



Views from the top

Chief Executive Liz Bishop gives her views from the new cancer hospital

What a year

Record breaking research
improving clinical excellence

Go for Green

New 3-2-1 Charity Fun Run

Spring 2019

Cover Story

12 GO FOR GREEN

Features

03 EVERY PERSON MATTERS

04 VIEWS FROM THE TOP

07 HOLISTIC HELP

08 RECORD BREAKING -
WHAT A YEAR

09 GIVING HOPE A CHANCE

10 ADVANCES IN HEALTHCARE
TECHNOLOGY

11 GOING THE EXTRA MILE
FOR YOU

12 GO FOR GREEN

14 THE BIG LEGO® BRICK
HOSPITAL

15 AHEAD OF THE GAME

16 LEADING THE TREATMENT
REVOLUTION

18 THE STAFF VOICE

19 FOUR DECADES OF
DEDICATION

20 A DAY IN THE LIFE OF PAPILLON

22 HAVING THE FREEDOM
TO SPEAK UP

Fun

23 COFFEE TIME - RECIPE AND
BRAIN TEASER

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Kathy Doran

Welcome to the new look C3 Magazine! The coming year is set to bring the biggest change in the hospital's history so it seemed the perfect time to have a refreshed design of the magazine. We are on schedule to open our new hospital by summer 2020 so it's really important that we communicate the updates on the building with our members and patients. The C3 magazine helps us do this so I really hope you like the new design. You can also meet our new Chief Executive Dr Liz Bishop in this edition, she shares her views on the impressive new building in Liverpool on page 4.

I am very proud to be joining the centre at such an exciting time and look forward to working with staff to help deliver the best cancer care for patients. I'd also like to take this opportunity to thank the previous Chair Phil Edgington for his committed service to the hospital. There have been big changes within the leadership team at the centre but the amazing care the patients receive everyday continues to develop from strength to strength.

Kathy Doran joined the centre as Chair on 1st April.



EVERY PERSON MATTERS

THIS IS A LOVELY PLACE TO WORK AND IT'S A PRIVILEGE TO BE HERE.



Patients pay tribute to warm and friendly Peter.

Greeting our patients with a cheery smile is all in a day's work for Peter Hough.

Often the first person that people meet when they arrive at the centre, Traffic Advisor Peter knows how important it is to make sure their first experience of The Clatterbridge Cancer Centre is a good one.

The 59 year-old has been the person to guide people to their spaces in our free car park for seven years and he loves every minute of his job.

Peter, from Tranmere, Wirral, said: "I go home in the evening and feel I have done something really worthwhile.

"There are so many people at The Clatterbridge Cancer Centre who help our patients, doctors, nurses, radiographers and the rest of the staff and volunteers. I am proud to be among them."

As well as helping patients and visitors find a parking space, Peter and his colleagues give other pieces of useful information such as directions to the volunteer desk for those arriving for the first time for treatment.

Their hard work and positive attitude certainly hasn't gone unnoticed, with a number of thank you cards arriving recently at their hut located at the entrance to the hospital.

Peter said: "One card that arrived said 'On the first day I arrived here your smile was so reassuring'. That made me feel really good. Patients will tell me their countdown to the end of their treatment and on their last day will say 'I won't see you again' – but in a good way.

"I can't imagine what some of the people who pass through that barrier are feeling but I feel real pride in what I do and I do my best to help them. This is a lovely place to work and it's a privilege to be here."



VIEWS FROM THE TOP

New Chief Executive Liz Bishop on her hopes for future of new hospital.

This time next year The Clatterbridge Cancer Centre - Liverpool will be preparing to open its doors to staff and patients. The 11-storey state of the art specialist hospital is part of an £162 million investment, expanding the care given to people with cancer in the region and taking treatment closer to the majority of our patients.

New Chief Executive Liz Bishop describes the building as a place where patients will not only feel cared for, but will provide modern, state of the art facilities, reflecting the quality and expertise of the staff who work for The Clatterbridge Cancer Centre.

Since joining the Trust in November 2018 she has visited the build site twice and on the second occasion ventured onto the roof to experience the breath-taking view that encompasses most of the area that is home to the 2.4 million people the Trust serves.

She said: "From the roof you can see so many of the city's landmark buildings like

the cathedrals and the Liver Building and next year we will be adding to that portfolio of iconic buildings in the city.

LIVERPOOL HAS SOME OF THE WORST CANCER OUTCOMES IN THE UK AND WE ARE TAKING CARE WHERE IT IS NEEDED THE MOST.

"You can also see the whole region from the top. You can see all the way to the north and east and then over the River Mersey to Wirral and of course the city of Liverpool.

"Together with our sites in Wirral and Aintree, and our cancer clinics across the region, this building, together with our clinical model, is taking treatment closer to a vast proportion of the population we serve and that will give our patients even more confidence in the care we deliver."

The new specialist hospital will provide in-patient care for teenagers and adults with all cancers, together with diagnostics, outpatient chemotherapy, radiotherapy, and a raft of other cancer treatments and services.

It is situated next to the new Royal Liverpool University Hospital and the two establishments will have link corridors to enhance the care that can be offered to cancer patients, particularly those who are more seriously ill or who require the expertise of staff within the Royal.

"The hospital in Liverpool should improve access and treatment for the 70 per cent of our patients who come from north of the River Mersey and that in turn should improve outcomes. Liverpool has some of the worst cancer outcomes in the UK and we are taking care where it is needed the most, whilst maintaining our excellent sites elsewhere" Dr Bishop explained.



“The co-location with The Royal Liverpool University Hospital next door is unique, there is no other cancer specialist hospital situated in this way. Being co-located with an acute hospital will ensure patients have access to support when they need it, particularly urgent care.”

CLATTERBRIDGE IS HERE TO SERVE A POPULATION OF 2.4 MILLION PEOPLE IN MERSEYSIDE AND CHESHIRE.

