



‘Simply superb’ response to fire

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Out and about with the chairman

BY JOHN BROWN, CHAIRMAN

ALTHOUGH I've been kept busy with the recruitment of non-executive board members, I've continued with my visits to front line staff. While I now have a much better understanding of who we are and what we do, I still want to meet as many staff as possible and give them an opportunity to share their views on what it's like to work in NHSGGC.

This month I visited the Renal Day Unit at Glasgow Royal Infirmary and the Renal Out Patient Clinic at the New Stobhill Hospital. I was very impressed with the service that our staff deliver to renal patients, including giving them the opportunity to receive kidney dialysis in the evening. This helps many patients receive treatment at a time that doesn't interfere with their employment and is a great example of patient-centred care.

My visit to the Centre for Integrative Care gave me further insight into some of the innovative approaches to patient-centred care that Dr Mardon and the staff there provide to patients.

I also visited the Royal Hospital for Children (RHC) where I met with



Chairman John Brown with staff from the Renal Day Unit, GRI

its Charities Forum. This is a group that provides welcome additional support to the RHC and has helped make it a centre of excellence for the treatment of children.

Following that meeting, I was invited to visit the new Ronald McDonald House on the Queen Elizabeth University Hospital (QEUIH) campus. This facility provides the families of patients with much needed support at a very difficult time. We are fortunate to have such a great resource so close to the RHC.

Our response to unscheduled care demand is something that the Board monitors closely and I spent time looking at how our Emergency Departments and Immediate Assessment Units interact with NHS24, the GP Out-of-Hours (OOH) Service and the Scottish Ambulance Service (SAS).

In addition to visiting the QEUIH's Emergency Department, I met with the GP OOH Service clinical director and the chair of SAS. I then visited the NHS24 Call Centre at Cardonald

to see how that service impacts on the flow of patients to our hospitals. I'm confident that the more we do to understand the end-to-end flow of patients with unscheduled care requirements, the easier it will become to respond appropriately. In the meantime, I appreciate the hard work of all the staff involved in delivering the best service we can in the current situation.

>> If you would like a visit from the chairman, email staff.comms@ggc.scot.nhs.uk

OUT OF HOURS

Proposal to move GP OOH Service from Drumchapel to Gartnavel

An information and awareness engagement is currently underway to hear views on the proposed move of the GP Out of Hours (OOH) Service from Drumchapel Hospital to Gartnavel General Hospital (GGH).

These two centres currently provide GP OOH Services for the population of North West Glasgow and the neighbouring areas of East Dunbartonshire and West Dunbartonshire.

However, the transfer of Older People's services from Drumchapel Hospital later this year will see the shift of all services from the main hospital building which means the GP OOH Service will need to move.

OOH Services in West Glasgow are also under pressure to provide

sufficient GPs to deliver a service over two centres.

Bringing the two existing GP Out of Hours Services together onto the Gartnavel site will address this plus provide better access to more health services for those attending at Gartnavel.

The new service would be staffed by GPs, nurse practitioners and would be supported by home visiting GPs.

Relocating the service from Drumchapel Hospital to GGH would also allow for better access to nearby on-site support for patients who become unwell, including an on-site Medical Emergency Team, who are able to offer immediate support in life threatening situations.



The engagement runs until Monday 13 June 2016. For more information, visit www.nhsggc.org.uk

>> If you have any questions or would like to comment on the proposal, email PatientExperience@ggc.scot.nhs.uk

Andrew Bradley, Pamela McQuarrie, and Louise McGill



WARD EMERGENCY

Calm, professional response to fire praised

THE RESPONSE of staff to a fire on a Queen Elizabeth University Hospital (QEUIH) ward has been described as "superb".

Staff on ward 11D at the QEUIH knew their drill and reacted promptly and efficiently when a fire broke out in the early hours of 4 May. They knew exactly what to do and they did it perfectly, reflecting well on their knowledge and the importance of the LearnPro Fire Drill.

A total of 17 patients had to be evacuated to a place of safety before fire fighters brought the fire under control.

Praise for the Queen Elizabeth staff came from Clyde chief nurse Joyce Brown who was the on-call senior manager when the incident happened in the early hours of the morning.

Joyce said: "Staff really pulled together, with colleagues coming from other areas to offer support."

"When I arrived, patients had been moved from their rooms and were being well cared for in corridors."

"Arrangements were then made for the patients to be transferred to other beds throughout the hospital and family members were contacted to reassure them and let them know where their loved ones were."

"Patients were really appreciative of the efforts of staff who did exactly the right thing while remaining calm, in what was a really difficult situation. They were simply superb."

