

Update - keeping you up to date on the creation of the West of Scotland Regional Heart and Lung Centre



12 November 2007



This bulletin reports on the progress of the West of Scotland Regional Heart and Lung Centre to be established at the Golden Jubilee National Hospital. Remember that 'Update' bulletins are either available on your intranet, staff notice board, by calling **0141 951 5073/5195** or e-mailing **comms@gjnh.scot.nhs.uk**. They can also be viewed directly from the Golden Jubilee National Hospital website at **www.nhsgoldenjubilee.co.uk**.

Building work/Estates Commissioning and migration

- Level 4 - snagging work is ongoing and the hospital has increased the use of this area for the commissioning of equipment and temporary office space. The commissioning works on the medical gasses is ongoing.
- Level 3 - the Advanced Heart Failure Unit is currently being commissioned and snagging is underway. The ICU core area is now due for completion mid October 2007. This was not part of the main current work. The office area in level three is currently under review with costs being established to continue the refurbishment through this area.
- Level 2 - the installation of the new cath lab and surrounding works is now complete.
- Level 1 - the medical/ surgical offices refurbishment is now well underway, the East and south wings are complete. The West wing is ongoing.

A confirmed date for the commencement of service migration is still awaited. However the new regional centre is now treating additional cardiac waiting list activity. The Cabinet Secretary has tasked the NHS National Waiting Times Centre to ensure that the new centre is open by end March 2008.

The timing of the cath lab migration remains dependent on being able to fully staff the additional cardiology High Dependency Unit (HDU) and on an agreed timetable for the phased introduction of the PPCI service.

The movement of the Western Infirmary involves intense planning to ensure adequate resources will be in place in time for the commencement of migration. The driving factor will be the transfer and or recruitment of suitably trained personnel to run the key elements of the service.

The cardiothoracic surgical element needs careful planning to ensure minimal impact on the reduction of overall activity during the migration phase.

Detailed plans need to be developed to demonstrate how this activity will be managed during the critical weeks of the migration and identify the best way to use the availability of staff to run down one site whilst increasing activity on the receiving site.

To find out more information about the West of Scotland Regional Heart and Lung Centre, please read the dedicated 'Update bulletins' which are available in the publications section of Staffnet (our intranet) and website.

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IM&T

Main activities during the period

- Review PROTON Renal system.
- NHS Lanarkshire Application remote access.
- Minerva remote connectivity provision/ database merge.
- GJNH SCI store lab results feed.
- WIG staff audit.
- SCI store to store comms.

Actions completed during the period

- SCI store2store connectivity complete in test.
- Clinisys Remote connectivity.

Planned activities for next period

The expected completion date for the majority of these activities was October 2007 with the exception of ultrasound image connectivity, which is planned for January 2008.

- Progress TOMCAT system development/ training.
- Complete WIG staff audit.
- GE Centricity merge plan.
- NHS Lanarkshire system connectivity.
- Ultrasound image connectivity review.
- Hairmyres staff audit
- Expected completion.

HR

As the one to one process nears completion for the range of disciplines affected by the transfer, careful monitoring of both vacancies and gaps in the numbers transferring is an ongoing process to ensure the recruitment programme continues to address the service requirements.

As the project has regained momentum since the summer break, there has been a positive increase in the number of staff who are now prepared to transfer, particularly in cardiology.

Procurement

The final phase of procuring medical equipment has commenced, and specifications are now being agreed for non electro-medical equipment, such as beds, chairs and lockers etc. This working is being done in partnership with the lead nursing personnel from both the critical care and ward areas.

Clinical service level agreements

A proposal has been developed by the Glasgow Diagnostic and Imaging Management Team and agreement on the Clinical Physics service model is still outstanding. The labs and imaging proposal is also outstanding.

Theatres and anaesthetics

It has been agreed that a number of Consultant PA sessions and additional SPRs are sufficient to run the anaesthetic and critical care support to cardiothoracic surgical services. The job planning process will begin once the surgery plan is complete. A lead clinician will be identified to carry out this exercise.

General surgery cover

A proposal has been circulated to general surgeons in Glasgow and Lanarkshire with notes of interest already received. Plans are in place to interview interested surgeons and appoint named consultants to cover the service on a part-time basis.

National Services

National Advanced Heart Failure (NAHF)

Bed capacity within the cardiothoracic/transplant/ICU facilities for NAHF patients has been agreed.

The diagnostic and Outpatient requirements, including MRI provision required for "patient viability tests", has been resolved and a further development bid is being prepared for NSD consideration.

The Regional Planning Group's approval of the Regional Heart Failure bid, and the associated additional consultant, will enable us to meet the NSD 100% consultant commitment, which had been raised as an issue. The resources to employ an additional Echo technician will also help resolve a potential diseconomy of scale impact.

Grown Up Congenital Heart Disease (GUCH)

The Outpatient and diagnostic provision (of MRI) has been secured with NSD funding four sessions. One additional bed and associated staffing has been identified as being required to accommodate those GUCH patients who currently are admitted to Ward 9 at the Western, with no cath lab procedure linked to this stay.

Recently, potential problems between the Maternity Services and GUCH have arisen. Issues of where women with congenital heart problems during labour should be treated need to be worked through. Dr Hamish Walker is working through solutions with Glasgow's maternity unit.

Specialist Pulmonary Vascular Unit

A meeting with the SPVU and other national service consultants was held at the beginning of October to identify how to co-locate the activity located at WIG. The SPVU activity currently located in Gartnavel is not planned for transfer as this is integrated with the general respiratory service. Further scoping of the service is still in progress to establish the totality of the resource to support the diagnostic service of pulmonary function testing. The project team is now working closely with the leads from the SPVU service to understand what needs to be in place to deliver the service.

Primary PCI

A draft business case was submitted to the Regional Planning Group for Cardiac Intervention in October 2007.

Cardiology

The redesign group were tasked with developing an optimum service model to deliver interventional cardiology activity by maximising the use of day beds. This is continuing to make significant progress.

The scheduling of Electro Physiology (EP) theatre related activity is still outstanding subject to availability of the surgical theatre schedule. We have identified that there are a number of sessions available so we anticipate no capacity issues.

Finance

An update on the financial position estimates the current gap is in the region of £1.8m (worst case) and £1.3m (best case). However, work is ongoing to reduce this gap and the finance group are awaiting the conclusion of some outstanding issues.

Transport

The Scottish Ambulance Service has now recruited extra staff and new ambulances have been purchased to support the centre.

Work continues to address the financial pressures of introducing the dedicated ambulance service. In the interim, funding has been agreed for the following:

- costs of training and recruitment
- staff costs for January to March 2008
- costs for 2007/08.

Tell us what you think...

We want to hear your views. If you have any questions or would like to comment on any of the issues featured in this staff bulletin, please complete the form below and return it to:

Communications Department, Golden Jubilee National Hospital, Clydebank.

You can also e-mail us at: comms@gjnh.scot.nhs.uk

Name and department (optional):

Comments/Questions:

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