Temple Street celebrates 100th kidney transplant after 12 years of providing national service

Since the Temple Street Foundation was established in 2000, it has raised a staggering €40 million

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I am delighted to present this Spring/Summer 2015 edition of our bi-annual PULSE Magazine which I hope you find is full of news and that you take pleasure in reading.

As you can imagine, Temple Street is very much involved in planning for the new children’s hospital on the St James’s Hospital campus and we greatly welcome that participation. In PULSE you will see the vision for the new hospital to deliver the right care, in the right place at the right time for the children and young people of Ireland.

I am also pleased to share the image of the proposal external design of the new hospital with you, complete with its distinctive oval shape and therapeutic gardens on the roof and surrounding the hospital. We are confident this design delivers on the ambition to build one of the finest children’s hospitals which along with the satellite centres will positively impact the lives of children on the island for generations.

We will of course continue to keep our staff and the families that attend Temple Street updated on each milestone reached in the development of the new children’s hospital so please keep an eye on our website (www.cuh.ie) for those updates.

In the meantime life at Temple Street is as busy and dynamic as ever. We were thrilled to recently have the opportunity to mark the 100th kidney transplant conducted in the hospital after 12 years of providing the National Paediatric Transplant Service. You can read more about this celebration and see pictures of some of the children who received transplants in 2014 and 2015 on page 12 – 13 and most importantly Dr Michael Riordan, Consultant Nephrologist, Temple Street has described the results for the children who have received transplants as outstanding.

We are also marking the launch of the ‘Health and Therapy Needs of Children with Spina Bifida in Ireland’ report and the much needed allocation of additional resources to improve services for children with SB in the HSE 2015 National Service Plan.

These are two of the main developments we would like to share with you in this PULSE but you can also read about the start of the first bilateral simultaneous and sequential cochlear implants operations under the Beaumont and Temple Street cochlear implant programme helping deaf children to hear and communicate. This development is amongst lots of others such as the launch of the Irish Paediatric Acute Transport Service (IPATS) a new critical care ambulance service to transfer seriously ill children between hospitals.

Hand Hygiene of course continues to be top of our agenda and we achieved an 85% compliance following the HSE audit in November 2014 and we are striving for 90% compliance in the May 2015 audit.

Financial update
From a financial perspective, I would like to take this opportunity to close out on 2014 and bring you up to speed on the current outlook for 2015. As many of you will recall, 2014 proved to be an exceptionally challenging year, with increasing costs, reflecting underlying activity and complexity trends, occurring at a time of reducing income and funding streams. Many of you will recall mention of deficits of unprecedented und unsustainable levels arising – and it was thus a significant challenge as the year progressed to maintain activity levels.

To address the situation, management proactively engaged with the HSE on the matter throughout the year and I am pleased to advise this ultimately resulted in a significant positive funding adjustment being received at year end, thereby enabling financial breakeven to be attained. I would like to acknowledge the challenges of 2014 and thank you all for your ongoing support and perseverance, which ensured, that despite the challenging financial environment, service and activity levels for our patients were maintained.

In relation to 2015, the initial funding advised represented a €2m reduction on 2014 levels. When unfunded incremental expenditure is considered, the financial challenge facing the Hospital is slightly higher than this amount. It is clear that it is not possible to further contain costs, without giving rise to potentially unacceptable service or risk considerations. It is on this basis that management has, once again, proactively engaged with the HSE regarding the composition of the 2015 funding and the potential acceptable corrective measures and strategies required. Whilst the situation may change, it is of note that year to date, no finance driven service cuts have been implemented.

Again I hope you enjoy YOUR PULSE Magazine which we endeavor to present to you as a celebration of the best of Temple Street and all we strive to deliver. As always I send thanks to my colleagues across the hospital for their unfailing commitment and dedication to their vital roles as individual staff and team members. I also salute the families and children we are caring for at the moment. The road you are travelling is not an easy one but we are here to care and support you at all times.

Kind Regards

Mona Baker
Chief Executive
For more information visit www.cuh.ie

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Front cover picture
At the launch of the national study which examined access to services for children with Spina Bifida (SB) by Temple Street Children’s University Hospital, were Emily Fitzsimons, aged seven years from Co. Kildare, Lara Bayliss, aged three years from Co. Wicklow and Sean Nelson, aged six years from Co. Kildare.
HELPING DEAF CHILDREN HEAR & TALK

A Cochlear Implant is a highly sophisticated device, which provides access to sound for people with severe to profound hearing loss.

The surgically implanted device, when coupled to an external processor, can provide access to speech and everyday sounds to aid or improve communication abilities.

The National Paediatric Cochlear Implant Programme was established at Beaumont Hospital in 1985 by Dr Laura Viani, Consultant ENT Surgeon as an extension of the adult programme. This service provides for the assessment of children, including those with complex needs, for suitability for a cochlear implant and if children are deemed appropriate then the service can then provide the necessary medical, surgical and post-operative management and rehabilitation.

