

FOCUS

Facilities Directorate News Letter

Volume 1, Issue 1

January 2003

Inside this issue:

Message from the Director Parking Update	1
Switchboard Services Electro Biomedical Equipment	2
Estates Maintenance Teams	3
Performance Indicators	4 & 5
Smartline	5
5 Year Strategic Plan	6 & 7
Back to the Floor New Appointments	8
Staff Christmas Dinner Staff Profile	9
Modernisation of the Portering Service Exterior Decoration Sterile Services Fond Farewell	10
Welcome to the New NHS Menu Time Out Specials	11
ID and Car Parking Office Communication Sys- tems	12

Look out for:

- Pull out 5 Year Site Development Plan
- Switchboard and Smartline performance indicators
- New faces in the Directorate
- Lloyd Grossman's leading chef recipes

Happy New Year



Steve Moore
Director of Estates and Facilities

Wow, it's been busy! Sorry it's taken so long to publish this newsletter but here it is at long last. A big thanks to Jacqui and Hannah for producing this first edition, and those to follow.

Over the past few months I have been visiting as many areas as possible to meet you

individually or collectively, to get to know you and what you do for the Directorate and indeed the Trust. Thank you all for your encouragement, ideas, positive attitudes and dedication to the job at hand. I hope many of you have seen improvements and indeed been involved with some of them.

So what's been happening in Facilities?

A number of changes have taken place within Facilities, for example, restructuring of the management team, modernisation of porters, bringing the domestics back in house, and the introduction of a 7 day working week at Sterile Services. Thanks one and all for being so positive with these developments.

The next year promises to be

just as exciting with all the development currently taking place around the site, for our medical and clinical colleagues. Watch out for a special edition of "Up and About", dedicated to these developments, due out at the beginning of February.

We will be launching our own web page, linked to the Trust site, towards the end of February to keep everyone up to date.

If you have any ideas for future additions of 'Focus' or the web site, please let us know.

Parking Update

Problems finding a parking space during peak hours? You're not the only one. Frustrating isn't it? So, what's causing the problem? And more importantly, what's being done to rectify the situation?

The problem

Since the early 1970's the population that the Trust serves has nearly doubled (170,000 to 280,000). As you can imagine, a larger population means more patients (and therefore the need for more beds), more staff (to cope with

the increase in patient numbers) and a subsequent need for more parking spaces. Presently there are around 1000 parking spaces within the site (an increase of nearly 300 from 1974), however, this is still not enough to cope with the current demand.

The solution

There are plans to build a further 300 spaces on the site. Planning applications are currently with the council awaiting ap-

proval and we hope that the first application (for 100 spaces) will be approved in February with construction complete in March. We know that the car parking issue is one that a number of you are well acquainted (and indeed increasingly frustrated) with. Please rest assured that we are actively seeking ways to ease the situation and within the next few months a solution will be found.

Switchboard Services

Have you ever wondered what it is that the switchboard does? In addition to handling incoming calls, and public enquiries for the Trust we:

- liaise with internal departments for on-call rotas
- issue keys for departments and accommodation, along with residence contracts
- handle communications for emergencies; fire and panic alarms, medical gases and liaise with fire and police departments
- monitor boiler and building management alarms out of hours to enable the estates department to keep the Trust supplied with heating, water, energy, and a safe working environment
- programme and issue new and replacement bleeps, and organise repairs
- process cardiac alarms
- receive and re-transmit incoming faxes for departments
- issue information regarding dates and times of clinics
- order taxis for patient and specimen transfer
- locate patients for relatives who don't know which ward they have been admitted to
- handle referred and internal calls

We perform the same duties for Local Health Partnerships and the

satellite site at Hospital Road which has no manned switchboard of its own.

The Switch processes over 8 million calls a year and has doubled in size from 752 to over 1500 telephone points in the last 9 years, with many more due in the coming months (for the Diagnostic Treatment Centre and Education Centre projects).

With all of this activity, it could be easy to lose sight of our most important function - processing calls. To ensure the quality of these public facing services, we are working on a call prioritisation scheme to improve response times. We have already improved our average response time from 17 seconds in October 2002 to 14 seconds in December 2002. Calls are dealt with by two operators during the day and one operator during off peak hours. We are planning to employ an additional operator for a trial period during our busiest times (9am to 1pm).

What can you do to help us? A large number of calls are from members of the public who do not know the direct number for a department/clinic or are enquiring about clinic availability. By ensuring that relevant contact details and information are included on all Trust correspondence, the public will

Did you know that lighting an empty office over night wastes enough energy to heat water for 1,000 cups of coffee

be able to access the required ward/clinic/person directly. This also extends to departmental faxes.

We field a significant number of staff queries for internal numbers. To reduce unnecessary internal queries we will be providing the hospital intranet with an up to date list of all numbers on a weekly basis. Of course, we are only as good as the information we receive from departments; when a member of staff leaves, is appointed, changes title, or moves, let us know so that we can update the system.

For those who cannot get to a PC or are a little technophobic, we will be producing a printable version on a bimonthly basis for downloading and local printing.

The aim of the Switch is to ease your daily tasks. Dependable, efficient communication is the very foundation on which we all must stand.

Please do not hesitate to contact us with any queries you may have on ext. 3602.



From the right: Linda Lorch, Chrissy Fordham, Joan Meakin and Janice Richardson.

Electro Biomedical Equipment

Since 1980 the EBME Department has been responsible for the maintenance, repair and management of electro-medical equipment. Today the equipment register now contains over 7,500 items of "In Service" equipment within this Trust under the general management of the EBME Manager (David Wilson) and a staff of

6 technicians.

