects of treatment or is just feeling anxious about their breast cancer experience, the Moving Forward course can really help them to make steps to move on to the next part of their lives.

"We hope this course will help many of our patients to feel supported and informed."

If you would like to find out more, and for dates and times, please contact your Clinical Nurse Specialist, or call Breast Cancer Care - 0345 077 1893 or via email: movingforward@breastcancercare.org.uk

Local WI donate hand-made comforters for dementia patients

Representatives from the Aylesford and Eccles WI came into Pye Oliver ward at Maidstone Hospital, a few weeks ago, to hand over more than 50 comfort blankets and muffs, made especially for dementia patients.

The hand-made comforters are created using a variety of fabrics and materials and have attachments that patients can touch and explore.

Patient Experience Matron, Christine Steele, explained: "Some dementia patients can become agitated and these blankets and muffs help to calm them down. Having something tactile to hold on to can really comfort our patients, and these have the added benefit of having other textures and elements to provide interest and stimulation."

Patients are given a single blanket or muff to keep while they are in hospital which they can then take home with them, as a comforter. They are all made with materials which can be taken with a patient into a scan or x-ray without issue.

Ann Butterworth, from Aylesford and Eccles WI said, "The idea came from my daughter who asked if the ladies at the WI fancied a bit of a project! She works in Redhill but we wanted to make some for our local hospital so I phoned and mentioned the idea to Christine Steele.

"She had never heard of this kind of comforter so I brought one in to show her and she thought they were fantastic."

Ladies from the WI will continue to make the comforters for dementia patients at Maidstone but would benefit greatly from donations of ribbon, small soft toys, material, different types of wool, sewing cotton and large buttons. If you are able to make a donation, you can leave it in a designated box at the main reception desk of Maidstone Hospital.



COULD UK POWER NETWORKS HELP YOU IN A WINTER EMERGENCY?

With winter approaching, it's important we are all prepared for severe weather and any possible emergencies – it just takes a few simple steps to make sure you are ready...

What to do:

Put together an emergency pack, which should include:

- list of emergency contact numbers
- analogue phone or portable mobile phone charger
- battery operated or wind up torch and radio
- spare batteries if needed
- essential medication
- three days' supply of bottled water and ready-to-eat food that won't spoil
- winter clothes and spare blankets
- regularly check weather forecasts
- plan for alternative ways to keep warm if your heating is disrupted

If you or someone you know needs extra support during a power cut, then you may want to sign up for the UK Power Networks Priority Service Register. This is a free service offered to customers who are dependent on medical equipment; customers who are chronically sick or have a disability; customers who are blind, visually impaired or deaf; customers with young babies; nursing or residential homes and elderly customers.



What UK Power Networks can do:

They can't get your power back on more quickly but they can:

- Call you pro-actively if bad weather is expected in your area that could result in a power cut and offer useful advice on how to prepare
- Offer you a special priority phone number that you can call if you have a power cut
- Keep you updated during a power cut, either by sending you text messages or calling you

With your agreement, they can ask the British Red Cross to visit your home for extra help and support

How to apply:

If you or someone you know, meets the criteria outlined above, then please apply by either:

- Calling on 0800 31 63 105 (from a landline) or 0333 32 32 105 (from a mobile)
- Emailing psr@ukpowernetworks.co.uk
- Writing to Customer Relations team, UK Power Networks, Fore Hamlet, Ipswich, IP3 8AA
- Applying online at: www.ukpowernetworks.co.uk/priority



SATELLITE CLINIC FOR DIABETES PATIENTS

Maidstone and Tunbridge Wells NHS Trust (MTW) has set up a second diabetes satellite clinic in Staplehurst.

The clinic is run every two months by Consultant Dr Jesse Kumar and Diabetes Specialist Nurse, Holly Roche, who are based at Maidstone Hospital. The first clinic was held in August this year.

Holly said, "Staplehurst Health centre is a prime location for us to offer care locally for patients from areas such as Marden, Cranbrook, Hawkhurst and Sissinghurst.

"The clinic runs on a Monday morning and offers patients a 20 to 30 minute appointment. At the moment, Dr Kumar is able to see nine patients during the clinic and I can see seven.

