

Patientfocus

Royal Brompton & Harefield **NHS**
NHS Foundation Trust

Royal Brompton & Harefield Hospitals' magazine for patients and our Foundation Trust members | Winter 2017/18



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Royal Brompton's adult intensive care unit hosts annual patient day

MORE THAN 50 former critical care patients, their families and members of staff came together for Royal Brompton's annual adult intensive care patient day.

The day, now in its third year, is a chance for staff to hear directly from patients and their relatives about their experiences of critical care, including what they found helpful about our services and – importantly – where further improvements could be made.

It also gives patients and their families the opportunity to meet each other outside hospital, share their experiences and hear from the team who cared for them, including senior nurses, critical care consultants, consultant psychologists and occupational therapists.

Previous improvements

that have been made to the intensive care unit as a result of patient feedback include:

- creating a new, brighter and larger waiting room
- a new quiet room where staff can talk to relatives with increased privacy and fewer interruptions, equipped with computers so scans and images can be explained
- a 'buzzer' system that lets relatives know when they can see their loved ones, meaning they can spend time away from the ward without having to repeatedly check with staff



AICU doctors conducting their ward round

- re-launching patient diaries to record their time in critical care.

Speaking at the event, former patient Glynn Seal explained how he had recovered from pneumonia, which had led to four months in hospital, 11 weeks in intensive care and five weeks on extra-corporeal membrane oxygenation (ECMO) at Royal Brompton. Following his recovery he ran a marathon, raising nearly £2,000 for the intensive care units that saved his life.

Another former patient, Simon Reuter, shared his experiences of paranoia and hallucinations while in intensive care, providing an insight into the psychological impact of critical illness and being in an intensive care environment.

Martin Beadle discussed the experience of having his wife, Amanda, on the unit, saying: "You can teach nursing, but

you can't teach kindness, empathy, caring, all of which they showed day in, day out... the NHS is a superb institution, the support we received was fantastic, and it's great that we were listened to."

AICU matron Jo Tillman helped to organise the event. She said: "The day was a real chance to spend time with patients and their families, away from the obviously busy and pressurised world of the intensive care unit itself. The feedback we received is absolutely invaluable when it comes to improving what we do.

"We're already looking at how we can improve 'handovers' between departments, and when patients are able to go back to their local hospitals, to ensure the staff taking over their care receive all the key information about their experience to date."



Matron Jo Tillman and staff nurse Esther Dominguez Verde at work in one of the AICU's isolation rooms

Congenital heart disease services to stay at the Trust

"We have been given the opportunity to shape our own destiny and will do so in a planned and rational way in the best interests of the patients we serve."

Bob Bell,
chief executive

NHS ENGLAND HAS AGREED to end its challenge to Royal Brompton's congenital heart disease service and support a major new collaboration between the Trust and King's Health Partners.

After considering the Trust's formal response to the proposals, as well as thousands of consultation responses from staff, patients, politicians, local councillors, charities and other groups, NHS England's board confirmed that Royal Brompton will keep the service for the foreseeable future.

It also stated its support for the partnership with King's Health Partners (Guy's and St Thomas', King's College Hospital and South London and Maudsley NHS Foundation Trusts and King's College London), which would include a joint CHD service.

In an emailed message to all staff, chief executive Bob Bell said: *"We have been given the opportunity to shape our own destiny and will do so in a planned and rational way in the best interests of the patients we serve."*

"We very much welcome the opportunity to continue developing the benefits of a partnership with King's Health Partners across all



Campaigners for CHD services at Royal Brompton

our cardiac and respiratory medicine and research, including our adult and children's CHD service – one of the biggest, best and safest congenital heart disease services in the UK.

"For many of us this has been a long and sometimes difficult journey. While we have not yet reached our destination, I do believe we now have a clear direction of travel. Any planning around the Trust's future takes as its starting point the ability to build upon the truly remarkable work that is carried out here, each and every day."