Staff nurse Louise McGill (pictured) was one of the staff on the ward who responded calmly and reassured patients during the incident, while lead nurse Pamela McQuarrie (also pictured) received an urgent call around 6.30am that morning to come in and help colleagues manage the challenging situation.

Visiting the staff involved after the fire, chairman John Brown said: "The staff dealt very well with a fire in the early hours of the morning. To the credit of everyone involved, the disruption to the rest of the hospital was kept to a minimum. It is reassuring

to know that our emergency procedures are indeed effective when something like this happens on a ward."

The Scottish Fire and Rescue Service has also praised the "excellent" staff handling of the incident, describing it as a textbook response and evacuation.

The fire at QEUIH came within days of a major blaze at a derelict building on the Stobhill campus.

The large fire caused massive smoke plumes which affected motorway traffic and took many hours to extinguish.

Both incidents provide a timely reminder of the need for all staff to complete their mandatory annual fire training.

>> To complete the online mandatory fire training, visit: <https://nhs.learnpro.uk> If you spot a fire in derelict or empty buildings on NHS sites, first dial 999 then call the contact centre [switchboard] giving the location and a full description of the fire.

AWARENESS CAMPAIGN

Second HIV anti-stigma survey launched

THE second staff HIV anti-stigma survey has been launched and the closing date for responses is 17 June.

It is a follow-up to the 2013 survey aimed at finding out what staff knew about HIV, their attitudes towards those living with the condition, awareness of discrimination, and staff training needs.

The survey is part of the HIV Anti-Stigma Awareness Campaign which has included

roadshows, printed materials and education sessions.

To take part in the survey, visit: <https://www.surveymonkey.co.uk/r/nhsggcantiHIVstigma>

Paper copies are available from Jo Zinger, health improvement lead, on 0141 211 0326.

Meanwhile, the next training sessions are taking place on Monday 20 June in seminar room 1, ground floor, labs building, Queen Elizabeth University Hospital.

Staff are encouraged to pop along

at any of the following times: 09:30-10:30am; 10:45-11:45am; 12:00-13:00pm; 13:30-4:30pm; and 14:45-15:45pm.

Staff can approach managers for time off for this training in the same way as requesting attendance at any other PDP sessions, and managers are encouraged to accommodate these requests.

>> Anyone who would like to organise an alternative date for their team or colleagues should contact Jacqui

McCreadie, tel: 0141 211 8634 or email: GGUHB.bbvtrainingteam@nhs.net



Front cover image

Pictured back row from left: James Shaw; Moira Reid; Pamela McQuarrie; Carol Dow; and Andrew Bradley. Front row from left: Louise McGill; Michelle Murphy; and Valerie Smith

International Nurses Day – how we celebrated

12 May was no ordinary day for thousands of our nurses – it was a day to mark International Nurses Day with celebration and pride!

Nurse Director **Margaret McGuire** made a short video, the Board broadcast details of events on Twitter, many of our staff wore specially commissioned “happy international nurses day” sticker badges, messages were broadcast on plasma screens

throughout hospitals and community settings... and there were even period nurse uniforms from a long-gone era and a birthday cake on display.

Here we highlight what the day meant to some of our most senior nursing colleagues and also put the spotlight on a “day in the life” of one of our staff – midwife **Avril Marshall**.



Margaret McGuire, nurse director

MARGARET McGuire, nurse director, said: “It is a day to celebrate what it is to be a nurse and the contribution nurses make to patients and carers and everyone whose lives they touch. As nurse director I am really proud of all of our nurses.”

Fiona McCluskey, assistant chief nurse, said: “This day allows us to demonstrate what a difference nurses make, putting patients first at the centre of care in everything we do.”

John Stuart, chief nurse north Glasgow sector, said: “It’s a tribute to all nurses working in hospitals,

clinics and in the community who dedicate their lives to the profession and care of patients.”

Margaret Connolly, practice development lead nurse, said: “I think it’s important for the profession to raise the profile of the nurses of today and of tomorrow. The most important thing is for us all is to always have the patient at the centre of everything we do.”

>> To see video clips of comments and events, visit our YouTube channel: www.nhsggc.org.uk/YouTube



Margaret Connolly, practice development lead nurse



Avril Marshall, staff midwife

Midwife Avril takes us through her day

A day in the working life of a midwife is both challenging and rewarding... it is also often highly unpredictable.

And while it is almost impossible to outline “a normal day”, we put a spotlight on a more typical day in the life of staff midwife Avril Marshall who works in ward 50 of the Queen Elizabeth University Hospital.

