

NHS HEALTH NEWS

Greater Glasgow



ANNUAL REPORT
SPECIAL EDITION

PAGES 5, 6, 7 AND 8

WINTER 2005

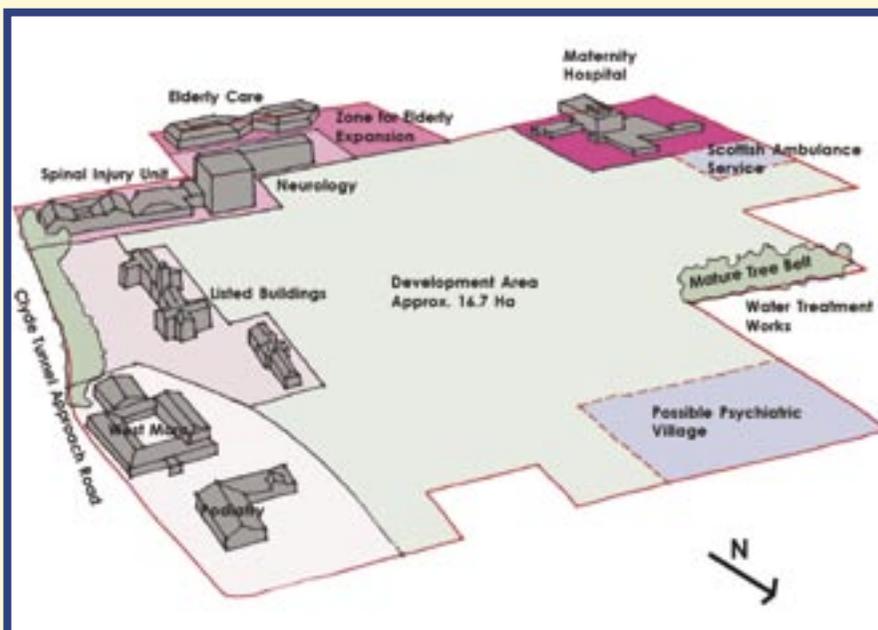
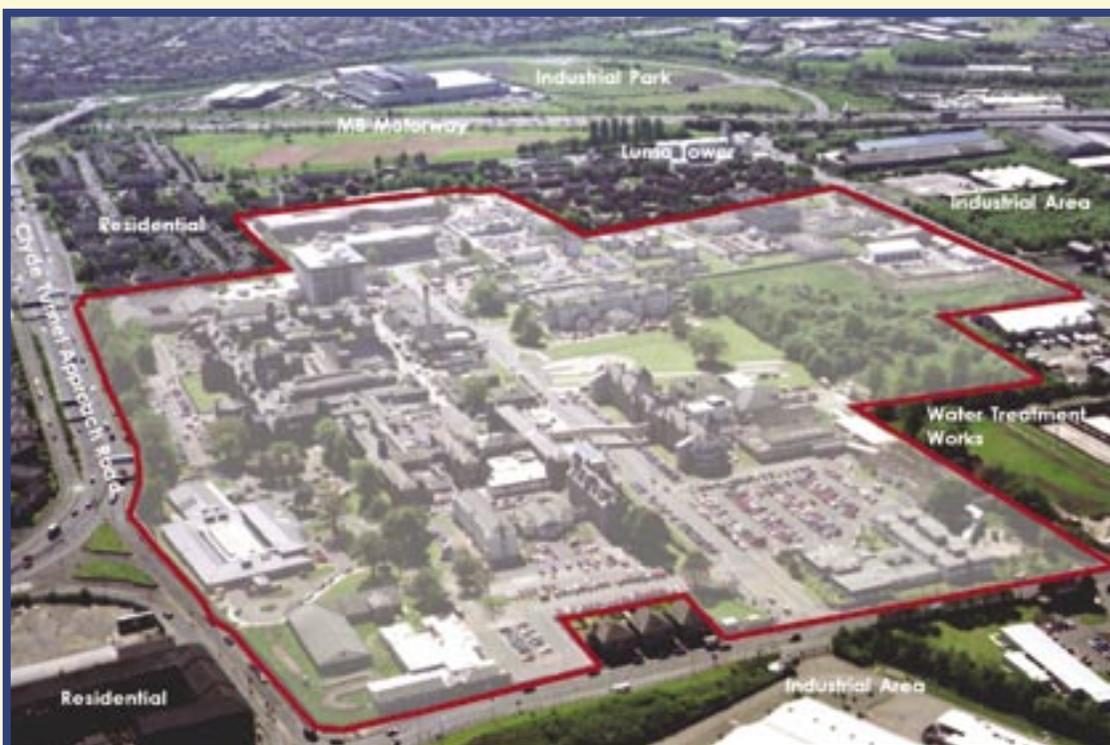
Modernising services and improving health

It's the size of 17
George Squares

It's the site of
the UK's biggest
hospital ...

It's your
£350m

New South Glasgow Hospital



Turning
a blank
canvas
into the
finest
medical
facility
in the
country

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CARDIO CENTRE
OF EXCELLENCE
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INNOVATION AND
INVESTMENT BOOST
MENTAL HEALTH CARE

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PARENTS HAVE
THEIR SAY ON SEX
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For more information about NHS Greater Glasgow ... log on to our website at www.nhsgg.org.uk



UK's biggest hospital redevelopment

Leading the fight against cancer

WE all know someone who's had cancer and one in three of us will contract some form of the disease in our lifetime. So it's reassuring to know that NHS Greater Glasgow is at the forefront of bringing modern cancer services to the city.

We're investing millions of pounds into cancer services to ensure our patients get the very best, high tech care.

So what can we expect to see happening in cancer services over the coming year?

A new £685,610 CT scanner - specialist X-ray equipment which helps doctors detect cancers - is being installed at the Western Infirmary. This new high tech scanner works much quicker than earlier machines which means cancer staff will be able to see, investigate and diagnose more people, more quickly. It also means more advanced scan techniques can be used.



A NEW £685,000 CT scanner, like the one above, is being installed at the Western Infirmary.

At the Gartnavel Hospital site, Phase II of the £100million West of Scotland Cancer Centre (also called the new Beatson) is really taking shape.

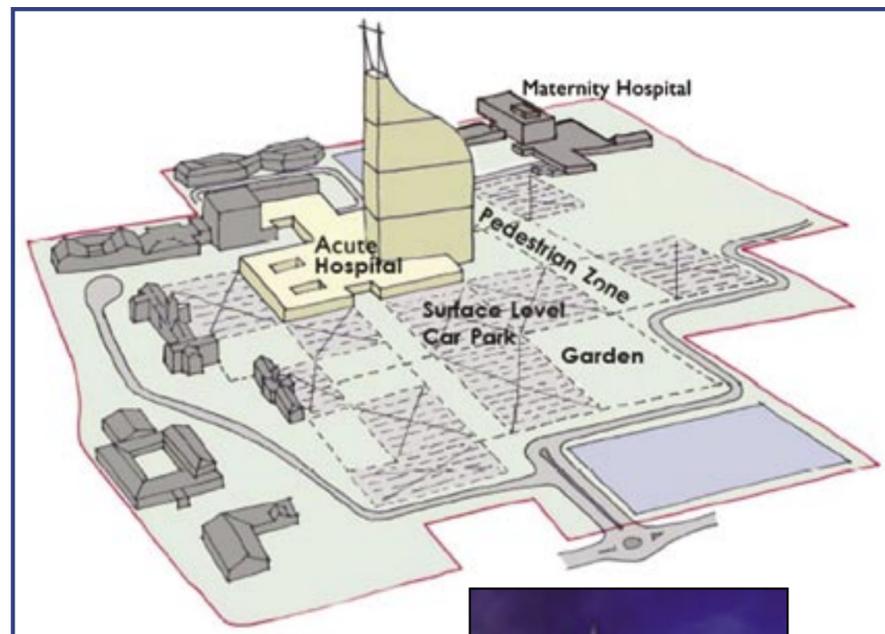
Over the coming 12 months, a whole range of new equipment will be installed in readiness for the 2007 opening. These include:

- An additional MRI scanner and an additional CT scanner
- £4million worth of radiation therapy machines, three in total, which will be ready for use by October next year, followed by three more in late 2006
- New equipment for brain radiotherapy, which will be treating patients by the end of this year
- Intensity modulated radiotherapy (IMRT) for the treatment of (initially) prostate and head and neck cancers - this state-of-the-art technology allows cancer specialists to concentrate radiation more finely than before meaning that less healthy tissue will be affected by the treatment
- At least one CT simulator
- Three special radiation treatment machines using radioactive materials for short distance treatment, for instance for treating cancers in the prostate and cervix
- The new £8 million haemato-oncology laboratories

And plans are in progress to bring the very first PET-CT scanner to the West of Scotland - the machine is a combined CT scanner (which shows structure, such as the organs, tumours and where they are) and a PET scanner (which shows where, in the body, injected radioactive chemicals are concentrated). The PET-CT scanner allows the structure and chemical activity to be matched to allow better diagnosis.

