As NHSGG heads towards full single system working, Staff News takes this opportunity to tell you about the new roles and positions of some of our managers.  

Chief Executive, Tom Divers; Director of Public Health (until October 11 when he leaves to join the Scottish Executive) Dr Harry Burns; Director of Human Resources, Ian Reid; and Director of Communications, Ally McLaws, remain the same.

However there are changes to the titles and positions of other senior managers.

Former Director of Planning & Community Care for the Board, Catriona Renfrew, takes on the new role as NHSGG’s Director of Corporate Planning and Policy.

Douglas Griffin, former Finance Director for the PCD, is the new NHSGG Director of Finance (Corporate and Partnerships) and Dr Brian Cowan and Rosslyn Crocket are the Medical Director (Board) and Nurse Director (Board). Dr Cowan has a dual role as Medical Director for Acute Services and Ms Crocket is also the new Director of Women and Children’s Health.

Continued on page 2
First Phase

Continued from page 1

Other key appointments at Board level include:
• Associate Board Medical Director
  - Dr Bill Anderson
• Medical Director, New Children’s Hospital Project
  - Morgan Jamieson
• Head of Human Resources (Partnerships)
  - Andy Carter
• Head of Performance and Corporate Reporting
  - David Walker
• Head of Inequalities and Health Improvement
  - Sue Laughlin
• Head of Clinical Governance
  - Andrew Crawford

Top level appointments in the rest of NHSGG are as follows.....

Acute Services
• Chief Operating Officer
  - Robert Calderwood
• Finance Director
  - Peter Gallagher
• Head of Prescribing Policy
  - Kate McKean
• Medical Director
  - Dr Brian Cowan
• Nurse Director
  - Margaret Smith

Acute Services Strategy
• Head of Service Planning
  - Pat Kilpatrick
• Head of Capital Planning and Procurement
  - Tony Curran

Diagnostics Directorate
• Director - Jim Crombre
• General Manager Laboratory Medicine
  - Isabel Ferguson

Emergency Care and Medical Specialties Directorate
• Associate Medical Director
  - David Stewart

Accidents can happen in all walks of life and the NHS is no different.

The reporting of accidents and incidents that happen in our hospitals, health centres, clinics or management offices is an essential part of our health and safety management system.

Whether an accident or incident has happened to a member of staff, a patient or a visitor, it should be reported. If accidents and incidents aren’t reported the necessary steps can’t be taken to prevent them happening again.

Even near misses should be reported, especially if an incident had the potential to cause injury or damage to staff, patients, visitors or NHS equipment and property.

The type of accidents and incidents that should be reported include:
• slips, trips and falls;
• fires;
• violent or aggressive behaviour;
• needlestick injuries;
• spillages;
• and any exposure to harmful substances.

As much information as possible should be recorded on the appropriate forms (either an IR1 or an AR1) to enable Health and Safety advisors to monitor where accidents or incidents are occurring and to make sure this doesn’t happen again.

Please make sure that if an accident or incident happens in your place of work, it is properly reported.

Don't leave it - report it!

Having Problems Seeing StaffNet?

In the last Staff News, we reported that StaffNet Comms was going to become the new default page you see when you open your Web browser (Internet Explorer).

However, it has come to our attention that this isn’t the case for a small number of staff. If you’re one of them, do not despair! You can still access the site by entering the following address into your Web browser:
http://staffnetcomms

Once you’re on the site, you may be able to set this to your default homepage. If you’re not sure how to do this, then it’s best to seek advice - log a call with the Helpdesk on #650 and your local IT department will help. Work is ongoing to change the homepages for the remaining staff, but this will take time to complete.
New Appointments

Appointments Announced

Eleanor Stenhouse is the new Head of Midwifery with Women and Children’s Health

- Head of Nursing
  - Cath McFarlane
- General Manager: North & East Sector
  General Medicine and City-wide Cardiology and Renal Medicine
  - Alan Hunter

Facilities Directorate
- Director - Alex McIntyre
- General Manager Facilities
  - Alistair MacLean, William Hunter, Mary Ann Kane
- General Manager, CHP Facilities
  - David Pace

Oral Health Directorate
- Director - Kevin Hill
- Head of Planning and Health Improvement
  - Anna Baxendale