To report equipment matters:

Firstly determine the fault, then contact the EBME dept:

- Medical electronic equipment 2315
- Ventilators, etc. 2316

Quote: - Hosp Reg. No. WSHA then inform us of:

- The fault (not working is not very helpful!)
- The location of the equipment

Estates Maintenance Teams

Following a recent consultation process, there has been a change to the way the Estates Department will be responding to smartline and new work requests. Instead of trades working in isolation (i.e., electricians, mechanical fitters and builders) we are creating two teams within the department – the Maintenance Team and the Response Team. Each team will be made up

of a combination of trades, enabling the staff to multi-task, become more efficient, and ensure the completion of jobs.

The restructure was due to be revised and operational

in June 2002. However, due to annual leave, prior commitments and the need to recruit new team members, the implementation of the teams has been delayed until the end of January 2003.

Maintenance Team

The Maintenance Team will be responsible for carrying out regular planned preventative maintenance work such as, the cleaning of filters for extract and ventilation systems and

new installation works such as, the fitting of additional electric sockets, new shelves and cupboards. In reference to the restructure, Kevin Crowe comments that *'members of*

staff feel that undertaking new work will provide them with a good opportunity to further develop their skills and provide a broader remit to the service'.



Kevin Crowe, Team Leader

Response Team



Keith Jones, Team Leader

The Response Team's primary objective is to reduce the number of calls to smartline by pro-actively seeking out work and responding more effectively to the routine customer calls received. The hospital will be divided into zones, each of which will be visited by the Response Team twice a year to carry out as many

smartline tasks as possible within the time and operational constraints of the area. Smartline requests will still be actioned as normal outside of these visits. Advance notice will be given of the team's arrival to each area so that the person in charge can start formulating a list of all the repair work that needs doing. Keith

Jones comments that *'there has been a favourable response from the wards and departments who are already collating lists in readiness for our visit'.*

There will be set visits and times for each zone, details of which are listed below.

Zone	Area	Date - 2003	
1	F9, F10, F11, Ante Natal Clinic, F12	Jan	June
2	F5, F6, F7, F8	Jan	July
3	F1, F2, F3, F4	Feb	July
4	Theatres, SCBU, Recovery, ITU, CCU, CDS	Feb	Sept
5	Physio, OT, Ophthalmology, Gym, Occupational Health, Breast Imaging, G4, G5, G6, G7	Mar	Sept
6	G8, A&E, OPD, Main Reception, GUM, Fracture Clinic, Medical Photography, Foodstop	Mar	Oct
7	Pathology, Xray, Mortuary, Nurse Education, PGME, Pharmacy	April	Oct
8	Chapel, Admin, Social Services, Finance, Healthcare Records, Trust Offices	April	Nov
9	F1 OPD, G1, G2, G3, Oncology	May	Nov
10	Works Department, IT, Pharmacy Production	May	Dec
11	DSU	June	Dec

Key Performance Indicators

Key Performance indicators (KPI's) are core measures that gauge the performance of an organisation in a particular area. They tell us how the organisation has performed in the past and how it is performing now.

Trusts are measured and valued by more than just financial performance. KPI's can play a part in that measurement and valuation, by showing the pattern of activity and expenditure over time. KPI's can also be used to help

predict future performance, both financial and non-financial.

The Facilities Directorate monitors 25 KPI's each month. These are reviewed and amended, with additional indicators being added all the time. We

use them to assist us in making decisions within the Directorate.

Watch out for the KPI's in future news letters so you can keep track of how things are going under key targets.

Here are the first two areas.

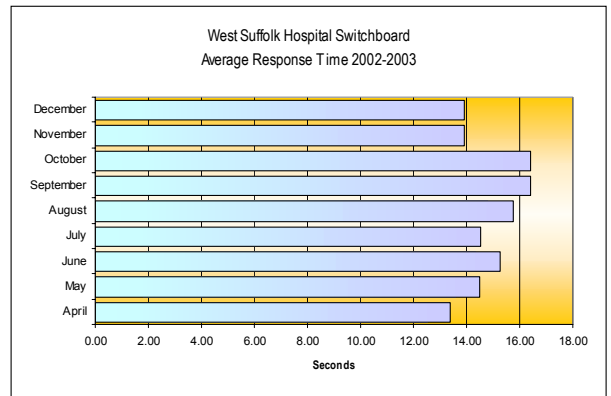
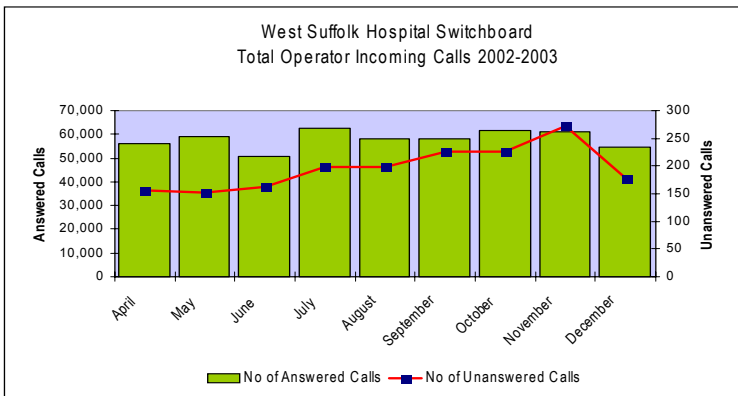
Switchboard

The target time for answering a call coming into the Trust switchboard is 10 seconds. Between April

and December 2002, KPI's showed the average response time in answering a call was between 13 and

17 seconds. This justified the decision to have an additional operator on the switchboard over the peak

call time, 9am - 1pm. In future months the KPI should show a decrease in the average response time.



