The spread of infections within hospitals across the country has never had a higher profile.

You only need to open a newspaper or switch on the TV to find out about the latest outbreak.

The recent review of C-diff cases at the Vale of Leven Hospital reinforced the importance of staff education and increased the focus on infection control across the organisation.

But how much do you know about infections such as C-diff and MRSA and what information would you give to friends or relatives who ask you for advice?

As part of the ongoing drive to increase awareness and understanding across the organisation, we’ve produced a user-friendly guide to infection control.

Find out what you can do to help protect yourself and others, read the top 10 infection control tips, get the facts on MRSA and C-diff and put your new knowledge to the test by visiting the new infection control “trainer tracker” website.

The first winners of our Ideas in Action award were announced at the last board meeting.

Chairman Andrew Robertson presented the award certificates to alcohol worker Tricia Keogh from the Sandyford Initiative (pictured left) and podiatry manager Audrey Murdoch from the Bishopbriggs Podiatry Clinic (right). The final winner in this first set of awards is GRI theatre sister Susan Evans.

Among the award-winning ideas is a recycling plan for theatres and alcohol advice scheme for young people which could be rolled out across all young people’s clinics in Greater Glasgow and Clyde and the creation of a podiatry pack to help at-risk diabetic patients.

Find out more about these ideas inside and get details of how you can put forward your own good ideas for this new award.
BIG-HEARTED Scottish band The Fratellis have pledged all proceeds from their new single “Look Out Sunshine” to a new unit at the Royal Hospital for Sick Children. The boys are fronting the charity’s appeal to raise £350,000 and build a new unit for 13 to 16-year-old patients at the hospital.

There is an existing Teenage Cancer Trust unit at the Beatson West of Scotland Cancer Centre which treats 16 to 24 year olds, and earlier this year the band paid a visit to meet patients.

If enough money is raised, the unit is expected to open in early 2009. It will have six beds, a lounge and activity space, TV and music system and small kitchenette area.

Baz from the band said: “We’ve seen at first hand the difference that a Teenage Cancer Trust unit makes to the lives of young people. “Every young person with cancer in Scotland should have access to a unit, so I, and the rest of the band, would like to ask everyone to put their hands in their pockets and get involved.”

**Look out sunshine**

**Real-time recording**

**IT SUPPORT**

A NEW IT reporting system is set to reduce delays in responding to incidents across the organisation.

The first pilot of the new web-based DATIX system is already live within regional services and will be rolled out across the rest of NHSGCC from October.

Until now, all incidents and near-misses have been recorded on paper forms, but DATIX will ensure this information is captured and logged securely to allow managers to make decisions and improvements – whether they be clinical or health and safety related – much more quickly.

Project manager Mark Tortolano said: “DATIX is much more immediate, recording an incident and allowing analysis straight away.

“IT makes it easier for managers to make decisions based on a complete set of data as they can drill down through the information and see patterns.”

DATIX is an important part of the new incident management policy. The long-term goal is for all incident reporting to be done via the DATIX web-based system, allowing incidents to be reported in real-time and reducing the delays experienced with paper systems.

Mark said: “The current problem is that there are multiple paper forms, which makes it harder to analyse all the relevant data. The web form divides all incidents into clinical and non-clinical with categories based on a complete set of data as they can drill down through the information and see patterns.”

Training is under way on the system and will be rolled out starting with Inverclyde CHP, then pharmacy (PFSU), followed by rehabilitation and assessment.
IDEAS IN ACTION

Name: Trish Keogh
Job title: Alcohol worker at the Sandyford Initiative
Idea: To screen all the young people who attend Sandyford for problem drinking and offer anyone at risk advice and support.
Inspiration: When I first arrived at Sandyford, the idea was that young people would be referred to me if they thought they had a problem with alcohol. That didn’t really work as young people don’t see themselves as having a problem. However, when I went out and spoke to them in the clinic about different units of alcohol or if they knew what long-term effects alcohol can have on skin, eyes, energy levels and so forth, they took more interest and began to think about how much they were actually drinking. I knew we had to find ways to educate young people and identify the best way of getting information across.
Aims: To find out how many young people attending our services know about alcohol and to offer brief interventions if necessary.
Work undertaken: A pilot was set up to see if it was worth taking the idea forward. We managed to get a small grant and between myself and the local audit facilitator we were able to get things started. Having proved successful, we now hope it will lead to changes in how we practise in all young people’s clinics across NHS GGC. We’ve also trained staff in screening young people for problem drinking who attend the young people’s clinics across NHS GGC. We’ve also made sure that young people are more aware of binge drinking and now know where they can go for help.
Initial results: From the young people we have helped so far, more than 95 per cent felt that the intervention had been helpful and said they were more aware of binge drinking and now know where they can go for help.
Next steps: We plan to extend the training on how to screen for potential alcohol problems to all Sandyford staff.