Cochlear implantation in young children requires a unique combination of technology, skills and long-term child and family support, while the child learns to use the new auditory sensation provided by the implant system. The programme is completely publically funded and includes assessment, hearing aid fittings, surgical intervention, and all post-operative follow up and management.

Up until 2014, Ireland was one of the few countries in Europe that was just offering children one cochlear implant (unilateral) which still offers significant gains in hearing and speech development but cochlear implants in both ears (bilateral) are recognised as the international best standard.

However in late 2013, Minister James Reilly confirmed the Government’s plans for Beaumont Hospital to introduce a new Bilateral Cochlear Implant Programme from mid-2014, in partnership with Temple Street.

In July 2014, the Bilateral Cochlear Implant Programme commenced. This means that children who already had a first cochlear implant and were deemed suitable for a second implant and younger children who were deemed suitable for bilateral simultaneous (at the same time) implants have been having that surgery in Temple Street. Post-operative follow-up and management is delivered in Beaumont Hospital.

Temple Street in partnership with their colleagues in the National Paediatric Cochlear Implant Programme team at Beaumont Hospital is delighted to announce that 25 first bilateral simultaneous and 40 first bilateral sequential (after the first implant) cochlear implants have been conducted in Temple Street since July 2014.

Irish Paediatric Acute Transport Service (IPATS) launched at Temple Street

Minister for Health Leo Varadkar announced the official launch of a new critical-care ambulance service to transfer seriously ill children between hospitals in December 2014, at Temple Street Children’s University Hospital.

This service is known as the Irish Paediatric Acute Transport Service (IPATS) and is part of the National Transport Medicine Programme (NTMP) and commenced on Monday 13th October 2014 on a pilot basis for a period of six months.

IPATS supports the transfer of critically ill infants and children (aged six weeks to 16 years) from the referring hospital to the Paediatric Intensive Care Units (PICU) in Temple Street and Our Lady’s Children’s Hospital Crumlin (OLCHC.) The critically ill child must first be accepted by a Consultant Paediatric Intensivist (Intensive Care Physician) in either hospital and must also be accepted by another specialist service (e.g. Cardiology) as required.

The Service works by sending a clinical retrieval team to hospitals anywhere in Ireland, where they first stabilise the patient if necessary, and then oversee the transfer to Temple Street or OLCHC under close medical supervision.

“Up to now, transferring a child from a regional hospital to a national centre involved a doctor, often a junior doctor, travelling with the child and then back. This wasn’t always ideal for the child, and would also leave the regional hospital understaffed for a period of time,” Minister Varadkar said.

“Now there is a dedicated team of specialists who travel to collect the child, providing expert care for the child from the moment they arrive. The clinical retrieval team usually includes a paediatric doctor and a specialist paediatric nurse, along with specialist equipment. Equally, no hospital is left short-staffed during the transfer period. The neonatal service has already made a big difference to cases involving newborn babies, bringing critical care teams to neonatal patients across Ireland and transferring them between hospitals. I hope we can extend it to adults when resources allow” added Minister Varadkar.

The Paediatric Retrieval Service has dedicated resources in both TSCUH and OLCHC and builds on a hugely successful service for new born babies, the Neonatal Retrieval Service, which transferred 546 seriously ill newborn babies from across Ireland to centres with critical care facilities in its first year of 24/7 operation. The NTMP work in collaboration with the National Ambulance Service to deliver the service.

During this pilot phase of the Paediatric Retrieval Service since October 2014, the team has been operating up to four days per week from 10am to 8pm excluding holidays and weekends but the Service hopes to be able to cover seven days per week in the coming months.
New children’s hospital

Clinical Vision

Deliver the right care in the right place at the right time by the right staff. A network of care with a new children’s hospital at the epicentre will reach out through satellites and regional centres to deliver comprehensive paediatric care for Ireland’s children and young people.

The new hospital will be an exemplary facility that will provide a national hospital for children and young people requiring highly specialist care and treatment. As part of the new model of care for paediatric services, the new hospital is also being created in conjunction with two satellites centres at Tallaght Hospital and Connolly Hospital in Blanchardstown to provide local paediatric care.

Offering no less than 39 paediatric specialties, care in the new hospital will be supported with state-of-the-art equipment, facilities and systems. It will be the national hospital for the island of Ireland catering for children and young people in need of specialist and complex care. It will also be the local children’s hospital for Dublin, Wicklow, Kildare and parts of Meath.

Design Vision

offering protection and a place to recover or to interact with others as they wish.

The design team are creating a world where sick children and young people are made to feel special because healing is an emotional and psychological journey as well as physical. It is our duty to provide for them as best we can.

The design will integrate the children’s hospital with the existing adult hospital and provide for links with the future maternity hospital in an approach that maximises the development potential of the wider site.

The design sets out to facilitate an organisational structure that reflects the Children’s Hospital’s model of care and embodies international best practice in terms of segregation of flows, clinical adjacencies and operational flexibility.

