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Annual Public Meeting
Staff showcase services in new drop-in style exhibition
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**Inside News**

**THE Trust has several communication tools to help keep staff up to date:**
- Team Talk is sent round monthly, for use in all team briefings.
- The chief executive’s Monday Message is emailed on Mondays and contains Trust, local and national key issues.
- Weekly bulletins are emailed on Mondays and contain a range of operational and site information.
- Online copies of all the bulletins and Team Talk, plus more, can be found on the Trust intranet at nww.pat.nhs.uk/communications

You can send your stories for either Pennine News or for local media to Trust.communications@pat.nhs.uk or call Nicola Berry on 44284.

If you have any ideas, views or suggestions regarding communications across the Trust, please email staff.views@pat.nhs.uk

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**Stunning images help to create peace for patients**

UNDERGOING chemotherapy treatment can be a daunting and lonely time for patients as they have to spend many long hours undergoing hospital treatment and are often nursed in single rooms.

As part of a new relaxation and distraction method, patients can now watch therapeutic films when they are admitted to the haematology ward F11 at The Royal Oldham Hospital.

Catherine Wardley, Macmillan haematology clinical nurse specialist, successfully applied to the Kay Kendal Leukaemia Fund for a grant of £5000 to cover the cost of the films and licence to show them.

She said: “The films are nature images, either wildlife or beautiful scenery with music or natural sound such as birdsong or running water accompanying them.

“There have been a couple of studies looking into the effects of playing similar films which have shown them to be beneficial. Before applying for the grant I asked several patients to watch them and then asked them to complete a questionnaire, which were overwhelmingly positive.”

The films are quite short and can be played on a loop system. They are on a hard drive and attached to five TVs in the isolation rooms and also on the TV screens in the day unit, where day patients receive chemotherapy.

Catherine continued: “I wanted to get involved with this project as many of our patients are admitted for long periods of time, undergoing intensive chemotherapy and nursed in single side rooms. They are isolated from normal life and although we are as flexible as possible about visiting, they are isolated from family, friends and the freedom to just go out for fresh air.

“The emotional effects of the serious illnesses we treat on F11 cannot be underestimated and if we can help patients to cope better with all this by offering a way to relax and maybe an opportunity to offer a form of escape, if only for a short while, it can only be a good thing.”

One patient who watched the film said: “As a nature lover, I found the images relaxing and very easy to watch. I found it a very pleasant experience and some of the images were stunning.”

Artist Mark Minnard who put the films together, said: “I worked with patients and staff on ward F11 with my nature moving image installations which I have been co-developing with the NHS for over nine years.

“International research has shown that the benefits of nature related interventions can increase patients’ pain threshold by up to 52%, which helps them cope with their treatment better and they need fewer doses of strong pain medication.”

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**Anaesthetic trainees rewarded for audits**

THE NMGH anaesthetic department recently awarded three trainees with prize money for their excellent audit work from the Tema Knell Charity held by the department. The prize money is given to assist trainee anaesthetists with fees associated with attending educational meetings outside of the Trust.

First prize went to Dr John Gilbey for his audit on staff awareness of the location of emergency drugs and equipment. Runners-up were Dr Laura Cooper for her work on anaesthetic handover at North Manchester General Hospital CEPOD theatre and delivery suite; and Dr Jennifer Gwinnutt for her audit on paediatric post adeno-tonsillectomy nausea and vomiting.

Fatima ‘Tema’ Knell was an associate specialist anaesthetist who worked in the anaesthetic department at NMGH in the early 1980s with her consultant husband, John. She unfortunately succumbed to breast cancer whilst in post and her husband kindly set up a charitable trust fund in her name with the intention that funds donated would be put towards the education of future anaesthetists or medical students with an interest in anaesthesia.
GO make a difference! That was the main call to action for staff who attended the Trust’s first nursing and midwifery conference held in September.

Addressing a packed room of over 250 of the Trust’s nursing and midwifery staff and healthcare assistants, Mandie Sunderland, chief nurse, explained: “This is the Trust’s first major conference of this type for nursing; the first, I hope, of many. It is a real opportunity to celebrate what we do well as nurses and midwives here, to learn and get inspired from each other, and importantly to launch our new ‘3 Steps to Excellence’ Nursing & Midwifery initiative which will help us take nursing and midwifery forward.

The three year plan, ‘3 Steps to Excellence’, comprises four key work streams: professional image, standards of care, workforce, and patient experience.

The event, held at the Emirates Lancashire County Cricket Club in Trafford, comprised a number of inspirational keynote speakers. These included Tina Donnelly from RCN Wales who talked about her experience working out at Camp Bastion in Afghanistan, and Steve Cunningham from Blind Vision, along with his guide dog, Foster, who talked candidly about his incredible personal achievements and in overcoming his challenges after becoming blind early in his childhood.

One of Steve’s many achievements is being the fastest blind man on land and on water. After his motivational talk, he finished by saying: “In life there are challenges we all face. We can’t change the past. But we can change the present and the future. My son says of me; my dad doesn’t have a disability, but he has a different ability. Go make a difference.”

Two of our own nursing staff, Dr Val Finigan infant feeding coordinator, and Michelle Proudman from the leg circulation team within community services, also gave talks about their involvement in developing innovative services for patients. Both have been shortlisted for this year’s national Nursing Times Awards.

In the afternoon, staff took part in workshop discussions around key themes of the 3 Steps to Excellence strategy. Workshops included measuring care and workforce development. Staff also had the opportunity to view a variety of poster presentations developed by staff showcasing key areas of nursing success across their wards and departments.

Mandie added: “The public still have huge respect for nursing, but we as nurses are facing challenges. We need to refocus and return to what patients and their families want - and that is good care and compassion. Compassion and communication is just as important as technical skills. I want us to be proud to be a Pennine Acute Trust nurse or midwife. I want this Trust to be nationally recognised as the leading Trust for nursing and midwifery. I want people to be queuing down the road to want to work for us, whether newly qualified, those who want to move to us from other Trusts, and those who perhaps wish to get back into nursing.”

Three steps to excellence: with hearts, hands and minds

Pennine’s first nursing and midwifery conference

IT was announced to the press in July that the Greater Manchester Electronic Clinical Correspondence project had sent its one millionth electronic letter. There are 14 Trusts involved in the project in the Greater Manchester area, which enables GP practices, of which there are over 500 involved, to receive electronic copies of hospital letters regarding their patients. These letters include inpatient discharges, outpatient discharges and A&E attendance letters.