Avril’s day begins at 7.30am in the 16-bed postnatal ward when she attends the staff handover.

On occasion she’ll stand-in for the senior charge midwife at the safety brief or “huddle”, and feedback to ward staff any potential issues which may impact on the unit.

Then it’s time to go and meet the mums and babies she will be caring for. Avril draws up personal care plans, gives advice to the mums and has to deal with any questions they might have.

Afterwards, she will carry out newborn and postnatal examinations, advise on baby care and give information about community midwife visits.

During her shift Avril will both admit and discharge patients, and in some cases, discharge a mum and her baby just six hours after birth, if all is well.

Towards the end of her shift, 7.45pm, Avril will be checking if there are any other women who are eligible to go home, and checking that the mothers and babies in her care are being given the appropriate help, support and advice that they need.

Finally, she prepares the staff handover for the night-shift midwives.

Summing up her day, Avril says that the workload in midwifery “is unpredictable and varied,” but adds: “Seeing women grow in confidence as the day goes on and any worries that they had at the beginning of the shift now alleviated is very rewarding.”

“A highlight for me is seeing women I have cared for in the past come back with another addition to their family!”



(l-r) Andrew Robertson (former Chair); John McCann; Carole Meakin; John Goldie; and Ross Cameron (Radisson Blu Hotel)

Time running out for entry to Chairman’s Awards

THE CLOSING date for the 2016 Chairman’s Awards entries is 31 July.

If you haven’t already, you should think about identifying a project, person or team you think deserves to be recognised and put together your nomination now.

Our awards recognise some of the best examples of service innovation, patient care, clinical and staff dedication.

They aim to capture the spirit of

our Facing The Future Together (FTFT) programme with seven categories in total: Clinical Practice; Improving Health; International Service; Nursing; Patient Centred Care; Patient Ambassador/Volunteer; and Using Resources Better.

Showcasing what is best about the NHS, celebrating our successes and sharing best practice are central to developing patient confidence in our services and staff professional pride.

Carole Meakin was part of last year’s winning team, Recovery Housing Project, in the Using Resources Better category. She said: “It was fantastic to have our work recognised in the Chairman’s Awards last year.

“It gave a boost to the whole team to know that the judging panel recognise the hard work involved in pulling a project like the Recovery Housing Project together, particularly as we need to engage

with a hard-to-reach, disadvantaged group of people.”

Once again it is planned that the winners will be presented with their awards at a glittering Celebrating Success event in November.

>> Full details on how to enter are available on StaffNet > Corporate Services > Communications > Chairman’s Award or visit, www.nhsggc.org.uk/chairmansawards

POLICY REVIEW

Scots cervical screening programme is changing

SCOTLAND will see changes in its cervical screening programme from Monday 6 June this year, bringing Scottish policy in line with practice elsewhere in the UK.

- The key changes are:
- The screening age will increase from 20 to 25 years – so women between 20 and 24 will no longer be screened, unless they have already been invited for screening under the age of 25 before the 6 June
 - Women will be screened until 64 years (currently 60 years)
 - The frequency will continue to be every three years from ages 25 to 49, but will change to be every five years for women from age 50 to 64
 - Some women on follow-up will be invited over the age of 65. This will be where a woman’s last test was non-routine. Women who have had changes identified during screening will be invited up to the age of 70 years (currently 68 years).
- Carol Colquhoun, national co-ordinator screening programmes at National Services Division, said:

“Changes have been decided based on a review of evidence about the effectiveness and benefits of screening women across age ranges.

“Data shows that screening women below the age of 25 has little or no impact on rates of invasive cervical cancer.

“For women over 50, five-yearly screening offers adequate protection and women up to the age of 64 can benefit from cervical screening.

“Women will continue to be invited for screening by receiving a letter and leaflet automatically sent from the Scottish Cervical Call Recall System (SCCRS).

“There will be cases when a woman aged between 20-24 years is invited on or after 6 June 2016 because she has previously been invited as part of the programme before the changes were implemented.

“Health professionals should refer to the SCCRS before a smear test is taken to ensure the woman is eligible.

“Tests taken from women not eligible for screening will not be processed by the laboratory.”



Coming to a small screen near you

Some of you may have noticed filming taking place recently on a number of our sites.

It has been carried out by Pukka Films, which has been commissioned by us to produce three films for internal and external use to celebrate the improvements in patient centred care which have been made as a result of patient feedback.

