

Winter 2022/23

# together

for staff and supporters



**TB or not TB?**  
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on the future

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round-up

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# Chief executive welcome

**W**elcome to the fifth edition of Together, and my second as chief executive of University Hospitals Dorset (UHD).

We are all aware of how challenging this winter is in many aspects of our lives and specifically across the NHS. 'Winter pressures' was a term we used in early autumn which put hospitals and the wider NHS on notice for a difficult few months ahead as more sick patients required more acute care.

This year, as we continue to emerge from a pandemic and deal with many people who are having to wait too long for treatment, we've remained at a winter pressure level for the whole of 2022. UHD is not on its own, the NHS as a whole - from emergency departments to wards, and ambulance services to GPs and community and mental health providers - is experiencing this.

As I walk around our hospital sites I remain in awe of our staff who continue to be incredibly caring and absolutely focused on maintaining patient safety. I would like to pay a special thanks to these staff who have gone above and beyond in serving our patients, and their colleagues, through incredibly difficult times. Across UHD we will continue to work hard to support our staff, and I know our patients and the public rightly expect us to as well.

We have seen on a regular basis pinch points around our emergency departments, with new patients arriving for urgent care to find limited capacity within the departments, because there are limited beds available to admit patients to.

One of the key factors behind these bottlenecks is our ability to discharge patients safely out of hospital when the specialist care they need from an acute hospital has come to an end. At any one time over the past few months we have seen in excess of 200 patients remaining in our hospitals who are waiting for care in another part of our local

health and care system. That's the equivalent of about 8-10 entire wards.

We're working with our partners on ways to address this, as well as taking a hard look at our own processes, and have seen some positive results from initiatives to support our patients to leave hospital. This will continue to be an important theme as we move into the new year and beyond.

With so much activity, it can be easy to lose sight of what we're doing well and what we are achieving, as well as the exciting plans we're developing, which is why each edition of Together offers such a great reminder.



*I joined our radiography team in the dome at Poole Hospital to help mark World Radiography Day in November*

Inside this issue you will find items on how we're developing surgical and pathology services fit for the future, news on how we're supporting carers in our hospitals, tips to keep well this winter, particularly for those older or younger, a dedicated section just for our foundation trust

members, and yes, a whole page on some of our recent awards successes!

Thank you for your support in 2022, and the warm welcome I have been given by patients, staff and supporters alike since I arrived this summer. 2023 will be another challenging 12 months, I have no doubt, but I'm excited by the opportunities it will offer.

*Siobhan*

Siobhan Harrington  
Chief executive



# TB or not TB? The 'Bard' facts

Tuberculosis (TB) is the world's all-time largest cause of death from an infectious disease.

TB is a potentially serious bacterial infection spread through inhaling tiny droplets from the coughs or sneezes of an infected person.

It mainly affects the lungs, but it can affect any part of the body, including the abdomen, glands, bones and nervous system.

To help raise awareness of the condition among staff, healthcare professionals and at risk groups, UHD began a new campaign in November - TB or Not TB?

Contrary to popular myth, TB is alive and well and living among us - it did not die out in the 19th century. Around a quarter of the global population is infected with latent TB, whereby the bacteria is present but is not infectious and does not cause symptoms. But this latent form can become full blown TB at any time.

The good news is that TB can be cured if it's treated with the right antibiotics.

Crucially it is preventable and curable and all UHD staff have a role to play in spotting the symptoms, helping people access treatment quickly, and stamping out the stigma.

Dr Matt Thomas is our deputy chief medical officer and is featured in the campaign (see right). He said: "It's a myth that TB died out in the 19th century - in fact, worldwide it's the 13th leading cause of death and the second leading infectious killer after Covid-19. But importantly, it is treatable and curable, and we have a fantastic TB team who work across east Dorset supporting hundreds of patients.