The new building will also have its own operating theatre and eight special rooms for radioactive treatments.

At next door's Tom Wheldon building (phase I of the new Beatson), five treatment machines are also being upgraded.



A hospital to rival the best in Europe

WITH the first phase of NHS Greater Glasgow's hospital modernisation programme well underway, attention is now being focused on the next major development - the £350 million development of the Southern General campus.

The new South Glasgow Hospital will transform the quality of inpatient care, replacing ageing buildings with purpose-designed, state-of-the-art facilities.

The ultimate

THE new 1100 bed South Glasgow Hospital will open in 2010-11. And with 400 existing beds also remaining on site, the entire campus will have more than 1500 beds - making it the largest acute hospital in the UK.

Considerable investment will also be made to refurbish and substantially upgrade the retained buildings.

The new South Glasgow Hospital will provide all inpatient services for the southside of the city and many services for the

west of the city.

It will also house major specialised services - such as renal medicine and transplantation and vascular surgery for all of Glasgow and beyond.

When the hospital opens, the remaining inpatient beds at the Victoria will close.

The new hospital will be equipped with the largest A&E department in Scotland, with full back-up for the treatment of major trauma 24 hours a day, seven days a week.

It will also continue to provide key services for the West of Scotland such as the Institute of Neurosciences, and in the case of National Spinal Injuries Unit, for



ABOVE: ONE of the possible designs mirrors the famous Burj Al Arab Hotel (left) in Dubai.

the whole of Scotland.

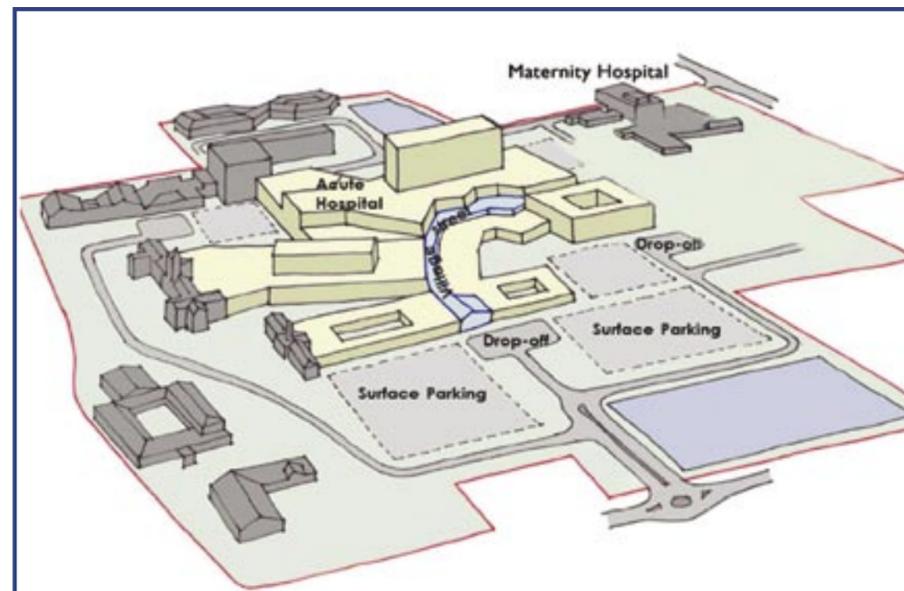
With all the latest available technologies, the new South Glasgow Hospital will be one of the most advanced hospitals in Europe.

A design fit for the best

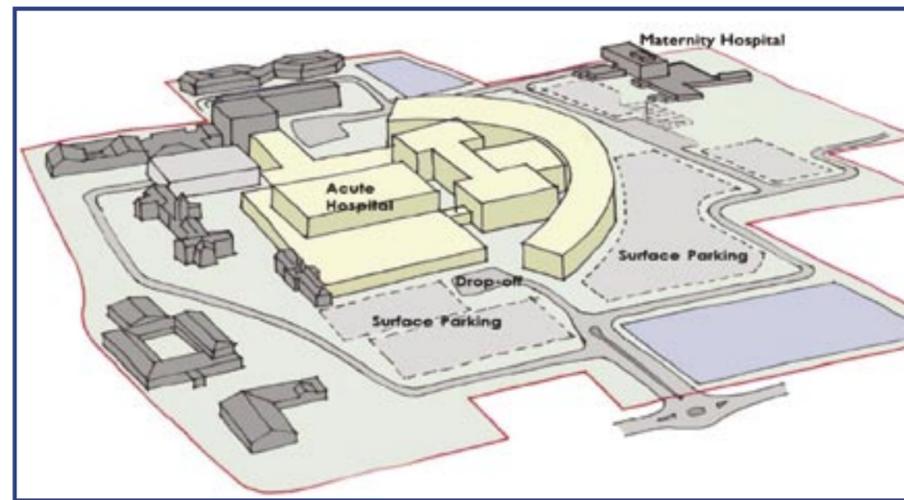
PLANNING for such a major development needs to get underway long before building work starts. Choosing the design of the hospital will be a critical element of this.

Robert Calderwood, Programme Director of the Acute Services Review, explained: "The new

is set for opening in 2010



THE planning and building team will talk to patients before finalising the eventual look and style of the New South Glasgow Hospital. A couple of early ideas can be seen above and below.



in health care

South Glasgow Hospital will be the largest in the UK. The challenge for the team responsible for designing and building the hospital will be to ensure that the size of the hospital enhances, not impedes, patient care.

"It will also need to ensure that close links are achieved between the brand new hospital and the buildings we are retaining.

"We will be looking for innovative designs to ensure that the new South Glasgow Hospital has leading-edge facilities to rival the best in Europe."

And patients and the public will also be able to have their say on the designs of the new hospital. To help us get it right, we are seeking the views of patients on what they want from their new hospital.

Investing in the local area

NOT only will the new hospital bring the obvious benefits to the people of Glasgow, it will also make a major contribution to the ongoing regeneration and development of the area.

Construction work is due to get underway in late 2008 creating many new jobs with links already forged with Govan Initiative and Scottish Enterprise to ensure that all opportunities to invest in the local community are explored.

Looking forward Robert Calderwood said: "This is a very exciting time. The hospital has a long history with some of our

buildings dating back to the time of the Crimean War. We are now moving into a new era, beginning a process to create a hospital to be proud of."

The New South Glasgow Hospital - proposed timetable

- Summer 2005 - Planning gets underway
- Spring/Summer 2007 - Design and build team selected
- Autumn 2008 - Construction begins
- 2010-11 - New Hospital opens



Smoke free hospitals and the grounds too!

GLASGOW'S hospitals and health centres are to be a smoke-free zone.

From March next year, smoking will be banned in all our healthcare facilities and sites, including car parks and entrances to buildings.