On the day of NHS England's decision, patients and supporters took to social media and email to express their delight at the announcement, including patient Jackie Brewer who said: *"What fantastic news... All the hard work was well worth it. The hospital staff should be so proud of yourselves."*

Fellow patient Rebecca Bond agreed, saying: *"I think the partnership sounds like a really positive way forward for the hospital. Particularly if it means that patients can keep the continuity of*

remaining with the same team. It's a real cause for celebration."

Parent Jim Hedge also pointed out the wisdom of keeping our specialist teams together. He said: *"We are delighted! The big thing for me is that the clinical teams remain in one piece, and the team that treated our son remains in place."*

Messages were received from other Trust supporters including MPs, Peers and charities. The Cystic Fibrosis Trust tweeted: *"We're delighted to see @NHSEngland board voted against planned disruption to world-class @RBandH services."*

And the Royal Brompton & Harefield Hospitals Charity, which, together with the Brompton Fountain and Friends of Royal Brompton Hospital, spearheaded much of the campaign work, wrote: *"We did it! Congenital heart patients at @RBandH will continue to receive the care they deserve at the hospital they know and trust... Thank you to all who helped make it happen."*

To read more messages of support, follow the Trust on [Twitter @RBandH](https://twitter.com/RBandH).

New partnership to deliver world-class care for heart and lung patients

The Trust is to play a leading role in an innovative partnership to revolutionise cardiovascular and respiratory services for patients.

IN NOVEMBER, Royal Brompton & Harefield NHS Foundation Trust and King's Health Partners (the Academic Health Sciences Centre comprising Guy's and St Thomas', King's College Hospital and South London and Maudsley NHS Foundation Trusts, and King's College London) announced plans to explore the potential for a major new collaboration.

The partners have a united vision to create a global powerhouse for heart and lung medicine and research in London, providing the best possible patient care and experience. This would bring together the specialist skills and expertise from all the organisations involved to create a centre of excellence for current patients and future generations.

This envisages the development of a new purpose-built clinical academic facility on the St Thomas' Hospital and Evelina London Children's Hospital site.

The partnership would also provide substantial investment to sites at King's College Hospital and Harefield Hospital, to support the provision of high-quality care in a new network across the south of England.

This exciting opportunity would:

- Deliver world-class clinical services from before birth through to old

age for common and rare conditions on a local, regional, national and international level, offering new treatments.

- Enable the organisations involved to deliver best practice care in modern facilities, making the best use of NHS estates.
- Provide a large-scale service for adults and children with heart and lung conditions, offering outstanding outcomes and sustainable care within a collaborative network.
- Allow the organisations to cement their place at the forefront of UK health research and build strong industry and commercial partnerships.
- Train the next generation of clinicians and researchers, through extensive education including national and international training.

The scale and range of services offered by the collaboration would benefit patients on a regional, national and international level, directly reaching a diverse population of more than 12 million people.

By combining their assets in the new partnership, the organisations would be able to seek new opportunities to improve public health outcomes and

economic growth, in alignment with the Government's Life Sciences Industrial Strategy.

Services will remain focused on patients and their families and on partnerships with local and regional providers.

Bob Bell, chief executive of Royal Brompton & Harefield NHS Foundation Trust, said: "This would be a UK first in terms of the scale of the partnership and the clinical, education and research benefits it could provide, rivalling the world's largest centres, and becoming the most advanced cardiovascular and respiratory health system in Europe. For instance, our congenital heart services and cystic fibrosis services would continue to offer care from before birth to old age, reflecting what we believe to be the best model for the delivery of a lifetime of specialist care, and crucially, our clinical and research teams built up over decades, would stay together."

The organisations have started to explore what a formal partnership model will mean in practice for services, including benefits and opportunities across clinical services, research and education. Any proposals will be clinically led, developed in partnership with patients and stakeholders, and will be subject to the approval of relevant boards and regulators, commissioner support and public consultation.



