Top 100 for Equality

For the first time ever, we were listed in the Top 100 Employers in the Stonewall Workplace Equality Index (WEI), climbing 53 places, ranking in the top five employers in Scotland and the top NHSScotland Board for the fifth year in a row.

The WEI measures how well an organisation meets the needs of Lesbian, Gay and Bisexual (LGB) staff members, and is widely accepted of a good indicator of progress against equality targets generally.

One of our Sexual Equality Leads and Head of Strategy and Performance, Carole Anderson commented on the accomplishment, saying: “We could not be happier with the result of this year’s WEI. The criteria for this year’s index were tougher than ever before, and to have climbed from 123rd to 70th out of 397 participants in the UK is an incredible accomplishment.”

Over the past 12 months we have continued to invest in finding innovative ways to create an inclusive work environment, and becoming the first NHS Board to have both its Chair and Chief Executive sign the Stonewall Scotland NoBystanders pledge, dedicated to eradicating bullying in the workplace.

Our Chair, Jeane Freeman, said: “We firmly believe that we provide the highest possible standard of care and service for every patient, visitor, delegate and guest who comes here. This can only happen because we are committed to creating an inclusive

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Top 100 for Equality

work environment that not only welcomes individuals of all backgrounds, but actively highlights and celebrates our unique mix of people.

“Our work on equality, diversity and inclusion is an important element of how we demonstrate our organisational values, especially of valuing dignity and respect. We have worked hard to make these values even more visible and appreciate how they influence how we behave each and every day. This helps us provide a caring, personal and quality service for our patients, visitors and guests.”

Top 50 Out at Work

Carole Anderson, our Head of Strategy and Performance and one of our Sexual Equality Leads, was recently named one of the top 50 LGBT (Lesbian, Gay, Bisexual and Transgender) individuals in management and executive positions throughout the UK. The Out at Work Top 50 is dedicated to highlighting the efforts and success of LGBT executives and senior managers in organisations throughout the UK, promoting positive change in people’s attitudes towards the LGBT community.

Carole was ranked 42nd out of 50 from a pool of thousands of nominees in the UK for her dedication to improving awareness of LGBT issues within the organisation, striving to create an inclusive and diverse workforce.

In addition to her Equality Lead role in the Golden Jubilee, Carole is an Equality Representative with Unite the Union, serving as a member of the Scottish Regional LGBT Committee. She is also Chair of SWAN, Scotland’s largest LGBT network with over 400 members from the public, private and third sector, committed to bringing together LGBT individuals across sectors for business networking and support.

Carole also works actively with Stonewall Scotland, a charity striving to achieve equality and justice for the LGBT community. The Golden Jubilee has been working with Stonewall since 2008 as one of their Diversity Champions with Carole participating in their Role Models programme.

I am delighted and honoured to have been ranked number 42...

Colin Macfarlane, Director, Stonewall Scotland said:

“We are delighted to see NHS Golden Jubilee make it into the Top 100 index for the first time. This has been our most competitive year to date and this result demonstrates the hard work and dedication from all involved. We are proud to see the organisation lead the way for the health service in Scotland. This result sends out a powerful signal that the NHS Golden Jubilee is committed to creating an inclusive workplace, which can only benefit all staff and those who use their services.”

Together with the other Equality Leads, Jane Christie-Flight, our Employee Director, Carole has worked to achieve recognition of the Golden Jubilee as one of the Stonewall Top 100 Employers in the Workplace Equality Index.

Commenting on making the top 50, Carole said:

“I am delighted and honoured to have been ranked number 42 in the Out at Work Top 50. I believe that acting as a role model and providing leadership is vital to allow LGBT individuals to feel comfortable to be themselves both at work and in the wider community. This helps them to fulfil their full potential, bringing personal and wider business benefits.

Jill Young, our Chief Executive, said: “Carole’s dedication to helping the Golden Jubilee support, highlight and celebrate our diverse, values-based workforce is second to none, and we are extremely proud of her for this well-earned accomplishment.

“We constantly strive to improve our service, and can do this thanks to our incredible and incredible team.”
Do you know of someone who is being harmed?

We are proud to support the Scottish Government’s Adult Support and Protection programme, helping adults who are at risk of harm.

If you are worried about a friend, relative or neighbour is being harmed, you can help them. Whether this is physical, psychological, financial or sexual harm, or they are experiencing neglect, the Adult Support and Protection (Scotland) Act 2007 is dedicated to protecting people over the age of 16 who may find it difficult to protect themselves.

The people involved may be unable to defend themselves because of a:

- Disability
- Mental disorder
- Illness
- Physical or mental infirmity

Harm can happen anywhere, and can be stopped. If you think something is wrong, trust your instincts: if you have seen something, say something.

For more information on local support services and more on how you can help, head over to [www.ActAgainstHarm.org](http://www.ActAgainstHarm.org). You can also find an information video on the Scottish Government Youtube Channel at the following link: [https://www.youtube.com/watch?v=d0wtQEsRJWw&feature=youtube](https://www.youtube.com/watch?v=d0wtQEsRJWw&feature=youtube). For more information, contact Eleanor Lang by emailing Eleanor.Lang@gjnh.scot.nhs.uk or call extension 5659.

One year of seven day working

Our pioneering Seven Day Service implemented by our Rehabilitation Department has celebrated its one year anniversary of making a positive impact on patient outcomes.

In January 2014, we became one of the first hospitals in Scotland to introduce a Seven Day Service, providing the same standard of care seven days a week, guaranteeing equality of care for every patient regardless of the time or day of their admission.

Rehabilitation manager, Christine Divers explained: “We are committed to ensuring patients are able to access and benefit from therapy as soon as possible after their surgery. This allows us to optimise recovery times and hospital stays.

“We are now one year into the programme, and so far it has been going very well. Our team have adapted to the change fantastically and have demonstrated an incredible can do attitude; without their efforts, this wouldn’t have been possible.”

This initiative has been incredibly successful, winning two poster competitions dedicated to highlighting best practice in healthcare for its benefits to patients and effective processes. The awards came from the Quality and Efficiency Support Team (QuEST): Improving patient flow in Scotland event and the College of Occupational Therapists Specialist Section Trauma and Orthopaedics (COTSSTO) National Conference poster competitions.

Cabinet Secretary for Health and Wellbeing, Shona Robison MSP, welcomed the service, hailing it as: “a good example of a health board introducing additional services at weekends that make a real difference to patients.”

Public holidays

Our public holidays for 2015/16 have now been agreed. These dates are included below:

- Friday 3 April 2015 – Good Friday
- Monday 6 April 2015 – Easter Monday
- Monday 4 May 2015 – May Day
- Monday 28 September 2015
- Friday 25 December 2015
- Monday 28 December 2015
- Friday 1 January 2016
- Monday 4 January 2016

Some staff receive an additional two public holidays as follows:

- Monday 25 May 2015 – Spring
- Monday 20 July 2015 – Glasgow Fair

HAIRT Report

The latest Healthcare Associated Infection Reporting Template (HAIRT) Report for the Golden Jubilee is available now.

You can find the full report on the publications section of our website at the following link: [http://www.nhsgoldenjubilee.co.uk/…/23…/5611/HAIRT_dec14.pdf](http://www.nhsgoldenjubilee.co.uk/…/23…/5611/HAIRT_dec14.pdf)
Smoking, Health and Social Care (Scotland) Act; the policy was then updated in 2013 to incorporate eCigarettes. This is part of our responsibility for ensuring that our patients receive the highest standard of care possible and that our guests, family members and staff are not exposed to the damaging effects of second hand smoke.

Anne Marie Cavanagh, our Nurse Director, said: “Tobacco remains a major, preventable, cause of ill health and premature death in Scotland. As the home of heart and lung services for NHSScotland, we are all too aware of the serious, detrimental, impact which smoking can have on your health, and to individuals regularly exposed to second hand smoke.

“The health issues associated with smoking are often complex, and in addition to damaging the lungs and heart, can have a serious impact on the health of your joints, vision and overall physical fitness.

Bronagh Bell, Director of the Beardmore Hotel and Conference Centre added: “As the UKs leading public sector hotel and conference facility, we are passionate about encouraging our guests, delegates and service users to lead healthy, active lifestyles. We firmly believe that providing a Smokefree environment is essential for allowing us to continue to offer the best experience possible for our clients, guests and delegates.

“We want to encourage all of our customers and staff to put out the cigarettes and take advantage of the fantastic natural scenery we have on our doorstep, taking a walk, going for a cycle or even burning off some energy by enquiring about our fantastic selection of Health Club classes and gym facilities.”