This collaboration is vital to The Clatterbridge Cancer Centre, in the same way the close working relationships with other hospitals throughout the region have benefited patients (in addition to being a pivotal part of the Cheshire and Merseyside Cancer Alliance).

“Cancer care by its very nature is delivered across a wider system. Clatterbridge is here to serve a population of 2.4 million people in Merseyside and Cheshire,” said Dr Bishop.

“We need to support the Alliance and the healthcare system in improving and delivering on waiting times targets and helping to prevent cancer. There is a need to achieve earlier diagnosis and meet the challenges of hard to reach populations to ensure equity of access to cancer care.

“The new hospital will help us to achieve that and our plans align with the NHS long term plan which prioritises cancer, with the recognition that despite advances in treatment, cancer remains one of the top five causes of early death in England. However more people are living with cancer with the overall increase in life expectancy. Cancer survival is the highest it has ever been, but there is more to do. If patients can be diagnosed earlier, at stage 1 or 2, they will have the best chance of curative treatment and long term survival.



TO ACHIEVE OUR AMBITION TO DIAGNOSE PATIENTS EARLIER AND FASTER, WE NEED TO WORK IN PARTNERSHIP.





Staff gather for a first look at the hospital

“To achieve our ambition to diagnose patients earlier and faster, we need to work in partnership with other providers who provide screening and surgery, commissioners and GPs and local authorities and we look forward to strengthening these relationships.”

The expansion into Liverpool will also bring us geographically closer to the city’s universities.

Dr Bishop said: “Not only will the new building benefit patients when they most need us but it will also give us the opportunity to expand our research portfolio which is crucial to developing new treatments. Co-location with the universities is important in attracting clinical academics into Liverpool and facilitates bench to bedside, translational clinical research, in our efforts to help find better treatments for future patients”

Of course she is aware of the huge task ahead in transferring and expanding services

NOT ONLY WILL THE NEW BUILDING BENEFIT PATIENTS WHEN THEY MOST NEED US BUT IT WILL ALSO GIVE US THE OPPORTUNITY TO EXPAND OUR RESEARCH PORTFOLIO.

to a new hospital and maintaining the ethos of The Clatterbridge Cancer Centre Dr Bishop said: “I am hugely grateful to the staff for currently working across multiple sites and the plans for the future will inevitably bring more change.

“This might mean adjustments, and some staff might need to work in different ways or it may mean a change to their arrangements for travelling to work. We will do our best to help them in this process.

“It is probably a once in a career opportunity for all of us who work here to create a new hospital.

“It is a beautiful building which I hope will give confidence to our patients and be a pleasure for our staff to work in. Following completion of the building our focus will shift to The Clatterbridge Cancer Centre in Wirral to make sure that site continues to provide first class facilities.

“The culture of The Clatterbridge Cancer Centre is evident across all our sites in Wirral, Aintree, Haemato-Oncology in Liverpool and all our clinics and chemotherapy delivery units across Cheshire and Merseyside.

“There is no reason why our new hospital in Liverpool will be any different. Seeing the building take shape is hugely motivating and I am sure it will exemplify the culture we are all so proud of.”

WANT TO HELP RAISE THE LAST £5 MILLION?

Building the best hospital we can will only be possible with generous charity support. Opening the doors to our brand new cancer hospital in Liverpool is just the beginning – we want to make our Wirral centre the best it can be too.

We have just £5m left to raise, and you can help us to get there. Every donation helps to make a huge difference, and you can still be a part of the New Cancer Hospital Appeal.

To give your support or find out more visit clatterbridgecc.org.uk or call 0151 556 5566





WHAT OUR PATIENTS SAY

I feel this service is very personal which helps with the situation.

My experience of the service has made me feel so much happier with my treatment and care options.

It was great being able to tell someone how I feel.

It gave me the chance to chat.

New support team on hand to support patients.

HOLISTIC HELP

A new team of Cancer Support Workers are now on hand to ensure patients at The Clatterbridge Cancer Centre are getting all the extra help they need.

The 11-strong team has been established to work across both the Wirral and Aintree sites to compliment the clinical teams and provide a fully rounded service for everyone who needs it.

People with cancer sometimes feel isolated and they can experience a range of concerns including financial and emotional issues.

The Cancer Support team is available to help patients access the help and information they need. They do this by offering an Holistic Needs Assessment and from any patient concerns raised, a care plan is produced together with the patient. The patient is given a copy and with their permission it is also shared with their GP.

Jane Randles, Cancer Support Workers Manager, said: "The holistic needs assessment we carry out looks at the treatment of a patient as a whole, gathering information about concerns that are not clinical.

"Patients might have practical issues like getting transport for treatment or help with looking after a pet while they are at the hospital. Then of course there might be advice needed with finances and benefits.

"Other concerns might be around body image, fatigue, diet and exercise. We can sign post them in the right direction to get advice about these issues and more.

"This is a really important addition to the services already on offer to our patients because we are identifying concerns people possibly weren't addressing previously."

The team are quickly developing a directory of cancer information, local support groups and services which hopefully in the future can be shared with multi-disciplinary teams.

Karen Jones, 59, is being treated at The Clatterbridge Cancer Centre after being diagnosed with breast cancer and secondary bone cancer. She completed a holistic needs assessment with a support worker and found the experience invaluable.

Karen, from West Kirby, said: "This is the second time I have had breast cancer and I thought I was pretty resourceful but I am so glad I did the holistic needs assessment.

"The questionnaire is really useful as everything is in one place and you can work out what you need. Then afterwards you can talk it through with the support worker.


"As a result of doing the assessment I decided I would go for some counselling. I wouldn't have thought I needed to do that but through the assessment I realised I might need some more support than I first thought."

Patients can be referred to the team by their specialist nurse or they can call in to see the Cancer Support Workers who are situated in the Radiotherapy Department at the Wirral site.



