



Staff Newsletter **September 2018**



Don't let flu get you

Become a peer immuniser and help protect colleagues – and patients – from the virus

Full story on **PAGE 3**

Speak Up! if you're offered paracetamol on prescription

Have you received medication on prescription for a minor condition that you would be happy to buy yourself from a local pharmacy or supermarket?

The costs to the NHS for many of the items used to treat minor conditions are often higher than the cost of buying them over the counter.

For example, a pack of 12 anti-sickness tablets can be purchased for £2.18 from a pharmacy, whereas the cost to the NHS is much higher when you include the GP consultation, pharmacist time and other administration costs.

As part of our campaign to tackle medicines waste, we're encouraging staff

to think about this and go directly to your pharmacy or supermarket for over-the-counter medicines instead of getting them on prescription for minor conditions.

Audrey Thompson, lead pharmacist prescribing services, said: "Medicines waste costs the NHS in Scotland £20 million every year.

"We have launched our Speak Up! campaign to raise awareness of medicines waste and what we can all do about it in our homes and in our professional lives.

"If you have a short-term illness that can be cured by self-care and drugs available at the pharmacy or supermarket, it is

Did you know?
It costs NHSScotland
£10 million a year to
supply paracetamol
on prescription

quicker and easier to buy small amounts of these usually inexpensive medicines. Please help us by not asking for prescriptions to treat these short-term self-limiting conditions."

A wide range of information is available on the subjects of health promotion and the management of minor self-treatable illnesses.

Many community pharmacies are also open extended hours including weekends and are ideally placed to offer advice on the management of minor conditions.

This advice is not intended to discourage patients from getting a prescription when it is appropriate to do so, for instance, if you have a chronic condition that requires the long-term use of these medications.

If you are unsure whether or not this applies to you, please speak to your pharmacist.

**For more information, visit:
www.nhsggc.org.uk/speakup**

Speak up! It's our money. Our service.

Why am I getting medicines on prescription that I can buy in my local pharmacy or supermarket?

Doesn't it cost the NHS more that way?



Many over the counter medicines cost as little as 30p if you buy them with your weekly shop, but it costs the NHS as much as £35* on prescription. Speak up! It's our money. Our service. For further information, visit: www.nhsggc.org.uk/speakup

+ve Support

The Sandyford Professional Helpline can help give staff guidance, advice and information when treating patients who are living with HIV.

People with HIV are enjoying a similar life expectancy to the rest of the population thanks to advances in treatment and this means they may sometimes require treatment that is not HIV related.

Staff who don't treat patients with HIV on a regular basis

may find the opportunity to talk through any issues of concerns with a professional helpful.

This helpline is just one tool in a full package of helpful elements to support staff to provide NHSGGC services that are free from stigma and discrimination so that people living with HIV have a positive experience when attending for care.

Martin Murchie, senior sexual health advisor, said: "Sometimes staff also need additional support and information, especially if they don't work with people living with HIV on a regular basis. We have

good training opportunities for staff, but sometimes situations arise and it can be more helpful to talk it all through with someone."

The helpline offers:

- advice and support on caring for people living with HIV
- an opportunity to talk through any concerns you may have
- support in challenging stigma
- training and information.

To contact the Sandyford Professional Helpline, which is available Monday to Friday 9am-4.30pm, tel: 0141 211 8646.

To view our full range of +ve learning tools, visit: www.hivstigma.scot



Carol's on a mission to make it easy to get your flu jab

Carol Sellar, nursing support sister, is passionate about staff receiving their flu vaccination and also very passionate about making it as easy as possible to get vaccinated.

That's why she became a peer immuniser.

Carol has been a nurse for 36 years, training and working at Stobhill for 32 of those years. When she moved to Glasgow Royal Infirmary (GRI) four years ago, she changed to a completely different role as nursing support sister.



Carol is hoping to achieve a record number of vaccinations this year

Her role is very varied and includes supporting the lead nurses for medicine, carrying out various audits, and dealing with complaints and incident reports.

And for the third year in a row, this winter Carol will add peer immunising to her busy schedule.

Carol said: "Two years ago when I first became a peer immuniser, I carried out 250 vaccinations and last year that more than doubled to 510, so I have a big task ahead of me this year.

"It is so important for staff to get vaccinated for so many reasons – to protect themselves, avoid staff sickness, and to protect patients.

