

# Useful information on your stay in hospital

Welcome to Imperial College Healthcare NHS Trust. We provide emergency and specialist care to over one million people a year through our five hospitals in central and west London – Charing Cross, Hammersmith, Queen Charlotte's & Chelsea, St Mary's and the Western Eye.

We want to provide you with the very best care and help you to be as healthy as possible. To do that, it's important that you know what to expect and that we know what matters to you.

We can work with you to make sure you have a comfortable and safe stay and get home, or on to the next stage of your care, without any delays.



## Talk to us

If you need any help at any time, please do not hesitate to ask a member of staff and, if you can, please let us know what worked well and how we can do better.

## This leaflet will cover:

- Your care
- Your stay in hospital (wards, food, Wi-Fi, where to go, exercise)
- Coronavirus and infection control
- Keeping in touch
- Planning for leaving hospital
- How to get involved with the trust

## Your care

A consultant will lead your care, with their team of doctors or surgeons. Your care may also need input from specialist clinicians working in other teams. The ward manager or the nurse or doctor looking after you can answer any questions you may have or direct you to the right person.

Speak to a member of staff if you have medicine you take regularly and need to bring onto the ward, or if you have any specific needs. They are there to help you with your recovery and will support you in any way that they can.

### Our clinical teams

Each ward has a manager who oversees the clinical teams working in the unit. Our staff work as part of 'multidisciplinary teams', these are teams of people from different areas of medicine. This could include nurses, midwives, doctors, surgeons, physiotherapists, occupational therapists, speech and

language therapists, dietitians, healthcare assistants, pharmacists, radiographers, trainees, students and many others.

You should expect your ward staff to introduce themselves. The team will include:

- your named nurse — the nurse responsible for your care on a specific shift
- a ward manager — a sister or charge nurse or, sometimes, a matron
- healthcare assistants
- a ward host – a non-clinical member of staff who is responsible for the distribution of menus, food and drinks.

There are four key questions that we need to make sure you always have the answers to:

1. why am I in hospital?
2. what's happening today? (For example, 'I'm having a scan' or 'I'm going to be reviewed by an occupational therapist')
3. when am I leaving hospital?
4. what needs to happen before I can leave hospital?

If you don't know the answer to any of these questions, please ask a doctor at the ward round or a nurse on your ward.

The care plan for each patient is reviewed daily by a multidisciplinary team. They review your treatment and progress and make decisions about your care to help your recovery and get you home.

When you no longer need acute or specialist treatment, you are considered to be 'medically fit' and you are ready to leave hospital; this is known as being 'discharged'. You may still need considerable rehabilitation or daily support, but this will generally be better provided at home or in a community hospital, nursing or care home. When you're admitted to hospital, you'll be given an 'anticipated date of discharge', the date you'll likely be able to leave hospital. This will be reviewed daily.

### **Being moved to another hospital**

Some specialist services are only available at one of our hospitals and so, if you need that specialist care, you may need to be transferred from one of our five hospitals to another one.

We are also using our hospitals as flexibly as possible to cope with the additional demand we have. You may be moved to a different ward, sometimes at a different hospital, if your needs change or where we have more beds available.

We're also working even more closely with other NHS hospitals to ensure we continue to provide as much care as we can, as safely as possible. This means that you may be transferred to a hospital run by another NHS trust in London for specialist treatment or to continue your recovery. For example, to enable us to provide more intensive and urgent and emergency care, we have temporarily transferred some of our planned surgery and treatment to trusts that do not have large urgent and emergency care services, or to private hospitals. Before the move this should be explained to you, but feel free to ask about this at any time before, during, or after a transfer.

## **Your stay in hospital:**

### **Wards**

You will be in a bay on a ward or possibly a side room. We aim to provide patients with same-sex

accommodation. However, at very busy times, some of our wards have had to become mixed-sex, although we always try to keep individual bays as same-sex and ensure privacy at all times. The decision to change some wards to mixed-sex wards has been carefully considered – patient and staff safety remains our priority at all times.