Paula Martin, senior project manager, said: “Whilst this is great news for the project, not to mention the GPs and more importantly patients, it is especially good news for the Trust as Pennine alone contributed 62,966 letters in July, making the Trust the leader in Greater Manchester. Pennine Acute has doubled the amount of letters being sent to GPs in this way over the last six months, which is a tremendous achievement, but we aren’t stopping there, as we are working to incorporate other types of patient letters, such as maternity letters which will provide even more patient benefits.”
Annual public meeting - hundreds hear about Trust’s new vision, values and five year strategic plan

During 2013/14 the Trust:
- spent over half a billion pounds (about £1.5m per day) on providing healthcare services for local people.
- invested £16.2 million on capital programmes and in maintaining and improving the physical estate and on smaller projects to develop frontline clinical services.
- spent £5.6 million on medical and scientific equipment and £4.6 million on information technology to support front line clinical services.
- saw 307,622 Type 1, 2 and 3 accident and emergency (urgent care) cases, 637,843 outpatients, 121,118 total inpatients and 72,511 day cases and delivered over 9,899 babies.
- made 148,340 visits to patients in their own homes to provide treatment/care.

The Trust unveiled its new vision, values and five year strategic plan to a large audience at its Annual Public Meeting on 23 September.

This follows a huge amount of work undertaken to involve and hear the views of staff through a Pride in Pennine crowd sourcing website and a Strategy Summit held in May which involved over 300 staff. In total, over 27,000 views, ideas and inputs were received from staff. From this consultation, the Trust has launched its transformation map, vision, values and ten new corporate priorities for the coming year.

Chief executive, Dr Gillian Fairfield, said: “Our values guide every action we take. They determine how we work and the promise we make to our patients, their families, the public and each other as colleagues. We are: quality driven, responsible and compassionate.

“Our transformation map outlines the Trust’s high level strategy for the next five years on a single page to achieve our vision to be: A leading provider of joined up healthcare that will support every person who needs our services, whether in or out of hospital, to achieve their fullest health potential.”

“This vision signals an important direction of travel in that in addition to providing excellent hospital care we also aim to ensure that we reach into the community to provide excellent locality based innovative services closer to patients’ homes. Not every patient needs to come into hospital to receive care and wherever we provide care it is our intention that it will be the best possible care.

“We expect to be held accountable for delivering on our promises. We will not compromise on patient safety or quality of care as we continue to work with our local NHS commissioners and partners, and the voluntary sector, to transform our local healthcare services to improve the outcomes for patients.”

The Trust’s Annual Report and Financial Accounts 2013/14 were also formally adopted at the meeting which took on a new and exciting format this year with staff showcasing a variety of services, achievements and key developments through a drop-in style exhibition comprising stands and information stalls. This provided an excellent opportunity for staff, the general public and partner NHS organisations to network and talk about Pennine Acute Trust services and plans for the future.

Chairman John Jesky and chief executive Dr Gillian Fairfield praised and thanked staff and volunteers for their commitment and valuable contribution to the Trust.

Chief executive Dr Gillian Fairfield, continued: “Our staff have continued to work hard over the last twelve months in delivering high standards of healthcare, meeting not only important performance standards, but achieving excellent outcomes and experience for our patients and their families.”

FT membership continues to grow

Foundation Trust membership continues to grow at Pennine Acute. Angela Greenwood, FT membership manager, has been out and about to local schools and colleges, and since September 2014, over 300 students and young people have signed up to become FT members. The membership is now at 11,573.
Speedier service eases musculoskeletal pain for patients

AN enhanced service for Bury patients with musculoskeletal (MSK) conditions is seeing patients getting speedier treatment which frees up additional GP appointment slots.

The Bury Integrated MSK Service run by Pennine Acute was set up in May 2014 as part of a redesign of services for patients with musculoskeletal conditions such as neck and low back pain, shoulder disorders such as frozen shoulder and sports injuries.

The service was developed in partnership with NHS Bury Clinical Commissioning Group (CCG) to provide a more timely and appropriate access route for patients residing in Bury. Waiting times are kept to a minimum of four weeks from GP referral to appointment.

Traditionally patients would have been referred to an orthopaedic surgeon at Fairfield General Hospital. Many patients who were referred via this route were either not appropriate for surgery or did not want surgery, and so the new service redesign ensures the correct patients are referred through to discuss their surgical options at the most appropriate time.

Patients are now seen within the physiotherapy department at Fairfield and will have their initial consultation with an advanced physio practitioner. They will assess their MSK condition in the same way that they would be if they were referred to an orthopaedic surgeon, and then depending on what is required, refer them for diagnostic investigations such as MRI or ultrasound scans, as part of their individual screening process.

The administering of corticosteroid injections to reduce inflammation and pain in a wide range of joint and soft tissue conditions is also offered within the service, and for those with long-term conditions such as osteoarthritis or persistent pain, there is access to a wide range of management programmes to help patients better self-manage their conditions.

The integrated team includes advanced physiotherapy practitioners, a clinical nurse specialist in pain and specialist physiotherapist in pain and rheumatology. The clinical lead is Mr Aslam Chougle, consultant orthopaedic surgeon.

Deborah Bancroft, advanced physio practitioner, said: “This is an innovative development, as it avoids the need for patients being sent back to their GP, providing a more streamlined service and preventing the need to take up a further GP appointment.”

Mr Chougle said: “As clinical lead, I wholly support this improved model of care for patients with musculoskeletal disorders. It provides a high quality evidence-based service which focuses on delivering the best possible patient experience and fits in with the Trust’s vision of how services will be delivered in the future. The feedback we have received from patients so far is extremely positive.”

Patient Carol Evans said: “I was referred to this service with permanent knee pain. The clinician I saw was very polite and caring. She showed me my x-ray and explained everything to me which put me at ease. I found out more about my complaint through our discussion. She gave me all my treatment choices and I decided to have a pain relieving steroid injection which she gave me at the same visit. I was very happy with the consultation and would certainly recommend this service to anyone!”

Dr. Kiran Patel, Chair and Clinical Lead for NHS Bury Clinical Commissioning Group (CCG) added: “The MSK service is a great example of the kind of service we should be developing. It demonstrates the benefits of different teams working together to ensure that patients see the most appropriate clinician the very first time. This not only improves the patient experience but also by providing more time, advice and treatments produce better outcomes.”

Pennine’s pioneering porters

WORK is well under way to develop an IT system that will revolutionise the way porter services are delivered to the Trust.