The details

So what is our No Smoking Policy?

Smoking is not permitted anywhere in or on the grounds of the Golden Jubilee National Hospital, Beardmore Hotel and Conference Centre or the Beardmore Centre for Health Science. This includes the use of eCigarettes. This means that smoking is not allowed in:

- any buildings, doorways or main entrances;
- walking routes, gardens or patio areas;
- the car park and grounds of our site;
- vehicles used for NHS business e.g. patient transport, lease cars and vans, including Beardmore Hotel Vehicles.

Staff are also reminded that you are not permitted to smoke while in uniform, on or off site. This applies to both NHS and Beardmore Hotel uniforms.

What does this mean for me?

As an employee, it is your responsibility to comply with this policy as part of the terms and conditions of your employment and

Consultant Thoracic Surgeon, Alan Kirk, is proud to be smoke-free

Looking for that bit of inspiration to stub it out once and for all? Download the new No Smoking Day Time Machine app.

Using forensic art research, the Smoking Time Machine gives users an impression of how smoking can alter the way you age.

Users simply upload an image, and are then aged 10 or 20 years as a smoker, showcasing the potential effects of smoking on premature ageing.

The app can be downloaded free from iTunes and the Google Play Store.

For more information, head over to https://nosmokingday.org.uk/i-want-to-quit/smoking-time-machine-app/?utm_medium=email&utm_source=cheetahmail&utm_campaign=email-no_smoking_day-10236025
provide full support to patients, visitors and colleagues to ensure we are providing a smokefree environment.

**Breaches of our No Smoking Policy**

- The Human Resources Department will monitor any breaches in the policy and provide managers with the necessary support to apply the policy effectively.
- Staff reported for smoking on or in the NWTC premises will, in the first instance, be offered support to stop smoking.

Subsequent breaches of smoking on or in the premises will initiate staff being investigated under the Employee Conduct Policy.

**What do I do if someone is smoking?**

- If it is appropriate and you are comfortable doing so, politely advise the individual that the NWTC is a smokefree environment and that anyone wishing to smoke must do so beyond the entrance to the hospital and hotel car parks (including eCigarettes and SmokeFree Cigarettes).
- Remind them that as the home of regional and national heart and lung services for the NHS in Scotland, this is for the direct health and safety of our patients and staff.
- If the individual says no, or you feel in any way intimidated, please inform Security by calling extension 5116.
- If the individual is aggressive or threatening towards any member of our staff, patients or the public, Security will contact the Police, who will be brought in to address the situation.
- Please note that any incidences of aggression or violence should also be reported to the Datix Administrator.

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**Stop Smoking Service**

If you are looking to stop smoking, your local, friendly, stop smoking service can help.

Did you know you are four times more likely to quit smoking using the free NHS support services and stop smoking products than going it alone?

You can attend group support every:

- Monday, 6pm – 7pm in the Dumbarton Library
- Tuesday, 6pm – 7pm in the Alexandria Library
- Wednesday, 6pm – 7pm in Clydebank Health Centre

You can also access One to One support every:

- Monday, 9am – 11am in Clydebank Health Centre
- Tuesday, 9.30am – 11am in Cutty Sark Centre, Bellsmyre
- Wednesday, 9.30am – 11am, in Vale Centre for Health and Care
- Thursday, 10am – 12pm, in Dumbarton Health Centre
- Thursday, 5.30pm – 7pm in Centre 81, Whitecrook

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**Mentally healthy workplace**

You can now make an appointment to attend workshops dedicated to creating a mentally healthy workplace which will be running in April. These sessions are for staff who have a role in supporting staff with mental ill health – the sessions can be booked through HR.net.

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**Help us Communicate**

Our Communications team have been attending team meetings getting feedback and input on our services as well as offering help and answering any questions.

We want to hear your ideas and suggestions to help us improve communication helping drive quality research and innovation across the entire Board.

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**Useful sources to help you stop smoking:**

**Occupational Health Department:**
- 0141 951 5436
- Starting Fresh – Pharmacy support service.
- Smokeline: 0800 84 84 84 or www.CanStopSmoking.com
- www.smokefree.nhs.uk

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For more information on West Dunbartonshire Smokefree Services call 01389 776 990, text QUIT to 83123 (texts are free) or email SmokeFreeWD@ggc.scot.nhs.uk.

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**For more information, contact Marie Smith on extension 5436 or emailing Marie.Smith@gjnhd.scot.nhs.uk.**

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**This generally takes ten to 15 minutes at the start of the meeting; if one of the team has not yet attended your meeting, email Comms@gjnhd.scot.nhs.uk and arrange a time.**
Scottish first for revolutionary surgery

We recently became the first hospital in Scotland to use a revolutionary new technology on a patient suffering from a severe rib fracture.

MatrixRib is a Plate Osteosynthesis developed by DePuy Synthes CMF, and is a ground breaking new piece of surgical equipment that allows surgery to be performed on patients suffering from complex or severe rib fractures with significantly increased accuracy, stability and reduced trauma.

Our Consultant Cardiothoracic Surgeon Alan Kirk said: “This is a fantastic development for thoracic in the Golden Jubilee and for the NHS in Scotland. “MatrixRib actually uses technology which was originally designed for neurosurgery and has been modified to allow us to implant locking plates and screws to perform rib stabilisations and fixations with significantly increased accuracy and precision. Not only does this have the potential to improve patient outcomes, but it allows us to carry out complex procedures which are simply not available with traditional methods.”

While some rib fractures are relatively straightforward and can be treated using pain management and bracing, in some instances they can lead to complications, including prolonged pain and hospitalisations, breathing problems, disability and in extreme cases even death. Surgical stabilisation (osteosynthesis) of severe rib fractures can reduce the likelihood of these complications, as well as minimising trauma to the chest wall.

We first used this advanced technology to perform a stabilisation on a patient who had suffered a severe fracture over two years ago.

Alan said: “The patient was in extreme discomfort as a result of the fracture and it was proving increasingly difficult to manage through pain relief. Traditional re-alignment had previously been attempted, but due to the severity of the fracture, had been unable to fully repair the damage which had been caused.”

“Using this new technology however, we were able to re-align the individual's ribs to a far greater degree and repair a large amount of the damage. While we will need to monitor their condition over an extended period of time, following surgery they were experiencing dramatically reduced pain and discomfort, with no signs of complications as a result of the surgery.”

“So far the results have been extremely positive, and going forward we hope to be able to offer this to more patients, continuing to expand our services and meet the demand of NHSScotland, leading the way in quality, research and innovation.”

Evaluating the end of the Scottish National Health Service (Scotland) Act 1978: the impact of devolution on public health

In the past, the Scottish National Health Service (Scotland) Act 1978 has been seen as a major step forward in devolution. The act transferred control over the health service from the UK government to the Scottish government, giving the Scottish government more power to shape and deliver health care services in Scotland. This has led to a number of positive changes in the health service, including increased local accountability and greater flexibility in service provision.

However, the act also had some negative impacts. For example, it led to the creation of a separate health service in Scotland, which has created some difficulties in coordinating services across the border with England. Additionally, the act has led to a significant increase in the cost of health care in Scotland, due to the duplication of services.

In conclusion, the Scottish National Health Service (Scotland) Act 1978 has had a mixed impact on public health in Scotland. While it has led to some positive changes, it has also had some negative consequences. It is important to continue to evaluate the impact of this act, in order to ensure that the health service in Scotland is meeting the needs of its citizens.
The Beardmore has been ranked the top Scottish hotel and number two in the UK in the LateRooms Simply the Guest Awards in the Large Hotels Category.

The awards are based on consumer feedback and reviews on the official LateRooms website, ranking the top 10 venues across the UK in a variety of categories.

Discussing the achievement, General Manager of the Beardmore Hotel and Conference Centre, Gary Rice said: “This is an absolutely fantastic accomplishment and we couldn’t be happier with the result. The hotel and conference industry in the UK is incredibly competitive, and with so many high quality establishments to choose from, we are delighted to have received such positive feedback from our customers and guests that we are not only considered as one of the top two in the UK, but the best in Scotland in the Large Hotels category.”

The LateRooms Simply the Guest nomination is the Beardmore’s second accolade for consumer feedback since the beginning of 2015, recently receiving the VenueVerdict Gold Accreditation for the fourth time in a row. This follows on from an incredibly successful 2014, which saw the hotel shortlisted for the prestigious Goldstar Green Tourism Awards as well as being awarded the TripAdvisor Certificate of Excellence.

