

Annual report 1988-89 : 'putting patients first' / Lothian Health Board ; R. Bruce Weatherstone TD CA Chairman ; Winston J. Tayler BSc AHSM General Manager.

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Publication/Creation

1989.

Persistent URL

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LOTHIAN HEALTH BOARD



ANNUAL REPORT
1988-89

'Putting patients first'

Chairman's Message



'Putting patients first' is the mission statement chosen by this Board to encompass as succinctly as possible our philosophy.

This choice was particularly timely, being adopted as it was only a few weeks before the publication of the Government's White Paper, 'Working for Patients'.

For it is surely clear to all that the way to develop and strengthen the health service is to make it more responsive to patient need and provide better patient care. This should be done not just through the use of modern buildings and equipment, vitally important though they are, but also by giving patients greater choice and tackling problem areas such as long waiting lists.

Last year the Board's attack on waiting lists enabled more than 2,000 extra patients to be seen. Funding of almost £1 million this year from the Scottish Home and Health Department will allow us to further reduce the waiting time and see an extra 4,600 patients.

Watershed

This Board has a head start in turning the White Paper into a reality with our surgeons spearheading the force for change in their innovative work on medical audit. Over the past 40 years they have pioneered the business of monitoring how well they do their work.

This year will undoubtedly be remembered as a watershed in the history of Lothian Health Board. After many false starts over a long period in the past, the Board has come to grips with the future of our acute hospitals.

Following wide public consultation on the five possible options for development, Board members were unanimous in their choice of the one which centres on the new 'Southern' general teaching hospital.

We believe this option will provide the best possible service for all in Lothian.

R. Bruce Weatherstone TD CA
Chairman

1988-89

Meeting the Challenge

An extra £6.6 million spending on priorities – that's the ambitious target we have set ourselves this year.

It will be a difficult and challenging task requiring increased economy and effectiveness, but by no means impossible.

The rewards, to list only a few, will be well worth the effort:

£700,000 for extra nurse staffing in long-stay mental illness and mental handicap hospitals.

£500,000 to tackle unacceptable 'long day' shift patterns at Gogarburn and Bangour Village hospitals.

£300,000 towards the cost of a new day hospital at Newbattle.

£100,000 extra for dialysis services at the Royal Infirmary and Western General Hospital.



Craigroyston Health Clinic

But this additional spending is essential if we are to meet the changing demands of health care.

And it is all on top of £288 million we will be using to run our hospital and community services this year plus the £72 million we spend on primary care services.

The extra £6.6 million is highlighted in the Board's Operational Plan, which details the way we intend to develop services over the next three years.

A major event this year will be the opening of the first phase of the £62 million St John's Hospital at Howden in Livingston, West Lothian; the largest hospital building project taking place in Scotland at present. The first patients will be admitted in October.

A great deal has been achieved in the past 12 months both in the provision of new buildings and services.

It was very satisfying to see the first stage of the new Leith Hospital rising, as it were, from the ashes. This was the

out-patient department upgraded at a cost of £600,000. Work continues on planning the next stage.

Another development aimed specifically at a local community is the £900,000 Craigroyston Health Clinic, which opened its doors at the end of January. It will bring a wide range of community health services closer to the community.

In-patient facilities have not been neglected and one of the most welcome improvements was £800,000 worth of accommodation upgrading for 40 mentally handicapped residents at Gogarburn Hospital.

AIDS continues to utilise a sizable proportion of the Board's resources. We have spent considerable time and money trying to get the prevention message across with a sustained 'Take Care' campaign due to run until the early months of next year. This was launched using a bright pink Lothian Region service bus which has now become a familiar sight on many routes in the city.

Other encouraging developments during the year were the establishment of a greatly improved cervical screening service providing three-yearly tests for all women aged between 20 and 60, and the launch of a new service offering breast screening to 84,000 women in Lothian, Fife and the Borders.

Mention must be made of the achievement of our East Unit team in the Health Services Management Game. This was a national training exercise in teamwork in which the teams had to resolve a number of health service issues relating to a six-year period in a mythical health authority. Our team won the London final.

On a sadder note, I would like to thank the large group of radiographers from this Board who helped with the difficult task of carrying out essential X-rays on the bodies of victims of the Lockerbie air disaster.

I would like to finish by thanking ALL our staff, no matter which department they work in or job they do, for the dedication and commitment they have shown over the past year.

Winston J. Tayler BSc AHSM
General Manager



Financial Profile

Lothian Health Board, in common with other Health Boards in Scotland, is financed by Central Government through the Scottish Home and Health Department.

