August 2017

ambassador
Public and Staff Membership Magazine

Saving precious minutes will help save precious lives …see page 12-13 for more details about the new Helipad at the L&D

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Dear Member,

Welcome to the latest edition of our Ambassador Magazine.

The next Medical Lecture will deal with Colorectal Surgery and Stoma Care and will be on Wednesday 11 October 2017 from 5.30pm to 7.30pm. As always it will be presented by the teams who are involved in delivering Stoma Care. There will be time for questions following the presentation. It will be in your interest to arrive early as it will provide an opportunity to meet with the L&D Public Governors and senior staff to discuss any concerns or suggestions that you may have (see page 5 for more information). If you wish to attend, please complete the enclosed reply paid invitation card and return it by 27 September 2017. The Medical Lectures are very popular and there are only limited places available at the venues, so please reply as early as you can to avoid disappointment.

The presentation slides of the last Lecture on Stroke care can be viewed on the L&D website under the Members’ area: http://www.ldh.nhs.uk/mostpopular/ft-members/member-news/.

The Annual Members’ Meeting will be held on Wednesday, 13 September 2017 when there will be a report on the progress of the hospital and an update on any changes to the Constitution. An invitation card is included. The meeting will be held in the L&D Hospital Social Club, at 5.30pm for a 6pm start. Arriving early will give you an opportunity again to meet L&D Governors and senior staff to discuss any concerns or suggestions you may have.

The L&D is very much in your hands. You have the opportunity to meet Public and Staff Governors at the regular Council of Governors Meetings, which are open to the public. I encourage you to attend, they are held at the John Pickles COMET Lecture Hall at the L&D. The meeting dates are listed on page 5.

By the time you receive this copy of the Magazine, the elections for the new Governors who take up their posts in September will be well underway. Please consider standing for election next year.

Ray Gunning
L&D Public Governor and Chairman of the Membership & Communications Sub Committee

If you would like to receive an electronic copy of Ambassador in the future please send your email address to FTmembership@ldh.nhs.uk

We hope you enjoy our Membership Magazine.

If we have your name or address incorrect or the person to whom we have sent this magazine no longer lives at the address mentioned in the address label please let us know by contacting us on the numbers given at the bottom of this page. If you have already informed the hospital of any changes but we have not updated our Membership database please accept our apologies – this is because our Membership database is not linked to the Patient database.

Contact us
The L&D Foundation Trust Membership Department
Tel: 01582 718333
Email: FTmembership@ldh.nhs.uk
Post: Membership Department – Trust Office, Luton & Dunstable University Hospital NHS Foundation Trust, Lewsey Road, Luton LU4 0DZ

Governors can be contacted by email at Governors@ldh.nhs.uk or you could write to the Membership Department as above.
Dear Members,

By the time you read this, we will have refreshed our hospital Governors. We must be doing something right because more individuals than ever want to stand as Governors and expose themselves to stringent elections (overseen by outside scrutineers!). This, of course, is one of your most important contributions as members; if you are a Luton Member you had 11 candidates to choose from for a total of only three places (the number of places is determined by the number of Members we have registered for each area). I would like to pay tribute to the very instructive guidance and stewardship which the Governors perform across the hospital. Technically, they appoint and hold the Non Executives (of whom I am one) “to account”; that sounds a little sterile and a little limiting but, in reality, the Governors do much more than this; they attend (and Chair) their sub-committees; they scrutinise the hospital in “PLACE” inspections; they let us know what they experience as patients (occasionally) and visitors and generally keep us on our toes. And they do all this for free; you should, as Members, feel a deep sense of gratitude to each of them.

The other thing Governors are meant to do is to express the views of their membership. Unless you are a Staff Governor, this is quite a challenge: there is no forum for a natural dialogue with general members. The hospital tries to help - for example we hold medical lectures and explainer events at which Members of the Hospital can meet the Governors of the area. But, this depends, in large part, on you, the Members. You have the Governors’ details and if you have any issue you would like raised, you should turn up to one of these events or just drop them an email (their details can be found on page 4); or even call.

I have addressed before the changes that might take place in the structure and design of health provision – across the nation and locally. We are very keen, in whatever happens, to retain the essence of Membership and Governors to ensure that you, the local population (and staff), have a direct say in the way in which the hospital is run. From my perspective, this is one of the most important ingredients in the current health care system – funded communally by the nation but, in hospitals, answerable directly to the local community.

Perhaps it is these qualities that make the NHS, still, the envy of the world – efficient, caring and equal. It is a marvellous institution and, I am pleased to say, the L&D still has a marvellous reputation at national level.

I should also pay tribute to Pauline Philip who has been our CEO for 7 years; she has now taken on a role improving the A&E performance of the nation and we wish her well – we, and you, owe her a great deal. Her drive, determination and self-confidence pervaded the whole organisation. Pauline’s current Deputy, David Carter, has stepped into her role as the Acting Chief Executive and Cathy Jones is the new Acting Deputy Chief Executive. Together they will work to maintain the Trust’s good performance and further improve patient experience.

Finally, I thank you for any time you have given us – as a Member, as a Volunteer and/or as a Donor. However you support us, we thank you and are grateful.

Kind regards,

Simon Linnett

Chair’s Message

New leadership at the L&D

In May 2017, David Carter, former Managing Director, was appointed as the Chief Executive (acting) for the Trust when Pauline Philip, left to take up a full-time role as National Urgent and Emergency Care Director.

David is very well known and respected both internally within the L&D and externally. He has a wealth of experience of leading major, strategic service changes and will use that to maximise the hospital’s engagement in the Sustainability and Transformation Plan (STP) to secure the best outcome for L&D patients and staff. David is also passionate about driving forward the redevelopment of the current estate to ensure that the L&D’s physical environment matches the excellent care that the staff provide.

David is being supported by Cathy Jones who has taken up the role of his deputy. Cathy has worked for the L&D for ten years and has experience in both the surgical and medical divisions which have built her strong leadership skills. Cathy is passionate about improving hospital services and ensuring that the hospital operates efficiently to give patients excellent clinical treatment in a caring and compassionate way.

Volunteering at the L&D hospital

Volunteers really help our staff, and most importantly our patients in so many ways. There are many different roles including helping as a mealtime assistant. Make a difference to your life and our patients. Join us as an L&D volunteer.

Call us now on 01582 497357 Email: voluntaryservices@ldh.nhs.uk
We welcome our newly appointed governors

Your Governors are involved:

The Governors, who represent the interests of foundation trust members and partner organisations in the local community, hold the Non-Executive Directors to account for the performance of the Trust Board and exercise of their statutory duties. The Governors attend the working groups and committees of the L&D which are listed below. Each of these groups is also supported by one of the Non Executive Directors.