"Also, many of our staff are carers for elderly relatives or young children. It doesn't make sense not to protect yourself to protect them.

"And I want to make it as easy for staff to get the vaccination as I can. Peer immunisation works so well for a large number of staff who are tied to their ward, so I will be back again this year to vaccinate as many staff as I can at GRI."

Carol has been so successful these past couple of years she is now recognised in all corners of GRI, with staff stopping her and asking for the flu jab.

She also arranges 'mini clinics' in wards and different areas of the hospital if there are a handful of people looking to be immunised.

Carol added: "I really enjoy getting out and about around the hospital and I hope I can achieve a record number of vaccinations this year."



Call for peer immunisers

Could you become a peer immuniser?

Our aim is to maximise participation and flu vaccination uptake by staff this year – our target is 60 per cent – and we need your help to do that.

We need peer immunisers to improve accessibility for locations within acute campus and community settings, as well as those who work shift rotations.

Annual flu immunisation provides those immunised with direct protection from circulating seasonal influenza strains. For healthcare staff, this protection includes the patients they care for, many of whom are in a clinical 'at risk' category.

We need peer immunisers who, under the correct prescribing regulation/cover, can deliver an intramuscular injected vaccine and deal with the potential adverse reactions such as anaphylaxis. If you can do that, we want to hear from you.

To volunteer to join our cohort of peer immunisers, email: PeerImmunisation Booking@ggc.scot.nhs.uk
For further information, call: 0141 201 4473 or email: angela.ingram3@ggc.scot.nhs.uk or scott.hanley@ggc.scot.nhs.uk
Don't infect, protect!

Publish your case report

The NHSGGC Library Network has a subscription for BMJ Case Reports until August 2019 and we are keen to encourage staff to submit case reports for publication.

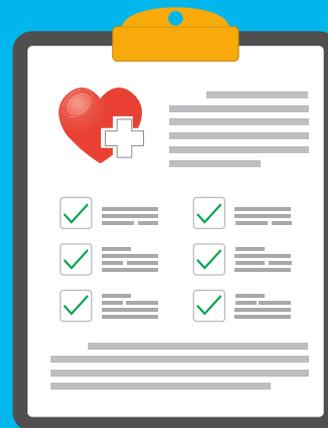
Why not transform a recent case presentation into a case report? This could be a first step into academic publishing and would be good evidence for CPD portfolios. Up to four authors can be included on each report and multidisciplinary submissions are welcomed. BMJ Case Reports are keen to

receive submissions from non-medics.

Local NHSGGC ethics approval is not required as long as there is no patient identifiable information included and you are not doing 'research'. BMJ provides a consent form that must be signed by the patient or next of kin before publication.

For further information, visit: www.quest.scot.nhs.uk or you can email: Library.Network@ggc.scot.nhs.uk for the library's

fellowship code.



Supporting you to make sure you are competent in moving and handling

Over the coming months, every member of staff involved in moving and handling will receive an assessment to ensure their practice remains safe and competent.

Competency assessments are carried out on wards and departments, enabling support to be provided without the need to be released from your ward or department to attend training.

Competency assessors have been trained in each ward and department (normally two per area) and will now carry out assessments on all members of staff within that area over the next 12 months.

The competency assessments are one of the key precautions taken within NHS GGC to manage the risk of injury to staff from the routine moving and handling activities carried out daily in our hospitals and community services.

There have been significant advances made over the past 20 years or so in the

equipment available to support the manoeuvring of patients, including lifts from the floor, lateral transfers, and a range of hoists and stand-aids.

The purchase of electric profiling beds in the thousands over the past 15 years has also ensured that patients and staff have good electronic and mechanical assistance.

Kenneth Fleming, head of health and safety, said: "Some of our longer-serving staff will remember having to attempt to physically lift patients on and off commodes, on to trolleys or beds or from the floor if a patient had fallen.

"With the full range of equipment now available to support safe moving and handling, this thankfully is a thing of the past.

"It is important, however, that staff continue to maintain their skills. The

competency assessment programme helps to identify where additional support might be needed.

"Competency assessors training was completed by the end of August, so if you are an assessor, we need you to have started your assessments and have them completed within 12 months of being trained.

"If you are a member of staff who undertakes moving and handling tasks, you will be assessed soon.

