Glasgow’s making headway on the biggest financial challenge it has ever faced.

The announcement in Staff News in May this year that we had to find ways of making savings of £58m had a major impact on all of us back then.

But, now the first signs that it can be achieved are emerging. Hundreds of NSHGG staff have been involved in drafting up where the savings can be made and we’ve already identified ways of clawing back £44m, leaving £14m of savings still to be identified.

So why was there a shortfall and where have the savings been made so far?

The reasons for the financial shortfall included a raft of pay modernisation issues, increased prescription costs, extra recurrent funding costs due to Health Plan investments, increased National Insurance contributions and the adverse financial allocation consequences of a declining population.

All Divisions and the Board set about working – in close consultation with Partnership Forums – how best to achieve the demanding target facing the local health system.

An overview of progress to date is as follows:

- The Health Minister, in recognition of huge financial challenges facing NHS systems throughout Scotland, allocated extra funding for 2004/05 only – in

Glasgow’s case that was more than £12m leaving a target savings figure of £46m;
- NHSGG provides significant numbers of patients from other West

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Inside this issue

- No job losses
- Ian’s the new HR director
- Focus on Divisions

Plus... The Endoscope • Article name • Article name
HAVING shared support services – finance and payroll – will save NHSScotland up to £10million annually (current estimate), money that can be put back into frontline services.

That’s the message from NHS National Services Scotland, the common services agency for the NHS in Scotland, which has just completed an extensive review of the finance, payroll and procurement processes of every health board north of the border.

The review found that by having shared support services, greater efficiencies can be created within finance and payroll, saving millions of pounds each year.

At the end of the review, proposals were worked up that were looked at by the Scottish Partnership Forum. The preferred option for Single Shared Services was to create a ‘hub and spoke service’ for both finance and payroll services – this means there would be a lead centre (the hub) for each function with smaller processing centres (spokes) located within the 12 mainland health boards.

The plan is likely to take up to two years to implement and will have an impact on some 600 finance and payroll staff across Scotland.

A spokesperson for NHS National Services Scotland said that every possible effort will be made to manage and mitigate the effect of such a radical change on staff and that the changes could be made without the need for redundancies, with staff numbers reducing through natural wastage and coordinated management of staff turnover.

What will this mean for Glasgow staff?

In Glasgow, our payroll division was centralised in May 2000 and moves are already afoot to bring our finance departments together.

Wendy Hull, Director of Finance for NHSGG, said: “We’ve had a project in existence for several months now that involves staff in redesigning financial services across Glasgow. This project is primarily focused on single system working across all Divisions in Glasgow, but will also reflect the requirements of the National Shared Services proposals.”

Mrs Hull said that the move to single system will mean there will be fewer finance jobs in the future, but that these would either be lost through natural wastage or through redeployment of staff.

For more information on the new arrangements, see our intranets: http://hqictpo

Another area NHS National Services Scotland is looking at is logistics.

NHSScotland spends £1.2 billion annually on goods and services (excluding drugs) and has just completed a review on the buying, storing and transporting of these products.

The result of this review is that a national logistics strategy has been put together which includes:

• centralising the distribution system of NHS Scotland, making annual savings of up to £10milion;
• the creation of a National Distribution Centre to supply products directly to wards and departments in every hospital; and
• the introduction of Ward Product Management in hospitals consisting of a specialist team to look after the supply and restocking requirements of clinical areas.

The new system won’t come into being overnight. Instead, health boards will start transferring into the new infrastructure from 2006.

So what happens to procurement and logistics staff? The new initiative is not expected to result in redundancies. Instead, there’s the possibility of new posts being created as well as redeployment and training opportunities for staff.

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Shopping together saves millions

Health Boards are now getting their stationery from a single national supplier, bringing huge cost savings to the service.

The move towards buying collectively is part of NHSScotland’s Best Procurement Implementation (BPI) Programme, which has targeted recurring savings of £50m across the NHS in Scotland.

From now on, all Health Boards in Scotland will get their pens and paper from a single national supplier instead of dealing with close to 100 suppliers, bringing more competitive prices on stationery and computer consumables with a potential saving of more than £1 million across Scotland.

The Programme is now looking at a broad range of commonly used products, both Clinical and Non-Clinical. Staff will be given opportunities to help in reviewing products, agreeing what we require and testing alternatives.
Maternity Briefing

£100m for new Children’s Hospital

NHSGG’s three medical directors last month welcomed the news that the city is to receive £100million to build a brand new children’s hospital on an adult acute hospital site.

Following receipt of a letter of confirmation from Health Minister Andy Kerr, Dr Brian Cowan (South Division), Mr Morgan Jamieson (Yorkhill Division) and Dr Bill Anderson (North Division) pledged to work together.