Campus Vision

The campus at St. James’s Hospital provides a unique opportunity to foster supportive and collaborative relationships across the 39 clinical specialities in one place together with research and education facilities to provide the best care possible.

Locating on the campus within St. James’s Hospital is about providing the best care for sick children, especially those most vulnerable who need access to multiple specialities without moving from hospital to hospital. The policy to design paediatric, adult and maternity services on one campus with research and education facilities represents an unprecedented opportunity to create a world class healthcare campus that supports highly specialist healthcare on the Island.

Tri-location offers a clear opportunity for an efficient approach to sharing services that support clinical care in particular. It is an integral part of the project to explore synergies from a sharing, perspective including the energy centre, facilities/materials management, environmental waste management service, central sterile service department, logistics, helipad, medical gas services, water supply services & main public drainage services.

The new hospital will be located in a neighbourhood that includes some of the most popular visitor attractions in the country. The building will offer quality civic space while benefitting from all the amenities that this great city has to offer.
Sharing the vision for the new children’s hospital - Hospital Engagement Sessions

On the 11th & 12th February 2015, the staff of the three children’s hospitals received a visit from the architects and project team responsible for the design of the new children’s hospital.

The purpose of the visit was for staff to meet the Project Team, view the initial design concepts and give their views and feedback on what they saw. The team received a warm welcome from the staff and there was lots of interest in the internal design for the new children’s hospital, the satellites centres at Tallaght and Connolly Hospitals and timings on the project rollout.

The project team plan to visit the hospitals towards the end of April to give a further update on the project. The National Paediatric Hospital Development Board (NPHDB) website will also be launched over the coming weeks and information on this will be shared with you very soon.

Family Forum at Farmleigh

In February 2015 the NPHDB invited parents, guardians and family members to a family forum seminar in the Phoenix Park, Dublin. The purpose of the event was for families to hear about the internal plans of the hospital from the design team BDP, and find out how the project is progressing. Families also got involved in giving their feedback on what they would like to see in the new children’s hospital which will be reviewed and considered by the NPHDB.

The next series of engagement sessions for parents & guardians will be held in Dublin on the 16th April, 29th May and 19th June. Information sessions for staff and users of the service are also taking place in Limerick, Cork and Galway in May. In addition, smaller workshops are being set up with special needs representative bodies to give their expertise on hospital design requirements for children with specific special needs. Contact info@nch.ie for more information.

Delivering Ireland’s new children’s hospital

FROM LEFT: AIMEE O’NEILL (ART THERAPIST TALLAGHT HOSPITAL) WITH BENEDETZ ZUCCHI (ARCHITECT BDP)

working together for our children NCH new children’s hospital
Parents warned of ‘hidden danger’ of children when reversing the car

Following the publication of a report co-authored by Professor Alf Nicholson, Consultant Paediatrician, Temple Street in the Irish Medical Journal in January 2015, Professor Nicholson warned against the ‘hidden danger’ of parents rolling over children in driveways.

Professor Nicholson said that while a change in attitude to road safety has resulted in children being secured safely inside cars, more care needs to be taken in relation to ‘back-overs.’

‘People are more careful than they used to be on the road, but we really want to highlight the tragic accidents that happen in the driveway, where a parent or relative rolls over a child causing them serious injury or death. In these incidents, we found there were more boys than girls affected, and accidents seem to be more common in the evening time and during summer’ said Professor Nicholson.

The report, published in the Irish Medical Journal, features an analysis of figures from the National Paediatric Mortality Database.

It found the majority of pedestrian deaths in children occur between the ages of one and four years old, and revealed road traffic incidents as a leading cause of child deaths worldwide.

Figures show 45 child pedestrians died between 2006-2011. Traffic-related deaths accounted for 58% of the number, with the remainder classed as non-traffic related. Incidents of low-speed vehicle rollovers account for 13 of the deaths, with the majority of these happening in driveways. In most cases, the driver was a family member reversing their car. The average age of children in such accidents was 22 months, with the cause of death due to head injuries.

Prof Nicholson said the death of child pedestrians, particularly in residential driveways, is highly preventable. ‘Appropriate rear view mirror checks are extremely important, but there is the added measure of cars that have sensors. If the car is approaching an object, which could be a child, the sensors will beep and the driver will be alerted,’ he said.

Overall, the study recommended preventative measures should include education of parents and caregivers, the separation of driveways from play areas, particularly on farms, and adequate supervision of children. The authors also mentioned school road safety programmes as an important measure in preventing pedestrian injuries and deaths, citing simple knowledge, such as an appropriate crossing location, has a big impact.

The study noted a lack of cognitive skills, attention and perception skills in young children, who may not fully understand the danger of fast-moving traffic. The increased use of mobile phones could also have a negative impact on children crossing roads, as research suggests they distract them to such a significant degree that they may increase their risk of collision.

However, the study also revealed Ireland has made progress in reducing road-related deaths and injuries in children in recent years.

