Fancy a cuppa?

New campaign highlights the importance of good hydration and nutrition in patient recovery

Full story on PAGE 3
JOHN BROWN

Last month was the 70th anniversary of the NHS and I was pleased to host the First Minister and the Cabinet Secretary to the Royal Hospital for Children to commemorate this historic event. Of course, this was just one of many celebrations across NHS Greater Glasgow and Clyde and it was interesting to hear of the wide variety of events that staff arranged for our patients. Well done and thank you to everyone involved.

Moving Forward Together
I spent some of the last month attending meetings to talk about the work to design improvements to the wide range of services delivered by NHS Greater Glasgow and Clyde.

As well as involving our Moving Forward Together programme team and the senior leadership team, these meetings included patients, service users and some of their elected representatives.

The meetings were welcomed as a first step in ensuring that our new clinical strategy and changes to patient pathways are developed with input from all our stakeholders, not just the managers and staff who deliver the services.

Of course, staff input to the Moving Forward Together programme is critical to the successful implementation of NHS Scotland’s Health and Social Care Delivery Plan and I would encourage everyone employed in Greater Glasgow and Clyde, including our people employed across the six Health and Social Care Partnerships, to get involved with Moving Forward Together.

I hope to meet some of you at the future events to discuss service redesign.

Best practice
Part of my time recently has been spent in NHS Tayside where colleagues there have been developing their own approach to delivering the Health and Social Care Delivery Plan.

All NHS Boards face the same challenges and it makes sense for us to support each other when it comes to looking for ways to improve services and live within our budgets. So, I’ve been encouraging people to share good ideas between the two Boards.

A good example of this has been in the interest that NHS Tayside has shown in NHS Greater Glasgow and Clyde’s Digital Strategy and William Edwards, our director of eHealth, has offered to help NHS Tayside develop its own approach to using IT to facilitate different ways of delivering services in future.

No doubt there will be more examples of sharing best practice in the coming months.

Beatson
I was pleased to be invited to the official opening of the new Macmillan Support Hub at the Beatson West of Scotland Cancer Centre.

This is a great addition to what is already recognised as a centre of excellence for the treatment of cancer.

We are fortunate to not only have such a facility in the West of Scotland, but also to have a group of committed and talented people capable of providing high-quality treatment at the same time as contributing to ground-breaking research.

The Beatson also stands out for another reason. It is a great example of a successful partnership between the NHS Board and the charities working in a specific area of healthcare.

Macmillan Cancer Support raised more than £2 million to fund the building of the new Support Hub and this is typical of the contribution made by them and the other cancer charities. These charities include the Beatson Cancer Charity, Marie Curie, Maggie’s and the Teenage Cancer Trust, and everything they do to support patients and their families coping with cancer reflects the hard work of their fundraisers and the generosity of their supporters.

I would encourage everyone to think about how you might get involved in this good work. It really does make a difference.
Tea rounds matter – we’re busting the dehydration myth

Drinking fluids is not as important as eating food for hospital patients.

That’s just one of many myths our new Food, Fluid and Nutrition awareness raising campaign is aiming to tackle.

It is easy to forget that hydration is a serious issue and making sure our patients consume enough fluid can easily be overlooked.

The new campaign will focus on the importance both food and drink play in improving a patient’s recovery and potentially leading to a quicker discharge from hospital.

The campaign, aimed at staff, patients and family, highlights the role we can all play in keeping patients hydrated.

Dr Hazel Miller, consultant in geriatric medicine at Glasgow Royal Infirmary, said: “Water makes up two thirds of our body so it’s important we all drink enough to maintain and promote good health. This is for everyone; however, it can be especially important for our older patients.

“Dehydration in older or unwell people can trigger delirium – an acute change in mental state that is a serious problem in hospitals. Dehydration can cause delirium directly, or lead to medication levels building up, which can have a toxic effect.

“Having less fluid flowing through their bladder could lead to urinary tract infections, and less fluid through their gut to constipation – these are all common contributors to delirium.”

Drugs can be taken by drinking a range of liquids including tea, coffee, water or squash. Unfortunately, not all of our patients are always able to recognise their own dehydration so it’s important every one of us plays a role in ensuring they are encouraged to consume enough fluids during the day.

