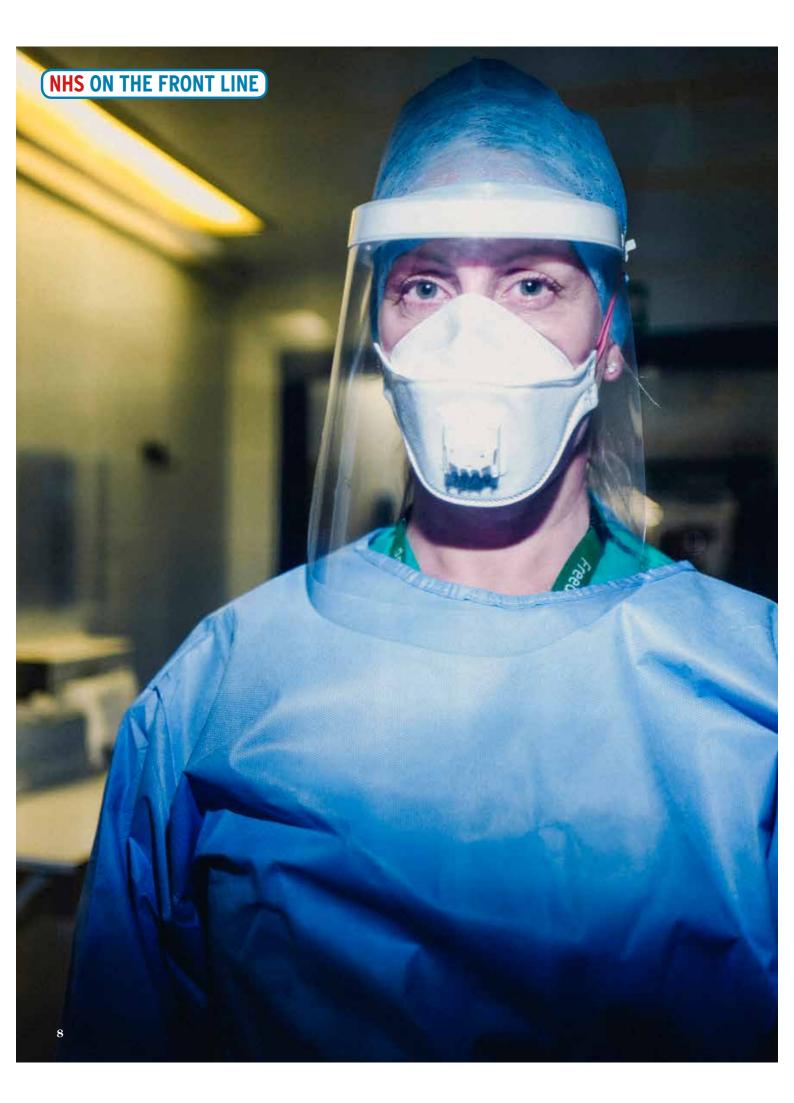
Pacific 19-15 MAY 2020 9-15 MAY 2020 9-15 MAY 2020 9-15 MAY 2020

OUR NHS HEROES The DDC takes us into a framiling begained in the

The BBC takes us into a frontline hospital in the most important documentary you will see this year

Hospital Special: Fighting Covid-19 Monday, Tuesday BBC2



We feel ike were going to war

As the Royal Free Hospital invites the BBC to witness life and death on the Covid-19 front line, ICU matron **Sinead Hanton** tells *RT* why everyone must watch this film – and how our clapping keeps her going

> INTERVIEW BY ROSIE MILLARD

OR ANYONE WHO doubts that clapping on your doorstep to support members of the frontline NHS staff has an effect, read on. This is the account of Sinead Hanton matron in the intensive

Hanton, matron in the intensive care unit at London's Royal Free Hospital. "Every time I hear or see the clapping, it makes me very, very emotional," she says. "We feel like we're going to war, and every day I arrive at work I pray for strength to help me get through another day. On Thursday evenings I'm still at work. We gather on the fourth floor, open the window and listen to the clapping. It's very emotional. There's not a dry eye in the house."

Matron Hanton's strength, resilience and humanity will be displayed to the nation this week in the latest series of *Hospital*. The awardwinning observational documentary, which over five series has sent crews into hospitals across England, returns for two fast-turnaround programmes made during lockdown at the Royal Free and its sister institution, Barnet Hospital, also in north London. The crews were in from day one and at the heart of the onslaught; they are by Hanton's side in intensive care.

As one of the senior nurses in ICU, one would have thought this might have been the last thing Hanton would have wanted, but no. "We welcomed them in," she says. "We wanted to show what goes on inside." As the pandemic swept across the capital, she describes how, just as swiftly, the hospitals restructured to cope: staff were redeployed, reskilled, put into fresh teams, put onto the front line.