- Remuneration and Nomination Committee
- Membership and Communication Committee
- Constitutional Working Group
- Car Parking Working Group
- Equality, Diversity and Human Rights Committee
- Patient Led Assessment of the Care Environment (PLACE)
- Outpatient Governors Assurance Board Update
- Hospital Re-Development Programme Board – Building the New L&D
- Patient and Public Participation Group (PPPG)
- Carbon Management Programme Board
- Re-Engineering Group
- Outsourcing Project Board
- Clinical Audit and Effectiveness Committee
- (CAEC) and National Institute of Health and Clinical Excellence (NICE) Implementation Group
- Schwartz Rounds
- Safeguarding Adults
- Nutritional Steering Group

New email IDs for L&D Governors

Public Governors have a general duty to represent the interests of the members who elect them. Governors regularly interact with the general public to ensure they clearly communicate information on the hospital’s plans and performance. Any public member of the hospital wishing to contact their respective governor may do so via the email addresses below or write to the address found at the bottom of page 2.

If a public member lives in the Hertfordshire Constituency they can contact the following Governors:

<table>
<thead>
<tr>
<th>First name</th>
<th>Surname</th>
<th>e-mail address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donald</td>
<td>Atkinson</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>John</td>
<td>Harris</td>
<td><a href="mailto:john@rosemoor1a.co.uk">john@rosemoor1a.co.uk</a></td>
</tr>
<tr>
<td>Helen</td>
<td>Lucas</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
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If a public member lives in the Luton Constituency they can contact the following Governors:

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<tbody>
<tr>
<td>Pam</td>
<td>Brown</td>
<td><a href="mailto:Pam.Brown@ldh.nhs.uk">Pam.Brown@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Sean</td>
<td>Driscoll</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Marie-France</td>
<td>Capon</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Susan</td>
<td>Doherty</td>
<td><a href="mailto:susan.doherty@nhs.net">susan.doherty@nhs.net</a></td>
</tr>
<tr>
<td>Jack</td>
<td>Wright</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Judi</td>
<td>Kingham</td>
<td><a href="mailto:judikingham@virginmedia.com">judikingham@virginmedia.com</a></td>
</tr>
<tr>
<td>Anthony</td>
<td>Scroxton</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Mohammad</td>
<td>Yasin</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Derek</td>
<td>Smith</td>
<td><a href="mailto:dereksmith47@virginmedia.com">dereksmith47@virginmedia.com</a></td>
</tr>
<tr>
<td>Henri</td>
<td>Laverdure</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Shaobo</td>
<td>Zhou</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
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If a public member lives in the Bedfordshire Constituency they can contact the following Governors:

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<tr>
<th>First name</th>
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<th>e-mail address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dorothy</td>
<td>Ferguson</td>
<td><a href="mailto:dorothy@harryfine.com">dorothy@harryfine.com</a></td>
</tr>
<tr>
<td>Jennifer</td>
<td>Gallucci</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Ray</td>
<td>Gunning</td>
<td><a href="mailto:rlgunning@btinternet.com">rlgunning@btinternet.com</a></td>
</tr>
<tr>
<td>Sue</td>
<td>Steffens</td>
<td><a href="mailto:governors@ldh.nhs.uk">governors@ldh.nhs.uk</a></td>
</tr>
<tr>
<td>Roger</td>
<td>Turner</td>
<td><a href="mailto:rogerturner10@virginmedia.com">rogerturner10@virginmedia.com</a></td>
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Car Parking update

Owing to complaints and feedback from patients, visitors and staff about the lack of car parking provision, the Executive Team reviewed the car parking situation and established a new scheme which was implemented earlier this year in June.

More spaces have been created for patients and visitors to try and improve the patient experience and reduce the number of people being late for appointments simply because they couldn’t park. A new scheme has also been introduced for staff parking to try and ensure that staff doing late shifts and night shifts can more easily find a space when they arrive to start work.

The Executive Team appreciate that some staff feel discouraged by the new scheme but they hope that for the majority of patients, visitors and staff they will see the benefits the new provision will bring.
Council of Governors’ Meeting

Why not come along to one of our public meetings of your hospital’s Council of Governors? They’re all held at 6.30pm, in the John Pickles L&D COMET Lecture Hall. All meetings are held on Wednesdays. The next meeting is on 15 November 2017.

Board Meetings*

Board members would be delighted to welcome members of the public, particularly people who have not attended before. We consider it vital to hear local people’s opinions on health service provision so would encourage people to come along. These meetings are held in the L&D, John Pickles COMET Lecture Hall located on the ground floor from 10am to 1pm. The next meeting is on 1 November 2017.

*Board Meetings are held in public but are not public meetings.

Annual Members’ Meeting on Wednesday, 13 September 2017

Come along and find out all you need to know about how your hospital has been performing over the past year. This is your opportunity to meet your Governor representatives and staff from the hospital. The Annual Members’ Meeting will be held in the L&D Hospital Social Club, Calnwood Road, Luton LU4 0DZ at 5.30pm for a 6.00pm start.

Contact us

The L&D Foundation Trust Membership Department
Tel: 01582 718333 Email: FTMembership@ldh.nhs.uk
Post: Membership Department – Trust Office, Luton & Dunstable University Hospital NHS Foundation Trust, Lewsey Road, Luton LU4 0DZ

Governors can be contacted by email – their email addresses are listed on page 4. Alternatively you could write to the Membership Department as above.

Vote in July 2018
YOUR VOTE IS IMPORTANT!

Why is the L&D Hospital having elections each year? The L&D holds Governor Elections each year to fill any vacant seats to its Council of Governors or for those Governors whose term of office is ending.

The elected Governors represent members in our public and staff constituencies.
Governors are your voice. They are accountable to you!

Your vote is important!

So please vote for your governor representative.

The voting packs/ballot packs will be sent to members each year in July
Please cast your vote each year for your next governor representative.
Governors are your voice!

Contact L&D Membership Department on 01582 718333 if you wish to know your eligibility to vote.
Medical Lecture

Stroke Care

More than 140 of our members were able to learn about various aspects of our Stroke Care service during our recent lecture in April 2017.

The presentations were delivered by:

Dr Sekaran, Lead Consultant Stroke Physician and Clinical Director of Stroke Medicine. He has worked at the L&D for more than 17 years. He has set up an accredited Hyperacute/acute and rehab stroke unit for our community from Luton, Bedfordshire, Milton Keynes and North Hertfordshire. He is also a Principal Investigator for many stroke research clinical trials.