"If you are a manager of an area that undertakes moving and handling, you should be fully aware of where you are in implementing the competency assessors system."

For further information, visit the Health and Safety section on: www.nhs.gov.uk/hrconnect



Kenneth Fleming

Cab sec visits

The new Cabinet Secretary for Health and Sport, Jeane Freeman, has been familiarising herself with NHS GGC.

First up there was a visit to the QEUH to announce that 50.4 per cent of people in Scotland had signed up for the donor register – the highest rate in Britain.

The Cabinet Secretary met patients who were on dialysis and patients who had received a transplant. She also learned about the work of the hospital's kidney transplant and dialysis unit.

The Cabinet Secretary heard how, on average, the unit is now transplanting 180 organs annually while, at the same time, achieving some of the best success rates in the UK.

Marc Clancy, consultant transplant surgeon, said: "I have seen the unit grow from a small size performing 60 transplants a year to become the largest in Scotland.

"The number of transplants being carried out and the success rates are testament to the commitment of all our staff as well as the national drive to expand organ donation."

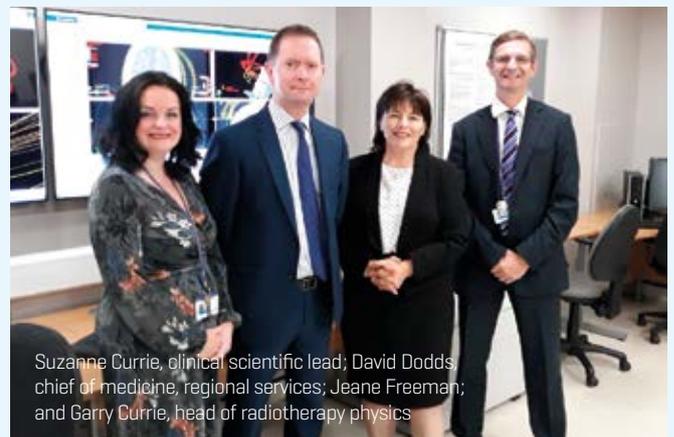
A visit to the Beatson followed where she met staff involved in the production of new radiotherapy treatment plans.

The Beatson is the first cancer treatment centre in the world to use new software to create these individual plans, which can be produced in a matter of minutes and have led to a 20-30 per cent reduction in radiation doses in some cases.

Ms Freeman said: "The pioneering work being carried out at the Beatson is having a positive impact on the lives of patients. By using the latest technology, the radiotherapy physics team are able to produce a tailored treatment plan in a just a few minutes."



Jeane Freeman meets dialysis patient Khalid Mohamed



Suzanne Currie, clinical scientific lead; David Dodds, chief of medicine, regional services; Jeane Freeman; and Garry Currie, head of radiotherapy physics

Ann wins the first 'idea of the month' for shredding suggestion

A suggestion for in-house shredding has been selected as the first idea of the month in our Small Change Matters campaign.

The idea was chosen from the hundreds to have been submitted by colleagues keen to do their bit to help tackle waste and work more efficiently.

The idea to shred confidential paperwork in-house rather than sending it to a contractor was suggested

by our health, homelessness and housing lead for Renfrewshire, West Dunbartonshire and Inverclyde HSCPs.

Ann's working day is busy ensuring access to health and social care services for people affected by homelessness and assisting in the prevention of homelessness. In addition to this, she is happy to play her part in helping the organisation work more efficiently.



She said: "It's quite a simple idea, but sometimes it's the little things added together that can make a real difference. Shredding confidential paper takes no time at all – you just pop it through the shredder once you have finished with the paperwork."

Director of finance Mark White said: "There has been a tremendous response to the

Small Change Matters campaign so far and a lot of work is going on to push forward the great ideas we've received.

"Staff really are best placed to let us know the best ideas to cut waste and drive better value

for the NHS and ensure maximum benefit for patients from the resources we are given."

The Financial Inclusion

Programme team will now work with budget holders to take forward all the ideas submitted that will deliver the real efficiencies

and benefits that can be achieved.

If you think of an opportunity for us to alter the way we do things that will help us to further develop high-quality, sustainable services, while reducing variation and improving efficiency, get in touch.

We know that to ensure every NHS pound is spent to maximum efficiency, we need to share ideas, to listen to suggestions and to act upon them.