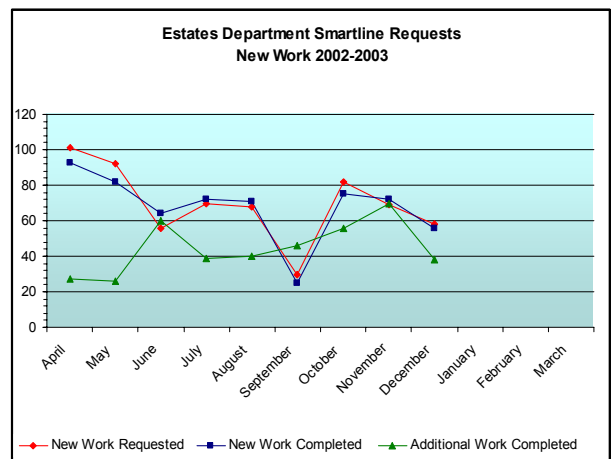
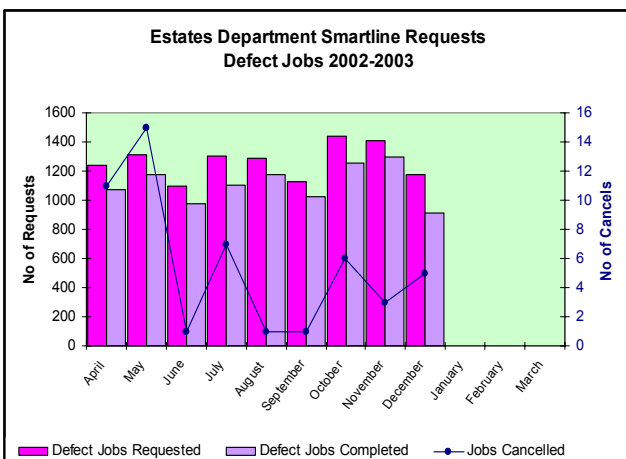
Works Department - Smartline

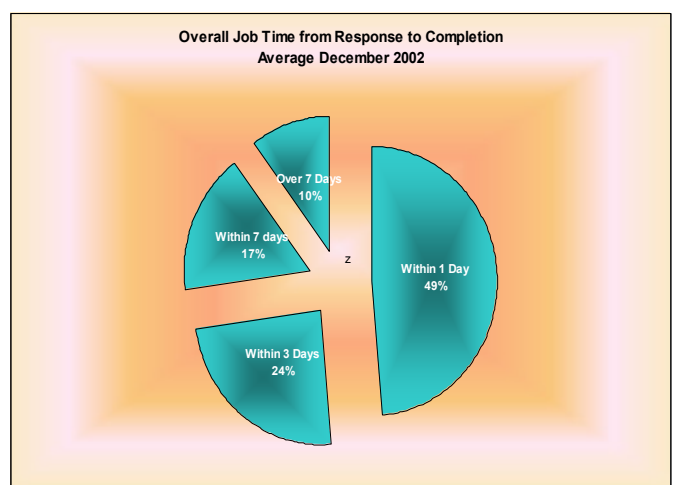
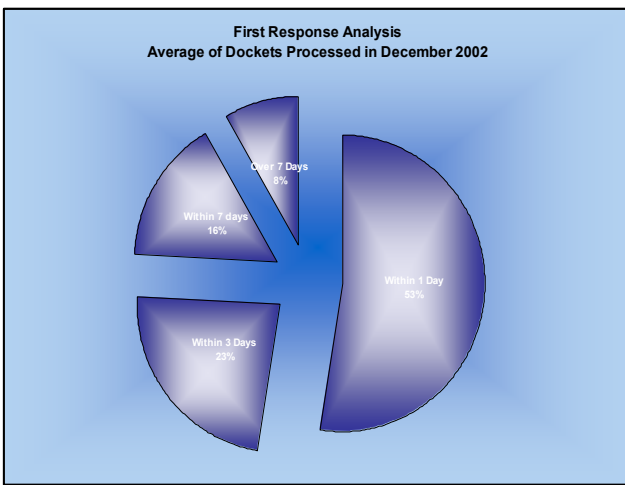
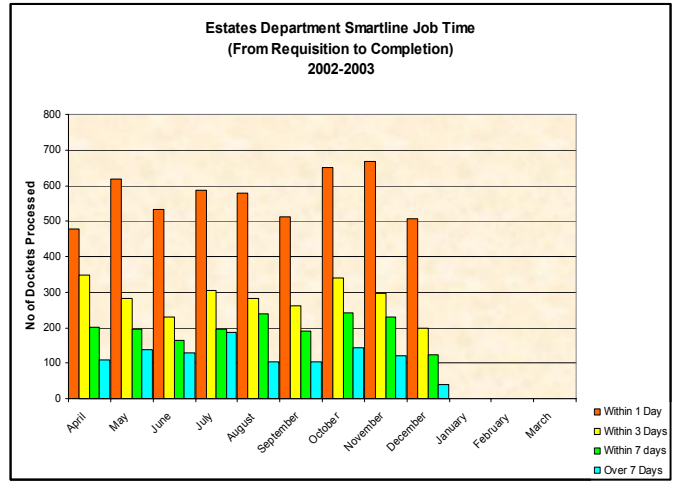
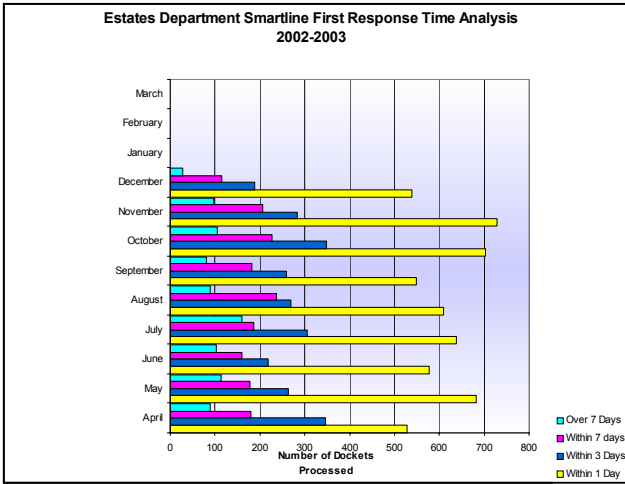
The Estates 'Smartline Request' KPI's measure our performance on completing breakdown jobs, new works and our response times. It helps us gauge how efficient we are