### **Eating and drinking**

Eating well and drinking enough will help you stay as well as possible and to feel better more quickly. Please tell the ward staff if you are ever hungry or thirsty.

You will be given a wipe for your hands with every meal, or please wash your hands if you'd prefer. If you need help getting to the bathroom to wash your hands before eating, please let us know.

### **Food choices**

Medications may change the taste of food or make you feel nauseated (sick), or you may find it difficult to swallow. If you don't have much of an appetite, try eating little and often and, if you miss a meal, we will order a replacement for you.

Our standard menu has a range of choices, including at least one vegetarian option. You should have a menu at your bedside and, each morning, the ward host will ask you which meals you would like for that day.

You can also ask for special menus:

- for cultural needs, such as halal or kosher
- for specific dietary needs, such as gluten free
- with large print.

The ward host can also help answer any questions about the menu.

Your health condition or treatment may also affect what you can eat and drink. One of the multidisciplinary team members will explain to you what you can and can't eat/drink and why. One of our dietitians may also come to talk to you about your diet in hospital and when you are home.

### **Drinks and snacks**

A range of drinks and snacks are available between meals and before bed. Drinks include hot drinks such as tea and coffee, and cold drinks such as milk and squash. Snacks include biscuits, cakes, fresh fruit, cheese, crackers and yoghurt.

If you are not eating and drinking much, nursing staff can make build-up milkshakes and soups (called Meritene®) for you.

### **Hydration**

We will ensure that you always have fresh drinking water at your bedside. If you run out of water, please ask the ward host or your nurse for more.

We will offer you seven hot drinks as well as cold drinks throughout the day. If you need more, please ask.

### **Help with eating and drinking**

We will give you notice that mealtime service is beginning in case there's anything you need to do before your meal. Please let a member of staff know if you need help with going to the bathroom.

We can also help you with your meal, for example, by opening any packaging and supporting you to eat. We use red trays to let staff know if someone needs help with eating or that the amount of food they eat needs to be recorded. You can ask for a red tray or for help with eating at any time.

If possible, try to sit out of bed and in a chair for all your meals as this helps improve digestion. Please tell us if you need help getting out of bed.

Please let us know if you usually receive help from a carer at mealtimes, so we can help you with your meals.

### **Staying active**

Getting up and moving is important. It helps maintain muscle strength and fitness, and for you to remain as independent as possible. It also helps with your breathing by allowing you to use more of your lung capacity. If you feel strong enough, and you feel able to, you should try to stand up and walk. Speak to a member of staff if you need help or aren't sure what it's OK for you to do.

If you do not feel strong enough to walk, lots of patients find it useful to do exercises in your chair or bed – even five minutes a day can make a difference. If you would like more information on the chair or bed exercises, breathing exercises, or permission to walk around the ward, speak to a nurse.

We are here to help get you moving safely and doing the things you usually do. We will do this by:

1. looking at what you were able to do before you came into hospital to make sure we understand how best to support and encourage you to keep moving. This includes assessing your risk of falling to ensure prevention plans are put in place
2. completing a full assessment with you so that we know how you normally get about
3. reviewing if there is anything that might stop you from being able to get out of bed
4. providing you with walking aids where necessary.

### **Simple ways to stay active**

There are some simple things that you can do to help you be as active as possible during your stay:

- if you feel able to, try to do the things you usually do at home, such as bathing
- if you need glasses or hearing aids, make sure you know where they are and if you don't, speak to your ward team
- if possible, do simple leg and ankle exercises – you can do these from your bed or chair
- if possible, sit out of bed for meals
- if possible, walk around the ward when safe to do so or to use the bathroom and toilet. Use your usual walking aids or let us know if you need help.
- keep changing your position even if you are in a bed or chair.

### **Getting a good night's sleep**

Sleep and rest help your healing and recovery. Being in hospital can make sleeping difficult because of different noises and interruptions disturbing you at night.

### **Reducing noise and light at night**

We will make sure we play our part at night by lowering the ward lights and limiting unwanted sounds such as telephones and monitor alarms, talking quietly and only disturbing you if it's necessary.

