



# Neuro-Rehabilitation: Transformation Staff Update

Dear Colleague

We are pleased to share below a number of key updates in relation to the work to create a single service for in-patient neuro-rehabilitation services across Greater Manchester.

A number of workstreams have been established to guide and oversee the various strands of this work. Thank you to all those staff members from all providers who are part of these workstreams, you're making an extremely valuable contribution and helping to ensure we make our new service the best it can be for patients, carers and the staff working within it.

## Human Resources Group

The HR group is attended by representatives from all the provider trusts involved in the transfer. The main purpose of the group is to review the scope of the services and identify those staff members who are to be included in the transfer arrangements, ensuring the smooth transition of staff.

### Where are we up to?

As you may be aware there is a provisional timetable of transfers starting from 2020 to bring staff members, principally working for the rehabilitation units, over onto Salford Royal (part of the Northern Care Alliance NHS Group). As part of the formal TUPE process 'measures' are issued to your local trust to inform them of any potential changes as part of the transfer.

### What next?

Your Trust will now commence formal consultation with you, if this has not already started. This will include taking the measures through your local staff consultation groups before beginning engagement. If you have any concerns (however small) or questions please contact your line manager, HR Business Partner, or you can submit a question via the Neuro-Rehab Operational Delivery Network (ODN) website (more on that further on in the briefing).

## Clinical Group

### Where are we up to?

The clinical group is attended by consultants, AHPs and nurses from all the units to look at current practice and protocols. The group has been reviewing what requirements are needed for when the services transfer and what improvements need to be made to provide patients with the highest quality care.

### Single Point of Referral

The group is working on designing a single point of referral for the whole service. Currently each service receives referrals individually and how these are managed varies. The group has outlined

the need to have all referrals coordinated and evaluated through a common platform. This will allow for standardisation across the service and ensure all patients are managed equitably.

### **Mental Health Provision and Out of Hours Care**

The group, in conjunction with the ODN, have completed a review of mental health liaison and psychiatry services across the in-patient units. This has identified that access is poor or dependent on postcode. Ensuring staff and patients have access to the support they need is an essential principle of the transformation project. The commissioners are reviewing the provision to the units and we will be able to update staff as these arrangements are formalised.

The next priority for the group is to review and define the current out of hours access to medical support/GPs.

### **Training and Competencies**

The transformation model includes changes to the patient casemix across the in-patient units. The Floyd Unit will eventually provide 5 beds for slow stream Tracheostomy/Prolonged Disorder of Consciousness, the Devonshire Centre will also provide slow stream and cognitive beds. To ensure staff are confident and comfortable with these proposed changes, a Training and Competency group has been established to review and roll out the training to staff. The group will have multidisciplinary representation from all units—*if you would like to be involved please speak to your nursing/AHP leads.*

## **Digital**

### **Where are we up to?**

The creation of a new, single service provides an exciting opportunity to standardise electronic systems and practice across all the units. The overall aim would be for an electronic patient record to be used in all units. However it is important to ensure safety during the transfer and to understand what systems need to remain. Digital process mapping has been conducted at each of the units with follow-up exercises arranged.

### **What next?**

Once the digital requirements have been fully appraised, it will be possible to establish what systems changes can be facilitated for the transfer and beyond. All staff would be comprehensively trained on any new systems - we will be able to provide more detail on plans once evaluation is completed.

## **Ask a question / FAQ**

As a member of the neuro-rehab team you are essential to the success of the new service. We want you to feel engaged and up to date with the changes and aims of the transformation.

Formal consultation with details of the transfer will commence imminently, and representatives from Salford Royal will be visiting teams—more on that over the page. Additionally we have set up a FAQ and **Ask a Question** section of the ODN website. This will provide another forum to ask any questions you may have:

<https://www.gmnrodn.org.uk>



Greater Manchester Neuro-Rehabilitation  
Operational Delivery Network





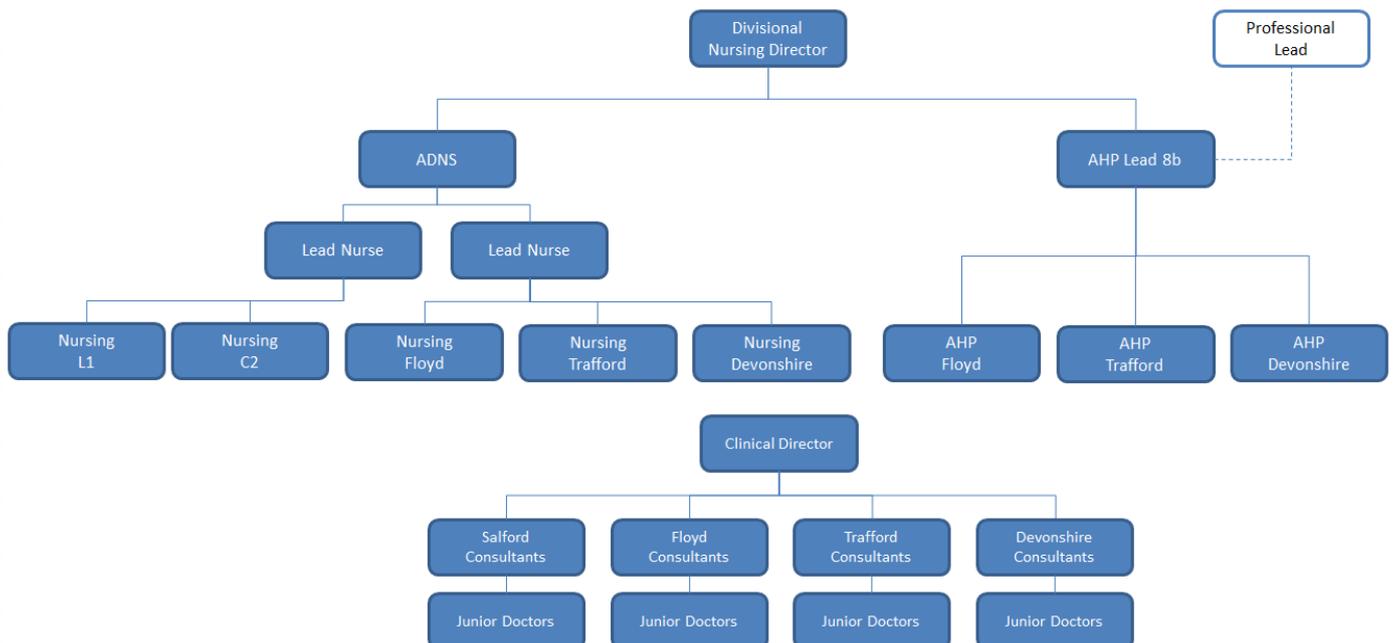
## Staying in touch

We know that you've previously really valued the face to face staff briefing sessions we ran in the summer and the chance to meet some of the team who are overseeing this work. We are working with representatives from all provider organisations to establish a routine presence at your team/directorate meetings so that we can keep in regular conversation with you about where we are with the programme and provide you with the opportunity to ask questions and raise issues .

This development of the new service is being project managed by Dominic McGaw, Senior Manager for Medical Neurosciences at Salford Royal. Dominic is involved in all the workstreams. The senior management within Salford Royal's Manchester Centre for Clinical Neurosciences are also closely involved. They are: Managing Director Sam Dickens, Divisional Director of Nursing Alison Dwyer, Deputy Divisional Director of Nursing Angela Winstanley and Chair of the Division and Consultant Neurologist Mark Kellett. You may have met some of these team members at earlier briefings and we will keep on taking opportunities to get the team out to meet staff members so you can put faces to names.

## Leadership Structure

The below leadership structure is proposed for the transfer of service. There were be an additional 8a AHP tier which will sit below the 8b position, with support provided until in place. The model for the 8a AHPs is being appraised by representatives from each of the units; detail of how this will look and where they will be based will be sent out as soon as possible.





**Alison Dwyer:** Divisional Director of Nursing I am passionate about neurosciences, patient safety and the experience of those who use or come into contact with our services. The neuro-rehabilitation transformation is an exciting opportunity to build seamless pathways for patients, delivering safe personalised care by specialist multidisciplinary teams working in partnership with service users. [alison.dwyer@srft.nhs.uk](mailto:alison.dwyer@srft.nhs.uk)



**Mark Kellett:** Chair of Division and Consultant Neurologist. Mark has a specialist interest in treating movement disorders, Parkinson's disease and multiple sclerosis. The transformation of Greater Manchester in-patient services has been long awaited and will provide patients with improved neuro-rehab care and ensure we have a sustainable and well resourced service for the future. [mark.kellett@srft.nhs.uk](mailto:mark.kellett@srft.nhs.uk)



**Victoria Dickens:** Northern Care Alliance Director of Allied Healthcare Professionals. I am passionate about my profession and the role AHPs play in rehabilitating our patients. The GM transformation provides an exciting opportunity to optimise the care and management provided through our services. [victoria.dickens@srft.nhs.uk](mailto:victoria.dickens@srft.nhs.uk)



My name is **Sam Dickens**, and I am proud to be the Managing Director for MCCN. I have worked in various management roles within Neurosciences at Salford since 2014. We have fantastic staff delivering some world class care for patients with neurological needs, and it is an honour to be part of the division delivering these services. [sam.dickens@srft.nhs.uk](mailto:sam.dickens@srft.nhs.uk)



My name is **Angela Winstanley**. I have worked for Salford Royal for 28yrs in various roles. I am passionate about nursing and feel excited at being able to play a part in shaping the future of Neurosciences for our staff, patients and relatives. [angela.winstanley@srft.nhs.uk](mailto:angela.winstanley@srft.nhs.uk)



**Dominic McGaw:** Senior Manager. I am enjoying working with colleagues across Greater Manchester on this exciting transformation project that will have tangible benefits for patient care and staff. There will be challenges, however the commitment and enthusiasm of staff to work through these has been admirable and a credit to all the units [dominic.mcgaw@srft.nhs.uk](mailto:dominic.mcgaw@srft.nhs.uk)



**Joanna Jay :** Lead Manager. I have worked in the division for a number of years and have been involved in a number of projects relating to transformation across Greater Manchester. I am looking forward to getting to know the staff across the GM units and supporting them with the changes. [joanna.jay@srft.nhs.uk](mailto:joanna.jay@srft.nhs.uk)