Regional Services Directorate
- Director - Jonathan Best
- Head of Nursing - John Stuart

Rehabilitation and Assessment Directorate
- Director - Anne Harkness
- Head of Nursing - Ellen Hudson
- General Manager (North)
  - Jane Arroll
- General Manager (South)
  - Marie Farrell

Surgery and Anaesthetics Directorate
- Director - Jane Grant
- Associate Medical Director
  - Tim Cooke
- Head of Nursing
  - Lesley Meikle
- General Manager: City-wide General Surgery and Urology North and East Sector
  Co-ordinating Role
  - Mary McGinley

Women and Children’s Health
- Director - Rosslyn Crocket
- Associate Medical Director

- Dr Iain Wallace
- Head of Midwifery
- Eleanor Stenhouse
- General Manager Hospital Paediatrics
- James Redfern

Community Health and Social Care Partnerships (CHSCPs)
- Glasgow City CHSCP Directors
  - Terry Findlay (Lead), Alex MacKenzie, Iona Colvin, Mark Feinmann
- Glasgow City CHSCP Heads of Planning and Health Improvement
  - Evelyn Borland, Fiona Moss
- East Dunbartonshire CHP
  - CHP Director - David Leese
- East Dunbartonshire CHP
  - Head of Planning and Health Improvement
  - Lynda Hamilton
- West Dunbartonshire CHP - CHP Director
  - Keith Redpath
- West Dunbartonshire CHP
  - Head of Health and Community Care
  - Christine McNeill
- Head of Health and Community Care
  - Lorna Dunipace, Sheena Wright

Mental Health Partnership
- Head of Planning and Performance
  - Doug Adams
- Nursing Director - Eileen Burns
- Head of Mental Health with Area Responsibility
  - Calum MacLeod, Clive Travers
- Head of Mental Health without Area Responsibility
  - James Crichton

Mary McGinley takes on the new role as the General Manager, City-wide General Surgery and Urology North and East Sector

Ian Reid, Director of Human Resources, said: "This list represents the first tranche of key appointments in the new single system NHSGG. We are still working through the next level appointments and will inform staff of these new posts as soon as that process is complete."
Art in mind at Stobhill and the Vicky

The new Stobhill and Victoria hospitals will be cutting-edge in all sorts of ways, but for the first time ever in Glasgow, they will be designed with art in mind.

NHSGG’s new Arts and Health Co-ordinator, Jackie Sands, is leading the way and putting art and design at the forefront of the new hospitals and across NHSGG.

As an artist, a former art student, art teacher and theatre designer, Jackie has years of experience taking art out to the public, including managing the role of Art in the Health Service in East London.

Now it’s Glasgow’s turn and, as Jackie says, it is not a simple matter of putting pretty pictures on walls.

She said: “Far from it! Art in hospitals can make a difference to patients’ recovery. It’s about all your senses; seeing pictures, listening to music, feeling and making sculptures, performing in theatre and even smelling scented gardens.

“Participation is the biggest thing. It’s not just the people making the art having all the fun! Schools and other groups can produce art, patients and staff can take part and there are probably a million more ways too!”

“Participation is the biggest thing. It’s not just the people making the art having all the fun! Schools and other groups can produce art, patients and staff can take part and there are probably a million more ways too!”

"The thing is, it works. Studies show that having a garden view or playing live music can reduce people’s perceptions of pain and even cut the need for painkillers. It’s also been suggested laughter can boost your immune system.”

Jackie wants to make art a priority at the new Stobhill and Victoria from the outset. Funded by the Scottish Arts Council, she’ll be overseeing arts projects within the new hospitals.

“My job’s to show investment in good design at the beginning pays off. I hope the new Victoria and Stobhill will look and feel quite different from what people are used to and within a few years we’ll be able to see the difference quite clearly.”

UK staff first in managing conflict

NHSG Greater Glasgow has become the first healthcare organisation in the UK to have staff qualified to City and Guilds level to deliver Conflict Management Training.

The 13 trainers have received their certificates and are now training others in the techniques to “de-escalate” situations before they develop into aggressive behaviour and violence towards hospital staff.