To reduce noise on the ward during the night, we also ask you to please:

- talk quietly and be mindful of others who are trying to sleep
- switch your mobile phone to silent

- make or receive any calls away from the bedside if possible, or speak quietly
- use headphones if you're listening to music or watching a film
- use the call bell if you need to speak to staff, for example, for help going to the toilet or to get something from your locker.

### **Encouraging sleep**

There are some simple things you can do to make sure you get a good night's sleep:

- avoid drinks that contain caffeine — caffeine is a stimulant so will be more likely to keep you awake; we have decaffeinated coffee, Horlicks® and hot chocolate available; milky drinks also help with sleep and relaxation
- use the toilet before you settle down for the night
- make sure you are comfortable – ask for help if you need it or, if you're cold, ask for an extra blanket. Also, please let us know if you are in pain so we can let you know your options for pain relief.
- Some patients find it useful to relax before going to sleep. For example, doing some deep breathing and listening to your breath, listening to soothing music or white noise, reading a book that you find relaxing.

If you can't get your mind off your worries, it could help to make a list of these and identify how you can address them. For example, you can ask your doctor about a symptom or speak to a friend or family member. Tell yourself you will do this the following day. Even just writing it down can be really helpful for some people.

Please talk to us if you have any worries or concerns that are keeping you awake. If you need more support, we can arrange it for you so please don't be afraid to ask.

### **Looking after your emotional wellbeing**

Serious illnesses can be distressing for patients and for their friends and relatives. Understanding the normal responses to a stressful experience could help make sense of what you are going through. This may be during the illness or in the days, weeks or even months after.

Some of the normal physical and emotional responses might include:

- feeling vulnerable, emotional, or on edge
- intrusive thoughts or flashbacks
- disrupted sleep
- avoiding things that you previously enjoyed
- loss of appetite or 'comfort eating'
- headaches or muscular tension.

While we each manage things in our own way, there are some things that most people find helpful:

1. talk about what has happened – you are less likely to experience lasting effects if you can talk about what has happened. If you don't feel like you have a friend or family member you could talk to, there are phonedines and listening services listed below.
  - Samaritans. To talk about anything that is upsetting, you can contact [Samaritans](#) 24 hours a day, 365 days a year. You can call 116 123 (free from any phone). You can also call the Samaritans Welsh Language Line on 0808 164 0123 (7pm–11pm every day).

- SANEline. If you're experiencing a mental health problem or supporting someone else, you can call [SANEline](https://www.saneline.org.uk) on 0300 304 7000 (4.30pm–10.30pm every day).
  - Campaign Against Living Miserably (CALM). You can call the [CALM](https://www.calm.org.uk) on 0800 58 58 58 (5pm–midnight every day) if you are struggling and need to talk.
  - Shout. If you would prefer not to talk but want some mental health support, you could text SHOUT to 85258. [Shout](https://www.shout247.com) offers a confidential 24/7 text service providing support if you are in crisis and need immediate help.
  - For tips on supporting mental well-being as well as links to NHS approved sites, visit Every Mind Matters via: <https://www.nhs.uk/oneyou>
2. spend time with people you trust – please see the guidance on visitors below or ask us.
  3. be gentle with yourself – it can take time to recover and adjust
  4. take care of yourself – scientific research has shown the impact that some simple things can have on improving your mental health. Try to get enough sleep and eat well, and avoid drugs and alcohol, they can numb feelings but may prevent you coming to terms with what has happened.