Dan Reason, site services manager at NMGH, explains. “The IT system essentially transforms the portering department from a ‘multi-queuing’ operation to a single queue system serving all sites. Staff will be able to request portering services through an online portal where the work can be allocated and updated by portering staff while out on site using iPod touch devices.”

“Departments will be able to book work in the system hours, days and weeks in advance, and check the status of any task booked, select specific types of work and highlight any special requirements for the porter request.

“With the mobile devices and workload planning, supported through use of the system, the portering service can be much more efficient and provide improved levels of service.”

Rob Tinkler, IM&T project manager added: “What’s really exciting and innovative about this project is that the Trust have not gone out to procure a separate system to manage the requirements of the porter service, but used the Trust’s current IM&T helpdesk system and tailored the workflows around the requirements of the Trust and the service.”

Dan continued: “The input from the porters themselves into how the system should act, look and feel has been amazing. Ultimately they know how the service runs and are pivotal in moulding the system to the service, and ultimately the Trust’s requirements. Although it is only at the trial stage the team have been positive, excited and heavily involved with the new system.”

Wards and departments will start to see the bright blue mobile devices being used by porters, and staff are encouraged to ask the porters for a demo, they will be more than happy to show you their new toys!
PATIENTS on haematology ward F11 at The Royal Oldham Hospital can thank an intrepid group of fundraisers for purchasing reclining chairs for use on the ward.

Raising £1,875 from an epic three peaks challenge, the money will be spent on the inpatient and day case section of the ward.

Christopher and Katie Jolly are the son and daughter of Tracey Jolly, who has been receiving treatment on the ward. She was diagnosed with Hodgkin’s Lymphoma in December 2013 and her children decided to fundraise as a thank you for the care and treatment their mum has received.

Tracey said: “Soon after I was diagnosed, Katie decided that she would like to raise money for both the ward and Macmillan cancer support. Her brother Christopher decided on the three peaks challenge which saw him and Katie, along with their friends, tackling Ben Nevis in Scotland, Scafell in the Lake District and Snowdon in Wales, all in 24 hours. Dad Mark also got in on the act by being the official driver of the group.”

Setting off for Ben Nevis at 7.00am on 31 May 2014, they conquered the mountain in five and a half hours and were then ready to tackle Scafell Pike at 7.45pm. They returned at 11.45pm and went straight on to Snowdon. Unfortunately after being held up in traffic they didn’t meet their target of completing all three peaks in 24 hours. Undeterred they started the climb up Snowdon at 5.00am and returned back down at 9.45am, eventually getting home at 2.00pm.

Tracey continued: “I am so proud of them all as they encouraged each other whenever they felt low. Katie never wants to see another mountain for a long time, whilst Christopher wants to do it all again but this time complete it in 24 hours.”

Haematology matron Sr Elizabeth Fitton, said: “We are very grateful for the time that people have given in raising funds for the unit. The donated money will be used to purchase reclining chairs to aid patients’ comfort during their stay with us. Thanks to all involved, it is very much appreciated.”

THE research and development (R&D) team at the Trust has been shortlisted for a highly coveted Health Service Journal (HSJ) Award.

The team have become finalists in the Clinical Research Impact category in the HSJ Awards 2014, after beating off fierce competition nationally to be shortlisted from a record 1300 entries, the highest ever in the awards history.

The Trust is committed to clinical research as a driver for improving the quality of care provided to patients. It enables staff and the wider NHS, nationally and regionally, to improve the current and future health of the people we serve. Only by carrying out research into “what works” can we continually improve treatment for patients, and understand how to focus NHS resources where they will be most effective.

The Trust has invested and put in place a five year strategy to achieve a 10% increase in patients being recruited to research and development studies year on year. In year one this was smashed with a 75% increase.

Dr Steve Woby, director of research and development at The Pennine Acute Trust said: “Over the past year we have worked incredibly hard to deliver a number of key initiatives aimed at integrating research into the core NHS business of the Trust and ensuring that we provide research opportunities for as many of our patients as possible. We are extremely proud of what we have accomplished and feel absolutely delighted and honoured at being shortlisted for the highly coveted HSJ Award for Clinical Research Impact.”

The HSJ Awards 2014 will take place on 19 November 2014 at Grosvenor House, London. The awards recognise the projects and initiatives that deliver healthcare excellence and innovation.

Pennine Acute shortlisted for coveted Health Service Journal award
Gold standard care and treatment rooms for patients

STAFF within operating theatres at North Manchester General Hospital have worked tirelessly to improve care for patients, during a two year project.

Operating department practitioner Gavin Wild and consultant anaesthetist Dr Diarmid Cochran have led work to completely transform the anaesthetic rooms within the operating theatres department at North Manchester General Hospital for the benefit of patients and staff.

The idea came about following a team discussion regarding the anaesthetic rooms. Staff expressed their dissatisfaction, as equipment was stored in different places and there were different types and levels of stock, which were cluttered and did not support efficient working practices.

Gavin and Diarmid therefore undertook a Listening into Action (LiA) project which encourages staff to become empowered and make changes to their workplace environment and practices.

A reconnoitre of all the anaesthetic rooms within the hospitals at the Trust resulted in the team picking up good practice ideas to add to their own vision of excellence.

Working with their theatre colleagues, theatre manager Alyson Mann, the estates department and outside companies, Diarmid and Gavin designed the ideal anaesthetic room, checking with the staff who would be using the rooms at every stage of the process.

The final result is a gold standard anaesthetic room, designed by the staff who use it on a daily basis, that can be duplicated throughout North Manchester General Hospital. When the design is reproduced in the other anaesthetic rooms it will mean that any staff member can go to any anaesthetic room and be able to start work immediately in the knowledge that their practice is safe and effective.

Gavin said: “The difference between this room and the other anaesthetic rooms is massive and in addition to the advantages to the service, as a patient the first impression is one of a calm, clean area which inspires confidence at a time when they are at their most vulnerable.”

Dr Diarmid Cochran said: “Using the theatre staff’s own ideas as the basis for the new design has created a safer working environment at minimum cost.”

In memory of Jim Dobbin, MP for Heywood and Middleton

MOST of you will have heard about the sudden death of Jim Dobbin (pictured below, far right on back row), whilst on parliamentary business in Poland. However, not everyone will be aware that prior to his career in party politics, Jim was laboratory manager in microbiology at The Royal Oldham Hospital for 22 years between 1973 to 1995.