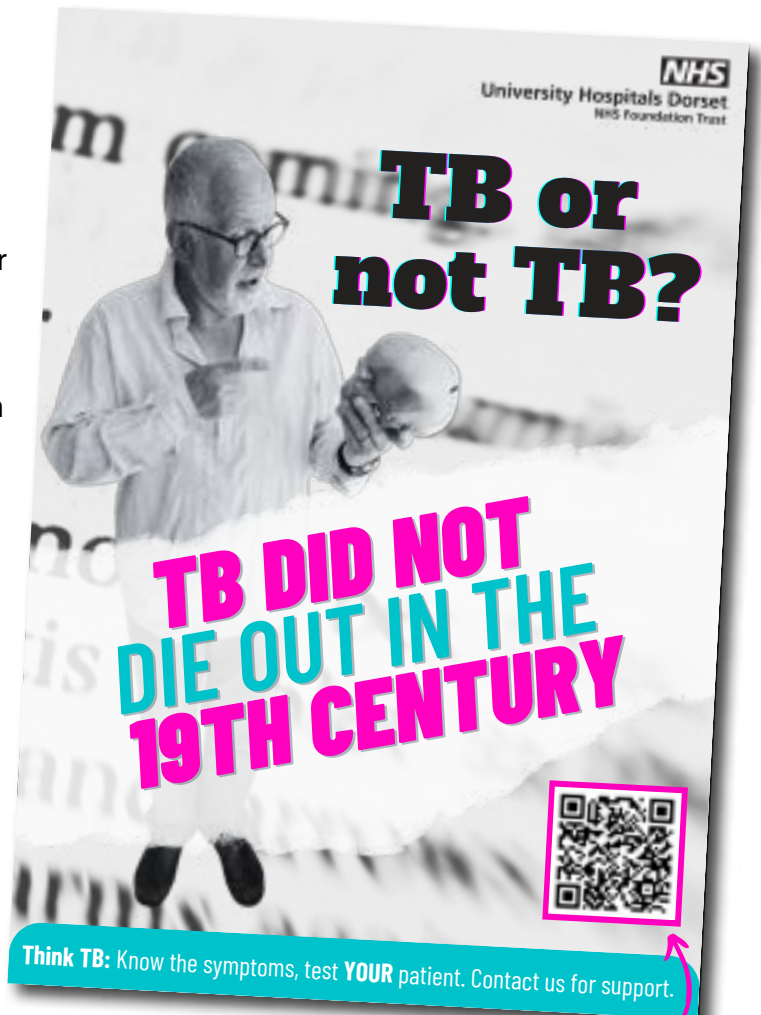
## Symptoms:

- cough for three weeks or more
- weight loss
- fevers or night sweats
- tiredness and fatigue
- loss of appetite
- swollen lymph nodes

"Clinicians in all specialties play a really important part too in knowing the symptoms, testing our patients and together, stamping out the stigma surrounding TB."

Look out for more on our TB or Not TB? campaign on our social media channels. Not sure what these are? See page 5.

For more on TB visit [www.uhd.nhs.uk](http://www.uhd.nhs.uk) and search TB.



## Fast facts:

- TB is usually spread when people with TB in their lungs cough, sneeze or spit
- Only 5-15% of those infected with latent TB will fall ill with active TB
- Latent TB is not infectious and has no symptoms but can activate at any stage in our lives causing serious disease and spread TB bacteria to others
- TB rates in the UK are highest among those born overseas

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# Three is the magic number

Our outpatient assessment clinic based in Poole's Dolphin Shopping Centre has picked up three national accolades.

The clinic opened last year to help to reduce long waiting lists caused by the pandemic and increase accessibility to life-saving screening.

As well as delivering thousands of Covid vaccinations, the clinic has seen more than 10,000 patients. Feedback from patients has been extremely supportive, and Amanda Pritchard, chief executive of the NHS, has been among the high profile visitors

keen to learn more about the initiative.

The centre, supported by Livewell Dorset and Active Dorset, as well as the Dorset Integrated Care System, was named the winner of the 'Partnership working to improve the experience', 'Integration and improving social care', and 'Integration and continuity of care' categories of the Patient Experience Network National Awards ceremony in September.

The Patient Experience Network National Awards recognise best practice in patient experience



across all areas of health and social care in the UK.

## Prestigious and rare double honours

Professor Jonathan Cole, consultant in clinical neurophysiology, has been elected president of the International Federation of Clinical Neurophysiology and been handed the British Society of Clinical Neurophysiology's highest award, the Grey-Walter Medal, for 'outstanding service.'



Professor Cole has worked at Poole Hospital since 1990, diagnosing nerve and muscle disease and assessing brain function. He is also a professor at Bournemouth University, and has published more than 120 peer reviewed papers.