Name: Susan Evans
Job title: Theatre sister at GRI
Idea: To recycle any clean paper/card/plastic or from opening medical or surgical supplies. We use a large amount of sterile dressings, equipment, packs and instrument wrappings. As GRI has one of the largest theatre suites in the UK, it would be good to be seen to do something about the waste that we generate.
Inspiration: We are always being encouraged to do more recycling at home and it’s good to do your bit. Councils are continually asking consumers to recycle at home, organisations such as the NHS are bound to be next, so why don’t we beat them to it by highlighting initiatives like this? NHS GGC is the largest health board, so anything we can do to minimise our carbon footprint can only be of benefit to the community and the environment.
Aims: To minimise the amount of hospital waste and packaging sent for incineration, reduce our impact on the environment and potentially save the organisation money.
Implementation: I am contacting interested parties to develop this initiative and already have a few volunteers. I’ve also discovered that a sister in Stobhill theatres, Moira McLaughlin, has implemented recycling in her department so I’m planning to contact her to find out more about her scheme is working. I’m also planning to contact the environmental health department to discuss the plans and ensure they are feasible.
Next steps: Once these ideas have been evaluated, we hope to set up a trial within theatre areas. This will hopefully allow us to monitor the amount of waste and look at savings from recycling waste instead of sending it to be incinerated. If successful, it could then be rolled out to other areas of the organisation.

Name: Audrey Murdoch
Job title: Podiatry manager at the Bishopbriggs Podiatry Clinic
Idea: To produce diabetic foot packs for patients to help them care for their feet and spot any problems before they become more serious. Some patients with diabetes lose sensation in their feet which means they don’t feel pain. If they don’t check their feet regularly, they can develop problems which could lead to serious infections or, in some cases, amputation.
Inspiration: I first got the idea after completing a travel scholarship in Australia. The podiatrists at the Royal Melbourne Hospital had included a mirror in the pack, but we’ve expanded it to include information, dressings and a foot file. It’s not just about checking feet but also looking after your feet and empowering people to do this for themselves.
Aims: The aim of the pack is to prevent diabetic patients developing foot ulcers and avoid the complications which can lead to gangrene and amputation. We hope the packs will educate patients about foot care.

It would be good to be seen to do something about the waste we generate
Susan Evans

Nominate your good ideas by visiting Ideas in Action on StaffNet
NHSGGC has been asked to run this programme and hope other health boards will be able to implement it. “Training staff to use self-help based approaches means that patients get help much quicker. They can be used at home at any time so they’re more convenient too. The materials, such as websites, booklets and DVDs, are very effective for people experiencing low mood, anxiety or depression. “People sometimes think that ‘helping yourself’ is second best to seeing a therapist, but when they try self-help, they are often surprised how helpful it is.”

The programme is funded by the Scottish Government and will run for three years supporting three health board areas in Scotland. All health boards have recently been asked to bid to be involved in the programme.

For information email: colin.mccormack@glasgow.gov.uk or tel: 0141 276 6715
Healthy lives creates winners

THE roll-out of the Healthy Working Lives initiative continues with staff at Caledonia, Dalian and Tara House taking part in the programme to achieve the bronze award by the end of the year before going on to work for silver and gold.

The initiative aims to help and encourage staff to maintain a healthier lifestyle. As Healthy Working Lives involves all of us, the questionnaire is an opportunity to say what you think and what you would like to see to improve your health at work and at home.

Linda de Caestecker, director of public health and chair of the Healthy Working Lives for corporate services, explained: “The questionnaires are an important part of the Healthy Working Lives initiative as through the responses we receive we will identify what areas are most important to staff.

“This will help focus how we can improve our healthy working lives together. I encourage everyone to fill it in to inform our planning of activities that you will find helpful.”

The questionnaire will be available to complete online or by paper copy. Your feedback is anonymous and will be analysed by an outside agency. The questionnaire should only take about 10 minutes to complete.