Kirsty Madden, one of the domestic staff on ward 36 at the GRI, said: “The tea trolley is really popular with patients and we make sure we have something for everyone.

“We offer choices including tea, coffee, juices, milk, hot chocolate and cold drinks, as well as a range of biscuits.

“It’s important that as many patients as possible make the most of the trolley service, but patients don’t have to wait for us to come round – they can ask a member of staff to make a cuppa.”

Giving children the best possible start

Student and qualified health visitors and family nurses can now access a new educational resource to help them develop necessary skills to meet the speech, language and communication needs of children in Scotland.

NHSGGC – 3

Dr Hazel Miller

The Speech, Language and Communication resource is now live, visit: http://slctoolforhv.nes.digital/
Health and safety incident reporting

It’s important that all incidents – including injuries, near misses and device defects – are reported on Datix to keep our staff safe at work.

We have been inspected by the Health and Safety Executive (HSE) over the last year and the visit has highlighted areas where we need to take action.

One area that is worrying is the timely reporting of incidents on Datix – we can’t stress enough how this impacts on our local reporting systems and we are appealing to you to complete Datix on time.

Reporting of Injuries, Diseases, Dangerous Occurrences Regulations (RIDDOR) is particularly important as they have a very tight timescale. Training for needlestick injuries is also high on our agenda, with the end of August being the date when all staff should have completed their training.

Here we talk about the importance of RIDDOR and needlestick injury reporting.

**RIDDOR reporting**
Staff are reminded to report RIDDOR incidents as soon as possible after the event, with the recommendation being within 24 hours.

Most RIDDORs have to be reported to the HSE within 10 days of the incident and in the case of an employee being absent, this requirement is 15 days.

The commonest types of RIDDORs we require to report are a ‘specified injury’ such as the break of a bone, most accidents where a person is absent from work or unable to undertake their normal duties for more than seven days, where an employee has been diagnosed with an occupational disease such as dermatitis and where a ‘dangerous occurrence’ has taken place, such as a high risk needlestick injury.

Datix will ask the reporter if the incident is RIDDOR reportable and it may be the case that this information requires to be updated if the injured person subsequently becomes absent from work for the specified time of more than seven days.

It is extremely important that all incidents that may be RIDDORs are reported as quickly as possible on Datix and, where possible, by telephone to the local health and safety contact.

**Needlestick injuries**
All staff are reminded of the importance of undertaking training related to needlestick prevention, and treatment in the event of a needlestick injury.

This training should be completed by the end of August.

Staff will also be aware that we have introduced new safety devices recently, including safety hypodermic needles, blood collection sets and insulin safety devices.

We will be introducing more devices throughout the year, including safer scalpels.

If during the use of any such devices there are any problems such as a damaged device, a device that fails to activate the safety mechanism, a device that causes clinical concern for the patient, then these issues must be reported on Datix as an incident, even if there is no injury involved.

All incidents must be reported on Datix, it’s not just for actual injuries – near misses, defects or failures of the new safety devices should be reported.

Kenneth Fleming, head of health and safety, said: “Datix is your system – it’s there to help us understand what’s happening with our staff in terms of incidents, and take action to address any issues highlighted.”

All clinical staff are asked to note this requirement to report any defects or failures on Datix so that we can ensure that all such incidents are properly investigated and the appropriate action taken.

“Datix is your system – it’s there to help us understand what’s happening with our staff in terms of incidents, and take action to address any issues highlighted”

LearnPro training modules are available on: https://nhs.learnprouk.com/lms/login.aspx
We need your help to tackle medicines waste and ensure our resources are used better.

You may see examples of medicines waste in your personal life, if you take medicine yourself or if you care for someone e.g. a parent or a child.

You may also see waste at work in how we manage medicines use, from ordering and stock control to packaging and dispensing.

Every year in NHSScotland, £20 million is spent on medicines that are unused and can’t be recycled. You can help tackle this issue by speaking up whenever you see medicines waste.

The Speak Up! campaign has been launched in NHS Greater Glasgow and Clyde to raise awareness of the significant and growing problem of medicines waste and to let you know what you can do to help tackle it.

Thank you to everyone who has taken the time to complete the recent medicines waste survey and a special thanks to those who have already contributed ideas and suggestions. Congratulations to Eileen Scambler, clerical officer at the West of Scotland screening service, who won our £50 Argos vouchers prize.