## Coronavirus and infection control

We will continue to follow government guidance on Covid-19, the latest of which can be found here <https://www.gov.uk/coronavirus>

- Patients, visitors and staff are no longer required to wear a face mask in non-clinical areas and in the majority of clinical areas. However, patients and visitors may be asked to wear a mask in areas where we are treating our most vulnerable patients. Whilst you no longer need to wear a mask, we recognise some people will feel more comfortable doing so. If you would like to wear a mask, please do so.
- You do not need to book a visiting time but please check visiting hours for the specific ward or unit. In some circumstances, if you are visiting someone who has an infection – or who is especially vulnerable to infection – a member of staff may ask you to wear a face mask and, in some cases, other personal protective equipment. [Find out more about visiting](#)

As always, for anyone coming into our hospitals:

- do not come if you have any symptoms of respiratory illnesses such as flu or Covid-19 (unless emergency attention is needed)
- use hand sanitiser or wash your hands as you enter the hospital and when entering or leaving any department
- follow any local infection prevention and control measures, as advised by staff.

### Hospital acquired infections

There are many other infections that you can get while in hospital, but many can be avoided with good hygiene practice. Please follow any advice given to you by your clinical team to reduce the risk of getting an infection. You will be given a wipe for your hands with every meal, or please wash your hands if you'd prefer. If you need help getting to the bathroom, please let us know.

## Keeping in touch

We can help you stay in touch with relatives if you're unable to, please ask a member of staff.

## Visitors

We recognise the valuable contribution that visiting makes to the care and wellbeing of our patients. That's why we are pleased to return to our pre-pandemic approach to visiting. We may need to restrict visiting again, for example if there's a Covid-19 or norovirus outbreak.

In keeping with our pre-pandemic approach to visiting, we ask that visitors keep the following in mind:

- if you feel unwell – particularly if you have symptoms of Covid-19 – please do not come to hospital
- we may need to restrict visiting in certain areas from time to time to help prevent the spread of infections or illnesses and we appreciate your understanding in these circumstances

People staying overnight on one of our wards can have up to two visitors at their bedside at any one time during visiting hours and a visit does not need to be booked in advance. Please make sure you check ward visiting hours before travelling to hospital.

## Visiting someone who is at the end of their life

When patients are at the end of their life, it is important to have loved ones around them. In addition to the usual two visitors allowed at the patient's bedside, the ward team can support additional visitors for a patient at the end of their life. Speak to the nurse in charge on the ward for more information.

## Personal items drop off

Your family and/or friends can drop off personal items to help make your stay in hospital more comfortable. Items or packages should be clearly labelled with your name and ward and can be dropped off at the following times: Monday through Friday, 11.00 to 13.00.

There are three drop-off points across our three main hospital sites, as follows:

- Charing Cross Hospital at the Patient Advice and Liaison Service (PALS) office in the main entrance lobby on the ground floor
- Hammersmith Hospital at the Patient Advice and Liaison Service (PALS) office in the south corridor of B block
- St Mary's Hospital at the Patient Advice and Liaison Service (PALS) office on the ground floor of the Queen Elizabeth Queen Mother (QEQM) building

We also have a selection of food, drink and home comforts available to buy online for delivery to you on the ward. Speak to your ward staff about how to do this

## Letters from family and friends

Our patient experience team is accepting messages for patients. Your friends and family are welcome to email letters to [imperial.patient.experience@nhs.net](mailto:imperial.patient.experience@nhs.net) – they should clearly label emails with the patient's name and ward. The front of house team will get the messages to the wards. This service operates Monday to Friday between the hours of 9.00 and 16.30. Please note that the mailbox is closed during bank holidays.

## Virtual visiting

To make it easier for patients to keep in touch with family and friends, we currently provide a premium NHS Wi-Fi service to allow for video calls and entertainment streaming services free of charge. This has been funded by our dedicated charity, Imperial Health Charity. To connect to the network, search for 'NHS Wi-Fi' on your mobile phone or laptop device and sign up.

## Planning to leave hospital

When you no longer need treatment at our hospital, your discharge plan will be put in place so you can go home. You may still need considerable rehabilitation or support to help with daily living, but this will generally be better provided at home or possibly in a community hospital, nursing home or care home.

Most people can return home, sometimes with a care package or adaptations made to their home, such as handrails and a key safe. However, some patients cannot return home immediately and may need a period of rehabilitation in a community rehabilitation unit or an assessment of their longer-term care needs in an interim unit. We aim to discharge people back to their home wherever possible.