Each person whose idea is selected as 'idea of the month' will receive a cheque for £50. Visit: www.nhsggc.org.uk/smallchange-matters



Mark White tests Ann's great idea

Read all about you Written by patients about you

Queen Elizabeth University Hospital

I had to take my son to A&E. He is 18 and suffers from mental health issues and had taken an unknown substance. We were both treated with respect and dignity from triage through to seeing the doctor, who was very knowledgeable about our situation and very supportive. He made us feel at ease and explained everything in detail. The triage nurses gave us lots of information to help us too. I can't thank them enough for the wonderful job they do and for making my son's experience a very pleasant one. I was so upset and nervous I didn't get anyone's name and wish I did, as I'd love everyone to know who they are. Thank you from the bottom of my heart.

New Victoria Hospital

This morning (Saturday) I slammed my finger in the car door. The nail was quite gruesome. My husband took me to the minor injuries unit. I was initially against the idea because it's Saturday night, after all. I arrived just after 5pm, leaving our son with his nana. We were



anxious about how long we would be. We were greeted with a smile from the receptionist who took my details and kindly asked me to wait. I sat and got my phone out expecting a long wait. I was literally just texting my mum to let her know when we were called through. The nurse practitioner was simply fantastic. I'm a teacher now, but I was an A&E nurse before I went into teaching six years ago. She took a thorough history and, more importantly, she was kind. I

was sent to X-ray and again seen in less than a couple of minutes. Back round and the nurse explained in brilliant detail and reassuring confidence that everything was okay. My finger was numbed up, dressed and I was on my way all in under 40 minutes. I honestly cannot explain how impressed I was. I honestly can't thank you all enough. Please, please pass on my sincere appreciation and thanks to the MIU.

Building appetites back up

Often when patients are unwell and in hospital they can lose their appetite and struggle to eat and drink. Finding out what's 'normal' for a patient can make all the difference.

Asking patients, carers or relatives about food and drink preferences and what they like to eat at home can help tailor the meals and snacks we provide whilst they are in hospital.

Lis Waterhouse, dietitian, said: "By adopting a 'Food First' approach from admission, we can make sure that patients who have smaller appetites are encouraged to eat and drink throughout the day.

"For patients who are able to eat and drink, increasing the number of opportunities for them to eat and drink may improve their overall food

intake which, in turn, may reduce tiredness, support rehabilitation and reduce recovery time.

"We can offer snacks that suit the needs of patients during the day. In fact, over any weekend there are 22 meals and snack opportunities and we can make an impact each time.

"Where clinically appropriate, families and staff can help encourage patients to eat and drink by being with them during meal and snack times, helping to cut up food, open packets or providing drinking straws to make eating and drinking easier."

A 'little of what you fancy' can often be the best approach and families may choose to bring in favourite items for patients. Advice on suitable items is available on our website, visit: www.nhsggc.org.uk/foodfirst



Dietitian Lis Waterhouse

Be social but sensible online

Facebook, Twitter, Instagram, Snapchat, WhatsApp - there are more and more social media channels and more of us using them every day to keep in touch with family, friends and colleagues.

They are a fast and effective way to communicate with lots of people in an instant, both in your personal life and for work messages.

Day by day, our followers are increasing, so if you have news to shout about to the rest of NHSGGC staff and beyond, get in touch with us to post on our social media channels. Simply email your photos and a short story to: staffnewsletter@ggc.scot.nhs.uk

Alongside the advantages of social media, there can be confusion about what should and shouldn't be written, posted or streamed on social media sites by staff in a personal capacity that relates to their work.

There is guidance for staff on how to manage your own personal social media on the HRConnect website - with links to detailed codes of practice from relevant professional bodies too.

Visit: www.nhsggc.org.uk/PersonalSocialMedia

At a glance, staff should be aware of some basic dos and don'ts.