Discussing their plan going forward, Gary said: “Awards like this emphasise just how important it is that every single person who comes here as a guest, visitor or conference delegate has the best experience possible. As we begin 2015, we are currently looking into some refurbishment of our bedrooms as well as continuing to find new, innovative and exciting ways to give our customers those all important added extras, whether this is free WiFi access or our electric car charging points, making sure we are providing the elite standard of service we are known for.”

Death certification

Changes to existing arrangements for the registration and certification of death will be in place in Scotland from Wednesday 13 May 2015. These changes, which are set out in the Certification of Death (Scotland) Act 2011, will:

- Introduce a new national review system to provide independent checks on the quality and accuracy of Medical Certificates of Cause of Death (MCCDs);
- End additional paperwork and fees for cremations to make the process the same for everyone, and;
- Mean that all deaths must be registered before either a burial or cremation can take place.

The new independent review service will be run by Healthcare Improvement Scotland (HIS).

Reviews be separated into two categories: Level One and Level Two.

In Level One reviews, a HIS medical reviewer will check the MCCD and speak to the certifying doctor.

In Level Two reviews, the medical reviewer will speak to the certifying doctor, and check relevant medical records to the case.

This new system will select approximately 10% of all deaths, randomly, for Level 1 reviews with additional Level Two reviews. This means that HIS will review around 6,000 MCCDs a year from across Scotland.

More information on necessary training and updated procedures will be distributed in the coming weeks.

For more information, head over to: http://www.healthcareimprovementscotland.org/our_work/governance_and_assurance/death_certification.aspx

The response has been overwhelming, but there is always more we can do. If you would like more information about the Eat Better Feel Better programme, head over to www.EatBetterFeelBetter.co.uk.
**Foodshare if you care**

Over the past 12 months, the West Dunbartonshire Foodshare Programme has helped thousands of families throughout the local community who are going through difficult times, by providing emergency food supplies.

We are proud to continue to support this fantastic cause, which helps so many who have found themselves temporarily without food in West Dunbartonshire.

Our Foodshare Donation Point is located at the Main Reception Area of the hospital, and we are looking for any and all donations of non-perishable foods, for example: tinned foods, packets of soup, rice, pasta, pasta sauces, tea bags, instant coffee and cereals.

We encourage all staff to please give generously and take the time to donate some food to our collection point.

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**Most improved Scottish Employer**

We were thrilled to be presented with the award as ‘Most Improved Employer’ at Stonewall Scotland’s Top Scottish Employers Launch 2015.

Held in Edinburgh, the event recognises the achievement of Scotland’s top performing employers for Lesbian, Gay, and Bisexual (LGB) staff.

One of our Sexual Orientation Equality Leads, Carole Anderson commented: “We are delighted to be awarded the Most Improved Scottish Employer award in the Stonewall Workplace Equality Index 2015. This is in addition to being ranked in the top five employers in Scotland as well as being the top NHS Scotland Board for the fifth year in a row. We’ve been working with Stonewall since 2008 and are delighted that our “equality and diversity journey” in delivering improvements for our staff and service has also resulted in us entering the Top 100 UK employers this year.

“We are passionate about helping all of our staff, irrespective of their sexual orientation, achieve their full potential and feel valued at work, and our work with Stonewall is a key element of this. We are proud that we have received so many accolades as a public sector employer and are ambitious to do even more to improve the workplace for our greatest asset – our staff.”

Our Chief Executive, Jill Young, added: “Our work on equality, diversity and inclusion is an important element of how we demonstrate our organisational values, especially valuing dignity and respect. We have worked hard to make these values even more visible and appreciate how they influence how we behave each and every day. This helps us provide a caring, personal and quality service for our patients, visitors and guests. “

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**Advances in hip arthroplasty**

We are delighted to announce that we will once again be hosting the National Advanced Hip Arthroplasty Course in the Beardmore Hotel and Conference Centre on Friday 15 May.

This event continues our commitment to providing high quality training, sharing best practice and helping advance the field of orthopaedics internationally.

Over 150 delegates from across the UK and Europe are expected to attend the 2015 Advanced Hip Arthroplasty Course, the only event of its kind in Scotland and free of charge to all attendees.

Mr Kamal Deep, the Organising Chairman and Consultant Orthopaedic Surgeon at the Golden Jubilee, said: “The theme of this year’s event will be the Art of Arthroplasty, with seminars throughout the day examining a range of topics, including complexities, complications and key decisions in hip surgery, prosthetics, computer navigation, robotics and reconstruction.

“Whether you are at the beginning of your career or are at an advanced stage in your career, it has never been more important to be constantly learning new things, studying new fields and keeping up to date with the latest developments. This is the ninth event of this kind we have run at the Golden Jubilee, and we are proud of our dedication to continue to provide regular, high quality, education to professionals in the field of orthopaedics.”

For more information on attending and to register, head over to [www.arthroplastycourse.com](http://www.arthroplastycourse.com).
One man’s mission to fight blindness

Lennox Webb, our Lead Ophthalmologist, has recently returned from a, one man, mission to Burkina Faso in West Africa.

Lennox has worked with Fighting Blindness, a charity set up to tackle eye disease in some of the poorest rural communities in the world for the last nine years, just last year being part of a team of 11 Scottish surgeons and nurses who carried out hundreds of life changing cataract operations for charity in Ethiopia.

Discussing this latest venture, Lennox said: “A colleague asked if I would be interested to view a hospital in North Burkina Faso, which was run by his parents in law. They had build the hospital from a bare patch of ground, having driven across the Sahara with a young family 40 years ago, and have run the facility ever since. I feel very strongly about this cause, and agreed to make the solo venture.”

The region, which was recently subject to a coup which toppled the former president, is badly affected by poverty, offering very limited facilities for treatment

Lennox said: “Even by the most extreme standards, the area suffers badly at the hands of poverty and remains an unstable region: the Commonwealth and Foreign Office warnings against travel to the area, due to marauders from Mali and the risk of being kidnapped, but encouragingly, the situation in the south appears more stable.

“It was a fascinating experience and I was extremely well looked after during my stay.

The patients were, for lack of a better term, exceptionally patient. Fortunately, a great many of them were helped with spectacles alone; I was able to provide these thanks to the generous donations of staff, patients and visitors from the Golden Jubilee and showed how important it is for anyone who can to donate their old glasses to the collection points located around the hospital.

“While I was there, I was able to carry out a small amount of cataract surgery, but to do so required conversion of a portable, slit lamp by welding together a stand, plus the use of old rubber tyres and a trusty LED torch... interesting to say the least, but well worth it given that this did enable some surgery to be carried out safely.

“The hospital would greatly benefit from other visiting specialists; at the moment, there is a single surgeon who covers all specialities, and does so to the very best of his considerable abilities, but needs help to make a difference to the people in the area.”

Donation points to help support people suffering from eye disease in some of the poorest areas of the world are located at the Volunteer Desk on the Main Street of the Golden Jubilee.
Have you taken the time to have a Knowledge and Skills Framework (KSF) personal development review with your manager and completed your eKSF (Electronic Knowledge and Skills Framework) online?

Your KSF is your chance to make the most out of your job and ensure you are getting the opportunities, training and satisfaction you deserve every day in your work.

Christine Divers, Head of Rehabilitation, discussed the advantages of KSF and how it has helped the Rehab team make the most of their services for our patients.

**What are the benefits of KSF?**

The Rehabilitation Department now talk about their "yearly review" using the eKSF as a tool to help capture evidence; structuring our reviews differently to ensure that ever member of the team has a consistent experience, both as reviewee or reviewer. We have also sent out that message that this is the most important and meaningful conversation they will have all year.

**What are the benefits to the individual?**

We have standardised and mapped our existing paperwork to ensure that, when completed, all of our team can demonstrate they are meeting the outline of their post. This has resulted in the review focusing more on the individual's development in the last year. At the start of the review process, they are invited to attend their review and asked to prepare using a template which prompts reflection on their achievements and learning opportunities. It also allows staff to discuss their challenges and any learning which can be taken from them.

**How does carrying out KSF help you manage your department?**

Feedback so far indicates that staff feel carrying out reviews have been beneficial and have helped to give them direction on their objectives for the year ahead. I believe that if staff feel valued and supported, they are more likely to display a “Can Do” attitude, which is very helpful for managing any department.

**Are there any instances you can think of that it has been particularly beneficial to someone?**

We asked staff for feedback via a questionnaire before we changed the process and again afterwards: so far the responses have all been very positive. One response said: “I felt we had time to make a definite plan over my future goals. Going into the review, I didn’t have a clear plan and I felt positive with the outcome after the review.” Someone has also commented: “I liked that the review was not in front of a computer, it gave a relaxed feel that I think should continue.”