Peter Taft from microbiology said: “I was fortunate to work with Jim throughout his time at Oldham. As a young, trainee biomedical scientist in 1973, I was a bit apprehensive when I heard this bloke from Scotland had been appointed as our new boss. I shouldn’t have worried – Jim was a fantastic manager and the most inspirational person I have ever worked with. He trusted, supported and encouraged his staff to develop and create a great atmosphere, and in return the staff were proud and loyal to the department. In today’s language you would say we were empowered. I have to say we also had some fantastic nights out – any excuse would do for a party!”

“Jim was committed to the development of biomedical science. He was a founder member of the North Regional Microbiology Group and also Microbe (a group that is still going strong today). He also became a council member of the Institute of Biomedical Science.

“As a staunch labour party supporter and trade union member, Jim managed to balance his trade union beliefs with his management responsibilities. Gradually he became more and more involved in party politics and was elected as a local councillor for Kirkholt in Rochdale. He later became leader of Rochdale council and then, in 1997 became MP for Heywood and Middleton.

“I was so shocked to hear of his sudden death. On a professional level, Jim was such an inspiration and mentor to me. He was also a good friend and a great man, he will be sadly missed.”

Do you know what to do if a patient wants to access their records?

THEY apply in writing to the:- Patient Health Records Access Service, Health Records Department, The Royal Oldham Hospital, Rochdale Road, Oldham OL1 2JH

You could also give the patient a copy of the Trust’s ‘How we use your information’ leaflet Ref 039AA – PI(G) which should be available in all wards and departments.

This leaflet provides further information including the address of the medico legal department in health records where they need to send their request for access.

For further guidance please see the information governance policy or contact Trish Noon, information governance manager at trish.noon@pat.nhs.uk.

Charlie’s locks flow for charity

Nine-year-old Charlie Smith has had his long flowing locks chopped off to raise money for Dr Kershaw’s Hospice.

Charlie, who is the son of Sarah Newton, who works in booking and scheduling, decided to grow his hair in aid of the hospice which looked after his aunty Lillian, who lost her battle with lung cancer.

He raised over £500 thanks to friends and family of Sarah Newton, who works in booking and scheduling, decided to grow his hair in aid of the hospice which looked after his aunty Lillian, who lost her battle with lung cancer.

He raised over £500 thanks to staff at Rochdale Infirmary, as well as teachers and friends at Mather Street Primary School in Failsworth, staff at Expeditions at Manchester airport, family and friends.

Charlie said: “I wanted to raise some money for Dr Kershaw’s Hospice because of the way that they looked after and cared for Aunty Lil whilst she bravely fought and lost her battle with lung cancer. The staff at Dr Kershaw’s were very caring and supportive. The hospice is a very caring, calming and peaceful place.

“I am very happy now I have short hair because I now look two years older. I also got a letter from 10 Downing Street and most importantly I don’t look like a girl any more!”
Have you been briefed?

Team Talk takes place once a month and is a way of updating you about the latest news from the Trust.

OCT TEAM TALK

New division of integrated and community services

A NEW division of integrated and community services came into effect on Monday 6th October 2014. It will operate the same triumvirate management infrastructure and model at all levels, namely there will be a manager, a doctor and a nurse who are jointly responsible for running the business of the divisions and directorates.

Steve Taylor, former divisional director for medicine and community services, will be moving to become divisional director for this new fifth division. Joanne Moore will move from the women and children’s division to take up the divisional director of medicine post. The divisional management team of integrated and community services will be based at Rochdale Infirmary. The divisional management team for women and children’s is moving to the North Manchester site. The divisional management team for medicine will remain at NMGH.

Clinical service transformation programme

OUR clinical service transformation programme is well underway. We have been particularly keen to engage and work with our senior clinical leaders. We have already held a successful Strategic Management Group attended by our clinical directors and senior divisional staff. A senior clinical leaders event was attended by over 120 of our clinical staff. The aim of this work is to:

- Describe and develop potential clinical models
- Identify the service interdependencies
- Explore potential site configuration options
- Capture any questions, issues or challenges
- Enable these outputs to then feed into the modelling and evaluation phases of a future clinical strategy.

Over the coming weeks there will be further opportunities for staff to get involved as this work on our clinical strategy progresses.

Cost improvement programme

The Trust’s Cost Improvement Programme (CIP) is gathering momentum with the establishment of the Trust Programme Management Office (PMO). Our operational teams are driving cost improvement as part of their daily operations with:

- Strengthened processes, systems and procedures for identification and validation of CIP opportunities
- Significant effort and focus on closing the gap for this current financial year (2014/15)
- Active ideas generation and capture e.g. from recent Strategic Management Group for above and for 2015/16 onwards

Progress is being tracked on a fortnightly basis to ensure that we not only achieve our financial targets but also ensure the delivery of safe, high quality services.

Healthier Together

THE 12 week public consultation into Healthier Together, the Greater Manchester wide healthcare reform programme, has now finished. Under all eight options in the consultation proposals regarding hospital arrangements, The Royal Oldham Hospital, Salford Royal and Manchester Royal Infirmary have been designated Specialist Hospitals. Our sites at North Manchester and Fairfield, and also Tameside, will be local General Hospitals. Rochdale and Trafford are unaffected and not part of the consultation. For sites that are not designated specialist hospitals it does not mean that they will not continue to provide their current specialist services (for example, acute stroke at Fairfield or the infectious diseases at NMGH).

The Trust submitted its formal response to the Healthier Together consultation on 30th September. This response has been prepared from the views of our senior clinicians and senior management team, and has been approved by our Board of Directors. This document is available on our intranet homepage and in the Healthier Together section under Programmes & Projects) and on our website.

Doctor revalidation

FROM 1st February 2015 job plans for doctors will no longer be accepted on paper and must be completed using the Premier IT system which is currently used for medical appraisal and has an option for the input of job plans. All doctors in non-training posts will need to input their job plan on Premier IT. All paper job plans completed prior to this date will be accepted. For information on training sessions on the new system, email katie.lemmings@pat.nhs.uk
Team focus on anticoagulant team

The 60 second interview

Betty Brough is the clinical lead anticoagulant nurse specialist in the anticoagulant nursing team at North Manchester General Hospital.

What are the highlights of your job/service?

Seeing the service expand and improve over the years. Also working within a professional, dynamic, caring team whilst enjoying regular patient contact.

What would make your job/service better?

Having all patient records computerised. Currently only Rochdale community clinics and the hospital anticoagulant clinics at North Manchester are computerised. Hopefully this issue will be resolved within the next six months.