"This would be a UK first in terms of the scale of the partnership and the clinical, education and research benefits it could provide, rivalling the world's largest centres, and becoming the most advanced cardiovascular and respiratory health system in Europe."

Trust members and governors gather for AGM.

*Bob Bell:
"Collaboration is the key to our future"*

The potential partnership between the Trust and King's Health Partners was first discussed when Trust governors and members gathered for the annual general meeting in July.

The annual meeting was the first to be led by the new Trust chair, Sally Morgan, Baroness Morgan of Huyton, and was attended by staff, patients, carers and members of the public.

Chief executive Bob Bell thanked everyone for their contribution to ensuring that the Trust is "in good shape" for the coming year. He reminded governors and members of the redevelopment projects at both hospitals and said he was particularly pleased with the progress at Harefield, where a new adult intensive care unit (AICU), scanning centre and inpatient ward were nearing completion.

He also described the need to collaborate with others to secure a sustainable future for the Trust, outlining the early discussions held with King's Health Partners to explore a formal working partnership in heart and lung medicine and research.

He concluded: "We think this is what the future holds – so that the legacy of excellence we have all inherited can carry on for future generations."

Harefield Heart Live 2017 attracts professionals, patients and the public

MORE THAN 200 staff, patients and members of the public visited Harefield Concert Hall for the annual Harefield Heart Live event in October.

The event was divided across two days. The first day invited professionals, including doctors, nurses and paramedics, to share best practice on the latest techniques and treatments in heart attack management, including a live simulation exercise, panel discussions and lectures.

The second day was for patients and the public, giving people the chance to learn how the Trust trains and develops its expert medical staff, and learn and practice the CPR essentials that could someday help them save a life.

Consultant cardiologist Dr Miles Dalby launched Harefield Heart Live in 2007, and he and his team have been running a varied annual programme ever since.

He said: "The real ethos of this event is around teamwork – how those in the field, such as ambulance staff, work with the team in the heart attack centre. We've expanded it over the years to include subjects such as post-heart attack and rehabilitation care, and most recently resuscitation in the general public.

"When most patients have a heart attack, their first contact is not with one of our specialists or even an ambulance crew, it is with a member of their family or a stranger in a public place. If that person can do some CPR in those first moments, the patient's chances of survival are increased."

As part of the public day, Dr Dalby and his team demonstrated plans for a "ready to resuscitate" booth and app, which will teach basic resuscitation, and 70 students from 11 local schools played the part of a giant focus group to give feedback on the plans.



Wayne Hurst (matron in cardiothoracic surgery) and Sarah Chorbachi (practice facilitator in cardiology) show Kajal, Melissa and Monty from Rickmansworth School some CPR essentials

Remembering Professor Dame Margaret Turner Warwick



PROFESSOR DAME MARGARET TURNER WARWICK, former Royal Brompton consultant and pioneer in the field of respiratory medicine, has died aged 92.

Dame Margaret practised as clinician and professor at Royal Brompton between from 1965 to 1987. She was Professor of Thoracic Medicine at the Cardiothoracic Institute, University of London (now the National Heart and Lung Institute) from 1972 to 1987, and subsequently Dean and emeritus professor. In 1989, she became the first woman President of the Royal College of Physicians in its 400 years. She is credited with raising the profile of respiratory medicine and research within the NHS and internationally.

A charitable fund has been set up in her memory to support research into changes to pulmonary circulation and ventilation following the transcatheter aortic valve implantation (TAVI) procedure – a procedure to treat narrowing of the opening to the aortic valve (which controls the flow of oxygenated blood out of the heart). For more information, including details on how to give to the appeal, go to www.rbhcharity.org/damewarwickturner.

Trust scores well in survey of non-clinical services

BOTH OUR HOSPITALS have performed significantly better than the national average in the Patient-Led Assessment of the Care Environment (PLACE) survey, a nationwide assessment of non-clinical services such as food and cleanliness in NHS hospitals.