They said: “We welcome the Ministerial announcement about new capital funding to deliver a children’s hospital co-located with adult and maternity services. There was a strong clinical consensus during the consultation that this service arrangement was best for women and babies. Without the extra resource this gold standard was not an option for many years, so this announcement is very good news for child and maternal health services in Glasgow.”

They welcomed the announcement of the Advisory Group and the continued involvement of NHSGG clinicians in the implementation phase of the new hospital, particularly in helping decide where the new children’s hospital should be sited, adding: “It is now time to move on from the clinical division which characterised the consultation process.”

So what did the Ministerial letter say? It:

• Set out the Ministerial intention that the new hospital should be on a site that also has adult and maternity services;
• Recognised the clinical case for having paediatric services and a maternity unit on the same site and the importance of maintaining the national service provided by the Queen Mother’s and the Royal Hospital for Sick Children;
• Recognised the Board’s conclusions that maternity services should be on the same site as adult acute services and that Glasgow could only sustain two maternity units;
• Set out the role of the advisory group, which will be tasked with the responsibility to monitor plans for the co-location of paediatric, maternity and adult clinical services, to approve the option appraisal of possible sites and to ensure there will be no diminution of the quality of care available to mothers and children up to the time the triple location service is operational.

Mr Kerr concluded his letter by praising the “hard work and responsible deliberation by members of the Greater Glasgow NHS Board”, the “commitment of management and staff involved” and the “valuable contribution made by Professor Margaret Reid”.

A full briefing has gone out to NHSGG staff and should be on all our intranets. A full copy of the Health Minister’s letter is available on: www.nhsgg.org.uk/ content/mediasets/doc/se_maternity_letter_oct2004.doc

Car parking - the next steps

The four-month public consultation into the car parking policy for hospitals in Greater Glasgow has ended, but what happens now?

Around two hundred submissions have been received from staff and public and over the course of October and November detailed work is being carried out looking at all the comments received. The main points from all the submissions will be pulled together and a paper is likely to go to the Board in December.

Tom Divers, Chief Executive of NHS Greater Glasgow, said: “We would like to thank everyone who took the time and trouble to put forward their views and comments to the consultation process. The Board will consider the responses received before detailing the next steps.”

Whatever happens the Staff News will let you know in the next edition, so watch this space!!!!!
Change can sometimes be for the better

We’ve talked a lot in previous issues about some of the changes that are underway in NHS Greater Glasgow due to our drive to modernise services – some planned for the near future and other, longer-term proposals.

In fact, change is happening all the time and, for many of us, is already a reality of our working lives.

Staff News talked to three members of staff, all from very different disciplines, about their experiences of change. In this edition, physiotherapist, Amy Montgomery, talks about what it was like to move from Stobhill to the Royal.

Amy Montgomery started work as a Physiotherapist at Stobhill Hospital in 2002. A number of departments that require physiotherapists as part of the clinical team have transferred from Stobhill and, four months ago, Amy turned up for her first day of work at Glasgow Royal Infirmary.

Asked how she felt when she learned she was to be rotated to GRI, Amy said: “Nervous. Which is natural I suppose. You get used to things where you are and suddenly you’re faced with the prospect of a different hospital and new people. But, I was actually okay with it. As a physio, I’m used to rotations and adapting to different clinical areas of work. I imagine it would be a different story for people who have been in the same place for twenty years. Having said that, this was a bigger change than I was used to so I was a bit worried about it.”

So, what was it like, then, to move somewhere else?

“Actually things are very different. Stobhill has always had a cottage hospital feel to it and is quite a close-knit community. The Royal is an inner-city hospital and seems just so big when you have to find your way around and get to know people. I suppose, thinking about it, the biggest challenge for me wasn’t around the work – I’ve enjoyed that – it was settling into the new environment.”

And the work itself?

“That’s been really good actually. I knew things would be different, but I’ve found being in the Orthopaedic Department an excellent learning experience – to an extent I didn’t expect. To be honest I think the move made me raise my game because I found myself with a more varied caseload and a new set of challenges and the fact that I’ve faced them successfully has given me a lot more confidence. I’ve broadened my skills and in the process I’ve surprised myself by realising I’m someone who actually sees change as an opportunity.”

In the next edition (Jan 2005), we’re featuring Rosie Little, and Annemargaret Black will follow in March.

If you’ve experienced change (good or bad) in your job and would like to tell your story, contact Staff News today: staffnews@nhsgg.org.uk or write to Olivia Cornacchia, Staff News, NHS Greater Glasgow, Dalian House, 350 St Vincent Street, Glasgow G3 8YZ.