"We are hoping to develop the clinic over the coming months to add a podiatry and dietician input. We think the clinic is a real asset to our existing diabetes service."

The first satellite clinic was set up at Sevenoaks Hospital around 18 months ago and is run by Tunbridge Wells Hospital staff.



HOSPITAL RADIO AT MAIDSTONE

For over 50 years, Hospital Radio Maidstone has provided patients with a brilliant in-house, radio service. We broadcast 24 hours a day, seven days a week and we believe that music and entertainment are a fantastic tonic to assist you with a speedy recovery.

We broadcast using our digital jukebox system during weekdays and nights, however, during weekday evenings, from 7pm until 10pm, and throughout the weekend, we offer live broadcasting from our dedicated presenting volunteers. Best of all, our service is completely free of charge.

So you can hear us, most wards are equipped with a face plate at the back of the beds. On this face plate, there is a dial which, when tuned to channel 1, will broadcast hits from the 1970's right up until the present day, this station is known as 'Energy'.

Our other station called 'Choice' broadcasts on Channel 3 from the same dial. Choice plays music from the 1920's right up until the 1970's. If you like musicals and show tunes then Choice is the place for you. Just ask a nurse or someone from your ward for assistance.

A few of the wards do not have the face plate facility behind the bed, and if this is the case, you can tune in via the internet. To listen to our Energy channel, simply download the free TuneIn app (available via iTunes, Google Play and Windows, through your smartphone or tablet device). If you are listening to us on your laptop, then please visit www.hrm.org.uk and click on the play icon at the top of the site.

The hospital and the League of Friends have kindly provided a free WiFi service which will allow you to listen to us throughout the day and night and it won't cost you a penny!

And please, get involved – you can request a song from one of our friendly requests collectors that come to the wards or you can:

- Call us free from the Nurses' station on 24747
- Call us from your mobile: 01622 224747
- E-mail us: requests@hrm.org.uk
- Text us on: 07594 566 790

If you like what you hear, then once you are home, you can still listen to us by simply using the internet methods as mentioned above.

The Team at Hospital Radio Maidstone

Patients in Tunbridge Wells Hospital can listen to Hospital Radio via TV channel 705 on the plasma TV screens in each room, or via mobile phone or tablet using the free WiFi service throughout the hospital and by visiting the Hospital Radio website at www.hrtw.org.uk

Patients and staff can contact the Hospital Radio team on 01892 528528 or by emailing studio@hrtw.org.uk

On Twitter, it's @HRTunWells and there's a Facebook page too. Lastly, you can text them by starting your message with HRTW and sending it to 60777.

NEW EQUIPMENT BENEFITS PROSTATE CANCER PATIENTS

Earlier this year, the Prostate Brachytherapy team at the Kent Oncology Centre performed their first '4Dimensional Brachytherapy implant', using a new specialised piece of equipment called a 'Manual IsoLoader'.



Brachytherapy is a type of internal radiotherapy. There are two types – seed implantation (low dose rate therapy) and high dose rate therapy. Both types treat prostate cancer with radiation from inside the prostate gland but there are differences in the way you have the treatment.

Seed implantation means that the radiotherapy doctor puts between 80 and 120 radioactive seeds into the patient's prostate gland. The seeds stay in the prostate and release radiation slowly for a few months. Over this time, the prostate receives a high dose of radiation. The radiation does not travel very far in the body so the healthy tissues around the prostate gland receive a much smaller dose than the prostate itself, and after a few months the radiation in the seeds fades away.

Prior to using the 4Dimensional Brachytherapy implant, a technique developed at the Royal Surrey Hospital in Guildford, patients attended the department on three separate occasions. During one of those appointments, the patient would have a detailed ultrasound study of the prostate. This would involve taking multiple images with a probe to identify the placement for the seeds - the procedure to place them would then take place around four weeks later.