The annual assessment is undertaken by teams of healthcare staff and members of the public, known as 'patient assessors'. The Trust scored highly in all categories, but its best scores were in the areas of cleanliness (99.58%) and food (95.7%).

The six categories assessed are:

- the cleanliness of the environment
- the condition – inside and outside – of the building(s), fixtures and fittings

- how well the building meets the needs of those who use it, for example through signage and car parking facilities
- the quality and availability of food and drinks
- how well the environment protects privacy and dignity, and supports patients who have dementia and/or a disability.

99.58%

The Trust's score for
cleanliness

Steve Moore, head of estates and facilities, said: "We have worked hard over the last year to improve our scores in dementia and disability. Our estates and capital projects teams on both sites have been fully briefed on the requirements and ensure that any refurbishment projects undertaken meet all relevant accessibility criteria.

"We are proud of the results we have achieved this year and grateful to the many members of staff and patients who worked so hard with us to achieve this.

"We will continue to work with our numerous stakeholders to maintain and improve scores wherever possible, to improve the experience for our patients."

Charity raises £65,000 for Heart of PICU Appeal



IN LATE OCTOBER, supporters of Royal Brompton & Harefield Hospitals Charity helped to hit the £65,000 target for the charity's 'Transforming the Heart of PICU' appeal.

The charity launched the campaign to fund a more welcoming, easier to navigate reception area for Royal Brompton's paediatric intensive care unit (PICU). Parents of children treated on the unit had previously said that the area's design was poor, creating a visual barrier between them and the staff, leaving them feeling unsure about who to approach. Staff had also said that the area gave little private space for them to discuss individual patients.

Mercy Makukula, ward clerk on PICU, said: "When parents come in they are anxious, afraid, lost; they are dealing with all sorts of emotions. The new design will allow us to properly greet them, and give them reassurance that they're coming into an area of hope, with a team that is there to support them and their child."

It took just five months for the appeal's

target amount to be reached. The Summer Raffle, 'Great Brompton Bake Off', and challenges that individual supporters took on themselves, all helped contribute.

Work to transform the ward has now begun. The new reception area is being built off-site and will be installed when ready. The new reception will also feature an automated drug delivery system, which will save time for staff.

Lizzie Biggart, senior nurse in children's services, approached the charity about funding the project last year, alongside the Brompton Fountain children's charity, which contributed an additional £5,000. She said: "The fundraising for our new PICU hub has been so wonderful. The new area will provide a space where families feel welcomed, clinicians can have private discussions, staff can access the data they need, and nurses can get quicker access to medication.

"We'd like to thank every person who has generously contributed to our appeal and all the staff at the charities who supported it."



THE OPERATING THEATRE is a well-oiled machine, fast-paced yet efficient, meticulously planned but never predictable.

Harefield Hospital has five theatres, where more than 100 people work in a variety of specialist roles including surgeons, anaesthetists, nurses, porters, administrators, healthcare assistants and surgical assistants.

There is no such thing as a “typical” day, but organisation is key to helping things run smoothly. The list is planned in advance and the day starts with a meeting at 7 a.m. to brief everyone on the day’s caseload, which can vary in number depending on complexity.

However, as a highly specialist hospital and leading transplant centre, an emergency case could come in any time, so the team needs to be adaptable, and an on-call rota ensures theatres can be made ready for an urgent operation day or night.

There are three categories of surgery, and the team can deal with any combination on a given day:

- **Elective:** These patients are scheduled in advance, for example patients with coronary artery disease who are not in danger, but their quality of life will be improved by having surgery.
- **Urgent:** These patients need to be seen quickly, for example a recent heart attack patient who needs a

A look inside Harefield’s theatres

bypass, or someone with an existing heart condition that is no longer stable.

- **Emergency:** These patients are in immediate danger if not treated immediately, for example patients with aortic dissection (a tear in the major artery carrying blood out of the heart) and transplant patients.