It won't happen overnight. The new smoking ban will come into effect on a 12-month phased basis.

The ban - which is in line with the introduction of the Scottish Parliament's Smoking, Health and Social Care (Scotland) Act 2005 - comes following the development of a smoking policy by NHS Greater Glasgow, which was drawn up following comprehensive consultation with staff, patients, the public and representative groups earlier in 2005.

The new smoking policy aims to protect staff, visitors and patients from the effects of tobacco smoke and recognises the role NHS Greater Glasgow should play in improving health and reducing smoking rates in Greater Glasgow.

It also highlights the Board's commitment to supporting good health and new smoking cessation services will be introduced to help staff and patients to quit.

The ban will cover all of NHS Greater Glasgow's healthcare sites, including our hospitals, health centres, offices, car parks and grounds.

However, there will be exceptions including residential care homes and long stay psychiatric facilities that are, in effect, a patient's home.

Evelyn Borland, Acting Director of Health Promotion said: "The results of the consultation show that the overwhelming majority of staff and public support the policy and welcome the Board's unequivocal commitment to reducing ill-health caused by smoking."

Pick up your new hospital DVD

WANT to find out about your new Stobhill and Victoria Hospitals or the new Beatson? Then pick up one of our brand new DVDs!

Available free-of-charge from Stobhill Hospital and the Victoria Infirmary, the DVD answers all your questions and features a virtual tour of the new hospitals. It also has a special feature on the new Beatson. If you can't get along to one of the hospitals and would still like to receive a copy of the DVD, telephone: 0141 201 4857 or write to: DVD Offer, Communications Department, NHS Greater Glasgow, Dalian House, 350 St Vincent Street, Glasgow, G3 8YZ.

New heart and lung centre is approved

PLANS to create one of the UK's largest specialist heart and lung surgery units have been given the seal of approval by NHS staff, patients, carers and others.

After a detailed consultation exercise involving all interested parties, proposals to open the new unit at the Golden Jubilee National Hospital in Clydebank were given the thumbs up.

Originally, the centre was to be based within Gartnavel General Hospital with a provisional opening date of 2012.

But thanks to the hard work of doctors and other staff from NHS Greater Glasgow, NHS Lanarkshire and Golden Jubilee National Hospital over the past two years, plans have been formulated that mean it will move to the Golden Jubilee instead - sooner rather than later.

One of the lead doctors on the team from Greater Glasgow is cardiothoracic surgeon, Mr Alan Faichney.



ALAN FAICHNEY... high quality treatment

He said: "I am delighted that the public and others have supported our proposals. The centralisation of heart and lung surgery services will create one of the largest specialist units in the UK for the investigation and surgical treatment of heart and lung conditions. Clinical expertise and high-tech equipment will be concentrated on one site, offering patients in the West of Scotland timely, high quality treatment in a modern custom-built facility."

The plans will now be submitted to the Minister for Health for approval.

The consultation also proposed that planned interventional cardiology should transfer to the Golden Jubilee National Hospital with emergency cases remaining in Glasgow. Interventional cardiology covers a range of diagnostic

and therapeutic procedures, including angiography and balloon angioplasty, used in the treatment of certain heart conditions.

In their responses to consultation, consultant cardiologists expressed different views about the proposed interventional cardiology model. In the three months since the consultation ended, a consensus view has emerged amongst this group of doctors that all interventional cardiology should transfer to the Golden Jubilee National Hospital.

Tom Divers, NHS Greater Glasgow's Chief Executive, explained: "In developing our proposals, it has always been clear that the West of Scotland heart and lung surgery service would benefit from being located alongside

interventional cardiology. The question for debate following consultants' responses was how much interventional cardiology should go to Golden Jubilee and how much should be retained in Glasgow.

"The cardiologists have told us that they believe the whole service should transfer.

We now need to take a close look at this along with our colleagues in the rest of the West of Scotland. That is why the Board have agreed to commission a review over the coming months to look in detail at this question."

NHS Greater Glasgow will now carry out a review of interventional cardiology over the coming months to examine whether all interventional cardiology should transfer to the Golden Jubilee.

The review will include clinical staff from NHS Greater Glasgow and the West of Scotland. It will also involve surrounding health board areas to ensure that any future plans for the service being considered by other West of Scotland health boards are taken into account.



Let us know if you have a drug or latex allergy

IF you have an allergy - especially an allergy to latex or certain drugs - you must let us know.

Allergies are something that people learn to live with by avoiding whatever item gives them the allergic reaction.

Many people, however, forget to mention their allergies whenever they come into contact with healthcare staff. Whether it's a visit to hospital, attending a clinic, visiting a dentist or contact with ambulance staff.

People can take allergic reactions to many everyday

things including medicines, food and in, some cases, latex.

NHS Greater Glasgow is working with the National Patient Safety Agency (NPSA) to encourage patients to make healthcare staff aware of any allergies they have before receiving any treatment.

This will allow our staff to work round your allergy during treatment. For instance, an allergy to latex is one of the common problems that patients face and if we know about it, we can ensure you don't come into contact with it during treatment.

Actress opens blood diseases unit

STAR of stage and screen, Maureen Lipman officially opened the Southern General's new haematology (blood diseases) unit this month.

Miss Lipman, whose husband, the playwright Jack Rosenthal died from myeloma (a type of blood cancer), met with staff and former patients at the opening.

The new unit at the Southern has been fully refurbished and designed with the patients' wellbeing in mind. Named "Solas", which is Gaelic for light, the unit is designed to

help patients, their families and friends at what can often be a very difficult time.

The unit has 18 beds, six single rooms all with en suite facilities and three four-bedded bays.

The majority of patients in the unit are receiving treatment for haematological malignancies such as leukaemia, lymphoma and myeloma. They may receive intensive chemotherapy, and in some cases autologous stem cell transplants, such treatments need very skilled nursing and medical care.

Dr Anne Morrison, Consultant in Haematology at the Southern General said: "A single in-patient haematology unit for South Glasgow means that medical and nursing staff from both the Southern and the Victoria Infirmary can work together to provide the highest standard of patient care, combining skills and expertise from both sites.

"In addition, the unit is supported by the dedicated work of a multi-disciplinary team, including pharmacy, dietetics, physiotherapy, radiology and

Improving GP out of hours care

FROM October this year, a new Emergency Care Information Scheme is being introduced across the city allowing GP practices to share information electronically with NHS Greater Glasgow's GP out-of-hours service (NHS GEMS).

This means that if you are referred to NHS GEMS for advice or treatment, the nurse or doctor will be able to look up emergency care information from your GP record. This includes details of any prescription drugs you are taking and any allergies you may have.

Any patient who does not wish to have their GP information made available to the out-of-hours service can opt out of the scheme by telling their GP practice.

New out of hours minor illness scheme

A NEW out-of-hours service that will help patients with minor illnesses has been introduced in Glasgow.

The new nurse-led Minor Illness Service has been introduced by NHS Greater Glasgow to further increase the range of out-of-hours services available.

The service will be provided by ten experienced nurses who will work alongside GPs to assess and treat a range of common minor illnesses including sore throats, earache and vomiting.

THE last 12 months have been really busy for the 33,000 staff who work for NHS Greater Glasgow.

And we've achieved a great deal during 2004/05, introducing a wide range of new initiatives to improve the health of local people, modernise our services, reduce waiting times and tackle infections.

Modernising Our Services

In September 2004, the Scottish Executive announced £100m would be available to build a brand new children's hospital in Glasgow on a site alongside adult and maternity hospital services. We are currently working with the Calder Group (the advisory group which will consider our proposals to identify and select a site for the new hospital) to deliver a new world-class children's hospital for the people of Glasgow and beyond.

During the last year significant resources were also invested to improve and extend local health centres and clinics across the city. These included the new Community Centre for Health in Partick and the new Easterhouse Community Health Centre.