"When I look back on this moment and realise how many new things we've had to learn very quickly, and how we've got stuck in together, it's been remarkable."

Hanton's role as matron, a position originally created to police the prevention and control of infection in hospitals, was clearly pivotal. "We redeployed surgeons, we brought junior doctors in. We started talking to surgeons and anaesthetists, dealing with them on a very human level. Intensive care is usually isolated from the outside world, but here we are working and coming together as a team. People now realise how busy intensive care is, and how hard we work to keep our patients safe." Indeed, she thinks the altered hospital structure will be long-lasting. "After this, I think the teamwork is going to change."

Didn't she find the cameras intrusive? "I'm quite a shy person, but television does give an insight into how we work. It's an excellent platform to show people what goes on, how patients are looked after on a 24-hour basis, that someone is with them all the time."

PIVOTAL

Sinead Hanton is

the matron of the

intensive care unit at London's Royal Free Hospital: "People

now realise how hard

patients safe

e work to keep our

Even those closest to Hanton, it seems, have no idea what actually goes on in her \triangleright



The numbers of patients who have died or been treated successfully at the Royal Free since the virus outbreak in March. Statistics correct at time of going to press

⊲ day. "When my husband saw Fergus Walsh's reports on the intensive care unit at University College Hospital in London [see page 12], he said, 'Gosh, I didn't realise it was like that in ICU. Do you actually work like that?' I told him, 'That is a normal day for us.'"

These "normal" days will be condensed into two nights' viewing on Monday and Tuesday. The programme's executive producer Jackie Waldock said very strict filming protocols were agreed with the Royal Free before her filming teams moved in. "My crews didn't go into areas where full personal protective equipment [PPE] was needed, because we didn't feel it was appropriate to use the hospital's equipment. We filmed outside the clinical areas and then, when we wanted to go in, we gave a couple of the clinicians a Go Pro camera and they would film specific patients for us. We never asked them to stop working and we didn't get in the way."

Can everything be shown just in two episodes? Waldock can see the value in continuing the shoot. "We are in talks with the BBC about another series. I don't know if that will happen. But if we do go back, it will still be ongoing, and it would be fascinating to see how the NHS manages to get back to treating people with all the medical complaints that have had to be postponed."

What the films will show is Sinead Hanton's ward almost doubling in size from 38 to 69 beds, and even with redeployment of staff the pressure is clearly very real. "In intensive care we typically give one-on-one nursing. We are now obliged to have a ratio of one nurse to three patients, but with extra nursing support. There is still someone with them at all times. When patients are so sick that their relatives can't be there, that is very tough. But even when people are dying, we reassure the relations that we are there. Always."

Death has become an all too familiar reality of this pandemic and the Royal Free Trust has suffered a higher body count than most – though, of course, comparisons with Trusts of differing sizes isn't useful. At the time of going to press there had been 437 deaths attributed to Covid-19. On the Trust's worst day, on 7 April, 30 patients died. On the plus side, 785 patients who tested positive for Covid recovered after treatment and have been discharged.

HE HOPES THE public will take away two vital things from the programmes. First, that at the Royal Free NHS Trust, at least, there is enough PPE to go round in intensive care. "The PPE is reviewed daily and taken very seriously. We have never run out. We're working hard to make sure our staff are made to feel supported, and when we see headlines like staff are exposing themselves unnecessarily, that [in our case] is wrong."

The other thing? That when the general public sees in the programmes just how many patients are gravely ill, that the overarching message about social behaviour will be at last drummed into our heads.

"You see people still going to parks," says Hanton, with incredulity. "And that is very upsetting. Once this programme has aired, I think it will show people how important it is to to keep my distance from my son, who is four. I miss him"

stressful for the staff and upsetting to see what is happening to our patients. It's really important to get the message out. I knew we would have a spike a couple of weeks after Easter, because we knew that people were going out socialising and having parties. And that is exactly what happened. People don't see, they don't understand the impact to the hospitals on staff and patients."

BEHIND THE MASK Sinead Hanton: "I try

•When people are dying, we are there. Always⁹

How does she cope with the daily impact? "I have a debrief with the other matrons and senior staff members at the end of each day. We talk about what went well or what didn't. We often have a little cry. Then I go home. I try to keep my distance from my son, who is four. I stay in another room from him, and I miss him. But I unwind at home. My husband is a musician and he plays lots of music and sings songs he has written for the NHS. We live in the country, and I take my dog Benson for walks. He's a staffie crossed with a boxer and weighs around 40kg. When we get back, he sits on my lap."

What? "Yes, I know. It's like having a mini horse on my knee. I got him from Battersea 11 years ago. He's my therapist. I have dog therapy."

NHS ON THE FRONT LINE