However, the new technique requires just a few quick ultrasound measurements to be taken of the prostate prior to the implant. The technique uses ultrasound to implant a combination of seed strands around the edge and within the centre of the prostate gland. Many of the seed strands are built on a new specialised piece of equipment called a 'Manual IsoLoader'. As the implant is performed, everything is captured and monitored on our computer planning system. This means that we can continue to make adjustments during the procedure, which ensures the position of the seeds and the overall implant provides an ideal dose of radiotherapy within the prostate.

This new improved technique means that we can accurately plan and perform the procedure on the same day. Also, the ultrasound taken to calculate the number of seeds is much faster, less invasive, and is more comfortable for the patients.

While the length of the procedure is much the same as previously, the amount of time pre-planning the implantation of the seeds is reduced. Also, the dosing is more accurate and outcomes may improve as a result.

Christine Richards, Head of Radiotherapy Services, said: "Using the new equipment gives us the ability to accurately view the dose of radiotherapy being delivered to the prostate and to interactively customise the implant during the procedure, which is a very positive advance in the treatment of our prostate cancer patients. We hope this procedure will benefit patients in terms of them spending less time at appointments and also, from an outcome perspective."

Case study



THE FUTURE'S LOOKING BRIGHT

Nine-year-old **Hannah Flaherty**, from Maidstone, had no history of eye problems when, last year, her left eye inexplicably turned inwards and she began to suffer from severe double vision. Here, Hannah, and her mum, Sophia, tell us about Hannah's journey to recovery.

"It was a Saturday morning last year while Hannah was at home with her dad when she suddenly said she could see two of everything. When my husband, Ben, looked at her, he saw immediately that her left eye had turned completely inwards," said Sophia. "I came home shortly afterwards and could see immediately that something wasn't right."

Sophia and Ben took Hannah to the A&E department at Maidstone hospital where they were seen by a doctor and asked to attend Tunbridge Wells for tests and a scan.

"Everyone was great," said Sophia, "the eye department at Tunbridge Wells was closed but Dr Anna-Karin Hållbus actually opened it back up just for us. Hannah was given lots of different eye tests to try and work out what had happened."

"It was established from the tests that there was nothing wrong with the eye itself and no physical reason that it had turned, affecting Hannah's vision. This led the doctor to think that the problem

might be coming from Hannah's brain. An examination of the optic nerve can establish this and although Hannah's looked normal, an underlying brain issue couldn't be ruled out because everything else appeared normal. On that basis, it was decided the next step would be an MRI."

An MRI (Magnetic Resonance Imaging) is a type of scan that uses strong magnetic fields and radio waves to produce detailed images of inside the body.

On Monday, Sophia received a call asking her to bring Hannah in to hospital for the MRI. The results showed nothing unusual so the cause of Hannah's double vision and eye position were still unclear. Hannah was referred from Paediatrics back to the Orthoptics department for further investigation.

"Everyone in Paediatrics and in Orthoptics was wonderful and their first concern was to try and correct the double vision that Hannah was experiencing constantly," said Sophia.

Hannah was fitted with glasses which had a normal lens on the right and a

lens with a prism fitted on the left, to try and counter the double vision. During the same visit, Hannah saw Mr Adam Bates, Consultant Ophthalmologist, who advised treating the problem by injecting Botulinum toxin (also known as Botox) into one of the muscles around the eye to try to reposition it.

The procedure was carried out but, unfortunately, it didn't work well for Hannah and her double vision worsened so she could see two of everything vertically as well as horizontally.

"Because the double vision was so severe, Hannah's glasses were adjusted with prisms attached to both lenses. While this enabled her to see in single vision again, it compromised the quality of what she was seeing, so everything was blurry. Although it was much better for her to have her single vision back, the blurriness did present an issue with her being able to do things such as reading and writing so it was really hard for her," said Sophia.

It was decided by Hannah's parents and Mr Bates that Hannah would undergo surgery to cut the eye muscles around her left eye, then reattach them to reposition the eye. While it was hoped that the procedure would correct Hannah's double vision, it couldn't be guaranteed and it was expected that Hannah would still need a prism built into her glasses.

The surgery took place at Maidstone hospital on 1 June 2015, the day before Hannah's ninth birthday. When she came round, Hannah said immediately that she had single vision.