Reducing Waiting Times

During the last year we either met or exceeded national targets for inpatient treatment. We also made good progress towards meeting the new 26-week national target for inpatient and outpatient treatment. In addition, we also:

- Met new 18-week targets for treating heart disease.
- Made use of additional capacity at the Golden Jubilee National Hospital to carry out a range of operations, scans and tests.
- Used space capacity in two local private hospitals to treat patients waiting for orthopaedic treatment.
- Dramatically improved orthopaedic waiting times at Glasgow Royal Infirmary through the use of specially trained physiotherapists, nurses and podiatrists. This innovative approach increased the number of new referrals seen at orthopaedic outpatient clinics and the number of hip and knee replacements performed per month by 200%.
- Worked towards meeting the two-month waiting time target for cancer. Although there were periods during the last year where we met this target for breast cancer, we recognise that more needs to be done to achieve this target for the treatment of other types of cancer such as colorectal, ovarian and lung cancer. We have therefore developed an action plan to improve our performance and will continue to target resources to parts of the service where there are known delays.



Health Improvement

Helping people to stop smoking

Over the last year, we continued to develop a wide range of services to help people give up smoking. This included expanding the 'Starting Fresh' pharmacy scheme, developing services in maternity hospitals to help pregnant women to give up smoking and piloting a new service to help patients who are admitted to hospital, to quit.

Promoting good health

During 2004/05, we developed the Glasgow Physical Activity Strategy and a range of services to improve the health of local people. These included a new programme to tackle obesity and the roll-out of the successful GP Exercise Referral Scheme across East Renfrewshire and East and West Dunbartonshire. A new Oral Health (Dental) Strategy was also developed.

Encouraging Healthy Eating

We continued to support a wide range of initiatives to encourage healthy eating and good oral health. These included school breakfast clubs and the Fruit in Schools/Refresh initiatives.

Healthy Communities

Supporting employment

Over the last year we supported a range of initiatives designed to help people get back into work.

These included 'Working for Health in Greater Glasgow', which offers long-term unemployed people a six-week training course and the opportunity to apply for full-time jobs within NHS Greater Glasgow, and 'The Compass Project' - a new initiative involving GP practices in the Pollok area which supports patients to take up training and employment opportunities.

Promoting racial equality

During 2004/5 we carried out a study to identify the health needs of Pakistani, Indian and Afro-Caribbean people in Greater Glasgow

Fighting Infection

According to the results of a national assessment, infection control standards have improved significantly across NHS Greater Glasgow.

The review, which was carried out in 2005 by Quality Improvement Scotland (QIS), also highlighted several examples of good practice. These included the development of a new Prevention and Control of Infection Strategy and the introduction of new action plans to tackle areas that require improvement.

In the last year, we also took forward a wide range of initiatives in response to the 2004 Healthcare Associated Infection (HAI) Taskforce. These included the launch of a high profile campaign for staff and members of the public to increase awareness of a new alcohol hand washing programme.

Balancing our budget

In 2004/05, the first year of our two-year financial recovery plan, we implemented a major cost savings plan. This included savings generated by reduced prescribing costs and the redesign of many of our clinical services. This work ensured we managed to break even at the end of the year. Many of the changes made during 2004/05 will generate savings year-on-year. These will be reinvested in 2005/06 to help meet the financial targets during the second year of our recovery plan and, in the longer term, to drive new initiatives to further improve the effectiveness and efficiency of our organisation.

Working in Partnership

As well as building on our partnerships with local authorities and other organisations, we've been developing and building upon the methods we use to speak to and work with our patients and local communities.

A new Involving People Committee was established during the year. This formal sub-committee of the NHS Board will monitor patient focus and public involvement work across Greater Glasgow.

During 2004/05 we staged two 'Our Health' events to allow patients, the public and partner organisations to come together with NHS Greater Glasgow Board members to discuss the challenges and choices ahead. A third 'Our Health' event focussing on our hospital modernisation plans was held in August.



ANNUAL REPORT

A YEAR OF PROGRESS AND CHALLENGE



Paving the way for a bright new future

By Professor Sir John Arbuthnott, Chairman NHS Greater Glasgow

ASK me to sum up the past year and I would say that we began with an enormous challenge.

Financial constraints meant that we've had to make difficult decisions, but, most importantly, we had to maintain the head of steam on reshaping and improving our services for patients. The long-term aim of dealing with health inequalities was also never far from my mind.

I'm delighted to say that all our financial and waiting times targets were met over this year and I'd like to personally thank all staff for their fantastic effort in helping us meet them.

We've also seen our ambitious £750 million hospital modernisation programme start to become a physical reality with the construction of the new Beatson at Gartnavel. The new five-storey building is now up and is well on target for its early 2007 opening.

We'll see a whole range of new equipment being installed in the new building including the very first PET-CT scanner in the West of Scotland.

Detailed planning of the new Stobhill and Victoria Hospitals has continued over the last 12 months and we're now in the final months of negotiations with Canmore to build the new hospitals. Site preparations will begin before Christmas and we look forward to seeing building work start on the two new hospitals - which have a combined cost of around £210 million - next year.

Changes have also been taking place in our Mental Health Services. In October last year, we were delighted to open Eriskay House, a new purpose-built 15-bed inpatient ward on the Stobhill site which offers a range of services for people with drug and alcohol problems.

In the same month, we also officially opened Scotland's first Mother and Baby Mental Health Unit at the Southern General to care for new mothers with mental health problems, including postnatal depression.

And, in February this year, we approved plans to develop a new £19 million state-of-the-art mental health hospital to replace the existing Gartnavel Royal Hospital which is due for completion by mid 2007.

Of course, caring for people with

mental health problems is not just about buildings. Over the last year, we moved to complete our transformation of our Mental Health Services. Apart from new units, this £90 million redesign programme also included significant investment in community services which will benefit a wide range of patients.

Another huge piece of work undertaken over the past year was in the formation of the new Community Health Partnerships/Community Health Social Care Partnerships.

These new organisations replace Local Health Care Cooperatives and will be responsible for managing a wide range of community based health services and, along with local authorities, potentially other care services. They will also play a major role in driving health improvement programmes locally.

The Centre for Population Health is now up-and-running and we will hear soon about some very exciting work on new approaches to tackling the City's deep seated health problems.

So, we've just completed a very busy year where we've seen a lot of good things happening across NHS Greater Glasgow and we must not lose that momentum for the coming year.

The year 2005-2006 promises to be equally packed and we've got a lot of work to do in a number of areas. This includes ensuring we deliver the December 2005 waiting times standards of no

patient waiting more than 26 weeks for a first outpatient appointment and ensuring we secure a recurring financial balance to pave the way for a five year investment plan.

In 2005-2006, we will also work to complete our move to 'single system working', which means where previously we were four Trusts and a Board, we are all now one organisation.

We will also work to achieve a smooth integration of NHS Argyll & Clyde's health services into NHS Greater Glasgow - NHS Argyll & Clyde is being dissolved and its services are being split between NHS Greater Glasgow and NHS Highland. We are currently awaiting the outcome of a Scottish Executive consultation on where the new boundaries should be.