"I take some quiet pride in this recognition and in showing what is possible from our small patch here in Dorset," Jonathan said.

## Blooming marvellous!

Jo Sheppard and Anne Creasey, pharmacy technicians based at Royal Bournemouth Hospital, turned an unused courtyard close to their pharmacy department into a flourishing staff rest space. Now the duo has won silver gilt in the 'commercial spaces' category of Bournemouth in Bloom, and won gold in the 'loving care homes' category.

Jo and Anne took over the courtyard three years ago and have helped to fund the upkeep of the space via many bake sales and patient and staff donations, with work often taking place at the weekends.

Anne said: "I love this garden; it feels like it has heart and soul."

Jo added: "It's hard work and we learn as we go but all staff who work on the garden comment on how therapeutic it can be."



# Navigating the way for cancer patients

**A**n exciting new role to help has recently been introduced at UHD.

Pathway navigators' have been shown to make a real difference to patients during investigations and diagnosis, as well as providing additional capacity in the teams they work within.

Navigators will meet a patient once they have been referred for tests or scans and support them up to the point of diagnosis. Each pathway navigator will work in a slightly different way and responding to individual needs - from explaining more about a procedure to helping book appointments, signpost other useful services or simply provide a friendly ear to listen.

Each keeps track of a patient's progress and helps coordinate their care to enable a smoother journey.

Our first two navigators, Sanja Agic (pictured on the left) and Sheryl Cowan, are funded



for 12 months by the Wessex Cancer Alliance and based in our colorectal and gynaecology teams respectively.

"A highlight for me has been the communication with patients, who say they feel supported and encouraged to continue with the investigation," said Sanja.

"Patients feel better knowing there is a team who work closely with the clinicians

and the nurses, and can be contacted in case they need extra support."

Other NHS trusts using pathway navigators say they have led to better informed and supported patients, more streamlined procedures, and faster access to the right individuals and teams. They have also taken on duties from other colleagues which has freed up clinical time to see more patients.

## Socially significant

However you feel about it, there's no denying that social media has changed the way we many of us live our lives. From the way we get our news to the way we interact with the world, social media is everywhere. It's unavoidable, it's a powerful tool, here to stay and an ever-changing landscape.

We recognise the importance of social media and are

committed to communicating as openly and honestly as we can through all our channels. We're proud of our well-established and engaging networks which have a combined following of more than 26,000 people across our main social media channels - Facebook, Twitter and Instagram.

Over the summer we expanded our social portfolio

even further and launched our official TikTok channel too.

Social media is a driving force for sharing our news in a timely and efficient way, and allows us to share staff stories in new and engaging ways, humanises our operational updates, and allows us to share and reinforce our trust values and team spirit.

If you don't already, please do give us a follow for all the latest #TeamUHD news and views.

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# Focus on the future

## One of the UK's fastest growing surgical centres

**This edition of Together continues our look forward to the future, this time focusing on surgical and pathology services. We caught up with Mr Rob Howell, consultant colorectal surgeon and our group medical director for surgery, to hear about exciting plans for the future of surgery at Poole Hospital.**

### What surgery does UHD offer?

Our surgical services work across our two acute sites, offering patients planned routine surgery in a range of surgical procedures, including breast, endocrine, skin and sarcoma, colorectal, upper gastro-intestinal (upper GI), ear, nose and throat (ENT), oral and maxillofacial surgery, urology, vascular, gynaecology and orthopaedic surgery. We also provide emergency services for all surgical specialities, including trauma, supported by our anaesthetic and critical care teams.

I think our surgical and anaesthetic teams are among the best in the country but are under constant strain in extremely busy hospitals, with limited spare capacity and high bed occupancy. We all want to ensure that patients receive their planned procedures and treatment without any delay.

### What is happening at Poole Hospital?

Research shows that patients get the best possible treatment when teams perform large numbers of operations of the same type. By developing Poole Hospital as the region's major planned care centre means we can keep planned surgery running year-round as a specialist centre of surgical excellence.



Anyone visiting or driving past Poole Hospital will have seen the addition of a new purpose-built five storey theatre complex to the northern end of the site. When it's eight new theatres are fully operational it will provide a key component to allow us to provide the dedicated planned care centre that we and our patients need. It will be in the top 10 largest planned care centres in the UK, performing more than 24,000 procedures a year.