We’re all responsible for infection control

You’ve probably heard by now that NHSGG is launching a new high profile education and awareness campaign to further reduce the levels of healthcare associated infections (HAIs).

The poster campaign starts in the new year and is aimed at staff, patients and visitors. It will be reinforced by a series of new, user-friendly information leaflets, a new gold-standard infection control manual, specially organised hand hygiene workshops for staff including doctors, and web-based best practice teaching/information modules for staff.

SAVING FOR A RAINY DAY WITH THE NHS

West of Scotland NHS Employees Credit Union has gone from strength-to-strength since its humble beginnings at the Southern General.

Originally a Credit Union for South Division staff, it has expanded to include all NHSGG staff and those at NHS Argyll & Clyde, Ayrshire and Arran and Lanarkshire.

And it celebrated another milestone in its history recently with the opening of its own premises in Paisley Road, Renfrew, performed by Eilnor Smith, Chairman of South Glasgow Division.

Open to all NHSGG staff, the Credit Union began life in November 1998 with volunteers from the Southern General Hospital, but now employs a full-time manager and four staff.

For more information on becoming a member or wish to volunteer telephone 0141 886 7246 or visit www.nhscreditunion.com
NHSGG saw a familiar face take the helm of single system Human Resources (HR) recently in the shape of Ian Reid.

For Ian has been appointed as the new Director of HR for the whole of NHSGG.

As former Chief Executive and HR Director with the Primary Care Division, Ian’s only too aware of the challenges that face him in his new role…….none more so that the issues raised during our move towards single system working.

Ian, who starts his new post in December 2004, said: “I’m delighted to accept the new role of Director of Human Resources for NHS Greater Glasgow. The decision to accept the post was made with mixed feelings as I have very much enjoyed the role of Chief Executive and previously as HR Director within Primary Care. I am, however, very much looking forward to the challenges the new post offers.”

Apart from single system working, these challenges include issues raised through our drive to modernise. As this progresses, many of us may find ourselves working on different sites or taking on new ways of working – and that brings a whole raft of HR issues.

And then there’s the huge amount of work being done in staff governance (how we meet our statutory responsibilities and standards) and Agenda for Change (the proposed new pay and grading system).

Ian said: “All of these bring huge challenges to NHSGG, particularly in terms of HR. We need to ensure our staff are kept up-to-date with the changes that affect them and are properly briefed and fully supported when change comes.”

And if that’s not keeping him busy enough, Ian will also be greatly involved in the continued development of the new Community Health Partnerships (CHPs) and the continued development of the Joint Future agenda.

He added: “There’s no doubt that this new position of Director of HR comes at a critical time and I look forward to working closely with my HR colleagues and the Partnership Forums to take forward this busy agenda.”

So Far, So Good continued from page 1

Proposal include:

- Making all NHS Greater Glasgow property - including buildings, vehicles and grounds - smoke-free;
- Having limited external designated smoking areas for staff, patients and visitors who still wish to smoke;
- Referring staff who want to stop smoking to the Occupational Health team for smoking cessation information and support;
- Offering all patients who smoke easy access to smoking cessation advice and (subject to their clinician’s guidance) Nicotine Replacement Therapy (NRT).

If Board approval is given, the consultation is expected to run from January to March 2005, with the new rules expected to come into place mid 2005.

Staff News will continue to update on progress on the financial recovery plan in future issues.
Another AGM Success

NHSGG saw another successful event when staff, patients and interested groups flocked to the Royal Concert Hall in October for this year’s AGM.

Brief presentations from senior staff and Board members were followed by an open question and answer session to a panel that included our Chairman and Chief Executive, Professor Sir John Arbuthnott and Tom Divers.

Also taking questions from the floor were Ronnie Cleland (Chair, North), Elinor Smith (Chair, South), Andrew Robertson (Chair, PCD) and Cllr Jim Coleman (board member).

Sir John said: “We continue to encourage a high level of public interest in the Board’s work. Again, our AGM was a resounding success in achieving this with around 220 people attending. The format was such that it allowed people attending the event to put questions directly to senior staff and many took advantage of this opportunity. We were delighted so many staff were amongst the attendees and were able to take part in the very positive and constructive debate that took place.”

Like last year, a number of health staff had stalls at the event highlighting some of the excellent work being carried out across NHSGG. Also there were stalls supplied by other agencies including Strathclyde Police, NHS24 and Greater Glasgow Health Council.

Prior to the AGM, we held the first in a series of events involving partner organisations, patient groups and other parties. The ‘Our Health’ event at the same venue saw around 300 participants help shape the future direction of NHSGG through workshops and discussions on a range of topics.