Kenneth Fleming, Head of Health and Safety for NHSGG’s North Division, explained why he decided to organise the training:

“We looked at our incidents statistics and realised there was a significant number of incidents involving violence and aggression to staff. We decided we had to train people to deal with these situations and bring in an external company to carry out the initial training and create our own in-house trainers.”

Volunteers for the training came from all over the North Division and Maybo, a company specialising in conflict management, were brought in to carry out the training sessions. Staff were taught to take defensive measures such as moving out of the other person’s personal space, and also prepare an ‘exit strategy’ by making sure they know how to leave in a hurry.
Work is progressing to develop the new Community Health Partnerships (CHPs) which will improve the way local health services are organised and managed.

Nine new CHPs are being developed across Greater Glasgow:
- five covering Glasgow City (East Glasgow, West Glasgow, North Glasgow, South East Glasgow and South West Glasgow)
- one covering West Dunbartonshire
- one covering East Dunbartonshire
- one covering East Renfrewshire
- one covering South Lanarkshire (including the Rutherglen and Cambuslang area of Greater Glasgow)

The six CHPs being developed across Glasgow City and East Renfrewshire will also be responsible for a wide range of social care services. These integrated CHPs will be known as Community Health and Social Care Partnerships and Community Health and Care Partnerships respectively.

The Scottish Executive has approved the Schemes of Establishment for eight of the nine CHPs. These documents set out how the new Partnerships will be structured and what services they will manage.

The Scheme of Establishment for the remaining South Lanarkshire CHP will be considered by the NHS Greater Glasgow and NHS Lanarkshire Boards in September 2005 before being submitted to the Scottish Executive for final approval.

Copies are available on the new CHP web-sites (www.chps.org.uk).

New introductory CHP leaflets and posters have also been distributed to health centres, social work offices and community groups across Greater Glasgow.

Work is also underway to develop corporate identity guidance for the new CHPs and to develop local communication plans to raise awareness of these new Partnerships.

Phase 1 of the management reorganisation of Greater Glasgow, which included the CHP Director posts and some of their direct reports, is complete. The full management teams for each of the CHPs will be established following the completion of Phase 2, which will run until the end of September 2005.
Many staff across NHSGG are finding their roles are changing and this is nowhere more evident than with clinical pharmacists based in hospitals.

Before, they waited for someone to turn up with a prescription - usually in the basement of the hospital - and that would be their only contact with other staff and patients.

But, that has all changed and now many clinical pharmacists are working on wards as important members of clinical teams.

Their role is much more public and they are often seen chatting to patients up and down the wards in Glasgow’s hospitals.

So what are their main duties? Clinical pharmacists have a varied role to play on our wards. They will take medication histories, check what patients have been prescribed and what progress patients are making, as well as advise doctors on the most effective medication.

Ysobel Gourlay has worked as a pharmacist for 19 years and is currently based at Gartnavel Royal Hospital. She welcomes the increased role for pharmacists in the NHS.

She said: "Initially pharmacists were just thought to put pills in bottles. Now we are on the ward, working as part of multidisciplinary teams. We are much more involved and I think much more respected as part of the team."

The next for pharmacists is the extra qualifications to enable them to prescribe themselves, albeit in agreement with clinicians. Already many pharmacists are taking this step.

Whatever happens in medicine over the next few years, pharmacists will certainly have a huge part to play.

### Mac Ball Time

This year’s Mac Ball takes place at the Moat House Hotel, Glasgow on Saturday, October 1, 2005.

Held in aid of Marie Curie Cancer Care, the event includes a four-course dinner, ceilidh and disco. Tickets are £45 per person.

Details: www.themacball.com or call 0141 632 3350 / 07866 775026.

### Speech and Language Therapy Week

The Royal College of Speech and Language Therapists is holding a dedicated Speech and Language Therapy Week to coincide with its sixtieth anniversary.

Look out for information stands and local events from October 10th-14th, 2005 which aim to explain more about the beginnings of the profession and highlight the diverse range of clients and disorders with which SLTs now work.
The Endoscope

Casting ouch

N
ews reaches The Endoscope that NHSGG intends to set up a film and tv service to scam a few quid from production companies eager to find unusual locations - to wit; various used and disused hospitals.