Karen Jones





**RESEARCH ASSURES
BETTER DRUGS,
TREATMENT AND
OUTCOMES FOR THE
PATIENT AND THAT DRIVES
EVERYTHING WE DO.**

RECORD BREAKING WHAT A YEAR

More patients than ever have taken part in clinical trials.

Almost eight hundred patients have taken part in clinical trials in the last 12 months, expanding our portfolio and improving clinical excellence. At 796 this is more patients than ever before.

This type of research is crucial as it allows doctors and other healthcare professionals to show evidence that new treatments work, which can only be good for current and future patients, showing they are getting the best care possible.

With one in two people in the region likely to develop cancer, this work is critical for the future care of patients at The Clatterbridge Cancer Centre.

Maria Maguire, Research Manager, said: "We are delighted with the progress made over the last 12 months in increasing the number of people taking part in clinical trials.

"We want to make sure patients have access to research studies. It adds to our knowledge of cancer whether that is about treatment or their experience.

"Every patient can play their part and we want to make our research portfolio more diverse while maintaining current strengths, looking at the bench to bedside approach and ultimately improving outcomes for our patient."

There is a massive diversity of clinical trials on offer to patients at The Clatterbridge Cancer Centre, covering a variety of aspects of patient care.

For example a study into the side effects of immunotherapy treatment is crucial to patient safety, the increase in the pool of biobank samples will enhance research into why certain people are more likely to get cancer, and there are also qualitative trials, looking at the wider experience of the patient and their holistic care.

Dr Maguire said: "When we looked at our portfolio of clinical trials we wanted to ensure we were meeting the needs of the population we serve, not just their treatment but the wider experience of their care.

"We can investigate the patient experience, looking at how cancer is affecting their whole life, finding out if there is intervention we can make earlier.

"The holistic aspect is important. How do patients feel about the way they have been spoken to? This allows us to improve our care.

"Then we have other studies to discover how a drug behaves in the real world."

Dr Maguire is acutely aware of the responsibility of the team towards the patients who are taking part in clinical trials at The Clatterbridge Cancer Centre.

Many feel a huge sense of pride at being part of research that could help shape the treatment of the future.

Dr Maguire said: "It is very humbling when you hear patients feel good about being part of research.

"We see patients when they are at their most vulnerable and understand the responsibility to ensure every bit of data counts."

A new research strategy was launched last year and Dr Maguire said the team have embraced the objectives.

She added: "The support of the wider organisation has also been vital for us in reaching this number, the investment of time by consultants and their teams for example, and staff in every department – everyone pulling together.

**INVESTMENT BY THE
HOSPITAL AND THE SUPPORT
OF OUR MEDICAL DIRECTOR
SHEENA KHANDURI
HAS BEEN VITAL.**

**NEXT YEAR WE WANT TO INCREASE THE
NUMBER OF PATIENTS ON CLINICAL TRIALS TO 1000,
10 PER CENT OF NEW REFERRALS.**



GIVING HOPE

A CHANCE

Mum of four Sarah on why she opted for a clinical trial.



Sarah's tattoo

Sarah Hayes had no hesitation about taking part in a clinical trial as part of her treatment for secondary breast cancer.

Sarah, 35, from Noctorum in Wirral, had already received chemotherapy and radiotherapy following a lumpectomy in 2012 after discovering a lump in her right breast while in the shower

Three years later the mum of four, who is married to Stephen, was suffering from intense back pain. Tests followed quickly and she was told the cancer had spread to her spine, pelvis and liver.

Sarah, who is mum to Louis, 16, Alyx, 10, Jaime-Li, eight, and six year-old Jorgie, said: "All I could think about was my kids. I am a mum before anything else and I thought there was no hope."

She was referred back to The Clatterbridge Cancer Centre where she received chemotherapy and hormone treatment. It was during this time that she started investigating the possibility of a clinical trial and was referred to Professor Carlo Palmieri.

Two options were open to Sarah and when she was told about CARBON she knew that was the route she wanted to take.

PATIENTS LIKE SARAH WHO TAKE PART IN TRIALS ARE PIONEERS. THEY LEAD THE WAY AND WE OWE THEM A GREAT DEBT OF GRATITUDE.

The trial is examining the effectiveness of the drug capecitabine combined with radium 223 for women with secondary or advanced breast cancer.

Sarah said: "It sounded really good for me but when I saw its logo was a diamond I thought it was a sign, it matched a tattoo I'd had along with a really close friend not long after I had been diagnosed.

"Everything else about it sounded good to me and I trusted Prof Palmieri so I decided to go with that option."

Sarah started the trial at the beginning of 2018. She was well enough to go on holiday to Mexico in August and swam with sharks. As well as being a busy mum of four she finds time to cook meals for the homeless, laughing: "I like being busy, I don't want to sit round feeling sorry for myself. There is always someone in a worse position than me."

She added: "Looking back to when I was diagnosed with secondary cancers I didn't know what the future held. Now I have celebrated my son Louis' 16th birthday.

"I definitely credit the trial with that. The treatment I'd had before that was good but clearly things were changing and I was deteriorating. I would say to anyone who is offered a clinical trial they should definitely give it a go. The treatment is so personalised and I feel very lucky to have been given this chance.

"Also taking part in a trial is a way of helping other people. I have three daughters and although I know thanks to genetic testing that my cancer is not genetic, I feel that by taking part in a trial I am not only helping myself but other women, possibly my daughters, who might go on to have breast cancer."

Professor Palmieri, Consultant Oncologist at The Clatterbridge Cancer Centre, said: "Clinical trials give options to patients and access to new treatments. They are also vital to developing new treatments and improving outcomes, helping patients live longer."



ADVANCES IN HEALTHCARE TECHNOLOGY

People arriving for Outpatient or Radiotherapy appointments at The Clatterbridge Cancer Centre will soon notice the introduction of new self-service check-in kiosks.