PROJECT CELEBRATES AWARDS WIN

A n NHS Greater Glasgow health project is the joint winner of the Scottish Executive’s ‘Evidence into Practice’ award for its work with black and ethnic minority women.

The project – a review of gynaecology outpatient services – was presented with a £10,000 first prize at a special ceremony held during the Nursing Times Live event at the SECC in Glasgow, recently.

NHSG Greater Glasgow also celebrated a second prize when Riverside Local Health Care Cooperative’s (LHCCs) Pre-Five Family Service was named as runner-up in the ‘Evidence into Practice’ award. The service won one of four £1,000 prizes.
Halloween may have been and gone, and staff are now free to concentrate on organising the Christmas Party, but the Endoscope felt unable to pass up the chance of sending a shiver up your spine without the aid of an epidural.

In the interests of research, the Endoscope spent the best part of a week surfing the web looking for weird stories of ghosties and ghoulies linked to Glasgow’s healthcare. Oddly, typing ‘Glasgow hospital ghost stories’ into the search engine repeatedly threw up an article with a picture of Lawrence Peterkin, Health Board Chief Exec of yore. But that was far too scary to use here.

Instead, the Endoscope presents you with a selection of the best from the information superhighway.

A Night Sister tells of a 1975 encounter from beyond at the Western Infirmary. She was “preparing a machine, facing a well-lit corridor” (which, assuming the nursing staff there haven’t changed much in the intervening years, was probably dispensing ‘Aztec Bars’, ‘Yorkies’ and the like) when a “tall silver-haired man wearing a blue dressing robe standing near the doorway” vanished. The Sister was very upset as she recognised the man as a “patient who had died two days previously”. Which must have put them in a bit of a quandary as to whether to take him off the waiting list or not.

A 19-year-old from Bishopbriggs claims his Gran spotted the apparition of a man in a white Stetson and leather jacket ascending the stairs of her house.

As this was Bishopbriggs, the vision was not interpreted as an errant line-dancer desperate for the loo, but as being of supernatural import. This seemed proven a few days later when another female relative in the household was rushed to a ‘Glasgow hospital’ where she “had bone marrow and blood and all that kind of stuff taken out and put in” — which is the best ever description of what they do in Oncology that the Endoscope has ever read!

Naturally, the afflicted family came to the conclusion that the man with the big hat was a ‘spirit guide’. But the Endoscope is not so sure — several senior clinical staff of these parts are known to do a passable rendition of ‘Achey, Breakey Heart’ at social occasions – quite often with the direct assistance of spirits.
Taking medics through the deep dark tunnels of Glasgow’s underground, testing out decontamination clothing and organising the conversion of a Springburn train into a three-coach ambulance are all in a day’s work for NHSGG Emergency Planning Officer Alan Dorn.

Alan, who is based at Dalian House and has been with NHS Greater Glasgow for more than 15 years, is living proof that there can be more to working in an NHS office than meets the eye.

The dedicated emergency man - who also Chairs the West of Scotland Health Board Emergency Co-ordination Group - told Staff News: “My job as Emergency Planning Officer can literally go from one extreme to another within the space of an hour. A day that starts with paperwork at my desk could see me being on the site of a city bomb scare by lunchtime.”

Working with emergency planning officers from other organisations, the former RAF flight lieutenant has been involved in putting together well-rehearsed procedures to ensure all the emergency services (including the Police, Fire Service, Health Service, Ambulance, Council) take a coordinated approach to any incidents that occur.

This varied role can involve arranging decontamination procedures, casualty stand-by and radiation protection, as well as being part of the team co-ordinating emergency services crews on disaster sites.

Another part of his job is helping to organise special events to allow the emergency services to ‘practise’ dealing with disasters.

Alan explained: “We often lead ‘staged’ operations - such as getting accident victims out of the Glasgow Underground - so that various complicated procedures and the crews who carry them out are physically tried and tested in case disaster strikes in the future.

“We’ve also tried out emergency plans like converting a diesel sprinter train into a railway ambulance which took pretend casualties from a “major fire” rehearsal in Springburn to Queen Street station, near the Royal Infirmary. If actually used, this sort of procedure would mean that the city’s ambulances wouldn’t be swamped with patients from one incident, but instead nurses could use the train as a makeshift hospital on the way to A&E.”

And the emergency man added that being ex-military makes his job a lot easier – not only in a practical
sense, but in a communications sense.

He said: “I found that this sort of background really helped me when we were dealing with refugees who were being flown into Glasgow airport from war-torn Kosovo in July 1999. My previous work made it much easier to co-operate with military staff, which meant things ran more smoothly.”