The number of paediatric pedestrian fatalities fell by 50% between 2004 and 2010 — the decline attributed to changing cultural attitudes to road safety in Ireland.

Calling parents and guardians

Are you interested in being part of the FACTS (Family Advisory Committee Temple Street)?

FACTS is made up of parents, support group advocacy members and staff who meet in Temple Street every two months approximately to advise on and assist with improving the patient and family experience.

Our objectives focus on:
• Providing a forum for service users and staff for creative thinking
• Responding to questions about services and raising issues
• Influencing future paediatric care service planning and development.
• Ensuring involvement in discussions and making recommendations on ways in which improvements can be made to services
• Positively impacting on information provision for parents (e.g. what parents can expect from all levels of staff)
• Ensuring involvement in planning for transition to new children’s hospital

If you are interested in being involved, we would be delighted to hear from you so please email us at FACTS@cuh.ie

United Nations International Yoga Day

YOGA IN THE PARK

in association with Indian Embassy and Yoga Therapy Ireland

St. Anne’s Park, Raheny, Dublin
Sunday, June 21st from 2pm-6pm

Join us for a great day out for all the family!

All proceeds go to Temple Street Children’s University Hospital!

YOGA IN THE PARK

Pioneering craniofacial surgery and care

The craniofacial team, led by Mr Dylan Murray, Consultant Craniofacial, Plastic and Reconstructive Surgeon recently launched a new website which you can visit on www.craniofacial.ie.

The website for parents of children with craniofacial disorders and healthcare professionals involved in the treatment and care of children with craniofacial disorders comprises information on these disorders, the make-up of the craniofacial team, research and development and and how to support the work of this Temple Street team.

CRANIOFACIAL IRELAND

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I am delighted to announce that the ICT programme continues with a number of exciting projects for 2015. Building on the recent launch of the Clinical Portal across the Hospital, the transition to an electronic patient record continues with subsequent phases of Orion and upgrades to our PAS and Theatre Systems. We will also begin migrating all desktops users from Windows XP to Windows 7 over the next 12-24 months.

David Wall
Head of ICT

Clinical Portal

The Clinical Portal was rolled out to the entire hospital on 3rd February, having previously been live in the two sponsor areas of Endocrinology and Neurosurgery since November 2014.

The Clinical Portal is one of the steps on the journey from the current patient chart to an electronic patient record (EPR). The initial phase allows clinical users to log on with their network log in to get access to information currently held on IPiMS, ORMIS, Symphony, iLab and PACs.

Subsequent phases of the project will include:
- Clinical letters
- Shared work lists
- Recording of diagnoses/comorbidities
- Patient pathways
- Electronic forms
- A hospital discharge summary
- Full order communication and results sign off

If you have any queries regarding the Portal please contact Dáirín Hines, Clinical Informatics Manager at dairin.hines@cuh.ie

IPiMS and ORMIS upgrades

On 18th March the Hospital successfully upgraded IPiMS to version 3.2. Thank you very much to the staff who worked so hard over the duration of the project and during the go-live to ensure the smooth transition.

Now the IPiMS upgrade has been completed, the ORMIS upgrade has been initiated. Expected to go live in mid-May, the upgrade should have very little impact on users as no changes in functionality are expected. We appreciate the assistance of all relevant departments who will be involved.

Windows 7

As some of you may be aware the operating system Windows XP is no longer supported by Microsoft. As a result organisations across the world have to upgrade to Windows 7. What does this mean for Temple Street? Essentially all the PCs and laptops in the Hospital need to have their operating system upgraded. In some cases we also have to upgrade applications as well. This is one of the biggest and most challenging projects undertaken by the ICT Department and we ask for your co-operation and patience over the next 12-24 months. If you have any queries on this please contact Angela McLoughlin, ICT Support Manager at angela.mcloughlin@cuh.ie

Keeping our hands clean is the single most important way in which we can prevent children who attend Temple Street getting infection.

In September 2014, Temple Street launched a new campaign called CLEAN HANDS FOR TEMPLE STREET to help us increase hand hygiene compliance, prevent hospital acquired infection and bring us in line with HSE required standards.

The hospital participates in the HSE’s national audit of hand hygiene compliance by clinical staff. These audits are carried out twice a year in May and October. Over the last two years we had seen a decline in compliance with hand hygiene among clinical staff in the hospital, from 77.6% in October 2012 to 62.4% in May 2014.

The drop in compliance had occurred across all staff groupings and led to Temple Street unfortunately having one of the lowest reported compliance for hand hygiene in the country so it was definitely time for action.

The campaign included the placement of posters, stickers, pop up stands throughout the hospital and ‘pop-ups’ on our PCs all promoting CLEAN HANDS FOR TEMPLE STREET and asking the vital question HAVE YOU WASHED YOUR HANDS? Area specific, practical hand hygiene education was delivered by the infection control team and members of staff who participated in a pilot Train the Trainer programme.

