

Reactions to war-time nursing page 4

ROC Runners page 10 

Blue Heart Awards Finalists! Page 6

ROH goes on the road



We held our first muscle and joint pain roadshow, visiting three locations across Birmingham to help local residents to self-manage their pain. With a big red bus in tow, and the fantastic support of our colleagues, we helped 395 patients with problems ranging from lower back pain to shoulder, hip and knee pain. These problems fall under the category of Musculoskeletal conditions (MSK).

The roadshow's objectives were to promote self-management of MSK conditions and provide signposting to support available, alongside discovering any barriers to accessing healthcare support for MSK pain.

One resident said: "It's been the most helpful thing I've done in living memory... Probably one of the most helpful things today is being able to ask people questions that have been going in my head for so long... They've put a lot of my concerns and fears to rest so I'm very



pleased indeed."

Ali Sprason, Head of Charity, commented: "The Royal Orthopaedic Charity was delighted to launch the first ROH MSK Community Roadshow between 28th-30th April 2025. Each day was led by a multi-disciplinary team who engaged with nearly 400 members of the public and discussed their MSK needs alongside barriers to accessing healthcare services, and

provided clear signposting to ROH, community and voluntary sector organisations for ongoing support.

"The team included Physiotherapists, Nurses, MSK Doctors, Communications, Operations, Volunteers and the Royal Orthopaedic Charity. We also promoted self-management of MSK conditions through a range of tools and resources, including GetUBetter, a free digital self-management tool designed to help users manage common musculoskeletal injuries and conditions."

Across the three days the ROH team visited Small Heath, Northfield and Birmingham City Centre, where residents had the opportunity to speak with a range of community groups including Versus Arthritis, Birmingham Public Health @ Birmingham City Council, Nuffield Health, Citizens Advice, Northfield Neighbourhood Services, WorkWell, Better Pathways, Saheli and Disability Resource Centre.

Dave Rogers, Clinical Lead – MSK Transformation at the Royal Orthopaedic Hospital, added: "Our community MSK bus provided guided self-help and signposting for MSK conditions, supporting our population to maintain good musculoskeletal health. The sessions were well attended by the public and resulted in many useful conversations to support self-management."



FOLLOW US ON SOCIAL MEDIA:



/ROHNSFT



@ROHNSFT



@ROHNSFT



/ROHBIRMINGHAM



FIND OUT MORE

Story continues on next page

Welcome to the issue

Email:
ROH.comms@nhs.net
 Tel: 0121 685 4329 | Internal: 55294

Editorial Team

Stephanie Jenkins
Communications Manager
 Bethany Haller
Senior Communications Officer
 Yasmin Brown
Senior Communications Officer
 Falon Paris-Caines
NOA Communications Manager
 Pete Law
Graphics & Media Studio Manager
 Tremaine Johnson-Niles
Graphics & Media Assistant
 Amos Mallard
Strategy and Communications

Welcome to this issue of ROH Life, our Trust newspaper for patients, visitors and colleagues at The Royal Orthopaedic Hospital NHS Foundation Trust (ROH).

We want to feature the fantastic work and interesting stories from people across the Trust.

Whether you're a patient with a story to tell, or a member of staff who wants to share some great work, you can get in touch using the details on the left. We would love to hear from you and hopefully feature you in an upcoming issue!



Front page story continued

MSK conditions account for 30% of GP consultations in England and in Birmingham alone 17.9% of working days are lost to MSK conditions. The ROH is committed to improving access to services and increasing the provision of MSK expertise at locality level and community initiatives like the MSK Roadshow are an integral part of supporting the wider aim of delivering more preventive MSK care in the region.

Ali continues: *"Having supported three different locations and communities and discussed a wide range of unmet MSK needs, we are aware that the need for initiatives like this is huge. We hope to continue this work in and around Birmingham and visit more locations over the coming months."*

Watch our event video [here](#).



Share your story!

Did you have an amazing experience with the ROH? Scan the QR code or email us at roh.comms@nhs.net



A day in the life of a Theatre Assistant



Eileen O'Keeffe, shares an insight into her role as a Theatre Assistant at the Royal Orthopaedic Hospital

Theatre Assistants work as part of a team contributing to the delivery of patients individual care needs in the Theatre environment. Theatre Assistants like Eileen work with different consultants, surgeons and specialists on a range of patient cases. At the Royal Orthopaedic Hospital (ROH), this could be anything from joint replacements like hip and knee replacements to spinal fusions and oncology cases. We work in our clusters but are expected to work in any theatre case, building up a good knowledge base across different orthopaedic surgeries.

Setting up theatre

As soon as I get to work, I change into blues and clogs, and check our Theatre board to see who we are expecting today.

In theatre I work with ODPs (Operational Department Practitioner), scrub nurses, other Theatre Assistants and an Anaesthetist as well as the consultant/ surgeon.

To set up the theatre, all surfaces and equipment are cleaned, essential equipment put in its place, and the paperwork is all made ready.

Then the surgeons and anaesthetist arrive, and we discuss the needs of patients on the surgical list – things like the type of anaesthesia, medical history, and if any specimens being taken for research in our Dubrowsky Lab.

Sending for the patient

Once the theatre is all set, and we've discussed the surgery with the surgeons and anaesthetist, the patient is sent for.

Final checks are made by the theatre team before the patient arrives.

The patient then arrives in the anaesthetic room. The ODP runs through some checks with the patient and we attach ECG dots to

the patient to monitor their vital signs - heart rhythm, blood pressure and blood oxygen. We also fit a Flowtron garment which is attached to the lower leg to reduce the risk of Deep Vein Thrombosis (DVT).

Our most important job during surgery is being an advocate for the patient while they are at their most vulnerable. We observe, highlighting any concerns, making sure the patient care is of the highest standard, and always maintaining the patient's safety, dignity and privacy. We will talk to the patient to make sure they are comfortable and relaxed.

