Smokefree Hospitals from 26/03/06

NHS GG’s hospitals, health centres and other healthcare settings will be smokefree from March 26, 2006. From that date, you will not be allowed to smoke anywhere in our buildings and outside spaces. To find out more about the no smoking policy and how this affects you in your job, turn to pages 8 and 9.

Spring Launch for Parking Charges

News of new parking policies at each of Glasgow’s main hospitals is, understandably, causing some concern for staff and the public.

After enjoying years of free parking, we all now face having to pay for the privilege of parking at work.

This is not something that may happen, it is happening now and the first sites to face NHS GG’s new parking policy (excluding the GRI which already has paid-for parking) are: Dalian House, Yorkhill (staff are already paying to park) and the Western.

Charges will begin to be applied at these three sites as close as possible to April 1, 2006.

So what’s behind it all? Hospitals across Scotland are all currently facing up to the same problems regarding car parking, as local councils implement new planning regulations to try and reduce peak time usage of private cars and encourage more people to switch to public transport.

NHSGG is introducing its parking policy, as required by local authorities, to support its ‘Green Travel Plan’. The proposed parking charges to be introduced at each of NHSGG’s hospitals are part of that plan.

It’s not all bad news. Money raised through charges will be used

Continued on page 4.

Inside this issue

New Child Protection Unit
Meet our poet Sylvia
Dealing with aggression

Plus… Teen Pregnancy midwife · New Director · Audiology · NHS jobs
Computer Deal
Problems Being Sorted

It seemed like a great deal at the time, but for many of our staff BT’s Home Computing Initiative turned into a bit of a headache.

Last year, Staff News told you about a fantastic new opportunity for staff to lease computer equipment from BT.

And it was a good initiative - except for some blips at the BT/Dell end.

About 4000 NHSGG staff signed up for the computers and, going by the complaints we received, waited....and waited...and waited. Some lucky ones actually received their orders. Others received partial orders. Others received faulty goods.

One member of staff, who asked not to be named said: “When you went to complain, the phone number provided by BT got you nowhere. Over the Christmas period especially, if staff were lucky to get through, there were few BT operatives answering the calls. When they did, they often couldn’t help or gave another number. Calls were cut-off or rang out.”

HR manager, Helen Ostrycharz, and Employee Director, Donald Sime, quickly got on the case and contacted BT with staff complaints.

Helen said: “We met with the BT Chief Executive for the Division following on from meetings between BT and the Scottish Executive.

“BT have apologised for the poor service. They explained that the problems had arisen because their systems could not cope with the volume of orders, insufficient stock from their suppliers and poor service from the couriers. “However by mid January, they have put in place a number of measures to retrieve the situation and are reporting weekly on their progress. In addition, they have offered a goodwill gesture of money-off purchases made at the BT Shop to staff who received a substandard service.

“We continue to receive a number of complaints from staff and we are trying to assist staff who have been unable to resolve their queries directly with the BT call centre.”

Web-Based system speeds up dictation

A new computer dictation system has significantly improved how pathology staff at the GRI and Western produce test results.

The web-based Winscribe digital dictation software has dramatically reduced the time taken to produce histo pathology (investigation into possible cancerous tumours) results.

Ian Kerry from NHSGG’s Programme Office, which works to find IT solutions for issues across the system, explained: “Previously reports went through a long rigmarole of procedures that involved Consultants dictating reports on to cassette tapes. The tapes going to PAs for typing, the report coming back for checking, corrections being done and the final report printed.

“As the Consultants’ and PAs’ offices are often on different floors of hospitals, the entire process could take several days, increasing anxiety for patients and delaying treatment.

“PAs also reported finding it sometimes difficult to identify an urgent piece of work from the pile of cassette tapes. There was also the added issue of Consultants accurately recalling details of a specimen from handwritten notes made during the dissection process.”

Ian and his colleagues organised for the new system to be installed, including new networked PCs with microphones, and it has dramatically improved things. Hands-free equipment allows Consultants to dictate whilst dissecting or operating a microscope. To eliminate typing errors, bar codes are used to identify specimens.

Ian continued: “Typists find the digital sound quality much clearer and being able to view all the outstanding work helps them to better plan their workload. The other bonus is that, in the event of staff shortages at one hospital site, typists from the other site can take up some of the workload.

“More importantly, there’s been a marked reduction in the time test results are given back to patients.”

For more information or to place an order, www.bthomecomputing.com/nhsgg

Dr Fraser Duthie, at the Pathology Department of the Southern, in the future.

Dr Robin Reid, Associate Medical Director Diagnostics, said: “This new system has brought enormous benefits to staff, in terms of speeding up dictation. It’s also useful for Consultants to dictate long and detailed descriptions without the issue of having to write down notes.”

The new dictation system has also been installed in outpatients clinics at the Western, Stobhill and the Southern. In the future, the Programme Office is looking to introduce it to record dictation from our Consultants working outwith the Glasgow area and to introduce Voice Recognition.
When you work for NHSGG, it’s not often that going to work involves appearing on international television.

But, for School Nurse Liz Ratter, an idea on how to teach children of the dangers of skin cancer ended up with her doing just that.