**How does this help patients?**

Staff who feel valued and supported will work well as part of a team. Good teamwork and motivated staff leads directly to improved, positive outcomes for patients.

**What would you say to someone who has yet to complete their KSF?**

Don’t make it a paper exercise. This should be the most important conversation you will have all year: make it an opportunity to celebrate your achievements and discussing challenges by recording them as they happen throughout the year. EKSF is only a tool to record your evidence; the value of the review comes from the quality of the discussion. The importance of getting “buy in” from people that can make it happen is essential: these reviews have to be priorities and considered worthwhile across the organisation.
We’re expanding...again!

We will be carrying out 300 more primary joint replacements every year, following a recent announcement by the Scottish Government as we continue to grow as a national resource for the NHS in Scotland.

Already one of the largest orthopaedic centres in Europe, this announcement comes just one year after we expanded our services to accommodate 25% of all hip and knee replacements in Scotland. This latest development will allow us to carry out 4,500 procedures every year, ensuring that safe, effective and person centred care will be delivered quicker and to more patients than ever before.

Commenting on the development, our Chief Executive Jill Young, said: “As the home of innovation for the NHS in Scotland, our team carry out highly skilled, complex procedures on a daily basis.

“As demand increases for joint replacement treatment we believe it is our responsibility to make sure that as many people as possible are able to benefit from our high quality services and enhanced recovery programme: getting them back on their feet and living an active, healthy, lifestyle as soon as possible.”

This will continue to develop on our excellent track record in Orthopaedic procedures and innovations, having recently completed our first ankle replacement procedure and leading pioneering research into Computer Assisted Navigation for Total Hip Arthroplasty, dramatically improving accuracy and outcomes.

Health Secretary, Shona Robison, commented on the expansion, saying: “Our NHS is treating more patients than ever, and we know how important it is for patients to be treated quickly.

“I’m determined that we get the right structures in place to ensure everyone is seen within the 12 week treatment time guarantee and am working closely with boards to help them deliver this.

“This follows on from our commitment of £2.5 million from the Performance Fund to support Healthcare Improvement Scotland to continue to deliver quality improvement across the NHS, including enhancing the world-leading Scottish Patient Safety Programme.

“We are clear that all patients in Scotland should be treated as quickly and as effectively as possible, with the right care, in the right place, at the right time.

“With this funding, health boards are being given more support to achieve this.”

For more information on our official Collapse Procedure, contact Calum Cassidy on extension 5476 or by emailing Calum.Cassidy@gjnh.scot.nhs.uk.

We’re expanding...again!

... our team carry out highly skilled, complex procedures on a daily basis....

Beardmore classes

Monday
Boot Camp 5.15-6pm
Box Extreme 6.15-7.15pm
Core Busters 7.30-8pm

Tuesday
Circuit Training 6.30-7.15pm
Muscle Pump 7.30-8.15pm

Wednesday
Box Extreme 5.15-6.15pm
Circuit Training 6.30-7.30pm
Core Buster 7.45-8.15pm
Free parking!

We are in the fantastic position of being able to offer free parking for all members of staff, both in the Golden Jubilee and Beardmore Centres.

However, there have been some recurring issues of members of staff parking both in patient spaces in the hospital car park, and using guest spaces at the Beardmore Hotel.

In order for us to continue to grow as a national resource for NHSScotland, Conference Centre of Excellence and research and clinical skills facility, and to continue to provide free parking for all of our staff, it is important that all members of staff continue to play their part, avoiding parking in spaces reserved for patients, guests and disabled visitors.

We would like to thank you all again for your ongoing cooperation in this issue.

Sign language interpreting service

A new video call service is being rolled out across the UK to allow deaf people to use sign language to contact public sector services.

The Scottish Government announced the extension of the current NHS 24 online British Sign Language (BSL) Video Relay Interpreting Service pilot to the rest of the public sector in Scotland.

The new service, ContactSCOTLAND, will mean deaf people can speak to public services, such as their local council, doctor’s surgery and the Scottish Government, without needing someone to phone on their behalf.

Minister for Sport, Health Improvement and Mental Health, Jamie Hepburn, welcomed the new service, saying: “There are estimated to be around 6,500 people living in Scotland who use sign language and these people deserve to have the same access to services as everyone else.

“By extending this programme to cover all public sector services in Scotland, we are removing the barriers that some deaf people face when trying to get in contact with their local services.

Housden, we have no problem

Permanent Secretary to the Scottish Government, Sir Peter Housden Recently visited the Golden Jubilee National Hospital.

During his visit, Sir Peter met with our Chief Executive, Jill Young and our Chair, Jeane Freeman to discuss our quality framework, services, innovation work and recent expansions as a national resource for the NHS in Scotland.

Sir Peter also took a guided tour of the hospital and Beardmore Centre for Health Science, getting a first-hand look at some of the amazing facilities we have on site.

During the tour, Consultant Interventional Cardiologist, Margaret McEntegart, gave a live demonstration of our audio visual links to the Cardiac Catheterisation Laboratories. Consultant Anaesthetist Robi Zimmer also gave a demo of our state of the art 3D training programme.

Email Usage

It is essential that all staff are extremely careful when receiving email or Lync messages containing attachments or links to external websites. If you are in any doubt regarding the sender or content of an email do not open it, forward it or click on any links; contact eHealth service desk immediately on extension 5666.

This is a free service and can be used to contact all public sector bodies, but it is not suitable for emergency 999 calls. For more information, you can go to www.contactscotland-bsl.org.

For the majority of people who rely on sign language to communicate, they need to arrange to have someone to call on their behalf. This new project will mean deaf people can video call an interpreter at ContactSCOTLAND directly who will then speak to the relevant public sector organisation and act as an intermediary for the deaf person.

“This is a fantastic project and gives British Sign Language users equal access to public sector services, allowing them to enjoy greater participation in daily and public life.”

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Heart transplant patient Brian Keeley is finishing his work on a series of the members of staff one year after they saved his life.

Brian made headlines around the country last year, after making a miraculous recovery following an emergency heart transplant at the Golden Jubilee. At the time, however, the outlook for Brian was uncertain as for several months he had been too ill to be even considered for a transplant.

Brian said: “I felt like I wasn’t going to make it; time seemed to be running out by the day, so my partner Bibo and I decided to get married in the Intensive Care Unit (ICU) of the hospital.”

Their wedding turned out to be a major turning point. Within weeks, Brian was able to receive his transplant, making it home in time to celebrate Christmas with his family and new bride.

One year on, Brian is paying tribute to the staff of the Golden Jubilee, painting portraits from pictures he took while a patient in ICU. He commented: “A few days after my transplant, I began taking portrait photographs of some of the people who had been caring for me. At the time, I was so weak I could barely hold the camera still long enough to fire off a few shots. I was an artist and art teacher previously: my eyesight, coordination and dexterity have all deteriorated as a result of my illness, so it has been difficult to re-learn what used to come naturally, but I think it’s important to acknowledge, in some small way, how much they did for me, so I have been making paintings of the photographs of the team and I hope to exhibit the paintings at some point in 2015.

“The experience of suddenly becoming critically ill and being given the chance of a new life by having the heart transplant has been a life-changing one. I have come to realise how fragile life is and I am determined to make the most of it.”

Since going home from the Golden jubilee, Brian and Bibo celebrated their first wedding anniversary. Brian said: “When we got married, we literally had no idea what, if any, future we might have. As the first year became a reality, we decided to celebrate with a modest degree of style, booking into a country house hotel on the north Aberdeenshire coast.

“Because we never had the opportunity to do it on our wedding day, we got dressed up for breakfast: the staff actually thought we were guests for a wedding scheduled to arrive later that day, so I guess we got it right. It was a fantastic and emotional way to celebrate a day we feared we would never see.”

Brian continues to attend the Golden Jubilee for regular check-ups, recently attending the annual heart transplant patient’s lunch, meeting other transplant patients to share experiences and stories of their time at the Jubilee.

“People have said my recovery was a miracle, I always reply that if that’s true, then the team at the Golden Jubilee are the miracle workers. When I think back to it, I am overwhelmed by the tireless efforts and unflinching dedication of the staff. Their sheer professionalism, positivity and even humour in the face of difficult situations is astonishing. I owe the greatest debt of gratitude to each and every member of staff who played their part in keeping me alive, and helping me on the road to recovery.”