Audrey Thompson, lead pharmacist, prescribing services, said: “We’ve had a phenomenal response to our staff questionnaire, with more than 2,000 suggestions received from colleagues on how we can tackle medicines waste.

“Many of you have seen evidence of waste first hand, and are very well placed to identify where we can make improvements.

“We’re currently reviewing all of the ideas to see which ones to take forward and would encourage anyone who has a suggestion for tackling waste but hasn’t yet told us about it to get in touch.”

Do you have any ideas which could help reduce medicines waste within NHS Greater Glasgow and Clyde?

If so, we want to hear from you. Please send your suggestions to: prescribing@ggc.scot.nhs.uk

Some of your ideas and suggestions:
- Provide advice to staff on redistribution of medication close to expiry date
- Stop issuing paracetamol to patients to take home for post-op pain
- Supply in smaller quantities e.g. small tubes/bottles
- Issue all prescriptions with advice about medicines waste

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WIN

£20 million waste?
That would pay for over 600 nurses or 1,200 carers a year!

WIN a drone

This foldable design makes it easy to take this drone anywhere! Take control as the pilot and fly the drone to any location without worrying about which direction the drone is facing with the headless security mode. Take pictures from 100 metres up!

Q: When should needlestick training be completed by?

To win this fantastic prize 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.

The competition is open to all NHSGGC 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 31 August 2018.
Staff shape future strategy for health and social care

The Moving Forward Together programme has been approved by the NHS Board.

The new strategy sets out how our primary, community and acute health and social care services will work together in the future to support people to live longer, healthier lives in their own homes and communities and to promote self-management and independence.

The strategy was developed following extensive engagement with staff, including:
- presentations and discussions at area and local partnership and professional committee meetings
- establishment of 31 clinical service modelling groups
- face-to-face staff sessions attended by hundreds of staff
- regular communication through core briefs, newsletters, dedicated website, videos and social media.

Speaking at the board meeting, chairman John Brown described the strategy and the decision to support it as "one of the most important decisions the Board has made since he became chair".

He said: "We have engaged extensively with, and learned from, the knowledge and experience of our staff from across health and social care services. More than 1,000 clinicians and non-clinical staff have contributed to the vision and have supported the direction of travel that we have taken.

Next steps

Our strategy will take three to five years to implement.

The first phase will focus on identifying priorities for the first round of proposals in primary, community, hospital and specialist care.

An early focus will be on determining the maximum potential of our community networks in delivering care to our population in their communities and the impact that will have on the future capacity and services within hospitals and other specialist services.

Staff will continue to be involved in all stages of its development.

To find out more, and let us know what you think about the Moving Forward Together programme, visit: www.movingforwardtogetherggc.org

Three cheers for Kilt Walk effort!

Margaret Allan, senior business support based at Leverndale Hospital, has MS and is now finding it difficult to walk.

She struggles to propel a manual wheelchair, so two of her caring colleagues decided to take matters into their own hands.

Business support assistants Paulina Reptowska-Sobieri and Sarah Cuthbertson decided to take part in the Kilt Walk to raise money towards an electric wheelchair.

Margaret said: "After much cajoling, Paulina and Sarah told people what they were going to do and asked for money for their 'sheet'.

"I felt I had to support them on the walk, so roped a friend in and made arrangements to meet them at the halfway point to offer sustenance and support.

"So that they would see us among the hundreds of people who were walking for other causes, I made signposts from a spare pair of crutches, and my friend and I stood holding the signposts aloft.

"We got a lot of cheers from lots of tired but good-natured walkers, who tried to pretend that they were called Paulina or Sarah.

"The signs worked and they found us, hiding under the bridge as it had started raining."

Back at Leverndale, the sponsor money came rolling in and more than £300 was raised. Meanwhile, more wonderful colleagues in the Recreational Therapy (RT) Department held a raffle at their annual art fair and raised more than £500. A grand total of more than £1,400 was raised with a view to getting Maggie her wheels.