NHS GREATER GLASGOW - ACUTE HOSPITAL INPATIENT AND DAY CASE ADMISSIONS 2004 - 2005

SPECIALTY SURGERY/PROCEDURE	PLANNED	EMERGENCY	TOTAL
Bladder function etc	13,079	3,236	16,315
Ear, Nose and Throat	4,286	1,403	5,689
Eyes (Ophthalmology)	7,261	560	7,821
Female Reproduction (Gynaecology)	9,492	2,291	11,783
Hips, knees, back pain (Orthopaedic)	8,331	7,806	16,137
Scar repair, skin cancers, breast reconstruction (Plastic Surgery)	7,363	1,672	9,034
Brain (Neurosurgery)	1,584	1,539	3,123
Brain (Neurology)	1,669	508	2,177
Children (Paediatrics)	10,817	10,675	21,492
Cancer (Clinical Oncology)	14,408	1,221	15,629
Cancer (Medical Oncology)	9,536	457	9,993

SPECIALTY SURGERY/PROCEDURE	PLANNED	EMERGENCY	TOTAL
General Surgery General Surgery, Oral Surgery, Vascular Surgery, Thoracic Surgery, Restorative Dentistry.	26,169	20,579	46,748
Heart Cardiology, CCU, Cardiothoracic, Cardiac Surgery.	7,171	7,761	14,932
Medicine General, Geriatric, Haematology, Respiratory, Gastroenterology, Nephrology, Communicable Disease, Endocrinology, ITU, Rheumatology, Diagnostic Radiology, Accident & Emergency, Anaesthetics, Dermatology, Homoeopathy, Palliative, Genitourinary.	39,720	82,725	122,445
TOTAL INPATIENT AND DAY CASE ACTIVITY (To be validated by Information Services Division)	160,885	142,433	303,318
2003/2004 SMR01	155,110	138,598	293,708
Change to 2004/2005	+5775	+3835	+3835
Percentage Change to 2004/2005	+4 percent	+3 percent	+3 percent

LIST OF HOSPITAL CONTACT NUMBERS

Western Infirmary 0141 211 2000	Drumchapel Hospital 0141 211 6000	Mearnskirk House 0141 211 9400
Gartnavel General Hospital 0141 211 3000	Stobhill Hospital 0141 201 3000	Gartnavel Royal 0141 211 3600
Glasgow Royal Infirmary 0141 211 4000	Lightburn Hospital 0141 211 1500	Parkhead 0141 211 8300
Princess Royal Maternity 0141 211 5400	Glasgow Homoeopathic Hospital 0141 211 1600	Leverdale 0141 211 6400
Glasgow Dental Hospital 0141 211 9600	Southern General 0141 201 1100	Royal Hospital for Sick Children, Yorkhill 0141 201 0000
Blawarthill Hospital 0141 211 9000	Victoria Infirmary 0141 201 6000	Queen Mother's Maternity Hospital, Yorkhill 0141 201 0550
	Mansionhouse Unit 0141 201 6161	

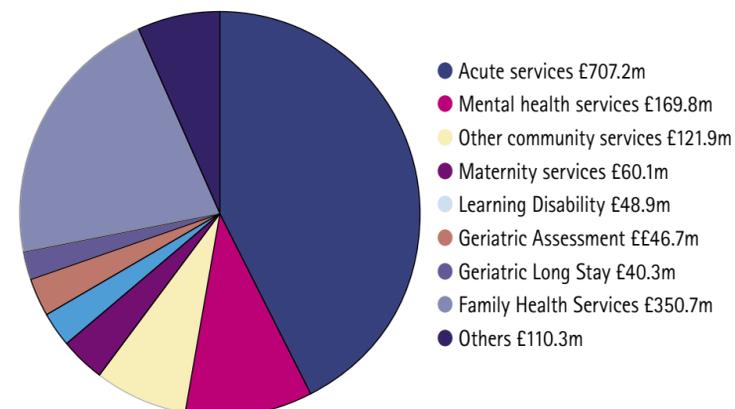
PERFORMANCE AGAINST FINANCIAL TARGETS

The Scottish Executive set three budget limits at a NHS Board Level on an annual basis. NHS Boards are expected to stay within these limits. The consolidated performance against these limits during 2004/05 was as follows:

	Limit as set by SEHD £'000	Actual £'000	Variance (Over)/Under £'000
1 Revenue Resource limit	1,280,160	1,268,057	12,103
2 Capital Resource Limit	66,213	66,154	59
3 Cash Requirement	1,219,000	1,218,709	291

Financial Information

Gross expenditure on Clinical Services of £1,655.9m is shown in the following chart.



CONSOLIDATED COST STATEMENT

NHS GREATER GLASGOW CONSOLIDATED OPERATING COST STATEMENT
For the year ended 31 March 2005

	2004 £'000	2005 £'000
Clinical Services Costs	1,184,066	1,305,227
Hospital and Community	287,966	321,218
Less: Hospital and Community Income	896,100	984,009
Family Health	324,898	350,677
Less: Family Health Income	15,876	16,168
	309,022	334,509
Total Clinical Services Costs	1,205,122	1,318,518
Administration Costs	11,675	11,721
Less: Administration Income	7	5
	11,668	11,716
Other Non Clinical Services	17,948	21,278
Less: Other Operating Income	19,670	18,198
	(1,722)	3,080
Local Health Councils	247	261
Net Operating Costs	1,215,315	1,333,575
SUMMARY OF REVENUE RESOURCE OUTTURN		
	2004 £'000	2005 £'000
Net Operating Costs (per above)	1,215,315	1,333,575
Less: Capital Grants to / (from) Public Bodies	0	(238)
Less: FHS Non Discretionary Allocation	(117,733)	(64,592)
Less: Local Health Council Allocation/Expenditure	(247)	(261)
Less: Other Allocations (Public Health Trainees)	(465)	(427)
Net Resource Outturn	1,096,870	1,268,057
Revenue Resource Limit	1,101,880	1,280,160
Saving/(excess) against Revenue Resource Limit	5,010	12,103

CONSOLIDATED BALANCE SHEET

NHS GREATER GLASGOW CONSOLIDATED BALANCE SHEET
As at 31 March 2005

	2004 £'000	2005 £'000
FIXED ASSETS		
Intangible Fixed Assets	362	297
Tangible fixed assets	819,656	877,173
Total Fixed Assets	820,018	877,470
Debtors falling due after more than one year	10,657	3,789
CURRENT ASSETS		
Stocks	15,560	16,610
Debtors	33,822	46,399
Investments	0	0
Cash at bank and in hand	7,560	5,476
	56,942	68,485
CURRENT LIABILITIES		
Creditors due within one year	(130,067)	(191,115)
Net current assets/(liabilities)	(73,125)	(122,630)
Total assets less current liabilities	757,550	758,629
CREDITORS DUE AFTER MORE THAN 1 YEAR	(199)	(222)
PROVISIONS FOR LIABILITIES AND CHARGES	(73,256)	(70,330)
	(73,455)	(70,552)
FINANCED BY:		
General Fund	483,993	458,333
Revaluation Reserve	190,656	219,626
Donated Asset Reserve	9,446	10,118
	684,095	688,077

NHS ANNUAL REPORT

Greater Glasgow A YEAR OF PROGRESS AND CHALLENGE

NHS Greater Glasgow came under scrutiny recently when Health Minister, Andy Kerr, held his 2005 Annual Review.

Held in public at the Royal Concert Hall last month, Mr Kerr (pictured right) and his team quizzed senior officials from NHS Greater Glasgow on how health services are provided in Greater Glasgow.

They also met with representatives of the Area Partnership Forum and the Area Clinical Forum.

Here we give a flavour of the key points raised at that meeting, which concludes that NHS Greater Glasgow met its targets and balanced its budget for 2004/2005.

To begin, Professor Sir John Arbutnot, Chair of NHS Greater Glasgow, summarised some of the achievements of the last year. A flavour of that presentation can be found within Sir John's article on page 6.

Mr Kerr followed up on issues raised in the review letter from 2004/2005. He raised a number of issues including NHS Greater Glasgow's partnership working with staff at all levels and how working practises are being developed and modernised.

But the main thrust was the review of performance and future plans.

Health Improvements

NHS Greater Glasgow's work to help smokers give up, was a headline issue. Mr Kerr asked for information on how we were preparing our stop smoking services to deal with the ban on smoking in public places.

Sir John and Harry Burns, NHS Greater Glasgow's then Director of Public Health, took him through some of the work being carried out in Greater Glasgow. This includes Starting Fresh, a successful pharmacy-based stop smoking service and the Smoking in Homes initiative, which is being carried out in partnership with Glasgow City Council and helps parents who smoke to quit.