Zoe Lundie, Stroke Therapy Service Manager, a Physiotherapist by background with 10 years specialism in Stroke and Neurology. In her current role she manages the provision of Physiotherapy, Occupational Therapy, Speech and Language Therapy and Dietetics for stroke and neurology. A lot of her work focuses on improving therapy outcomes for stroke and enhancing pathways for stroke survivors’ access to rehabilitation. She is also completing research with the Stroke Association on patient experience and national audits for Brunel University London.

Jimy David, Lead Stroke Nurse who joined the Trust in July 2016. She has worked in a stroke unit for the past seven years. She works on ward 17 which is the Hyper-Acute Stroke Unit.

Finally we would like to thank our patients Mr John Burgess and Mrs Jeanette Shaw, who are stroke survivors and came to share their experience.
What is Stroke?

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

Strokes are a medical emergency and urgent treatment is essential.

The sooner a person receives treatment for a stroke, the less damage is likely to happen.

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

What are the symptoms of Stroke?
The main symptoms of stroke can be remembered with the word F.A.S.T.:

- **Face** – the face may have dropped on one side, the person may not be able to smile, or their mouth or eye may have dropped.
- **Arms** – the person with suspected stroke may not be able to lift both arms and keep them there because of weakness or numbness in one arm.
- **Speech** – their speech may be slurred or garbled, or the person may not be able to talk at all despite appearing to be awake.
- **Time** – it’s time to dial 999 immediately if you see any of these signs or symptoms.

What causes a Stroke?
Like all organs, the brain needs the oxygen and nutrients provided by blood to function properly. If the supply of blood is restricted or stopped, brain cells begin to die. This can lead to brain injury, disability and possibly death.

There are two main causes of strokes:

- **ischaemic** – where the blood supply is stopped because of a blood clot, accounting for 85% of all cases
- **haemorrhagic** – where a weakened blood vessel supplying the brain bursts

There is also a related condition known as a transient ischaemic attack (TIA), where the blood supply to the brain is temporarily interrupted.

This causes what is known as a mini-stroke, often lasting between a few minutes and several hours.

TIAs should be treated urgently, as they are often a warning sign that you’re at risk of having a full stroke in the near future. Seek medical advice as soon as possible, even if your symptoms resolve.

Certain conditions increase the risk of having a stroke, including:

- high blood pressure (hypertension)
- high cholesterol
- atrial fibrillation
- diabetes

Treating a stroke
Treatment depends on the type of stroke you have, including which part of the brain was affected and what caused it.

Strokes are usually treated with medication. This includes medicines to prevent and dissolve blood clots, reduce blood pressure and reduce cholesterol levels.

In some cases, procedures may be required to remove blood clots. Surgery may also be required to treat brain swelling and reduce the risk of further bleeding in cases of haemorrhagic strokes.

Recovering from a stroke
People who survive a stroke are often left with long-term problems caused by injury to their brains.

Some people need a long period of rehabilitation before they can recover their former independence, while many never fully recover and need support adjusting to living with the effects of their stroke.

Some people will be dependent on some form of care for help with their daily activities. For example, a care worker could come to the person’s home to help with washing and dressing, or to provide companionship.

Preventing a stroke
You can significantly reduce your risk of having a stroke through leading a healthy lifestyle by:

- eating a healthy diet
- taking regular exercise
- drinking alcohol in moderation
- not smoking

If you have a condition that increases your risk of a stroke, it’s important to manage it effectively – for example, by lowering high blood pressure or cholesterol levels with medication.

If you have had a stroke or TIA in the past, these measures are particularly important because your risk of having another stroke is greatly increased.

Patients: Mr John Burgess and Mrs Jeanette Shaw
A new volunteer led service has been set up for elderly people living in the Leighton Buzzard area who need transport to get to their clinic appointments at local hospitals: The Luton & Dunstable, Milton Keynes and Stoke Mandeville.

The scheme has been set up by L&D governors Pam Brown & Ray Gunning and several members of the Leighton Buzzard GP surgeries PPG Network. This has been a few months in the making, but finally ‘went live’ on 1 April this year, and is open to residents in Leighton Buzzard and the surrounding villages.

The picture shows the very first patient to use this service on Monday 3 April, Mrs Phyllis Savage and her LBVPT driver Mr Andreas Demopoulos.

If transport cannot be arranged through the NHS non-emergency patient transport service, telephone us Monday – Friday on 07873 497633 between the hours of 9am – 5pm.

We would also welcome new volunteers for driving or call handling to ensure this service supports as many people as possible. Drivers may claim mileage allowance and out-of-pocket expenses.

Please call: 07873 497633.
Red to Green project aims to improve hospital experience for inpatients

The L&D has launched a new project, Red to Green, in a bid to improve patients’ experience of coming into hospital, and identify wasted time throughout a patient’s journey.

The idea behind the initiative, which is being rolled out nationally, is to identify logjams in a patient’s journey so that unnecessary delays to treatment, and ultimately discharge, are avoided.

When a patient is admitted to hospital, either as an emergency or for an elective procedure, they should be able to answer four simple questions as soon as possible after their arrival:

- Do I know what is wrong with me?
- What is going to happen now, later today and tomorrow to get me sorted out?
- What do I need to achieve to get home?
- If my recovery is ideal and there is no unnecessary waiting, when should I expect to go home?

Lack of clarity to the answers to any of these four questions will result in delays, and frustration and confusion for the patient.

A Red Day is when there is no clear management plan for a patient, or if they are waiting for an intervention – for example, a blood test, drug therapy or some other planned therapy – which could actually take place out of hospital, resulting in a delay to the patient being able to go home.

A Green Day is when a patient receives treatment that supports their pathway of care through to a timely discharge.

The plan is for the Red to Green project to be rolled out to all wards in the L&D by the end of this year. It is facilitated by a daily ward round, led by a senior clinician, whereby all patients are marked as Red at the start of the day, with the aim of turning this to Green.

Wards where Red to Green is already up and running are showing really positive results, with a much improved experience for patients, and fewer wasted days in hospital.

Paediatric & Neonatal Unit voted Best Training Unit in East of England

The L&D’s Paediatric & Neonatal Unit teams have been voted the Best Training Unit in the Paediatric Awards for Training Achievements (PAFTAs) in the East of England.

The PAFTAs are held in February, and this year more than eight trainees and eight consultants from the L&D received nominations, some with multiple nominations.