We assist in holding and positioning of the patient during spinal blocks, tourniquets, diathermy plates, body warmers and catheters. Before any blocks are done we have a 'stop before you block' in place. Building in this pause means we can again confirm the patient details, as well as the correct site and side for the surgery.

Scrubbing in

Meanwhile, in theatre the scrub nurses prepare by scrubbing in (this means making sure they are clean and sanitary for surgery) and we start to open the surgical trays, checking as we go that everything is as it should be. After the scrub nurses get in their sterile gowns, the trays are passed on to them, for their specialist checks.

The theatre assistant then opens any extra items and assist the surgeons with sterile gowns. Implants (like those used in joint replacements) are logged and scanned against the patient's details.

We also confirm with the scrub nurse our first count of items to be used in the surgery. We will do the same at the end of the surgery to ensure everything is accounted for.

Patient is brought into theatre for the surgery

The patient is then brought into the theatre ready for their procedure. Once the patient

is settled onto the anaesthetic machine, the surgeon starts their work and we assist.

During the case we start the perioperative care plans, record any medication used, surgery details, and pass on to the scrub nurse for verification.

All other paperwork which includes reporting any issues with trays, or filling out details in the surgeon's books and national joint registry forms, surveillance forms.

During the case we listen for any other items needed, and prepare the implant. A second count is done to confirm we have everything in place.

Towards the end of the operation we do a Sign Out where the operation is recorded, we confirm counts, ensure that implants are correct and any anaesthetic updates. The final count is done and contents of trays checked.

After the procedure, we clean and reset the theatre space, complete any paperwork and process any samples or specimens.

Setting up for the next surgery

During the daytime, we then get everything ready for the next day (surgical trays, items needed, getting paperwork in order) using the surgeons' books as reference and speaking with the scrub nurse in our cluster. The scrub nurse in theatre then checks all laying up to make sure it is correct for the next day.

At the end of the day we remove all paperwork, clean all equipment including lights/canopy, push everything out of theatre for cleaners to access, restock, complete cleaning logs, remove all trays, put away unused unopened items, prep, saline and put these away.

We are also part of a 24hour emergency team who can be called out at any time during being on call.

WAITING WELL FOR YOUR TREATMENT



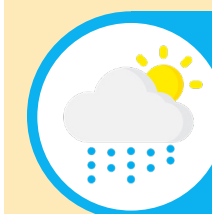
Move Well



Live Well



Stop Smoking



Mental Health



Manage your weight



Better Sleep

For more information on waiting well for your treatment please visit the ROH website via the QR code:



Tin hats and stone hot-water bottles: reactions to war-time memories

Joy McCliskie was a nurse at the Royal Orthopaedic Hospital from 1940-1948. Joy shared with us what it was like working at the hospital during World War II – things were quite different! We filmed two of our nurses from the High Dependency Unit, Sophie and Helen, reacting to Joy's war time memories. Watch the video via the QR code or click [here](#).



Women in Surgery conference

On Wednesday 14th May, The Royal Orthopaedic Charity hosted its first 'Women in Surgery' event, welcoming around 100 local 16-17 female school students who are considering a career in medicine.



The audience enjoyed listening to many speakers throughout the morning, including several Specialty Registrars, Consultant Orthopaedic Surgeons, Birmingham Medical Students and the Chair of The ROH Women's Network.



The morning concluded with a panel discussion, where the audience asked a wide range of questions to our speakers. A Lunch

and Learn session then took place where school students interacted with each other and undertook practical sessions including suturing and basic life support.



Ali Sprason, Head of Charity and project lead for 'Women in Surgery', commented:
"Our first 'Women in Surgery' event was filled with inspiration from our speakers and engagement from the audience. It was a special and unique opportunity for female students in our area to hear firsthand about life as a surgeon and the journey each speaker had been on, to get to where they are now.
Special thanks go to our speakers; Jo Thomas, Deepa Bose, Natalie Green, Amanda Gaston, Mukarramah Akil, Sophie Howles and Sarah Shammout. I would also like to show our appreciation to Amy Maclean Tahir Khaleeq and Phil Bell for supporting the event.
This event would not have been possible without the funding from The Royal Orthopaedic Charity. We have helped to inspire the future generation of surgeons so thank you to everyone who supports us throughout the year."

ROH facilitates more research through employing Research Fellows

It's a model employed by other Trusts across the UK. Bring on board junior level doctors who are looking for experience before they specialise, providing them with both clinical and research responsibilities which enables hospitals to increase research efforts.

Professor Adrian Gardner, Consultant Spine Surgeon and Research and Development Director at the Royal Orthopaedic Hospital (ROH), explains:
"The ROH is focused heavily on research – we have a dedicated team supporting research and clinical trials, alongside a dedicated laboratory on site. Research brings huge benefits to patients - hospitals that conduct more research tend to have better outcomes – but it is time intensive and so we need support for the work that underpins our research, supporting with recruitment, data collection and reporting. Our Research Fellows help with this, while receiving research experience, mentoring, and clinical skills training, all of which adds to their CV for their future."



The ROH has been employing Research Fellows for four years. The Fellows work in addition to a 22-strong research team at the Trust, exploring new approaches and therapies in orthopaedics, from advanced therapies for the regeneration of diseased bone tissue to pharmaceutical treatments to reduce the need for invasive surgery. The fellows have contributed to the increase in research outputs from the ROH of 50% between 2022 and 2024 iCite | Results | NIH Office of Portfolio Analysis

Dr Mohamed Shazahan is one of the Research Fellows currently working at ROH:
"Other roles at this level are primarily clinical-focused or research only – this role gives the opportunity to develop both skillsets. To have protected time for research, and lots of support and mentoring, is hugely beneficial and really rare."

Mohamed is supporting a spinal research study into the pathology causing low back pain, looking at the patient population at ROH to understand more about these patients and what's actually causing their back pain.