by continually monitoring the number of requests received, time taken to complete them and the number of jobs outstanding. It helps us to understand where we are

working well and where there is need for improvement. For example, in December 2002 when there was a reduction in jobs received and completed. On investigation this was

attributed to a combination of a seasonal fluctuation in demand and reduced labour force during the holiday period. The KPI's will be available for you to view on our web site.





Smartline

Smartline has been running since 1994, replacing the paper requisition system. In the main the system has proved to work well, however, problems have been identified that prevent the system from working as well as it could.

Typical problems are;

- Reluctance to leave the required information on the answer phone when the operator is unavailable. We receive approximately 110 requests per day, so occasionally the operator may be on another call when you are trying to get through. If you leave the details of

your fault on the answer phone we will process it as normal - if there are any queries with your message we will contact you.

- Faults on patient connected electronic equipment being wrongly reported to smartline. These should be reported directly to EBME on ext. 2315
- Some members of staff not being aware of their location ID number. This is crucial in the efficient operation of smartline as the number identifies the location of the fault. If you are unsure what your ID number is please contact

Terry Bird, Works Superintendent on ext. 3852.

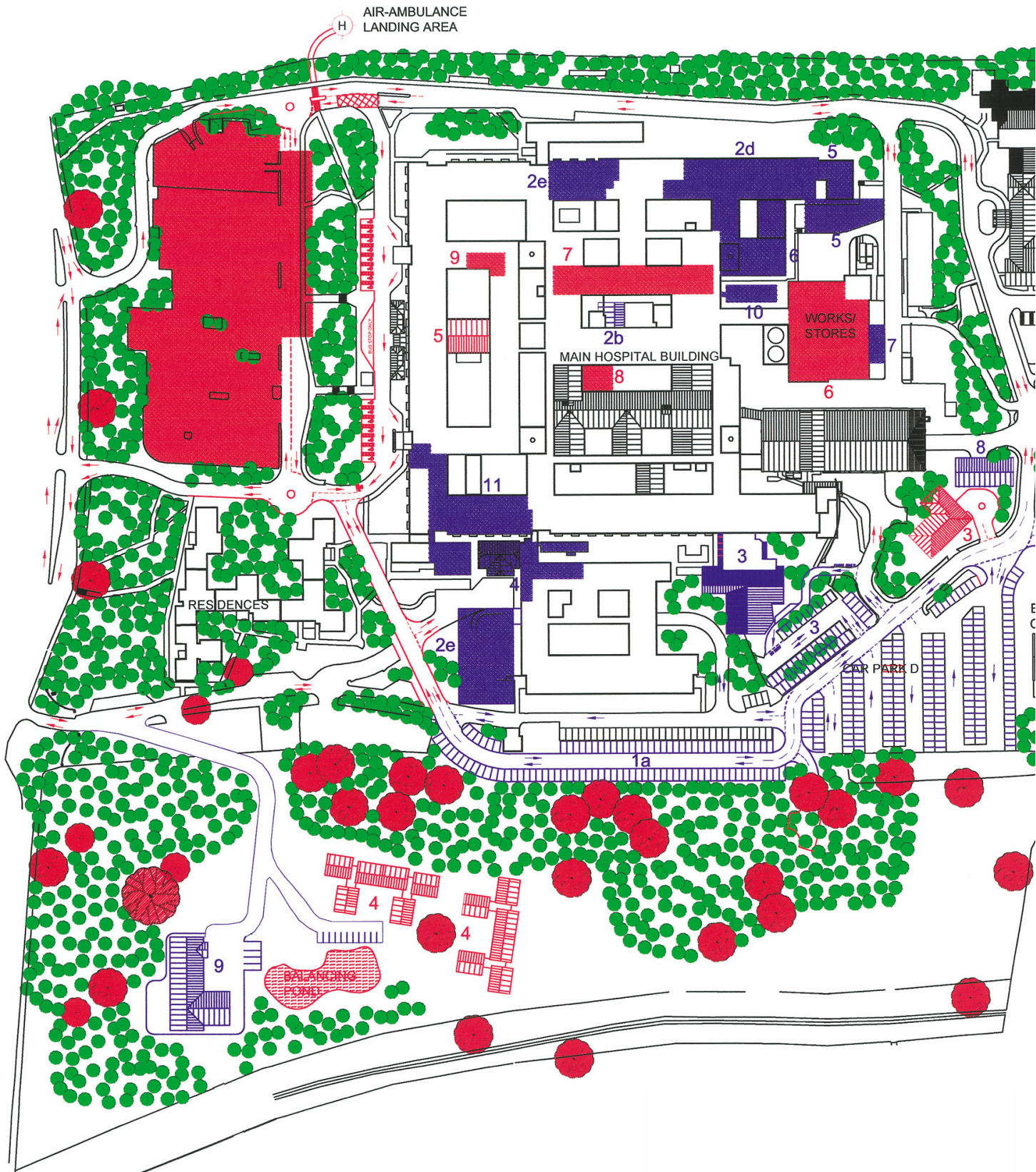
- Jobs being inappropriately prioritised by the caller - Please be considerate and give a genuine assessment of how urgent the fault is. We group priorities into the following categories:
 1. Immediate - requires attention the same day i.e. life threatening
 2. 24 hours - impacts on the smooth working of the department
 3. 3 working days - does not cause major disruption of the department
 4. 7 working days - needs attention, but is not urgent