Who’s who (and what do they do)

Four members of staff discuss their roles in theatres, and explain why teamwork is so important:

Mr Sunil Bhudia – surgeon

“A patient’s journey starts with the referral from a consultant. A multidisciplinary team, which includes the surgeon, will discuss the case and assess if surgery is needed. If it is, we talk the patient through the risks and benefits so they know what to expect. An anaesthetist works with me to check patients are fit enough for surgery, and if they are, I operate.”



“Every morning, we have a briefing on cases for the day and check if any special equipment is needed. Surgeons and registrars operate, the anaesthetic team monitor the patient closely, department practitioners carry out all supportive tasks, perfusionists run the heart lung machines, and nurses prepare and manage the equipment, instruments and sutures.”

“The teams learn and work to each surgeon’s professional preferences. Most operations are time critical and our nurses know what equipment we need before we need it. This means I can give my full attention to the procedure so the chances of a good outcome are high.”

“My involvement doesn’t end when the operation does. I do a daily round alongside the anaesthetists and intensivists to manage patients when they are recovering and discuss their operation with them when they are awake. The patient’s journey is a circle – from the referring consultant in another hospital, to the anaesthetic team, theatres, intensive care, the wards, and finally back to the referring consultant.”

“I arrived at Harefield in February 2016, and what I most enjoy about working here is that we are experts in what we do. Many of the patients we deal with are very complex and would be turned down by other hospitals, but we don’t shy away from a challenge – we come up with solutions to problems together.”

Dr Ian McGovern – director of theatres

“I have been at Harefield since 2002. My role involves providing direction and leadership in the operating theatres; I also have a hands-on clinical role as consultant anaesthetist and intensivist.”

“We are full of pride for the work we do”



here – we start where everybody else leaves off, offering high risk procedures to patients most other establishments wouldn't consider suitable for surgery.

"Anaesthetics and intensive care play an important role in this. The anaesthetist's job is not just sedating the patient – getting someone to sleep is easy, the skill lies in keeping them well while they are undergoing major physical change. For a 'routine' procedure such as a coronary artery bypass graft (CABG), it starts with the anaesthetist assessing patients on the ward to determine any risks we may need to be aware of. Then they go to the anaesthetic room, where we monitor their blood pressure and oxygen, insert cannulae [thin tubes through which medication is administered] and induce anaesthesia.

"Critical care starts at the point anaesthesia starts. We insert a tube (intubation) and supply oxygen (ventilation), then we attach monitoring systems such as the echocardiogram. Inside theatre, anaesthesia needs to be maintained, and medications administered to control cardiac output or blood clotting (coagulation). Clearly there needs to be a lot of two-way communication between anaesthetist and surgeon, so the surgeon can concentrate on the technical aspects without worrying about the welfare of their patient. It's amazing what the human body can withstand with the right support."

Tim Pitt – head of perfusion

"Our principal job is to maintain and run the heart lung machines, and when patients are on the machine we have responsibility while their own heart and

“
The operating theatre is a well-oiled machine, fast-paced yet efficient, meticulously planned but never predictable.
 ”

lungs are not working. Once the operation is over, we get the heart safely restarted and withdraw the patient from machine support.

"Perfusionists only exist in cardiac theatres, so a lot of people haven't actually heard of us. There are only about 400 of us in the UK, and 20 work at this Trust. Most are ITU nurses or science graduates by background. Perfusion is a relatively new specialism and historically it was very male-dominated, but we now have more women than men on our team.

"At any time, we have one perfusionist working in each theatre, plus one extra. We also have one in ITU looking after patients who are on ECMO (extracorporeal membrane oxygenation – a machine that oxygenates blood outside the body allowing patients' lungs

to heal), and another available to do organ retrieval for transplants. We are the most experienced perfusionists in the world at using the 'heart in a box' Organ Care system [a machine that preserves a heart for transplant by infusing it with warm, oxygenated blood while it is being transported to Harefield], because we work at the hospital where the system has been used most.