The hand hygiene compliance result from our last national hand hygiene audit which was completed on the 30th November 2014 was however an impressive 85.2%. Our hand hygiene compliance target for 2015 is 90%.

Our campaign to promote hand hygiene continues and we would be delighted to hear from any other staff members interested in undertaking the hand hygiene education ‘Train the Trainer’ programme. Please contact infection.control@cuh.ie for more information.

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As detailed in the PULSE Issue 12 (Summer 2014), a national research project was undertaken by a research team in Temple Street to review the health and therapy needs of children with Spina Bifida (SB) in Ireland. This research was kindly funded by the Children’s Fund for Health (CFFH), Temple Street.

Launch of research results
The results of this national SB research were formally presented on Wednesday 3rd September 2014 in the Mansion House, Dublin with various representatives from the HSE, Department of Health (DOH), parents and professionals working with children with SB present on the day.

The day opened with a welcome address by Mr. Muhammed T. Sattar (Consultant Paediatric Neurosurgeon), and was followed by presentations from both the national organization, Spina Bifida Hydrocephalus Ireland (SBHI) and a parent of a child with SB.

Presentations were then given by the research team (Sarah Governey, Senior Occupational Therapist, Eimear Culligan, Senior Physiotherapist and Dr. Jane Leonard, Consultant Paediatrician) on the results and recommendations arising from the study. In the afternoon, there was an education session for parents and professionals with presentations on growth and nutrition, visual difficulties and cognition and psychosocial difficulties from both the researchers and specialists in the field.

The research team would like to thank everyone involved in organising this event to make it such a successful day.

Research methodology
The research comprised questionnaires completed by 247 SB service providers and 155 parents/guardians. There were 51 interviews completed with both groups and a focus group with children with SB. On average 35 children are born with SB in Ireland every year, with an estimated 500 children living with the condition.

Results highlighted that these children have extremely complex needs with 69% of children with SB over three years using a wheelchair, 93% of them over five years requiring continence support and 64% of them having a cerebrospinal fluid shunt to manage hydrocephalus.

Temple Street Children’s University Hospital (TSCUH) provides a service for all children who have had their neonatal surgery performed here and all children born since 2008 when national paediatric neurosurgical centre was established at Temple Street.

International best practice dictates that the care of children with SB should be coordinated by a multidisciplinary team (MDT) to optimise health outcomes and that this MDT clinic should comprise of at least a Spina Bifida Nurse, Neurosurgeon, Paediatrician, Physiotherapist, Occupational Therapist, Urologist and Orthopaedic Surgeon. There is a Spina Bifida MDT clinic currently in Temple Street.

However, at the time of research, there was no Occupational Therapist, Consultant Urologist or Consultant Orthopaedic Surgeon on the SB clinic team and the Physiotherapist and Paediatrician were working to full capacity despite a rapidly growing patient population. Limited resources have dictated that not all children nationally have an equitable service. Children who are not under the care of Temple Street have to access a myriad of services through other children’s hospitals, local hospitals and community services without a coordinated team.

Various recommendations arose from the research including the need for all children with SB to have access to a full MDT for specialist inpatient care and annual SB MDT clinic review.


Service Development
A business case to improve services for Spina Bifida was submitted to the HSE in April 2014. Following the launch of the research results a meeting was arranged with Kathleen Lynch, T.D, Minister of
State at the Department of Health with special responsibility for Primary Care, Social Care (Disabilities & Older People) and Mental Health, and senior HSE and DOH staff.

The HSE Service Plan 2015 has since allocated funding for service development to ‘improve services for paediatric Spina Bifida in the Children’s University Hospital.’ The majority of this funding has been assigned to the multidisciplinary SB clinic to improve the quality of services.

Resources including the new SB Passport© have also been developed to empower children and families to coordinate communication between the various services which they attend.

We would like to thank the Children’s Fund for Health, Temple Street again for their valuable support, without whom this great piece of work would not have been possible.

RESULTS

Other results from this review included:

- Obesity is five times more prevalent in children with SB than in typically developing population
- 50% of school age children with SB suffer low self-esteem, often influenced by continence and weight difficulties and there is limited psychological support
- 55% of children with SB have visual difficulties, 96% require on-going physiotherapy and 87% require ongoing occupational therapy
- 14% of children with SB have a diagnosed intellectual disability
- 89% of school age children access mainstream schooling requiring support for physical and toileting needs
- The average wait time for receipt of vital equipment such as orthotics, wheelchairs and standing frames is six months
- The transition to adulthood and adult services requires earlier and more coordinated planning and the coordination of services for adults with SB also requires development.
**W82GO Healthy Lifestyles Programme**

In May 2014, the W82GO team moved into its new office located in 13 Gardiner Place with help from senior management and the team welcomed several new members funded by the Health Promotion and Improvement Office in the HSE. The new team members included full-time administration support, part-time dietitians, a physiotherapist, and a psychologist and these new members have contributed greatly to reducing the W82GO waiting lists.