It’s a Wonderful Life

Healing Heroes

Following on from Brian’s incredible recovery and amazing tribute to our team who saved his life, we are delighted to announce that our team have been nominated for the prestigious Caring Heroes Award at the Daily Record Our Heroes Award Ceremony 2015.

The Awards take place every year, honouring people from all across Scotland for their extraordinary achievements and recognising those who have gone above and beyond to help people in need.

Brian nominated our team, “would not be here today without the knowledge and skills” of our team and, of course, the consultant who carried out the life saving operation Phil Curry.

Brian told the Daily Record: “I was staring death in the face yet Dr Curry and his incredible team fought to give me a second chance. I’ll be forever grateful.”

“They are heroes and their hard work and dedication deserve recognition.”

You can find out more about the Heroes Awards and Brian’s story by head over to http://www.dailyrecord.co.uk/news/real-life/heroes-2015-heart-transplant-patient-5115058.
Scottish PACS is currently undergoing major changes.

Over the next two months, we are upgrading the National Data Centre, offering improved stability for National PACS using a Global Work Lists (GWL) to view images.

The current system will be adapted, meaning users will work from the GWL node. This will improve clinical effectiveness by giving clinicians access to the Patient Mini Archive (PMA), allowing access to all previous radiology history, a global view of all examinations carried out in Scotland and upload new exams for their patient from their local server.

These changes will be introduced in phases, going live on all sites by Monday 13 April 2015.

Work is already underway to replace the Helix patient administration system with a new system called TrakCare. TrakCare (PMS) is a more advanced system which is used in many other NHS Boards including Greater Glasgow & Clyde.

The first phase of implementation is scheduled for completion in early summer 2015 and will focus initially on patient administration functionality.

The new system will help staff to manage patient referrals, waiting lists and will also support inpatient bed management. All outpatient clinics will also be coordinated using TrakCare as will the control of patient case notes. Other departmental system such as eForms, PACS and SCI Store will not be affected by the introduction of the new system.

Safely replacing hospital systems requires very careful planning followed by a significant amount of work in partnership with GJNH staff and the system supplier InterSystems.

The overall work programme is separated into several phases including, data migration, new system build, testing and staff training. The main focus at this stage is the transfer of data from the Helix system to TrakCare and the customisation of the new system for GJNH needs. It is anticipated that this work will soon be completed, after which the team will move on to system testing followed by a comprehensive staff training phase.

As we move forward, further details including progress updates will be provided for all staff via staff bulletins and other communication routes.

Should you have any immediate questions or would like further information, the implementation team can be contacted via the email group ‘TrakCare Enquiries’ or trakcare.enquiries@gjnh.scot.nhs.uk

In January, we hosted our annual lesbian, gay, bisexual and transgender (LGBT) networking event with SWAN – Scotland’s largest LGBT network, focusing Mental Health, Wellbeing and Dignity at Work. These events are open to all staff, regardless of sexual orientation or gender identity.

Staff from the Golden Jubilee, the Beardmore and SWAN members from across the public and private sector attended the event.

The event included a presentation from Tony McLaren, National Coordinator for Breathing Space and Living Life covering services offered by the organisations to help improve mental health and wellbeing, and the partnership working which has been achieved along with their production of tailored information for LGBT people.

Two of our Board Diversity Champions, Stephen Hughes and Jane Christie-Flight also gave a short presentation about how their role supports dignity at work and improves the workplace for staff and our care for patients.

Speaking about the event, Jane said, “the event was well-attended and a number of our Diversity champions came along. We discussed how the role of diversity champion is vital to our Board Values work and is a real asset to our teams and makes talking about equality issues more real to staff.”

For more information on the SWAN network, go to www.swanlgbt.com or for a confidential chat or for further information on our LGB work, please contact either of our sexual orientation leads below:

Carole Anderson, extension 5522 carole.anderson@gjnh.scot.nhs.uk
Jane Christie-Flight, extension 5xxx jane.christie@gjnh.scot.nhs.uk
Golden Verdict for the Beardmore

The Beardmore successfully secured their fourth consecutive Gold Accreditation from VenueVerdict.

The prestigious accreditation is based on feedback from approximately 370 venues all across the UK, taking into account more than 22,500 pieces of feedback from customers in the fourth quarter of this year.

The market research agency BDRC Continental award the Gold Standard, to only those venues achieving a twelve-month Net Promoter Score (NPS) of +70 (scores range from -100 to +100). NPS is a progressive measure of customer service performance which acknowledges the power that excellent service has when it comes to driving positive word of mouth for a brand.

Director of the Beardmore, Bronagh Bell, commented: We are absolutely delighted to receive our fourth consecutive VenueVerdict Gold Accreditation. We are constantly looking for new ways to develop and expand our services to deliver the highest possible standard of service in the fast paced world of modern conferencing, and this accreditation is a testament to this hard work.

James Bland, Client Services Director at BDRC Continental, congratulated the Beardmore on its achievement saying: “The team at the Beardmore should be extremely proud of this accomplishment. Our criteria are very selective and require organisations to meet a diverse and specialised series of objectives, demonstrating consistent dedication to improvement and delivering excellence across the organisation; to have accomplished this for the fourth time is a fantastic achievement.”

Bronagh added: “Continuous improvement and investment is vital in all dedicated hotel and conference venues. We believe it is essential to develop those all important added extras, as well as guaranteeing attention to detail and personalisation to all of our customers. Having recently invested in our Wi-Fi to ensure all clients have fast, reliable, internet access and opening our new Innovation Centre, we are now moving forward and looking into the remodelling of our 168 bedrooms to create the ideal guest room as we work towards our 2020 strategy.”

The Beardmore has had a very successful 12 months, receiving the TripAdvisor Certificate of Excellence, as well as becoming the only Scottish venue to be accepted into the prestigious International Association of Conference Centres (IACC).

Blood Transfusion

Staff completing the Blood Transfusion Request form should ensure that the form includes information on the patient’s transfusion history, pregnancy status and if the patient has any known antibodies. This information will influence the time the sample is stored in Blood Bank and can impact on availability of blood components.

Patients who have been transfused or pregnant within the three month period before the planned transfusion may be in the process of developing red cell antibodies at the time the blood sample is drawn. For this reason the following table showing timing of sampling in relation to time of planned completion of the transfusion must be adhered to. This will minimise the risk of transfusing incompatible blood.

<table>
<thead>
<tr>
<th>Patient Type</th>
<th>Sample Storage times (plasma stored at -30°C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient transfused or pregnant in the last three months</td>
<td>Up to three days</td>
</tr>
<tr>
<td>Patient not transfused and not pregnant in the last three months</td>
<td>Up to 14 days</td>
</tr>
</tbody>
</table>

For more information, please contact Elaine Harrison on extension 5225 or by emailing Elaine.Harrison@gjnh.scot.nhs.uk.

Patient Phone Calls

As you know, patient confidentiality is one of our top priorities and it is important that all staff are aware of the correct procedure for dealing with phone calls and email enquiries looking for details about patients at the Golden Jubilee.

If you receive a phone call or email asking about one of our patients, whether they claim to be family or friend, you must get direct consent from the patient or their next of kin before providing any information.

This includes confirming whether or not a patient is being treated at the Golden Jubilee or staying at the Beardmore Hotel, what ward they are staying on and any update on their condition.

If you are unable to obtain patient consent, or have any reason to believe that the phone call is suspicious, contact the Communications Department on extension 5195 or 5175.
Physiologist receives elite accreditation

Cardiac Physiologist, Ruth Kelly, recently joined an elite group of Clinical Physiologists in the UK, achieving accreditation in Transoesophageal Echocardiography (TOE) from the British Society of Echocardiography.

A transoesophageal echocardiogram is performed by inserting a probe into the oesophagus.

By inserting the transducer into the oesophagus, TOE provides detailed images of the heart valves and function using high frequency sound waves. This is especially useful during cardiac surgery when, for example, comparisons can be made after an artificial valve has been fitted.

Ruth commented on the qualification, saying: “Traditionally, TOE would have to be carried out by a clinician but this can sometimes be difficult to accommodate with the many demands on their time, and can occasionally lead to delays in patient treatment.

“Receiving this formal accreditation from the British Society of Echocardiography allows me to carry out these scans at the time of treatment, freeing up Consultant time, reducing treatment times and improving the service we are able to provide as a whole. Ruth is one of the very few Clinical Physiologists to receive this accreditation in the UK, having completed two years of both practical and theoretical studying to qualify.