Dr Rizwana Rajmohamed, another Research Fellow at ROH, explains:
"Really it's a golden egg, for someone as a junior level doctor." She adds: "You're given protected time to stay in research while carrying out clinical care, and during your research days you catch up with your supervisor. The nature of the role having time carved out especially for research and dedicated time with your supervisor means you have access to mentorship regularly, whether that's from a clinical and research perspective or simply wellbeing and pastoral care."

Dr Rajmohamed is currently working on a project assessing mental health for young patients with scoliosis.
"It's a tough situation for these patients. There's already such a struggle being a young person going through puberty and then you factor in managing a scoliosis diagnosis. Whether it's more difficult to take part in sport or handling the physical challenges of scoliosis. We're specifically looking at the mental health aspects and how we can better support these patients."

"We are looking at information that is being currently collected as part of the national BASIS study, which is assessing the duration of back brace wear—full-time versus nighttime—for treating young people with scoliosis. We're then comparing the mental health information from the BASIS study to similar mental health data on paediatric patients with other chronic conditions, such as diabetes, for us to make recommendations on supporting scoliosis patients."

Congratulations to our Preceptors!

We held a Preceptorship Celebration Day for our colleagues who have completed their Preceptorship Programme. The programme provides structured professional support and development for newly qualified practitioners from nurses and nursing associates to Allied Health Professionals to help them integrate into their new roles, build confidence, and deliver safe and effective care.

Debs Brennan, Clinical Educator comments:
"Congratulations to all those who received their Preceptorship completion certificates yesterday! What a privilege it's been to journey through the last 12 months with all of you and watch you grow in

confidence. I wish you the best of luck as you continue in your chosen careers!"



The ROH is pleased to support The Backbone, by Ayesha Jones

The Backbone, by Ayesha Jones, is a new photobook that offers an intimate and activating exploration of idiopathic scoliosis as a lens to address broader female health.



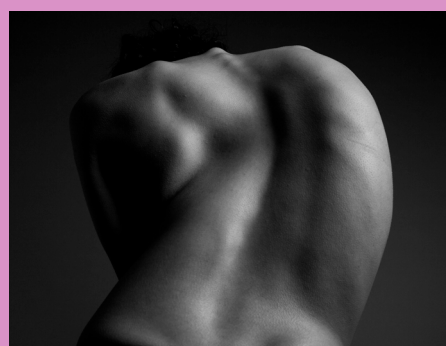
need for comprehensive understanding of female health. During the development of the new work Jones reflected on her life with idiopathic scoliosis and collaborated with other women who have lived experience of the condition and its treatment. The Backbone highlights the often-overlooked narratives surrounding female experiences, emphasising the importance of visibility, representation, and research in transforming healthcare and societal perceptions. The book invites readers to engage in critical conversations about identity, health, and the power of storytelling, ultimately fostering a deeper understanding of the complexities of the female body in a groundbreaking new body of work and call to action for equitable healthcare.

Ayesha said: "Idiopathic scoliosis is ten times more common in females than in males, and I have always wondered why this is. Recent research suggests that hormonal imbalances might be a contributing factor, which made me realise how little I knew about the workings of my own body. This book is a personal exploration aimed at deepening my knowledge of female health. Through my photography and collaborative process, I connect with other women who share similar experiences, as we seek to understand what it truly means to care for and embrace our imbalanced bodies... The women who feature share their stories through a series of anonymous anecdotes taken from recorded interviews I conducted with them. Their anecdotes appear throughout the book, highlighting our shared yet profoundly personal experiences. I photographed these women at The Royal Orthopaedic Hospital in Birmingham, where I underwent my spinal fusion surgery in 2013. The hospital and its staff have provided valuable support for both me and my work, playing a significant role in the development of this project."

'The Backbone' is available to purchase from the Ikon Gallery, Birmingham.

The project brings together personal narratives and collective experiences, illuminating the experiences of females who have been historically marginalised in medical discourse, and includes new photography and commissioned writing.

Through a series of evocative photographs and intimate reflections, Jones shares her journey with severe scoliosis, using the condition as a vehicle to challenge misconceptions and advocate for the urgent



Celebrating International Nurses Day



On Monday 12th May we celebrated International Nurses Day, a day to acknowledge the invaluable work of nurses worldwide, particularly their commitment and bravery in healthcare. Nurses dedicate their lives to caring for others with compassion, skill and unwavering commitment. Your efforts make a profound difference on patients and their families.

Liz, Infection Prevention and Control Nurse said: "There were no other nurses in my family. When I was 9 my Dad spent 3 months in hospital and I think my interest was triggered then when I used to visit. When I left school I drifted into office work and after a few years found myself working in a medical centre at a large manufacturing company. I was very bored and knew I could not sit at a desk for much longer. I watched what the nurses were doing as part of their day and spoke to them about their role and where they had done their training, I also

trained as a first aider. After 6 years of office work I moved cities and started my training to become a Registered Nurse. I have never looked back. This September I will have been a qualified nurse for 40 years."

Stacey, Staff Nurse said: "I am a nurse who works in the discharge lounge at The Royal Orthopaedic Hospital. I wanted to become a nurse when I was a teenager. I witnessed the support the nurses gave my brother when he was poorly, and this really did inspire me to become a nurse myself. My little brother Steven was diagnosed with a brain Tumour at the age of 6 and unfortunately died at the age of 16. This was a very tough 10 years for me and my family, and so grateful for all the nurses that gave us the support that we needed throughout this time."

Thank you for your hard work, your resilience and the compassion you show every day.

Shortlisted for HSJ Digital Awards 2025

The ROH is thrilled to announce its shortlisting in the 'Driving Prevention and Early Intervention through Digital' category at the HSJ Digital Awards 2025, an amazing recognition of its dedication to pioneering digital solutions that are shaping the future of healthcare across the UK.