This state of the art equipment is designed to make the arrival for treatment simpler for patients and their carers.

The digital technology will not only save time for patients but will also free up the resources of reception staff for the other duties they perform on a day to day basis, including helping people who require greater assistance.

The check-in kiosks use touch screen technology, are simple to operate and will let staff know patients have arrived. They will not only reduce the amount of time spent in a queue in reception but will give people greater confidentiality as, for instance, they won't need to say their name out loud.

Patient check-ins via a secure kiosk are estimated to take just 30 seconds. In other UK hospitals, similar technology has

received a 95 per cent patient uptake rate - reducing the administration burden and associated cost of the traditional hospital check-in.

Sophia Bourne, Matron of Quality and Safety, said: "The Clatterbridge Cancer Centre wanted to use the latest technology to improve patient experience.

"Many patients will be familiar with this type of technology at their GP surgery – or in other walks of life - and will be aware of the benefits it can bring, particularly in reducing the time people need to wait at reception desks and the added stress that can bring.

"We hope patients of all ages will embrace the kiosks and will see them as a way of improving their experience when they come to us for treatment."

There will be leaflets available for all patients to help them become more familiar

DIGITAL TECHNOLOGY WILL NOT ONLY SAVE TIME FOR PATIENTS BUT WILL ALSO FREE UP THE RESOURCES OF RECEPTION STAFF.

with the self-check-in process and fully trained volunteers will be on hand to help people get used to the new technology.

The kiosks are part of the Global Digital Exemplar programme, set up to drive NHS digitisation and provide a series of blueprints for other hospitals to follow.

Following the introduction of the kiosks in Outpatients and Radiotherapy, they will be rolled out across other sites and in the new Clatterbridge Cancer Centre due to open in Liverpool next year.

GOING THE EXTRA MILE FOR YOU



STAFF AWARDS

Our monthly staff awards are a lovely opportunity to hear about all the great work staff are doing to make the centre and your experience the best it can be. Over the last 12 months we received nearly 300 nominations.

MARCH

The PET CT Imaging and CT Imaging Teams worked seamlessly together so patients scans were unaffected during the upgrade of the old CT scanner.

APRIL

The Chemo team based at The Linda McCartney Centre for the amazing work they do every day to help them through their chemotherapy treatment.



MAY

Susan King and the Communications Team organised a well-deserved 60th anniversary celebration

event for 600 staff at Claremont Farm, and they all loved it.

JUNE

Colleagues felt Nikki Tyrer created a memorable day full of pride and fun at the Big7tea party to celebrate the 70 years of the NHS.

JULY

Patients on Delamere Ward and at the Chester Chemotherapy clinic told us that Colette Farrell was amazing and her friendly, genuine approach stands her apart.

AUGUST

Nurse Claire Cadwallander went above and beyond to ensure the individual needs of patients were prioritised in the Specialist Palliative Care Team.



SEPTEMBER

Colleagues were thankful to Heulwen Sheldrick & Catriona Fleming who brought their Allied Health

Professional colleagues together in a great celebration of the work they do.

OCTOBER

Efficiency has been improved after paperless working was achieved under difficult technical conditions thanks to the brilliant efforts of The Brachytherapy Team.



NOVEMBER

Chemotherapy Nurse Kerry Nixon was recognised by her colleagues for the extra hours she worked and the

emotional support she offered to help a young adult patient and his family.

DECEMBER

A young patient's parents nominated Dr Alison Coackley for coming into the hospital late at night to attend to their child and staying through to the early morning hours.

JANUARY

When the Radiotherapy Planning service extended across two sites the team excelled in dedication and professionalism taking on additional tasks to ensure the safety of patients.



FEBRUARY

Workforce Systems Officer Claire Farrant is the epitome of being passionate about her work. Her efforts helped her team raise over £800 for the new hospital.

Anna with John's wife and son



UK RADIOGRAPHER OF THE YEAR

Sean Ralph was awarded UK Radiographer of the Year for the North West Region by The Society and College of Radiographers. Sean was recognised for his work in addressing LGBTQ+ health inequalities in cancer care.



JOHN LITTLER MEDAL 2018

The recipient of the 2018 John Littler Medal was Dr Anna Olsson-Brown for her outstanding contribution to patient care and innovation. Dr Olsson-Brown was awarded the medal for the research she is undertaking into the side effects of immunotherapy treatment.

GO FOR GREEN

More than 300 people enjoyed a brand new charity fun run in the grounds of The Clatterbridge Cancer Centre



The 3-2-1 Go Green event saw runners of all ability - and a few dogs - enjoy a 2km course with a difference, to raise funds for The Clatterbridge Cancer Charity.

The run featured an obstacle course as well as powder paint stations to turn everyone green.

It was the finale to the annual Let's Go Green week, a fundraising drive to help the charity raise £15 million towards the build costs of our new specialist cancer hospital in Liverpool city centre.

The start line was outside the entrance to The Clatterbridge Cancer Centre and runners were given the chance to complete the course more than once if they wanted a tougher test.

Before they set off they enjoyed a warm up courtesy of staff from the gym at the Village Hotel in Bromborough.

Among those taking part was Alison Payne from Crosby.



Alison, 48, was first diagnosed with bowel cancer in 2013. She has had 16 surgeries in four years and is now receiving treatment for metastatic spinal cancer at The Clatterbridge Cancer Centre.

She was joined by her friends Vicky Edwards, Denise Cresswell, Norah Stewart, Anne Mahon and Stella Edwards.

Alison said: "The care I have had at Clatterbridge has been fantastic and this is a way to say thank you."

"I think positivity is a massively important thing and I have been really lucky to be supported by my friends and family and taking part in 3-2-1 is a great way to show our support and have some fun."