What is the current biggest challenge in your job/to your team?

Finding time to increase our service provision to incorporate transferring patients onto the new oral anticoagulant drugs.

How do you see your role developing?

As the service is looking at working more closely with GPs, I envisage I will be forging much closer links with them which I am looking forward to.

What aspect of your job/service is the most rewarding?

Working with staff that are so hard working, conscientious and dedicated to their job and the patients. They always go the extra mile which is appreciated by myself and the patients.

How has your job/service changed in the last 12 months?

The volume of patients has quadrupled since the service began. We look after over 9,000 patients who are on Warfarin. We now provide over 30 weekly community clinics in Manchester north, central and south; Bury south and Heywood, Middleton and Rochdale.

What is the one thing you would change about your job/service?

The service is constantly changing to accommodate service and patient demand.

What don’t you like about your job/service?

As the service covers Bury south, north, central and south Manchester, Rochdale, Middleton and Heywood, it involves a lot more travelling to get to the community clinics that we provide in these areas.

What word best describes your job/service?

Challenging.

A typical day

I start by checking that my colleagues are briefed about their clinics and workload for the day and that everyone is happy with what they have to get through that day.

My day tends to have a mix of both clerical and clinical work and I do a mix of hospital and community based clinics. I feel it is important to continue to do the same work as my colleagues so I can appreciate the problems and pressures they face.

I have the typical amount of emails to trawl through and reply to that most nurses in my position have.
Flu campaign 2014
Chief executive launches campaign

CHIEF executive Dr Gillian Fairfield has helped to get the Trust’s flu campaign off the ground this year, by having her flu jab.

Want to know what you can do to fight flu? There is only one way to fight flu and prevent the spread of the virus if you work on the frontline of the NHS - get vaccinated!

Full details of our flu vaccination clinic dates, times and locations can be found in Pennine News and on the staff intranet, so what are you waiting for? Last year 58.4% of frontline NHS staff were vaccinated and sickness fell from 3.98% to 3.95%, saving the NHS £10 million, or 92,000 days.

Why is it important to get the jab? The reasons are simple - protect yourself, your family and your patients. If you are sick, you are not around to care for your patients and your colleagues may be under more pressure. Also the health of your family is important so don’t put them at risk by not getting the jab - especially if you have children or care for someone elderly. You also have a duty of care to your patients. By not getting the flu jab you are putting them at risk.

Why is flu serious? Influenza is more commonly known as Flu. Flu is a highly infectious acute viral infection that is transferred through coughs and sneezes of infected individuals. It can also be spread by touching contaminated surfaces, for example, a door handle.

You can carry and pass the virus to others without having any symptoms yourself, so even if you consider yourself to be healthy, you might be risking the lives of others.

How serious is flu? In some people, flu develops into more serious illnesses, such as bronchitis and pneumonia. Flu has been known to kill. In the UK the estimated number of deaths from flu each year has been as high as 10,000 and patients at risk are 11 times more likely to die from flu than those who are not at risk.

The flu jab can’t give you the flu. It is impossible to get flu from having the jab because the vaccine doesn’t contain live viruses. A very small number of people experience side effects such as aching muscles, but this is simply the immune system responding to the vaccine.

I had the flu vaccine last year and still got flu - why should I have it again? Flu vaccination happens at a time of year when lots of other viruses are causing colds and other illnesses and people can mistake these for flu. Flu vaccination cannot prevent the common cold, and it can take your body up to 10 days to develop protection from the vaccine, so it is possible to catch flu before it has a chance to work.

How safe is the vaccine? The vaccines are tested thoroughly and are safe. Even if you had the vaccine last year, you need to do the same again this year because you won’t be protected against the new strains of flu circulating. If you are a pregnant woman, you can be vaccinated against flu. Pregnant women can have the vaccine at any stage of their pregnancy.

You made a difference!

Managers from all departments can use this certificate of appreciation as means of celebrating those outstanding members of staff who have ‘gone the extra mile’ and demonstrated true commitment to providing a quality service for patients.

Details of the recipients of these certificates will be published in Pennine News with thanks and congratulations for their efforts that have been recognised by their managers.

Karen Simpson - staff nurse at Oldham, nominated by Sr Kevins on ward G3 for the professionalism, treatment and care she provided to a patient throughout their stay on the ward.

Andy Jones, Julie Gordon, Justine Hill, Paula Frost and Tony Gandy - staff from theatres at NMGH, nominated by theatre manager Alyson Mann, for the care shown to a patient.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Site</th>
<th>Venue</th>
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<tbody>
<tr>
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<td>8.15am to 12 noon 12.30pm to 3.45pm</td>
<td>NMGH</td>
<td>Occupational health</td>
</tr>
<tr>
<td>4 Nov</td>
<td>8.30am to 11.00am 11.30am to 3.30pm</td>
<td>RI</td>
<td>Staff restaurant</td>
</tr>
<tr>
<td>5 Nov</td>
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<td>FGH</td>
<td>Eye clinic William Street Suite</td>
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<tr>
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<td>Pathology staff only Occupational health</td>
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<td>NMGH</td>
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<tr>
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<td>FGH</td>
<td>Walkabout to non clinical areas</td>
</tr>
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<td>14 Nov</td>
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<td>NMGH</td>
<td>OPD G (F2a)</td>
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<td>18 Nov</td>
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<td>RI</td>
<td>Education centre, D2</td>
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<tr>
<td>20 Nov</td>
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<td>NMGH</td>
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<tr>
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<td>FGH</td>
<td>Vestibule</td>
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<td>TROH</td>
<td>Cafe Royal corridor</td>
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<td>TROH</td>
<td>Walkabout to diabetes centre, laundry, chest clinic, health records</td>
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Professor at PAT looks to ‘turn the tide’ on child abuse

PROFESSOR Andrew Rowland, a consultant in paediatric emergency medicine at North Manchester General Hospital has launched a report into how different countries tackle child abuse.

‘Living on a railway line. No more! Turning the tide of child abuse and exploitation in the UK and overseas: international lessons and evidence-based recommendations’ is a work by Professor Andrew Rowland, in association with The Winston Churchill Memorial Trust and University of Salford.

There are 10 key recommendations for the UK together with 25 associated and enabling recommendations and seven international recommendations. All of the recommendations are designed to build strong and healthy communities with children at their hearts.