She said: “This is a fantastic opportunity for my professional development and I can’t thank the Cardiology Department and the Golden Jubilee as a whole for supporting me through the process.”

Our Medical Director, Mike Higgins, congratulated Ruth, saying: “At the Golden Jubilee we are committed not only to ensuring that we continue to develop new and innovative ways to ensure our patients receive the highest possible standard of care, but that our staff have the opportunity to develop their skill set and get the most out of their work.

“We are very proud of Ruth for this fantastic accomplishment and are proud to have played our part in supporting her through her studies.”

Detect Cancer Early turns three

Health Secretary Shona Robison recently celebrated the third anniversary of the “forward thinking” Detect Cancer Early (DCE) programme, dedicated to raising awareness of the importance of getting checked as early as possible for signs of cancer.

As the home of regional and national lung services for the NHS in Scotland, we know the huge difference it can make if people are diagnosed early.

Established in 2012, the programme has already made amazing progress in encouraging individuals to get checked as early as possible for signs of cancer. Since its launch in the programme has seen a 50% increase in over 55 year olds from areas of deprivation who no longer said they would “feel silly” going to a doctor with symptoms they thought could be lung cancer. A sixth more men of over 50 also now believe it is possible to survive lung cancer.

Shona Robison said: “It is fantastic to reach this important milestone. Over the last three years, DCE has adopted bold approaches to make people aware of the signs and symptoms of cancer, invested in innovative projects and delivered advancements in screening. It will be a while before we can see the full impact of the programme but we’re starting to see positive results emerge.

“We’ve seen an important shift change in attitudes Scots have towards the disease, with more people recognising the benefits of early detection and value of screening. Continuing to drive this awareness of the benefits of early detection is key to getting people to act sooner, rather than later, and increasing survival rates.

For more information on DCE, head over to www.getcheckedearly.org.
The Edenred Childcare Vouchers Toolkit can be accessed by clicking on the following link: http://www.edenred.co.uk/childcare-vouchers-communications-toolkit2/cvtoolkit/marketing-materials/

To order your forms, please email Derek Moir in Stores on Derek.Moir@gjnhs.scot.nhs.uk.

So what is MUST?

We have recently updated our Malnutrition Universal Screening Tool (MUST) for all inpatients who have to stay with us longer than 24 hours.

But what does this mean? Team Leader of Clinical Nutrition, Stephen Hughes explains.

What is MUST?

MUST was developed by the Malnutrition Advisory Group (MAG) in 2003 and is the most commonly used screening tool in the UK, approximately 85% of Hospitals. MUST was developed by a multi-disciplinary group of health professionals and patients to detect both under-nutrition (poor protein-energy status, referred to as malnutrition in this document) and obesity in adults of different ages and diagnoses in different healthcare settings.

What is the benefit of MUST for patients?

The tool categorises subjects into low, medium, or high risk of malnutrition and identifies the obese: providing guidance on the interpretation of measurements and suggests appropriate care. It also allows easy identification of patients who are at risk of malnutrition, and allows faster intervention from nursing staff and dietetic services.

How has this changed from the old system?

This version of MUST has been adapted locally, at the Golden Jubilee, into a single document which is easier to monitor a patient over time. It includes a step-wise approach to assessment and a colour-coded, percentage weight loss chart. All of this has been validated by BAPEN.

Who needs to know about this?

If you are nursing staff or HCA working in ward areas where patients stay for more than 24 hours at a time.

What do they need to do differently?

Current MUST scoring within Integrated Care Pathways (ICPs) should be scored through and the new MUST booklet used.

Any additional comments?

For any queries around MUST documentation, please contact the department of Clinical Nutrition and Dietetics on extension 5798/5342. You can also find out more at the following links:

http://www.bapen.org.uk/pdfs/must/must_full.pdf
http://www.bapen.org.uk/screening-for-malnutrition/must/introducing-must

This document is now available from Stores and must be used instead of the current pages in the Integrated Care Plans.

MUST is also the recommended screening tool with the new Food, Fluid and Nutritional Care standards (Health Improvement Scotland 2014).

Renovations have recently finished on Ward 2 West, allowing us to continue to provide the highest possible standard of care for our Orthopaedic patients as we continue to expand our services on behalf of the NHS in Scotland.

2 West Re-opening

The Government has announced plans for a Tax-Free Childcare (TFC) scheme to start from autumn 2015. The new scheme will provide working parents and also self-employed workers with another option for tax savings on their childcare, directly through the Government. The new scheme will commence in autumn 2015, at the earliest. Our existing employer funded Childcare Voucher scheme with Edenred will continue after this date for those who have joined the scheme prior to the commencement of the new one in autumn 2015. It will then be closed to any new joiners.

Some parents will not be eligible to claim under the new TFC Scheme, including couples where one parent is not working and parents who claim for children older than 12 years old. Staff should consider whether to join the existing the scheme before autumn 2015 in order to be given the choice in case they are not eligible for the new scheme and to ensure that the best scheme is accessed for individual circumstances.
Scarred for Life

We are proud to support the Somerville Foundation Scarred For Life Campaign which featured several of our Scottish Adult Congenital Cardiac Service patients.

From Friday 13 February until Sunday 15 March, the Scarred for Life Campaign hosted a photo exhibition of adults born with Congenital Heart Disease (CHD) bearing their scars in a celebration of life will be held in the Central Hall of the Kelvingrove Museum and Art Gallery.

The exhibition aimed to tell the story of a population hidden in plain sight by empowering patients living in Scotland and raising awareness of the unique needs of adults with CHD.

Throughout 2014, the year of the Glasgow Commonwealth Games, we encouraged everyone to take up a personal fitness challenge and become more active in their day-to-day life. This challenge could be anything, from climbing Ben Nevis, to running a marathon, to deciding you will take the stairs every day.

169 staff registered to take up our Commonhealth Challenge; at the end of the year, we asked these people to take a survey to tell us about their persona challenge, their experience, whether they managed to complete it, how they felt and if they had been encouraged to continue.

The results are in...

- 24% of registrants took the survey;
- 89% completed their challenge;
- 85% claimed they felt better physically;
- 64% felt better psychologically;
- 67% were physically fitter;
- 65% found they were more active in general.

The most important figure to come out of all of this, is that 100% of staff who took part said they would continue to be active, which is fantastic news.

It’s never too late!

2014 may be in the past, but it is never too late to take up your own fitness challenge and make this year the year you take control of your life.

What can I do?

Activities from staff last year ranged from doing the 5x50 challenge (5 kilometres every day for 50 days), cycling, walking, hill climbing, open water swimming, running, going to the gym, Zumba, roller skating, football, taking the stairs and anything else which gets you up and active in 2015.

Commonhealth Awareness Day

As an organisation we take the health and wellbeing of our staff very seriously, and recently ran the Commonhealth Awareness Day 2015. This invited people from a variety of health and sporting backgrounds to meet staff, share information and offer advice on topics.

Representatives from a variety of organisations came along to cover a range of topics including: relieving stress (SAMH - mental health association), personal fitness (Beardmore Health Club, Andy Forrest and West Dunbartonshire Leisure), golf (World of Golf), jogging (Jog Scotland) cycling (the Bike Station), weight loss (Weightwatchers) and open water swimming.

More information on all of these activities can be found by heading over to the Commonhealth link on Staffnet at the following link: http://staffnet/gjnh/commonhealth/index.asp?v=qFzPZiWY_Gs

5x50 Challenge

One of the most popular activities in 2014 was the 5x50 Challenge. The Challenge begins on Sunday 29 March for 50 days to get you in shape for summer 2015. The 5x50 challenges you to complete 5km or 30 minutes exercise every day for 50 days; this can be anything from walking, cycling, swimming, running, playing a round of golf, yoga or exercise classes.

You can register for the challenge at the following link: http://www.5x50.org

Step Count Challenge

You can also register your steps and increase your activity by joining the Jubilee and Beardmore team in taking a virtual tour of the world. A team will be set up online, asking you to join and see how far the team is walking, taking pictures and sharing them on route, virtually. There are several routes to choose from, and allows you to virtually see where you have travelled.

This year, our aim is to encourage staff to ‘Get active, be fit, keep healthy’ and we will be providing information on healthy eating and taking up a physical activity.

To express an interest in joining any of these activities, contact Birgit Clarke by emailing Commonhealth@gjnh.scot.nhs.uk or phoning extension 5349.
Recently, we have been risk assessing all patients for Carbapenemase Producing Enterobacteriaceae (CPE).

What are Carbapenemase Producing Enterobacteriaceae (CPE)?