The 33-year-old was at the centre of a major media event at the beginning of the year when word spread of pupils being given “fake tan lessons” at Thomas Muir High School.

As can often be the case, the truth was somewhat different.

Liz said: “Alice Coyle, who’s a guidance teacher, noticed a lot of the kids were coming in after lunch very obviously having used sunbeds during the break.

“We realise there is that added pressure today on kids to look their best. I was the same when I was younger, but we couldn’t ignore this. We were both quite worried this could increase their risk of skin cancer and we wondered what to do.”

What Liz and her teacher colleagues did was get in touch with fake tan companies for help. That led to Fake Bake staff coming out to Thomas Muir High to give pupils lunchtime lessons in how to apply fake tan, to back up the sun safety lessons they had already taken.

“As an addition to the talks, the fake tan lessons proved very popular with the pupils and it was quite fun too. Around 50 of them turned up for the lunchtime tutorial. From the feedback I have been getting, it does appear that our talks have hit home and the students are leaning more to the fake tan rather than the sunbeds. This is excellent news and I’m delighted at its success.”

In turn, this led to a huge amount of media interest and Liz’s appearance on TV and in some of the biggest national newspapers!

“I was quite surprised by how busy it all was on the day the press came! I was interviewed on camera by Sky News, and did a phone interview with a journalist from the Daily Telegraph in London. I spoke to reporters from the Daily Record and the Times, so it was quite exciting. Taking all the pictures took a while though!”

But how difficult was it for Liz to avoid the pitfalls some people are afraid of when it comes to talking to the media?

As Liz herself said, she has had 12 years of experience as a nurse but very little experience in the media spotlight: “I suppose I was a wee bit nervous, but I knew what I wanted to say when I was put on the spot!”

As for her new status as NHSGG’s newest celebrity Liz is laughing that off.

She added: “It was certainly not something I deal with everyday but as long as the message gets across then I’m happy.”
Taking an Holistic Approach to Teenage Pregnancy

Having a baby at any age can be a bewildering and, sometimes, terrifying experience.

But how must it feel for Glasgow’s 800 plus under-20s who give birth every year?

That’s just one of the things midwife, Laura Coltart, wants to find out as part of her new role as the ‘Project Midwife - Teenage Pregnancy’.

Created by NHS Greater Glasgow and Glasgow City Council’s joint Teenage Pregnancy Steering Group, the new post has been developed to specifically look at maternity provision for young parents.

Laura, who took up the post in December, explained: “In my new role, I’ll be looking at how maternity services are provided to young women in Glasgow’s three maternity hospitals and across the UK. I’ll be particularly looking for areas of best practice, of which there are many in Glasgow, and identify where the gaps are.

“Over the next couple of months, I’ll be involved in organising a confidential questionnaire and focus groups to find out the views of young parents who have used the services or who are currently using the services.

“The whole aim of this work is to redesign services to better meet the needs of young mums and dads and ensure protocols are in place to ensure there is a consistency in the service we provide.”

Laura revealed that young parents are less likely to use antenatal services, a problem that’s not just a Glasgow one, but one that’s seen throughout the UK.

“There’s a perceived stigma attached to being a young parent: they can sometimes feel they are being judged by health workers and other parents-to-be that they come into contact with; they may feel very uncomfortable using the services that appear geared towards adult parents; and, for under-16s, for whom sexual activity is unlawful, they often fear that they and their partner will get into trouble.

“We also find that many young mums-to-be also access maternity services late. For many, particularly the under-16s, it can take quite a bit of time for them to come to terms with what’s happening.”

Whilst there are a number of issues that can affect young mothers such as having smaller babies, being smokers, being underweight themselves, experiencing mental health problems, dropping out of school before or during pregnancy etc this often depends on their socio-economic position and the support that is available to them.

Addressing health and social inequalities is a key issue for Laura and her colleagues.

Laura said: “It’s important the NHS and the Council, along with partner organisations, take an holistic approach to service provision for this group of young people. We need to engage with young mothers and fathers to ensure they are given the support they need throughout the whole experience.

“This includes helping young mums to stay in or get back into education; supporting them with health and well-being issues such as depression; and promoting health education to both young mothers and fathers.”

This, Laura added, should have an add-on effect on the baby.

“If we can support and encourage young mums to remain in education, their life prospects may be improved. If we can promote a healthy lifestyle to them and encourage them to eat well, they are less likely to have low birth weight babies. If we can encourage the parents to have a positive relationship and include the father in the baby’s life, then that’s important for the baby. It all equates to improving the outcomes not only for the young parents, but for the baby as well.”
New drive to tackle child abuse

Staff worried about uncovering cases of child abuse can now get help thanks to a new unit set up at Yorkhill.

The Child Protection Unit provides training, support and advice to NHSGG staff to ensure you are aware of child protection issues and know exactly what to do if you encounter a child at risk.

Staffed by a team of dedicated child protection advisers and trainers, the unit provides a 24-hour, seven-days-a-week service to, not only health staff, but to other professionals such as police officers who may need advice on child protection issues or examinations.

Health staff will also work closely with social work, education and the police to make sure there is a joined-up approach to collecting and sharing vital information on children who may be at risk.