"Our perfusionists go above and beyond what is expected at most other hospitals, using the whole range of skills and techniques across theatres, transplant, intensive care and paediatrics."

Katja Schütz – senior theatre nurse

"I am originally from Finland but I have worked in this Trust for 11 years. A typical day for me starts around 7.30a.m. with a whole-team briefing, then we go to theatres and get everything ready for the first case. We need to get all the equipment ready according to the surgeon's preferences and the kind of operation it is. At 7.45a.m. there is a briefing with the surgeon, anaesthetist and the nurses, when we get detailed information about the operation we will be doing. Around 8a.m. we 'scrub', and then set up.

"Doing the 'scrub nurse' role in the theatre is not as simple as giving instruments to the surgeon, we need to be a couple of steps ahead, so he or she gets what they need without having to ask.

"Sometimes the day can be very long but when the atmosphere is good it's so easy to go the extra mile."

Our governors

Our governors are always keen to hear from members of their constituencies who have questions, comments or ideas. Their details are below. If you have a question for your governor, please email governors@rbht.nhs.uk and it will be forwarded to the appropriate person.

Public governors

- **George Doughty** *North West London*
- **Anthony Archer** *Bedfordshire and Hertfordshire*
- **Robert Parker** *South of England*
- **Jennifer Sano** *Rest of England and Wales*

Patient and carer governors

- **Brenda Davies** *Bedfordshire and Hertfordshire*
- **Edward Waite** *South of England*
- **Stuart Baldock** *Elsewhere*
- **Ejikeme Uzoalor** *Elsewhere*
- **Caroline Karlsen** *Carer*
- **Jeremy Stern** *North West London*
- **Sean O'Reilly** *Bedfordshire and Hertfordshire*

Staff governors

- **Elizabeth Henderson**
- **Claire Hogg**
- **Anne McDermott**
- **Laura Price**
- **Stephen Caddick**

AREAS WITHIN THE CONSTITUENCIES

Each area is organised according to defined electoral areas, which are used in local authority elections.

- **North West London:** Residents of the following eight London Boroughs: Harrow, Hillingdon, Brent, Ealing, Hounslow, Westminster, Kensington & Chelsea and Hammersmith & Fulham.
- **Bedfordshire and Hertfordshire:** Residents of the counties of Bedfordshire and Hertfordshire.
- **South of England:** Residents of 12 London boroughs (Croydon, Kingston, Merton, Richmond, Sutton, Wandsworth, Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark) and the counties of Berkshire, Surrey, Sussex, Kent, Buckinghamshire, Oxfordshire, Hampshire and the Isle of Wight.
- **Rest of England and Wales (public governors):** Comprising all areas not included above.
- **Elsewhere (patient governors):** Comprising all areas not included above.



Charity events

BRIGHTON MARATHON

15 April 2018

For those seeking a new challenge this year, Royal Brompton & Harefield Hospitals Charity have places in the marathon by the seaside. To find out more, contact **Alice** (A.Eastwood@rbht.nhs.uk) or visit rbhcharity.org/event/brighton-marathon

CHARITY ABSEIL

6 May 2018

Impress your friends and family by taking on this adrenalin-inducing abseil down the ArcelorMittal Orbit – the UK's highest statue. With breathtaking views over London and a thrilling sense of achievement when you reach the ground, what better way to raise funds for our hospitals? Contact **May** (m.boyter@rbht.nhs.uk) or visiting rbhcharity.org/events to find out more.

GRAND CANAL CHALLENGE

1 July 2018

A joint event for the two hospitals, Royal Brompton & Harefield Hospitals Charity's Grand Canal Challenge sees fundraisers take on a scenic bike ride, run or walk along the Grand Union Canal, culminating in a Finishers' Festival at Harefield Hospital with food, music and craft beer. Register a team today at: rbhcharity.org/events

..... Diary dates for members

MEMBERSHIP EVENT

If you would like to attend a members' event, please contact [Philippa Allibone](mailto:Philippa.Allibone@rbht.nhs.uk) at members@rbht.nhs.uk or phone 020 7352 8121 ext 2811.