Simply put - we'll have greater flexibility and resilience in the team and will move from offering a 'good' surgical service to a 'great' one.

The new building will incorporate a four-table 'barn' theatre - a design whereby the main surgical area is large and open-plan, with each patient treated in a dedicated space

with an ultra-clean air canopy over each station and screens in place to maintain patient privacy and dignity.

In addition, we plan to provide both outpatient and diagnostic services at the Poole site which will mean getting patients to the right place at the right time. There will be fewer cancellations due to emergency admissions, increased patient safety through reduced variations in care, and a clear and sustainable pathway for patients.

### What happens until then?

We hope that our clear vision for surgical services will attract and retain the very best to our many high performing teams to meet the workforce challenges we and the wider NHS faces.

We're also developing support to patients after an operation, maximising their safe care, whilst avoiding the unnecessary use of higher levels of care (critical care) where they are not required. This will lead to a reduction in 'last minute' cancellations of inpatient surgery, as well as protecting surgical capacity during times of increased critical care activity, such as during emergency surges or winter pressures.



# Striking new home for Dorset's 'invisible' service

**A new building rising out of the trees on the Wessex Fields development near Royal Bournemouth Hospital is set to play a key role in the care that patients in Dorset receive for years to come. We caught up with Paul Massey, our head of pathology, to tell us more about the Dorset Pathology Hub.**

“ Currently Dorset has three separate pathology teams across its acute hospital sites, each delivering a variety of diagnostic laboratory services for patients. These are essential to the delivery of treatments and care which patients receive in the NHS, yet much of the work that we do is often invisible to the patients they serve.

The public probably doesn't know that the care of almost 95 per cent of patients has a link to our work. This ranges from analysing blood tests to diagnosing cancer, to managing chronic diseases through accurate laboratory testing.

In 2018 we created One Dorset Pathology, bringing together all the pathology services of Dorset County Hospital and University Hospitals Dorset under one network, to better align practices to make the service more resilient and efficient.

Central to our plans was the creation of the 'Dorset Pathology Hub', and will support

hospitals and primary care networks across the region to improve diagnostics for patients and help to meet growing demand for specialist treatment and care when it opens next year. At the same time it will offer a range of development opportunities for our 400-strong staff.

I'm grateful for the support we've received from partners, such as the £2.7 million contribution from the Dorset Local Enterprise Partnership (LEP). This investment has allowed us to develop a digital histopathology centre which will enable clinicians to report on cases using scanned digitised images rather than looking through a microscope. This in turn will lead the way to using Artificial Intelligence to

help histopathologists make a rapid diagnosis in the future shortening current pathways by days.

Research, development and education are at the heart of our plans for pathology in Dorset with the intention to advance these areas as our links with our university partner, Bournemouth University, deepens and matures.

I hope that this high-profile new building will mean that pathology services become more visible to all. With a striking design and the latest in specialist technology, my colleagues are very excited to start a new chapter for pathology in Dorset building on high quality diagnostic care for patients for decades to come. ”



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# Launch of hospital Carer Passport

**H**ospitals across Dorset recognise the vital role that carers play in the health and wellbeing of those they care for.

Our teams, together with those at Dorset County Hospital and Dorset Healthcare NHS Foundation Trust, have come together with the support of local carers and other carer professionals, to create a new hospital carer 'passport'. The aim is to help ensure carers are easily recognised and subsequently supported with their stay in hospital.

The passport clearly identifies carers when their cared-for person is admitted to hospital and for staff to welcome, involve and support carers while also helping them to understand the needs of the cared-for person throughout their hospital stay.

Carers have a right, but not a duty, to continue to care while their cared-for person is in hospital.

Karen Uphill, carer support advisor for UHD, said:

“Knowing who the carer is for our patients is so important as they know their cared-for person best.”