The ROH has been shortlisted for spearheading work with the Birmingham and Solihull Integrated Care System (ICS) on the GetUBetter app helping to treat MSK patients in the region.

An estimated 20.3 million people across the UK are affected by MSK conditions like arthritis and back pain. This is likely to increase in the future, increasing demands on the system. Access to services isn't equitable, and we need

to ensure people receive the right help at the right time, no matter where they live.

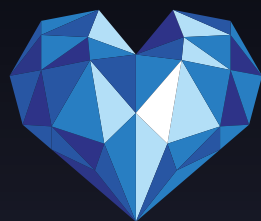
In BSOL, we have been striving to embed digital health technology within patient pathways, enabling access to clear, consistent, self-management advice. The MSK Transformation Programme was established in 2021, led by The Royal Orthopaedic Hospital. GetUBetter is a self-help app which prescribes self-management, tailored to patients' specific needs.

The winners will be revealed at the HSJ Digital Awards ceremony on **26th June 2025**, a night dedicated to celebrating the brightest minds and most impactful projects in digital health.

Get involved, become an ROH member...

The role of a member is flexible; you can get involved as much or as little as you like, whether it's filling in an online survey, sharing your ideas, coming to events or volunteering. Your involvement helps connect us with our community and your feedback can help us improve the care we give. Find out more and sign up: www.roh.nhs.uk/about-us/membership





BLUE HEART
AWARDS

Announcing your 2025 Blue Heart Awards Finalists!

Nurse of the Year

Anoop Sasidharan
Rebecca Smith
Zoe Hartwright

Nurse Doctor / Clinician / Medic of the Year of the Year

David Dunlop
Mark Brewster
Suresh Panchakshariah

Support Services Team Member of the Year

Brian Crisp
Nicholas Davies-McCann
Sandra Crook

AHP / Pharmacist / Healthcare Scientist

Nickisha Patel
Phil Bell
Ruth Roadley-Batten

Secretarial / Administrator Team Member of the Year

Jayne Bradley
Marie Squire
Rachel Harris

Clinical Support Team Member of the Year

Ecaterina Balogh
Emma Worrall
Michelle Beddows

Volunteer of the Year

David Cartmell
Gardeners
Karen Howells

ROC Supporter of the Year

Dave Hinton
Health Hacks
Mollie Borg

Corporate Services Team Member of the Year

Alex Gilder
Alison Newman
Rachel Winchurch

Corporate Services Team Member of the Year

Alex Gilder
Health Hacks
Mollie Borg

Clinical Team of the Year

Critical Care Outreach Team
IPC
MSK Back Pain
Recovery
Ward 3

Non-clinical Team of the Year

Appointments
Catering
FTSU Champions
Oncology PLO's
Ward 3

Outstanding Contribution to Patient Experience

Emily Harris
Jude Davies
Manpreet Sidhu

Innovation and Continuous Improvement

Community Appointment Day
Project Group
Gayle Kwidini
Infrastructure and Networking

Dedication to Learning

Elson Allencar
Lucy Bishton
Vickie Pring



LESS PAIN
MORE INDEPENDENCE
LIFE-CHANGING CARE

NHS
The Royal
Orthopaedic Hospital
NHS Foundation Trust

What are my options?

What are the benefits and risks to each of the options?

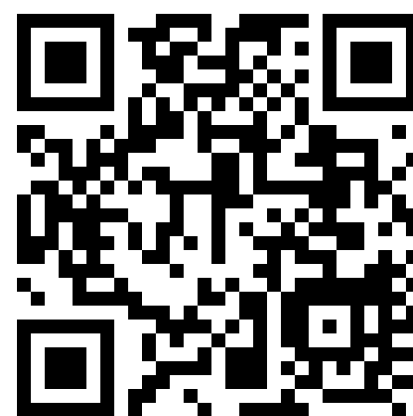
How do I get support to help me make the decision that's right for me?

Get the most out of your appointment

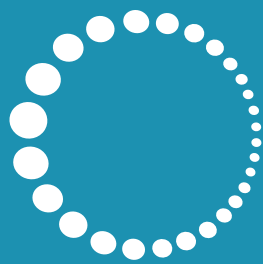
Ask 3 questions...

Make the most out of your appointment with your healthcare professional by asking these three questions.

It's ok to ask questions, we're here to help



www.roh.nhs.uk/3qs



NATIONAL ORTHOPAEDIC ALLIANCE

The Royal Orthopaedic Hospital (ROH) is a founding member of the National Orthopaedic Alliance (NOA), a multidisciplinary membership organisation championing collaboration in orthopaedics. The Trust was well represented at the recently held NOA Annual Members' Conference and Awards, held on 15th May 2025 at the Birmingham Conference and Events Centre.

NOA benefits for ROH staff

All colleagues at ROH can attend NOA webinars, workshops, meetings, and events for free! Get the latest updates and find out about other member benefits on the NOA website: www.nationalorthopaedicalliance.co.uk

Keep up to date



Follow us on LinkedIn



Visit our website

Find out more

Visit: www.nationalorthopaedicalliance.co.uk

Website members' area: register to the members' area of the NOA website to access even more resources and information. **Register here:** bit.ly/NOAMembersArea

Sign up: You can register to receive the NOA newsletter here: bit.ly/NOAMemberNewsletter

Get in touch

Email: info.noa@nhs.net

National Orthopaedic Alliance Conference 2025

The event attracted colleagues from across the country and covered themes including innovation, sustainability, workforce development, and the evolving MSK landscape. The day began with a welcome from conference Chair, Matthew Hartland - NOA Board member and Chief Executive Officer at ROH. Matthew opened the conference and set the stage for a packed agenda. Sessions throughout the day included a keynote from Dr Lesley Kay, National Clinical Director for Musculoskeletal Conditions, NHS England, as well as presentations, panel discussions and sessions exploring outpatient transformation, prevention in MSK, AI, recruitment, greener orthopaedic practice and more.