Sophia said, "We were a little dubious, at first, about Hannah having single vision

after her operation because her eye had gone from being turned in completely to the right, to all the way out to the left, post-operatively. It had been explained that this could happen and that they eye would, hopefully, slowly return to the middle, where it should be.

"We just couldn't understand how she had double vision with her eye turned in to the right, but not with it turned out to the left! Even though she was adamant she had single vision, we didn't want to get our hopes up too much at first."

Hannah added, "I was really tired after the operation and my eyes felt really heavy to open so I couldn't open them for long. I knew straight away that my vision was better though."

It was confirmed quickly that the operation had been a success - Hannah's vision was normal and she no longer needed to wear glasses.

"It was established that the problem had probably occurred in the first place because Hannah had a microscopic squint which had never been diagnosed," said Sophia, "The likelihood is that her brain had suppressed the squint for years and then one day, it just couldn't cope with it anymore and very suddenly it became extremely severe. Thankfully, the surgery worked unbelievably well – even Mr Bates said he hadn't expected it to be so successful.

"When our Orthoptist, Ruth Parker, saw Hannah waiting for a post-surgery, follow-up appointment in the clinic, wearing no glasses, she was so excited! The next appointment Hannah has is just a routine check, which is brilliant."

Hannah's eye recovered quickly, with just one slight setback when she attended A&E about a week after the operation because a stitch had come out and was trapped under her eyelid, which was quite painful.

Sophia said, "We can't fault the treatment Hannah has had from both hospitals. Everyone we have seen has been fantastic. Ruth Parker, in particular, was a wonder. She was amazing with Hannah and made us feel so at ease. All the staff dealt with Hannah's concerns in the best possible way which helped so much."

Hannah said, "I was really worried before I came in to the hospital but when I met everyone I wasn't worried anymore. They were all so nice and wanted to help me. It made me realise I had to have horrible things done for a good reason."

Sophia added, "Before you go through something like this, you think doctors are unapproachable but I realised very quickly, in actual fact, they were all on our side and here to help. If I emailed or phoned, I got a response and I knew no one minded me asking for help or advice.

"We are so grateful for the treatment Hannah has received. I can't fault a thing."

MRI

MRI stands for Magnetic Resonance Imaging which is a type of scan that creates 2 and 3-dimensional images of the body and can show disease inside it. The patient lies on a bed which moves inside a small tunnel and then a powerful magnet creates radio waves that pass through the body. Unlike x-rays and CT scanning there is no radiation used that may have an ill effect on the body.

Squint

A squint or a strabismus is a misalignment of the eyes (where they point in different directions). Squints are common and affect around one in 20 children. They usually develop before five years of age but can appear later. They are treated in a number of ways including the wearing of glasses, eye exercises, Botulinum injections into the eye muscles, or more unusually, surgery.

Double vision

This means seeing two images of an object. The two images may be on top of one another, side by side or a mix of both. Hannah had 'binocular' double vision caused by both eyes failing to work together properly.

Ruth Parker, Orthoptist Clinical Tutor, said:

"It has been an absolute pleasure looking after Hannah and her family. She is now so proficient at the Orthoptic assessment, I wonder if she will become an Orthoptist! I wish her well for the future."



Mr Adam Bates, Consultant Ophthalmologist, explains how Botox can help to reposition a patient's eye:

"An injection of Botulinum toxin (Botox) into one of the muscles that moves the eyes can be very effective in correcting a turn of one eye but it often wears off over two to three months.

"It is more likely to be helpful in adults, as they can have drops to completely numb the eye that is injected. Children usually need to have a general anaesthetic for the injection and that can make it hard to detect the eye muscle's electrical signal which is used to make sure the injection is in the right place.

"A Botulinum toxin injection is often used to see how the patient feels with the eyes straightened before doing surgery to physically move the eye muscles."



Case study

QUICK ACTION SAVES RIAN

When **Matt and Jenny King's** four-week-old son, **Rian**, caught a cold and developed an ear infection, neither one of them thought it would lead, just days later, to a diagnosis of bacterial meningitis. Here, we talk to the family about their experience...

Rian King was born on 23 April 2015, at Tunbridge Wells Hospital, four and a half weeks early. Although he was small, he was well and the family were delighted to bring him home to their house in Maidstone and their five year old daughter, Aimee.