The documentary-style films will feature interviews with clinicians, senior managers, staff, volunteers, carers and patients, plus interviews with the director of nursing and our chairman.

Look out for more details about the content of the films in future issues of SN.

You're helping us make it A Fairer NHSGGC



EQUALITY issues affect every one of us – both personally and in how we deliver all of our hospital and community services.

'A Fairer NHSGGC 2016-20' – which reports on how we're meeting the requirements of equality legislation – has now been published.

This is our third 'Fairer NHSGGC' report. Since the first report was published in 2009 we have taken huge steps forward in meeting the needs of people from equality groups who rely on and use our services.

We have the largest in-house interpreting service in the UK which provides communication support for 450 patients a day.

In the last year alone, 13,597 NHSGGC staff received training on aspects of inequality – nearly a third of our workforce.

- We have engaged with hundreds of people from equality groups to understand better what action we should be taking to improve access to our services.
- We have established a new Staff Disability Forum which is raising awareness of how best to support disabled members of staff.
- We have helped access £37 million for patients through referral to money advice services and assistance with debt worries.
- We have carried out 360 Equality Impact Assessments to ensure that we are planning services to meet the needs of all of our patients.

The report highlights what we want to achieve over the coming years and the views of colleagues have been valuable in helping shape these priorities.

Jackie Erdman (pictured right), head of inequalities, said: "We had a great response to our 'Fairer

NHSGGC' staff survey at the beginning of the year and these views, along with those of our patients, helped us develop our actions for the coming years.

"It's clear that most NHS staff recognise the link between inequality and health and want us to do more to tackle discrimination."

Going forward our priorities include:

- Providing communication support for British Sign Language users at all times
- Improving access to hospital services for our vulnerable populations, such as those experiencing poverty, disabled people and migrants, refugees and asylum seekers
- Ensuring managers know how to support their disabled staff by making reasonable adjustments
- Challenging discrimination towards lesbian, gay, bisexual and transgender patients and staff.

"We want to do more than just meet our legal requirements for equalities in NHSGGC," said Jackie. "Simple acts like asking what help a patient might need or speaking up for a colleague who's being discriminated against can make all the difference – and every one of us is in a position to do that."

A staff leaflet is currently being distributed which summarises the report and includes information on how we are all affected by equality law, what's happening in NHSGGC and what you've been telling us.

>> To read the full 'A Fairer NHSGGC 2016-20' documents, or to find out more information about any of the above, visit: www.equality.scot.nhs.uk or contact the Corporate Inequalities Team, tel: 0141 201 4560.



SIGN LANGUAGE

New staff resource

A new DVD has been produced to show staff how and when to book a British Sign Language (BSL) interpreter for patients.

The DVD, now available on LearnPro, explains why it is so essential to provide interpreting support for our deaf patients and looks at additional methods of communication.

Director of nursing Margaret McGuire (above) is hoping the DVD will help staff to understand the importance of using an interpreter.

"It's just not possible to undertake an assessment, give instructions or communicate complex information to a deaf patient without a British Sign Language interpreter. Any other method leaves too many possibilities for misunderstanding and gaps in information," she said.

There are more than 4,000 Deaf people using BSL in the NHS Greater Glasgow and Clyde area. By law, we must provide an interpreter for our deaf patients, both at health appointments and when they are in hospital.

"Everyone involved in organising and delivering patient services should be aware of the need to book a BSL interpreter," said Margaret.

"It is an essential part of delivering safe and effective patient care and I would urge all staff to take advantage of this LearnPro resource."

>> For more information, visit <https://nhs.learnprouk.com>

Jim hangs up his white coat

ON 29 June 1964 16-year-old Jim Irvine walked into the labs at Stobhill Hospital for his first day at work. Fifty one years and 11 months later he is walking out of the labs at GRI to enjoy retirement.

Jim, who walked straight out of school on the Friday and started as a junior technician on the Monday remembers his first day as if it were yesterday. "The worst thing was the smell. It was vile!" he recalled. It turns out the smell was coming from a particular chemical used in the lab.

Jim has seen many changes over the years, mainly with the evolution of technology. He explained: "When I started we were very hands on, it was like a big chemistry set, with test tubes and chemicals everywhere. We made up reagents, had to spin down serum and had clocks everywhere as all the tests had different testing times.

"Nowadays with all the technology and machines in the labs it's less hands-on but of course with that comes a better quality of results, faster turnaround and a multitude



Jim pictured next to one of the chemistry analysers used in the labs

of tests being carried out from the smallest of sample."

Jim spent 47 years of his career at Stobhill where he quickly trained on the job to become laboratory technical manager before the migration of services in 2011 to GRI.