And on a lighter note, Alan’s complex role has included him being involved in creating and regularly updating the event control guidelines for football games, which the emergency services follow in order to have everything from standby ambulances to procedures that deal with crowd crushes and violence between fans.

Alan added: “I’m also the health link for around 60 major crowd events each year. The interesting ones include Hogmanay at George Square, the Women’s 10K run and the Download rock festival at Glasgow Green.

“This sort of work involves having hospitals well-staffed and equipped (should the worst happen) and having emergency health services and equipment on site. This means I have to liaise with Police, Fire and medical staff and also venue management and event promoters.”

But what’s been the worst thing the Emergency Planning Officer has had to deal with while working for NHS Greater Glasgow?

Alan replied: “The Maryhill disaster this year was the sort of thing that we all wished would never happen but, when it did, all our well-rehearsed emergency plans were used quickly and efficiently.

“It was like seeing my 15 years of effort being put into practice. Glasgow’s emergency services more than excelled in their work at that difficult time and did everything possible to deal with the accident and its aftermath.”

Alan Dorn is the first ever health service employee to chair the Scottish branch of the Emergency Planning Society. He gave the group’s AGM an interesting twist by holding it on a ferry so Shetland Island workers didn’t have to trek to the big city;

Before joining NHS Greater Glasgow, Alan was with the Royal Air Force for 20 years, specialising in aviation distress;

Alan’s job with the Air Force saw him spring into action when Richard Branson’s hot air balloon was ripped from its moorings, heading for the flight paths of countless international airlines;

Glasgow playing host to the 2005 Special Olympics means Alan will have lots of advance planning to do - as 3,000 people are expected to flock to the city from across the UK.
POST IN PROFILE: The Clinical Case Manager

The new role of Clinical Case Manager is transforming the patient journey within North Glasgow Division’s Department of Medicine for the Elderly.

Since the new role was introduced to the north-east in 2002, re-admission rates for elderly patients have fallen, length of stay decreased, incidence of complaints has fallen and feedback via questionnaires distributed to staff and relatives were extremely positive.

So what are Clinical Case Managers and what do they do?

North Glasgow Division currently has two Clinical Case Managers – George Gentle, and Aileen Smith, both highly trained nursing professionals – working in Medicine for the Elderly. They are based at Lightburn Hospital and Stobhill Hospital respectively.

Their role is to oversee the care of elderly patients and help reduce unnecessary delays in treatment by coordinating communication between different disciplines such as physiotherapy, speech and language therapy and occupational therapy.

They are also responsible for maintaining communication with relatives and carers, ensuring that the rehabilitation process is explained to all involved and that regular updates are provided throughout the patient’s stay.

Another part of the role involves liaising closely with social services and other agencies to ensure that, when the time’s right, the discharge process goes smoothly.

Aileen Smith enjoys the supportive nature of this post: “I really enjoy the job, particularly the interaction with patients and their relatives. It’s vital for relatives to have access to information, practical advice and support and, as Clinical Case Managers, we are able to reassure and guide both relatives and patients.”

The role of the Clinical Case Manager is just one new development designed to improve patient care within the Department of Medicine for Elderly in North Glasgow. Others include the introduction of patient and carer support groups and fora, a wide range of education and study day packages for nurses working in this area and the introduction of a patient and carer advocacy service.

PLEASE GIVE GENEROUSLY

Gillian Farrell and Roberta Tutty are looking forward to a very big adventure!

In March next year, the OPD Sister and nursing auxiliary from the Outpatients Department at the Brownlee Centre, Gartnavel General, will be participating in a ten day charity expedition to Vietnam.

Gillian told Staff News: “We will be completing a six-day hike as part of our trip, which will certainly be tough going, but is in aid of Maggie’s Centres around Scotland. These centres provide essential care for children with cancer as well as giving much needed support to their families and friends.”

Both Gillian and Roberta are currently busy collecting donations and fundraising and hope to raise a total of £5000, all of which will go towards a new Maggie’s Centre in Scotland.

If you would like to sponsor Gillian and Rebecca or simply make a donation to this very good cause, make sure you give them a call on x51079. Please note any donations or sponsorship must be received by December 2004.
World class cancer equipment

The new Beatson – which is about to be built at Gartnavel – will be one of only a handful of cancer centres throughout the world with a package of the very latest equipment for delivering radiotherapy.

An order worth more than £4 million has just been placed for three state-of-the-art Linear Accelerators (the machines which deliver radiation for cancer treatment) for the new centre, also known by its Sunday name of the West of Scotland Cancer Centre.

Moreover, the five accelerators already in place at the Tom Wheeldon building are also to get an upgrade – bringing all our equipment up to the highest standard. In 2006 a further three linear accelerators will be bought to bring the total at the new West of Scotland Cancer Centre to 11.