Consultant in General Paediatrics, Diabetes and Endocrinology and Director of Medical Education, Dr Nisha Nathwani, said: “Across the deanery, Luton is known as a very busy place with an intense, complex workload both on the general and neonatal side. Yet we are one of the most popular units in which to train, due to the support and training they receive from both the general paediatric and neonatal teams.

Because of our good reputation as a training unit, we have recently starting sharing our expertise with colleagues across the patch.”
Keeping our hospital systems safe during the May global cyber attack

When the global cyber attack was launched on Friday 12 May we immediately took steps to isolate our computer network to ensure our systems were not affected by the virus, and that patient services continued as normal. This involved shutting down all external links to the hospital’s IT infrastructure, including external connection to email and internet access, as a precautionary measure.

Doing this enabled us to scan our internal systems to ensure there had been no security breaches, and to protect the hospital’s ability to continue to provide services to our patients.

The cyber attack created a huge amount of work for our IT department which quickly mobilised a rapid response expert team. They worked together through the incident on a rolling 24 hour shift for several days to apply specific security updates to vulnerable equipment and perform intensive scanning of all IT equipment.

The Trust has more than 3,500 computers, 450 servers, over 90 clinical applications and 1,500 mobile devices, so this was a considerable task. But many of our staff live locally and have family and friends who use the hospital, and they all worked tirelessly to get the equipment operational again.

Internal communications were established immediately and there were hourly updates to inform staff of the actions taken, the reasons why, and the next steps needed to ensure the safety of the hospital network and systems.

This gave assurance to staff who could then, in turn assure patients that the IT services and, more importantly, their data, were safe. This was especially important as our clinicians were needed to support patients from neighbouring hospitals who needed timely critical care.

As a result of shutting down external links, including those shared with GPs, we had to set up a paper system whereby GPs could still make referrals. The attack also compromised our ability to send images externally for review from equipment such as CT and MRI scanners, because of their need to connect to external servers.

The story of how we responded to the cyber attack was covered by Luton News.

PALS - Patient Advice and Liaison Service – here to help!

The team provides a confidential service for patients, carers, friends and families. Our PALS team (Patient Advice and Liaison Service) is available Monday to Friday from 10am to 4pm.

They can help you with any problems you may have with your hospital care and signpost you to other advocacy and community services.

You can find PALS at the main entrance of the hospital, in the Patient Experience Centre.

You can contact them on 01582 497 990 or via email at pals@ldh.nhs.uk or write to them at the main hospital address: Lewsey Road, Luton, Bedfordshire LU4 0DZ
Hospital redevelopment update

As you may be aware, our plans to substantially redevelop the hospital were put on hold because of a general capital constraint across the whole NHS and because of the introduction of Sustainability and Transformation Plans (STPs) which have been established to improve the provision of health and social care across the country.

However, over the last year we have been busy progressing with a range of projects to improve our facilities and services.

We have recently created three new wards on the ground floor of the St Mary’s Wing. These wards are for medical, rehabilitation, haematology-oncology and day patients.

We have a range of projects to help develop services at the hospital, including the current refurbishment of our Oral and Maxillo-Facial Surgery Unit and the development of a new Restorative Dentistry Service.

Work on the hospital site over the next year, will see some refurbishment and reconfiguration in our Outpatient Service, and the refurbishment of part of our Neonatal Unit.

A further room in our Endoscopy Department will be built to support growth in this service, and a number of schemes to develop IT systems are well underway.

We also have exciting plans to build a new, rooftop helipad here at the hospital. Planning permission has been approved and we have recently launched a fundraising appeal to support the project. (see pages 12 and 13)

All of these projects are clearly focused on improving the delivery of patient care and improving patient outcomes.

We are all committed to improving the hospital for our patients, our staff and our local community.

If you would like any further information about any of these developments, please contact the redevelopment team at redevelopment@ldh.nhs.uk

Improving Health and Social Care for Everyone

Sustainability and Transformation Plans (STPs) have been introduced across the country to encourage and enable health and social care organisations to work together more effectively. They have one clear goal - to improve health and social care for everyone.

Owing to the successful work carried out by our local STP to date, BLMK (Bedfordshire, Luton and Milton Keynes) STP has been named as one of the 8 leading STPs in the country. This means you will see local health and care organisations being supported by NHS England and NHS Improvement to work more closely together to provide joined up, better coordinated care and deliver fast track improvements. These include reducing pressures on A&E, investing in general practice to make it easier for patients to get a GP appointment, and improving access to cancer and mental health services.

Your feedback about the STP

We are really grateful to everyone who gave feedback about the STP after the discussions held at various staff and public engagement events earlier in the year. The recently published ‘What we’ve heard so far’, report summarises over 1000 pieces of feedback gathered at these events and is available for you to read at www.blmkstp.co.uk

All of the feedback has been shared with clinicians and will inform further planning and discussion about healthcare provision in BLMK.

Next Steps...

The next stage of the STP work is developing a ‘Case for Change’ which will set out why a transformation of services is needed and put forward ideas as to how this could happen.
Building a new Helipad at the L&D

Saving precious minutes will help save precious lives

We want to build a helipad at the L&D to ensure that everyone who needs specialist care can access it as easily and quickly as possible - saving lives and giving people from across the region a greater chance of a full recovery.

The Emergency Department at the L&D is renowned as one of the best in the country and treats over 90,000 people each year.

Approximately 25% of these have life threatening injuries and require immediate and specialist medical care. There are even more people who need our specialist care but because we don't have a helipad, patients who need to be air lifted to hospital have to go further afield.

Benefits of having a Helipad at the L&D

When someone suffers a major trauma the quicker they receive specialist emergency care, the more likely it is that the treatment will prevent death or serious disability. This is often referred to as the Golden Hour and emergency services strive to get patients to the most appropriate place for lifesaving care within an hour of sustaining their injury.

Helicopters offer a much more reliable way of transporting critically ill patients as they significantly reduce travel time compared to a land ambulance.

Currently, air ambulances taking patients to the L&D have to land on a local school playing field. The patient is then transferred to a land ambulance for the final stretch of the journey. This wastes precious time and is very distressing for patients. The location for the new helipad has been chosen because it is the best place to transfer patients directly from the air ambulance to the Emergency Department and other critical care departments such as the Cardiac Laboratory and the Stroke ward.

Cost of the new Helipad

The cost of the rooftop helipad is approximately £6 million* which includes all the initial design work, the enabling works, the reconfiguration of existing services, the lift access to the Emergency Department and the building of the helipad itself.