On this initiative, Mr Kerr said: "...that's very exciting and indeed a fantastic concept as a project..." He said he would like to see this sort of project rolled out "around Scotland as well."

Oral Health

Sir John touched on NHS Greater Glasgow's Oral Health Plan, part of which focuses on tackling dental decay in the under three-year-old age group and the toothbrushing programme.

Dr Harry Burns added: "...the Oral Health Action Teams and the toothbrushing programmes have been astonishingly successful ... I am very optimistic that we will begin to see significant improvements (in child oral health)."

Orthopaedics, Plastic Surgery and Ophthalmology

On waiting times, Mr Divers revealed that NHS Greater Glasgow had "made dramatic progress" over the last year on waiting times for inpatient and day cases. NHS Greater Glasgow is working towards a deadline of December this year to have no patient waiting more than 26 weeks for first appointments within all specialities. The greatest progress required lies with the three specialities of Orthopaedics, Plastic Surgery and Ophthalmology.

He added: "...with a final push over the course of the last four months of this programme, we are confident we have the capacity in place in order to deliver that standard."



"Greater Glasgow's smoking initiative is very exciting and indeed a fantastic project as a concept" - HEALTH MINISTER ANDY KERR (pictured above)

"Greater Glasgow's Oral Health Action Teams and the toothbrushing programmes have been astonishingly successful" - DOCTOR HARRY BURNS

The Minister asked for examples of how the Board approached challenging service areas. Mr Divers then went on to discuss some of the work around orthopaedics, dermatology and endoscopy which has improved services for patients.

Cancer

Sir John and Mr Divers spoke about some of the developments in NHS Greater Glasgow's Cancer Services that were improving waiting times for first appointments, diagnosis and treatment for cancer patients. This included the use of MRI and CT scanners.

However, it wasn't all good news. Sir John concluded: "...we will maximise our improvement in our performance (in treating cancer patients) ... as rapidly as possible. It has proved to be a more difficult area than expected and every aspect of the service is being looked at."

For the latest on cancer services, see page 3 of this edition of your NHSGG Health News.

Availability Status Codes (ASCs)

NHS Greater Glasgow has 1350 people who have service driven ASCs, which means their treatment has been delayed

because the Health Service is unable to provide it within the waiting times targets. Sir John revealed that this was an 8% reduction on last year and that we expected to work through the cases and meet the 2007 target when ASCs will be abolished.

NHS Greater Glasgow ASCs are 85% patient led (ie treatment has been delayed because the patient requests it or is not well enough) and 15% service driven.

Sexual Health

Mr Kerr asked the NHS Greater Glasgow team to highlight the work being carried out in this subject. Sir John highlighted the work of the Teenage Pregnancy Steering Group, which is a joint organisation between NHS Greater Glasgow and Glasgow City Council.

He also spoke about work being carried out relating to the prevention of HIV and AIDs amongst gay and bisexual men and young people and work being carried out to develop sexual health hubs that would provide sexual health services to communities outwith the city centre.

Community Health Partnerships

Tom Divers spoke about the work being carried out by NHS Greater Glasgow on single system working and how staff will work within the new Community Health Partnerships and the Mental Health Partnership.

Community Engagement

Peter Hamilton, NHS Greater Glasgow's Chairman of NHS Greater Glasgow's Involving People Committee, took the Health Minister through all the work being carried out to engage with Greater Glasgow's communities, including the successful 'Our Health' events.

Infection Control

Mr Kerr asked to hear about work being carried out in Infection Control, particularly in hospitals in the north of the city, and said: "I do believe we have launched here in Scotland some good work around the issue of Healthcare Acquired Infection. That's not me saying it, that's others from around the world ... (in Glasgow) I see good progress on that."

Sir John explained that a detailed action plan has been prepared for North Glasgow hospitals where most of the complex cases were treated and they had made significant progress towards meeting all NHSQIS standards.

An Infection Control Manager has been appointed to help further improve infection control rates across the city. He also spoke about the 200 staff members who are currently training to be Cleanliness Champions.

Dr Brian Cowan, NHS Greater Glasgow's Medical Director (Board), spoke about other innovations including NHS Greater Glasgow staff researching into who gets MRSA and why; the employment of additional infection control nurses and the development of a new post - a Nurse Consultant in Infection Control. He also told the Minister about NHS Greater Glasgow's city-wide Infection Control Manual which has standardised infection control practise across Glasgow's hospitals. The impact of alcohol gel washes at the bedside was also highlighted.

Mr Kerr said: "I am reassured by what you say and I'll be interested in how these different innovations roll out and the effect they have."

A letter containing Mr Kerr's full assessment and action plan will be published on our website as soon as we've received it.

GLASGOW parents want children and young people to learn about sexual health and relationships from an earlier age and be taught in a more open and meaningful way.

They would also like more support to help them talk to their children about the subject.

And they are supportive of young people knowing about and using sexual health services.

That's the findings of a new report 'Glasgow Parents' Views and Experiences of Sexual Health and Relationships for Their Children'.

Commissioned by the Glasgow City Council and NHS Greater Glasgow joint Teenage Pregnancy Steering Group, the report is based on a parental consultation.

This was done through a survey and focus groups involving 49 parents who were asked about:

- Their own experiences of sexual health and relationship education
- What their children are learning in the home and at school
- What type of education they would like their children to be given on the subject
- What support they would like to teach their children at home
- Sexual health services available to young people.

Almost 1200 parents of all ages and backgrounds took part and the results were very positive.

Many parents who took part felt that they had received inadequate education themselves and so wanted something better for their own children. Most said they would start sexual health



Let's get out from behind the bikeshed... Parents call for help to teach children facts of life

education earlier and focus particularly on relationships and respect. They wanted to be more open to their children's questions and were keen to access a variety of material - leaflets, books and other means - which would help them do this.

A number of parents felt there should be a more open approach to sexual health education in schools, with

less emphasis on biological aspects and more advice on the emotional aspect of relationships.

Most parents felt that they and schools should have shared responsibility for sexual health education and that boys and girls should receive the same information. An overwhelming majority (93%) also felt that the factual

content of sexual health education should be the same within denominational and non-denominational schools.

When parents of secondary school age children and young people were asked about their views on sexual health services for young people, there was a general consensus that such services were important. They also felt that young people should be informed about and have access to a range of related services.

The findings were welcomed by Councillor Jim Coleman, chair of the Teenage Pregnancy Steering Group, and Tom Divers, Chief Executive of NHS Greater Glasgow.

Councillor Coleman said: "It can only be good news that parents want to play a bigger part in the sex education of their children. If they start at an early age with very basic information it can build up trust which makes it easier to tackle thornier subjects as their children grow up."

Mr Divers said: "This consultation will help us and our Council partners plan more effectively and deliver improved sexual health education and services across the city. We will also be looking at ways of supporting parents so that they have good quality advice and information to give to their children."

A summary of the report 'Glasgow Parents' Views and Experiences of Sexual Health and Relationships for Their Children' is available online at www.glasgow.gov.uk/healthycities

Glasgow City Council and NHS Greater Glasgow are undertaking a similar consultation on the views of children this month.

IT'S A FACT

- 1177 parents took part in the consultation, filling in a paper questionnaire or online
- More women (80%) than men took part
- 39% of respondents were Catholic; 27% Church of Scotland or other Christian; 21% had no religion and 13% were of another faith
- The majority (60%) were under the age of 40
- 57% of parents said their children attended a non-denominational school, 43% said their child went to a denominational school
- The majority (66%) were parents to children under the age of 11; 23% had children aged 11-13; and 11% were parents to young people aged 14-18
- 17% had not received home sexual health education when they were a child and 10% had not received school based sexual health education
- The majority felt that neither their home or school based sexual health education had prepared them for adult life
- Most parents felt that 'softer' topics such as basic feelings and emotions (82%), naming body parts (76%), puberty (60%) and menstruation (57%) might be discussed at home when the child is of primary school age
- They felt that topics such as avoiding pregnancy (72%), abortion (75%), emergency contraception (78%), sexually transmitted infections (75%), lesbian and gay issues (62%) and information on sexual health services (74%) might be discussed when the child is in his or her teens
- The majority felt the timings of discussions should broadly be similar in the home and at school

Giving kids the best start in life

EXTRA funding has been approved to give Glasgow's most vulnerable children the best start in life.