When working in restricted access areas, response times will be negotiated on a case by case basis.

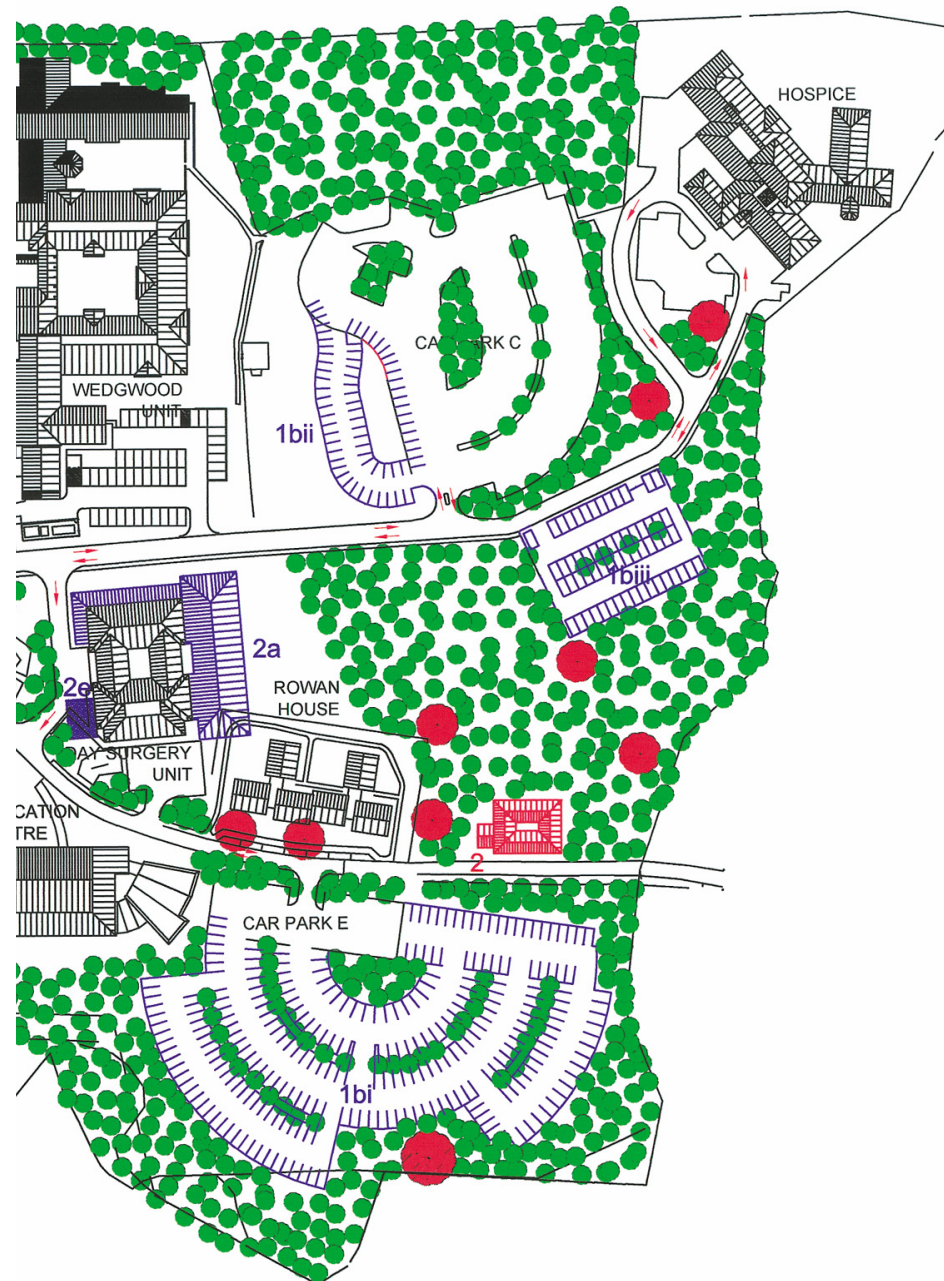
We recognise that the priority of a fault can change after it has been reported. Please advise us if this occurs so that we can change its category.

If you would like a member of the works department to attend your team meeting to brief staff on the smartline procedures, please contact Roger Gembis on ext. 3375.

5 Year Strategic Plan



The Trust has formulated a five-year development plan outlining both short term (2 years) and longer-term (5 years) refurbishments, upgrades and new builds for the main hospital site. There are two plans posted up within the hospital; one is located in the main entrance and the other on the notice board in Time Out. These detailed plans indicate the exact location of each development. If you would like more information, log on to the Facilities web site (www.wsufftrust.org.uk/facilities) which is due to go live on 24th February, or contact Terry Robertson on ext 3651.



