



Kingston
Hospital
Charity

Our news

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The arrival of the robot is a key element of Kingston Hospital's clinical strategy and enables it to join the 30% of NHS trusts nationally, who already have one

On Friday 26 April the first two patients to be treated using Kingston Hospital's state-of-the-art surgical robot received a radical nephrectomy, which involves removing a whole kidney usually to treat kidney disease or cancer. A further three operating lists are planned for May, all under supervision, led by Mr Sarb Sandhu, Kingston Hospital's Chief of Surgery and Planned Care.

Gynaecology patients requiring surgery are expected to start being treated using the da Vinci Xi robot from July followed by colorectal patients probably from October this year. The expectation is that the robot will expand into other surgical specialities in the future.

Purchased thanks to the generosity of local resident and philanthropist Dame Marit Mohn, the surgical team took delivery of their robot, which has been named Leo on Friday 22 March. Made up of three parts, the da Vinci Xi robot comprises: the patient cart (robot) which houses the camera and four instrument arms

The da Vinci Xi robot, named Leo, will help to treat more patients with a shorter length of stay in hospital



that the surgeon uses to perform surgery; the surgeon console which the surgeon sits at to control the instruments, while viewing the patient's anatomy on a highly magnified high-definition (HD) 3D screen; and the vision cart or hub which includes a large HD screen that shows a live feed of the surgical procedure to everyone in theatre.

Utilising surgical robotics promises to enable more accuracy and control during procedures, with patient benefits including less invasive surgery with less post operative complications, faster recovery times and shorter stays in hospital.

Sarb Sandhu said:

"The role of philanthropy is once again demonstrating its importance in helping ensure our patients can access gold standard services at their local hospital. As a urologist, I have seen the impact introducing a Holmium laser has had on our patients requiring surgery for enlarged prostate glands. I am excited by the benefits surgical robotics will bring to our patients now and in the years to come.

"As Chief of Surgery, acquiring a surgical robot means Kingston Hospital is now better placed to attract talented surgeons and theatre staff who have been trained to use this cutting-edge technology. We are enormously grateful to Dame Marit for her generosity in enabling us to acquire a da Vinci surgical robot."



The arrival of the robot is a key element of Kingston Hospital's clinical strategy and enables it to join the 30% of NHS trusts nationally, who already have one. Robotic-assisted surgery can also help to increase surgical productivity.

Kingston Hospital has an impressive main theatre utilisations figure of nearly 100%, and the da Vinci Xi will help to treat more patients with a shorter length of stay in hospital.

The Body Coach, online fitness sensation and author Joe Wicks MBE, joined retired consultant paediatrician Dr Andrew Winrow to open Kingston Hospital's new children's cancer unit on Tuesday 23 January, providing a new home to one of the busiest children's cancer shared-care units in the South-East of England, which typically treats up to 65 children each month, in addition to the children and young people who regularly visit for long-term follow-up care.

Over the last 10 years the Kingston Hospital Paediatric Oncology Shared Care Unit team has treated nearly 300 children with cancer



Joe Wicks, originally from Epsom, whose wife Rosie gave birth to two of his three children at Kingston Hospital met some of the children undergoing cancer treatment, and their families, to read a story, while making it as interactive as he could.

The new paediatric oncology unit offers a calm and dedicated space for children exclusively with cancer and will allow patients who have low immunity to infection to receive their chemotherapy or have blood tests away from other acutely ill children. Previously this treatment was given in the children's general outpatient department. The suite includes

Joe Wicks with members of the nursing team



a private room for outpatient consultations, medical reviews and meetings with parents and will enable cancer specific treatments such as administering intravenous antibiotics to be carried out much more quickly.

The unit was developed following a successful fundraising campaign and is named after the much-respected paediatrician and academic researcher at the hospital, Dr Andrew Winrow, who led the project before he retired.

Dr Winrow said:

“What a unit. It's exceeded all my expectations and allows the team to streamline care, so the children receive their treatments as quickly as possible. It marks a turning point for children's cancer care here at Kingston Hospital.”