Some of the sessions were led by NOA's strategic networks – two of which are chaired by ROH colleagues – Jennifer Pearson, Head of Nursing (Div 2) and Chair of the NOA Pathways Network led the 'Prevention in MSK care' panel, and Mr Matt Revell, Executive Medical Director and Chair of NOA's Research and Innovation Network helped to lead a session on 'Getting ready for the AI revolution in orthopaedics'.

ROH also featured prominently in the NOA Excellence in Orthopaedics Awards, with teams pitching projects to attendees. Although the Trust did not take home an award this year, three projects were named

finalists, reflecting the breadth and quality of work at the trust. Shortlisted projects included:

- **Supporting Patients on Their Pathway** - getUBetter
- **Workforce Initiative** - Confirm and Challenge: Nursing Workforce Initiative
- **Innovation in Orthopaedics** - BOOM Consensus Meeting

The event closed with a celebratory reception, where colleagues from across the orthopaedic community had the chance to network, reflect, and build connections.

Reflecting on the conference and awards, **ROH Chief Executive Officer,**



Matthew Hartland said: "It was great to see colleagues from orthopaedic units across the UK join together and share good practice and insight at the NOA conference and awards – it's positive to connect and recognise that we have similar challenges but so many opportunities to collaborate and improve orthopaedic care, research, and patient outcomes in a changing NHS. My congratulations to colleagues from the ROH that were finalists in the NOA Excellence in Orthopaedics awards."

ROH colleagues wanting to find out more about the NOA and how they can get involved with NOA's strategic networks can contact the NOA on info.noa@nhs.net.



Exercise and sport for scoliosis patients

For some patients, Adolescent Idiopathic Scoliosis (AIS), curvature of the spine, can progress as they age resulting in cosmetic issues, functional issues and pain. In these patients where spine stabilisation surgery is required, there remain barriers to a full return to sport and exercise. A number of studies at the Royal Orthopaedic Hospital are exploring this challenge, seeking to develop protocols that bring consensus to clinical advice.

Jodie Walters, Specialist MSK physiotherapist, noticed she was seeing patients coming through a while after surgery who were still struggling with mobility, were really stiff and were fearful of movement due to little to no engagement with physiotherapy. Jodie is currently running a study to develop a protocol of accelerated rehabilitation following surgery for AIS.

Jodie explains: "There is currently no evidence that guides clinicians on how to rehabilitate following corrective surgery for AIS. As half of adolescents who undergo

surgery for AIS do not return to their pre-operative levels of physical activity, we need to explore post-operative physiotherapy interventions and develop a protocol clinicians can refer to. Patients can get back to what they want to after surgery, no matter how far down the line they are, but the key is working through rehabilitation and putting the time in."

Susanna Tucker, Senior Physiotherapist, is currently carrying out research into Post-operative return to sports, exercise and physical activity as part of her PhD project. She noticed similar challenges in a lack of literature on factors influencing exercise participation in scoliosis. **Susanna explains:** "The literature clearly demonstrates that people who participate in physiotherapy have an improved quality of life and decreased pain. Therefore, my work has been focused on an international Delphi consensus regarding post-operative return to sports, exercise and physical activity."

"This Delphi consensus followed on from

interviews with patients who had different levels of treatment for their scoliosis and there was a huge difference between what exercises patients felt they could do. Government guidelines suggest that every child should participate in an hour of physical activity each day, and children with disabilities should get 20 minutes each day. The literature also demonstrates that over a quarter of patients only returned to lower impact activities after their surgery, while a third didn't return at all due to stiffness."

"My research in conjunction with Jodie Walters' study suggests there is a high proportion of patients not engaging in exercise before and after scoliosis surgery. If we can reduce and remove the barriers and provide guidance for participation in sport and physical activity, not only would this positively impact recovery outcomes, but it would lead to better quality of life for those with Adolescent Idiopathic Scoliosis."

ROH kittens!



We're not a maternity hospital but a few weeks ago 4 kittens were born on the hospital grounds! Thank you to Stray Cat Rescue Team West Midlands for coming to their aide and delivering paw-fect care. Kittens and mother are doing well and have been returned to their owner, where the kittens will get lots of love and care before going to their forever homes.

Wellbeing Week - Tips for managing wellbeing as a patient

We've been celebrating Wellbeing Week at the ROH and as part of our activities we reached out to a few patients and colleagues for their tips on managing wellbeing as a patient. Here are some of their experiences, and what tips have helped them.

Shaun

Spinal department - Scoliosis

Shaun is nine months post op from spinal fusion to correct his scoliosis.

"There has been nothing really that I didn't expect. I understood that pain would be a massive factor in this, but it progressively got better with me moving around and trying to be active and that it would be challenging but in the end it is all worth it! Everything so far has gone amazing with my recovery, everything has healed very nicely. My body has still got a curvature but I can see the difference that has been made and I am very proud of it."

Shaun's tips:

- Understanding the whole surgery can be difficult for a young person or maybe even an adult but it was completely safe and listening to doctors/surgeons will help you out a lot.
- Stay strong throughout your first appointment all the way to your surgery and any questions unanswered is a MUST ask, best thing is to ask your worries like myself since it made me feel better.
- Stay positive: Focus on the long-term benefits of the surgery and celebrate small milestones during recovery.



Tor

Oncology department - Maffucci Syndrome

"No matter how bad life feels for you right now, however bleak you feel your future might be there are little pockets of happiness and joy all around us. We just have to look a little bit closer for them. That is where mindfulness meditation came in for me. It was to help manage my chronic pain and my mental state. A lovely Macmillan counsellor worked with me. She taught me the techniques and as the weeks went by I slowly started to feel brighter. I learned a lot about myself along the way and processed a lot of grief and trauma surrounding my rare condition."

Here are some of the things that I found helped me then, and have continued to help me to this day."