Short term - within 2 years - in progress

1a	Car park 100 additional spaces	Aug 03
1bi	Car park 201 additional spaces	May 03
1bii	Car park 40 additional spaces	Jan 03
1biii	Car park 25 additional spaces	Jan 03
2a	Diagnostic treatment centre	Sept 03
2b	Ultra clean theatre 9	Aug 03
2c	Orthopaedic OPD (not shown)	
2d	Delayed discharge ward	Dec 02
2e	Ward F10 refurbishment - Temporary ward (nr 2d) - Mobile elective surgery unit (nr 2a)	Feb 03
3	Oncology Unit	Late 03
4	Diabetes screening and treatment clinic	
5	Renal dialysis	Mid 03
6	Urology	
7	Estates works department	Jan 03
8	Storage	Mar 03
9	Creche	End 03
10	Office accommodation	Mar 03
11	Occupational therapy	Mar 03
12	Miscellaneous (not shown)	

Shot term - within 2 years - planned

13	Pre-operative assessment centre
14	Dermatology unit

Long term - within 5 years

- 1 Multi story car park
- 2 Sterile Services and Electro Biomedical Equip.
- 3 Cellular Pathology and Histology
- 4 On site accommodation
- 5 Endoscopy
- 6 Office accommodation
- 7 Emergency Assessment Unit
- 8 Combined waiting area
- 9 Nuclear Medicine

Back to the Floor

During the latter part of 2002 and the beginning of this year, managers from Estates and Facilities have been going 'back to the floor'. They wanted to find out what happened in the day to day running of each department and see things from an entirely new perspective. This has enabled them to learn from their colleagues and concentrate on those areas that need changing or improving.

Feedback from each of the managers is discussed at Facilities meetings and recommendations are taken forward

where practical. The list below shows where each manager is spending their 'back to the floor' experience.

Jayne-Ann Webb	Portering
Anne Bishop	Catering
Karen Reynolds	I.T.
Linda Petrie	Supplies
Jacqui Grimwood	SSD
Riva Knight	Medirect
Veronica Hall	SSD
Jean Le Fleming	Catering

Steve Moore	F8, Medical equipment Library
Terry Robertson	Ward Clerk
Julie Pettitt	Switchboard
Ian Stuchbury	Main Reception
Rob Edgar	Portering
Sue Vincent	On-call Engineer
Roger Gembis	Catering
Peter Lamplough	Estates/Carpenters
David Wilson	Portering

New Appointments



Kathleen Bowers, Trainee Technician, started in the Sterile Services Department on 20th January. Kathleen previously worked at the lampshade factory in Mildenhall.



Janet Wakely, Catering Assistant, started at the hospital on 6th January and is working part-time in Foodstop. Janet previously worked in a shop in Bridgend, Wales, selling school uniforms.



Oladipo Scott-Boyle, Assistant Design Engineer, started working in the Capital Project Team on 6th January. His role involves the provision of mechanical and electrical design on projects and assistance with the completion of feasibility studies and option appraisals. Ola (as he likes to be called) previously worked for Omar Homes Group in Brandon, as an Architectural Officer.



David Claxton, former Trust employee, re-joined the Trust as a Maintenance Assistant in the Works Department on 6th January 2003. He previously worked for ASDA in Cambridge, before which he spent 10 years working in Adelaide, Australia.



Hannah Archer, Project Officer, joined the Facilities Team on 16th December. Her job is to assist the Facilities Managers with projects that they are involved with. Following completion of her degree in History and Sociology, Hannah spent a year travelling the world.



Keith Paske has recently changed roles. On 18th November 2002 he joined the Works Department as a Maintenance Assistant, prior to this, he was employed as an SSD Technician at Hospital Road.



Martin Brocket, Mechanical Maintenance Craftsman, joined the Trust on 2nd December 2002. Prior to this, he worked for Baxter HC in Thetford as a Utilities Engineer.



Daniel Turner, Apprentice Electrician, started working in the Works Department on 6th January 2003. Before this he was an Apprentice Electrician with Heatlec.

Staff Christmas Dinner

On 11th December the Facilities Directorate held its staff Christmas Dinner. Over 100 members came to share in the festivities and seemed to enjoy being waited on by the Directorate Managers.

Feedback from staff who came has been very positive, here are a selection of those

we received:

'I thought the meal was excellent and there was a really nice atmosphere, it was a good opportunity for everyone to get together', Chris Rayson, Sewing Room Assistant.

'I had a very enjoyable evening and hope that it is made

an annual event and that more people will join in next year', Peter Fishburne, Porter.

An enjoyable evening was had by all and it was a great success, we hope to repeat it bigger and better for 2003', Steve Moore, Director of Estates and Facilities

Save energy

For 3 copies or less, use the printer; for more use the copier

Using the 'standby' button on your copier will lighten your energy load by 70%



Members of staff from the Sterile Services Department



The catering team

Staff Profile-Dawn Hart

Tell us a bit about yourself...

I was born in Battersea, though I moved to Suffolk when I was just 3 years old. When I turned 16, I was offered an apprenticeship at Andre Bernard in Bury St Edmunds, where I worked as a hairdresser. I did this for 6 years before coming to work at the hospital as a housekeeper. I have now been at the West Suffolk for 15 years.

What do you do at the West Suffolk?