He has had a long, enjoyable career with one highlight at Stobhill being to set up from scratch, Radioimmunoassay, for thyroid testing.

However, Jim is now quite happy to hang up his white coat and is

looking forward to retirement. He has plenty of interests to keep him busy and will enjoy spending time with his family including his new grandson and will try and conquer some of the 14 states in America he hasn't yet visited.

Tell Tom your get-fit ideas

OUR NEW active staff co-ordinator Tom Donaldson is on a mission to make it easier for staff to become more active.

Tom is keen to hear from staff about what physical activities they are interested in and this feedback will influence a future programme he will draw up of what's on offer across all sites and at what times.

He said: "If staff have questions or ideas for local classes then please get in touch.

"There is certainly capacity to increase the number of activities we can offer, and the classes are free."

Yoga, jogging, walking, pilates and metafit are just some of the classes on offer at our sites.

Tom is also looking to increase the number of activators, staff who are passionate about physical activity and keen to lead groups and classes.

So far about 20 are in place and information about their role and how to apply to become an activator will be available soon on the active staff website.

Tom added: "We know that physical activity is massively beneficial to physical health, by helping to maintain a healthy weight and reduce risk of long-term conditions.

"Being active also benefits mental health as well, plus there is the social component, because the classes and challenges are things staff can do with colleagues."

>> For more information about how to register for active staff groups and classes throughout NHSGGC, visit: www.nhsggc.org.uk/activestaff or email: Thomas.Donaldson@ggc.scot.nhs.uk or tel: 0141 201 4489



active staff

NATIONAL GAMES

Annual football tournament is a success



180 staff from all over NHS GGC participated in the seventh annual Healthy Working Lives 7-a-sides football tournament which took place on 22 May.

In a highly competitive tournament JB Russell House, Cardiac North, Gartnavel Porters and Cowlairs all made it through the sections stage to reach the semi-finals, both of which were decided by penalties.

In an action-packed final between JB Russell House and Cowlairs the former emerged victorious with a 2-0 victory.

The battle for 3rd and 4th place was competitive with first timers Cardiac North edging out previous winners Gartnavel Porters 3-1.

Congratulations to JB Russell House for their success this year and on becoming the first team to win the trophy on three occasions.

Special thanks to Kim Friel, Fraser Holms and Angela Sutherland for their help which made the tournament a success.

Getting on your bike is now even easier

NEW BIKE stations are now operational at the Queen Elizabeth University and Gartnavel General Hospitals.

They are being operated by NextBike, a Germany company that develops and operates public bike-sharing stations, and so far

about 120 staff have annual subscriptions.

Renting the bikes is simple and the operating costs are financed by rental fees and the sale of advertising space on the cycles.

To mark the launch of the new stations, we have a limited number

of vouchers available to staff providing the first 30 minutes of every ride for free. Look out for this offer coming soon on StaffNet.

>> For more information about the scheme, visit: www.nextbike.co.uk/en/glasgow



Some bikes up for rent at Gartnavel

Walk across America

IT'S that time of year again, when thousands of us get out our pedometers and pound the streets in the hope of victory.

The annual 'Walking Challenge' is under way and once again NHS teams are pitting themselves against their local authority colleagues to see who walks the farthest.

This year the target is to walk a 957-mile route across America. In total 5,922 feet are 'virtually' marching their way across the United States from Eureka in the north to San Diego in the far south via Los Angeles and San Francisco.

And with 4,420 feet belonging to NHS GGC staff, we have high hopes of walking away with the title this year!

WIN a Nikon Coolpix camera!

CAPTURE your most precious memories with this fantastic Nikon Coolpix P900 digital camera! The 16-megapixel COOLPIX P900's incredible 83x optical zoom lets you capture details not visible to the naked eye. The lens ranges from a 35mm-equivalent 24mm to 2000mm zoom range. No, that is not a typographical error. It is a 2000mm lens!

To be in with a chance of winning simply, email your

answer, along with your name and work location, to: competitions@ggc.scot.nhs.uk or send to: Corporate Communications, JB Russell House, Gartnavel Campus, 1055 Great Western Road, Glasgow G12 0XH.

Question: How many NHS GGC staff have received inequality training?

>> T&C: The competition is open to all NHS GGC

employees. Only one entry per person. Winners must be available for a photograph, which may be printed with their details in future issues of SN. The closing date for entries is 30 June 2016.



Get your entry in now for this year's Chairman's Awards. Visit: www.nhsggc.org.uk/chairmansawards