

Daily update (11 November 2025, 9.15am)

Topics in this Core Brief include:

- Remembrance (Armistice) Day
- QEUH first in Scotland to introduce rapid point-of-care cardiac testing
- Let's talk about... webinar: Addressing Men's Health
- Let's talk about Hand Hygiene Compliance and Observations
- Reminder applications close at the end of next week!
- Active Staff congratulate the winner of the annual survey prize draw

Remembrance (Armistice) Day

Today, on Remembrance Day, we come together to honour the courage and sacrifice of the Armed Forces – past and present.

At **11.00am**, we invite all staff to join in the **two-minute silence**, wherever you are, to pause and reflect. This moment allows us to express our gratitude for those who have served and to recognise the continuing contributions of the Armed Forces Community within NHSGGC.

If you are working on-site and would like to use a quiet or outdoor space during the silence, please speak with your line manager. Those working remotely are encouraged to participate in a way that feels meaningful in your own setting.

Thank you for joining us in this collective act of remembrance. Together, we honour the bravery, service, and commitment of all who have served and continue to serve.

QEUH first in Scotland to introduce rapid point-of-care cardiac testing

Tomorrow (Wednesday 12 November, 8.00am), the Queen Elizabeth University Hospital will become the first hospital in Scotland – and one of the first major Emergency Departments in the UK – to introduce Point-of-Care (POC) high-sensitivity troponin testing.

This new system delivers cardiac blood test results in under 15 minutes at the patient's bedside, compared with up to 90 minutes through traditional laboratory testing. It supports a new Emergency Department-only 0–2 hour chest-pain pathway, enabling clinicians to make safe decisions earlier for patients presenting with suspected cardiac chest pain — the department's single largest group of attendances.

This innovation, as part of the GGC Way Forward Programme, aims to address the

challenges of overcrowding in the Emergency Department, enhancing the patient experience for all.

The project has been led by Dr Andrew Saunders (L: Emergency Medicine Consultant) and Dr Faheem Ahmad (centre-right: Cardiology Consultant and West of Scotland Cardiology Innovation Lead), working in collaboration with POCT Laboratory Services, eHealth, the West of Scotland Innovation Hub, and Abbott, as part of the Way Forward Programme. If you have any questions, you can contact Andrew (andrew.saunders4@nhs.scot) and Faheem (faheem.ahmad@glasgow.ac.uk).

As part of this pilot, learnings from QEUH will inform potential expansion to other NHSGGC sites in the future.



Let's talk about... webinar: Addressing Men's Health

To mark **Men's Health Awareness Month** in November, join our 20-minute wellbeing webinar focused on key health issues, including prostate and testicular health, mental wellbeing, and practical ways to look after yourself.



We'll explore simple, practical strategies to support your mental and physical health. This session is inclusive and relevant for all staff, whether you're directly affected, supporting others, or just looking to stay informed.

Take 20-minutes for yourself, connect with your wellbeing, and help us continue building a workplace where looking after health is encouraged and supported.

Tuesday 25 November, 11.00am – 11.20am, MS Teams Book your space here

Sign up for our final webinar of the year: Let's talk about... Changing habits for the better Recordings of past webinars can be watched on the webinars SharePoint

Let's talk about Hand Hygiene Compliance and Observations

Risk Perception and Compliance

Hand hygiene is performed less frequently when the perceived risk to the healthcare worker (HCW) is lower. For example, compliance is typically lower before patient contact than after patient contact. However, both are less frequently undertaken than hand hygiene following exposure to body fluids. Feedback suggests HCWs are more likely to perform hand hygiene when they feel the risk to themselves is higher.

Technique Consistency

The technique used during hand hygiene should be consistent. This technique should incorporate all areas of both hands for a minimum of 20-30 seconds. Observations indicate that HCWs often reduce contact time when using ABHR, believing it remains effective. Commonly missed areas include the thumbs and spaces between the fingers.

Bare Below the Elbows Compliance

Audits from 2019 to present show a rising trend of HCWs wearing wristwatches or wearable technology (e.g. Apple watch, Fitbit, Garmin, etc.). During episodes of hand hygiene these are classed as non-compliance.

Soap and Water Technique

Some HCWs apply soap without first wetting their hands. This has been shown to increase the risk of contact dermatitis and reduce soap efficacy. HCWs who do this frequently report that they were unaware of doing so, as it appears this practice has become habitual due to muscle memory.

Soiling of hands awareness

Previously, HCWs were observed soiling their hands by touching taps/controls with their hands, instead of utilising their elbows. This practice is less observed and anecdotal responses from staff appear to show greater awareness of residual soiling of these sites.

Use of Personal Protective Equipment (PPE)

Hand hygiene is often neglected when PPE is used but no body fluid exposure occurs — such as during bed linen changes or mobility assistance.



Applications for the Recognising Workplace Learning: Band 5 module close soon

The window for applying for the new Glasgow Caledonian University (GCU) module for Recognising Workplace Learning: Band 5 funding will close next week on Friday 21 November!

Applications for the new Glasgow Caledonian University (GCU) module for Recognising Workplace Learning: Band 5 will close on 21 November.

You can find out more about Recognising Workplace Learning: Band 5 here.

To be eligible for funding for the GCU module, you must be a Band 5 nurse or midwife (or have recently been re-banded to a Band 6 through the Band 5 review process) and be an employee of NHSGGC.

The <u>Evidencing Work Based Learning – Practitioner</u> module starts on 26 January 2026 and runs for six months until Friday 10 July 2026 when the final assessment is due.

For more details on the module and the application process click here.

To go directly to the application form <u>click here</u>.

Active Staff congratulate the winner of the annual survey prize draw



Our lucky winner is Daniel Mallon who won a £30 All4One evoucher.

Daniel has engaged with the Active Staff programme in the past and plans to do so in the future.

He is keen to point out how taking part in the programme of activities supports his mental and physical health as well as a great place to meet new people.



Talking about the Active Staff Programme Daniel said: "I have accessed the Active Staff Programme a few times. I have mostly used the walking group activity. I did find them enjoyable as I was able to meet new and fascinating people from all walks of life. They say that walking and interacting with people can support good physical and mental health. The walking group definitely helped me with my physical and mental health. I am hoping to use the programme in the future at some point.

"I would recommend Active Staff to my colleagues at work. There are loads of benefits in taking part in Active Staff activities, they can help someone's mental health and you can meet very nice and friendly people who do not judge you whatever your circumstances are."

If you would like more information on Active Staff or how to book some of our fantastic online or face to face sessions please use the following link <u>Active Staff – NHSGGC</u> or scan the QR code right.



Please help share this information with colleagues who do not regularly use PCs/laptops at work by printing this off and leaving in staff rest areas.

Remember, for all your latest news stories, visit the Staffnet Hub:

GGC-Staffnet Hub - Home (sharepoint.com)











Staff are reminded to make sure their personal contact details are up to date on eESS.

It is important to share Core Brief with colleagues who do not have access to a computer.

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