As staff we always put the patient at the centre of all that we do. It is crucial that we work with carers to understand the individual needs of our patients so that we can provide the best care possible. ”

**The carer passport scheme at UHD includes:**

- Flexibility with visiting times
- Inclusion in care
- Inclusion to assist at mealtimes
- Involvement in discussing and planning for discharge
- Access to information about patient care (with relevant consent)

For further information ring UHD's carer support service on 0300 019 8714 or email [carersupport@uhd.nhs.uk](mailto:carersupport@uhd.nhs.uk)



News for members

# together for our members

drive improvements through a number of approaches including reducing health inequalities, tackling the patient backlog, improving the patient experience and joining up care. Governors have begun to plan an approach and will be considering how to engage more widely with those beyond our constituencies, reviewing population health data so the findings can be addressed and looking at how UHD contributes to the ICS agenda.

Considering the context in which we are operating, the new year is an appropriate time for this reset and we are full of optimism for the work we can do to support UHD. Our work is valued, and we are part of Team UHD. If you are interested in becoming a governor you can read more about it on the website and we would welcome you warmly. There will be another round of governor elections in October 2023.

I hope you will have much to look forward to over the coming months and if you would like to contact governors in the meantime please email us at [ftmembers@uhd.nhs.uk](mailto:ftmembers@uhd.nhs.uk)

## Sharon Collett

Public governor for Bournemouth and lead governor

# Welcome



**They say a week may be a long time in politics, but am sure whoever coined that phrase could not have imagined the turbulence of the past few months!**

Change can be unsettling, especially so as we consider the death of HM The Queen, our new King, energy prices, the war in Ukraine and inflation, to name just a few topics. Yet UHD staff offer continuity as they care for their patients to the best of their ability and, as governors, the overwhelming feedback we receive from patients we meet is of gratitude and positivity.

As governors, we're always keen to hear from as many people as possible as we strive to recruit new Foundation Trust members and secure opinions and experiences. This includes hearing from more younger people, and as we have recently welcomed an appointed governor from

Bournemouth University, we look forward to understanding much more about this group than we do at present. Spending time in chat cafes, listening to staff governors and appointed governors who represent their local councils, provides more opportunities to hear from less well known groups.

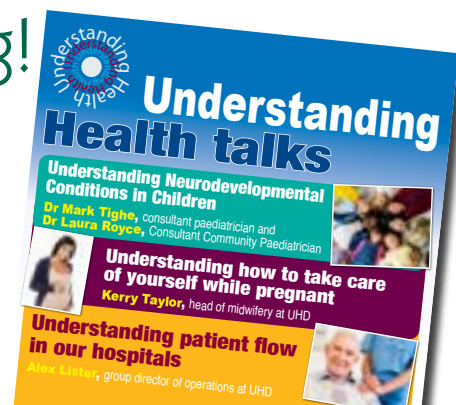
The theme of continuity and change continues with council of governor elections and we will welcome new and re-elected governors in January. Together we will review our work, access training and plan for the coming years. This will include forging links with the Integrated Care System (ICS) The ICS aims to meet challenges and

## Our health talk library is growing!

Earlier in the autumn, UHD held a range of Understanding Health talks. The free talks, on neurodevelopmental conditions in children, taking care of yourself while pregnant, and understanding patient flow in our hospitals, were also live streamed and recorded.

To find out more about these topics, visit [www.uhd.nhs.uk](http://www.uhd.nhs.uk) and search 'health talks'.

If you have any suggestions for a future health talk topic, please email [communications@uhd.nhs.uk](mailto:communications@uhd.nhs.uk)



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# Spreading the word



**R**ichard Ferns is a public governor for the Poole constituency. He tells Together about what inspires him in the role, and why he's passionate about taking news about UHD to a wider audience.

"Before becoming a governor, I was for many years a member of the healthcare trust and League of Friends at Alderney Hospital. I've served Poole Scouts for many years in a range of roles and been a school governor. In my professional career I was a technical sales engineer in engineering, and more recently have been running our own business offering reduced cost printing for community groups and charities.

"I was born in Poole and have lived here all my life,

becoming a member of the Society of Poole Men and have a passion for the town. I'm married to my wife Sandra, and have two boys, Barry and Simon, and four grandchildren

"My reason for becoming a governor was to spread the facts about the forthcoming changes to our hospitals, and especially the urgent treatment centre at Poole Hospital. I have addressed two groups so far on 'The Way Forward', concentrating on misinformation about Poole's A&E department closing, and a resume of the Beach building and new facilities

at Royal Bournemouth, and the improved facilities at Christchurch's Macmillan Unit, which I go into.