Staff who complete it can also enter a prize draw to win a luxury health spa voucher for two. And as an extra incentive to get your colleagues involved, the team with the highest percentage of participation will receive a mystery prize, so make sure everyone in your team gets involved.

Completed questionnaires can be returned to the box in the Library level 1 North in Dalian, to the boxes on the first and fifth floor of Tara House and to financial services/payroll (Kim Friel’s work station) at Caledonia House.

Push the buttons

OUR revamped StaffNet is set to launch in September. The new look aims to be cleaner with a more modern feel. The most popular areas now have more prominent space on the front page through a series of bright coloured “buttons”.

The buttons are one of the most noticeable changes and link directly to a variety of areas on StaffNet, including staff directory, conference and events, benefits and services and SocialNet.

Following feedback, we have also added a few new areas which we hope staff will find useful. These include:

Clinical Info
This section brings together a range of clinical information, including infection control and prescribing policies.

Your Health
A new section which will highlight a wide range of services and support available for staff including details of how to contact occupational health, employee counselling and stop smoking services. This section also contains details of staff benefits such as discounted gym memberships and the latest updates on Healthy Working Lives and the Staff Health Action Plan.

Systems and applications
This area hosts a range of applications, such as DATIX – a new system for logging incidents, SCI Store – a clinical information system to provide clinicians with secure access to patient information and Venue Search – a service which provides staff with information on internal and external training and conference venues throughout NHSGGC.

About NHSGGC
This section provides some of the key facts and figures about NHSGGC including our mission statement, staff numbers, budget and the population we serve.

WORK begins on health centre

WORK on the new £18m Renfrew Health and Social Work Centre is now under way following the official sod-cutting ceremony.

The new centre will provide modern facilities including GP services, dental services, physiotherapy, podiatry, speech and language therapy, community nursing and social work services.

Chair of Renfrewshire Community Health Partnership and Renfrewshire council leader Derek Mackay said: “This is a milestone in taking forward a joint health and social work facility in Renfrew.”

The centre, a joint development between NHSGGC and Renfrewshire Council, is expected to be completed by late 2009.

Focusing on men’s health

STAFF at wards three and four of Leverndale Hospital took part in an ambitious programme of events to mark men’s health week and carers’ week.

Men’s health week was marked with a poster competition and carers’ week with the creation of a fantastic “Tidal” mosaic depicting how life can be for first-time carers.

Ready to face the challenge

NEW director of nursing for the acute division, Rory Farrelly, has said he is thrilled with his appointment, adding: “The ongoing challenge for me is staying ahead of the game, striving for better results and going that extra mile for all service users to exceed their expectations consistently. “I hope to continue pushing both myself and all nurses within the acute division into new areas, new ventures and new experiences.”
Infection control

BEATING THE BUGS
what you need to know

Infections can be easily - and inadvertently - spread by patients, healthcare workers and visitors, but a few simple steps can help stop the bacteria in their tracks.

I T’S important that all staff and the public have a basic understanding of how to control the spread of infection.

Dr Syed Ahmed, consultant in public health, explained: “We all have friends and relatives who may need hospital treatment, so even if you don’t have to go into hospitals for work, you could end up going as a visitor.

“The general public also ask staff for information and advice as they assume you’re an expert just because you work for the NHS. Our staff can therefore play an important role in helping get across some of the key messages.”

So what are the basics? According to Sandra McNamee, consultant nurse in infection control, there are a few simple things which we can all do to help protect ourselves and others.

“The best way to keep safe and make sure you don’t inadvertently pass on infections is to wash your hands before and after you have any direct contact with a patient or the areas around them – including their furniture, bedding, equipment and clothing.

“You should also use the alcohol hand gel when you enter or leave a ward area.

“For patients with diarrhoea – a common symptom of C-diff infection – use liquid soap and water instead as alcohol gel doesn’t kill the C-diff bacteria.

“The golden rule is wash your hands with soap and water for C-diff – for everything else, use alcohol gel.

“These basic rules don’t just apply to clinical staff such as doctors and nurses; they also apply to other staff who regularly work in or visit wards such as porters, domestics, physiotherapists, administration staff and volunteers.

“In fact, although many of the 1200 cleanliness champions trained across the organisation are clinical staff such as ward managers, we are now starting to see more non-clinical staff take on this role, including several domestics who have recently completed their training.

“This helps get the message across that any member of staff can take a lead role in promoting infection control issues and help raise awareness amongst their colleagues, friends and family.”