Perhaps this new effort will secure some silver screen glory which amounts to more than the odd episode of Taggart. Clearly there are locations here that could’ve been contenders for some of the classics of yesteryear:

- Colorectal Surgery Department, the Royal - The Ring
- Western Infirmary Christmas Party - Dr Strangelove
- Glasgow Dental Hospital and School - Jaws
- Cowglen Hospital - The Vanishing
- Southern General - The Sweet Smell of Success
- Orthopaedics Department, Gartnavel General - This is Spinal Tap
- Radiology, Victoria Infirmary - Weird Science
- Dalian House - Unforgiven

Socket and see

I
n the brave new world of Community Health Partnerships, NHS and local authority staff will come together to work as one finely honed machine in the service of the people - without rivalry.

Aye, right.

This joke posted on the internet by unnamed members of staff at a hospital in the north of England suggests that it could be some time before there is a merging of minds.

How many social workers does it take to change a light bulb? They can’t - they don’t have the skills. But they would be able to print a leaflet entitled ‘Coping with Darkness’.

Bob-a-job

A
s most semi-alert staffers will have noticed, Robert Calderwood (pictured) has received the dubious honour of being given the job as hospitals head honcho along with the worst acronym in the long and torrid history of health service management - COO - the Chief Operating Officer. This, as you will gather, will keep The Endoscope supplied with cheap shots and jokes obvious even to Big Brother contestants for years to come.

However, to delay the inevitable, the COO escapes the slaughterhouse this time only to make room for other (real) acronyms that do not bear close scrutiny.

The British Army is second only to the NHS in organisational lunacy and so officers in Germany can look forward to being appointed as Divisional Intelligence Liaison Duty Officers. As always, the Navy bring up the rear with their Flag Lieutenant to the Admiralty Board.

Acronyms are not restricted to job titles and there are many in healthcare which often appear in the margins of notes, hopefully remaining unintelligible both to patients and their solicitors. You can find a good selection from around the world at http://www.businessballs.com/acroynms.htm

Gems (see what I did there?) include: AGA - Acute Gravity Attack (patient fell over); BUNDY - But Unfortunately Not Dead Yet; DTS - Danger To Shipping (obese patient); FLUF - Fat Little Ugly Fellow (particularly popular in this part of the world); FOBIO - Frequently Outwitted by Inanimate Objects; LONI - Lights On, Nobody In; MEGO - My Eyes Glazed Over (popular expression among ‘caring’ GPs); NQR - Not Quite Right; PITA - Pain In The A**e; SIG - Stroppy Ignorant Git; TOBASH - Take Out Back And Shoot; TUBE - Totally Unnecessary Breast Examination; UBI - Unexplained Beer Injury, and; UNIVAC - Unusually Nasty Infection - Vultures Are Circling.
As martial arts go, Tang Soo Do is not the best known. But for PCD’s Ruth Edwards, it’s been one of the best things she’s ever done.

For Ruth is the current Tang Soo Do World Champion for both the Ladies 1st Dan Free Fighting and the Ladies 1st Dan Hyung.

Ruth (32), a Senior Prescribing & Information Analyst with the Medicines Management Team, was one of five women who were part of a 25-strong British team competing in the 11th Tang Soo Do World Championships.

Held this year in Watford, the Championships attract the very best martial artists - both men and women - from across the globe, including Germany, USA, Sweden and Malaysia, and are held every two years. The next competition is taking place in Greece in 2007.

Ruth, who picked up two massive trophies and medals in the competition, said: “Taking part in the Championships was the most nerve-wracking thing I’ve ever done, but I really enjoyed it and I’m delighted to have won. I’ve been overwhelmed by the reaction everyone’s been having to my winning. Everyone - my husband Paul, family, friends and workmates - have all been very excited for me. It’s been lovely.”

Ruth’s boss, Dr Andrew Power said: “I can speak for all Ruth’s colleagues in the Medicines Management Team in saying how delighted I was to hear of her success in becoming World Champion in Tang Soo Do. A more modest and self-effacing World Champion you are unlikely to meet. Ruth’s success is due to dedication to training in a martial art that she clearly has a great talent for. Fortunately she is also unusual in elite sportsmanship in that she actively enjoys training itself and not just the ‘big match.’ We are all looking forward to her further success in 2007.”