Her friend Stella Edwards, from West Kirby, was also running in memory of the mum of a close friend, Lillian Cope, who trained as a nurse at Clatterbridge.

Stella said: "Sadly Lillian lost her life to cancer and I wanted to pay tribute to her, and everyone at Clatterbridge, today."

Mark Parkinson, Event Manager for The Clatterbridge Cancer Charity, said: "We were delighted to see so many people take part in the first 3-2-1 Run Green."

"We wanted to make sure people had a lot of fun while raising much needed funds at the same time."



"I would like to say a huge thank you to everyone who took part and of course to all our volunteers who worked so hard to make the event such a huge success. We want to make next year's run even bigger and better and can't wait to get planning."

When the 300 runners crossed the finish line they were treated to bottles of water donated by Asda in Arrowe Park and apples from Asda in Bromborough. Village Hotels also gave runners a free three day gym pass.

All the powder paint could have got a little bit messy but thanks to Protecdirect.co.uk coveralls kept the volunteers and staff paint free.

The Clatterbridge Cancer Charity is working to raise £15 million towards the cost of the new Clatterbridge Cancer Centre in Liverpool and improvements to the Wirral site.

THE CARE I HAVE HAD AT CLATTERBRIDGE HAS BEEN FANTASTIC AND THIS IS A WAY TO SAY THANK YOU.



FANCY A GO?

If you would like to sign up for next year's Green Run contact 0151 556 5566 or visit clatterbridgecc.nhs.uk/charity.



THE BIG LEGO® BRICK HOSPITAL

A scale replica model of the new Clatterbridge Cancer Centre is being constructed using more than half a million LEGO bricks.

LEGO brick diggers and construction workers are hard at work, just like their real life counter parts on the new Clatterbridge Cancer Centre in Liverpool. When complete it will be one of the biggest LEGO brick structures in the UK and the first ever hospital of its kind to be made in the world.

With a staggering half a million bricks going into the 1.6m high scale model, a team of dedicated volunteers and LEGO brick enthusiasts are building THE BIG LEGO BRICK HOSPITAL piece by piece and we can't do it without our amazing supporters and donors.

Restaurateur Nisha Katona of the Mowgli Street Food brand has added a LEGO brick monkey figure to THE BIG LEGO BRICK HOSPITAL to represent Mowgli's logo of her restaurants.

The LEGO brick hospital will include replica medical equipment, hospital beds and every other unique feature that will make the new building invaluable to our patients. Anyone can be involved, from individuals to companies, and everything is for sale. You can buy a brick from £1 or your company can sponsor a LEGO brick patient room, piece of equipment or anything else that might fit your brand.



Nisha Katona

**OVER HALF A
MILLION BRICKS
WILL GO INTO
THE 1.6M HIGH
SCALE MODEL.**



AHEAD OF THE GAME

Continuous employee development is vital to future-proof our organisation. Identifying new ways of working and investing in developing our workforce helps us seamlessly adopt new technologies and practices to remain at the forefront of cancer care in the UK.

It is just over a year since we appointed four consultant radiographers, an innovative new role intended to improve the service provided to our patients undergoing radiotherapy treatment.

Conor Fitzpatrick was part of that group, and specialises in palliative radiotherapy treatment.

Palliative radiotherapy treatment is given to improve the quality of life of patients, it is used to help relieve and control the symptoms of cancer, including symptoms like pain. Being able to access palliative radiotherapy helps to ensure patients can live better lives.

In the 15 months since he took on the role he has been expanding the service provided to this particular patient group.

What was once a weekly clinic is now a fully developed holistic service, expanding access to treatment and improving links throughout local health and care services.

Conor, who joined Clatterbridge from The Christie in Manchester, said: "With the huge improvements made in the treatment and management of cancer in recent years, we are seeing more patients living longer with their disease, increasing the likelihood that they may need palliative treatments such as palliative radiotherapy at some point."

"I am proud to say that the patient is at the heart of our service and every decision we make. Palliative care can last for a number of months to years and in that time we can do a lot to help them on their treatment journey.

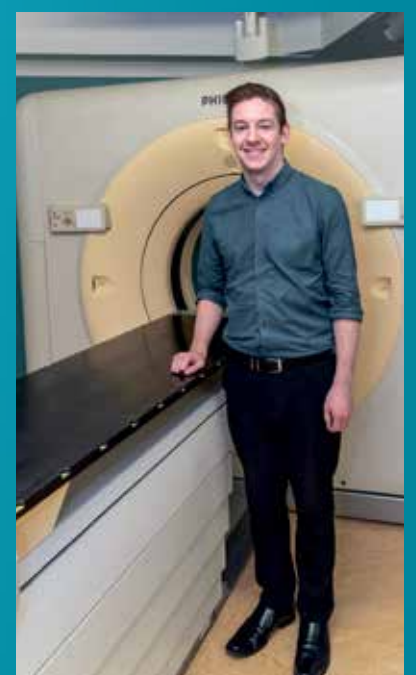
"If a patient has pain, we will do our best to understand how that affects their lives, so we can link them with the right teams. We know that palliative radiotherapy can help with this, but combining this with the correct support, and the right medication significantly helps."

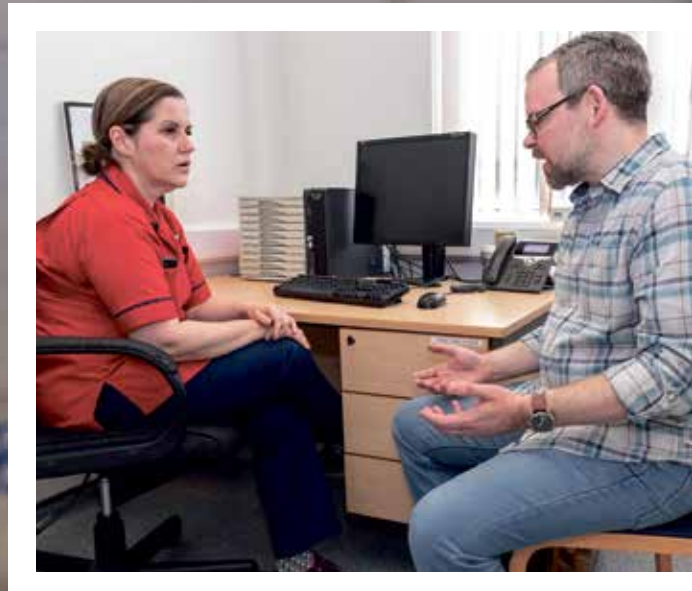
An important part of Conor's role is to strengthen links with GPs and hospices in the region to ensure patients are getting the support they need and are able to access local services.