As well as training and support, new systems and procedures are also being introduced to help flag up potential cases at an early stage and ensure these are investigated as soon as possible.

This includes a scheme that is currently being piloted to help A&E staff identify and report cases where children attend the department with suspicious injuries. As many babies and young children encounter abuse at an early stage, new procedures are being developed to help you identify and report suspicious head injuries in children under the age of two. This will ensure that, in certain circumstances, cases would be automatically referred for further case discussion.

Specialist training has also been developed for staff who work with disabled children and those who may be involved in identifying or reporting cases of sexual abuse.

Marie Valente, Head of Child Protection Development for NHSGG, explained: “Although child protection has always been a key priority, we recognise that there are ways in which we can further improve the support we provide to staff. For example, in the past, some health staff may not have known exactly what to do if they were worried about a child or they may not have had the confidence to raise their concerns with colleagues or other agencies.

“Now all staff will have access to a dedicated child protection team to provide them with training, support and advice.”

Information: 0141 201 0489 or see StaffNet (under Staff Notices).
Hotel Services staff move to new pay system

More than 1500 NHSGG Hotel Services staff - part of the Support Services job family - were paid under the new Agenda for Change (AfC) agreement at the end of February.

Project Co-Chairs, Jonathan Best and Elizabeth Stow described the first payments to staff as a “significant milestone for the Project Implementation team and for the NHS in Greater Glasgow as we introduce the biggest change to pay and conditions since the NHS was created in 1948”.

Hotel Services staff across the city are employed in a wide range of roles such as Domestic Assistants (ward cleaning), General Services Assistants, Support Services Assistants, Porters, Laundry and Sewing Room staff and Drivers. Also included in the move were Chargehands and Supervisors working in the same staff group.

The Project Team and Payroll staff have been gearing up for the move to AfC for some time and are delighted that NHSGG can begin to deliver the benefits of the new arrangements to staff.

Hundreds of staff representatives, managers and other NHSGG employees have been participating in the implementation of the project in a number of ways including Job Matching Panels and creating Knowledge and Skills outlines.

Across the Operating Divisions, there are a number of measures in place to support staff who have concerns about the new pay agreement. These include: the setting up of drop-in centres, pay clinics, dedicated email accounts and staff newsletters including ‘All Change’ have been widely distributed to announce the move to AfC.

Staff can find out more by checking local notice boards, intranet sites and the NHSGG Agenda for Change web page at http://www.nhs.mmiddev.co.uk/ where there is information on Job Evaluation, Terms and Conditions and the Knowledge and Skills Framework.

There are also links to the national Pay Modernisation website where staff can find out more on the new pay arrangements.

The Project Team are already making preparations for more staff to move across to the new pay bands in the next few months. More details will be publicised in the next edition of All Change.

For more information on AfC, contact:
North: afc@northeastglasgow.scot.nhs.uk or Divisional Human Resources, North Glasgow, 300 Balgrayhill Road, Glasgow G21 3UR.
South: carolann.mcnicol@sgh.scot.nhs.uk or Agenda for Change, c/o Human resources Department, Management Annexe, Southern General Hospital.
Yorhill: afc@yorkhill.scot.nhs.uk or Human Resources Office, 2nd Floor, Medical Records Building, Yorkhill.

Joint approach to improving public health

Glasgow is about to appoint a uniquely powerful Director of Public Health with a renewed remit to work in partnership with the NHS and Glasgow City Council.

Chairman of NHSGG, Professor Sir John Arbuthnott, described the position as “the most challenging and important public health role appointment in the UK”.

The joint working between NHSGG and the City Council makes this role one of the most unique in the UK. The new Director of Public Health will lead a range of new and already established initiatives across the city to tackle conditions such as coronary heart disease, stroke, obesity, as well as a range of other smoking and alcohol-related diseases.

Advocacy Service for Children and Young People

Partners in Advocacy is an independent advocacy project commissioned by NHS Greater Glasgow to provide independent advocacy to children and young people with mental health issues.

Advocacy is not only good practice that offers direct benefits to young people, but is also a requirement by law. The Mental Health (Care and Treatment) (Scotland) Act 2003 makes it a statutory requirement for NHS Boards and Local Authorities to make available independent advocacy to all people experiencing mental health issues.

Partners in Advocacy provide this by offering one-to-one support to young people where they listen and understand their point of view, support them to communicate their views and choices, help source information on particular issues and ensure that their voice is heard and acted upon.

The service went live in January and for more information, contact: Cath McQuistan or Julie Dowds on 0141 847 0036 or cath@partnersinadvocacy.org.uk and julie@partnersinadvocacy.org.uk
Poems for Dad Lead to Publishing Deal

When Sylvia Harries sent her sailor dad poems during his frequent voyages around the world, little did she realise that those same verses would lead to a publishing deal.

For Sylvia, who is a PA and an Extra Contractual Referral Manager within Mental Health Services, has had her poetry published by USA company, Publish America.

Entitled ‘Poems for my Dad’, the volume of verse consists of poetry Sylvia wrote to her dad around 30 years ago.

She explained: “My dad was in the Merchant Navy at the time and travelled all over the world. I was, and still am, very close to my dad and I really missed him.