**HSE Community Training Programme**

Part of the funding received from the HSE was also used to train community teams so that the W82GO programme could be introduced in several pilot sites across the country. The Temple Street team is currently delivering the training programme which comprises three modules. The community programme will focus on four to seven year old children who will be accessed via the school health check. The Cork and Mayo teams are undergoing the training at present with Laois-Offaly and Dublin 15 on the agenda for 2015.

**ECOG Conference in Salzburg (Austria)**

The European Childhood Obesity Group is a pan-European network dealing with paediatric obesity. A three-day conference was held in Salzburg (Austria) from November 13th to 15th which was attended by four W82GO team members. Dr. Sam Doyle presented a research study on how often children who are obese suffer with pain and moving difficulties and was presented with the silver prize.

**Parent’s Information Session**

In November 2014, the W82GO team held an information session in Temple Street for parents of children under seven years old. As the evening group programme caters for ages seven upwards, this session was developed to support families who are tackling the issue of obesity. During the two-hour session, the W82GO multidisciplinary team outlined some of the key elements involved in the W82GO Healthy Lifestyles Programme with the aim of providing families with helpful information.

Amy Brogan, a Clinical Psychologist in training with Trinity College Dublin, is carrying out her PhD supported by the W82GO Team. Amy’s study aims to:

- investigate children’s understanding of the causes of their weight gain using a network analysis approach.
- investigate parents’ understanding of the causes of their child’s weight gain and contrast this understanding with the children’s network.

**Research**

Congratulations to Dr. Grace O’Malley, Senior Physiotherapist and Director, W82GO who recently completed her HRB Health Professionals PhD. Grace’s research examined a specific area of childhood obesity treatment: integrating mobile health technology into a paediatric obesity service.

Dr. Sam Doyle is currently conducting research looking at the metabolic and emotional health of children who are obese before and after the W82GO programme. The study will also assess the effect of paediatric obesity on emotional health and wellbeing before and after the twelve-month programme.

**NEW DIRECTOR OF NURSING AT TEMPLE STREET**

Gráinne is a Registered Children’s and General Nurse following successful completion of the integrated Temple Street and St Vincent’s University Hospital, Elm Park children’s and general nursing programme. Following qualification, Gráinne was a staff nurse in the Paediatric Intensive Care Unit (PICU) in Temple Street and later became Ward Manager there following a two and a half year period working in Boston, USA.

Gráinne also worked in Tallaght Hospital. Gráinne then returned to Temple Street where she worked as a Night Sister and later as Assistant Director of Nursing with responsibility for the Emergency Department (ED) as well as the introduction of the new one-year post registration student programme.

From 2010 to January 2015, Gráinne has been the Divisional Nurse Manager of the Critical Care Division at Temple Street.

Gráinne holds a Diploma in Nursing Management (RCSI); Bachelor of Business in Human Resource Management (NCI); and a MSc in Leadership and Management Development (Hons) (RCSI).

She has recently taken up her new role as Director of Nursing, and is responsible for the nursing staff and Health Care Assistants who provide high quality nursing care. She has a strong interest in service user engagement and involving parents in the planning and decision making around the provision of care. She has a keen interest in information technology as a tool to assist nursing staff.

Ms. Gráinne Bauer was appointed as the new Director of Nursing at Temple Street in February 2015.

**TALLAGHT**

Gráinne is a Registered Children’s and General Nurse following successful completion of the integrated Temple Street and St Vincent’s University Hospital, Elm Park children’s and general nursing programme. Following qualification, Gráinne was a staff nurse in the Paediatric Intensive Care Unit (PICU) in Temple Street and later became Ward Manager there following a two and a half year period working in Boston, USA.

Gráinne also worked in Tallaght Hospital. Gráinne then returned to Temple Street where she worked as a Night Sister and later as Assistant Director of Nursing with responsibility for the Emergency Department (ED) as well as the introduction of the new one-year post registration student programme.

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Supported by the Community Foundation for Ireland, the National Concert Hall (NCH) brings classical music into the three national children’s hospitals, including Temple Street every month for light-hearted workshops about composers and musical instruments, as well as up-close-and personal live performances at patient bed-sides.

Emergency Department (ED) Construction Project

The extension and refurbishment of the ED commence on the week of the 23rd of February 2015 and when completed the development will provide:
- An increased waiting area
- A new reception relocated adjacent to the waiting area
- An additional two bay RATU (Rapid Access Treatment Unit)
- Two additional single clinical treatment rooms on the rear corridor
- An extended triage area
- A centralised storage of major disaster equipment
- Relocation of office space within the ED
- A courtyard.

Phase 1 of the Project involves the construction of additional footprint into the courtyard. This phase of the works are targeted for completion in the second quarter of 2015 with the refurbishment of the existing areas to follow.

5th Annual Nursing Research Conference

The 5th Annual Nursing Research conference titled ‘Scaling New Heights: Building Research Capacity to Improve Children’s Health’ was held on Thursday 5th March 2015 in St. George’s Hall, Temple Street.