The second phase of the national child health demonstration project, Starting Well, has won financial support to take it through until March 2006.

Its name might seem to sum up its purpose pretty well, but what does Starting Well do? Health News asked Project Manager, Dr Michael Killoran Ross.

He said: "Put simply, NHS Greater Glasgow's Starting Well tries to give children the best start in life. That means the NHS, our colleagues in education, social work and the voluntary sector, working together to support vulnerable families.

"Many things can affect a child's health. Everything matters, from the food they eat, to the conditions in their homes, to the parenting they receive.

"In phase two, we'll be receiving

referrals from colleagues and from the other agencies. For example a health visitor may refer a family who're experiencing particular difficulties.

"In a sense, what we are is a one-stop-shop. We give intensive support over a relatively short timescale, say six months. And that can mean almost anything - some families find it very difficult to get children up and ready for school in the morning. We can provide someone who can go in and help. For other parents, they might have trouble with the behaviour of their children so we can help them access the Positive Parenting Programme (Triple P).

"We started our first phase in November 2000, and the second phase - which we're in now - was launched in April this year. Just this month we have our first project teams moving into their bases. By next March, just over £6 million will have been invested. We're hopeful we'll carry on even further."



Innovation and investment ... the key

OVER the next five years NHS Greater Glasgow is taking forward ambitious plans to modernise mental health services and facilities across the city. These include plans to replace the existing Gartnavel Royal, Parkhead and Leverndale Hospitals with new purpose-built mental health hospitals on the Gartnavel, Stobhill and Southern General sites.

Specialist mental health services to meet the needs of new mothers (perinatal services), young people (adolescent services) and the small number of people who may be more likely to commit an offence due to their

mental illness (forensic services) are also being developed.

In addition, community services, where the vast majority of people with a mental illness receive treatment and support, will be expanded with the development of a wide range of services including primary care mental health teams. Work to upgrade local care mental health centres across the city will also continue to meet the needs of patients and staff.

Here, we look a few of those new services and facilities....



Drug misuse and ill health

THERE are clear links between the prevalence of drug misuse, deprivation and homelessness.

People who live in the most disadvantaged parts of Greater Glasgow are more than 30 times more likely to be admitted to hospital for drug misuse emergencies than those in the most affluent areas.

This increases to more than 200 times higher in the worst affected areas than the least.

The national estimate of drug injectors infected with Hepatitis C is 10,000, which equates to 0.4% of the adult population in Scotland. The estimate for Glasgow is 4,456. This equates to 44% of the estimate for Scotland.

Of the 2,459 deaths attributed to alcohol between 1996 and 2001 in the Greater Glasgow area, 2,062 were residents of Glasgow City.

In 2003 there were 423 alcohol related deaths of Glasgow City Council residents and we have yet to experience the real impact of Hepatitis C within the city. It is likely to involve significant health resources responding to chronic ill health and social care costs relating to childcare.

IT'S A FACT

THERE are more than 6,500 alcohol related admissions to hospitals in Glasgow every year - this is more than twice the level for the rest of Scotland.

- THE highest admission rates to hospital for alcohol related issues are experienced by men aged 50 - 59 and woman aged 45 - 55.

- BETWEEN 4,500 - 4,900 patients with chronic alcohol problems are seen by their GPs each month.
- TWO thirds of 25-34 year old single people presenting as homeless have a drug problem. Around 50% of these young people are using heroin.

- IN 2004/05 there were 40,000 presentations and 322 residential placements to the Drug Crisis Centre.
- APPROXIMATELY 7,500 people are on the methadone scheme within Greater Glasgow and this is an increase of more than 1,200 from 2003/04.

There, staff will diagnose and treat young people aged 12 to 18 who suffer from eating disorders, depression and a range of other psychiatric illnesses.

The new Adolescent In-Patient ward is scheduled to open by December 2007.

at Stobhill Hospital.

The new facility will be the regional in-patient centre for the West of Scotland's six health boards (Greater Glasgow, Lanarkshire, Argyll & Clyde, Ayrshire & Arran, Forth Valley and Dumfries & Galloway).

purpose-built, specialist ward in Glasgow dedicated to helping these troubled 12-to-18-year-olds to be expanded.

Over the next two years, the existing ward at Gartnavel Royal Hospital is to nearly double in capacity and move to a purpose-built new building

Nurses join city addiction team

AN exciting new development in addiction services aims to bring about substantial improvements in shared care for patients with alcohol or drug problems.

Over the coming year, 11 new specialist acute addiction liaison nurses will join NHS Greater Glasgow to play an important part in the care and treatment of patients who are brought into our acute hospitals with serious alcohol or drug problems.

Funded by £300,000 of new alcohol monies from the Scottish Executive, the new nurses will act as a link between Community Addiction Teams (CATs) and acute hospitals in the Greater Glasgow area.

They will see patients who live in any Greater Glasgow local authority area who are admitted to hospital in Glasgow and be on hand to provide support and advice not only to the patients, but to staff as well.

Five new nurses have already taken up their posts and the other six new posts will be filled during December 2005 and January 2006.

So what will their roles be?

The acute addiction liaison nurses will carry out initial assessments on patients, offer them advice on services available to them and ensure measures are in place for quick follow up by the local Community Addiction Teams or voluntary sector addiction services when the patient is ready to be discharged from hospital.

Their roles will also include looking at current guidelines on working with patients with an addiction problem; and providing advice, support and training for hospital staff.

In the past three years there have been significant developments in the delivery of addiction services within Glasgow and



ACUTE Addiction Liaison Nurse Joanna Dempsey ... "great to be able to help patients."

Teenagers' ward to double in size

BEING a teenager is hard enough, but for some young people, adolescence can be the least of their worries.

For youngsters who are living with mental health problems, hitting the teenage years can make life even harder to cope with. Now, a new,

to better mental health services



THE new addiction ward at Stobhill.

New addiction ward for Stobhill

A NEW ward for people with complex addiction needs has opened its doors at Stobhill Hospital.

Eriskay House is a 15-bed inpatient facility specifically for patients with alcohol and drug addictions.

Opened during October 2004, it replaces inpatient services that were formerly at Parkhead and Ruchill Hospitals.

Developed by the Glasgow Addictions Partnership, the new

unit offers a range of specialist health services for patients with drug and alcohol problems who come from North East Glasgow and East Dunbartonshire.