“I’ve been writing poetry for as long as I can remember and, when I was in my early 20s, I began to send him poems when he was at sea. I would write about things that were going on in the family, funny things that had happened to my children, sad things and just snippets of everyday family life. I’d write him one a week. It was my way of letting him know what was going on, what he was missing.”

Sylvia, who’s based at the Gartnavel site, had forgotten all about her poems until May this year when her father, George (83), presented her with a bundle of papers.

She said: “I couldn’t believe that, after all this time, he still had my poems.

“I’ve no idea what possessed me after that, but I decided to see if I could get them published. I went on the internet and did a search for publishers of poetry and the Publish America site came up. I emailed them and they asked me to send them my poetry book. Next thing I know, they said they really liked what I’d done and told me they wanted to publish it.

“I was thrilled. This is the first time I’ve ever sent anything off to publishers. I’m so excited and still can’t quite believe it.”

The book was put at the beginning of December in the USA and is available here in many bookshops, online via Amazon and within Sylvia’s own website: www.sylviaharries.com

Sylvia, who is a mum of three, said her family were all very excited about her success….especially her dad.

She said: “I didn’t tell him anything about it until I had the published book in my hand. Then I surprised him with it. He’s really delighted.”

Below is a wee taste of Sylvia’s prose. If you’d like to see some more, have a look in the Staff section of StaffNet.

Are you creative in your spare time? Do you have an unusual hobby? If so, how do you fancy featuring in Staff News? We are always on the look-out for new stories about staff.

Call 0141 201 4912 or email: staffnews@nhsgg.org.uk

My Window

I look out the window
And what do I see
Malcolm and his pals
Shouting out with glee

He looks up at the window
And waves his little hand
Then carries on his playing
Finding life just grand

I see a lot from my window
Weather frost or mild
But most of all I love to see
My happy little child

What’s new at the Vicky?

Staff may already be aware of some works happening on the site of the new Victoria Hospital.

Work has begun on a new road between Grange Road and Prospecthill Road. Construction on the road, which replaces the existing road, began in January and should be completed by spring this year.

Grange Road School is in the process of being demolished to make way for the new build and a temporary car park is being built on the site of the school. This work will be completed by summer.

The eight public holidays for NHSGG for the year 2006/07 are as follows:

Friday, April 14, 2006 (Good Friday)
Monday, April 17, 2006 (Easter Monday)
Monday, May 1, 2006 (May Day)
Monday, July 17, 2006 (Glasgow Fair)
Monday, December 25, 2006 (Christmas)
Tuesday, December 26, 2006 (Christmas)
Monday, January 1, 2007 (New Year)
Tuesday, January 2, 2007 (New Year)
NHSGG’s going smokefree!

The countdown is on - from March 26, there will be NO smoking in any of our hospitals, health centres or other healthcare sites.

That includes outside areas and car parks, entrances and NHSGG vehicles.

Smoking rooms will no longer exist, instead - for one year only until March 2007 - smokers will be able to light up in designated smoking areas and shelters outside NHSGG buildings.

So how will this affect staff?

The ban will not be universally popular, but NHSGG staff have a duty of care to take reasonable care for the health and safety of both themselves and others. This means staff are required to enforce the policy with the public, and there are understandably some concerns about the possible response of patients and visitors who are found smoking in non-designated areas.

It is the responsibility of line managers to undertake a risk assessment as to how best to deal with this in each location.

To avoid any possible conflict and danger to staff, guidance has been developed for approaching illicit smokers on NHS premises. This is available on StaffNet under ‘smoking’.

The basic guidance is: if, after politely explaining the new policy, you feel that you may be at risk of being physically or verbally abused, you should go for help.

If you become the target of verbal abuse, are threatened with assault or are actually assaulted, you should report the incident to your manager, fill in an AIR or IR1 incident form, and if necessary contact the police.

What about dealing with patients who smoke?

If you are required to visit patients in their own homes, you can ask them not to smoke before and during your visit. A specially designed leaflet has been produced to help staff explain the reasons for this to patients.

If you work on-site, you will no longer be allowed to take a patient outside for a cigarette. If a patient wishes to use a designated smoking area, they can be accompanied by a family member or visitor.

If you have an in-patient who simply can’t go without smoking, but cannot get outside to a designated smoking area themselves, they can access Nicotine Replacement Therapy (NRT patches) on the ward.

For those who want to stop smoking, special hospital-based advisors can offer support and give information on the local services. Contact Smoking Concerns for details of your local advisor: 0141 201 9825.

If you’re a member of staff who is a smoker, you will have to use the designated smoking area if you want to light up. You will not be allowed to smoke in any NHSGG vehicle during your normal working hours, this includes our vans and leased or pooled cars. After March 2007, we will be totally smokefree, which means you will not be allowed to smoke at all on or in any of our grounds, premises or vehicles.
Over the coming weeks, you’ll see a wide range of posters telling staff, patients and the public about NHSGG becoming smokefree and where the designated smoking areas are.

NHSGG’s Smoking Concerns team has also held a series of seminars in our hospitals to explain the new smoking policy to staff.