Kingston Hospital shares the care of these children with specialist teams at The Royal Marsden Hospital, Great Ormond Street Hospital and University College London Hospitals (UCLH) under the shared care model, allowing children to receive their cancer treatment as close to home as possible.

Over the last 10 years the Kingston Hospital Paediatric Oncology Shared Care Unit (POSCU) team has treated nearly 300 children with cancer and looks forward to continuing to provide high quality care to these children and families at the most vulnerable times of their lives.

Sue Stillwell, Clinical Nurse Specialist for Paediatric Oncology, feels the unit has made a huge difference to the families under their care, as well as to the staff, as she explained:

“The new unit provides a wonderful big and bright space. It is lovely to see the patients and their families enjoying the unit and the experience it gives them. By virtue of it being set away from the rest of the ward, it feels like a secure sanctuary for our patients and those looking after them.

“We feel the new facility has also made a huge difference to how quickly we can get the children in and out when they attend for planned appointments, helping to reduce parental stress levels. It's making such a difference in all the many ways we hoped it would.”

Working in healthcare requires extensive learning and ongoing professional development for doctors, nurses and other healthcare professionals. It's essential to deliver high-quality, safe, effective and person-centred care, in a constantly changing practice environment. Simulation training is a means of delivering high-quality learning and ongoing training for healthcare professionals in safe and realistic settings.

Simulation training allows staff to develop their practical skills and build confidence. It also enhances teamwork, communication skills and situational awareness.



The following manikins have been purchased recently with charitable support:

Keri is expected to be utilised extensively by student nurses and healthcare support workers, allowing them to confidently take on the fundamentals of nursing to ensure their safe practice before undertaking clinical shifts and their first interactions with patients.

Chester affords a chance to simulate real-world challenges as nurses and midwives master vascular access devices which are challenging.

Corman has been designed to enhance training and proficiency in the placement and management in adults of feeding tubes into the stomach and small intestine.

Carl allows student audiologists to develop practical skills without involving patients, so they can undertake otoscopic ear examination, ear wax management, audiometry, taking ear mould impressions and hearing aid fitting in a safe environment.

A new endoscopic device, funded by Kingston Hospital Charity, is now being used during laparoscopic (keyhole) surgery for patients with gallstones. It provides a minimally invasive way to visualise the bile ducts and remove gallstones.

The device enables the upper gastrointestinal surgical team to provide a 'one stop solution' for patients, specifically those with acute cholecystitis and/or acute pancreatitis and/or recurrent pain associated with gallstones blocking the common bile duct (choledocholithiasis and jaundice).

The new endoscopic device is enhancing Kingston hospital's gallstone surgical services for its patients



The device enables surgeons to perform an emergency or elective laparoscopic cholecystectomy and remove gallstones from the common bile duct in one single operation. This 'one-stop' procedure has already been performed by the service on a number of occasions with positive results. This is an excellent complementary service to the Endoscopic Retrograde Cholangiopancreatography service that Kingston Hospital introduced last summer, with the support of Kingston Hospital Charity. Mr Ioannis Gerogiannis, Consultant General & Emergency Surgeon with a specialist interest in laparoscopic upper gastrointestinal, bariatric and abdominal wall hernia surgery said:

"This device gives our upper gastrointestinal and emergency cholecystectomy service the flexibility and ability to go one step further. We are able to treat patients in 'one go', sorting out gallstones in the bile duct and any problems with the gallbladder in the same operation, under one anaesthetic. It is early days, but I am confident that this will definitely make a real difference in patient care."



The recent National Maternity Survey rated Kingston Maternity in the top three London trusts for care during pregnancy, delivery and hospital care after birth

Kingston Maternity is a popular service with approximately 4,600 births each year. The most recent National Maternity Survey rated us among the top three London trusts for care during pregnancy and delivery and care in hospital after birth. The maternity team is proud of its culture of learning and there is always a desire to improve the service and explore quality improvement initiatives.