Professor Rowland gathered evidence from the USA (Texas, Arizona, Pennsylvania, Colorado), Singapore, Malaysia (Kuala Lumpur, Ipoh) and Cambodia (Sihanoukville). He investigated the impact of mandatory reporting of child abuse, the work of children’s advocacy centres and learned about strategies used to identify children at risk of child sexual exploitation and trafficking. He used his international experiences to make recommendations for the UK and the international community.

He said: “It is of the utmost importance that we recognise that the majority of child abuse and neglect occurs within homes, families and communities. We must not be distracted by a media frenzy of high-profile cases related to public figures and celebrities - disturbing though they are, they do not reflect the majority of abuse cases that occur within our communities. However, it is time for the UK to take an unequivocal stand against child abuse cases occurring in association with positions of power or responsibility, and the law in the UK should be changed to introduce mandatory reporting of them. We need much better research to understand, in more detail, society’s views about child abuse. There needs to be a standardised educational programme delivered to all professionals working with children and families, not just a competency framework. Professionals working with children need to advocate much more on behalf of children and empower them to participate more fully in decisions relating to the communities in which they live. It takes a community to protect a child: protecting children really is everyone’s business.”

Jamie Balfour CBE, DL, Director General of The Winston Churchill Memorial Trust said: “Dr Rowland’s excellent report demonstrates the significant results that can come from a Winston Churchill Memorial Trust Travelling Fellowship. These Fellowships provide a unique opportunity for British citizens to travel overseas to bring back fresh ideas and new solutions in order to address many of the current social challenges facing the UK.”

Post your self referral to stop smoking

THREE red postboxes have been put up by the Manchester stop smoking service from The Manchester Mental Health and Social Care Trust.

The boxes which are in the main entrance at North Manchester General Hospital, the quad entrance and the A&E waiting area are for visitors, staff, volunteers and patients to refer themselves into the service if they need help to stop smoking.

30 seconds to change a life!

It takes only 30 seconds to change a smoker’s life!

Offering brief advice to stop smoking is the single most cost-effective and clinically proven action a healthcare professional can take. Smokers may take several times to quit smoking successfully, so it’s important to keep giving advice at every opportunity.

That’s why the staff in the busy out-patients clinics at North Manchester General Hospital have been keen to support health improvement with the patients that come through their door.

Staff have been pro-actively using brief intervention - the AAA approach. Ask, Advise and Act by signposting the patients to the Manchester Stop Smoking Service should the patient need more advice. They have demonstrated an excellent understanding of providing non-judgemental brief advice interventions to the patients and then the skills to signpost on for specialist advice should they need or want to stop smoking.

The Manchester Stop Smoking team would like to thank all out-patient staff for their hard work and dedication in providing this service. As a thank you, they decided to acknowledge three members of staff with a gold award for their commitment to brief intervention in stop smoking.

The winners were: Clinical senior support worker Karen Whiteside, winner of £100 shopping vouchers; clinical support worker Sue Goodwin, winner of £50 shopping vouchers and clinical support worker Sandra Oliver, winner of £20 shopping vouchers.

Pictured are: winner of the gold award, Sandra Oliver, clinical support worker and Denny Wood and Aurangzaib Amirat, stop smoking specialist practitioners.
Deborah’s research is going from strength to strength

A SENIOR physiotherapist at North Manchester General Hospital is enjoying a double celebration – attaining her PhD and awarded a prize for the best presentation at the School of Nursing, Midwifery and Social Work (SNMSW) University of Manchester showcase seminar.

Deborah Antcliff who started her career as a physio at North Manchester in 2002, developed a special interest in the management of chronic conditions, such as chronic low back pain, chronic widespread pain and chronic fatigue syndrome/myalgic encephalomyelitis.

She was therefore delighted to have the opportunity to undertake a part-time PhD to explore the concept of activity pacing; a coping strategy that is frequently advised by health professionals to patients with chronic conditions.

Deborah undertook her PhD in the School of Nursing, Midwifery and Social Work (SNMSW), University of Manchester, on a part-time basis whilst maintaining clinical duties over a period of five and a half years, and graduated on 8th July 2014.

Her PhD project contributes to the climate of evidence-based practice that operates in the physiotherapy department, and the Trust as a whole. She said: “My research findings will help to refine existing physiotherapy interventions, and provide better outcomes for patients. The PhD training process taught me skills such as critiquing research literature, data collection and analysis, and implementing ethical research methods; all invaluable skills that will be carried forward in my clinical practice.

“The PhD would not have been possible without support from the Trust’s research and development department, the physiotherapy department and Manchester University. Undertaking the PhD has been my most challenging and rewarding achievement, and I hope to continue a career that combines a clinical and research role.”

Steve Woby, head of research and development, said: “Debbie’s research findings are extremely interesting and have the potential to influence the way which some physiotherapy patients will be managed in the future. It is great to see Debbie, in conjunction with her physiotherapy colleagues, undertaking high quality original research that will help strengthen the excellent national and international research profile that the physiotherapy department already has in this field of research.”

Going Digital: Revolutionising Patient Records

EARLIER this year the Trust announced that we had been successful in securing £4.2m of funding from NHS England to implement an innovative new Electronic Documents Records Management System (EDRMS).

The Trust is now embarking on this really important development to scan our existing patient records and make them available electronically across the organisation through secure scanned images.

A system called Evolve will be used to review these electronic patient records. This will bring significant benefits to our clinical teams and patients in making our records available immediately at any site at any time. This will make decision making and treatment planning faster and ultimately improving safety for our patients.

Jo Keogh, Associate Director Elective Access at the Trust, explained the significance of the project: “Anybody who uses existing paper health records will be impacted by this change. Whether you’re a doctor, nurse, allied health professional, scientist or administrator this will change how you work. This system will revolutionise and improve the way we can have immediate and timely access to patient records electronically at a touch of a button.

“Over the coming weeks members of the Evolve project team will be meeting with each speciality to share with you how the new system will work and give you an overview of the system and how it will work in each area. You will be able see some of case notes scanned and get a feel for how you would use this in your day-to-day work. We know we need to improve some of our IT equipment and are embarking on a programme to upgrade and improve some of our PCs and screens that will improve the speed at which they work”, added Jo. “This will be critical to ensure you can view patient records when and where they are needed.”

The Go-Live date for pilot specialties is planned for Spring 2015 with roll out of the remaining specialties throughout 2015. Although the project won’t mean the Trust will be fully paperless just yet, the Evolve system to scan patient records is an important and exciting step along the journey for this Trust having a full Electronic Patient Record to benefit and improve some of our IT equipment and are embarking on a programme to upgrade and improve some of our PCs and screens that will improve the speed at which they work”, added Jo. “This will be critical to ensure you can view patient records when and where they are needed.”