As second-time parents, neither Matt or Jenny were over-concerned when Rian caught a cold a few weeks later. Unfortunately, the cold brought with it a nasty ear infection and they took Rian to their GP, who prescribed ear drops.

A couple of days later, on Saturday 23 May, Matt came home from work to find that Rian was very unwell. His skin was grey, he was lethargic and he had little interest in feeding so Matt and Jenny decided to take him straight to A&E at Maidstone Hospital.

"The staff were amazing," said Matt, "We were seen almost

straight away and the nurses looking after us made sure a doctor saw us as quickly as possible. At the time, they were finding it really difficult to get any readings from Rian but the doctor knew just by seeing him that he was very unwell. They decided to transfer us to Tunbridge Wells Hospital, and phoned ahead to warn them that a very poorly baby would be arriving shortly.

"I am certain that if it wasn't for the staff at Maidstone A&E, and the doctor in particular because he acted so quickly, Rian wouldn't have made it."

An ambulance rushed Rian, with Jenny, to Tunbridge Wells Hospital. By the time Matt arrived, Rian had been taken to resuscitation (resus) area and was on a ventilator. The resus area of an A&E department is where the most seriously ill patients are cared for.

Matt said, "When I arrived, Rian and Jenny were in a cubicle with about ten members of staff. We saw Dr Hamudi Kisat, a Paediatric Consultant, and he and the rest of the team were brilliant. While they were not certain what was wrong with Rian, they explained everything to us as it happened which was a great help. The thing that seemed to be of most concern was his heart rate which was around 250 beats per minute, when a normal rate for a young baby is somewhere between 120 and 180.

"The staff at the hospital managed to stabilise him and a

decision was made to transfer him to the Evelina London Children's Hospital.

"An ambulance arrived with a doctor from the Evelina to collect Rian, and us, from Tunbridge Wells. I remember the doctor from London telling Dr Kisat he had done a wonderful job before we left, which was good to hear."

Once at the Evelina London Children's Hospital, Rian's heart was stopped three times to try and slow it down and he was given CT and MRI scans, which confirmed he had bacterial meningitis. He was given antibiotics immediately and remained on a ventilator in the Intensive Care Unit.

"We were at the Evelina for about five days," said Matt, "While we were there, staff tried a lumbar puncture to drain some fluid that had built up around Rian's spine and brain but it didn't work especially well. In fact one of the procedures was carried out by Dr Ranj who is on Cbeebies, someone we are very familiar with due to our five year old daughter, Aimee – it was rather surreal!

"Eventually, a neurologist from Kings College Hospital came to see Rian at the Evelina and drained fluid from his brain via his fontanel (the soft part of a baby's head) which worked really well. Rian was transferred to King's not long



after so they could monitor the neurological side of his illness."

Once in the Intensive Care Unit at King's College Hospital, thankfully, Rian started to improve. He was taken off the ventilator and started to breathe on his own, and he also started to feed via a feeding tube.

After three days at King's, Rian was taken back to Hedgehog Children's Ward at Tunbridge Wells Hospital to continue his recovery.

Jenny said, "We were there for five or six days and everyone was brilliant, they were really caring and made sure we were always updated with what was going on. Rian seemed so much better – it was very hard to tell how he was doing before, when he was sedated and wired to so many pieces of equipment."

Matt added, "This whole experience has renewed my faith in the NHS to deal with really serious situations. While I haven't had any major issues or problems with the service, it's easy to moan about little things like waiting times – but I won't moan again! Even the concessionary parking charges, for patients and visitors who have to come to the hospital frequently or for long periods of time, are brilliant and saved me a fortune. Just something small like

that took away a lot of potential stress at what was quite literally the worst time of our lives."

Rian is now home and well, and under the care of Dr Hamudi Kisat, as an outpatient. Dr Kisat will monitor his progress every two or three months over the next couple of years.

"We are so pleased we have Dr Kisat to keep an eye on Rian and check his progress. He's been brilliant – he really cares and even at the worst moments, he just seemed to really want Rian to get better. We can't thank him, and all the other staff who cared for Rian, enough," Matt said, "It has been a really tough time for us but we have had a lot of support from our family and my employers, which has been a massive help.