We support birth options for all our families, including our fabulous Birth Centre, a successful home birth service and specialist clinics for fetal medicine, pre-term surveillance, multiple birth, diabetes, and specialist midwives' services.

We would love to implement two quality improvement projects but need your help to do so.

LifeStart Trolley

Acquiring a LifeStart Trolley, which is a mobile unit, would allow us to provide bedside neonatal care for babies that need resuscitation. At the moment, newborns who need help with breathing straight after birth are taken away from their mothers to a resuscitation unit. The LifeStart Trolley allows the newborn to be looked after at the bedside, keeping mothers and babies close together. The umbilical cord does not need to be cut early, and keeping the cord intact is particularly beneficial for preterm and very small babies. When the cord is kept intact the baby can receive its full circulating blood volume. Babies whose cords are cut early can lose up to a third of their circulating blood, which comes from the placenta in the minutes after birth. This can impact their cardiovascular transition and affect their iron stores.



Marion Louki
Director of Midwifery

Most babies who are taken to a resuscitation unit immediately after birth do not need extensive treatment, and using the bedside unit allows whatever care is needed to be provided alongside the mother. The trolley is small, mobile and adjustable and the resuscitation surface enables the baby's airway to be supported on a warm platform.

Anorectal manometry

Our second priority will benefit women who have already given birth and have sustained a perineal injury. Anorectal manometry is a test that is performed to evaluate the strength of the anal sphincter muscle of mothers who have sustained a 3rd or 4th degree perineal tear following childbirth.

The test can also be offered to mothers who are experiencing faecal incontinence or chronic constipation following childbirth. The test measures the pressures of the anal sphincter muscle, the sensation in the rectum and the neural reflexes that are required for normal bowel function.

It's a quick and non-invasive procedure that would be performed by the urogynaecology consultant at the routine three-to-four-month postnatal appointment, alongside an endoanal ultrasound scan to check that anal sphincter muscle structures have healed following a 3rd or 4th degree perineal tear.

When combined with the current scanning method, women who do not have any current bowel symptoms can be identified as having reduced function (up to 31%). These women who are at higher risk of developing faecal or flatus urgency and incontinence can be informed of this risk and adequately counselled regarding their next birth. Obtaining a manometry machine will allow us to support this group of women in ways that we cannot do currently.

Are you able to help us implement these two quality improvement projects?

The cost of the LifeStart Trolley is £15,500 and the anal manometry machine £13,800.

To donate, please call 020 8973 5040, visit www.khc.org.uk/support-us/donate/ or complete the response form at the back of the newsletter and return it in the Freepost envelope enclosed.

Thank you so much.

The Kingston Hospital volunteering community is a vibrant group of between 350 and 400 volunteers dedicated to giving just over 1,000 hours of time every week currently to improve patient experience and care across hospital, home and community.

They have around 25 different roles at the moment, including patient facing roles on the wards, emergency department, paediatrics, in administration, gardening and a whole lot more.

Our volunteering community support staff by doing the little things that make such a difference to patients and visitors alike



The volunteers complement the work of the hospital's paid staff, enhancing the experience of patients and visitors



Volunteering can have a positive impact on health and wellbeing. Volunteers often share how they have met new friends, felt part of a community and kept active. Their valuable contribution is much appreciated by the staff, patients and visitors, which is why Kingston Hospital Charity continues to support the volunteering team's programme through an annual grant.

Charitable funding also enabled a new Volunteer Experience Coordinator role to be piloted over a 12-month period, which has recently become a permanent role at Kingston Hospital. The role was seen as an essential means of enhancing the volunteering experience by providing appropriate support, particularly to new volunteers, and the results of the pilot have

been very positive. Retention rates from new volunteers beyond the six-month commitment threshold have nearly doubled to 95%, reflecting a happier and better supported volunteer workforce. Local inductions in clinical areas have also saved precious time for clinical staff – some 600 hours over a year.