Enterobacteriaceae is the name given to a group of bacteria that live harmlessly in the gut of all humans and animals and help us digest food. When the bacteria live harmlessly in the gut without causing any problems, this is called colonisation. When these bacteria get into the wrong place, such as the bladder or bloodstream, they can cause infection.

Carbapenems are a powerful group of antibiotics that are often used for infections where treatment with other antibiotics has failed.

Carbapenemase Producing Entrobacteriaceae (CPE) are a strain of this bacteria that can produce enzymes/chemicals called carbapenemases. These chemicals can destroy carbapenem antibiotics and this makes the bacteria ‘resistant’ to the antibiotic.

Why does carbapenem resistance matter?

Until recently, doctors have relied on carbapenem antibiotics to treat certain difficult infections when other antibiotics have failed. In a hospital where there are many vulnerable patients, spread of bacteria that are resistant to antibiotics, including CPE, can cause problems.

The way in which CPE bacteria are resistant to carbapenem antibiotics can be spread to other bacteria making them resistant to these antibiotics too.

How is CPE spread?

CPE is spread via direct contact with the patient or indirectly from the patient’s immediate care environment (including care equipment). Consistent application of Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs), specifically contact TBPs is required to prevent the spread of CPE.

Why are patients screened for CPE?

By identifying patients who are colonised with CPE, we can make sure that they receive the best and most appropriate care to prevent the spread of CPE and to prevent CPE infections

How are we screening patients?

At pre assessment or on admission, all patients will be risk assessed based on the following questions:

- Has the patient been transferred from any hospital outside Scotland?
- Has the patient been hospitalised outside Scotland in the last 12 months?
- Has the patient had holiday dialysis outside Scotland?
- Has the patient had a previously identified CPE colonisation/infection?

If a patient answers yes to one or more of these questions, screening for CPE is required by either rectal swab or stool sample.

For further information, contact the Prevention and Control of Infection Team on extension 5808.
Workforce Monitoring – help us to meet your needs

What is monitoring?
Monitoring is a way of measuring change in our workforce by collecting data, identifying issues that could affect staff and service users.

What information do we monitor?
This information includes gender, age, sexual orientation, transgender status, marital/civil partnership status, religion, ethnicity, pregnancy status and any disability.

Under the Equality Act, these are known as “Protected Characteristics” and it is important for your health, wellbeing and satisfaction at work that we collect information which is directly relevant to our legal responsibilities as your employer.

Why do we monitor?
We have a responsibility to demonstrate our commitment to equalities by gathering information on our staff in relation to the protected characteristics and report on areas such as:

- Promotions
- Training Opportunities
- Number of staff with a current PDP/PDR
- Disciplinary/grievance hearings related to the protected characteristic(s) of the employee affected.
- Reports on “reasons for leaving” related to any of the protected characteristics.

This helps us to understand our workforce, making sure that our policies and processes meet your needs. This also allows us to tell if our recruitment practices are fair and equal. Your information will be kept secure and no one will force you to provide information.

We review this information on a regular basis, reporting on key messages every six months to our Senior Management Team, Partnership Forum and Board. This is then published on the website and staffnet.

Our most recent report found that:

- During the six months prior to the report, 42 staff members have commenced maternity leave and 20 have returned from maternity leave.
- The number of staff taking Maternity Leave has increased by 47,810 hours to 67,975 hours in the past six months. The number of staff taking Paternity Leave has also increased over the past six months by 199 hours. This equates to three additional members of staff accessing this leave.
- According to the last UK Census, 45% of adults are noted as married (or remarried), whilst 35% of adults have never married or registered a same sex civil partnership. In our current staff, only 26.2% are listed as married, significantly lower than average. It should also be noted that we do not currently collect information on civil partnerships. The Board has a high percentage of unknown information in relation to the longer serving existing employees (51%).

Since our last report:

- 31% of our new starts were male. This still left 69% of new starters being female, which is in line with our current gender demographic in the Board. This figure is in line with our staffing complement. This is a slight increase from the previous six-monthly report which highlighted that 26% of new starts were male.
- There has been little change to the information held in relation to disability, with the number of staff for whom no information was held sitting at 13.4%. Of our current workforce, 1.15% reported additional members of staff accessing this leave.
- Of our current workforce, 1.15% reported that they have a disability. This is a slight increase from our last six monthly report.

Our plans to improve our workforce information
We are planning to increase our workforce information, reducing areas we have limited knowledge of. We will be contacting departments you are willing to update our current information. This will be confidential, with information only passed between employee and the HR team.

For further information on monitoring information, please contact: David Miller, Acting Director of Human Resources and Equalities Lead on extension 5039.
We are delighted with the recent announcement from the Cabinet Secretary for Health and Wellbeing and Sport that our Chair, Jeane Freeman, has been re-appointed to our Board.

Jeane is a senior consultant in public affairs, specialising in providing strategic policy advice to private and public sector organisations at Board and CEO level. With over 25 years’ experience in public policy in the private and public sectors, working in the Office of the First Minister, as a senior civil servant, Chief Executive of Scottish and UK NGOs, UK parliamentary researcher and in broadcast media, Jeane Freeman has a wide experience of public policy implementation and delivery together with experience in financial management and corporate governance. In 1995 she was awarded an OBE for service to criminal justice. She is a member of the Chartered Institute of Management and the Association for Scottish Public Affairs.

We are also proud to announce that Phil Cox and Mark MacGregor have been re-appointed.

Phil has been a member of our Board since October 2011, bringing more than 30 years of experience with the Royal Air Force and the Ministry of Defence to the role. Mark MacGregor has also served since 2011, and is currently a Consultant Physician Nephrologist within NHS Ayrshire & Arran.

We are delighted to announce that Consultant Cardiologist, Dr Derek Connelly, has been appointed as our new Educational Lead for Regional and National Medicine.

We are also happy to inform you that Dr Jackie Church has been appointed to the post of Clinical Lead for Cardiothoracic and Intensive Care Units. This will begin from Wednesday 1 April. We would like to thank Robyn Smith for all of her contributions as lead for the last couple of years.

We recently bid a fond farewell to April Molloy, our Acting Head of Clinical Governance, after 16 years with the organisation. She will be missed by us all, and we wish her all the best in the future.

We are delighted to welcome Carly McCann to the team at the Golden Jubilee National Hospital. She has joined our Learning and Development Department as a Learning and Development Administrator for the organisation.

Marie Maxwell is leaving us after 12 years in 2 West as a Registered Nurse to take up a more relaxing lifestyle. All her colleagues in the Orthopaedic Department wish her well in the future.

Catherine Fell, Registered Nurse, has completed her nine month internship in 2 West and has now successfully gained a new position in the Victoria Infirmary.

We also said goodbye to Hamish Walker, who left the Golden Jubilee this month to pursue new opportunities and challenges in Southampton. Members of staff from around the hospital gathered in the Conservatory to wish Hamish all the best, and thank him for all his contributions towards our Scottish Adult Congenital Cardiac Service.

Recently we were delighted to take part in the Worldwide Afternoon Tea in support of Nutrition and Hydration Week 2015.

Nutrition and Hydration Week takes place every year, dedicated to reinforcing the importance of nutrition and hydration as an essential part of quality care for patients.

To support this message, organisations around the world took part in the afternoon tea, allowing patients, families and visitors to be a part of the event. We provided tea and sandwiches to individuals in waiting areas around the hospital, and even taking boxes of goodies to patients in their beds.

The Beardmore Centre for Health Science (BCHS) recently hosted the Association of Surgeons in Training conference.

As part of #AsiT2015 delegates visiting the BCHS participated in a wide range of pre-conference courses including vascular, orthopaedic, neuropathic and laparoscopic surgery.
Pension Scheme
From Wednesday 1 April, a new NHSScotland Pension Scheme will be introduced.

How does this affect me?
Not everyone will have to move to the new NHS 2015 scheme. Members close to retirement will have their current pension provisions fully protected and will not move to the new scheme; members who are slightly further from retirement will have what is known as tapered protection, meaning they can delay joining the scheme until a later date. All other members will move to this new scheme on Wednesday 1 April.

How does the NHS 2015 Scheme Work?
The scheme works on a Career Average Revalued Earnings basis, known as CARE. This is different to the Final Salary approach where pensions are based on salary at, or close to, retirement. The benefits you have earned up to the point you move to now are protected, and these will continued to be worked out with reference to your Final Salary.

iMatter Update
Staff in Group One, including the Executive Team and Surgical Services Division, recently completed the iMatter Staff Experience questionnaires sharing their experience of their team and of the organisation.

