

MBMJ PROFILE . . . ROGER WILSON

A former NHS finance trainee turned personnel manager in the Mersey region, Roger Wilson is keen to put a distance between himself and University Hospitals of Morecambe Bay's (UHMB) chief executive, Tony Halsall. Contrary to popular belief, he hadn't followed Tony here, nor had he worked under him before. Rather, his arrival here has the ring of personal fulfilment; memories of family holidays and his parents' last days in the Lake District. It's a familiar story for many who move to Morecambe Bay and mirrors the stories of those who have featured in the **PROFILE** section before. Morecambe Bay's geography and climate is a powerful recruiting tool. Certainly when he first considered a move here, there was no suggestion of the tribulations to follow, and his first impressions were decidedly daunting. 'We were in turnaround as far as the Department of Health was concerned' – this, and the reasons for it, had been a surprise to him. Another early conflict, he admits, troubled him too; he was left with the task of closing down the 'Consultant Dining Room' at the Royal Lancaster Infirmary. It's difficult to imagine that a man whose previous job had involved closure of a site at Ashworth Hospital (a High Secure hospital) being troubled by such a trifle, but his achievement of the former under the noses of a hostile press without significant opposition says something of his ability and determination. Of Ashworth, he recalls, 'We had staff on two separate sites no more than 400 yards apart who had never met each other, never found any common ground.'

Are there any equivalent challenges here? The concept of separate units with separate identities and rigid demarcations of staff roles is clearly an anathema. The 'three hospital network' is something which he is passionate about. On



continuation of the current bonus culture – the waiting list initiative issue that saw the Trust make headlines in the *Sunday Times* – he is uncompromising. 'I feel that an important principle for Trades Unionists has to be employment over earnings', he explains. 'Reductions in overtime payments would probably not be resisted if the savings are reinvested in job creation.' It's a formula that worked when he negotiated the Ashworth closure past the barons of the Prison Officers' Association, and a clear warning to the tiny minority of vested interests who don't want to cooperate with change.

What had been the cause of the failure that led to special measures? Possibly UHMB was a victim of its own success: staff were induced from other senior positions and offered opportunities for growth and specialty advancement without clear longterm financial strategies. The examples around the Bay are legion, legacies of a spending boom that characterised the middle years of the current government. On financial recovery, he is clearly looking to consultants to deliver. There is mentioned a name, of a senior clinician, who is in his sights as someone who is able to deliver consultant engagement in financial control. It sounds a bit like a 'kitchen cabinet' but it is, he claims, a think tank – the Clinical Strategy Group of hand-picked consultants who advise the board on policy. Controversial perhaps for consultants with specific interests who find themselves with an extra management tier to negotiate to realise their ambitions, but these are taxing times and radical solutions are needed. One gets the impression that he is realistic about the challenge, but it is of interest that the pragmatic radical has not yet closed any other staff rest area than the consultants' 'dining room'.