Margaret added: "I would like to take this opportunity to boast about my friends here at Leverndale, and to thank each and every one of the people who donated their hard-earned cash to the two ladies who had this madcap idea that worked, and to the RT staff, who did a great job as they always do."
Red Bag scheme

A new ‘Red Bag’ scheme has been launched to support and improve links between acute sites and care/residential homes. When a care home resident needs to go into a hospital, a Red Bag will be packed for them. The scheme is used widely across the UK and has been successful in supporting the unscheduled care journey for care home residents.

Alan Gilmour, planning manager, said: “The Red Bag contains standardised information about the resident’s general health, any existing medical conditions they have and medication they are taking, as well as highlighting the current health concern. This means that ambulance and hospital staff can determine the treatment a resident needs more effectively.

“It also has room for personal belongings, such as clothes for the day of discharge or wearing while in hospital, if appropriate; glasses; hearing aid; dentures etc and it stays with the patient while they are in hospital.”

Physiotherapists, nurses and occupational therapists have also found access to the information really useful in supporting their assessment of the resident, without having to contact the care home as frequently.

When patients are ready to go home, a copy of their discharge summary (which details every aspect of the care they received) will be placed in the bag so that care home staff have access to this information when their residents arrive back home. The Red Bag also clearly identifies a patient as being a care home resident and this means that it may be possible for them to be discharged sooner.

Acute services, care homes and the Scottish Ambulance Service are supporting this process as it provides many benefits including:

• improving access to information on residents – admission and discharge
• supporting the approach to medication for admission and discharge
• reducing unnecessary time for all stakeholders
• preventing admission where appropriate – to enable earlier assessment and treatment
• reducing the length of stay.

The scheme is initially in Glasgow City but will be rolled out across the Board area between now and October.

For more information, contact Alan Gilmour, email: alan.gilmour@ggc.scot.nhs.uk
Glasgow Hospitals’ Choir 40th anniversary Christmas carol concert

With the recent hot weather, Christmas is probably far from everyone’s mind at the moment, but the Glasgow Hospitals’ Choir is looking forward to its next concert with great anticipation.

Each year, the Choir performs at the Glasgow Royal Concert Hall in aid of CLIC Sargent, and the concert on Friday 7 December this year is shaping up to be one of the best yet, as it will be the 40th anniversary of the Glasgow Hospitals’ Choir. In early January 2019, there will be a special 40th anniversary reception for the choir members, hosted by NHSGGC chairman John Brown.

The Choir is always looking for new members to boost the ranks, so if you have a passion for singing and want to get involved, here is your opportunity.

Rehearsals for the concert are on a Sunday afternoon starting in mid-October.

For details of how to join the Choir, contact Anne Laird on 07720 288790 or email: annelaird77@yahoo.co.uk

A healthy way to raise funds for charity

Congratulations to Fiona Sutherland, Lauren Hewitson, Sarah Mckelvie, Morag Green, Kim Walls and Heather Jones, who all completed the Glasgow Simply Health 10k recently.

The team, who work in the paediatric imaging department at the Royal Hospital for Children, took this as an opportunity to raise money for Glasgow Children’s Hospital Charity and raised the fantastic sum of £150.

Well done to all of you!

‘Skincredible’ achievement!

Congratulations also go to Clare May, Suzanne Allan, Alec McIntyre, Ryan McNeil and Simon Wells from dermatology at the RAH, who took part in the Edinburgh Marathon.

‘The Skincredibles’ raised a fantastic £1502 for the British Skin Foundation. Well done, all.

Team building day helps build bridges

Barry Crumlish, a new charge nurse in the emergency department at the RHC, organised a team-building day for the department at Auchengillan.

Barry said: “The purpose of the day was an opportunity for me to get to know the staff and for the staff to get to know me. There has also been quite a high turnover of staff within the emergency department recently, so it just gave everyone a chance to get know each other and build a good working relationship.

“The other purpose of the day was to try to boost team morale after a very busy and stressful winter – and it was a success!”

Activities included raft building, bridge building, crate stacking, other team building challenges.

Barry added: “It was great to get to work with everyone out of the clinical setting. Although the staffing only allowed 13 members of staff to go to the day, there was a good cross section of new and established staff and junior to more senior. It was an absolute success and everyone bonded well. Now there is a noticeable change in morale and working relationships.”

First Minister Nicola Sturgeon enjoyed reading through our anniversary edition of Staff Newsletter during her visit on 5 July.