Look out for more information and updates over the coming months.
The Pennine Acute Trust has been successful in recruiting the first patient in the UK to an international clinical trial.

The trial is seeking to assess the efficacy and safety of combination therapy for the treatment of chronic hepatitis C infection in patients who are treatment naïve and on opiate (heroin) substitute therapy.

The infectious diseases department at North Manchester General Hospital recruited the first patient in the UK to the trial in September.

Hepatitis C is a virus that can infect and damage the liver. You can become infected with hepatitis C if you come into contact with the blood of an infected person. Often referred to as the ‘silent epidemic’, hepatitis C can go undiagnosed for many years as its symptoms of depression, fatigue, insomnia, pain and digestive disorders can be put down to other illnesses.

The virus constitutes a major global health risk with around 150 million chronically infected with hepatitis C.

Cynthia Murphy, manager of the infectious diseases research department said: “The Pennine Acute Hospitals NHS Trust has been selected to take part in the Clinical study because of our recognition of being one of only two Centres of Excellence for treatment and care of patients with hepatitis in Greater Manchester. We are also an established and successful research department with a highly motivated and award-winning research and development department which has an outstanding reputation for initiating and delivering clinical trials.”

The study which is sponsored by Merck Sharp & Dohme Corp, hopes to achieve an outcome which will provide a safe, effective treatment regime for the management of hepatitis C, which will reduce the pill burden and the need of injectable therapies for patients, and lead to a shorter treatment time.

Cynthia continued: “Patients eligible for the trial have to be hepatitis C positive and have not previously been treated for it, and also have been on an opiate substitution therapy for at least three months. Clinicians refer patients into the trial if they wish to take part and enrolled patients then attend clinics for treatment and assessment for the duration of the study. We also monitor the patient after the study to check on their virological response.”

Dr. Steve Woby, director of research and development at The Pennine Acute Hospitals NHS Trust, said: “ Recruiting the first UK participant to this important trial is a fantastic achievement that will further strengthen the excellent reputation of the infectious diseases research team. Involvement in high quality research such as this helps to provide robust evidence to improve treatments for our patients.”

Pictured are Yvonne Clowes, clinical research manager and Valeria George, senior clinical research nurse at Pennine Acute Trust.

**Thought for the month**

by chaplain Sue Ward

I WONDER how you feel about religion. It may be that your religion is a great comfort to you, or maybe it seems to be something unknown and even dangerous. Do you see religion in its many forms as the source of some of the greatest collected wisdom of humankind or does it seem to be the cause of much of the conflict in our world?

When I take a good look though, it is not the core teachings of major world religions that seem to be the problem. For example, most major world religions teach what is called the Golden Rule; ‘treat others as you would like to be treated’. Something that is at the heart of what we offer to patients, carers and staff in this Trust.

No it doesn’t seem to be the core teachings that cause the problems it seems rather to be cultural differences along with historic hurts that fuel conflict. In fact some of humanities major cruelties were perpetrated by totally secular states.

It seems to me that when the teachings of great religions are abused and put alongside prejudice and historic hatred then there is a powerful fuel for conflict. There is so much wisdom within our world faiths that we abandon them to our loss.

Even if we consider ourselves to be part of a religious tradition we still stand with everyone else on the edge of other faiths. Unknown to us we are uncertain about them and we wonder at their strangeness and are often baffled about what people get from religion.

Lionel Blue is an openly gay reform Jewish Rabbi who often reflects humorously and warmly on the seeming imbalance of human need. Asked what he got out of religion he talked about some beautiful things.

If such things can come from religion then I don’t think I will write it off as something we, in a more sophisticated age, no longer need. How about you?
Patients PLACE faith in Trust’s food, drink and cleanliness

AN army of patient assessors accompanied by staff descended on The Pennine Acute Trust to carry out its PLACE (Patient-led Assessments of the Care Environment) assessment this year.

Using a standard assessment format issued by NHS England, 110 patient assessors, 99 staff assessors and eight external assessors inspected every nook and cranny at each of the Trust’s hospitals – North Manchester General Hospital, The Royal Oldham Hospital, Rochdale Infirmary, Fairfield General Hospital in Bury, Henesy House our community integrated care unit situated in Collyhurst, and the specialist Floyd Unit at Birch Hill Hospital.

The PLACE assessments were carried out between March and June 2014 with the aim of providing a snapshot of how the Trust is performing against a range of non-clinical activities that impact on the patient experience of care. These are:

- Cleanliness
- The condition, appearance and maintenance of healthcare premises
- The extent to which the environment supports the delivery of care with privacy, dignity and wellbeing
- Dementia friendly
- Staff appearance
- Hand hygiene
- The quality and availability of food and drink.

An action plan has been drawn up for each hospital site to further improve the scores in future assessments, and to take into account any recommendations put forward by the patient assessors who visited our sites.

Pam Miller, associate director of facilities at The Pennine Acute Hospitals NHS Trust said: “Overall the Trust has excelled and produced scores better than the national average for food and drink and cleanliness. All of the patient assessors were very complimentary of the Trust and said they had learnt a great deal by taking part in the PLACE inspections. They said they were very proud of our newly refurbished wards and departments on all our sites.”

The 2014 PLACE report and summary action plan have been put on the public pages of the Trust’s website as a requirement of NHS England.

Thanks for helping ‘Bridging the gap’

THE EBME department medical equipment library at The Royal Oldham Hospital has been actively supporting the ‘Bridging the Gap’ programme students and has received a certificate of thanks from New Bridge School to show their appreciation in the department helping the development of the students into a working environment.

Valerie Penney, medical equipment library officer, who accepted the award, initially took the first student and this student has since been held as the role model for others to follow.

Alan Blackshaw, medical equipment library officer, would like to praise his colleague for her work, as well as continuing to deliver the service of loaning equipment to the wards and departments at The Royal Oldham during his absence from work due to back surgery. He said: “It is very rewarding to be able to assist and see these students mature and grow in confidence. We would like to congratulate all the ‘Bridging the Gap’ students and wish the ones that are leaving all the very best with their future employment.”

Congratulations to happy couple

ALAN Blackshaw, medical equipment library officer at The Royal Oldham Hospital and Pamela Williams who works at Fairfield General Hospital would like to announce their engagement. Alan first met Pamela when she was a ward manager on E6 at NMGH, but only got the chance to ask her out on their first date while she worked for the tissue viability team five years later!