So how did the former maths teacher end up being a world champion in martial arts?

At the tender age of 14, Ruth was persuaded to go along to her local Tang Soo Do lessons by a close friend. She loved it so much, she continued to practise her art until 1995 when she had to give it up because of work and other commitments.

Ruth started working for NHSGG three years ago after working as a maths teacher in Gateshead and studying for an MSc in Operational Research. Based at the PCD HQ at Gartnavel, her job involves data analysis for the Medicines Management Team, including looking at general prescribing trends and prescribing data.

She had been in the job for a year when she decided to take up Tang Soo Do again after discovering there were classes at the Kelvin Hall in Glasgow.

She said: “Tang Soo Do is an ancient Korean martial art of self defence. During training there is no contact and we don’t use weapons. It’s quite skilful. We do fight and block, but the idea behind it is to stop the punch or kick about an inch away from your opponent.”

Ruth also does hyung which is
Looking for an easy way to start a savings account or to obtain a loan? Then why not join the West of Scotland NHS Employee Credit Union?

A financial cooperative, owned and controlled by its members, the Credit Union is easy to join and open to all NHS employees working in the West of Scotland.

Some benefits of joining the Credit Union include:
- Savings are made easy with payroll deduction;
- Dividend Paid on Savings;
- Loans are tailored to meet the needs of the individual and terms are flexible;
- Loans at reasonable rates of interest;
- Free life insurance on savings & loans (at no extra cost to the member);
- No hidden charges or fees;
- The Financial Services Authority regulates Credit Unions:
- Members have access to the Financial Services Compensation Scheme.

How to Join?
For more information or a membership application pack call the Credit Union office on 0141 886 7246, alternatively you can download a form from their website: www.nhscreditunion.com

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the Tang Soo Do equivalent of kata - an exercise demonstrating the specific movements of a martial art. She trains three to four times a week, going up to five or six times in the lead up to competition. As well as this punishing schedule, she also finds time to fit in going to the gym and climbing mountains.

She said: “I really enjoy Tang Soo Do. It’s very physical and demanding, but really great to take part in. I’d recommend it to anyone.”

**Interested in Tang Soo Do?:**
- pop along to the classes at Kelvin Hall Sports Arena, Glasgow on a Tuesday night between 8pm and 9.30pm or
- contact the United Kingdom Tang Soo Do Federation on 07816 571346 or go to their website: www.uktsdf.org.uk

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An Easy Way to Save

Looking for an easy way to start a savings account or to obtain a loan? Then why not join the West of Scotland NHS Employee Credit Union?

A financial cooperative, owned and controlled by its members, the Credit Union is easy to join and open to all NHS employees working in the West of Scotland.
The job of NHS staff is to care for others. Whether you work in a hospital or go out to visit people, the aim is to look after those who are sick or frail.

For many the job doesn’t stop when we go home - families need looking after too and for some of us this can bring real pressure to bear in trying to divide time and energy in order to care for a sick child or elderly relative.

Shona MacInnes is NHSGG’s Carers Co-ordinator, the only post of its kind in Scotland.

She said: "We are aware that, just as with any other organisation, some of us are carers at home too with all that entails in juggling the conflicting demands of work and home."

Asked to define a carer, Shona said that, for practical purposes, the profile was generally broken down into three groups:

- A Carer is someone who looks after a partner, relative or friend who cannot manage without help because of illness, frailty or disability. They may or may not live together.
- A Young Carer is a young person up to the age of 18 who provides care and support for a family member who is affected by chronic illness or disability.
- A Parent Carer is a parent of a disabled child or young person.

While many Carers look after people on a full-time basis, others do so for part of the time in tandem with other commitments.

Shona said: "NHSGG has carers policies in operation. There are ways in which we can help staff, but some people don’t like to approach their manager because they’re not sure what the response will be. Fortunately, staff who tell me they’ve enquired about the support available to them have also said that they were made to feel quite comfortable about doing so."

So what help is available? You can ask for a copy of your divisional carers policy or get it from the intranet. The policy will give you details on the type of help you can ask for. For instance, it might include information about requesting paid or unpaid leave,
Willow Foundation

being given time off in emergencies and having time off to accompany the person you care for to hospital appointments.