To complement these new state-of-science linear accelerators, we have bought the best equipment that money can buy.

Professor Alan Rodger, Medical Director of the Beatson, explained: “One of the highlights of our order includes new special image guided radiotherapy (IGRT) equipment that can treat tumours with more accuracy and safety than ever before. Tumours can move even in the short space of time between planning the treatment and carrying it out. With IGRT we can take further images of the patient’s tumour to confirm they are in the right place and adjust our treatment set-up if necessary.”

In addition, we have been able to invest in extra technology in the form of stereotactic radiosurgery from a company called BrainLAB. This will allow the Beatson to deliver for the first time very small beams of radiation to small areas of the brain and the base of skull in patients with a variety of malignant and benign tumours of these areas.

The new Beatson will open in 2007.

NEW FACILITIES FOR A NEW BEGINNING

ENT staff in North Glasgow were celebrating a move to a new Ear, Nose and Throat Department recently.

The new facilities within Ward 2C in Gartnavel General were officially opened in October and bring together three inpatient units: the existing Gartnavel ENT and those located at Glasgow Royal Infirmary and Stobhill Hospitals.

Emergency services have also been centralised at the new department, with the provision of a modern and well-equipped treatment room adjacent to the ward. However, outpatient clinics will still continue on the three original sites.

In addition, the department has its own library, seminar room, surgical skills room and clinical area, as well as consultant and secretarial offices and junior staff rooms.

Staff with a wealth of ENT experience – including the consultants pictured – will now work together, caring for the population of North Glasgow and a large part of Argyll and Clyde, extending as far north as Oban and as far west as the islands of Coll and Tiree!

Lead consultant, Mr Ken MacKenzie is delighted with the new facility: “Centralising staff within this dedicated facility should provide excellent opportunities to consolidate and develop clinical and academic activity in North Glasgow.”

Marking a century of care

This year, Stobhill celebrates its 100th birthday and as a part of a series of community and staff events to mark its centennial year a special church service was held at Glasgow Cathedral in September.

The open service, led by Stobhill’s own chaplaincy team – Reverend Ken Coulter, Reverend Iain Beaton and Father Stephen Dunn – was attended by members of staff, former patients and members of the community who jointly celebrated Stobhill’s rich history and exciting future.

Reverend Iain Beaton said: “The evening of worship at the cathedral was one of thanksgiving and praise to God for a century of an invaluable caring service to the community. It was an opportunity for the public to gather to express their gratitude to God, thanking him for the skill and dedication of all involved in healthcare at Stobhill.”
Focus on Primary Care Division

New facilities for Eastenders

Colleagues out in the East End were celebrating the official opening of brand new facilities recently.

The newly upgraded and extended Easterhouse Community Health Centre was officially opened by new Health Minister Andy Kerr in October.

The £3.5 million Centre – which recently scooped a top design accolade at the Scottish Design Awards – has been completely transformed by the work carried out there. This includes the creation of:

- A new building which links to the existing Easterhouse Health Centre; and
- A new single entrance with automatic doors, making the complex more accessible to members of the public.

And it’s not just the building that’s seen things changing. Brand new services have been added to the existing ones already provided by centre staff.

The new services include men’s health clinics, baby massage, dental care for special needs patients as well as new visiting services such as spirometry (which measures respiratory function) and anticoagulant clinics (which monitor the blood level of patients on Warfarin medication).

Robert Peat, Eastern Local Health Care Co-operative General Manager, said; “We developed the new Centre very much in partnership with users of our services and this has been key to its success.”

Staff ‘On the ball’ to Tackle Stigma During Mental Health Week

Staff were out in force in October with a range of events and activities to mark this year’s Mental Health Week.

Joining forces with service users and community health projects, staff organised events across the city.

Ranging from workshops and displays to drama productions and art exhibitions, they aimed to showcase the range of services available in Glasgow and to tackle the stigma associated with mental ill health.

And sporty types were given a chance to show off their ball skills at the Annual Five-a-Side football tournament, now in its seventh successful year.

Twenty-one teams – made up of health staff and service users from all over Scotland got together to battle it out at the Power League in Hamilton. MSP Tommy Sheridan brought a team along and scooped the trophy for the second year running.

Ronnie Orr, one of NHS Greater Glasgow’s nurses who organised the tournament said: “This is a fun and healthy way to celebrate mental health week and it also makes a serious point about the stigma faced by those who suffer mental health problems.”

Health Minister meets staff.
MENTAL health and other staff can now provide improved specialist services to new mothers suffering from perinatal mental illness.