With your permission, we will assess your needs and contact services you might need support from once you leave hospital. The assessments could be for social care, home assessment for any adaptations or eligibility for NHS continuing healthcare. We will explain your care needs, how we assess them and discuss the care options available to you.

**Please let us know as soon as you can if your home is unsafe for you to go back to – for example if it's damp, dangerous, or a risk to your health, or if you think you need support at home. If you feel that you need to have some privacy to tell us about this, please let us know.**

Please read the questions below, and if any of them raise concerns for you please tell a member of staff as soon as possible, so we can discuss care arrangements:

- do you have stairs in your home? If so, can you easily use them?
- will you be able to manage the journey from, for example, the bedroom to the toilet or from the kitchen to the living room?
- will you be able to get in and out of bed?
- is there a safe way for you to wash while you recover at home? Will you need some help with this?
- will you be able to dress yourself?
- will you need help with your medication when at home?
- are you registered with a GP?
- do you care for someone you live with? If so, will you still be able to care for them?
- when will you be able to go back to work? Talk to your hospital doctor about when you can return to work. If you need a medical certificate, the doctor looking after you will be able to arrange this for you

If possible, ask your family or friends to help make it easier to go back home by, for example, bringing in clothes and shoes for you, putting the heating on, if needed, and making sure you have enough money for the first few days. It is also important that, where possible, someone can support you on the day you go home.

Below it explains how we prepare for you to get ready to leave. You can also watch our animated video which explains the process here: [www.imperial.nhs.uk/afteryourstay](http://www.imperial.nhs.uk/afteryourstay)

### Getting ready to leave hospital

We will tell you when your treatment is due to end and when you would be considered well enough to leave hospital. This is called an estimated discharge date. We aim to tell you this within 48 hours of



you being admitted and, if this changes, we will discuss this with you.

Please make sure you have arranged how you will get home. If you have a physical disability, then we can arrange transport for you. If you need support getting home then we can contact the British Red Cross or social services for you, and someone can help.

Please make sure you ask us for any medical certificates you may need, for example, if you need time off work to recover, before your day of discharge.

### **On the day you leave hospital**

We try to discharge people from hospital in the morning, before midday. This means you have the best part of the day to settle into the next stage of your recovery. It also means that we make best use of our beds by ensuring they are ready for new patients.

You may be discharged into one of our discharge lounges, these are lounge rooms in the hospital where you can wait for your relatives to pick you up or your transport to arrive.

There are a few things staff at the hospital need to do on the day you're discharged:

1. make sure you have a copy of your on-going care plan, if you need one. If you are being discharged to a nursing home or care home, we will also give them a copy of the plan
2. ensure you have all the equipment you need and know how to use it. If you need on-going supplies, you should know where to get them and who to contact if you need help
3. give you any medication you need and make sure you know how and when to take it. You will receive at least two weeks supply of any new medication; your GP will be able to give you prescriptions for further supplies of medication
4. give you a copy of your 'discharge summary' and send one to your GP electronically. Your discharge summary describes the care you've had with us, the results of any tests and any medication you have been prescribed.
5. You should also know who to contact once you get home if you have any urgent questions or concerns. If you're not sure, then phone the ward that discharged you.

### **Will I get help at home?**

If you need help to recover at home, your doctor or nurse will talk to you about this. If you aren't sure or have any concerns, please ask them. Some support you might be offered could include:

- Monitoring at home. This is where we use technology to allow staff in hospital to check how you're doing, for example your blood pressure, while you're at home
- Rehabilitation or social care. You may be offered some rehabilitation sessions to help get you strong again, or regular visits from a home care worker, if required, to help build your confidence in doing things for yourself

### **The British Red Cross**

The British Red Cross offer a service to support vulnerable people when they leave hospital. They provide a range of services including shopping, collecting prescriptions, befriending and signposting. Please tell a member of ward staff if you think this service would help you.

### **Social care and community health support at home**

Ward staff or the discharge team (who advise and support ward staff to plan your care after you leave hospital) will work with social services or local community health services to help put arrangements in place for when you leave hospital.