Useful links

• NHSGGC infection control www.nhsggc.org.uk/infectioncontrol
• Health Protection Scotland www.hps.scot.nhs.uk/index.aspx
• Scottish Hand Hygiene Campaign www.washyourhandsofthem.com
• Centre for Disease Control www.cdc.gov

Top 10 tips

1. use alcohol gel when entering or leaving a ward area
2. wash your hands using liquid soap and water when caring for
3. or visiting patients with diarrhoea (a common symptom of C-diff)
4. don’t take food into hospital wards
5. don’t come to work if you’ve had diarrhoea
6. or vomiting within the last 48 hours
7. wear short sleeves (or roll your sleeves up) when undertaking any clinical procedures
8. take off wristwatches, ties and jewellery
9. before you examine a patient or carry out any clinical procedures
10. wear protective clothing such as an apron and gloves when in contact with a
11. patient with a known or suspected infection
12. wash your hands before and after every patient contact
13. limit the number of visitors to two
14. don’t wear false nails.

Test your knowledge

This article provides practical advice on how you can help stop the spread of infection. A website has also been created to give you the chance to find out more and put your knowledge to the test.

Visit the NHSGGC infection control website, (www.nhsggc.org.uk/infectioncontrol), click on the sidebar entitled Education and Training and request a log-in name and password.

You can use these to access the new Trainer Tracker website where you will find useful information and advice on a wide range of infection control issues. You can also complete a short online test at the end of each section.

When should I wash my hands?

Everyone should clean their hands when they enter and leave a ward. Staff should also wash their hands:

1. before touching a patient
2. before any procedures
3. if you touch blood or body fluids
4. when you leave a patient
5. after contact with a patient’s surroundings.

Washing your hands is a simple but effective way of stopping the spread of infection.
**MRSA factfile**

**What is MRSA?**
MRSA belongs to a family of bacteria which are commonly carried on the skin or in the nose of healthy people. Most carriers don’t go on to develop an infection or require any treatment. However, if the bacteria gets into the bloodstream or body tissues, it can cause an infection. This can happen when there is a break in the skin, such as a wound or drip site, or where a catheter or needle has been inserted. Unlike other similar kinds of bacteria, MRSA has developed a resistance to certain antibiotics.

**What are the symptoms?**
MRSA can cause different kinds of illness including skin infections, bone infections, pneumonia and severe, potentially life-threatening bloodstream infections. Symptoms vary depending on the illness, but can include red, swollen or tender skin, boils or abscesses, wounds that are slow to heal or become septic, fever, tiredness and headaches.

**How is it treated?**
MRSA infections can be treated with certain antibiotics; however, people who carry MRSA on their body, which is sometimes referred to as being colonised with MRSA, normally don’t have any symptoms or require treatment.

**How does MRSA spread?**
MRSA can be spread through close contact with an infected person. It is easily spread by direct skin contact, often on hands. MRSA is also spread on bedding, towels, clothing and equipment.

**How can I help prevent infection?**
By cleaning your hands when entering and leaving hospital premises using the alcohol gel available at ward entrances. Clinical staff should also use alcohol hand gel between patients and carefully consider the use of antibiotics in line with new NHS GG antibiotic prescribing policy. Patients can also reduce the risk of getting MRSA by always washing their hands after using the toilet and before meals and avoiding sharing soap or towels. Anyone who is instructed and always finish the course.

**How common is MRSA?**
Last year in Scotland there were 825 reported cases of MRSA bloodstream infections. Rates have fallen over the last few years.

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**C-DIFF factfile**

**What is C-DIFF?**
Clostridium difficile (C-diff) is a bacteria that can live in the bowel in small numbers without causing any problems. Infection usually only occurs in patients who have taken antibiotics as certain kinds can disturb the body’s balance, allowing the bacteria to multiply and cause an infection.

**What are the symptoms?**
Diarrhoea is the most common symptom, although stomach pains and fever can also occur. Most people make a full recovery, however, some older people can become ill with dehydration and, in a small number of cases, the infection can cause inflammation of the bowel which can be life-threatening.

**How is C-diff spread?**
C-diff is present in the diarrhoea of infected people. The germ can be found on toilet areas, clothing, sheets, furniture and equipment. It can be picked up by touching contaminated surfaces and then touching your mouth or eating. Visitors, healthcare workers and patients can also spread the infection by not washing their hands.