Proceedings opened with an address by Ms. Suzanne Dempsey, Director of Nursing, Children’s Hospital Group. A total of 10 interesting and informative presentations that showcased a broad range of projects completed by Temple Street nurses and by our colleagues in OLHSC were then delivered.

The keynote speaker, Dr Joan Simons, Faculty of Health and Social Care, Open University, Milton Keynes delivered a very timely presentation on ‘The impact of the hospital environment on children, families & staff.’ The presentation was based on consultations with staff, children, young people and parents at Alder Hey Children’s Hospital on their opinions of having a view of nature from each bed space at their new children’s hospital.

The conference also heard from our colleagues in UCD, TCD and DCU. Dr. Maria Brenner, UCD and Ms Carol Hilliard, OLHSC, delivered a presentation titled ‘Engaging in research in clinical practice: Expectations versus Reality’ while Dr. Siobhan McDermott, DCU, presented her doctoral thesis titled ‘Merging the person and the illness. The lived experience of emerging adults with childhood onset chronic illness.’

Overall, the conference was an enormous success with over 70 attendees. The conference gave rise to lively discussions and facilitated an exchange of ideas among participants.

The Nursing Research Committee would like to thank everyone who supported, participated and attended our conference. In particular, we would like to express our appreciation for the support and contribution provided by Ms. Suzanne Dempsey. The committee also wishes to congratulate Ms. Colleen O’Neill, DCU who was awarded first prize for her poster presentation titled ‘Adolescents’ embodied experiences of living with chronic kidney disease.’
One of the country’s leading Consultant Paediatric Nephrologists has described the results of the transplants as ‘outstanding’. The youngest recipient of a new kidney is only two years old and the oldest is 17 years of age.

In addition to running the National Paediatric Transplantation Service, Temple Street is also the National Paediatric Haemodialysis Centre. Children from all over the country attend this hospital for dialysis three times a week for periods from six months to five years whilst waiting for a donor kidney.

Speaking about the number of kidney transplants conducted over the last 12 years, Dr Michael Riordan, Consultant Paediatric Nephrologist, Temple Street said: “When a child’s kidneys fail or when they are born without normal kidney function, it is devastating for them and kidney transplantation can be a means to regain a normal life without the rigorous routine of dialysis.”

“2014 was the busiest year for transplantation in the 12 year history of the National Paediatric Transplantation Programme at Temple Street”

Also speaking about reaching and exceeding the 100th kidney transplant at the Hospital, Dr Atif Awan, Consultant Paediatric Nephrologist, Temple Street, said: “The numbers of transplants are increasing because of the ever increasing number of generous people who carry organ donor cards. Each time we receive a kidney we are mindful of the organ donor and their family and we are aware of the difficult decision a donor family has had to make, at a most distressing time, but we see the hugely positive impact this decision has on the lives of our patients.”

“Increase in organ donations make transplants possible – call for more people to carry Organ Donor Cards”

Temple Street is continuing to encourage people to carry an organ donor card and to discuss their wishes with family when all is well. Notwithstanding the sometimes tragic circumstances that can surround discussions about organ donation, giving the gift of life is the greatest possible act of generosity and many families and individuals take considerable comfort in the knowledge that they, and their loved one, have transformed the lives of others for the better.

The Temple Street National Paediatric Transplantation Programme thanks all the generous families who have donated kidneys to the children we have cared for over the last twelve years. The programme also acknowledges the support and partnership of the Beaumont Hospital transplant team, the National Organ Procurement Programme, the National Renal Office; and the Health Service Executive with a special acknowledgement to Mr David Hickey, Consultant Transplant Surgeon, Beaumont Hospital who retired in early 2015, and who played a vital role in the success of the Temple Street transplantation programme since its inception.
GIVE THE GIFT OF LIFE

Organ donor cards can be requested from the Irish Kidney Association (IKA) in any of the following ways:

- Freetext DONOR to 50050
- Request your card online at www.ika.ie/card
- Lo call 1890 543 639
- By post to: FREEPOST, Donor House, Irish Kidney Association, Park West, Dublin 12
- Alternatively you can collect an organ donor card at your local pharmacy, doctor’s surgery, Citizens’ Information Centre.
- You can also sign the back of your driving licence to indicate your wishes or when applying for a new licence you can select to have the code 115 added to the back of your licence showing you are a willing organ donor.

Kate Burke aged four years with her mum Runagh, from Claremorris, Co. Mayo

Joshua O’Halloran, Luke Concannon, Salem Alhag and Courtney Kealy - all recipients of kidney transplants at Temple Street

Luke Concannon, Courtney Kealy and Salam Alhag with Mona Baker, CEO and Lisa Edwards, Clinical Nurse Manager, Temple Street

Joshua O’Halloran aged 16 years from Portumna, Co. Galway with his parents Oliva and Francis

Salem Alhag aged 12 years (the 100th transplant recipient) with his mother Marwa

The 1st transplant recipient at Temple Street - 17 year old Courtney Kealy from Slane, Co. Meath

Luke Concannon aged nine years from Lucan, Co. Dublin

Luke Concannon aged nine years from Lucan, Co. Dublin

Luke Concannon aged nine years from Lucan, Co. Dublin
Nurses Graduation 2015

Friday 27th March 2015 marked the graduation ceremony for the 2010 BSc in Children’s and General Nursing (Integrated) and the 2013 Post Registration, Higher Diploma in Children’s Nursing groups.