"I have plans to continue these talks in the immediate future - if you want a talk to a group you belong to contact me on richard.ferns@uhd.nhs.uk and I will be pleased to come along.

"I am pleased to be a governor and to have this opportunity. You too can become a governor - you will find it most fulfilling having an opportunity to make a difference to our hospitals going forward."

## Annual Members' Meeting (AMM)

We held our first face-to-face AMM since Covid at the Royal Bournemouth Hospital in October.

The event was well attended with an engaged audience, with many more also joining online. Chief executive, Siobhan Harrington, and chief finance officer, Pete Papworth, talked through the 2021/22 Annual Report and Accounts and forward planning for 2022/23, with Sharon Collett, lead governor, also giving a presentation on the Council of Governors activity.

UHD governors also spoke to members at one of the information stands available for attendees before the meeting started.

To watch a recording of the AMM, visit our website and search 'amm'.



## Transforming our Hospitals - watch online

Following the AMM, a talk on The Transformation of our Hospitals was given by Dr Harry Adlington, consultant in emergency medicine, and Dr Isabel Smith, consultant anaesthetist. They gave an update on the exciting changes happening to our hospitals and the benefits these will bring.

The Transforming our Hospitals talk can be watched by visiting the health talk library on the UHD website.



To contact your governors email [ftmembers@uhd.nhs.uk](mailto:ftmembers@uhd.nhs.uk)

# Winter health for young children

**E**ach year, cases of respiratory disease in young children are expected to rise over the winter months, in part this year due to increased mixing following the relaxation of Covid-19 restrictions.

If your child experiences cold-like symptoms and mild breathing difficulty this could be a sign of a common childhood illness called bronchiolitis.

It's a viral infection that tends to affect young children (under two years of age) and is usually caused by catching respiratory syncytial virus (RSV).

Most children will get better on their own and may continue to cough for a few weeks afterwards, however some children - especially those under six weeks of age - may develop difficulties and need help supporting their breathing and feeding.



Dr Mark Tighe is the clinical director for children's health at UHD. He said: "With winter here we're seeing an increase in younger patients with RSV admitted to hospital."

It's vital that parents and carers know the signs to spot to prevent the condition worsening, and what action to take.

"While RSV will get better without treatment on its own for most, the implications for very young children can be serious and it's important to get it checked out if you are concerned.

"As other respiratory infections like influenza increase in numbers in the community at this time of year too, it's also a great idea to ensure children have had their flu vaccination as an effective preventative measure."

University Hospitals Dorset is taking part in the HARMONIE clinical study, which is examining a single antibody dose, nirsevimab, as an effective treatment against RSV. Several previous studies have been completed and have shown this antibody dose to work well, so the HARMONIE study is looking to further assess the impact with more babies involved.

We are looking for babies up to 12 months old and living in Dorset to take part in this important study. If you're interested in finding out more, you can visit the study website to answer a few questions and see if your baby may be eligible to take part: [rsvharmoniestudy.com/en-gb](https://rsvharmoniestudy.com/en-gb). We would encourage interested families to get in contact with our friendly research team to find out more at [harmonie@uhd.nhs.uk](mailto:harmonie@uhd.nhs.uk) or 0300 019 8355.

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# Keep warm to keep well

**C**old weather can make some health problems worse and even lead to serious complications, especially if you are 65 or older, or if you have a long-term health condition.

NHS Dorset's top tips include:

- if you're not very mobile, are 65 or over, or have a health condition, such as heart or lung disease, heat your home to at least 18C
- keep your bedroom at 18C all night if you can - and keep the bedroom window closed
- if you're under 65, healthy and active, you can safely have your home cooler than 18C, as long as you're comfortable
- have at least 1 hot meal a day - eating regularly helps keep you warm

- have hot drinks regularly
- to reduce the risk of sudden infant death syndrome (SIDS), babies should sleep in rooms heated to between 16C and 20C
- draw curtains at dusk and keep doors closed to block out draughts
- get your heating system checked regularly by a qualified professional

As well as looking after yourself it is important to look in on vulnerable neighbours and relatives. Check on older neighbours and relatives, and those with heart or breathing (respiratory) problems, to make sure they are well, warm and have food and medicines.

Protect yourself and your loved ones by booking your flu vaccination and COVID-19 booster if you are offered it.