The hospital has allocated £1.3 million and we have secured a generous donation of £1.5 million from the County Air Ambulance HELP Appeal.

*figures may vary slightly once building works start owing to the nature of such a large project.
We now need your help to raise the final £2.5 million

We have launched the Helipad Appeal to ensure we can offer this life-saving emergency care to the people of Bedfordshire, Hertfordshire and beyond. There are lots of ways you can support the Appeal...

- Text HELI17 £5 to 70070
- Call 01582 718 289 to donate using a credit or debit card
- Online at www.justgiving.com then search for Helipad Luton and Dunstable Hospital
- Send a cheque made payable to Luton & Dunstable Hospital Charitable Fund (Helipad) to Helipad Appeal, Luton and Dunstable Hospital, Luton, LU4 0DZ. (Please include a covering note with your name and contact details and let us know if you are eligible to gift aid your donation)
- Plan your own coffee morning, pub quiz or race nights and raise funds for the Helipad Appeal all ideas are welcome.
- We have various events planned throughout the year. If you would like to volunteer at bucket collections or join one of our events please call the team on 01582 718 289

Make a donation or support an event

If you or someone you loved were involved in a serious accident, you would give anything for the best medical care to be available as quickly as possible. Having a helipad at the L&D will save lives and give more people a better chance of recovery.

We do hope you can help

For more information about the Helipad Appeal please email fundraising@ldh.nhs.uk or call 01582 718 289

The Luton and Dunstable Hospital Charitable Fund is a registered charity in England and Wales, no 1058704
L&D in breast cancer clinical trial

Luton and Dunstable University Hospital is taking part in a clinical trial – funded by the leading charity Breast Cancer Now – to investigate the best way to deliver cognitive behavioural therapy (CBT) to reduce the impact of two major side-effects for women undergoing breast cancer treatment.

Hot flushes and night sweats are common side-effects of current breast cancer treatments such as chemotherapy and anti-hormone drugs. Experienced by up to 70% of women receiving treatment, they can have a huge impact on their daily lives, often affecting employment, personal relationships and general quality of life, and sometimes leading to women not completing the full course of their treatment.

Researchers have already shown that CBT – a type of ‘talking therapy’ – can help to reduce the impact that hot flushes and night sweats have, allowing women to regain a sense of control over these symptoms. Although CBT is known to be effective, it is not currently offered routinely within the NHS for women with breast cancer.

The L&D is one of six UK hospitals participating in the trial – which will involve up to 160 women. Half of the women will receive group CBT from a breast cancer nurse, involving six weekly sessions lasting 90 minutes each, while the other half will receive whatever support they would normally receive.

Breast Cancer Now has donated £300,000 to fund the study.

Health through Awareness...

Health awareness campaigns in 2017 – highlights!
Look out for events happening near you.

September
Urology Awareness Month
National Blood Cancer Awareness Month
Know Your Numbers! Week – blood pressure testing and awareness (18-24)
National Eye Health Week (18-24)

October
Back Care Awareness Week (2-6)
Women’s Sports Week (2-8)
World Mental Health Day (10)
World Thrombosis Day (13)

November
Movember – Men’s Health Awareness Month
Lung Cancer Awareness Month
Alcohol Awareness Week (13-19)

December
World Aids Day (1)
Baby Buddy app comes to Luton

The Baby Buddy app, which offers support, information and advice for parents-to-be and new parents, is now available in Luton.

The award-winning app was created in partnership with mums, midwives and doctors and has been endorsed by the Department of Health and The Royal College of Midwives amongst others.

The free app is a personalised baby-expert and will guide parents-to-be and new parents through pregnancy and the first six months of a baby’s life.

As well as offering insight into the baby’s growth and development, the app also provides health, wellbeing and lifestyle support and advice for parents.

The app has a number of features including:
- daily bite size chunks of information tailored to the users specific stage of pregnancy or your baby’s age
- tracker to help keep on top of any appointments
- a ‘remember to ask’ section to record any questions or concerns
- ‘Bump/Baby Around’ which shows you the services and support available in your local area
- goal tracker
- videos to help navigate through pregnancy and birth

You can download the App from the App or Google Play stores, or for more information visit the Baby Buddy website www.bestbeginnings.org.uk/baby-buddy

Self-funded semen testing
As well as providing NHS funded semen tests, we are now also providing self-funded semen testing, with excellent support and care provided, by a dedicated team and with a dedicated phone line.

“Endo Scratch” service
We are now providing a new technique in order to increase IVF outcomes, in the form of “Endo Scratch”. This is provided as a top up to the NHS IVF treatments.

HyCosy service
Our one stop HyCosy service – which checks the patency of fallopian tubes by ultrasonography – is becoming well established, with very happy and satisfied patients. The introduction of this new service has reduced the fertility investigation /management journey with timely investigations and treatments.

IVF /Assisted Conception Seminars
We will soon be offering IVF seminars for clients needing assisted conception. These will provide the opportunity for our clients to meet the team in advance and to learn about the IVF pathway, including open discussions with our experienced staff.

The L&D’s success rates for IVF treatment cycles are excellent, and well above the national average.

For more information and how to refer please visit our website www.ldh.nhs.uk/fertility or contact Miss Shahnaz Akbar, lead for Fertility services, on 01582 718083
Maternity open day and opening of new birthing pool

Baroness Julia Cumberlege was the special guest at the L&D’s first Maternity Open Day on Thursday 13 July and also cut the ribbon at the official opening of the new birthing pool. The Maternity And Mothers Meeting dAy (MAMMA) event, which focused on ‘What Women Want’, was held in a marquee on the hospital site and was an opportunity for local families, parents, and parents-to-be to come and meet staff and hear more about the services we offer.

Local GPs, health visitors and commissioners and other professionals were also invited to come along and meet the team. Before the start of the event, Baroness Cumberlege and Trust Chairman Simon Linnett visited the Maternity unit to officially open the new birthing pool, and to meet staff and families on the postnatal ward. Baroness Cumberlege then went on to give the keynote speech at the MAMMA event when she talked about ‘Better Births’.

Other speakers included Consultant Midwife Stella Roberts and Angharad Ruttle, who talked about her own experience of giving birth at the L&D. There were also presentations by consultants Jacqueline Bamfo, Beryl Adler and Angus Rivers, who discussed obstetric, neonatal and anaesthetic services. Guests were also invited to name the Maternity unit’s new kangaroo mascot.