With the opening of a new £1.3million Mother and Baby Mental Health Unit at the Southern General, staff can now provide specialist care for mothers with illnesses such as postnatal depression and puerperal psychosis (a more severe form of postnatal mental illness).

And the good thing about the unit – the first in Scotland - is that the babies can stay with their mums while they undergo treatment.

Providing care for women from across the West of Scotland, the six-bedded unit is staffed by a team of 24 health professionals including psychiatrists, mental health nurses, nursery nurses, a health visitor, social worker, nursing assistants and administrative staff who will support mothers in caring for their babies while they receive treatment.

Karen Robertson, Nurse Consultant in Perinatal Medicine, NHS Greater Glasgow Primary Care Division said: “This new service will radically improve the quality of care and treatment available to mothers who experience perinatal mental illness, giving those in need access to specialist support in an appropriate environment. Giving mothers the opportunity to care for their child while receiving treatment is critical to the wellbeing of both mother and child and this is a significant step forward in providing effective care that will be crucial in getting families back on their feet.”

The development of the new Mother and Baby Mental Health Unit is part of wider plans to improve care for women suffering from perinatal illness which includes community treatment, advice and support to maternity hospitals and a system to help midwives and health visitors identify and manage women at risk of perinatal mental illness.

QUALITY COUNTS AS GLASGOW DENTISTS SCOOP UNIQUE AWARD

Three Glasgow dental practices are celebrating scooping the unique Quality in Dental Practice Award. Staff at Pat Brown’s Dental Practice in Milton, Shawlands Dental Practice and Nitshill Road Dental Practice were presented with their certificates by the Chief Dental Officer for Scotland, Ray Watkins, in September.

This is good news for both patients and staff as this awards programme – which has been developed by NHS Greater Glasgow dental staff - seeks to improve quality and encourage dentists to continually improve care.

It’s currently being piloted in 16 dental practices in the city and participating staff receive individual support from Scotland’s first two Clinical Governance Advisers, George Taylor and Billy Cameron, to progress through a series of modules.

Dr Robert Broadfoot, Director of Primary Dental Care, NHS Greater Glasgow’s Primary Care Division, said: “This is an exciting and innovative initiative which drives up standards in dental practices across Greater Glasgow and ultimately improves patient care.”

Catriona Galbraith, Practice Manager of Shawlands Dental Practice, said: “We’re delighted that we have achieved this milestone in the awards programme.”
Focus on Yorkhill Division

Ward Rounds, Outpatient appointments, Surgery... oh and a book launch!

Most people wouldn’t think a hospital would be someone’s first choice for a book launch, but it was for Keith A Charters and his new children’s novel.

Keith, who was born in Glasgow, gave up his ‘proper job’ as a Marketing Director to become a writer and has claimed his first success with the publication of “Lee and the Consul Mutants”, which he launched at Yorkhill in October this year.

The story is set in a children’s hospital and centres on ten-year-old Lee, who discovers that the hospital he’s been admitted to has been taken over by Consul Mutants (Consultants to you and I!). Lee hatches a plan to save the world from the supposed alien invaders, but he has only his intelligence to defeat them...

Keith drew on his own experience in hospital as a child, and also that of his son, Daniel, who spent time in Yorkhill a few years back.

As part of the launch, Keith spent the day touring the wards and reading extracts of the book to the children, as well as giving £1 for every book he sold that day to the Yorkhill MediCinema fund.

He also ran a competition for children in the hospital to design a Consul Mutant spaceship, with four lucky winners getting special VIP invitations to the evening launch where they received signed first editions of the book. The overall winner also took home a Lee and the Consul Mutants T-shirt.

The book was declared a success in one ward - when staff turned to see why the ward had gone so quiet they found the children lying quietly in bed, fingers on the first word of page 1!

 Accountability

New Health Minister Andy Kerr announced important changes to make decision-making in the NHS more open and accountable.

From now on he will hold annual performance review meetings for each Health Board in Scotland and they will be held in public.

He said: “The National Health Service is a public service and it is vital that local communities can find out how their own health service is performing. I want to see more openness in decision-making about services and more accountability in the way they are organised. That means hearing about all the improvements in the Health Service, but also about areas where provision needs to be better.”

Mental Health

Bothwell House in Hamilton is the headquarters of the new Mental Health Tribunal for Scotland.

The new body will take and review decisions on long-term compulsory care and treatment of people with a mental disorder.

Tribunals will be convened throughout Scotland in both hospital and community settings. Panels with expertise in mental health law, care and treatment and will comprise of three members - one legal (the convenor), one medical and one general member – and will make determinations on around 4000 cases each year.