A member of staff who recently accessed one of the divisional carers policies told Staff News: "I explained my situation to my manager and we agreed an arrangement to allow me some time off to carry out my caring duties. I was happy with the outcome of that.

"My concern, though, was that I didn't ask at the time about how many people the information would be passed to, what level of detail they would have and who would be able to access it. It can be difficult for carers to talk about their situation and there are some circumstances you'd prefer not to share with others."

Helen Ostrycharz, Director of HR for the Yorkhill Division, was happy to provide that reassurance.

She said: "Personal information discussed as part of an application for Carers Leave is definitely on a "need-to-know" basis. Normally the only others who need access to anything personal will be the manager granting the leave, usually in conjunction with an HR manager giving advice on the application of the policy. There may be others such as immediate supervisors or work colleagues who will need to know only that a planned absence has been agreed so that arrangements can be made to cover the workload."

Other types of help available includes:

- an Information and Support Line - 0141 353 6504 or e.mail carerssupportline@crossroads-scotland.co.uk.
- and several leaflets.

A UK-wide charity which organises special days out for seriously ill young adults aged between 16-40 years is appealing to NHS Greater Glasgow staff to nominate patients to enjoy an outing of their choice.

The Willow Foundation was launched in 1999 by former Scotland and Arsenal goalkeeper turned TV presenter, Bob Wilson, and his wife Megs.

It was founded in memory of their daughter Anna, who died aged 31 the previous year from a rare form of cancer.

As part of a national awareness campaign in October, the charity is visiting Glasgow Western Infirmary's Function Suite (beside the canteen) on Wednesday, October 5, between 12 noon and 2 pm, with presentations at 12.30 and 1.30 pm.

Members of the Willow team, including Bob and Megs, will be there to explain the charity's work in more detail.

The Foundation defines seriously ill as any condition that is life threatening.

Special days have included everything from tandem sky diving, HGV driving and flights in microlights, to family trips to a theme park or a London show.

The charity relies heavily on medical staff recommending its service to their patients.

If you can't make it along, you can still recommend a patient. Contact the charity at: tel - 01707 259777; email - info@willowfoundation.org.uk; website - www.willowfoundation.org.uk

Wish granting charity with national ambitions

Bob Wilson with his daughter Anna
AHPs Play Important Role Too

Allied Health Professionals (AHPs) play an important role within NHSGG - helping to cut waiting lists, taking on more and greater responsibilities. However, although they are all grouped under the one name, there is no such thing as the AHP profession. Instead, there are a number of professions and they all provide very different services.

A number of AHPs are represented on the Area Partnership Forum - Dieticians, Podiatrists, Occupational Therapists, Radiologists and Physiotherapists - and each of these and the other AHP professions have their own professional structure.

With the reorganisation and modernisation of Glasgow’s health services, some AHPs have raised concerns about the effect this will have on how they work and the input they will have into major decisions affecting them.

For instance, with the development of Community Health Partnerships (CHPs), the proposed structure of the new organisations means there will be one AHP lead for each CHP. In other words, all the AHPs working within that CHP will be represented on its management committee by one person - someone who may be in a completely different speciality.
focus on ahp’s

Caroline Fee, who represents the Society of Chiropodists and Podiatrists on the Area Partnership Forum, highlighted some of the issues.

She said: “AHPs have been saying for a long time that there needs to be more awareness of the differences between the professions. AHPs have real concerns over the practicality of one person speaking for such a number of diverse professions. There is another issue in that some AHPs may be placed in teams led by a manager with no professional leadership accountability for their profession. We need to look at the implications of this and AHP staff representatives have met with NHSGG’s Chief Executive and Director of Planning and Community Care in order to raise these and other issues.”

Catriona Renfrew, Director of Planning and Community Care, said: “This was a really positive, productive meeting and we were able to address a number of the issues raised by the AHPs. We recognise the critical role they play in direct patient care as well as in driving service change and innovation. Our new organisation aims to strengthen the influence and role of AHPs, through the creation of CHPs, and the new Rehabilitation and Assessment Directorate, which will bring together dietitians, physios, OT, speech and language therapists and podiatrists working across the acute services.”

So what are the different professions who come under the AHP banner? Over the coming issues, Staff News will be taking a closer look at the work of AHPs, starting with the acute physiotherapist......