Luton midwife wins top UK award

One of our midwives was awarded one of the UK’s top midwifery prizes at the Royal College of Midwives (RCM) Annual Awards in March.

Mary Edmondson won the RCM Members’ Champion Award for her work as an RCM Union Learning Representative. She has introduced various initiatives to promote learning among her colleagues, including re-galvanising the weekly maternity training sessions and developing a learning leaflet and other information for midwives to help them with the new revalidation process.

Mary was presented with her award on 7 March at the RCM Annual Midwifery Awards in London which were hosted by journalist and broadcaster Natasha Kaplinski.

Sheran Oke, Acting Director of Nursing and Midwifery at the Trust said: “We are extremely proud of Mary’s achievements – she has been an inspirational leader, playing a pivotal role in the promotion of learning and education in the maternity unit. She thoroughly deserves this award and we are delighted that the contribution she has made to midwifery has been acknowledged nationally.”
As always we had a very good attendance from our patient group, with almost 200 supporting the service. We held a very successful raffle, raising almost £300 which we will be donating to ‘Stoma Aid’, our chosen charity of the year. This is a charity close to our hearts as they do valuable work sending surplus stoma products to under-developed countries.

The event was also supported by 15 representatives from companies promoting their stoma products. They displayed the latest stoma appliances and services available to our patients.

Debra Schrader, who is our Stoma Nurse, captivated the audience with her presentation about the Stoma Care Service and how patients and nurses should be working together within the financial restraints of the NHS, but still maintaining high quality service. The Stoma Team received lots of positive feedback about how well Colette, Debra, Lisa and Sam all work together giving a first class service, and how well the event had been organised.

In April, a tea party was held at Luton Hoo for 22 staff who have worked at the L&D for more than 25 years. The party was hosted by the Trust Board as a way of acknowledging the tremendous contribution the staff have made to the NHS. Congratulations and thank you:

Marva Desir
Jacqueline Dodds
Graham Fitzsimmons
Linda Gardner
Margaret Green
Betty Hatfield-Shaw
Helen Judkins
Nasreen Lewis
Janet Mason
Maureen Mayhew
Sally Morris

Martin Nye
Cathy O’Mahony
Sue Riley
Pratima Tailor
Julie Taylor
Patricia Turner
Christopher Travill
Caroline Grummitt
Gill Mitchell
Hashem Shojaie
Carla Burnett

Staff health event…
Spring into Summer 2017

Occupational Health organised their annual Health and Wellbeing day ‘Spring into Summer’ on Thursday 8 June. 200 staff registered for the event and everyone was given a goodie bag containing an orange, pear, plum and banana.

It proved to be a fun and informative day which included food demonstrations, active travel information, chair based fitness exercise demos by Active Luton and Chi Kung and Tai Chi demonstrations. There was the opportunity to make your own healthy fruit smoothie – all you had to do was pedal the Smoothie Bike to get your delicious nutritious drink… pictured is our newly appointed Chief Executive David Carter powering the Smoothie Bike!

www.ldh.nhs.uk
On 12th May 2017, the Trust held its annual Nursing and Midwifery Conference. On this day, the anniversary of the birth of Florence Nightingale, nurses throughout the world celebrate International Nurses’ Day. Just a week earlier, we also celebrated International Day of the Midwife. There was a fantastic buzz and energy in the room at both events, where nurses and midwives from across the organisation share the fantastic work that is going on to deliver an even better service to our patients.

During the morning, which was opened by Chairman Simon Linnett, we took a look back at our achievements against the 2014-17 Nursing and Midwifery Strategy. There were also presentations on How We Value and Develop our Workforce and on Getting our Patient Care Right. We then had a break out session during which all participants were involved in the early thinking and development of the next Nursing and Midwifery Strategy. During the afternoon, our attention was focused onto the importance of our patients’ time… The Last 1000 Days.

Bake Off

There were some AMAZING cakes baked by our nurses who had been asked to do a themed cake on behalf of their department. Gio Healey (A&E Matron) and Alison Clarke (Non-Executive Director) had the delightful job of tasting each one and the very difficult task of judging them as they were all so fantastic.

Once the idea for having a Nurses’ Day Bake-Off was hatched, the enthusiasm and excitement amongst the wards and clinical teams rapidly flourished and the Bake-Off became the talk of the Trust. We would like to extend huge thanks and appreciation to everyone who entered the Bake-Off and to congratulate the bakers and their respective departments for the winning cakes. The cakes were then enjoyed by all the attendees of the Nursing and Midwifery Conference and various wards/ departments received cake to enjoy on the day.

We look forward to next year’s Bake-Off!

Sheran Oke, Interim Director of Nursing
Awards

Each year, a number of awards are presented to celebrate the excellent achievements and dedication of our staff, this year they were presented by David Hendry, Non-Executive Director. There was such a celebratory atmosphere and the event was really well attended. Sheran Oke, Director of Nursing and Midwifery closed the event with a huge thank you to all our staff.

The Winners

Student Nurse of the Year
Danielle McLaughan

Clinical Support Worker
Charles Addai – Ward 15

Most Promising New Graduate
[The Aimee Varney Award]
Daniella Lehotska – Ward 34

Mentor of the Year
Laura Cruise – ITU

Nurse of the Year
[The Erma Bristol Miller Award]
Martha Simango – Sister Eye Clinic

Living the Values – Proud to Care
Ward 16

Innovation in Care Award – Community Midwives

Team of the Year – EAU 1
Summer 2017 ‘Good Better Best’ staff events – focus on quality of care

Improving the quality of care we give to our patients, listening to their feedback and creating an environment where staff are encouraged to innovate, were some of the themes of our ‘Good Better Best’ staff event this summer.

More than 2,500 members of staff attended one of the ‘tent’ events held in July in a specially erected marquee on the hospital site.

Led by Chief Executive David Carter and hosted by the Executive Directors, the events are an opportunity to thank our staff for all their hard work and to share ideas about how we can build on the ‘good’ rating given to us by the Care Quality Commission last year, and progress towards ‘outstanding’.

Improving ‘continuity of care’ is a key focus - while it is important to all of us when we become unwell, it is particularly important to elderly patients and to people who suffer from long term conditions. These patients often come into contact with many different clinicians and other staff throughout their treatment, and we need to improve communication to ensure that the care provided is consistent and seamless.

Our Red to Green project (see page 9) is part of this work, and aims to ensure that a patient’s experience, and journey through the hospital to discharge, is as streamlined as it can be.
A day in the life of a Urologist…

By Consultant Mr M Asad Saleemi

I am unsure, in some ways, how I ended up in medical school! I am not one of those people who can admit to having had a lifelong ambition to be a doctor or surgeon or having suddenly woken up one day and seen a bright, shining light illuminating my future career!