TREATING AND MANAGING ARRHYTHMIA

Consultant cardiologist Dr Wajid Hussain will discuss treatment and management of heart arrhythmias (rhythm problems). These occur when the electrical impulses that coordinate your heartbeats don't work properly, causing your heart to beat too fast, too slow, or irregularly. Dr Hussain has clinical expertise in rhythm problems ranging from simple palpitations to complex arrhythmias, and ventricular tachycardia (fast heart rhythm in the lower part of the heart). He will talk about how our experts at Harefield approach the treatment of arrhythmias, using techniques such as atrial fibrillation (using a wire to selectively destroy tiny areas of heart tissue).

11am–12.30pm, 21 March 2018
at STaR Centre, Harefield Hospital

Volunteers needed for the membership team

WE ARE LOOKING for volunteers to help with membership recruitment. This involves talking to patients and members of the public about Trust membership, and signing people up to become members.

Recruitment can be at either Harefield Hospital or Royal Brompton Hospital. The hours are flexible – you can do as much or as little as you like, and full training will be given.

If you are interested, please contact Philippa Allibone, membership manager at members@rbht.nhs.uk

SINGING FOR BREATHING



Phoene Cave running a Singing for Breathing session

Aimed at those with respiratory conditions or breathlessness associated with cardiac conditions, sessions are relaxed, informative and fun. They aim to teach basic singing techniques, which can help with breath management and release stress. Workshops below are open to outpatients and local people who identify as living with breathlessness.

ROYAL BROMPTON HOSPITAL

Every Tuesday, 11am–12pm

The Quiet Room, Victoria Ward,
2nd floor, Fulham Wing,
Royal Brompton Hospital

HAREFIELD HOSPITAL

Every Monday (apart from Bank Holidays), 11.30am–12.30pm

Harefield Library, Park Lane,
Harefield, Middlesex, UB9 6BJ

Every Monday (apart from Bank Holidays), 2pm–3pm

Christ Church, Uxbridge, Redford Way,
Belmont Road, Uxbridge UB8 1SZ

Please get in touch with the Arts Team before your first visit. [Connie](mailto:Connie@rbht.nhs.uk) or [Karen](mailto:Karen@rbht.nhs.uk) would be happy to tell you more.

arts@rbht.nhs.uk
020 7352 8121 ext. 4087
www.rbht.nhs.uk/arts

To buy a Singing for Breathing CD please see: www.rbhcharity.org/shop/singing-for-breathing-audio-cd

TRUST BOARD MEETINGS

Members of the public are welcome to attend Trust Board meetings.

28 FEBRUARY 2018

2pm–4pm

Boardroom, Royal Brompton Hospital

28 MARCH 2018

2pm–4pm

Boardroom, Royal Brompton Hospital

25 APRIL 2018

10.30am–1pm

Concert Hall, Harefield Hospital

23 MAY 2018

10am–12pm

Boardroom, Royal Brompton Hospital

COMBINED COUNCIL OF GOVERNORS AGM AND MEMBERS ANNUAL MEETING

18 JULY 2018

11am–1.30pm

Concert Hall, Harefield Hospital

COUNCIL OF GOVERNORS MEETINGS

31 January 2018

11am–1.30pm

Concert Hall, Harefield Hospital

15 March 2018

11.30am–2pm

Boardroom, Royal Brompton Hospital

8 MAY 2017

11am–1pm

Concert Hall, Harefield Hospital

Useful contacts

Foundation Trust

Membership office

Contact: Philippa Allibone
Tel: 020 7352 8121 ext 2811
Email: members@rbht.nhs.uk