If you need support from district nurses, therapists or specialist diabetic teams at home you will need to be registered with a GP.

### **What should I do if I'm at home and need guidance?**

If you are at home and don't know what you need to do to get better, or you aren't sure what the next steps are in your recovery plan, please contact us. Phone the ward that discharged you for more information.

If you're at home and have issues with your social care support, please contact your local social services department. If you don't know who this is, your council's website will have a page called Adult Social Care that should include who to contact.

After leaving hospital, you may find that you feel down or low at times or have upsetting memories or thoughts about your hospital stay. It is normal to have emotional concerns. Remind yourself of any coping strategies you have used during difficult times in the past. It can help to talk to someone you trust about these feelings. It might also be helpful to tell your GP or healthcare team about any difficulties you are experiencing.

### **What happens if I'm not well enough to return home?**

We will provide those patients who are moving into a care or nursing home after leaving hospital with information about the next stage of their care. We can support you to share this information with your relatives via email.

### **Discharge to a community hospital**

Following assessment, you may be moved from one of our hospitals to a community hospital. Community hospitals are focused on helping people who no longer need acute or specialist healthcare but who still need full-time care to continue their recovery or rehabilitation. This is sometimes called 'step down' care.

### **Discharge to a care home**

If we think you need on-going care in a care home, we can talk to you about why this is the case, as well as possible next steps. You will be allocated the most appropriate care home to meet your needs, of those that are available. There may be limited choice regarding what care home you are discharged to, but, where there is a choice, we'll ask you which one you'd prefer. If you'd like to consider a privately funded care home, you can contact the Care Home Select Service [www.carehomeselection.co.uk](http://www.carehomeselection.co.uk).

### **Funding ongoing care**

It may also be necessary to assess how any ongoing care will be funded although, in most circumstances, this will be carried out after you have been discharged so there are no delays in leaving hospital. It is important to note that whilst NHS care is free to everyone, social care is not. Please speak with your named staff member to find out what this might mean for you.

## **Extra help and services you may need**

### **Carers**

We recognise the importance of working in partnership with carers so that they receive the support they need to help you. Speak to the nurse in charge if you have a carer or if you are a carer.

## **Dementia support**

Being in hospital can be difficult for patients with dementia and so we have a dedicated dementia team made up of five specialist nurses who provide additional support, advice, information and bespoke nutritional support for people with dementia and their families.

Anyone can refer an inpatient to the dementia team, including carers, family members or patients themselves. The team is available from 09.00 to 17.00 to provide information, support and advice about the care of people with dementia in our hospitals. Call 079 9054 0358 or email

[imperial.dementia@nhs.net](mailto:imperial.dementia@nhs.net)

## **Interpreting and sign language**

If you need an interpreter during your stay, please ask a member of staff on the ward and tell them which language and dialect you need. A video call or telephone interpreter can then be arranged for you.

## **Patients who have learning disabilities**

We advise all patients with learning disabilities to bring a carer on the day of your admission to help us understand your needs and preferences. Please also bring your hospital passport if you have one.

To contact the learning disability team please email: [imperial.inclusion.vulnerability@nhs.net](mailto:imperial.inclusion.vulnerability@nhs.net)

## **Information in other formats**

If you need information in other formats such as easy read, please email

[imperial.accessible.information@nhs.net](mailto:imperial.accessible.information@nhs.net) or ask your nurse to email them for you.

## **Care Information Exchange**

The Care Information Exchange is our secure online patient portal. You can use the portal to view your blood tests, scan results and your appointment dates, among other things. It is available to any patient at this Trust with an NHS number. To find out more or to register for an account please visit:

[www.careinformationexchange-nwl.nhs.uk](http://www.careinformationexchange-nwl.nhs.uk)

## **Spiritual and pastoral care**

We have chapels and prayer rooms at Charing Cross, Hammersmith and St Mary's hospitals.