He said: "Our focus is on quality of life. Having this service in place means GPs, hospices and other care environments can call or email and get direct dedicated support."

He is also involved in research into this area of treatment, he is working to collect and review the clinical outcomes for our patients, helping to ensure that we continue to provide the right treatment at the right time, providing up to date information on any side effects a patient may experience.

Conor said: "Clatterbridge has fully embraced this new role, they have never been afraid of doing things differently. The biggest benefit is being ahead of the game."





LEADING THE TREATMENT
REVOLUTION



Carl receiving treatment



Carl with his daughter Alana

The latest advance in immunotherapy offers great hope, the treatment helps strengthen the immune system's ability to fight cancer and is being hailed as the next era of cancer treatment. But as more patients use the treatment, the risk and frequency of side effects are becoming clearer.

The Clatterbridge Cancer Centre has set up a dedicated service to help manage the side effects of immunotherapy.

Two dedicated nurses are now on hand to help patients suffering from toxicity as a result of the treatment and we are recruiting two more nurses.

At the same time, further research is being carried out to learn more about side effects and how to treat them, getting patients back into treatment as quickly as possible.

Immunotherapy is still a relatively new treatment for cancer and is primarily used for metastatic melanoma (skin cancer that has spread to other parts of the body), head and neck cancers, non-small-cell lung carcinoma and renal cell carcinoma.

THE NEW SERVICE IS WORKING ALONGSIDE THE CANCER SITE SPECIFIC TEAMS TO ENSURE EFFECTIVE PATIENT SUPPORT.

It has been offered to patients at The Clatterbridge Cancer Centre in Wirral for more than five years and 1,000 have received the treatment.

The side effects are very different from traditional treatments for cancer, such as chemotherapy and radiotherapy as these drugs enable the immune system to fight the cancer cells and in doing so can sometimes target normal tissues.

General side effects can typically include fatigue, greying hair and occasional itching but some patients may experience colitis,

hepatitis, inflammation of the glands and skin toxicities, as well as rarer inflammatory disorders and inflammation of the eyes.

Dr Anna Olsson-Brown, medical oncology registrar at The Clatterbridge Cancer Centre and Clinical Research Fellow at The University of Liverpool, is part of the innovative new service.

She said: "The major difference of these side effects is that their onset is unpredictable, they can happen any time during and up to a year post therapy and normally require medication to treat them. Time is rarely enough on its own.

"These side effects are generally manageable but not without adequate support and teams with time to do so."

The new service is working alongside the cancer site specific teams to ensure effective patient support.

Trudy-Jane Guinan is Immunotherapy Lead Nurse and is working alongside Immunotherapy Nurse Specialist Kate Thurston.

Trudy said: "A vital part of the role is to co-ordinate services, including toxicity management. This is done in addition to providing education and training to all staff involved in the delivery of Immuno-oncology treatments.

"We also provide specialist advice to nursing and medical staff, hopefully improving the patient's experience and resulting in a better outcome.

"The overall aim is to provide early intervention and treatment, hopefully reducing the impact that toxicities can have on a patient's overall treatment journey."

Patient Carl Horrobin has been receiving immunotherapy treatment since January 2018.

Carl, from Heswall in Wirral, was first diagnosed with melanoma in March 2016, then last year he was told the cancer had spread to his lungs.

WE ALSO PROVIDE SPECIALIST ADVICE TO NURSING AND MEDICAL STAFF, HOPEFULLY IMPROVING THE PATIENT'S EXPERIENCE AND RESULTING IN A BETTER OUTCOME.

He has responded well to treatment and his last scan in January showed no evidence of tumours in his lungs.

Carl said: "When I was first diagnosed, all I wanted was to see my daughter start school in September. Now I hope to see her finish school – that's how much my horizons have been stretched by this treatment."

Carl did suffer side effects as a result of the treatment, including swelling behind his eyes, but these are now under control.

He said: "After two treatments, I was hit by side effects. The main one was orbital myositis – an inflammation of the muscles around and behind the eyes.

"I have also been diagnosed with rheumatoid arthritis but the issues have been brought under control though and my care has been excellent.

"The side effects were worth it to still be here today though."



THE STAFF VOICE

Laura Jane Brown

Being a senior nurse, and having experience as a patient gives Laura Jane Brown a unique mix of skills to be the ideal staff voice on the council of governors.

"I've been a nurse for 11 years and a senior nurse at the centre for five years. I'm now working in a project role helping get the nursing service ready for our expansion into Liverpool. In 2015 I was seriously unwell and spent a lot of time in a specialist hospital. When I returned to work I found myself reflecting upon the care I received and the clinical processes involved in making decisions about my life.

"I like people, I love learning and making a difference – that's why I became a nurse. But I have an annoying habit of wanting to know everything, about anything, every little detail. All of a sudden I had a whole new

world of things to know because as a patient it became clear to me that it's not just about the point of care, it's also about the governance behind the care and the operational running of the hospital which can make just as much difference to a patient's experience.

"I don't like dwelling on the past but I do want to use my experience to help other patients and staff and that's why this role is so important to me.