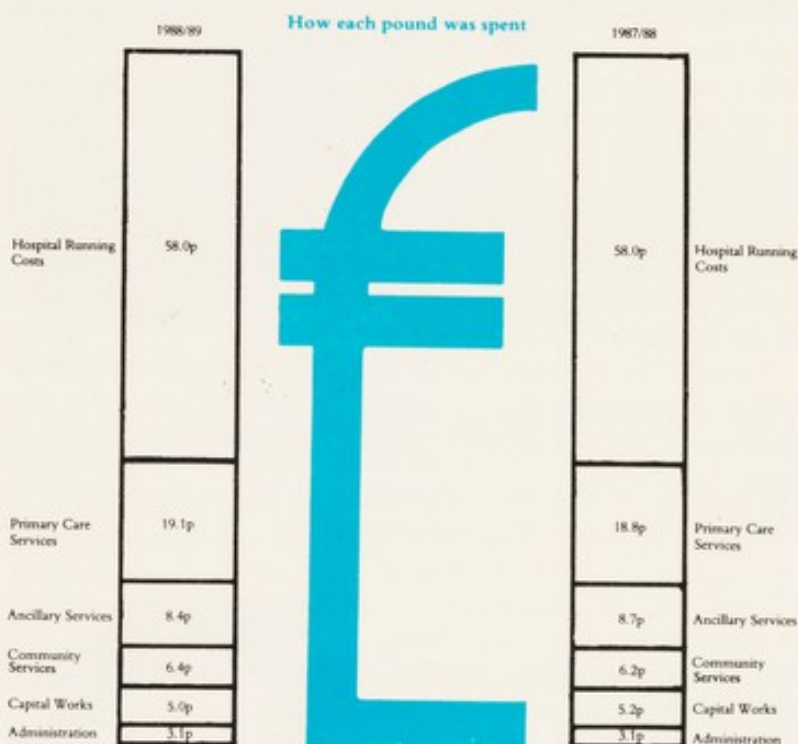
Hospital and Community Health Service Revenue and Capital Expenditure is, for the most part, financed from a Cash Limited Allocation which is the amount of cash which the Board is entitled to claim from the department. In 1988/89 the Board overdraw its Cash Limit of £290,786,000 by £77,000 (less than 0.03%).

The cost of General Practitioner and other Primary Care Services is funded separately and is not cash limited.

The total expenditure incurred by the Board increased from £338 million in 1987/88 to £377 million in 1988/89, an increase of 11%.

During the year significant developments were undertaken and efficiency savings amounting to 1½% have been achieved. This has only been possible through the considerable efforts of managers and staff of all disciplines and at all levels.

The following diagram identifies how each pound was spent and compares this with the 1987/88 sums -



The Board was fortunate to be gifted very substantial sums from both private individuals and organisations to further health care. The total Endowment Funds received during the year, together with interest on investments, amounted to £1.4 million general funds and £1.9 million specific funds.

Board Members

Chairman

Mr R.B. Weatherstone TD CA
(Appointed for the period ending
31st March, 1990)

Vice Chairman

Mr A.B. Dunlop OBE FRICS
(Appointed for the period ending
31st March, 1991)

Members

(Appointed for the period ending
31st March 1991)

Mrs G. Barton

Dr J.W. Baynham BSc PhD DIC

Miss J.A. Brown DCR

Mrs E. Burnett OBE

Mr J. Campbell

Mr D.R. Findlay QC LLB

Dr J.K.M. Gray LRCP(E) LRCS(E) LFRP&S(G)
MFCM DPH

Dr R.I. Kennedy MA MB BCh FRCPE FRCPsych

Dr M.M. McGregor MB ChB MRCP

Mr J.M. MacNeill CBE BSc

Mr G.S. Millar

(Appointed for the period ending
31st March, 1993)

Mrs H.G. Birrell

Dr I. Capperault MB ChB DOBst RCOG FRCS(E)
FRCS(G) FRCS(Eng)

Mrs S.J. Cunningham MCSP SRP

Professor Sir James D. Fraser BA MB ChB ChM
FRCS(E) FRCP(E) FRCS FRCAS FRSCI

Mr J.W. Stephenson BEM

(For the period of his appointment as
General Manager)

Mr W.J. Tayler BSc AHSM

Chief Officers

General Manager

W.J. Tayler BSc AHSM

Assistant General Manager

G.J. Brechin BSc

Treasurer

D.F. Hardman CA ACMA ATII

Chief Administrative

Dr H.E. Zealley MD FRCP(E)

Medical Officer

FFCM DipSocMed

Director of Manpower

D.J. MacDonald MA

and Nursing Services

MIPM RGN RMN

Chief Administrative

J.W. Craig LDS FDS

Dental Officer

RCS(E) DPD(StAnd)

Chief Administrative

D.A. Bolton MSc MPS

Pharmaceutical Officer