Through a job share Nikki Davis and Giedre Howell are the Volunteer Experience Coordinator and they said:

“We support our volunteers from the start of their journey with two bespoke buddy sessions freeing up our clinical colleagues. This allows us to provide consistent training to our volunteers, who we regularly visit to ensure they are happy in their roles. That essential support makes for a much happier and more rewarding experience for our volunteers. When we aren't inducting new volunteers, you will often find us out in the community encouraging others to apply, conducting impact evaluation surveys for our existing volunteer roles or researching other volunteering opportunities to support our busy clinical teams.”



Deputy Head of Volunteering, Sharon McEwan explained:

“We are so grateful to all who support Kingston Hospital Charity. By funding the Volunteer Experience Coordinator role for an initial 12-month period, we were able to evidence its impact on the success of our volunteering programme and I am thrilled this has now been made a permanent position within our small team.”

If you are interested in learning more about volunteering at Kingston Hospital or supporting services in the community, please email khft.volunteering@nhs.net or call 0208 934 2549.

Make it a Night to Remember

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Don't miss our special memory walk, **Night to Remember**, which will take place this year on **Saturday 7 September at 7pm.**

With a choice of 6.5 or 13 miles, Night to Remember is our special charity walk that offers family, friends and colleagues the chance to come together and celebrate the life of a loved one, whilst walking through the evening in support of Kingston Hospital. A fun thing to do, entry includes a medal, glow sticks and some refreshments on route.

Balvinder Reehal, Screening & Bereavement Lead at Kingston Maternity explained:

"I take part in Night to Remember each year as it provides an opportunity to walk with colleagues and reflect on the amazing work of our maternity team, while acknowledging the heartbreak that some of the families we look after each year experience. Taking part also provides the means for me to raise funds, as we continually strive to improve our service. I am looking forward to joining others again in September as we remember those who are no longer with us."



We want as many people as possible to get together with family, friends or work colleagues to walk in support of their local hospital, while celebrating the lives of those who are no longer with us



Tom Brook who took part in our two previous memory walks with other family members said after the 2023 event:

"It's been a privilege to be able to walk, once again, for the Kingston Hospital Charity in memory of our wonderful father who died back in 2021, but who was so well cared for and supported by the hospital over the last 20 years or so. We will forever be indebted to the hospital for their care and professionalism – it's a pleasure to be able to give something back to support the Kingston Hospital community."



Registration takes place at the Guildhall, with each walk starting and finishing in Kingston's Market Place.



Sign-up now and take advantage of the early bird offer – £10 per adult and children go free by visiting www.khc.org.uk/events/walk/ or call Rupert on 020 8973 5042.

Thank you for your support

Dr Laura Nightingale
Consultant and Clinical
Lead Specialist
Palliative Care

We are enormously grateful to everyone who kindly contributed to help us recruit a bereavement support practitioner at Kingston Hospital. The recruitment process is now underway and over the next 18 months or so, we will be exploring the very best examples of bereavement care in hospitals and how we can adopt and adapt them for our communities.

The bereavement support practitioner will build on existing provision to develop an enhanced approach to supporting people and families before, during and after a bereavement in hospital. He/she will establish pathways of support, involving professionals and volunteers who can build relationships with people to understand their short and longer-term needs and facilitate connections with services and support in their local area and communities.



Thank you

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We would like to thank all who have been active over the last several months, fundraising to help make Kingston Hospital a better place for patients, families and staff, including:

Camilla Goldspink
having successfully
completed the
London Marathon



Tom, Henrik, Hans and Tobi from the **Kingston Wheelers Cycle Club** who took on the **KWCC does Everest...again** cycle challenge on Zwift in March.

Kingston Hospital staff **Imy Neely** and **Mollie Smith** for taking on the Hampton Court Palace Half Marathon and **James Howard** for completing the Brighton Marathon.

Camilla Goldspink on completing the London Marathon, having run “each mile on behalf of some of my wonderful friends and family, acknowledging the invaluable care and support they’ve received from some of the key services and wards at Kingston. The past few years have thrown some real challenges our way, but the hospital’s been there for us – helping bring in new little ones, saving the lives of some of our favourite people, and supporting those dealing with tough times.”



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