"Being a staff governor means I get to do two of my favourite things in the whole world by talking a lot and asking loads and loads of questions. I'm learning all about the 'business' side of the organisation and taking it back to my fellow nurses to help keep them informed. I'm enjoying being their voice."

I WANT TO USE MY EXPERIENCE TO HELP OTHER PATIENTS AND STAFF, THAT'S WHY THIS ROLE IS SO IMPORTANT TO ME.

I REALLY ENJOY MANAGING THE TEAM AND BEING HERE TO SUPPORT THEM.

Sue, Administration Manager for Haemato-Oncology, started her career as a clerical officer and has spent four decades behind the scenes helping ensure things run smoothly for patients and staff.

She still clearly remembers her early days in the NHS at Liverpool's Dental Hospital, saying: "I started on a Friday and when I went into work on Monday morning they said to me 'you came back then?' I did and here I am, 40 years later."

Sue, whose mum was a nurse at Alder Hey Hospital, worked her way up to an audio typist before deciding that she wanted to progress her career further.

She said: "Learning and development was very different then. I wanted to get on so I did my own secretarial and computer skills course at evening classes.

"I then went on to get a degree from the Open University in Social Sciences and that gave me even more skills."

I AM VERY PROUD TO HAVE BEEN PART OF THE NHS FOR 40 YEARS.

After 20 years at the Dental Hospital, Sue joined the Haematology department at The Royal Liverpool University Hospital as a medical secretary. That department became part of The Clatterbridge Cancer Centre in 2017, bringing the treatment of blood and solid cancers together.

She was appointed Administration Manager more than two years ago and manages seven secretaries and four ward clerks.

Sue said: "I really enjoy managing the team and being here to support them.

"People don't always see the work we do but we are here providing a really important service that ultimately benefits patients and that is really important to us.



FOUR DECADES OF DEDICATION

Congratulations to
Sue Moffat who is
celebrating 40 years of
service to the NHS.



"Administration is the mainstay of a hospital and that is certainly the case at The Clatterbridge Cancer Centre."

Sue has seen a lot of changes over the past 40 years, and most welcomes the developments in learning and development as well as the increase in inclusivity among staff.

She said: "Things were much more hierarchical when I first started, it has changed a lot. There is much more collaboration with staff now and that is definitely a good thing."

When she looks back at her career it is with a huge sense of satisfaction not only with her own progression, but the work of the health service as a whole.

Sue said: "I am very proud of what I have achieved. I worked my way up the ranks of the admin field with training and support from colleagues and that gives me a huge sense of satisfaction. I am very proud to have been part of the NHS for 40 years."

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A DAY IN THE LIFE OF PAPILLON

The Papillon Suite at The Clatterbridge Cancer Centre has been treating patients for 25 years.

It was in 1993 that the first patient with rectal cancer received this ground breaking type of contact radiotherapy, and since then the centre has been at the forefront of developing the treatment and is a leader in training clinicians internationally.

Last year, the team behind the pioneering treatment was honoured with a prestigious British Medical Journal award.

Their entry, Papillon for rectal cancer, was the winner of 2018 Cancer Care Team of the year.

The Papillon technique was introduced to the United Kingdom by Professor Arthur Sun Myint, lead Papillon Clinician at The Clatterbridge Cancer Centre.

Since then more than 1600 patients, many from outside the Clatterbridge catchment area, have been treated here. There were patients from Europe, Australia, USA and Myanmar treated at Clatterbridge over the past 10 years.

The Papillon technique was developed for the treatment of rectal cancer, especially those in the early stages, meaning surgery can be avoided.

It is especially useful for patients who are not suitable for, or keen on, major surgery that would leave them with a stoma bag.

On an average day, two new patients will be seen in the Papillon Suite with four follow up appointments typically taking place.

LAST YEAR, THE TEAM BEHIND THE PIONEERING TREATMENT WAS HONOURED WITH A PRESTIGIOUS BRITISH MEDICAL JOURNAL AWARD.



After patients have been welcomed at reception, they will have a consultation with Professor Sun Myint, or other consultant oncologists either Dr Karen Whitmarsh or Dr Raj Sripadam.

The clinicians from the referring colorectal units will have an initial discussion with newly diagnosed rectal cancer patients about their various treatment options including surgery, external beam radiotherapy or Papillon. After discussion with the patients, the patients are then referred to see whether or not the treatment is suitable for them. This collaboration, putting the patient at the centre of decision making, is crucial to Professor Sun Myint and his Papillon team.

He said: "It is vitally important that we have this conversation and ascertain if they are suitable, and ensure that they understand the procedure.

"If the patient decides to go ahead, they return later after lunch for their treatment. The treatment delivery takes around two minutes and most treatments take place on the same day, unless the patient wants more time to think about it."

The majority of people attending the Papillon Suite are aged over 75, but the introduction of the national bowel cancer screening programme ten years ago has increased both the number and age range of people who are suitable for the treatment.

This is illustrated by the fact that in 1993 just one patient received Papillon. Last year that number was 210. This increase in referrals showed that most colorectal units around the UK now have better understanding of Papillon treatment outcomes and are giving more choice to the patients for their treatment when they are not keen on surgery and want to avoid a stoma

Professor Myint hopes that this expansion will help improve the outcomes for the patients with rectal cancer.

He said: "The earlier stage tumours respond better to Papillon, so we would like to encourage people to take part in the national bowel screening programme so that the disease can be picked up at an earlier stage."

The Papillon team at Clatterbridge believe that the most important thing to the patient is to respect their choice of treatment - giving them a choice, respecting their wishes and understanding what they do and don't want. However, we do not offer Papillon to patients who are not suitable.

The standard of care for patients with rectal cancer remains surgery which often results in the patient needing a stoma bag, but Papillon is presenting a real alternative for certain patients, particularly the elderly who aren't suitable candidates for an operation.

Crucially for Professor Myint the treatment is also opening up options for younger patients who do not want to live the rest of their life with a stoma.

"Our ethos is to treat our patients as equal partners in the decision making process. Our aim is to always put the patient first, and the whole Papillon team observe this every day."



OUR ETHOS IS TO TREAT OUR PATIENTS AS EQUAL PARTNERS IN THE DECISION MAKING PROCESS.



ONE OF THE KEY CONTRIBUTING FACTORS BY WHICH PATIENT SAFETY IS ACHIEVED IS WHEN PEOPLE FEEL SAFE TO SPEAK UP ABOUT ANY ISSUES.

HAVING THE FREEDOM TO SPEAK UP

It is more than two years since the introduction of freedom to speak up (FTSU) guardians, but what has their impact been?

Angela Wendzicha, Associate Director for Corporate Governance and the Freedom To Speak Up Guardian Lead at the centre discusses the influence of an open and transparent culture.

The Freedom to Speak Up (FTSU) concept was introduced by Sir Robert Francis following a 2015 review into 'whistleblowing' within the NHS. It incorporates whistleblowing but extends well beyond, aiming at developing cultures where safety concerns are identified and addressed at an early stage before people feel the need to 'blow the whistle'.

Angela said: "The concept has three components: improving and protecting patient safety; improving and supporting staff experience; and visually leading and promoting learning cultures that embrace continual improvement.

"One of the key contributing factors by which patient safety is achieved is when people feel safe to speak up about any issues, whether it affects patients, colleagues or something which affects the person personally – there are clear links between staff wellbeing and safety and this is a core principle of the FTSU concept.

"A guardian's purpose is to help staff feel comfortable to speak up about any concerns or worries so we can keep improving NHS services for patients as well as the working environment for staff.

"Speaking Up is about changing cultures to enhance safety, and a key part of that change is to be confident in accepting, apologising and continually learning from events."



IF YOU HAVE A CONCERN AT WORK
we're here to support you email:
ccf-tr.freedomtospeakupguardians@nhs.net

Rosa Binu submitted the winning recipe to the staff competition during national Nutrition & Hydration Week in March. The creative and versatile dish was chosen by the dietician team who loved how the dish can be seasoned to taste with many optional ingredients so it can be adapted to be a family favourite

ROSA'S INDIAN CHILLI CHICKEN

PREP TIME = 45-50 MIN

WHAT YOU NEED

- 500g diced chicken breast
- 2 tsp black pepper powder
- 1 tsp ginger garlic paste
- Salt to taste
- Water (1-2 cups/as required)
- 2 eggs
- 7-8 tsp corn flour
- 5 tsp all purpose flour
- Oil to fry (as required)
- 5 tsp olive oil
- 2 tsp ginger and garlic (chopped each)
- 2 Diced onion
- 2 green pepper diced
- 1/2 cup chopped spring onion
- 2 tsp chilli sauce
- 2 tsp soya sauce
- 3-4 tsp tomato sauce
- 3 tsp vinegar
- 3 tsp sugar
- 4 green chillies (optional)



WHAT TO DO

1. Mix chicken with 1 tsp of black pepper powder, 1 tsp of ginger garlic, salt to taste and 1/4 cup of water. Mix well/ Marinate. (Keep it in the fridge for 15-20 min.)
2. Beat 2 eggs and add salt to taste, add 5 tsp of corn flour, 5 tsp of all purpose flour, water to make a paste. Add the chicken into the paste and mix well and keep it aside for 15 min.
3. Fry the chicken in the oil until it turns golden-brown and keep aside.
4. Add 4-5 tsp of olive oil into a pan and add chopped ginger garlic and fry them for a minute. Add diced onion, green pepper, chilli sauce, soya sauce, tomato sauce, 1 tsp of black pepper powder, vinegar, sugar and spring onion and mix well for 2-3 mins.
5. Add 2 tsp of corn flour and 1/2 cup of water and pour it into the mix.
6. Mix them until the consistency thickens into a paste.
7. Transfer into a serving dish and decorate with spring onions, lemon and green chillies.
8. Serve hot with rice, naan or chappathies.



This issues winning recipe comes from Rosa Binu, Chemotherapy Nurse

BRAIN TEASERS

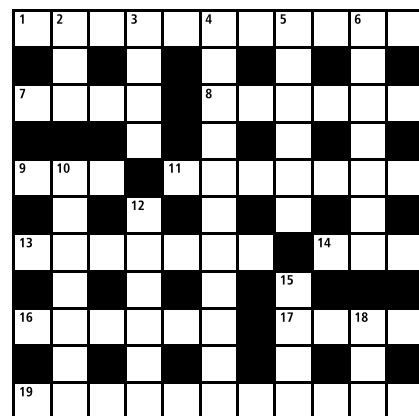
ACROSS

- 1 Audio system output device (11)
- 7 Separate article (4)
- 8 Mistakes (6)
- 9 Bleat (3)
- 11 Live together (7)
- 13 Of local interest (7)
- 14 Attempt (3)
- 16 Hammer-like tool (6)
- 17 Mountains (4)
- 19 Painful throat infection (11)

DOWN

- 2 Cereal grain (3)
- 3 Dulls (4)
- 4 Old flying reptile (11)
- 5 Receiving device (6)
- 6 Before now (7)
- 10 Pear-shaped fruit (7)
- 12 Names (6)
- 15 Indonesian resort island (4)
- 18 21st letter of the Greek alphabet (3)

QUICK CROSSWORD





HAVE YOUR **SAY** AND GET **INVOLVED**

Become a governor and play a key role in shaping the future of our services

Nominations open Friday 10th May
Visit clatterbridgecc.nhs.uk
for more details

CONTACT DETAILS

GOT SOME NEWS YOU'D LIKE TO SHARE? CONTACT US AT:

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Telephone: 0151 556 5000 Email: ccf-tr.communications.team@nhs.net