**Access the right care  
this winter**

Our hospitals are extremely busy, and we are asking the public not to attend our emergency departments unless it is for life-threatening illness

or injury. This will support our teams to see those patients who need our life-saving care most urgently.

For less serious illness or injuries, or if you are unsure, please call NHS 111, contact your GP, visit your local pharmacy or walk-in health centre.



## Give the gift of play

**U**niversity Hospitals Dorset NHS Charity has launched an appeal to raise £75,000 for new playground equipment at Poole Hospital's child development centre (CDC), accessed by more than 2,000 children each year with neurodevelopmental conditions.

The CDC offers a multi-professional approach to the assessment and treatment of pre-school children with a variety of developmental needs within Poole, Bournemouth and beyond. The team offer a family focused service that provides a safe and child friendly environment and developmental play specialists work with families to plan and deliver care which will enable their children to fulfil their potential.

The centre also hosts school aged clinics for children with possible neurodevelopmental conditions, including, cerebral palsy, down syndrome, learning disability and sensory integration difficulties.

Integral to the centre is the outdoor play area which supports in the assessment of conditions, additional therapy and provides an area for children to play while waiting, giving them the freedom to exercise and have space to explore while undergoing parts of a diagnostic assessment.

Caroline Fawcett, lead health play specialist at University Hospitals Dorset, said: "The replacement of this equipment will make a huge difference to the children who access the facility for diagnosis, therapy,

assessment and play; giving the gift of play to many children in our community."

The area is not only used by children accessing the centre - the health play specialist team also bring long stay inpatients to the outdoor play area, some of whom need wheelchair or supported mobility access, so the additional accessibility and sensory inclusion features planned will increase the number of children and young people who will greatly benefit from this area.

If you are interested in supporting the CDC playground appeal, please visit [www.uhdcharity.org/current-projects/childrens-playground/](http://www.uhdcharity.org/current-projects/childrens-playground/) or contact the University Hospitals Dorset NHS Charity office on 0800 019 4060/8449.

Contact us: [uhd.charity@uhd.nhs.uk](mailto:uhd.charity@uhd.nhs.uk), call 0300 019 4060/8449

or via  Twitter,  Facebook and  Instagram @UHDcharity

# Eye Sim appeal launch

**W**e've launched a new appeal to fund a new surgical simulator machine, an Eye Sim, which will revolutionise training for the next generation of eye surgeons across Wessex and push the boundaries of what's possible for all eye conditions.

This £200,000 technology simulates the environment of surgery for common eye conditions, such as a cataract operation which can be very technically complex. The eye sim will be situated on Royal Bournemouth Hospital's eye unit, where trainee surgeons from across Wessex will learn the skills needed to carry out eye operations safely and effectively.

When the hospital first purchased a surgical simulator in 2013, it elevated training capabilities, making Royal Bournemouth Hospital's eye unit a cutting-edge centre of excellence. However, recent advances in technology mean the current surgical simulator has been de-commissioned. Purchasing the next generation of this technology will ensure the Royal Bournemouth Hospital eye unit remains at the forefront of research, training and eye surgery over the next 10 years.

Ben Parkin, consultant ophthalmologist and oculoplastic surgeon and college tutor at University

Hospitals Dorset, said:  
"I have worked as a surgeon at Royal Bournemouth Hospital for the last 19 years and experienced first-hand just how challenging surgery for common eye conditions like cataract and glaucoma can be.

**"Purchasing the most up-to-date surgical simulator will advance our training further than ever, resulting in more highly skilled surgeons performing effective life-changing operations on patients at our hospitals."**



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We need your help to raise £201,000 to train the next generation of eye surgeons across Wessex at the Royal Bournemouth Hospital eye unit.



Purchasing a new eye sim will help trainee surgeons learn to operate in a small cube of 5x5x5mm, account for the natural movement of the eye, work through a microscope and manoeuvre surgical probes with each hand and each leg operating different controls at once.

\*based on the 10 year life span of previous simulator, during which over 30,000 cataract operations were performed and over 75 surgeons had access to safe, simulated practice.