**How is it treated?**
Normally if you have C-diff you will stop being treated with any antibiotics you may have been prescribed after the symptoms persist and for two days afterwards, when you are still infectious. You must also stay off work while the symptoms persist and for two days afterwards, when you are still infectious. Avoid visiting a hospital if you have experienced recent symptoms of diarrhoea or vomiting. Staff and visitors should also avoid sitting on patient’s beds, eating or drinking or using patient toilets.

**Norovirus factfile**

**What is Norovirus?**
Norovirus is a virus that causes gastrointestinal enteritis (stomach bugs). In the past it has also been called winter vomiting disease, gastric flu and Norwalk-like virus. It is easily spread through contact with an infected person, contaminated food, water or surfaces. It can also be spread via the air.

**What are the symptoms?**
Symptoms include severe vomiting, diarrhoea and fever symptoms, which normally last about 48 hours. Most people make a full recovery within one to two days; however, some people (usually the very young or elderly) may become very dehydrated and require hospital treatment.

**How is it treated?**
Although the infection’s unpleasant, it’s rarely dangerous. There’s no specific treatment, but it is important to rest and drink plenty of water until the illness has run its course.

**How can I prevent infection?**
Clean your hands when entering and leaving hospital wards using the hand gel available at ward entrances. Clinical staff should also wash their hands using alcohol gel before and after each contact with an infected patient. You must also stay off work while the symptoms persist and for two days afterwards, when you are still infectious. Avoid visiting a hospital if you have experienced recent symptoms of diarrhoea or vomiting. Staff and visitors should also avoid sitting on patient’s beds, eating or drinking or using patient toilets.

**How common is norovirus?**
It is estimated that norovirus affected about 500,000 people across Scotland last year.
A NEW website has just been launched to put the spotlight on one of the key issues for the health service in the 21st century.

A NEW website has just been launched to put the spotlight on one of the key issues for the health service in the 21st century. The Equalities in Health website at www.equality.scot.nhs.uk brings to life the issues facing many service users which can, in turn, have an adverse affect on their health.

“Sometimes it’s difficult for people to get their heads around what is meant by ‘equalities in health’ as clearly everyone’s health status is different,” said Sue Laughlin, head of planning, inequalities and health improvement.

“What we are referring to is an entirely preventable cause of poor health, one that is the result of discrimination due to someone’s gender, social class, ethnic group, disability, age, faith or sexual orientation. Ignoring these issues limits how well the health service responds to patients, which can, in turn, influence the effectiveness of our care.”

Policy on stress in the workplace
The main aims of the policy are to:
- raise awareness of stress, its causes and associated factors
- educate staff in techniques for dealing with pressure and stress
- provide help for staff if they have problems associated with stress
- ensure guidance is provided for managers to undertake stress risk assessments
- adopt the Health and Safety Executive’s management standards on stress, to assist with the risk assessment process.

Policy on the management of violence and aggression
The main aims of the policy are to:
- provide guidance, information and training for staff and managers in dealing with violence and aggression
- provide guidance on minimising risk through a process of risk assessment
- provide and use physical security measures such as access control and CCTV when identified through the risk assessment process
- provide support for staff who may be involved in a violent incident
- ensure liaison with “partners” such as the Scottish Government, Violence Reduction Unit, Strathclyde Police and the Procurator Fiscal service in helping minimise risks to staff.

Policy on moving and handling
The main aims of the policy are to:
- eliminate manual handling operations which may cause a significant risk of injury
- promote the need for an effective ongoing risk assessment
- reduce the risk of moving and handling injuries by using appropriate equipment
- increase awareness of efficient moving and handling principles
- prevent the manual lifting of full/major portion of the body weight of patients/clients.

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“However, it’s not enough to simply do the minimum that’s required of us. We need to be genuinely committed to creating a health service where there is a culture of awareness and understanding of these issues and where staff have the knowledge and confidence to ensure fair treatment for all.”

Managed jointly by the corporate inequalities team and equality & diversity team, the site will be regularly updated and feedback and contributions are welcome.

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Getting the message across

HEALTH AWARENESS

A ONE-WOMAN play funded by NHSGGC is now heading to London following a successful run at the world-famous Edinburgh Fringe.

“Acceptance”, penned by Lisa Nicoll, is the story of “Scarlett”, a binge drinker, who has been using alcohol through school and university to feel confident and fit in.

Now 30 years old, she drinks every night of the week in her search of the perfect man, despite the toll on her health and self-respect.

It was performed initially through self-funding in February 2007, but after watching a TV news story about drinking in Scotland, Lisa contacted the then Scottish Executive to explore whether there was a market for the play.