Twenty eight students successfully graduated from the BSc programme and were awarded their hospital medals from Temple Street Children’s University Hospital, the Mater Misericordiae Hospital, Connolly Hospital and Beaumont Hospital. A further twenty seven students graduated from the Higher Diploma class and were also presented with the Temple Street medal on the day.

Professor Alf Nicholson kindly gave a very informative and fitting key note speech to the graduates. Our new Director of Nursing, Ms. Grainne Bauer provided the audience with a very moving account of what it means to be a nurse.

Ms Niamh Watkins was awarded Preceptor of the Year 2015. Niamh was chosen by the graduates for her outstanding contribution to student nurse education.

The Department of Nurse Education would like extend their gratitude to the chaplaincy department, especially Carmel and Anita and Fr. Neary. We would also like to thank John Doyle and his team for all their help and assistance in making the day a success.

It has long been the tradition in Temple Street Children’s University Hospital, that a student is awarded a hospital gold medal in recognition of their outstanding contribution throughout their course both clinically and academically.

This year, Ms. Deborah Keogh was chosen to receive this prestigious award from the undergraduate group and Ms. Aileen O’Callaghan from the Higher Diploma group. Throughout their training these nurses showed, great enthusiasm and dedication. They were both truly deserving recipients. We wish all our graduates every success in their future careers.
Today’s Research, Tomorrow’s Treatment

(€3.3million invested since 2000)

On top of equipment purchases, hospital redevelopment, and patient and parental support, research remains a key priority in Temple Street with many research projects being funded on an annual basis.

The Fundraising Office was set up in 2000 with the sole purpose of raising funds to make Temple Street a better place. Since it was established it has raised more than €40million for the hospital, with €32million already invested. This amazing achievement is all thanks to our wonderful army of supporters, fundraisers, ambassadors and network of volunteers. These people work tirelessly to ensure that our little patients get the care and treatment they deserve.

Here is a snapshot of some of the amazing transformations that have been made possible thanks to fundraised money...

Creating a Caring Environment
(€11.5million invested since 2000)

- The redevelopment of St. Joseph’s Ward (Top Flat) - €1.65million
- The redevelopment of Surgical Flat (including equipment) - €1million
- Neurosurgery Equipment - €2million
- The redevelopment of St. Michael’s C Ward into a designated space for children with kidney problems - €1.25million
- The redevelopment of Intensive Care Unit - €2.5million
- The redevelopment of St. Michael’s B Ward - €1.5million
- New Cystic Fibrosis and Respiratory Outpatient Unit - €3.1million
- Multi-Sensory Room (110k) and Garden (€40k)

Life-Saving Equipment
(€13.4million invested since 2000)

- MRI Scanner - €2million
- CT Scanner - €1.3million
- Tandem Mass Spectrometer - €500k
- Patient Entertainment System (Top Flat) - €160k
- Neurosurgery Equipment (SonoWand invite, Stealth Station, OPMI Pentero) - €2million

Patient and Parental Support
(€2.9million invested since 2000)

- Pet Therapy - €5k annually
- Sibling Clubs - €4k annually
- Bereavement Counselling - €13k annually
- Home Away from Home, Fontenoy Street - €1 million

The Fundraising Office will be holding a special Information Day in the Back Parlour on Thursday 18th June from 10am - 2pm. Prizes and giveaways galore. All welcome.

To find out more about Fundraising and the amazing ways in which you can help our little patients and families please visit www.templestreet.ie
HOW YOU CAN HELP TEMPLE STREET

WHO CAN GET INVOLVED

INDIVIDUALS

FAMILIES

COMMUNITIES

SCHOOLS

CRÈCHES

HOW TO HELP

FUNDRAISE

GET FIT!

GET BAKING!

TRICK OR TREAT!

CHRISTMAS RAFFLE

CREATE YOUR OWN EVENT

For a full list of running, cycling and swimming events see templestreet.ie

Bake a difference and take part in our annual Great Irish Bake

Host a party and help sick kids at Halloween

Get festive and raise funds by selling raffle tickets at Christmas

There are hundreds of different ways you can raise money for Temple Street. The trick is to do something that you will enjoy!

DONATE (see back page for info)

BY PHONE

BY POST

ONLINE

IN PERSON

VOLUNTEER

Volunteers are at the heart of what we do. Whether you help Temple Street at annual collections, offer office administration support or give your time at events; we are always looking for people throughout the year to lend a hand!

For more information on how you can help visit www.templestreet.ie