**Contact us: [uhd.charity@uhd.nhs.uk](mailto:uhd.charity@uhd.nhs.uk), call 0300 019 4060/8449**

or via  Twitter,  Facebook and  Instagram @UHDcharity

# New sensory projector supporting patients with dementia

Royal Bournemouth Hospital recently took delivery of an innovative new piece of equipment which uses meaningful activities to encourage movement, active participation and shared enjoyment in patients living with dementia.

The omiVista Mobii interactive projection system is designed for people at all stages of dementia. It helps users achieve greater socialisation and communication, enjoyment,



sustained moments of lucidity, physical movement and raised well-being levels through calming or stimulating activities. These can be projected onto floors, bedside tables and beds which make it a fully inclusive piece of equipment.

Katie Horswill, dementia and delirium team lead at the hospital said “We’re currently caring for a gentleman who is living with dementia who was quite withdrawn when he first came into hospital and we needed to find a way to engage with him. We thought we would try the omiVista and offered him the opportunity to look at the sensory equipment.

“We chose to use a picture of an unpainted, black and white fence projected onto a table. I placed one of the paint brushes in the patient’s hand and asked him if he would kindly help me paint the fence. He instantly started painting and the projected image started to fill with colour. The patient engaged in this activity for quite some time - it was so lovely to see and quite emotional to watch.”

## Excitement builds at construction quiz

Quiz lovers came together earlier this month to test their general knowledge and raise nearly £2500 for the robotic tilting table appeal, one of University Hospitals Dorset NHS Charity’s (UHDC) main fundraising projects.

The evening was hosted and organised by the Trust’s main contractor for


its transformation projects, Integrated Health Projects (IHP), the alliance between Vinci Construction UK and Sir Robert McAlpine, raising funds for the UHDC’s robotic tilting table appeal as a legacy.

Teams came from across the Bournemouth area and included subcontractors



Stephenson, AT Jones, W Portsmouth, and Norstead. IHP and the hospital had multiple teams supporting the event as well as from Royal Bournemouth Hospital neighbours, Amiri and JP Morgan.

**Contact us:** [uhd.charity@uhd.nhs.uk](mailto:uhd.charity@uhd.nhs.uk), call **0300 019 4060/8449**

or via  Twitter,  Facebook and  Instagram @UHDcharity

## Link restarts visits after pandemic

Poole-Africa Link (PAL) supports education and training in hospitals in the continent, with the latest team arriving back from a two week trip to Lira in Uganda in October.



UHD intensivist Dr Frankie Dormon led the trip and gives an insight into the group's experiences.

This was our first visit post-pandemic, so it was with a little trepidation that we set off. Dr Pasco Hearn, a microbiology consultant, already had experience of Uganda, having worked in Mbarara some time ago. Dr Luke Turley, a GP, has extensive experience in various roles in Africa.

“Our midwives, Emily Seddon and Rosie Farnworth, were keen to get stuck in and Dr

Ben Chambers, another anaesthetist/paediatrician, was ready for whatever came his way.

“The hospital is keen to open a high dependency unit, but although they had the space and staff, they had not been able to develop any protocols and needed some help. This ended up being my project for most of the trip, ably assisted by Ben.

“During the second week we saw more of the third-year students, who received a mix of midwifery and anaesthetics. Emily is particularly experienced in the mental health aspects of mothers. In addition, they identified a potentially simple strategy to identify blood loss following birth, a major cause of mortality across the world.



“Pasco spent most of his time taking part in ward rounds and discussing the use of antibiotics. It is possible to buy almost any antibiotic at the pharmacy without a prescription, and antibiotic resistance is a major problem across the country.



“Alongside our trip we saw what our colleague Judy Mella has achieved with a grant from UK Aid, which she secured just before the pandemic hit, to set up a breast screening service. This included training radiographers, nurses and midwives to examine breast lumps. While we were there, Judy saw about 150 patients, finding some six cases of breast cancer.

“Although the whole country was on alert due to an outbreak of Ebola in the west of the country, we avoided any problems and arrived home safe after a really rewarding trip.”

For more information visit [pooleafricalink.org.uk](http://pooleafricalink.org.uk)

## together is your publication

We hope you have enjoyed reading this edition of Together, produced by University Hospitals Dorset's communications team. If you have any feedback, a story or a suggestion for us to cover in future editions, email [communications@uhd.nhs.uk](mailto:communications@uhd.nhs.uk)

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