She was put in touch with alcohol action team co-ordinator Stevie Lydon and arts co-ordinator Jackie Sands. Thanks to their enthusiasm, it was agreed to invest £5000 to develop the script and fund a 10-venue tour in Glasgow.

Stevie said: “It was clear that this was an innovative and imaginative piece of work and it offered us the opportunity of highlighting an important lifestyle issue.

“From two very different perspectives, it was clear that Acceptance would appeal to a wide audience.”

Lisa, who is now working on a radio adaptation of the play and a film, said: “This is the story of a girl who most people know, who many men have dated, and who we can all relate to in today’s society of trying to fit in.

“I brought true stories and experiences together to create the character of Scarlett.”

Diaries written by Lisa as “Scarlett” can also be read at www.alcoholdebate.com

Now Lisa is also looking at the possibility of writing blogs for StaffNet as well as for internal use by Strathclyde Police and Glasgow City Council.

Breaking down the language barriers

ELEVEN STAFF at the central decontamination unit have completed a pilot course to help them improve and progress their English. About 10 per cent of staff employed in the unit speak English as a second language.

Training manager Ken Chapman explained: “We arranged for the Workers’ Educational Association and the Glasgow Educational Association and the Glasgow Educational Association to offer courses in a style that suits those who use English as a second language.

“We found that many of the staff wanted to improve their English skills in general and highlighted grammar, accuracy, pronunciation and writing as the main areas to concentrate on.

“There was also a real desire among the non-English speaking staff to improve their ability to understand the local accent better.”

The staff spent 12 weeks completing an ESOL course in two-hour blocks. Staff were divided into three groups according to shift patterns.

Senior development officer for literacy and health, Catriona Carson, is responsible for creating a strategic approach to literacy and numeracy services across NHSGGC.

She said: “ESOL courses can also be developed for those who don’t have strong literacy skills in their own language. We would encourage more staff to find out about the courses and take part.

“As KSF outlines and PDPs become more widespread across the organisation, we hope more staff will choose ESOL courses as part of their personal development.

“Staff thinking about SVQs sometimes panic because although they have been working at a job for a long time, when you introduce the idea of working towards a qualification it’s somehow different, but ESOL can be a good introduction towards working for a qualification.

“We try to take people through the course, offer support and build confidence so that they can work for a promotion, improve their prospects and feel more valued by the organisation.”

Catriona also explained that ESOL offers courses in a style that suits those taking part so instead of one big class at night, they try to run them in the workplace around shift patterns.

“The hardest part is often getting people together and we do try to get about eight to 14 for any course.”

As well as ESOL, a range of other courses are available such as Skills for Health, which can be offered to those who wish to improve their English for writing and presentations.

Glowing report from radiation inspectors!

STAFF from across the whole acute division involved in the recent Health and Safety Executive specialist radiation inspection have been praised for their efforts to make the visit a success.

Jim Crombie, director of diagnostics, said: “The success of the visit is due in no small part to the hard work and dedication of our staff. Aileen MacLennan, general manager for imaging, diagnostics and clinical physics, led this work alongside the clinical physics team who provided expertise and leadership across the division.

“They and other staff contributed significant time to deliver the required information for the inspection teams.”

The Health and Safety Executive specialist radiation inspectors spent three days visiting several Glasgow hospitals.

This was their first visit in 15 years and was to assess our compliance with the Ionising Radiation Regulations 1999.

No breaches were identified and the inspectors indicated they were generally satisfied with the level of radiation safety and the knowledge of staff.

A few minor issues were highlighted and an action plan has been compiled and work initiated to deal with these.

A further one-day inspection was carried out to inspect our transport arrangements. Again, only minor deficiencies were highlighted and actions have been initiated to address the issues.”
In your own time

THERE’S ONLY ONE FRANK DUNN!

Mild-mannered cardiology consultant leads football fans and players alike as director of Clyde FC

Stobhill cardiology consultant Frank Dunn comes from a long line of football enthusiasts. His family has been on the board of Clyde Football Club for the past century and a few years ago Frank himself was appointed director of the board.

With more than 20 years’ experience as medical adviser to the club, Frank has dealt with most of the trivial injuries that you would expect at football matches such as broken noses, sprained ankles and Bovril burns – including one on someone’s foot! – along with some more serious injuries and the occasional heart attack.

Frank said: “There are probably more minor injuries than people expect at football matches. But fortunately, the more serious incidents don’t happen very often.”