"Our advice to anyone who finds themselves in a similar position to us is, if you have any concerns or something doesn't seem right, take your child to hospital and get checked at the earliest opportunity. It was the quick actions of the Maidstone A&E staff initially that probably saved Rian's life.

"He's now a happy, healthy and alert baby boy who seems to be doing everything he should be. We can't say thank you enough."



About Meningitis

Meningitis is an infection of the protective membranes that surround the brain and spinal cord. This infection causes these membranes (the meninges) to become inflamed, which in some cases can damage the nerves and brain.

Types of meningitis:

There are two types of meningitis. They are:

bacterial meningitis – caused by bacteria such as *Neisseria meningitis* or *Streptococcus pneumoniae* and through close contact. Bacterial meningitis is very serious and should be treated as a medical emergency. If the bacterial infection is left untreated, it can cause severe brain damage and infect the blood (septicaemia).

viral meningitis – caused by viruses that can be spread through coughing, sneezing and poor hygiene. Viral meningitis is the most common, and less serious, type of meningitis.

Signs and symptoms of meningitis

Anyone can get meningitis, but babies and young children under five years of age are most at risk. A baby or young child with meningitis may: have a high fever, with cold hands and feet; vomit and refuse to feed; feel agitated and not want to be picked up; become drowsy, floppy and unresponsive; grunt or breathe rapidly; have an unusual high-pitched or moaning cry; have pale, blotchy skin, and a red rash that doesn't fade when a glass is rolled over it; have a tense, bulging soft spot on their head (fontanelle); have a stiff neck and dislike bright lights; have convulsions or seizures.

The above symptoms can appear in any order, and some may not appear at all.

The rash can be harder to see on dark skin, in which case check for spots on paler areas like the palms of the hands, soles of the feet, on the tummy, inside the eyelids and on the roof of the mouth.

However, don't wait for a rash to develop. If your child is unwell and getting worse, seek medical help immediately.

The glass test

If you press the side of a clear glass firmly against the skin and the rash doesn't fade, it's a sign of meningococcal septicaemia. A person with septicaemia may have a rash of tiny "pin pricks" that later develops into purple bruising. A fever with a rash that doesn't fade under pressure is a medical emergency, and you should seek immediate medical help.

For more information, please visit www.nhs.uk

The respiratory integrated care pathway

Of the 694,500 patients in West Kent, 8,700 have Chronic Obstructive Pulmonary Disease (COPD) and it is believed that a further 6,500 patients are undiagnosed.

People with COPD have difficulties breathing, primarily due to the narrowing of their airways, this is called airflow obstruction and it is not fully reversible. It is predominantly caused by smoking but other factors can contribute to its development.

Those most at risk of COPD are patients over 35-years-old and smokers, who have one or more of the following symptoms:

- breathlessness
- chronic cough
- regular sputum production
- frequent winter bronchitis
- wheeze

A Home Oxygen Service assessment and review was carried out as some patients had been on oxygen for years with no reassessment, and often the equipment

was not meeting the needs of the patients. Also, the number of patients requiring oxygen was rapidly increasing.

Since the review, the number of patients on oxygen has remained steady, with those being taken off oxygen matching those who are starting.

The team also carry out reassessments for deteriorating patients in the hope of avoiding admission to hospital.

If patients are admitted, they are offered a Pulmonary Rehabilitation referral, a stop smoking referral (if relevant), help with a self-management plan, given inhaler technique advice and a follow up is carried out once they are home.

There are also specialist community teams to assist patients once they have been discharged. They deal with symptom control, exercise therapy, monitoring and helping to prevent readmission to hospital.

Pulmonary Rehabilitation sessions are run in community venues across West Kent. In 2014, 173 patients completed the course and 370 were offered an assessment.

Patient satisfaction for the course was 95% and 10 patients have subsequently stopped smoking following a referral to the smoking cessation advisor. In addition, all patients have improved in at least one of the outcome measures.

EDITH CAVELL – WHAT'S THE LOCAL CONNECTION?