Having been invited for an interview at St Thomas’ Hospital, what I did know was that I could not possibly perform worse than my brother. At a medical school interview, when asked why he wanted to study medicine, he simply replied, “Because my parents want me to!” Needless to say, it was a short interview and he became a chartered accountant.

I have been a Consultant Urologist at the L& D for 15 years. It is a constant source of humour to my family that whenever I am asked in public what I do, and I say “I am a Urologist”, the questioner always looks really impressed. The reason, more often than not, is “Wow, you must be really clever… a Neurologist, incredible!” When they realise I am just a glorified plumber, they seem less impressed!

Urology (Greek for ‘the study of urine’) is a great specialty that has evolved over many centuries. Even Hippocrates noted that the change in water intake could change the appearance of urine. Circumcision, as a procedure, can be traced to ancient Egyptians. Indeed, removal of bladder stones (lithotomy) can also be traced back to 400BC, whereby the urethra would be opened and the stone, literally, ripped out - without anaesthesia of course. The blockage of urine (urinary retention) has been treated for over 2000 years by reeds initially, and now, by modern catheters. And never has man been more grateful!

The practice of urology changed significantly with the development of the cystoscope with a workable light source in 1878 and this has given us access to the whole urinary tract via the external urethral meatus (opening of the waterpipe). As technology has advanced, the need for open surgery has diminished, but by no means eliminated. Urologists certainly can boast the ability to decorate the whole of the inside of their house via their letter box!

My day typically starts at 7.30am. Meetings, both educational and with management seem best suited to that time. Otherwise, it is dealing with urgent administration issues. On-call ward rounds start at 8pm, theatre lists and clinics at a similar time. Needless to say, the day is busy and full of variety. No one surgical procedure is exactly the same and each patient seen in clinic will pose their own little and occasionally, big challenge.

One of the very first subspecialties I developed, when I started as a consultant, was treatment of kidney stones using very fine ureteroscopes and holmium laser as the energy source to fragment them. We were very fortunate to be the first hospital in England to buy a digital ureteroscope which provided both enhanced and magnified images of the inside of the kidney. This totally revolutionised how we managed these stones. We now have a full complement of stone treatments, including ESWL (extracorporeal shock-wave lithotripsy) and PCNL (percutaneous nephrolithotomy) which is a keyhole technique to deal with complex kidney stones.

Without a doubt, the flagship of our unit is the Urology Onestop clinic. I am fortunate to work with superb, supportive colleagues who all played a part in the planning and development of this wonderful purpose built clinic. Our radiology department have been fantastic with their support as well. It took 2 years of background work to bring it to fruition, the whole project being tremendously supported by our manager and finance department. The clinic offers consultation, flow tests, ultrasound scanning, CT scanning, flexible cystoscopy and tranrectal ultrasound +/- biopsy of the prostate all as part of one visit for our patients. Results are given (except biopsies) at the end of the visit, whilst the clinic letter is being live typed by our secretaries. Patients and we think this is a gold standard service, reassuring the worried well and having plans in place for the rest. Many units from around the UK have come to see our clinic with a view to replicating it.

In 2013, my colleague and I embarked on setting up a laser prostate surgery service in our hospital. HoLEP (Holmium Laser Enucleation of the Prostate), for benign enlargement of the prostate, which is superior to resection techniques that have been employed for decades. This has been a very successful venture with us now having completed 475 cases (the highest number of 50W HoLEPs in the UK), and has led to us presenting our work in America, Europe and our national meeting in the UK. We also run a Master Class twice a year to teach consultants this technique from all around the UK.

As a department, we have benefitted enormously from charitable donations. The Amateur’s Trust provided a very sizeable donation which enabled us to purchase a transperineal template prostate biopsy ultrasound scan machine. Along with MRI scans, this has totally changed our diagnostic abilities regarding prostate cancer (commonest male cancer with over 46,000 men diagnosed every year in the UK) and has virtually doubled our cancer ‘pick-up’ rates.

Technological advancements do not stop and we endeavour to provide our patients with the latest treatment options. We are introducing Blue Light cystoscopy which uses a chemical to highlight bladder cancer cells and a procedure called Urolift, a minimally invasive treatment for prostatic enlargement in younger men who wish to maintain sexual function whilst improving urinary symptoms.

Urology covers 5 cancer sites, namely prostate, bladder, kidney, testis and penis. In addition, there are a number of non-cancerous conditions that can have serious consequences such as kidney stones, trauma and benign prostatic enlargement.

Finally, we see extremely bizarre situations involving padlocks, twigs, magnetic beads, IKEA pencils, Argos pens…

“I normally arrive home between 6.30pm to 7.30pm with a certain degree of satisfaction, a little tiredness and occasional bemusement that there ain’t nothing weirder than folk!”
Mark Smith, who lives in Milton Keynes, is a former soldier who lost his leg, and almost died, after being shot six times in 2011.

A 10 year veteran, Mark spent two years recovering at the Defence and National Rehabilitation Centre at Headley Court in Surrey.

He was discharged in 2013 and was referred to the Limb Fitting Centre at the L&D where he attends regular appointments to ensure his prosthetic leg is kept in tip top condition.

The Strongman competition involves lifting 65-120kg Atlas stones, pulling trucks and pressing logs, the Viking Press, a seated Dead lift, Axe/Sword or Thor’s Hammer holds (holding one out to the front for as long as possible) and Dumbbell Medleys (Pressing five dumbbells one after the other, going up in weight from 30-50kg).

To build up his muscle and stay fit, he trains five times a week and follows a strict diet, consuming 8,000 calories a day in the form of six steak meals (with jacket potato and green vegetables) and a healthy breakfast of oats, fruit, a protein shake, bagels and yoghurt.

As part of his training regime, he will also go down to his old barracks and practise pulling two Land Rovers at once, and a seven-ton military truck.

Mark said, “At Headley Court there are a lot of people in similar positions and we can all bounce off each other. Once you are discharged, it is quite difficult to adjust to being on your own, and not have that immediate support network around you.

He continued, “When you lose a leg, the doctors and surgeons are quick to tell you what you won’t be able to do, but I was determined to get fit again and prove what could be done, and I’d like to think that my story will inspire other people who have lost limbs to go on and achieve success.”