He has medical responsibility for the stadium, ensuring the health and safety of the fans and players. This includes ensuring there is appropriate first aid, paramedic and ambulance cover at all of Clyde’s home games.

As director of the club, Frank’s other responsibilities include overseeing the overall running of the club, as well as arranging sponsorship. “As a small club, these are major aspects needed to ensure the club has a place in Scottish football and can continue to grow,” he explained.

During his involvement with Clyde FC, Frank Dunn, above, has dealt with everything from Bovril burns to arranging sponsorship.

Frank admits to spending parts of his weekends and the occasional evening working for the club.

“My family have been involved with Clyde Football Club for 100 years now, so I’ve had close contact with the club all my life. I am a keen sports fan and don’t feel like I am giving up spare time because I enjoy my involvement with the club so much.”

Frank, who was recently appointed vice president (medical) of the Royal College of Physicians and Surgeons of Glasgow, has already found a way of involving the College in football. By representing the College in a health initiative with Rangers and Celtic football clubs, he is tasked with finding ways of encouraging fans to take on a healthier lifestyle.

A 10-week trial has already taken place, with 20 fans from both clubs taking part. The programme, which is led by consultant colleague Dr Adrian Brady from Glasgow Royal Infirmary, involves giving general health information on topics such as smoking, cancer and cholesterol. It also encourages fans to use the gym and exercise.

Frank explained: “Those who take part in the programme get to use the gym at each home ground under the supervision of Dr Brady and other medical staff.

“In addition, coaching staff from the teams and previous players come along to offer advice and training tips.

“So far, the course has proved to decrease cholesterol in fans and they’ve lost weight.”

The programme has been so successful that the Scottish Government has now agreed to fund a further three groups of fans to take part.

New dermatology unit is given the thumbs up

**NEW FACILITY**

DERMATOLOGY staff at the Royal Alexandra Hospital are delighted that the new purpose-built dermatology unit is now complete and has started to treat its first patients.

The new unit, which has benefited from more than £500,000 of investment, will not only benefit hundreds of patients but also provide staff with a large, light and bright place to work.

Lead nurse for dermatology Suzanne Harkness was initially sceptical of the changes.

However, having seen the new unit finished, she can see the difference it will make for both staff and patients.

Suzanne explained: “More than £500,000 has been spent creating an area specifically designed with input from staff and patients.

“The staff have all been pleasantly surprised at how modern and bright the new unit is and everyone can see the benefits for both the staff who work here and the patients who attend.”

“Dermatology is one of those departments where patients can be attending for years and therefore build up strong relationships with our staff.

“Now the unit is complete I have no doubt those strong relationships will continue to go from strength to strength,” added Suzanne.
Win a grand in your hand in our great competition!

COMPETITION

THANKS to our generous sponsors at the Appeals Society, Staff Newsletter is able to offer our readers the opportunity to win £1000 from now until Christmas.

The Appeals Society, as the charitable wing of the Staff Lottery, also ensures staff are winners with its own monthly draw and two mega draws of up to £15,000 in March and September.

Money raised goes back into the staff lottery for prizes and the rest goes to the Appeals Society to distribute among worthy causes that have applied for funding.

These have included the Eurospital Football Tournament, a scheme to buy games and equipment for younger people in our hospitals and an initiative to create gardens in care of the elderly settings.

The Appeals Society has also commissioned artists to brighten up long hospital corridors and provided money to restore the atrium windows in the GRI’s centre block. In total, the Society gives away £70,000 to £80,000 every six months in charitable donations.

Chairman of the Appeals Society, Liam Gallagher, said: "We are delighted to have joined forces with the Staff Newsletter to give staff even more opportunities to win money as well as highlight some of the work we do."

How do you play the staff lottery? For a small fee you can buy up to 10 numbers and join in with the chance to win every month, visit: www.nhstaffbenefits.co.uk for further information

To join, or increase your membership, contact Isobel Huk, Staff Lottery, Room 420 Walton Annexe at GRI, tel: 0141 211 5850 or email: isobel.huk@ggc.scot.nhs.uk

How to enter

For your chance to win £1000, answer the following:

Q: On what date is the world’s biggest coffee morning?

Email your entry to staffnewsletter@ggc.scot.nhs.uk (you’ll find the answer in SN) by Friday 26 September.

The competition is open to all employees of NHSGGC. Winners must be available for publicity and their details will be printed in future issues of SN.