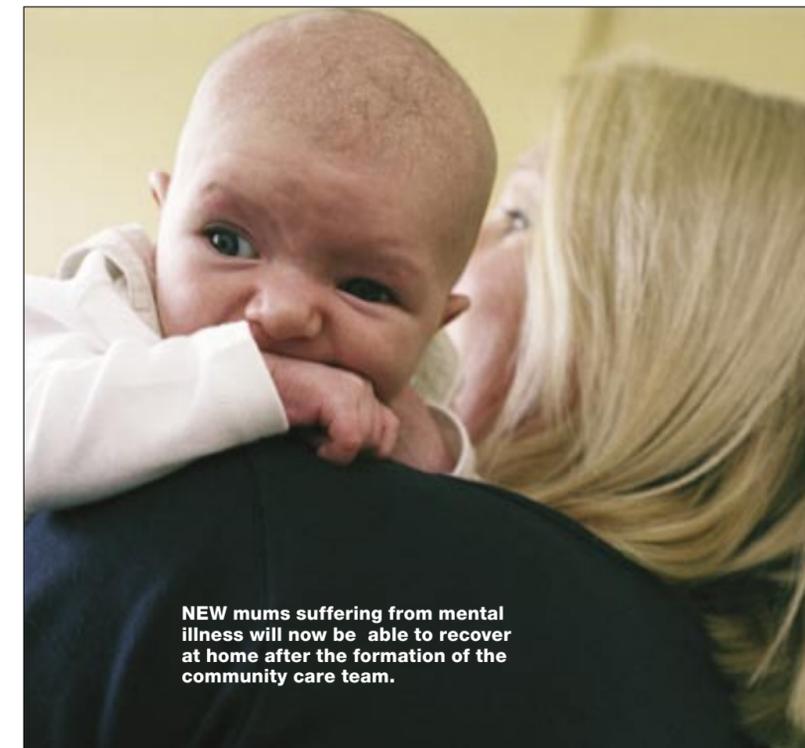
Bright, spacious and airy, the unit is designed to make patients feel more relaxed while addressing their complex needs. The functions of the unit are the diagnosis and management of more complex patients, including specialist physical, psychological or psychiatric

investigation and management.

The new facility not only has inpatient beds, but also offers a partial hospitalisation service that provides services for patients who no longer require intensive 24-hour inpatient care, but are not yet ready to be discharged completely from hospital.

The opening of Eriskay House is part of ongoing plans to further improve and develop addiction services across Greater Glasgow.

Mother and baby team take their expert care into the community



NEW mums suffering from mental illness will now be able to recover at home after the formation of the community care team.

SCOTLAND'S only unit for new mums with mental health problems has notched up another first.

In an innovative move, the Glasgow Perinatal Mental Health Service has created its own community team to care for mothers with mental illness in their own homes.

This is the first time a service such as this has been offered in Scotland.

That means that mothers will be able to receive treatment for their mental illness whilst recovering at home, instead of having to go into hospital.

Women who do need admission can be discharged earlier from hospital and continue to be cared for in their own homes.

The team will also help them to bond with and care for their babies.

Nurse Consultant, Karen Robertson and Consultant Psychiatrist Dr Roch Cantwell were instrumental in the design, implementation and delivery of the new service.

They looked at other services around the UK and abroad, and Karen won a

Perinatal team's National prize

● AT September's Nursing Times Live Exhibition, the Perinatal Mental Health Team was one of five finalists in the Scottish Evidence into Practice Awards. The team's Nurse Consultant, Karen Robertson, picked up their £1000 runners-up prize from Health Minister Andy Kerr. The money will be invested in the team's training programme.

The awards are given to individuals and teams who have changed practice as a result of applying research evidence to benefit patients.

fellowship to go to Australia and look at services offered there.

Their research led to the decision to set up a multi-disciplinary team - including psychiatrists, mental health nurses, a health visitor and a social worker - to provide the new community service.

Karen said: "We decided that to meet the needs of women and infants in Glasgow, we couldn't have an inpatient unit without a community team or vice versa. There needs to be a continuity of care so that mothers are fully supported when they leave the unit to go back home.

"To help us maintain that continuity, nurses who work primarily in the inpatient unit also work as part of the

community team one day a week. This gives staff a greater breadth of experience in terms of patients they see and the problems patients have."

Karen revealed that the service has also appointed a full-time community nursery nurse to work with the team. The nursery nurse will offer extra support with baby care and development to women with mental illness in their own homes.

She said: "The inclusion of a nursery nurse on the team means that treatment is not just focused on the mother's mental illness, which is quite an innovative practice within adult mental health services."

The £1.3million six-bedded Mother and Baby Mental Health Unit is based at the

Southern General Hospital and enables mothers to stay with their babies whilst undergoing treatment for mental illness.

Staffed by a range of different health professionals, the unit cares for women from all over the West of Scotland who suffer from a range of mental health problems including postnatal depression and puerperal psychosis (severe postnatal mental illness).

Dr Cantwell said: "Around 10-15% of women may suffer from depression during or after pregnancy and most recover at home with the help from their midwife, health visitor or GP.

"However, there are a small proportion of women (around one in 500) who may experience more severe illness such as puerperal psychosis, and need to be cared for within the Mother and Baby Mental Health Unit.

"The unit allows mothers and babies to stay together whilst the mother is undergoing treatment - this contact is critical to the wellbeing of both mum and baby as it not only aids the recovery process, but also helps strengthen future relationships."



Our Health - Your Voice

If you want to know about the Involving People Network, please call 0141 201 4558 or cut out and post the coupon below.

Send it to: Communications Department, NHS Greater Glasgow, Dalian House, 350 St Vincent Street, Glasgow G3 8YZ.

I WOULD like to have information about the Involving People Network posted to me.

Name

Address

Post Code

Tel

E-mail



A PACKED house at one of NHS Greater Glasgow's Our Health public meetings.

Your chance to make a difference

DO you want to find out more about your local health services? Do you want to change the NHS for the better by shaping decisions about its future? Or would you like join the thousands of volunteers who help our staff care for patients every day?

Whatever the case, you now have a real chance to make a difference. The choice is yours.

NHS Greater Glasgow wants you to be part of the Involving People Network - an association of people and organisations who care about healthcare. This will help us to work with people on the services we provide. The more people who join the network then the greater the opportunities for patients and communities to influence services.

Network members will:

- Receive regular mailings and e-mail messages with information, including Health

News, consultation papers and invitations to public events such as the very successful series of Our Health meetings, where you can speak directly to the people providing patient care;

- You can give us regular feedback about what you think by taking part in our regular surveys and focus groups;
- You can join the Network's Health Service Advisors Group to debate and comment on service planning - and members will be able to join some of the many committees and working groups responsible for improving services and putting forward proposals for modernisation;
- You can join the new Community Health Partnership public forums which will have a direct say on the way local services are supported and run;
- You may have the chance to serve on the Involving People Committee of the NHS Board, which is responsible for ensuring we engage properly with the people we serve;
- You can opt to be one of the many volunteers who help patients in hospitals and in communities and take some of the pressure off our busy staff.

How much involvement you have is entirely up to you.

Come along and hear the latest on the development of the Gartnavel site...



Topics will include:

- The New Gartnavel Royal Hospital
- Emergency Care in the West of the City
- The New Beatson
- Access and Transport Issues

On Wednesday 26th October 2005 and Thursday 27th October 2005
4.30pm – 7.30pm

at Hyndland Secondary School,
9 Lauderdale Gardens
Glasgow

for further info contact Lyn Stirling
Tel: 0141 201 4558



QUESTIONS ABOUT NHS SERVICES?

Ask the Chairman!

PROFESSOR Sir John Arbuthnott is the Chairman of NHS Greater Glasgow and as such the buck stops with him for the healthcare delivered by more than 33,000 staff to hundreds of thousands of people across Greater Glasgow.

NHS Greater Glasgow believes in informing and involving people. We do this in various ways such as **Health News** and public meetings. The next Our Health event in the new year will include a special Question Time session.

In the meantime, Sir John has put himself 'online' to answer your questions on a range of different things to do with NHS Greater Glasgow.

You may wish to ask about Glasgow's

hospital modernisation programme or about prescribing policy for medicines. You might want to ask about family health services, what we're doing to improve mental health services or how we work in partnership with other agencies and voluntary organisations.

Anyone can ask a question about our health services in Greater Glasgow. Whether you're a member of the public, a member of staff or a patient, Sir John wants to hear from you.....

If you want to ask Sir John a question please e-mail john.arbuthnott@gghb.scot.nhs.uk

Or write to him at: Chairman's Office, NHS Greater Glasgow, Dalian House, 350 St Vincent Street, Glasgow G3 8YZ.

Our Partners - NHS Greater Glasgow works with a number of partner local authorities, charities and other organisations such as Strathclyde Police and NHS 24. Our main partners are:

