

# Grants Bulletin

**Issue 5**

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**This issue's grants in numbers**

- 11 grants were made in total, to the value of £613,310
- Of these:**
- 6 patient support projects - totalling £129,228
- 4 research projects - totalling £449,498
- 1 piece of equipment - totalling £34,584

**Welcome to our latest bulletin:** Addenbrooke's Charitable Trust (ACT) supports the work of Cambridge University Hospitals NHS Foundation Trust (CUH), which runs Addenbrooke's and the Rosie hospitals. We raise funds for additional and exceptional services, facilities and research.

In addition to raising money for specific appeals, we manage the hospitals' charitable funds. We award grants using a transparent procedure to ensure donations are spent in accordance with supporters' wishes, to the greatest benefit of patients, their families and those who support them.

With this bulletin we demonstrate the breadth and value of the initiatives and equipment which our kind donors make possible. Our Grants Committee meets every three months and a full list of initiatives supported at the 7 May meeting appears on page 4, alongside more information on how the grants process works.



## Patient support grants awarded

### An oasis of calm for stroke patients

**Background:** Being able to get out and about is an important part of any patient's rehabilitation after a stroke, particularly if their stay in hospital is a lengthy one. However, the courtyard garden between R2 and the Lewin Rehabilitation Unit had fallen into a state of disrepair and urgently needed attention.

**The application:** The application was made for a collection of flowers, shrubs and furniture to breathe new life into the garden.

ACT granted £15,000 for the refurbishment and a legacy had been received from Dennis Wyatt whose wife, Elizabeth, had been treated on the stroke unit nine years earlier. The RVS also made a donation to make the transformation possible.

The courtyard has been named after Kae Rake, who was a ward clerk on R2 for many years and was a great supporter of the garden's development. She sadly passed away at Easter.

**Comment from Dr Keith McNeil, CUH Chief Executive:**

"I'm sure Dennis would have been very impressed with how well his money has been spent and I know he was so grateful for the care and treatment his wife received on the ward."

**Grant applicant:** Caroline Parr.

**Amount awarded:** £15,000 from the Lewin Stroke Rehabilitation fund.



**Help for patients to get around the hospitals**

## Coin operated wheelchairs

**Background:** In 2011, ACT funded the purchase and installation of 66 coin operated wheelchairs that serve patients entering via the hospital's main entrance, outpatients, oncology and from car park 1. The chairs proved a great success and, in a recent evaluation conducted with visitors to the site, all users commented that they found the chairs of great benefit, easy to use, manoeuvre and to 'get in to and out from'.

**The application:** The estates and facilities department requested support to expand the provision of wheelchairs to benefit patients

using the Addenbrooke's Treatment Centre, the Rosie and car park 2. This will greatly ease access to the site, especially for those who are frail or unable to walk long distances. Based on usage of current chairs, it is estimated that the new chairs will be used by over 18,000 people a year.

**Comment from the committee:** "This is an interesting and worthy proposal."

**Grants applicant:** Rachel Northfield.

**Amount awarded:** £45,000 spread over two years, from ACT's unrestricted funds.



**Nicola Smith, Consultant paediatric surgeon, tells guests about how the ultrasound helps to locate tiny veins, at ACT's summer celebration in June.**

## Finding tiny veins

**Background:** The paediatric vascular access service inserts long-term venous lines under anaesthesia. However, accurately locating the veins in sometimes tiny babies can be extremely difficult and complications can include vein occlusion (blood flow blockage) and line-related sepsis.

Around 200 children per year receive venous lines at Addenbrooke's for treatments including chemotherapy, long-term antibiotics and nutritional supplementation. Patients benefiting from this technique range from 5kg babies to adolescents.

**The application:** Funds were sought for an ultrasound to aid paediatric staff in accurately locating veins and safely placing lines.

The team had been forced to borrow an ultrasound and this had led to conflicts of interest and resulted in delay of procedures. A machine was requested which could be optimised for paediatric vascular access and instantly available for the team's use.

**Comment from the committee:** "We are fully supportive of this application for this equipment which helps to enhance safety and minimise complications".

**Grant applicants:** Nicola Smith, Stephen Farrell, Claire Jackson, Andrew Robb, Dean Frear and Helen Underwood

**Amount awarded:** £16,000 with £8,500 from ACT's unrestricted funds and £7,500 from Ward C2 funds.

## Information for patients considering genetic testing

**Background:** A woman's risk of developing breast and/or ovarian cancer is greatly increased if she inherits a harmful mutation in the BRCA1 and BRCA2 genes. Men with these mutations also have an increased risk of breast cancer, and both may be at increased risk of additional types of cancer.

Genetic tests are sometimes offered to people with a family history of cancer that suggests the possible presence of a harmful mutation in one of these genes.

**The application:** The clinical genetics team requested funds to create a pre-clinic information video for patients considering this testing.

Currently, considerable time is spent explaining the same facts and concepts to each patient before exploring their own circumstances.

This ensures informed consent, but could be done more effectively using a video. The video could be viewed online, from home if a patient wishes. This prevents the patient's clinician or genetic counsellor repeating the same information in consecutive appointments.

This initiative would help patients retain important facts and provide an opportunity to consider their options before meeting with their specialist. It would also give specialists more time to productively discuss patients' personal and individual concerns.

**Comment from the committee:** "In the longer term, genetic testing will become increasingly routine practice in other specialties, so innovative ways of delivering information needs to be sought."

**Grant applicant:** Amy Taylor

**Amount awarded:** £5,000 from ACT's unrestricted funds and £2,728 from the medical genetics designated fund.



A model of an oesophagus

## Research grants awarded

### Reliably predicting Barrett's oesophagus

**Background:** Barrett's oesophagus is a change in the lining of the oesophagus which occurs in people with persistent heartburn and also in some people without a history of heartburn. It predisposes to cancer of the oesophagus, incidences of which have increased dramatically in the UK since the 1970s.

People with Barrett's are recommended to have periodic endoscopies to monitor the oesophagus and chronic therapy with acid suppressant medication.

For one in three patients, despite symptomatic relief, the dose of medication is not optimised and does not provide complete acid control and the risk of oesophageal cancer remains.

**The research:** It is important to monitor that acid reflux is actually prevented and currently, the standard way is a 24 hour measurement

with an invasive test (involving a naso-gastric tube) which is inconvenient for patients. There is a new device, called an Endofaster, which gives a rapid and immediate measure of the amount of acid in someone's stomach during an endoscopy test for Barrett's. This study will investigate whether an Endofaster can diagnose acid reflux and a patient's response to medication as well as the current standard.

**Comment from the committee:** "This is a well designed proposal that could lead to an interventional study."

**Research title:** Real time analysis of gastric pH at endoscopy to inform chemo-preventative strategies in patients with Barrett's oesophagus.

**Grant applicant:** Massimiliano di Pietro

**Amount awarded:** £22,185 from ACT's general medical research fund.



A finger labyrinth

## ACT's new patient amenities fund

In June, ACT launched its new patient amenities fund. The fund is for applications of less than £2,000 and encourages hospital staff to think about how they could enhance the patient experience in their departments.

The reviewing panel comprises:

- Ann-Marie Ingle – Chief Nurse
- Helen Balsdon – Assistant Director of Nursing
- Dr James Diver – Consultant Physician
- Louise Conway - ACT Fund, Grant and Legacy Manager

A fantastic 39 submissions were received in the first call for applications, of which 24 were awarded. Between them they totalled almost £40,000. We received applications from all corners of the hospital and from all levels of staff, all keen to improve the patient experience.

A sample of grants awarded appears in the table below. The second call for applications will be made at the end of the year.

Department	Title	Items	Amount
Inpatient pain service	Distraction techniques for reducing tension for inpatients	50 finger labyrinths	£2,000
Stroke R2 and the Lewin unit	Supporting patients and carers with self management after stroke	Information booklets	£1,800
Radiotherapy and oncology	Patient ticketing system for the oncology outpatients and day unit (blood samples)	Ticketing system	£2,068
Estates	Enhancing the hospital's main entrance	Plants and shrubs	£2,000
Department of Medicine for the Elderly	Music and dementia: an individualised musical experience	A professional DVD produced and 15 MP3 players	£714

## All grants awarded this quarter

### Making a difference for patients by supporting future initiatives

If you have been inspired by the range of equipment, research and patient support projects highlighted in this edition of the Grants Bulletin and might be interested in supporting future programmes, please do get in touch with the ACT team.

Whether you have a particular area of interest or would like your contribution to be directed wherever the need is greatest, then the team would be very happy to speak to you about the initiatives that currently need support.

Thank you. You can make a difference.

Grant title and amount awarded	How this benefits patients
<p><b>Characterisation of late outgrowth endothelial progenitor cells from patients with end-stage renal failure and exploration of their potential utility in vascular repair</b></p> <p>Amount awarded: £9,883 (with an additional £4,941 funded by NIHR Cambridge Biomedical Research Centre)</p>	<p>Currently there is no treatment for the chronic rejection of donor organs which can occur following transplantation. This research will investigate the possibility of using a patient's own stem cells (late outgrowth endothelial progenitor cells) to protect against chronic rejection following kidney transplant, and to determine what factors related to the patient or the donor organ are associated with rejection.</p>
<p><b>Real-time analysis pH at endoscopy to inform chemo-preventative strategies in patients with Barrett's oesophagus</b></p> <p>Amount awarded: £22,185</p>	<p>If conclusive, this test could result in patients with Barrett's oesophagus being more promptly and accurately tested with an Endofaster to assess their acid reflux.</p>
<p><b>Quantitative MR imaging in the evaluation of thyroid eye disease</b></p> <p>Amount awarded: £15,000</p>	<p>Thyroid eye disease, a chronic inflammatory autoimmune disease, causes swelling, protrusion of the eyes, discomfort and visual problems. This pilot study will determine whether new imaging methods promise more accuracy in assessing the stage of the disease, the level of tissue damage and potential for improving patient care.</p>
<p><b>Clinical genetics pre-clinic information video</b></p> <p>Amount awarded: £7,728</p>	<p>Patients considering genetic testing will benefit from being able to receive information prior to meeting their specialist.</p>
<p><b>Ultrasound for paediatric vascular access</b></p> <p>Amount awarded: £8,500</p>	<p>Children and babies will benefit from the smoother insertion of intravenous lines.</p>
<p><b>Acorn House and Chestnut House</b></p> <p>Amount awarded: £30,000</p>	<p>Families with children receiving treatment in the hospitals will continue to be able to stay together with this on-site accommodation.</p>
<p><b>Extending provision of coin operated wheelchairs</b></p> <p>Amount awarded: £45,000</p>	<p>Patients with limited mobility will be able to more easily access the Treatment Centre and the Rosie from car park 2.</p>

## All grants awarded this quarter

### Forthcoming grant application deadlines

#### RAC

1 October 2014

(Applications will be processed in the order they are received and submitted to the next meeting which has available capacity).

#### PAC

9 October 2014

(Deadline for applications: 25 September)

#### Grants

5 November 2014

(Please note that applications cannot be made directly to the Grants Committee)

If you work within Addenbrooke's or the Rosie and would like to apply for a grant, please visit: <http://connect/index.cfm?articleid=6074>

Grant title and amount awarded	How this benefits patients
<b>Improving patient experience (extending plasma screen services)</b>  Amount awarded: £23,000	With the extension of this plasma screen service, patients will continue to receive up to date corporate messages and information about clinic-specific items and waiting times.
<b>Trasonic haemodialysis monitor, flowsensor and data transfer module</b>  Amount awarded: £34,584	This equipment helps with early detection of any problems being experienced by patients undergoing dialysis treatment, to ensure they receive timely intervention and helping to prevent hospital admission.
<b>Improvement of garden courtyard for the Lewin Stroke Rehabilitation / R2 ward</b>  Amount awarded: £15,000	Patients recovering from a stroke will be able to use the garden as part of their rehabilitation.
<b>Cancer clinical trials centre</b>  Amount awarded £407,330	Advancement of healthcare for cancer patients including patients at Addenbrooke's Hospital and also across the NHS and internationally.

## How the grants process works

The Grants Committee advises ACT's trustees in setting their grant-making strategy and priorities.

Applications are received by the:

- Research Advisory Committee (RAC), chaired by Dr John Bradley,
- Professional Advisory Committee (PAC) for non-research applications, chaired by Dr Rob Ross Russell.
- Patient amenities fund panel, chaired by Ann-Marie Ingle.

Committee members review each application and make recommendations to the Grants Committee for ratification. All committees meet four times a year.

Some grants are made from designated or restricted funds, where supporters have stipulated how they would like their donations

to be spent. Other grants are made from unrestricted funds, which are vitally important because they give ACT's trustees the flexibility to meet patients' needs as and when they arise across the hospitals.

As unrestricted funds are limited, ACT is striving to encourage more supporters to give unrestricted donations, so more projects like those listed in this bulletin can be funded.

Charitable funding is allocated to projects and initiatives over and above what the NHS would normally finance. It can, however, be used for routine refurbishment or to meet statutory NHS requirements if it can be shown that there is substantial benefit, such as accelerating advances in medical care or increasing the quality of service provision over and above that possible through NHS funding alone.

## Project feedback

At the November 2013 meeting, £10,000 was awarded to raise the profile of volunteering in the hospital.

A selection of marketing materials has subsequently been produced to encourage more people to apply to volunteer, whilst existing ward volunteers have received professional aprons.

Giles Wright, Head of Volunteering at CUH said: "We wanted our volunteers to be

instantly recognisable in the busy clinical environment; an image and identity to match their professionalism. Patients and staff have commented on how good the volunteers look and how helpful it is being able to spot them easily, particularly for patients with dementia."

By October, most of the 550 volunteers will be wearing an ACT sponsored item of uniform.



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