STOP the waste campaign

A NEW campaign urging people in Greater Glasgow and Clyde to help save the NHS approximately £2 million every month by not wasting medicines received widespread coverage in the media including the Evening Times, Daily Mail, Daily Record, Real Radio and Radio Clyde, as well as the BBC News website.

Unused medicines cost NHS Greater Glasgow and Clyde more than £24m a year and we want patients to help reduce this cost. For example, asking patients to check what they have at home before reordering and to let their pharmacist know if they have stopped taking any medicines on their repeat prescription list.

Another practical measure is to make sure any medicines are taken before they expire and have to be discarded.

Megan’s story

THREE-YEAR-OLD Megan Finn, who is recovering from cancer, made headlines for the Royal Hospital for Sick Children as she finished six months of chemotherapy in the Schiehallion ward.

Megan was diagnosed with Wilms’ tumour, a rare form of kidney cancer that affects 70 children in the UK each year. Surgeons removed the tumour and one of Megan’s kidneys, then began chemotherapy.

Her mum, Lesley, said: “We were just relieved when the doctors told us it was treatable.”

Now all Megan wants to complete her recovery is her long blonde curls so she can wear her hair in bunches again.

Meanwhile, Megan’s family and friends have been raising money for the Schiehallion ward by climbing the Munro the ward is named after and organising a race night at their local bowling club.

CAMPAIGN

You can download Suzie’s interview by visiting www.nhsfamilysupport.org.uk and selecting the Breastfeeding Strategy.

Suzie McGuire supported a recent breastfeeding campaign and Gina McKie worked with us during the 60th anniversary celebrations.

Mum-of-two Suzie gave an exclusive webcast on our website discussing her choice to breastfeed.

Increasing breastfeeding rates is one of the key priorities of the Infant Feeding Strategy.

And, to help mark 60 years of the NHS, we produced 10,000 eco-friendly shopping bags which were launched by Gina, below, and Dr David Stoddart, consultant in emergency medicine based at the RAH.

Bearing the slogan “Bag Better Health”, the bags are being sold at WRVS shops in NHS Greater Glasgow and Clyde, for just £1.

All proceeds go towards charitable funds at local hospitals.

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Co-ordinated approach to improving your health

A NEW co-ordinator has been appointed to drive forward plans to improve the health of staff across the organisation. Nicola Barnstaple, pictured, who previously worked for Breast Cancer Care, will be responsible for co-ordinating a range of initiatives to improve the health and wellbeing of staff.

Director of public health Dr Linda de Caestecker said: “Nicola’s appointment is great news as she will play a key role in implementing our new Staff Health Action Plan. “This ambitious plan brings together existing schemes, such as Healthy Working Lives, with several new initiatives designed to tackle obesity, alcohol and mental health problems over the next three years. “While the new Staff Health Action Plan will initially be taken forward in partnership with Glasgow City Council, discussions are also under way to extend it to other council partners and Strathclyde Police.”

A new “Your Health” section is being created on StaffNet to ensure staff are kept updated as plans progress and work is also under way to create a new online lifestyle check for staff.

Lisa Buck, health improvement and inequalities manager for NHSGGC’s Health At Work team, believes these developments make it much easier for staff to access the services and support currently available.

She said: “We’re good at marketing services to patients and the general public, but not that great when it comes to promoting the services available for our own staff. “Although some information is currently available on StaffNet, it’s not easy to find and it’s far from comprehensive. The new Your Health section will bring this information together in a single place which staff can then access via the homepage.”

Staff Newsletter will also carry regular updates on the new Staff Health Action Plan and there are plans to produce a special Staff Health edition of the newsletter early next year.

It’s a mini-adventure!

A GREAT mini-adventure was had by all those who took part in the first G66 Live Adventure Challenge.

The event was planned by Stobhill shift maintenance plumber Robert Sanderson and included 17 teams – nine youth teams and eight adult.

Among the challenges they faced were climbing through a maze of ropes and bungee cord, moving from foot to bike to abseiling, back to biking, onto canoeing and finishing with an obstacle course.

Robert said: “It was an excellent day. I’d like to thank all the marshals who worked very hard, Danny Mclauchlan and his team from St Andrew’s Ambulance for their help, and all the sponsors – Salomon, Buff, Clif Bars, Jelly Belly Bean company, and The Kirkintilloch Initiative, East Dunbartonshire Council, North Lanarkshire Council and the G66+ Live Festival – for all their support.”