More information on the smoking policy is available on StaffNet and on our internet: www.nhsgg.org.uk/smokefree

Getting Help to Stop

If you’re a smoker who wants to give up, there’s lots of help out there...

For information and advice about quitting smoking contact either Smoking Concerns on 0141 201 9825, or log onto: www.nhsgg.org.uk and click on smoking. Or dial the Starting Fresh freephone number 0800 389 3210.
Award winning NHSGG staff

NHSGG staff have been picking up awards right, left and centre!

One of our ophthalmists beat off stiff opposition to win a UK Allied Health Professionals and Health Scientist Award for Excellence in the recent Chamberlain Dunn awards.

Research Orthoptist and Lecturer, Janice Waterson Wilson picked up the award - along with university colleague Dr Nadia Northway - for learning, teaching, development and mentorship at an awards ceremony in London in November.

Starting Well’s Claire Cassidy is delighted with her award.

Janice, who works at the Southern, Yorkhill as well as Glasgow Caledonian University, and Nadia got their award for their work in the field of specific learning difficulties especially for children with Developmental Co-ordination Disorder.

Congratulations also goes to NHSGG’s Claire Cassidy on winning the International Triple P Practice Award.

Claire, who is a Starting Well Triple P Co-ordinator, won the award for her work in promoting Positive Parenting to Glasgow families.

The award was announced at the Helping Families Change Conference, held in Brisbane, Australia in February.

The clinical governance team based at Yorkhill, won first prize at the Facing Challenges: Sharing Solutions 1st

Think Waste Disposal

Disposal of clinical and domestic waste is a daily occurrence for many of us.

And it can often be confusing as to which waste product is disposed of in what manner.

To clear things up, NHSGG Service Development Manager, Liam Gallagher, and Health and Safety Adviser, Allan Hughes, have organised a series of roadshows to take staff through waste management practices.

Taking place throughout March, the roadshows will highlight good practice and Liam and Allan will be on hand to offer practical advice to staff.

There will also be some ‘freebies’ on offer at the roadshows, including pens, mugs, mouse mats - all conveying the message ‘Think Waste Management’.

The roadshows will take place in the following venues at the following times:

- March 13 at the Western Infirmary adjacent to the Hospital Dining Room, from 9.30am-2.30pm
- March 14 at the Dental Hospital, from 10am-1pm (location to be confirmed.)
- March 20 at Gartnavel General from 9.30am-2.03pm in the Main Entrance Hallway
- March 27 at Drumchapel Hospital from 10am-2pm
- March 28 at Blawarthill Hospital

So what’s the difference between clinical and domestic waste?

Clinical waste consists of waste not deemed safe for disposal along with domestic waste, for example dirty bandages.

Domestic waste is made up of the same types of items found in waste from any household: paper, flowers, etc.

All these timings are flexible

Liam said: “In an organisation such as NHSGG, which is at the forefront of providing cutting edge healthcare services, waste management may seem like a rather unimportant activity.

“However, the effective management of waste, particularly clinical waste, is of vital importance to the patients, staff and visitors to our healthcare establishments, who need to be assured that our wastes are managed and disposed of properly.

“All staff can make a difference, both in terms of the environment as well as costs, by correctly using the waste infrastructure made available to them.”
Staff safety is a big issue for NHSGG and, since the introduction of our Violence & Aggression Policy, we have continued to bring the safety of staff to the forefront.

With the appointment of a new Violence and Aggression Co-ordinator, Karen Donnachie, there is now a range of conflict management training courses available to staff.

Karen has been involved with the NHS for almost ten years (including five years as a nurse working in A&E) and the prison service as well as a stint as an orthopaedic nurse in Belfast.

So far her role has been about getting to know people - staff, management and patients across all of Glasgow. Karen believes her experience in nursing places her in a unique position to understand staff concerns about dealing with aggressive or violent patients.

She said: “I took on the role as I was looking for a new challenge. I wanted to work with staff and be involved in training them as I know how scary it can be for staff who often find it difficult to cope in these situations. I’m also comfortable working with aggressive patients. “I think there has been a gap in this type of training in Glasgow, but I believe my role is helping with this. A violence and aggression policy was badly needed. This is a massive problem nationwide and we really need to raise awareness among staff about the policy and the support there is available. Health boards are there to support staff who are not always aware of the support there is.”

Karen believes one problem that does need to be tackled is the high incidence of under-reporting of aggressive behaviour.

“We do have a problem, in that, there is a perception that oh, Glaswegians swear all the time, so staff think it’s acceptable. All incidents must be reported.”

Conflict management training courses are available for all staff. Full day courses are for staff who regularly deal with conflict in higher risk areas, and half-day courses are available for staff (in the North only) who work in lower risk areas (staff in the South get this half-day course as part of their induction). A mini-risk assessment will be carried out in your workplace to establish the best type of course for you.

As well as information on training courses, Karen is also keen to hear from prospective trainers who would be interested in completing City and Guild training who could then run their own courses for staff in their area.

For more information on conflict management training courses, or if you are interested in becoming a trainer, contact Karen at karen.donnachie@sgh.scot.nhs.uk or tel: 0141 232 7746.

Injury surveillance pilots launched

GRI staff have joined forces with Strathclyde Police in a new pilot scheme to encourage more victims to report incidents of violence.