During times of illness, uncertainty and change, many draw deeply from their own faith tradition, whilst others simply want a listening ear. Chaplains work as part of the wider healthcare teams across our hospitals. Our team includes Anglican, Catholic, Jewish and Muslim chaplains.

We can also help put you in touch with your own faith leader. The team is available from 09.00 to 17.00, Monday to Friday.

If you would like to arrange for the chaplain to visit you, please speak to a member of the ward team or call the spiritual and pastoral care service directly:

- Charing Cross Hospital: 020 3311 1056
- Hammersmith and Queen Charlotte's & Chelsea hospitals: 020 3313 4574
- St Mary's Hospital: 020 3312 1508.

The chaplaincy team also provide a 24/7 emergency service for end-of-life situations or for people who are experiencing extreme distress. If you feel like your need is urgent, please talk to a member of the ward team and they will contact the on-call chaplain.

## **Comments, concerns and complaints**

If you have any suggestions or comments about your stay, please either speak to a member of ward

staff or contact the patient advice and liaison service (PALS) on 020 3313 0088 (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or 020 3312 7777 (St Mary's and Western Eye hospitals). You can also email PALS at [imperial.pals@nhs.net](mailto:imperial.pals@nhs.net) The PALS team will listen to your concerns, suggestions or queries and are often able to help solve problems on your behalf. Alternatively, if you wish to make a formal complaint, contact our complaints department:

Complaints department Fourth floor, Salton House St Mary's Hospital  
Praed Street London  
W2 1NY

Email: [ICHC-tr.Complaints@nhs.net](mailto:ICHC-tr.Complaints@nhs.net) Telephone: 020 3312 1337/1349

## Get involved with the trust

There are lots of other ways you can feedback, stay in touch or get involved with the trust.

### Friends and family test

Would you recommend our services to your friends and family? Let us know by completing our anonymous friends and family test. Your comments will help us to make changes and take immediate action when there is a problem.

You can give your feedback using the inpatient form on our website:

<https://www.imperial.nhs.uk/about-us/how-we-are-doing/patient-experience>

### Staff 'Make a Difference' awards

'Make a Difference' is our staff recognition scheme. It rewards the hard work, dedication and achievements of those individuals that go out of their way to exceed your expectations. So, if someone has made a difference to you, please show them. You can nominate a member of staff by sending us an email: [imperial.MakeADifference@nhs.net](mailto:imperial.MakeADifference@nhs.net) or call us on: 020 3312 7563

### Volunteer

Many of our volunteers take part to support their local community or to give back to hospital staff after experiencing outstanding care. Others get involved to develop their communication skills, learn about therapy techniques or gain experience in a healthcare environment.

Imperial Health Charity manages volunteering on behalf of the trust, offering a variety of roles within each of our hospitals. To find out more about current volunteering opportunities please visit [www.imperialcharity.org.uk/volunteering](http://www.imperialcharity.org.uk/volunteering)

### Fundraising

Imperial Health Charity is our dedicated charity. It helps our hospitals do more through grants, arts, volunteering and fundraising. The charity funds major redevelopments, research and medical equipment, as well as helping patients and their families at times of extreme financial difficulty.

If you would like to make a donation, you can choose where your money is spent. You can donate to a particular hospital, ward or department, or to one of the charity's fundraising campaigns. You can find out more and make a donation via the charity's website: [www.imperialcharity.org.uk/donate](http://www.imperialcharity.org.uk/donate) or you can contact the charity's fundraising team by calling 020 3640 7766 or emailing: [fundraising@imperialcharity.org.uk](mailto:fundraising@imperialcharity.org.uk)

## **Become a lay partner**

A lay partner is someone who works in partnership with our staff on specific issues, projects or programmes. Their role is to help ensure we keep our focus on what matters most to patients. To do this, they take part in meetings, analyse reports, provide views and suggestions and help keep projects on track. If you want to learn more about lay partnership, please email:

[imperial.involvement@nhs.net](mailto:imperial.involvement@nhs.net)

Trustwide  
Published: Dec 2022  
Review date: Dec 2025  
Reference no: 5142  
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