Dr Imad Sedki, Consultant in Rehabilitation Medicine, said: “What Mark has achieved over the last few years is remarkable, and serves as an inspiration not only to our other patients, but to all of us. Working with many ex-service men and women, I became familiar with the positive attitude, focus and determination that Mark clearly demonstrates. Although being an elite athlete is very demanding, it can also be very rewarding from both physical and mental points of view and I hope others will be inspired to follow Mark’s lead to take part in sporting activities.”

The L&D Limb Fitting Centre is a regional centre providing specialist knowledge and prosthetic services to lower limb amputee patients in Bedfordshire and Hertfordshire.

The multidisciplinary team includes a Specialist Consultant in Amputee Rehabilitation, Clinical Psychologist Prosthetists, Physiotherapist, Occupational Therapist and Rehabilitation Engineer - all complemented by a team of highly skilled Technicians.

In addition to being the specialist unit, the centre provides physiotherapy sessions and practical occupational therapy and advice to local amputee patients.

The photograph shows Fran & Roy Hall who earlier this year celebrated their silver wedding anniversary with their family and friends at the Aldwickbury Park Golf Club in Harpenden.

L&D governors Pam Brown & Belinda Chik joined them all on a beautiful sunny day – all the more poignant because Fran had been very poorly a while ago and was treated in the L&D’s ITU. Her smile in this picture is so clearly saying “I’m so grateful to be here!”.

Fran & Roy asked for donations for the hospitals Intensive Therapy Unit rather than presents and later donated a cheque for £1,000.

We would like to say ‘thank you’ to all who contributed and many congratulations to Fran & Roy.
A team of volunteers from the travel group TUI, based in Luton, visited the L&D on Friday 7 July to help spruce up a garden area at the hospital used by parents of babies in our Neonatal Intensive Care Unit (NICU).

The group, two of whom flew in especially from Stockholm and the Netherlands, helped transform a tired outside space into a lovely garden for parents to enjoy for relaxation away from the busy atmosphere and stresses of hospital life.

The garden belongs to the NICU bungalow accommodation which was opened last year thanks to a huge fundraising effort. It is there for parents of children being cared for in our NICU so that they can be close to their children in the unit.

Karen Bush, Voluntary Services Manager, said: “We are extremely grateful to the TUI volunteers who have done a fantastic job with the garden. They worked really hard to transform the space into somewhere where parents can unwind and relax, and we really appreciate their support.”

If you would like to know more about our ‘One Day Volunteering Opportunities’ either in the Hospital or with our L&D Fundraising Team – or would like to join us as a regular L&D volunteer, please contact
Karen Bush, Voluntary Services Manager on 01582 497357 email: voluntaryservices@ldh.nhs.uk
or Sarah Amexheta, Fundraising Manager on 01582 718043 email: fundraising@ldh.nhs.uk

We’d love to hear from you.
Fundraising News

Calling all Golfers!

The Annual Charity Golf Day for the L&D Hospital is being held on Friday 8 September at Harpenden Common Golf Club and we would be delighted to welcome golfers from Bedfordshire and Hertfordshire to join us.

The day will begin with coffee and bacon rolls on arrival, 18 holes of golf with competitions around the course, including longest drive and nearest the pin. After the golf, there will be a 2 course dinner, followed by the prize giving ceremony, raffle and auction.

The Golf Day will raise money to improve the Neonatal Intensive Care Unit (NICU) facilities and to ensure that both babies and parents are treated in the best possible environment.

The cost of entry is £80 per player in teams of 4, with brunch and dinner included in your entry fee. Bookings are now being taken. Please call the Fundraising Team on 01582 718289 or email fundraising@ldh.nhs.uk to book your place. We would also like to hear from you if you are able to donate a prize for the raffle.

Spring and summer fundraising highlights

We held Marco’s Bread Bake Off, in memory of consultant surgeon Marco Barreca who tragically died suddenly last year. There were three bread categories in the competition and lots of fantastic entries by staff.

Our Children’s Wards held their spectacular Easter Cake Sale and Egg Tombola. Their Eggstravaganza raised £1000 for the Children’s Wards.

Our children’s choir concert in March, Let your Spirit Fly, was held at the Grove Theatre. The audience enjoyed seven different school choirs singing two of their favourite songs and the finale was all of the children singing a specially written song, which was composed by Richard Sisson. This lovely concert raised £3000 for the Children’s Wards.

Sabine and Tracy held a Ladies Night to raise money for NICU. They were joined by 60 ladies who enjoyed a great evening which ended with a raffle that had amazing prizes. They raised approximately £2000 for NICU which has helped them reach their target of £10,000.

On Friday 14 July we held our Charity Race Night which was a huge success. More than 65 staff & members of the local community attended the event which was held in our Marquee to raise money for the hospital charitable fund. The races and table quizzes were enjoyed by everyone who came along and the pizza donated by our local Dominos went down a treat. There was a fantastic array of raffle prizes and overall the Race Night raised a fantastic £1500. We are very grateful to those who made the night such a fun-filled experience.

Countdown to Christmas

The festive season may seem quite a long way off at the moment but plans are already in place here. If you would like to donate any new items that you may have in your cupboard, that would be great. We need over 800 presents for our children and elderly patients. If you have any questions about Christmas presents, please give us a call on 01582 718289.

Dates for your diary

- Charity Golf Day – Friday 8 September – Harpenden Common Golf Club.
- Cake Sale – Thursday 21 September – The Head and Neck Support Group are hosting a cake sale on the ground floor of surgical block at the L&D Hospital to raise money for ward 20.
- Cake Sale – Monday 9 October – This cake sale is being held during Pregnancy Loss Week and will support our Maternity Bereavement Services.
- Quiz Night – Save a date for our Autumn Quiz Night on Thursday 12 October.
- Light up a Life – Lights go on sale on 1 November. They can be bought as a gift or in memory of a loved one.
- Cake Sale – Thursday 7 December, our Children’s Wards are holding their Christmas cake sale and raffle.
- Christmas tree Lighting – Thursday 7 December – Main Entrance, L&D Hospital
- The Fundraising Team will be in Main Reception at the L&D Hospital on 12 and 13 December. They are also able to accept any donations of presents for our patients.
- Sparkle Day at the L&D Hospital – Friday 15 December.

For more information about fundraising for the hospital, or to get involved, please call the Fundraising Team on 01582 718 289 or email fundraising@ldh.nhs.uk

www.ldh.nhs.uk/fundraising • www.facebook.co.uk/ldhfundraising
Twitter @ldhfundraising • Instagram @ldhfundraising

The Luton and Dunstable Hospital Charitable Fund is a registered charity in England and Wales, no 1058704