Information collected and provided to analysts within the unit will give police officers a more accurate picture of incidents of violence. Previous hospital research revealed that incidents of violence were substantially under-reported to police.

The data will be provided to police on a weekly basis and the system will be evaluated after six months.

The scheme is also being run at the A&E department within the Royal Alexandra Hospital in Paisley. Karyn McCluskey, Deputy Head of the VRU, said: “We are delighted that both hospitals have agreed to pilot this injury surveillance scheme. It’s an excellent example of real collaborative working.

“We need to be able to place our resources right where incidents of violence are occurring. Obviously, we have a pretty good idea where violence is likely to take place, but this data will provide us with that crucial piece of additional information.

“This is all about injury prevention, reducing the number of victims who come through the doors of A&E departments and ultimately, reducing violence on the streets of Scotland.”
Recognition for emergency planning

The work of emergency services across the UK was honoured recently with a reception at Buckingham Palace to recognise the work of all those involved in emergency services and disaster response.

Representing NHSGG was Emergency Planning Officer Alan Dorn, who has been involved in every major incident in Glasgow in the last 17 years. Alan described the event as a “great honour”.

“The reception was fantastic. The Palace was quite awesome, it really was like walking into history...it’s there on the walls and there’s a real sense of heritage. It was an honour to be invited.

“Despite the surroundings, people were very relaxed, or at least it was as informal as a formal event like that could be. Her Majesty, The Queen was acutely aware of all the events surrounding the people who were there and it was quite heartwarming that she and the Duke of Edinburgh, along with many other members of the Royal Family, saw fit to recognise the efforts of so many.”

Alan was invited to the Buckingham Palace reception alongside others from Glasgow, representing the Fire and Ambulance Services, in recognition of their joint working at the Stockline Plastics factory explosion in May 2004. Others invited were there in recognition of their work following the Boxing Day Tsunami and the July 7 Bombings in London.

Alan explained there was someone from every major UK disaster in the last three or four years, represented at the Palace.

“It was a remarkable collection of people. The reception was to honour a broad spectrum of blue-light services and, most importantly, to recognise the bigger structure of, in our case, the Strathclyde Emergency Co-ordination Group and its strategic planning.

“This Group is very much a team effort, I’m only involved in the emergency planning. The real heroes, in my opinion, those who deserve most a pat on the back, are the doctors and nurses who take care of people after a major incident when we’ve got them to hospital.”

On a day-to-day basis, Alan also organises the medical emergency plan for a range of events throughout the city - from major pop concerts at venues such as Hampden to one-off events like the Special Olympics held in Glasgow last year.

Currently Alan is part of the team involved in putting together the medical component to form part of Scotland’s bid to bring the Commonwealth Games to the city in 2014.

Of course, while a major part of emergency planning is preparing for all the things you know will happen, the work of Emergency Planners does not come to the fore until we encounter the completely unexpected and often the unpreparable.

Alan said: “We spend a lot of time planning for things we think are likely to happen and then something like Lockerbie or Dunblane happens which are just totally outwith people’s thoughts.

“Thankfully, emergency situations like these are rare, and we work and train very hard to be as prepared as we can be for events when they happen.”
Talking Speech and Language Therapy

For the next in our series on Allied Health Professionals we took a look at the work of Speech and Language Therapists (SLTs).

Cameron Sellars came to work in the Health Service in 1978 and has been based at Glasgow Royal Infirmary since 1994.

“I work in the Acute side of Speech & Language Therapy and, while here in the hospital we provide a service to adult patients, there is a large group of SLTs at Yorkhill - more than 80, in fact - who deal with disorders in children and young people up to the age of 16. Our colleagues in Primary Care also see a variety of problems in the community setting.

“While there are overlaps and, on the Acute side we can have considerable input to community services, speaking to me can only give a general sense of Speech and Language Therapy in Greater Glasgow. You would have to take in all these other dimensions to get the whole picture.

“If people have an impression of what we do, it’s probably that we teach patients to speak again after a stroke or other illness. Sadly, often that function doesn’t fully return, so we concentrate our efforts on optimising other means of communications, such as basic communication boards or high-tech PC-based communicative devices.

“It also means helping those who look after the patient - carers and others - to understand and deal with the communication problems.

“Swallowing difficulty is an area that can be frightening for both the patient and the carer and SLTs have become expert in this as their role has developed over the last 15 or 20 years. About 65% to 90% of stroke patients will have swallowing problems, often transient, and we’re called in regularly for advice. These problems can be a significant factor in complex cases. Patients who have serious medical conditions, who might be unstable and in the midst of this require help with swallowing or communication, are a real challenge for us. The slightest thing might tip the balance the wrong way.

“It’s also extremely rewarding when things go well and one of the best things about this job is the constant variety. We deal with all sorts of cases: from the types I’ve just mentioned to people from the Performing Arts experiencing voice problems and we try to have continuity of care once people leave the hospital setting.

“I think the uncertainties for the profession at the moment are around the NHSGG reorganisation and the outcome of Agenda for Change assimilation. We’re understandably anxious about what the changes mean for our profession. What I’d like to see for the future is more SLTs undertaking research and providing proof of the benefits of Speech and Language Therapy.