Martin Yorston has been a physiotherapist for three years working in Stobhill and the Royal Infirmary.

He said: "I first got interested in physiotherapy early on, at about 15, because I play rugby and thought I’d like to get involved in the sports side of things. Working in the hospital, though, I’m widening my experience all the time and find that I actually like the long-term contact with patients. "We’re probably one of the professions that manages to have the most sustained close interaction with patients. It gives them time to learn to trust you and the very close physical contact helps with that. You get to know them and it lets you make better decisions about how to treat them. That’s probably the biggest challenge for me - how as physios we work in such an individual way and design treatments for patients that won’t affect the healing process. "That’s why it’s so important to liaise with nursing staff and be aware of any changes you may need to take into account. "The other side of that is the most rewarding aspect of the job - when you can see the effect of what you do and actually see people improve and recover. Physiotherapists have made a real difference in cutting waiting lists because of the number of new clinics and extended practitioner roles. I think the profession is making a more important contribution to the service all the time.”

Members of the Allied Health Professions, such as the podiatrist below, provide a valuable service in our hospitals and in the community.
He's enjoyed some of the best seats in the house at many of Glasgow's biggest music and sporting events, and it's all been part of his working day as a GP.

Dr Eamonn Brankin is the city's Co-ordinating Medical Officer for Major Event Medicine together with his team of NHS Greater Glasgow staff, or as he describes it: "I'm the rock and roll doctor!"

Events can range from 10,000 REM fans at Glasgow Green, to the Pollok Family Fun Weekend and the G8 summit at Gleneagles.

At various times since 1990, when Dr Brankin took up the post, he has also looked after stars such as U2, Oasis, The Corrs, Rod Stewart and Eminem.

The team has also worked during Glasgow’s Hogmanay party to treat over-enthusiastic revellers who have injured themselves.

His expertise in sports medicine has led him to covering football fixtures ranging from Albion Rovers and Celtic to the Champions League Final at Hampden Park two years ago.

The decision to create event doctors was taken following the Hillsborough football stadium disaster.

Before an event, the team draw up a list of staff and resources based on crowd numbers and potential risk.

Generally staff treat dislocated shoulders, sunstroke, head wounds, asthmatic attacks and epileptic seizures.

More serious injuries are treated immediately at the event, before patients are taken to hospital by the Scottish Ambulance Service.

Dr Brankin said: "The ethos is that we try to deal with anything that comes along on site, to minimise the impact on Accident and Emergency departments."

The specialties involved can include GPs, consultant surgeons, nurses, and anaesthetists.

"We have an event medical centre if there was to be a major incident," explained Dr Brankin, "and that would become a MASH type unit. We would deal with what we can on site and then refer patients appropriately."

Dr Brankin is one of the few doctors to have a Diploma in Immediate Care from the Royal College of Surgeons, is a founder member of the Academy of Immediate Medical Care, has a Diploma in forensic medicine, as well as his background in acute care and as a GP.

He added: "I'm lucky to be working with a very good team of clinicians across NHS GG."

Dr Brankin treats an injured piper at the recent World Pipe Band Championships in Glasgow.
The Communications Department have had another busy two months on the media front with NHSGG regularly making the headlines. There have, as usual, been some controversial stories and also some successes in getting the word out on positive examples of the services we provide.

Here we take a look at some of the big stories they have handled recently.

**New bed modelling proposals**

In July, new bed modelling proposals were put to the NHSGG Board. Three different bed model options were put forward which would see an overall decrease in the number of inpatients beds between around 175 and 300. While the media did report on the potential bed losses the Press Desk ensured that what could have been a very negative media story was balanced by highlighting that the bed modelling proposals also proposed radical new re-designs which opened up excellent possibilities for patient care in the future.

**Availability Status Codes**

In July, the department’s Press Desk managed some intense media relations around the issue of Availability Status Codes (ASC). As the largest Board in Scotland with the highest number of patients with an ASC, NHSGG attracted much attention when the SNP released new figures to the media. A variety of patient experiences were highlighted throughout the national media however the Press Desk worked hard to stress that given the size and scope of the complex tertiary surgical work carried out in NHSGG the number of patients with an ASC tends to be higher. It was also pointed out that the number of patients with an ASC is reducing and that more than 80% of ASC codes in NHSGG are patient driven. The Press Desk therefore did manage to achieve some successes in turning coverage around.