- Let your emotions out!! If you're like me and sometimes struggle with this, it can help to watch a film that you know you'll cry to, or a song that hits you right in the heart. Crying helps release excess cortisol in our bodies. Cortisol is a stress hormone and by crying it can help alleviate emotional stress and the physical tension that comes with that. In turn this can help with any physical pain you may also be experiencing.
- Mindfulness meditation - Sitting quietly, following your breath, feel the rise and fall. Learn to be in the present moment. It can really help give you a sense of peace and tranquility. There are so many podcasts and videos online to guide you through meditations. These are great if you are new to it. I recommend Vidymala Burch. She has a book for chronic pain and I use her meditations regularly. Meditation has helped me accept what is.

- Mindfulness-I carry the mindfulness from meditating through into my every day life now. It has healed me to look for the joy, more aware of being present and of my feelings, my emotions and my place in the world. In these moments no matter where you are, it brings you into the present and not off someplace your mind decides to take you. You are in control of the here and now.
- Find something that makes you happy! It could be an activity, hobby or an interest you have. Maybe get creative or learn something new. If you are able to get out, maybe join a club. Meet new people, even if it feels a bit scary. You might just have the best time!
- Talk to someone. I found counselling hard, but empowering. I finally felt like I was taking control of all the feelings eating up inside me. There are many support lines you can call. It is often easier to talk to someone you don't know. We do worry about upsetting family sometimes or feel a burden. Please know, we are NOT a burden! I remind myself, that if the roles were reversed I wouldn't want anyone to feel they couldn't come to me if they needed anything.
- Be kind to yourself! Why do we find it too hard? We would never be unkind to others so why are we so often unkind to ourselves. We deserve kindness, compassion and care. It might be difficult *I still find it challenging, but give it a try. Go gentle on yourself...You deserve kindness!!

While you're waiting for surgery there's a lot you can do to support your body and mind. Staying active, eating well, and preparing ahead makes a real difference in your recovery.

Sue Cox, Matron at the Royal Orthopaedic Hospital, shares some top tips:

Managing Anxiety and Stress

- Stay informed - ask your healthcare provider about the surgery schedule, expected wait time, and any updates.
- Practice relaxation techniques - engage in activities that help you relax, such as meditation, deep breathing, or yoga.
- Stay connected - reach out to friends, family, or support groups for emotional support.

Preparing Physically

- A balanced diet helps with better recovery. You'll want to aim for protein-rich foods (chicken, beans, eggs) to support healing and eat fruits and vegetables for vitamins that promote immunity.
- Hydrate Well and make sure you're regularly drinking water unless you're on fluid restrictions.
- Limit alcohol & smoking. Even small changes can help - reducing smoking 2-4 weeks before surgery can improve healing and reduce complications.
- Keep moving safely, such as gentle walks or stretching, as advised by your care team. This can help prevent muscle loss and keep up your mobility.
- Finally, optimise any on-going health conditions by maintain good control of diabetes and blood pressure. If needed you can also visit your GP for medication reviews.



Our amazing charity!

ROC Runners



19 of ROC's amazing fundraisers took on The Great Birmingham Run on the 5th May. A mixture of patients, family members, friends, staff and medical students all raised over £9,500 including gift aid

support, for various departments across The Royal Orthopaedic Hospital.

We would like to say a huge thank you to our fundraisers who have gone above and beyond this year to support ROC,

and also thank all those who donated to their fundraising pages. This amount of money will make a huge impact within the hospital, so thank you! Visit our www.rohcharity.org website to find out more.



Become a ROCstar!



We are looking for keen members of the community to become Charity ambassadors for ROC, our very own ROCstars!

Anyone can apply, you need a keen interest in fundraising, a passion for the hospital and making a difference. If you would like to get involved or get some more information, visit the charity website or get in touch via: roc@nhs.net.

Check out our shop!

ROC hoodies are back! They are available for staff to purchase at £20 each. To place an order, please email roc@nhs.net with your size and the quantity you'd like to order.



Leave a little Thank You

Have you received outstanding care? Why not write a note of thanks to a team, individual, department or service within the hospital and ROC will make sure it is delivered directly to them! Pick up a card in our main outpatients or fill one out online! Scan the QR code to find out more. <https://rohcharity.org/say-thank-you/>



FOLLOW US ON SOCIAL MEDIA:



/FUNDROH



@FUNDROH



@FUNDROH

CHECK OUT OUR WEBSITE:

WWW.ROHCHARITY.ORG

How your support helps



Health Hacks, launched in 2024 is an education programme built by members of Royal Orthopaedic Charity. The programme works with Royal Orthopaedic Hospital staff members and school workers to empower young people to take control of their own health, educating them about bones and muscles as well as providing practical tools to maintain healthier lifestyles.

The second round of Health Hacks is now complete. The scheme has in total, educated over 150 students about the importance of wellbeing.

Year four and year five students from Bournville All-Through School joined us this spring for the 3-part programme. They were visited by Trust departments, both within their



school environment as well as in the hospital too. Staff produced presentations to help the children understand how the hospital works, what their role entails and how individuals become a patient (more importantly how to stop them becoming a patient in the future). Staff included Physiotherapy, Finance, Infection and Prevention Control, Occupational Therapy and more. Children were also given the opportunity to share a community project in the form of



a poster, expressing their very own 'health hacks' which they have implemented at home. Examples were, walking to school and back, drinking two litres of water a day and stretching before exercise. All things they were inspired to change after their initial school session in March.

The programme concluded with the children getting the opportunity to tour the hospital visiting Xray, Hydrotherapy and Pharmacy departments and lastly getting a well-deserved cuddle from Rocy our much-loved charity mascot.

During the tour, radiology staff explained how to perform a chest x-ray to students, and gave them examples of x-rays you might need to have. They had the opportunity to dip their fingers in the hydrotherapy pool to understand the importance of warm water for muscles and recovery as well as seeing Freddy the Pharmacy robot in fast action. The programme is both informative and fun and it was great to see how engaged the students were. All children received a goody bag from Rocy, which included a certificate for their hard work.