Infection

Tough new standards making training on Healthcare Associated Infection (HAI) mandatory for NHS staff were announced in September. All workers joining the NHS will now be made aware of the dangers of HAI and what they can do to prevent it.

The “Framework for Mandatory Induction Training in Healthcare Associated Infection for Scotland” is available at: www.space4.me.uk/hai/Resources/mandatory%20training%2004.pdf

Nursing Care

Figures on uptake over two years of free personal and nursing care and expenditure in the first nine months of the policy’s introduction were published by the Scottish Executive in September. The full Statistics Release is available on the Scottish Executive website at www.scotland.gov.uk/stats

Practice Nurses

A new Framework for nurses working out of GP surgeries has been launched which sets out a series of eleven standards to support them in the challenging environment of modern primary care.

The Framework for Nursing in General Practice sets out standards of best practice for recruitment and personal development to benefit the nurse and ultimately patients.

It can be viewed at: www.scotland.gov.uk/publications

SCOTTISH EXECUTIVE ROUNDUP – the Latest News from the Mound
And the winner is...

The Yorkhill Telemedicine Project, which enables Yorkhill clinicians to make routine as well as life-saving decisions on how to treat a child in a hospital hundreds of miles away, has been nominated for a prestigious Health Service Journal (HSJ) Award in the ‘Improving Care With E-Technology’ category.

The state-of-the-art telemedicine network, made up of mobile cameras and monitors, brings the expertise of centralised paediatric specialists at Yorkhill to the bedside of babies and children in hospitals all over the country via high quality video and sound.

Some of the uses of the new system include viewing heart ultrasounds from newborn babies, examining x-rays, as well as bringing concerned parents and children’s specialists together to discuss a child’s treatment ‘face-to-face’ whilst being miles apart.

Hazel Archer, the Telemedicine Project Manager was joined by colleague Dr Alan Houston, Paediatric Cardiologist in making a presentation to the panel of HSJ judges.

She said: “Being shortlisted has been a major achievement for all of us. From the outset, the project has been a real team effort involving doctors, managers and technical staff at all of the hospitals involved, not to mention the support and guidance given by team members from the Scottish Executive.

“It is fantastic that the great efforts made by all the team members to ensure the success of the project have been recognised by such a distinguished panel of judges.”

For Dr Alan Houston, the clinical benefits of the project made Telemedicine a very worthy nomination.

He said: “I’m absolutely delighted about our nomination and look forward to the results in November. In a matter of minutes, with Telemedicine, we can make decisions about a child’s treatment including whether they should remain in their local hospital, be transferred urgently, or even transferred non-urgently the next day.

“The network offers a high standard of detail that is comparable to actually being on-site with the patient, and is a truly 21st century way of allowing paediatricians to work together and make the best possible decisions for some of Scotland’s most ill children.”
Top Award Prescribed for Pharmacy

The Southern General Pharmacy Department has won Radio Clyde’s Best Place to Work Award.

The department scooped the accolade after months of frantic voting by the station’s one million listeners.

The pharmacy was nominated by Claire McDermott whose sister Vicky works there as a technician.

Claire said: “I think the Southern General Pharmacy Department is the best workplace. The staff there are very friendly and hardworking. I went there for work experience in October 2003. Everything I did there was a new and enjoyable experience.”

Celebrating their win are Pharmacy Dept staff (left to right) Vicky McDermott, Louise Monaghan, Karen Findlay, Lindsay Anderson, Ruth Forres, Clyde 2 presenter Dean Park and Fiona Walker.

A&E DOCTORS FLY INTO ACTION

South Division doctors are bringing the Emergency Department resuscitation room direct to patients living in the remote areas by taking to the air.

NHS Greater Glasgow in conjunction with NHS Argyll and Clyde set up the service which swung into action in October. Teams from the Southern General and the Royal Alexandra Hospital in Paisley provide the service on a weekly rota basis while maintaining the usual services at both hospitals.

It is anticipated that the service will help save the lives of approximately 30 seriously injured patients per year.

HAPPY GANG VISIT SOUTHERN

Children’s TV favourites the Happy Gang recently dropped into the Southern General to film an episode for their latest television series.

Theresa Clark from Accident and Emergency met the trio on arrival, and filming took place during the late evening in orthopaedic outpatients.

Several ‘well kent Southern faces’ made cameo appearances in the episode which was screened on BBC2 in October.

Staff News

Written by staff for staff with the full support of the Partnership Forum.

If you’d like to send an article, letter photograph or comment to us Send them via our email address: stafnews@nhsgg.org.uk OR Send them to: Olivia Cornacchia, Staff News, NHS Greater Glasgow, Dalian House, 350 St Vincent Street, Glasgow G3 8YZ.

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