



NHS Greater Glasgow and Clyde

core brief

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Introduction

This issue brings you news that the trauma plan for the West of Scotland moves one step closer.

Trauma plan for the West of Scotland moves one step closer

NHS Greater Glasgow and Clyde has given its go-ahead for a plan which aims to transform the way people suffering major trauma in the West of Scotland are treated, in the hope that lives can be saved and recovery improved for hundreds of patients each year.

The new model for four new Major Trauma Centres was announced by the First Minister in 2014 and the first two in the North and North east are already up-and-running. The model will be complete with the opening of centres in the West and East of the country in 2021 and 2022. The Scottish Government has committed £17m for the development of the network in the west, which will include all Boards in the Region.

The Queen Elizabeth University Hospital in Glasgow will be at the centre of the ambitious plans, becoming the go-to place for those in the entire West of Scotland with the most serious injuries.

The next level of trauma care within the new national model will be Trauma Units, with NHS Greater Glasgow and Clyde's being based at Glasgow Royal Infirmary and the Royal Alexandra Hospital in Paisley. These specialist centres will support the trauma pathway delivering expert care for patients suffering complex traumatic injuries. The final level of care will be managed at local emergency hospitals.

Inverclyde Royal Hospital in Greenock will continue to play a role as a Local Emergency Hospital, receiving general surgery and medical patients. This new model will also mean that theatre time will be freed up at Inverclyde Royal Hospital, allowing it to become an elective Centre of Excellence with continued access to specialist care and an increase in planned operations such as knee replacements. It's hoped that nearly 360 more of these operations can be carried out there each year.

The new trauma model will also see the development of rehabilitation services with a highly specialist rehabilitation team providing improved long term clinical outcomes for patients and families who have experienced trauma.

Dr Jennifer Armstrong, NHSGGC's Medical Director said: "Today's Board decision takes us one step closer to establishing a Major Trauma Network in the West of Scotland.

"The Queen Elizabeth is the ideal place for the care and treatment of those people in Scotland who receive the most serious, life-threatening injuries. Evidence shows that you are 15-20% more likely to survive if you are admitted to a Major Trauma Centre. Patients will receive the best possible care from specialised teams providing emergency access to consultants 24 hours a day, seven days a week.

"Not only that but patients who get this initial treatment are less likely to have a long-term disability and have a better chance of returning to a normal life afterwards, including returning to work and their normal routine and activities."

Major trauma is the leading cause of death in people under the age of 45 in Scotland and is the significant cause of short and long-term illness and poor health. Patients are more likely to survive and make a full recovery if they have a major trauma in a region where there is a major trauma network, regardless of how far away they are from the Major Trauma Centre.

The benefits of a major trauma network have been seen recently in the terrorist attacks in Manchester and London, where patients were treated across several major trauma centres and units.

The Queen Elizabeth University Hospital is expected to provide care for around 450-550 critically and severely injured patients every year, as well as another 450-550 moderately injured patients. This is around 700 more patients each year on current figures – meaning an additional 40 beds need to be created to deal with admissions from across the west.

Dr Armstrong added: "Now approved by our Board, NHSGGC will continue to work with other Boards in the Region to develop the model and pathway required to deliver the trauma network configuration.

"To establish optimal trauma care in line with other developments across Scotland, NHSGGC will require a redesign of emergency trauma pathways. In the main, patients will have their clinics, pre-admission assessment and rehabilitation locally but with specialist surgery provided in centres of excellence covering the whole of the network population.

"International evidence shows that patients do recover better from major injuries in specialist centres followed by care in good rehabilitation centres. I have no doubt that this new model of care for the most seriously injured people will help us save more lives and increase the chances of a full recovery for many more."

Mr Angus MacLean, Clinical Lead, West of Scotland Trauma Network said: "I am delighted that the board has supported plans for the integrated trauma network which will not only save lives but will enhance the care and recovery of seriously injured patients in the West of Scotland. The network also builds in resilience for major incident management nationally which is critical in the modern era. With the committed additional investment, Greater Glasgow and Clyde will provide world class trauma care our health service will be proud of."

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