A huge thank you to Bournville All-Through School for their support as well as all the staff involved.



Scoliosis Awareness Month – June 2025

We reached out to ROC donors, fundraisers and supporters to help us this June to share ROH stories as part of Scoliosis Awareness Month.

Anna, mother of Autumn, was delighted to support us and has kindly written a reflection on Autumn's journey from age seven to age fifteen.

"Autumn's scoliosis journey began back in 2017 when she was just 7 years old. During a dance exam dressed head to toe in black it was observed by the examiner that she appeared asymmetrical. A G.P appointment soon after indicated scoliosis was suspected and this led to frequent trips to ROH and later The Portland Hospital and Birmingham Children's Hospital for treatment and ultimately surgery."

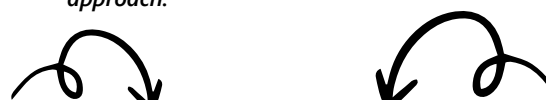
"As a parent I felt really helpless but I have always trusted all the health professionals who have supported Autumn for the past 8 years. Autumn has had frequent x-rays as well as multiple body brace fitting appointments over a 2 year period (where Autumn loved choosing a different pattern each time it needed changing), blood tests pre-surgery and much post-surgery aftercare at ROH. Every member of staff we have encountered have always been really supportive and person-centred in their approach."

"Autumn has always been really proud of her body braces and now her surgery scars and has always wanted to share these rather than hide them away. She has had surgery 6 times and although it is so difficult to watch your child be put under general anesthetic I knew this was what needed to happen to ensure her lungs has the required space in her chest cavity to develop."

"Sadly Autumn continues to suffer with pain so 9 months post her final fusion operation she began regular physiotherapy. This has included a combination of exercises, manipulation and acupuncture which do seem to be helping however it has made me realise as a parent that her scoliosis journey will be lifelong."

"Autumn has not allowed her pain to affect her academic studies though. Her school have been really supportive and recognised the benefit of Autumn being able to take breaks and move around as required in lessons. I am immensely proud of Autumn not letting scoliosis define her and she has achieved so much in her life already."

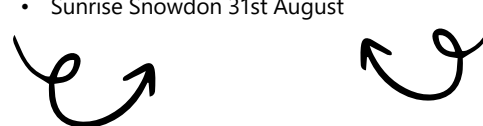
In total Autumn has raised over £1,000 for ROC, supporting patients just like her. We wish her all the best in her future and will continue to support both her and her family through her Scoliosis journey.



Key Fundraising dates

Add the following dates to your diary! All free to sign up, simply email roc@nhs.net to get involved.

- Lake District Challenge 7th – 8th June
- Cotswold Way Challenge 21st – 22nd June
- Gower Peninsula Challenge 19th – 20th July
- Sunrise Snowdon 31st August



WWW.ROHCHARITY.ORG

0121 685 4379

roc@nhs.net



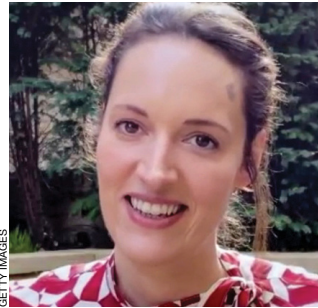
Donate to the work of the Royal Orthopaedic Charity by scanning the QR code

Registered Charity Number: 1078046

Tea Break Brain Teaser

Quiz Challenge

- Solo competitors toboggan on their backs in which Olympic discipline?
- Rockin' All Over the World was a 1977 hit song for which rock band?
- What was the title of the 1988 best-selling book written by physicist Stephen Hawking?
- Bramall Lane is the home ground for which English football team?
- Which Asian country has a region known as the Coromandel Coast?



Phoebe Waller-Bridge
- see Question 9

- Abyssinian, Ragdoll and Russian Blue are breeds of which animal?
- Director Ron Howard won an Oscar in 2002 for which film about mathematician John Nash?
- Who was the last British monarch to lead his troops into battle?
- Comedian Phoebe Waller-Bridge created and starred in which TV series about a sexually voracious woman?
- What is the chemical symbol for iron?

Two-Timer Crossword

Can't solve one - then try the other!
Two sets of clues both leading to the same answers

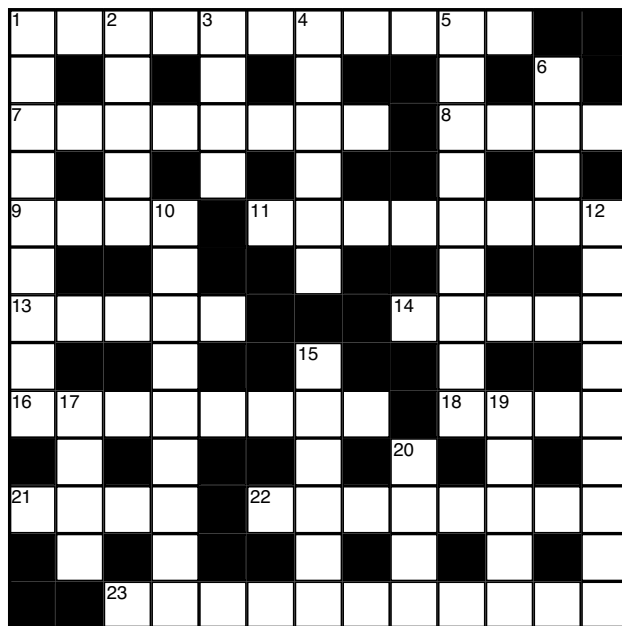
CRYPTIC CLUES

Across

- Cruel - like reptiles (4-7)
- A man's oil could be a famous portrait (4,4)
- 8 & 21. A blow one will never have to face (4,4)
- It's a bit of a blur keeping concealed (4)
- Below the cur is the one most likely to lose (8)
- Peculiar form of expression I'd take to the Isle of Man (5)
- Creeper to sneak about (5)
- Star from Interpol (8)
- Potentially lethal substance designed to cure (4)
- See 8 Across
- Quick inspection, having made single crossing (4-4)
- Continuously stop the French being crafty (11)