Do 	Don't 
Be informed - understand how your social media accounts work and how you can protect yourself	Share confidential information inappropriately - about colleagues or those we care for
Use opportunities to network, share good practice, research and learn	Post pictures of patients and people receiving care without their consent
Be helpful - direct people to appropriate sources of help or information, such as our website or NHS Inform	Post inappropriate comments about patients or anyone else
Think before you post - are your messages accurate, fair, kind?	Bully, intimidate or exploit people
Protect your professionalism and your reputation - don't say something online you wouldn't say in uniform or at work	Build or pursue relationships with patients or service users
Remember, even the strictest privacy settings have limitations - once something is online, it can be copied and shared	Steal personal information or use someone else's identity
Know how to report concerns to the platform and if necessary through the appropriate Board policies e.g. NHSGGC Grievance Policy, Dignity at Work Policy and/or local whistle-blowing procedures	Incite hatred or discrimination or encourage violence or self-harm

Remember that once a post is published it is permanent - even if you delete it, others could already have shared or copied it elsewhere.



Atlantic adventure

Visual impairment nurse Catriona Macintyre-Beon took on a challenge of a lifetime when she signed up for able2sail's Rockall 2018.

Rockall 2018 was a 1,000-mile sail in the Atlantic. Leaving Kip Marina, the team sailed out of the Clyde and on to Castlebay on Barra, where they met up with several other boats of the same class.

From Castlebay they sailed south round Barra Head and on to Rockall, some 200 miles west. After rounding the 17m high rock in the Atlantic, they sailed back north east to Stornoway, rounding the Butt of Lewis.

Catriona said: "Able2sail offers disabled clients of all ages and abilities the chance to learn how to sail.

"I work with able2sail so when they organised this trip I decided to go for it. I only started sailing a couple of years ago so I knew it would be a challenge and a challenge it was. But a fantastic one!

"Seeing the benefits clients and their families and carers get from a morning or full-day sail has made me passionate about it, so I'm delighted to do anything I can to help raise money for the charity."

Able2sail is operated entirely by volunteers and provides sailing opportunities aboard their sailing vessel *able2sail* and their motor yacht *Jenny Rose* to both able-bodied and disabled individuals.

For more information on able2sail, visit: www.able2sail.org.uk

COMPETITION



WIN
£250 of
holiday vouchers!

With summer nearly over, there is no better time than now to start thinking about your next holiday, so why not enter this month's competition and win £250 towards the cost?

Simply answer the question below and 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.**

Q: What is our target for this year's flu vaccination?

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 September 2018.

Way to go, Lorna!

Lorna Sinclair, advanced specialist paediatric physiotherapist, has excelled at completing the West Highland Way Race.

The West Highland Way Race is one of the world's longest-established ultra-marathons, with competitors having 35 hours to run 95 miles from Milngavie train station to Fort William along the West Highland Way.

This was not Lorna's first time running this race and she smashed her previous record by two hours, completing in 23 hours and 51 minutes! Not bad for a 1am start and 95 miles.

Lorna said: "I've been running marathons for over 15 years and started ultra-distance trail running [distances longer than marathons that are off road] eight years ago.

"There's a strong friendly network across the Scottish ultra-marathon scene with races up and down the country all year round.



"I'm lucky as the West Highland Way is on my doorstep – people travel from all over the world to do the race and I really love the route as the terrain and views are so variable along the whole course.

"It's been three years since I last ran the race, so I was really chuffed to beat my previous time and I also felt much better at the end than last time – I was drinking celebratory fizz with friends less than an hour after finishing, if that is anything to go by!

"Finishers receive an engraved crystal goblet, so I now have two... I think I would maybe like another two [or three or four] while I am fortunate enough with my health and wellbeing to enjoy such a crazy hobby!"



Lorna 75-ish miles into the West Highland Way Race – at the top of the Devil's Staircase with Buachaille Etive Mor in the background

small

change

matters



“

What if we asked everyone to turn off lights and their PC monitors before they went home...

Would that help?”

Yes it would! Good thinking Laura...

Do you have an idea that could save money for NHSGGC?

We want to hear all about it. No matter how big or small your idea may seem, if we all work together, we can make a difference. Let's make every £1 count, because **small change really does matter.**

Complete and return the form below, using internal mail, or visit: www.nhsggc.org.uk/smallchangematters to give us your ideas



Your details

Forename

Surname

Department

Email Address

Your idea...

What's your idea?
(For example, saving £ on printed labels)

Is there anything else you'd like to add?
(For example, your thoughts on how it would work in practice)

Please return to:

**Financial Improvement Programme Office, Board Headquarters,
JB Russell House, Gartnavel Campus, Glasgow**

F.I.P. Financial Improvement Programme