Corporate secretariat

Contact: Anthony Lumley
Tel: 020 7351 8264
Email: governors@rbht.nhs.uk

Royal Brompton & Harefield Hospitals Charity

Alice Eastwood

*Community fundraiser,
Royal Brompton Hospital*

Tel: 020 7352 8121 ext 2210
Email: a.eastwood@rbht.nhs.uk

Joe Dunster

Community fundraiser, Harefield Hospital

Tel: 01895 828 820
Email: j.dunster@rbht.nhs.uk

Joanna Lewin

Marketing and communications manager

Tel: 020 7352 8121 ext 4267
Email: j.lewin@rbht.nhs.uk

Denise Hawkes

Personal assistant to CEO

Tel: 020 7352 8121 ext 8613
Email: d.hawkes@rbht.nhs.uk

Healthwatch

Healthwatch – Kensington and Chelsea

Address: Unit 25, Shaftesbury Centre,
85 Barlby Road, London W10
6BN
Tel: 020 8964 1490
Email: healthwatchkc@hestia.org
Website: healthwatchcwl.co.uk/
kensington-chelsea

Healthwatch – Hillingdon

Address: 20 Chequers Square,
The Pavilions Shopping
Centre, Uxbridge UB8 1LN
Tel: 01895 272 997
Email: office@healthwatch
hillingdon.org.uk
Website: healthwatchhillingdon.org.uk

The Brompton Fountain

(registered charity 1110339)

Supporting families with children who are patients at the Trust and raising funds for the paediatric units

Address: Royal Brompton Hospital, Sydney Street,
London SW3 6NP
Tel: 03300 22 92 91
Email: admin@thebromptonfountain.org.uk
Website: www.thebromptonfountain.org.uk
Facebook: /thebromptonfountain
Twitter: @BromptonSupport

Harefield Hamsters

Harefield Transplant Club

Chairman: Brian Unwin
Tel: 01494 472 470
Email: chairman@harefieldhamsters.org
Website: www.harefieldhamsters.org

Friends of Harefield Hospital (volunteers)

Contact: Judy Snook
Tel: 01923 774 789

Friends of Royal Brompton

A charity fundraising to donate equipment and amenities. Also, providing volunteering opportunities in their shops and trolley services.

Contact: Elizabeth Henderson
Tel: 020 7351 8272
Email: e.henderson@rbht.nhs.uk

Cystic Fibrosis Trust

Address: 11 London Road, Bromley, Kent
BR1 1BY
Tel: 020 8464 7211
Helpline: 0300 373 1000
Email: enquiries@cftrust.org.uk
Website: www.cftrust.org.uk

The Somerville Foundation

For patients with congenital heart disease

Address: St Margaret's Green, Ipswich
IP4 2BN
Tel: 01473 252 007
Helpline: 0800 854 759
(ansaphone only at weekends)
Email: admin@thesf.org.uk
Email: helpline@thesf.org.uk

Tiny Tickers

Improving the early detection and care of babies with CHD and providing information and support from pregnancy onwards

Email: info@tinytickers.org
Website: www.tinytickers.org

Primary Ciliary Dyskinesia (PCD) Family Support

Contact: Fiona Copeland (chairman)
Tel: 0300 111 0122 (helpline)
Email: chair@pcdsupport.org.uk
Website: www.pcdsupport.org.uk

Duchenne Family Support Group

Address: 78 York Street, London
W1H 1DP
Helpline: 0800 121 4518
Email: info@dfsg.org.uk
Website: www.dfsg.org.uk

Scleroderma & Raynaud's UK

Address: Bride House, 18-20 Bride Lane,
London EC4Y 8EE
Helpline: 0800 311 2756
Tel: 020 7000 1925 (head office)
Email: info@sruk.co.uk
Website: www.sruk.co.uk

Prefer to receive Patient Focus by email?

If you would prefer to receive Patient Focus by email, please send details including your name and email address to Philippa Allibone, membership manager: members@rbht.nhs.uk.