This year marks the 100th anniversary of the execution of nurse Edith Cavell.

Edith was born in 1865 in Norfolk, but she moved to Belgium before returning to care for her sick father. It was then she decided to train as nurse at the Royal London Hospital. She was not a model student - in fact, her Matron said that she was unpunctual and not a nurse who could be relied on!

It was during her training that she was sent to Maidstone to help during the Typhoid emergency. The Maidstone outbreak was the biggest in the UK, affecting over 1847 people - 132 of whom died.

Once the outbreak was over, nurses were given the Maidstone Medal for their services. This remains the only honour that Edith received.

In 1907 she moved to Belgium and eventually became Matron of

the first Nurse Training School.

At the outbreak of war in 1914 she was visiting family in the UK and quickly travelled back to Belgium. She set about nursing soldiers from all sides, regardless of background, race or rank, and did her best to smuggle British and Allied soldiers through neutral Holland to safety. The German forces suspected her and she was arrested. After a long investigation they convicted her and she was sentenced to death.

Despite international condemnation, she was executed by firing squad at dawn on October 15th 1915.

On the eve of her death she famously said, "Patriotism is not enough - I must have no hatred or bitterness towards anyone."

Her memorial in central London carries these words and a fund set up in her memory still helps nurses today.

Autumn recipe

Gingerbread cake

Ingredients:

1lb plain flour
6oz butter
6oz sugar
1 large tsp bicarbonate of soda
2 tsp cinnamon
2 tsp ginger
1 tsp mixed spice
1 egg
1 cup milk
2 tbsp golden syrup
3 tbsp black treacle
Sultanas or raisins (optional)

Method:

Put milk, butter, treacle and syrup into a pan to melt. Do not allow to boil. Mix all dry ingredients. Add sultanas or raisins if using. Mix in the egg and then add the melted mixture. Put the mixture into a lined 8 inch cake tin or 1lb loaf tin. Bake for one and half hours in a warm oven at 180°C/375°F/gas mark 4

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.



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

patientfirst AUTUMN QUIZ

Geography:

1. O'Hare airport is the busiest in the world. Which American city does it serve?
2. If all the traditional counties of England were listed alphabetically, which would come first?

History:

3. Who was assassinated at the theatre by John Wilkes Booth?
4. According to legend, which creatures did Saint Patrick banish from Ireland?

Art & Literature:

5. What is the name of Long John Silver's parrot?
6. In which art gallery would you find Leonardo da Vinci's Mona Lisa?

Food/dining:

7. Which ingredient forms the main part of hummus?
8. Which spirit forms the basis of a 'Singapore Sling' cocktail?

Entertainment

9. How many series of the hit US sitcom 'Friends' were made?
10. Which two actors played 'Alfie' in the 1966 and 2004 films of the same name?

Sport:

11. In cricket, how many matches generally make up an Ashes Test series?
12. Who won the men's singles at Wimbledon in 1985 at the age of just 17?

(Answers on p14)

Are you looking for a new professional challenge?

Maidstone and Tunbridge Wells NHS Trust are currently recruiting nurses to work at both hospitals in a variety of roles.

Are you a registered nurse looking for a change? Or are you looking at getting back into nursing after a break? If so, please keep a look out for vacancies that we have, and for recruitment open days that we will be holding.

We promote events and some vacancies on social media (see below) and you can also check NHS jobs by visiting www.jobs.nhs.uk

Find us @MTWnhs #patientfirst



Like us and join in the conversation
www.facebook.com/mymtwhealthcare



Linked In at www.linkedin.com/company/maidstone-and-tunbridge-wells-nhs-trust



Executive Team Update

Paul Sigston, Medical Director



Although most of us aren't quite ready for summer to end and the colder seasons to start, it's important that those of us who are more at risk have thought about having a free flu vaccination.

Flu is a highly infectious disease with symptoms that come on very quickly. The most common symptoms are fever, chills, headache, aches and pains in the joints and muscles and extreme tiredness. In most cases, the symptoms are quite mild but, in others, they can be very serious. Because it's caused by viruses and not bacteria, antibiotics won't treat the flu.