While on holiday in Brixham, Devon, a chance visit to a jeweller’s shop for a pair of earrings produced the ring, which rendered Pam speechless! There have been many lovely messages of congratulations from family, friends and work colleagues. Alan said: “We are over the moon and would like to thank everyone for their lovely words.” The couple plan to tie the knot in the next few years.

Happy 50th

HAPPY 50th Sandra Robinson. She looks 40, she acts 30, ‘yeah but’ it’s the big 50.

We wish our ‘singing Hilda’ a fabulous birthday from all your friends and colleagues in clinical coding.

Diary dates

13 Nov - Laundry tour and presentation. 2 to 3pm. Meet at Broadoak Suite, FGH.
1 Dec - Walk this way - podiatry open day. 1 to 4pm, diabetes centre, NMGH.
Fundraising all ship shape for Bury Hospice

STAFF in the radiology department at North Manchester General Hospital had some swashbuckling fun when they dressed up as pirates during a charity day.

The event on 19 September raised money for Bury Hospice and as it was national ‘talk like a pirate day’, the staff all dressed as pirates as they sold scrumptious cakes and sold raffle tickets within the department.

The Mayor of Bury, Councillor Michelle Wiseman, attended and joined in the fun by wearing a pirate’s hat. Micky Cannon, clinical departmental manager, said: “Thanks to everyone who took part in the day. We would also like to extend our gratitude to Rochdale Football Club who donated a signed shirt, the Bury Black Pudding Company who donated a hamper, Graham Stringer, MP for Blackley and Broughton who donated a House of Commons bottle of whisky and FC United who donated four tickets to any of their matches.

“We also had donations and money from local shops and staff in the department contributed gifts to the raffle which created two lovely hampers. This would not have been possible though without the patients, staff and visitors’ support on the day.

“So far the Bury Hospice Fund stands a little over £1000 and we still have a signed photo of Ryan Giggs and Paul Scholes which we hope to auction off to the highest bidder soon.”

Spanish steps for charity

DR Lydia Bowden, consultant neonatologist at The Royal Oldham Hospital recently completed the 800km trek along the ancient mediaeval pilgrimage route ‘Camino de Santiago’ all in the aid of children’s charities.

She said: “ I set off to Stansted at 4.30am and after registering in St Jean Pied du Port, started walking the following day. The route was gruelling, setting off over the Pyrenees in temperatures of 38°C and walking into Spain from almost sea level to 1460m, then back down again, doing almost the same the next day!

“The scenery was fantastic from mountains, forests and lakes through the desert-like meseta. Local people continue the tradition of hospitality and I was given fresh fruit, water and pancakes to sustain me along the route.

“The route is not without its hazards and I was able to offer first aid to a number of fellow walkers who, this year, a record number needed to be hospitalised for broken limbs, severe muscle injuries and hypothermia!”

The walk covers roads used by the Roman legions, Charlemaigne and Napoleon, passing castles used by the Knights Templar and beautiful fountains from the Moorish occupation.

Lydia met many people from all walks of life and nationalities, and whilst walking alone, was never lonely. “On my return I suddenly realised how far I had walked, as every day I walked more than the equivalent of my daily commute to work from Altrincham by car!”

So far Lydia has raised over £1500 for BLISS and CAFOD.
Farewell to Alan

FRIENDS and colleagues gathered in the estates department at The Royal Oldham Hospital to pay their respects and say cheerio to Alan Murray after working for 32 years in the NHS.

After working as a joiner refurbishing the airports of Zaire, Alan joined the NHS as a planner estimator in the estates department at Booth Hall. He then moved to Monsall and North Manchester. Once Pennine Acute was formed, Alan helped to implement and manage the new labour management system, working at all the Trust sites and eventually basing himself at Oldham.

Alan will be spending his retirement fell walking in the Lake District, sailing the seven seas and attending to a list of DIY jobs which his wife Christine, who works in pharmacy at Fairfield, has lined up for him!

Pauline retires

COLLEAGUES and family gathered to wish Pauline Holt a fond farewell on her retirement.

After 45 years of dedicated service it was finally time for Pauline to hang up her apron.

Pauline started in the NHS in 1969 as a waitress and ended it as restaurant supervisor. She has worked at Fairfield catering department throughout her time in the NHS. We wish Pauline a very long and happy retirement to enjoy with her family and friends.

You will be missed Jim

AN estates department employee has retired from the Trust after 38 years service. Jim Schofield was wished all the best for his retirement by friends and colleagues.

Jim started in the NHS in Rochdale in 1976 where he worked his way through the ranks, starting as an assistant engineer at Birch Hill and then senior engineer at Rochdale Infirmary. He returned to Birch Hill prior to the formation of Pennine Acute and then took charge of the Rochdale and Bury sites. He most recently worked as the environment and risk manager, but was always keen to keep his hand in engineering wise and so he implemented and oversaw the removal of the coal fired boiler house at Fairfield and brought it into the 21st century with a more modern gas fired plant.

His wife Helena has planned a few holidays and family events to keep him busy in his retirement and we are sure that his retirement gift of B&Q vouchers will soon be put to use!

Masters success for Elizabeth

CONGRATULATIONS to Elizabeth Piggott, community nutrition service lead on attaining her Masters in social innovations and entrepreneurship from the Buckinghamshire New University. Well done from all your friends and colleagues.

In the swim of things

PHYSIO Lindsey Davy completed the Great Manchester swim in July in aid of The Christie Hope tribute fund.

Despite not being a regular swimmer she finished in one hour, one second and raised a fabulous £600.

Wedding bells

CONGRATULATIONS to Jane Mears and Gary McGlynn who got married on 29 August 2014.

Jane who works in the cardio respiratory lab at Fairfield married Gary, a portering supervisor at Fairfield, at Bury Registry Office, followed by a party at Dobbies in Radcliffe. They then enjoyed a honeymoon in Portugal.

Lots of love and happiness for your life together.

Stella’s stars

STAFF from ward G3 at The Royal Oldham Hospital are pictured at the Race for Life event in Heaton Park. ‘Stella’s stars’ were competing in the event as Stella Hall, a staff nurse on the endoscopy unit, used the charity fundraiser as her mission statement to run to beat cancer.

Look who’s 50th

DIANE, Sandy and all the staff on ward F5 at North Manchester wish staff nurse Helen Doherty a very happy 50th birthday. Didn’t she age well!!

“As you slide down the remainder of the bannister of life, may all the splinters be turned in the opposite direction.”