“The development of Extended Scope Practitioner roles is very positive. I, and my colleagues Catherine Dunnet and Angela Moar, run a videofluoroscopy service (scanning to look at the swallowing apparatus) with radiography support. It’s a real departure for SLTs and I think this and other areas of work have real and provable advantages. One of the positive applications of Agenda for Change could be the benefits realisation element.”

Strategy for the future

NHSGG welcomes a new face in the shape of Helen Byrne.

Helen takes on the role of the new Director of Acute Services Strategy Implementation and Planning based at Dalian House.

Her job will be to lead on Acute Services Planning across Greater Glasgow and Clyde and to see through to completion many of the hospital projects planned with local people over the past few years.

This includes NHSGG’s ambitious £750million modernisation programme, which will result in the building of the new Stobhill and Victoria Hospitals, the new South Glasgow Hospital and a new children’s hospital.

Helen will also work with colleagues across NHSGG to ensure continued improved performance in waiting and access times for patients.

Other parts of her job include focussing on health improvement; developing Managed Clinical Networks on cancer, stroke, coronary heart disease and diabetes; and Community Engagement and addressing transport issues are also key.

The former Deputy Chief Executive in Easington Primary Care Trust, County Durham, Helen is no stranger to Glasgow. Irish-born Helen completed a three-month social work placement in Bishopbriggs while completing her first degree back in 1983.

Helen believes this is an exciting time to come to Glasgow.

She said: “There is a wonderful opportunity to really improve hospital services and I look forward to making this a reality in the coming years.”
Ten lucky NHSGG staff are set to become instant media stars following the successful launch of the NHS recruitment campaign.

Staff from across Glasgow are featuring in television adverts and posters across Scotland highlighting the rewards and challenges that face those employed in the NHS.

Among those enjoying their 15 minutes of fame are Care Assistant Jerry Muyot (from the Southern) and Mental Health Nurse Martin Harvey (Leverndale) who both appear in the television advert. This is the first major television advertising campaign to feature real staff currently working in the NHS.

Another advert will run later in the year featuring Community Pharmacist Alia Gilani (Southern), and Senior Occupational Therapist Elaine Holmes (Western).

Alia thought this was a great opportunity to show the diversity of pharmacy roles available in Greater Glasgow.

She said: “Everyone thinks being a pharmacist means working in a pharmacy, but in the NHS, pharmacy is really moving forward and I find myself working in the community as well as with primary care practices.”

Alia was involved in last year’s NHS diversity campaign and admits that she wasn’t that keen to be involved in the advert at first, but following some gentle persuasion from various people, including her mum, she was eventually persuaded.

“It was a bizarre experience, we filmed for about four hours and had various problems with lighting, for this tiny wee clip but hopefully it will all be fine in the end, and at least my mum will be happy!”

Poster girls and boys running in the campaign include Medical Photographer Andy McAllister (Yorkhill), and Diagnostic Radiographer Angela Street (Vicky) as well as Chaplain Alister Bull (Yorkhill).

The huge variety in all of these jobs clearly demonstrates the wealth of talent and ability within the NHS. There are more than 140 different jobs in the NHS, with thousands of people working, not just on the clinical side, but in management and administration.

If you are interested in looking at the full range of careers available in the NHS and help deliver the best possible healthcare to the people of Scotland, visit: www.workinginhealth.com or www.nhscareers.scot.nhs.uk.

---

Our TV Stars

Ready for my close-up
Mr DeMille

Our TV Stars

N

HSGG’s Audiology Service has been undergoing a major modernisation programme thanks to extra funding from the Scottish Executive.

As part of a £17million, four-year initiative to modernise audiology services across Scotland, our Audiology Service has been using its share to greatly improve things for NHSGG staff and patients.

The department is now going into its fourth year of the programme and changes to date include:

- Bringing in more staff including Audiologists, Assistant Technical Officers, Administration staff and a Consultant Paediatric Audiological Physician;
- Improved accommodation;
- New standardised pan Glasgow policies and procedures;
- And a new pan Glasgow ‘networked’ patient information management system (Practice Navigator).

Staff have also worked to improve the patient journey and digital hearing aids have been introduced to both paediatric and adult patients. Finally, a new newborn hearing screening service has been introduced to Glasgow’s maternity hospitals.

By April this year, a number of other programme milestones will also have been achieved including the rollout of standardised computer hardware across the service; improved computer software for better activity and performance reporting; and telephone reviews for hearing aid users.

For more information, contact one of the Service Heads: Mary McEwan (North) 0141 211 3054; Lilian Vernham (South) 0141 201 1438; Jim Harrigan (Yorkhill) 0141 201 0067.
NHSGG in the Headlines

Beatson Radiation Overdose

The regrettable incident of the radiation overdose given to 15-year-old Lisa Norris generated significant media coverage.

NHSGG Communications issued a press statement to the press and media, and Beatson Medical Director Alan Rodger delivered a statement to national and local tv and radio reporters from the door of the Tom Wheldon building.