For a period of 3 years I worked part-time. After this I became a full-time

member of staff, spending my mornings working in the Central Delivery Suite and Special Care Baby Unit, and afternoons floating – working on various wards. In 1994 I was offered a position as a Team Cleaner, a role which I am still in today. I am currently acting up as Team Leader, which means that I am responsible for making sure my team meets the hospital's cleaning specifications. During my time as a team cleaner I have completed NVQ levels 1 and 2 in housekeeping. These included specialised modules in floor maintenance, such as

striping and polishing of hard floors, and carpet cleaning.

What do you think about the domestics being brought back in-house?

Personally, I am very pleased about it, as I am now able to join the Trust's pension scheme. On a more general level, it will enable the staff to have closer contact with managers, resulting in improved communications at all levels. Furthermore, we are now able to benefit from staff discounts and access to personnel and occupational health services.



Fact file

Favourite colour:

Red

Favourite group/record:

R.E.M

Favourite food:

Chips

Favourite holiday destination:

Majorca

Favourite film:

Batman the Movie

Modernisation of the Portering Service

The portering services immediate aim is to become a modern, flexible and multi-skilled team. To assist them with this a new control and communication system called CARPS (Computer Aided Radio Purcell Systems), has been purchased. The system uses a one-stop call centre principle, and will enable supervisors to track the daily activities of mem-

bers of the team via a central controller. This new system will ensure efficient use of limited resources.

The portering service has developed new areas of expertise such as Mortuary/post mortem and Electro Biomedical Equipment assistance. They will continue to expand their program, increasing their value to the Trust, in addi-

tion to making the work varied and interesting for the portering team.

Plans are currently being drawn up for the porters to take on responsibilities for security within the hospital. As plans proceed, all staff will be trained in the management of violence and aggression, break away, control and restraint.

Don't let money go down the drain, turn off running taps

Burn carbohydrates not hydrocarbons: ride your bike to work

Did you know that a PC monitor left switched on overnight wastes enough energy to laser print 800 A4 pages

Exterior Decoration

Over the next 3 years the exterior of the hospital (excluding internal courtyards) is due to be repaired and painted. This forms part of the Trust's planned maintenance programme and will improve the hospital environment.

Six colour schemes were painted on the ex-

terior wall of Ward F1 in July, to enable staff to view them from the Time Out restaurant windows. Staff were invited to indicate their preference through a questionnaire.

In September a colour scheme was chosen based on the 303 returned questionnaires.

Colour scheme 1 was the clear winner, receiving 100 votes.

Painting is due to start at the front and side of the hospital (Wards F5/F8/ Ante Natal Clinic) in February.

For further information please contact Peter Ward on ext 3974.



Sterile Services—changes in operational hours

The Department has recently consulted with staff to extend the operational hours of the unit from Monday to Saturday to include Sundays. During the weekends, the unit will process equipment between 8.00-1.00 but there are plans to extend this to 4.30 as the workload increases.

Extra work is anticipated from new theatres currently under development; we have calculated that an additional 800 sterile sets

will be required during the coming year. The increase in operational hours has the added benefit of ensuring the department can respond to emergency situations without having to call staff in.

'I was pleased with my teams positive response to these changes as this can only enhance the quality service we provide', says Jayne-Anne Web, SSD Manager.

Fond Farewell



Val Webster, Assistant Manager, Resources, at SSD, left on 24th January 2003 after 32 years service.

Val started working at the hospital as an SSD Assistant in 1971 and since this

time has seen many changes in practice; from boiling of instruments, to the use of disposable items such as syringes, needles, etc.

Val now plans to spend her time concentrating on her interests, which include travel, gardening, reading and plenty of relaxation.

Jayne-Anne Web, SSD Manager said that *'Val will be a hard act to follow and she will be missed by all her friends and colleagues'*.

Welcome to the New NHS Menu

Better Hospital Foods

In July 2000 the government launched the National Health Service Plan. This is a long-term plan to radically overhaul the way the Trust delivers its services and improve the environment for the benefit of the patients.

The NHS plan includes a section aimed at improving hospital food. The NHS is the largest catering organisation in Europe serving 300 millions meals per year at a cost in excess of £500 million per year.

Extensive research recognised that the food served throughout NHS Hospitals was variable in quality. *The Better Hospital Food Programme* was formulated to standardise the service.

The Meal Service

The requirements introduced on 1st January 2002 ensure that the normal mealtime service meets or exceeds the following:

- Breakfast - a choice of fruit juice, high and low fibre cereals, hot oat cereal, white or brown rolls, toast, low fat spread, butter and preserves.
- Morning - fruit squash, water, tea, coffee, biscuits, cakes and additional sweet and savoury items.
- Lunch - fruit juice, soup, light hot dish (meat/fish/vegetarian), sandwiches (meat/fish), bread/roll and spread, fresh fruit and cold dessert.
- Afternoon - beverages

and snacks, as morning.

- Supper - three main dishes including a vegetarian option, salad, a choice of vegetables, alternative carbohydrates (rice/pasta), bread/roll and spread, hot dessert.
- Evening - beverages, as mid morning and afternoon.
- Snacks are to be provided at least twice per day and the main meal changed to the evening to reflect modern eating habits.

The 24 - 7 service

All hospitals are required to ensure that patients have access to food at all times and are required to provide the following services:

- A ward kitchen service - that provides hot and cold beverages, toast, preserve and spread.
- Snack Box Service - providing a range of products including sandwiches, fresh fruit, yoghurts, crisps, confectionery and fruit juice.

From 2004 all hospitals will be required to provide a hot alternative to the snack box which can be reheated and served at ward level.