We want to thank everyone for taking the time to complete the survey as we had an absolutely fantastic response rate, with most teams achieving the required 60% rate and some even excelling at 100%.

What comes next?
Now that staff in Group One has completed the questionnaires, and if they achieved a 60% response rate, team managers will be issued with their team reports from Monday 30 March.

The high percentage returns ensures that individual responses to the questionnaire are not identified and presents a more realistic score for the team overall.

The team report combines the individual responses to calculate an overall engagement rating, also known as the Employee Engagement Index (EEI) score, to provide the measure of engagement.

Team managers will arrange to meet up with team members to feedback the detail of their report and jointly agree on areas for improvement.

iMatter will be introduced to Group Two, the Corporate and Regional and National Medicine teams, from Monday 8 June. Awareness Raising Sessions will begin running from Tuesday 5 May and we want to encourage all staff in Group Two to take the time to attend these 30 minute sessions to find out more about iMatter, why this is such a great opportunity and what to expect from the questionnaire.

What is iMatter?
iMatter is a Continuous Improvement Cycle that focuses on understanding and improving staff experience and employee engagement in NHSScotland. This was a tool developed by NHSScotland staff for NHSScotland staff.

iMatter is a short survey tool that allows your views and experience to be gathered at a team level and used as the basis for development and changes to be made both within your department and at an organisational level.

Every member of staff are being given the chance to let us know their honest experience at work; in turn, this will let us know what matters to you and allow us to support continuous improvements in employee engagement, using this to directly improve patient experience in the Golden Jubilee.

The questionnaire can be completed either online or on paper and was designed to gauge the collective views from you and your team on your workplace experience over the last 12 months. This is broken down into three broad categories of questions, asking your views on:

- Your experiences as an individual in this organisation
- Your team and direct line manager
- The organisation.

Why introduce iMatter now?
Employee engagement has a very positive impact on both staff and patient experience. Some of the specific benefits include:

- Higher staff morale and motivation
- Less absenteeism and stress
- Greater efficiency, productivity and effectiveness
- Stronger financial management

Full details of the new scheme can be found at www.2015.sppa.gov.uk for more information.
From a patient’s perspective and thinking about clinical teams, evidence shows that higher engagement and improved staff experience results in:

- Enhanced patient experience
- Fewer errors
- Lower mortality
- Lower infection rates

iMatter aims to improve staff experience by listening to staff responses: teams will have the opportunity to discuss the results from the survey and develop actions to improve areas identified.

These benefits relate to everyone, whether you work with patients or not, improvements in your service will make a difference to the standard of care they receive.

**Why is ‘employee engagement’ so important?**

We realise that good staff experience has a direct and positive influence on patient experience, but also supports high staff morale and positive employee health and wellbeing. The experience of a single individual can make a huge difference to this. Measuring the experience of staff in the workplace offers a valuable opportunity to understand and address the factors that matter to you and are impacting on your day-to-day work and ultimately continue to improve on providing person-centred care.

To do this effectively requires the input and involvement of every member of the team: empowering you and supporting practical improvements to be made.

**Rollout Activity Plan**

The following timescales will apply to all groups: a new group will run every 16 week period, and you will have up to 28 weeks to describe your improvement cycle.

<table>
<thead>
<tr>
<th>Week(s)</th>
<th>Roll-Out Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1- 8</td>
<td>iMatter Briefing Sessions with Divisional Team Managers and staff</td>
</tr>
<tr>
<td>5</td>
<td>iMatter Questionnaire sent out to staff</td>
</tr>
<tr>
<td>12</td>
<td>iMatter Team/Divisional Reports generated</td>
</tr>
<tr>
<td>16</td>
<td>iMatter Team feedback by Team Managers</td>
</tr>
<tr>
<td>Scheduled</td>
<td>iMatter Action planning</td>
</tr>
<tr>
<td>over next 2</td>
<td>iMatter Storyboard Development</td>
</tr>
<tr>
<td>months</td>
<td></td>
</tr>
<tr>
<td>6 months</td>
<td>‘Values Pulse Survey’ issued to gauge progress in</td>
</tr>
<tr>
<td>after launch</td>
<td>behavioural terms.</td>
</tr>
<tr>
<td>1 year after launch</td>
<td>Begin cycle again.</td>
</tr>
</tbody>
</table>

Group Two will roll out on Monday 8 June:

<table>
<thead>
<tr>
<th>Roll-out Group</th>
<th>Date</th>
<th>Division</th>
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</thead>
<tbody>
<tr>
<td>Group 2 – Corporate</td>
<td>1/6/2015</td>
<td>Corporate Functions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beardmore Hotel &amp; Conference</td>
</tr>
<tr>
<td>Group 2 – Regional &amp; National Medicine</td>
<td>1/6/2015</td>
<td>Clinical Services Teams</td>
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<td></td>
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<td>Cardiology Team</td>
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<tr>
<td></td>
<td></td>
<td>Medical Team</td>
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</tbody>
</table>

This is an exciting opportunity to contribute towards real change and improvements within your team. For more information, check out this video on employee engagement: [www.youtube.com/watch?v=xqO3sfRZDAE](http://www.youtube.com/watch?v=xqO3sfRZDAE).

**Healthcare Associated Infection (HAI) Standards**

The 2008 HAI standards have been revised. These apply to all patients, their representatives, the public and all healthcare organizations and practitioners.

These standards are:

- Leadership
- Education
- Communication
- HAI surveillance
- Antimicrobial Stewardship
- Infection Prevention and Control policies, procedures and guidance
- Insertion and maintenance of invasive devices
- Acquisition of equipment

**Implementation and Inspection**

All NHS Boards will adopt the HAI Standards by Saturday 2 May 2015. All Boards will be required to demonstrate this as part of their Healthcare Environment Inspections.

The standards can be accessed on Q pulse COR-IC-STA-5 and http://www.healthcareimprovementscotland.org/our_work/patient_safety/programme_resources/hai_standards.aspx

For more information, contact Sandra McAuley by emailing Sandra.McAuley@gjnh.scot.nhs.uk or calling extension 5909.


For more information, please contact the iMatter Project Manager Birgit Clark on extension 5349 or email birgit.clark@gjnh.scot.nhs.uk.
Our SACCS Nurse Practitioner, Jim Mearns, will be running a series of marathons to raise money for research into children’s health charity, SPARKS.

SPARKS is a charity dedicated to improving the health of babies and pregnant women by funding research into conditions such as congenital heart disease and childhood arthritis.

Jim said: “SPARKS is a charity which believes every child matters and supports research into medical conditions which impacts on children’s health. I am very keen to raise money for a charity with a strong focus on research as I believe it is the best way to change the future for these children.

“In my own work in SACCS, I support young people who were born with a heart condition and I see how this affects their day-to-day lives. From a personal standpoint, by own daughter was born with Juvenile Arthritis and I know that more research is needed to make a difference and improve outcomes in this condition.

Jim will be running the London Marathon in April, Edinburgh Marathon in May, and the Devil o’ the Highlands Ultramarathon (43 miles) in August, with several more to be confirmed.

Jim said: “Training is a bit behind schedule because of nagging Achilles injuries which have forced me to take some time off, but I am back at it and I will be on the starting line in London, even if I have to do it in a bear suit!”

So far, Jim has raised £2,000 for the charity, £771 of that being raised at the Cake and Curry day in the Golden Jubilee.

We are delighted to announce that our team recently raised more than £2,500 as part of the British Heart Foundation’s nationwide Wear it, Beat it day.

Wear it, Beat it day 2015, invited people to wear something red to help raise awareness and money to help support individuals and families affected by heart disease.

Delia Alexander, our Cardiothoracic Rehabilitation Nurse at the Golden Jubilee, organised the event and brought together individuals from departments around the hospital and hotel to help support the event: holding a bake sale, book sale and competitions across the site.

Delia Said: “The team at the hospital have been incredibly supportive and a lot of people played a key role in making the day a success. Special thanks have to be given to Liz Vasey, Liz Grant and Sharon Robinson from the Rehab Department. Elizabeth Rodgers and her enthusiastic volunteers, along with Pamela Mailler and the catering team and Tomoyo our Dietician were also fantastic, putting together some delicious, healthy options for the canteen, with menus and recipes available for all staff and patients.

“We want to thank everyone who helped out on the day and supported the event by wearing something red to spread awareness and raise money for this fantastic cause.”

We want to encourage everyone to support Jim in this fantastic cause, by heading over to http://www.justgiving.com/jim-mearns1 and making a donation.