The key messages NHSGG delivered were, first of all, the key priority to express concern for Lisa and her family; secondly, that a mistake had been made, but an investigation was underway; thirdly, a reassurance that incidents like this are incredibly rare, and, finally, to maintain public confidence in the generally excellent care provided by the Beatson.

International Media Focus On Yorkhill

Yorkhill Hospital was also in the headlines nationally and internationally when an 11-year-old was admitted after apparently having taken heroin.

Staff in the Press Office received more than 60 calls from members of the media within a 24-hour period. While patient confidentiality was of course observed, the opportunity was taken to promote NHSGG’s Child Protection Services.

Cardiothoracic Green Light

Plans for improving NHSGG’s heart and lung services were at the centre of a positive news story when the announcement was made – five years ahead of schedule – of a new centralised unit for the West of Scotland.

The plan for the state-of-the-art new service at the Golden Jubilee National Hospital was widely praised on front pages, in leader columns and elsewhere.

Praise for NHSGG Waiting Time Cuts

Efforts by staff across NHSGG to cut waiting times were recognised in the wake of a report from Audit Scotland. The document pointed out the work done to treat extra patients and meet targets.

Special praise was given to the new orthopaedic clinics in Glasgow which allow patients to see specially qualified physiotherapists rather than wait for consultants.

Wellman Press Coverage

A picture’s worth a thousand words ... and it certainly was for the NHSGG Men’s Health team! The Wellman project staff had prepared information about a series of health “MoTs” being run at sports centres and other venues around the city.

Ordinarily, this is the sort of information that makes a small listings item in most papers. However, this time a brave volunteer called Carl Girvan put himself forward for having his photograph taken in the gym! The work of the Men’s Health team subsequently made a major story with a large picture of Carl exercising.

Minister Opens Stobhill Scanner

The official opening of Stobhill’s new CT scanner suite attracted positive attention shortly after Christmas. The £740,000 Gina McCreath suite was named after a former consultant radiologist at Stobhill who died three years ago, and her family attended the launch and spoke to the media.

This personal testimony, the presence of the Health Minister and the visual impact of a brand-new major piece of machinery meant fantastic coverage was achieved in local and national press, on television and on radio.
Bring the Games to Glasgow

As you may have seen on the TV and in the local and national newspapers, Glasgow has launched a bid to host the 2014 Commonwealth games. You can help bring the Games to Glasgow by showing your support. There are four ways to do that, but more about that in a minute.

Why should the Commonwealth Games come to Glasgow?
If the bid is successful, Glasgow and the West of Scotland can expect an influx of 6000 athletes from more than 70 countries, as well as thousands of spectators.

As a sporting event, the Commonwealth Games are overshadowed only by the Olympics. The economic and employment benefits for local people are clear, but the Games can also help the NHS with its mission of preventing ill health in future generations.

With world-class athletes demonstrating the very peak of achievement in a range of sports on our doorstep, this is a once in a lifetime opportunity to encourage young people to emulate their heroes.

As the biggest employer in the West of Scotland, NHSGG and our staff can play a significant role in bringing the Games to Glasgow.

The Scottish Executive is encouraging public and private sector staff to add their backing to bringing the games here - with a tangible demonstration of support, the Executive can make a direct case to the Commonwealth Games officials that the local population is ready and willing to host the event.

You can show your support for bringing the Games to Glasgow in four ways:
1. Go to www.glasgow2014.com and make your pledge
2. Text ‘GOLD’ at 61611
3. Look out for postcards that you can sign and send on
4. E-mail your message of support to pressoffice@nhsgg.org.uk and we will forward it to the Scottish Executive on your behalf.

Rowing their boat for Parkinson’s
Superfit staff from Gartnavel General and the Western rowed a massive 320km and raised a whopping £7500 for charity recently.

Fifty members of staff took turns on rowing machines set up in Gartnavel General’s reception area to raise cash for the Parkinson’s Disease Society.

Rowing in relay for 24 hours, the team rowed past their predicted distance of 250km and rowed a staggering 320km.

Ed Kalkman, Consultant Radiologist at the Western Infirmary, who has Parkinson’s Disease, is the man behind the charity event. He wanted to do something to raise awareness of the condition and the Society.

He said: “I came up with the idea to hold a 24 hour rowing marathon as I wanted to do something to raise money for such a worthwhile cause. The Parkinson’s Disease Society is a tremendous support to people in the UK who have Parkinson’s and I would like to thank my colleagues who helped me raise such a substantial amount of money for the charity.”

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 OR Send them via our email address: staffnews@nhsgg.org.uk

NHSGG Scores a Winner with SWF
NHSGG has teamed up with Scottish Women’s Football (SWF) to encourage young girls and women to take part in the beautiful game... and stay fit and healthy.

We’re supporting the West Region Girls’ Football League, a league of eight teams of girls and young women all under the age of 17.

Women’s football is one of the fastest growing sports both here and abroad, with around 4000 girls playing football in Scotland alone!

With different aspects of the game to take part in, from playing to coaching and refereeing, there is something for everyone to get involved in.

If you’re interested in taking part in women’s football, contact: Maureen McGonigle at swf@scottishfootball.com or visit the website at www.scottishwomensfootball.com.

Published by: NHS Greater Glasgow Communications