**Launch of Babycam**

In late July, the Press Desk staged a very successful media launch of Babycam - a new hi-tech two-way camera allowing mothers confined to bed to keep an eye on their babies in the Princess Royal Maternity’s Special Care Unit. Excellent coverage was achieved on STV, BBC TV and radio, all major radio stations plus an excellent spread in the Scotsman, Evening Times and other print media.

**Focus on the West of Scotland Oral and Maxillofacial Unit**

In early August, the Press Desk took the opportunity to promote the work of the West of Scotland Oral and Maxillofacial Unit, based at the Southern. An exclusive look inside the unit, which creates new faces and body parts for those who have been disfigured as a result of illnesses and injuries, was offered to the Evening Times. The paper was given full access to the Unit and met with staff and patients - the result was an excellent front-page piece plus a double page spread inside the paper.

**Scottish Heart Transplant Unit**

In response to false claims in a Sunday newspaper that the Scottish Heart Transplant Unit based at GRI may be closed down, the Press Desk worked out-of-hours over a weekend to strongly refute the story and set the record straight.

It was stressed that, contrary to any suggestion of closure, the remit of the national unit is currently being expanded to form a National Centre for the Treatment of Advanced Heart Failure (NCTAHF) so that more services, including alternatives to heart transplantation, can be offered. As a result the Evening Times ran a story the following day reassuring the public that NHSGG was in no way planning to close the unit.
Nominate a colleague

Do you know a healing hero? That's the question being asked by the Scottish Exec's Health Department and the Daily Record as they launch this year's Scottish Health Awards.

Once again, they want you to nominate colleagues whom you feel have gone that extra mile or made a real difference in their job.

And there’s prizes totalling £25,000 to be picked up by the winning nominees.

Last year, Dr Richard Groden, a GP at Tollcross Medical Centre and Board member, won the Doctors award; Jake McGinness, a mental health charge nurse at Parkhead Hospital, received the award for the Nurses category; and the Health Improvement Team from the Forensic Directorate at Leverndale Hospital, won the Mental Health Team Award.

Ian Reid, NHSGG’s HR Director, urged staff to nominate their colleagues: “This is a great chance for staff to be recognised for the commitment and care they give our patients. There are hundreds of examples of members of staff who give that wee bit extra to make a real difference to patient care. If you know someone who fits this description, then why not nominate them for a Health Award?”

Information and nomination forms: 08000 272824 or www.cci.scot.nhs.uk
Nomination forms must be completed and submitted by Friday, September 16, 2005.

Got a moment?

Have you been on StaffNet Communications yet? If not, you should have! StaffNet Communications is the new intranet site for all of NHSGG’s 33,000 staff and is the forerunner to the currently-under-development full version of StaffNet.

Recently, most of you will have noticed that your default homepage on your Web browser had changed, so that each time you open it, StaffNet Communications appears. If this hasn’t happened to you yet, don’t worry, you can still access it via http://staffnetcomms (just click the link if you’re viewing a live version of StaffNews, or type the address into Internet Explorer if you’re reading the printed version).

Through all these new changes, it’s important to know just what staff’s opinions and expectations are, so we would be very grateful if you could spare a minute or so filling in our mini-survey. Once finished, please return it to us through internal mail:
Staff News, Communications Department, NHS Greater Glasgow, 3 West, Dalian House, 350 St Vincent Street GLASGOW G3 8YT.

Please circle your answer as appropriate.

Does StaffNet Communications open up as your default homepage when you run Internet Explorer?
Yes / No / Not sure

Do you find StaffNet Communications a useful tool for finding out what’s going on in NHSGG?
Yes / No / Maybe

Would you like to see additional features added, such as a general announcements page?
Yes / No / Maybe

Have you had any problems accessing StaffNet Communications?
Yes / No

If so, did you log a call with the Helpdesk?
Yes / No

Do you have any comments you’d like to make about StaffNet or do you have any ideas about how you’d like to see StaffNet developed?
Please write them in the space provided...

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 new email address: staffnews@nhogg.org.uk

Send them to:
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