The National NHS Menu Format

At present each hospital is able to develop their own menu format within the above guidelines. There are as many different menus as there are hospitals. The new NHS menu format that we will be introducing within the Trust will help alleviate the problem by standardising the format of the menu.

This will ensure that when-

ever a patient is admitted to hospital the new menu format will be familiar and easy to understand. It will clearly show the range and types of meals during the menu cycle. The menus will remain with the patients throughout their stay as a source of information for the service provided by the Catering Department.

Leading Chef Recipes

Lloyd Grossman was asked by the Secretary of State for Health to lead a team of chefs from the private sector to design a variety of dishes that would compliment existing NHS menus. This was introduced in May 2001 just before the election. The range now includes an expanding selection of popular dishes that are more suited to our clientele. We aim to have 3 leading chefs recipes available on our menu daily.

The Better Hospital Food Panel will act in an advisory capacity to Ministers on the standards that are set for the NHS in the coming years, to ensure progress is continued with re-branding NHS catering.

The Better Hospital Food Programme needs to ensure that funding is available to secure real improvements in the quality and availability of food in hospitals. We should also ensure that every penny spent ends up inside the patients and not in the bin!

Specials

Valentines Day

14th February

Sirloin steak with peppercorn sauce
Potato gratin
Strawberry and champagne roulade

St Patrick's Day

17th March

Guinness and beef casserole
or
Boiled ham with onion sauce
Crusty soda bread
Colcannon (fried cabbage onion and potatoes)
Strawberry cheesecake

St. Georges Day

23rd April

Roast forerib of beef and yorkshire pudding
Oven roasted vegetables (carrots parsnips, swede with olive oil and thyme)
Roast potatoes or cream potatoes with leeks
Treachle tart with custard

ID and Car Parking Office

When you start working at the hospital you are required to have an ID badge, and also a parking card if you have a car. Currently, both of these are obtained from the facilities reception and processed by a number of different people.

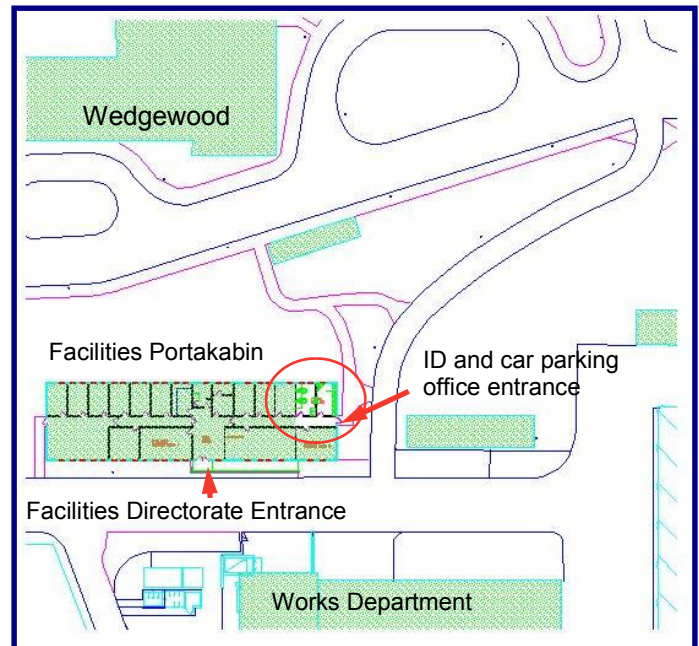
It has been proposed that the car park, ID and security services at the hospital are centralised. This has been done with the following aims in mind:

- To provide a better service; a one-stop shop as opposed to the current lengthy process
- To relieve reception staff in facilities from the

pressure of large numbers of people requesting ID and car parking cards.

It is proposed to house the ID and car parking office in the portakabin currently occupied by risk management staff when they become vacant. The access to these offices will be through the door at the far end of the building (see plan).

Mick Croker and Terry Owens will take over from Terry Robertson in managing car park security personnel. They will also be responsible for any car parking queries and problems.



Mick and Terry will be based in one of the offices with the other being used as a waiting area/camera room.

These changes will be effective from 3 March 2003.

The Directorate's web page goes live on 24th February, log on to access further information about the department and articles in the Newsletter

www.wsufftrust.org.uk/facilities

Communication Systems

We are trying to improve communication within the Directorate to ensure that all our staff are familiar with any changes or developments within the hospital. 'Focus' is the first part of this process and we plan to publish it every two months.

The Directorate's web page will be launched on 24th February and will contain lots of useful information about the services

we provide.

Four notice boards will be installed on the main hospital streets. Each board will focus on a capital project currently under development. Initially these will be:

- Education Centre
- Diagnostic Treatment Centre
- Car parking
- Oncology Unit

The boards will be regularly updated as the schemes progress.

If you have any ideas for improving communication please contact Jacqui Grimwood on ext. 2740

West Suffolk Hospitals **NHS**
NHS Trust

Facilities Directorate News Letter

Editors notes

We hope you have enjoyed reading Focus and that you found it informative. We plan to publish it bi-monthly. If you would like to submit an article for the next edition please email it to Jacqui Grimwood or Hannah Archer. Alternatively call us and we can arrange to meet. We are also happy to assist in writing your article.

Article deadline: 10th March 2003

Date of next issue: 31st March 2003

Hardwick Lane
Bury St. Edmunds
Suffolk
IP33 3PS

Phone: 01284 712740

Fax: 01284 713875

Email: jacqui.grimwood@wsh.nhs.uk

hannah.archer@wsh.nhs.uk

We're on the web

www.wsufftrust.org.uk/facilities