Down

- Illness a satisfied customer does not have (9)
- Crescent-shaped calendar? (5)
- Bad temper, it's an aid to digestion (4)
- Alternatively wrongdoing is nothing for a Shakespearean (6)



- Placed on the king's seat? (9)
- Dog the fellow before one celebration (4)
- The ignorant do not possess it (9)
- Two boys have capital cover in Scotland (9)
- Irish boy at church meeting (6)
- Leave out order, it follows (4)
- Improves section as one wanders about (5)
- Last artist getting in the money at the festival (4)

QUICK CLUES

Across

- Lacking in feeling (4-7)
- Painting by Leonardo da Vinci (4,4)
- 8 & 21. I want lid (anag.) (4,4)
- Lie in wait (4)
- Grounded (anag.) (8)
- Colloquialism (5)
- Serpent (5)
- Principal performer (8)
- Narcotic (4)
- See 8 Across
- Rapid examination (4-4)
- Incidentally (11)

Down

- Grievance (9)
- Of the moon (5)
- Digestive juice (4)
- Character in Twelfth Night (6)
- Exalted (9)
- Generic name for a canine (4)
- Range of understanding (9)
- Highland cap (9)
- Psychic session (6)
- Neglect to include (4)
- Strays (5)
- Bazaar (4)

SUDOKU

Each row and each column must contain the numbers 1 to 9, and so must each 3 x 3 box.

	5	1		9	8	2		3
		9	1	5	7			
	7	8	4		2			5
		3	8		9			
	6	7		2				9
	1		3	6				
7					5		3	6
2					3	5		1
1				8		7		

CROSS CODE

16	10	9	8	12	19	11	24		17	11	12	4
11			9		13		4		10			11
4		20	9	8	22	19	10	9	3	20		1
2	12	14	6		23		11		26	12	25	11
		4		9	5	11	4	12		19		14
11	15	12	14	19		21		14	9	22	4	19
3		23		13	12	22	3	19		4		11
7	12	2	8	11		12		11	3	24	11	24
9		8		4	22	8	11	24		12		
4	11	11	24		4		4		19	18	4	11
14		24	12	3	26	11	4	9	22	20		12
11			3		11		9		4			4
24	10	20	6		24	12	4	6	3	11	20	20

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

1	2	3	4	R	5	6	7	8	9	10	11	12	A	13
14	15	16	17	18	19	20	21	22	23	M	24	25	26	

Each number in the grid represents a letter. You have three letters in the control grid to start you off. Enter them in the appropriate squares in the main grid, then use your knowledge of words to work out which letters should go in the missing squares.

As you get the letters, fill in other squares with the same number in the main grid and control grid. Check off the alphabetical list of letters as you identify them.

MAGIC SQUARE

WE SEW MISSILE ITEM

Using all 16 letters of the sentence above, form four words each of four letters which, when placed correctly in the grid, will form a magic square in which the words can be read both horizontally and vertically.

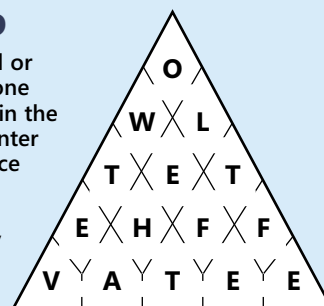
BOX CLEVER

Fill the 6x6 grid with as many boxes as there are numbers printed. Each box must be either square or rectangular and must contain just one of the numbers. The numbers show how many squares there should be in each box.

		3			
	2		6		
	4				
5			9		
		2			
				5	

WORD PYRAMID

Spell out a 15-letter word or phrase by moving from one chamber to another within the pyramid. You may only enter each of the chambers once and may only proceed through openings in the walls. The first letter may appear in any of the chambers.



SOLUTIONS

TWO-TIMER CROSSWORD:
Across - 1 Cold-blooded; 7 Mona Lisa; 8 & 21 Tail Wind; 9 Lunk; 11 Underdog; 13 Idiom; 14 Snake; 16 Topliner; 18 Drug; 22 Once-over; 23 Ceaselessly.
Down - 1 Complaint; 2 Lunar; 3 Bile; 4 Orsino; 5 Enthroned; 6 Fido; 10 Knowledge; 12 Glengarry; 15 Seance; 17 Omit; 19 Roves; 20 Fete.
WORD PYRAMID: Have two left feet.
MAGIC SQUARE: swim; wise; isle; meet.

QUICK CHALLENGE: 1 Lunge; 2 Status Quo; 3 A Brief History of Time; 4 Sheffield United; 5 India; 6 Cat; 7 A Beautiful Mind; 8 George II; 9 Fleabag; 10 Fe.
CROSS CODE:
14 C 15 X 16 V 17 W 18 Y 19 T 20 S 21 Q 22 U 23 M 24 D 25 Z 26 G
J 2 B 3 N 4 R 5 P 6 K 7 F 8 L 9 O 10 I 11 E 12 A 13 H
3 2 1 5 7 4 6 8
6 7 8 4 3 2 2 1 9 5
3 2 1 9 1 5 7 4 6 8
4 5 1 6 9 8 2 7 3

		5		
	2			
		9		5
			4	
		6	2	
			3	

1	3	5	9	5	9	8	6	7	2	4
2	9	6	7	4	3	5	8	1		
7	8	4	2	1	5	9	3	6		
9	1	2	3	6	4	8	5	7		
8	6	7	5	2	1	3	4	9		
5	4	3	8	7	9	6	1	2		
6	7	8	4	3	2	2	1	9	5	
3	2	1	5	7	4	6	8			
4	5	1	6	9	8	2	7	3		