While you can help reduce the risk of flu with good hand hygiene, the best way to avoid catching and spreading it, is by having the vaccination before the flu season starts.

Almost anyone can have the vaccine but you should not be vaccinated if you have had a serious allergy to the vaccine, or any of its ingredients, in the past. If you are allergic to hen's eggs or have a condition that weakens your immune system, you may not be able to

have certain types of flu vaccine – you can check with your GP.

The flu vaccine is routinely offered annually, free of charge and by injection, to adults over the age of 18 at risk of flu (including everyone aged 65 and over) and to children aged six months to two years at risk of flu.

The flu vaccine is routinely given as an annual nasal spray to healthy children aged two, three and four years, children in school years one and two, and children aged two to 17 at particular risk of flu.

But, even if you feel healthy, you should have it if you are:

- Aged 65 or over
- Living in a residential or nursing home
- The main carer of an older or disabled person
- A household contact of an immunocompromised person
- A health or social care worker
- Pregnant
- Or have:
- A heart problem
- A chest complaint or breathing

difficulties, including bronchitis or emphysema

- A kidney disease
- Lowered immunity due to a disease or treatment (such as steroid medication or cancer treatment)
- Liver disease
- Had a stroke or transient ischaemic attack (TIA)
- Diabetes
- A neurological condition, for example multiple sclerosis (MS) or cerebral palsy
- A problem with your spleen, for example sickle cell disease, or you have had your spleen removed.

Please make sure you protect yourself and others this winter – get your vaccination. If you want more information, or if you have questions, contact your GP surgery or visit <http://www.nhs.uk/conditions/vaccinations/pages/flu-influenza-vaccine>

Paul

Coastguard helicopter pays a visit

The Trust has recently welcomed an unusual visitor to our hospitals in the shape of a Coastguard Search & Rescue helicopter.

The new crews based at Lydd in Kent have replaced the yellow RAF SeaKing helicopters and have been familiarising our staff with the new aircraft.

The visit, organised by our Emergency Planning Team, allowed our anaesthetists to climb on board and learn about the helicopter, which could, in the future, be used to transfer critical care patients. Our Security and Site Managers were also able to practice safe landing procedures and a number of porters experienced a 'hot landing', where they retrieved a patient from the helicopter with rotors still running!



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

Stop Smoking Service

For free NHS support to stop smoking contact the Stop Smoking Service on 0300 123 1968.

GP and dentist out of hours

Call 111

Pharmacy

Late night and Sunday pharmacies

Maidstone

[Link Pharmacy](#), 88a King Street, Maidstone – 01622 752990 (opening hours: Mon – Fri 6am – 11pm and Saturday 6am – 9pm)

[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

[East Street Pharmacy](#), 47 East Street, Tonbridge

(opening times, Monday to Saturday 7am to 10pm and Sunday 10am to 8pm) – 01732 770055

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

NEW SYSTEM TO ENHANCE MATERNITY RECORDS

The Maternity department at Maidstone and Tunbridge Wells NHS Trust (MTW) is getting ready to introduce a new IT system (EuroKing E3) which will digitalise records for mums-to-be. Previously, most records about a pregnancy and birth have been kept in the book provided to women at the start of their pregnancy, with just a proportion of those notes being added onto a computer system as well.

Now, midwives and other medical professionals will be able to add continuously to the record on the new system at every contact – for example, at clinic attendances, hospital

admissions, telephone contacts and home visits. Community midwives will be issued with a portable tablet to capture data when they are in the community and it will be possible for all the information captured at any point to be accessed by medical staff across the Trust. Pregnant women will still receive the traditional maternity record book too so they can also access their notes.

The EuroKing system will help make our maternity services as efficient as possible and will be of great benefit to staff and expectant mums.



 **EuroKing**

Get the jab Get flu safe

“Are you at risk from flu?”



Flu can be really serious. Getting a flu jab can protect you all winter. It's free if you are pregnant, over 65 or have a health condition such as severe asthma, diabetes, a chest, heart, liver or kidney complaint, or lowered immunity.

It's quick, safe and free. To book your jab, speak to your GP practice today.

