

# Core brief

## Daily update

(23 February 2023, 12.45pm)

Topics in this Core Brief:

- How much do you know about Anticipatory Care Planning?
- Improvements to Immediate Discharge Letters (IDL) – Capability to Import Discharge Medicines from HEPMA Into Clinical Portal IDL - Now available for use
- Switch to NRFit connectors
- Reporting Salaries Correctly

## How much do you know about Anticipatory Care Planning?

The Anticipatory Care Planning (ACP) Programme is about to celebrate its third birthday, and in the run up to the big occasion we have been reflecting on all the great things we have been able to do over the past few years.

However, we are now looking for your help! Please take five minutes to complete our short survey about your own awareness and usage of Anticipatory Care Planning and the ACP Summary.

Whether you are a member of the public, or a professional helping others to think about their future, we would love to hear your thoughts and see what impact our programme has had. You can follow this link to complete the survey:

<https://link.webropol.com/s/ACPAwareness2023>

The survey will be open until the 28 February 2023.

We would like to take this opportunity to thank you all for your support and look forward to working with you all in the future. As always any questions please get in touch, email: [ACPSupport@ggc.scot.nhs.uk](mailto:ACPSupport@ggc.scot.nhs.uk) or you can find further information on our webpage: [www.nhsggc.scot/planningcare](http://www.nhsggc.scot/planningcare).

## Improvements to Immediate Discharge Letters (IDL) – Capability to Import Discharge Medicines from HEPMA into Clinical Portal IDL - Now available for use

A new capability **to import discharge medicines from HEPMA into Clinical Portal IDL** is now available for use for existing HEPMA/Clinical Portal users. This follows a successful pilot at sites within the board.

This capability brings a number of benefits to service system users and patients including:

- Reduced manual transcription time and effort for discharge of medicines
- Quicker and more efficient generation of IDLs
- Quicker discharge process and experience for patients.

Quick Reference Guides detailing how to use the new capability (use of which is optional) are available on [HEPMA StaffNet Support Site](#).

HEPMA Facilitators are visiting key sites to raise awareness and provide user support for the new capability. Telephone support is also available on **07971 977806**.

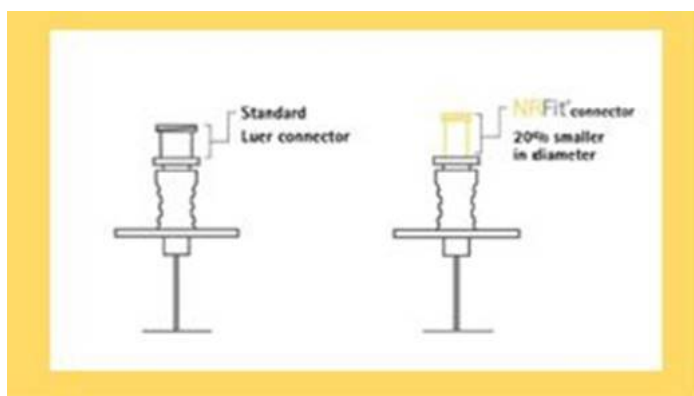
Any further queries, please contact [nhsggc.hepma@ggc.scot.nhs.uk](mailto:nhsggc.hepma@ggc.scot.nhs.uk).

### Switch to NRFit connectors

NRFit connectors will be introduced across NHSGGC in 2023 as part of an international patient safety initiative.

The ISO 80369-6 NRFit connector provides a way to reduce the risk of neuraxial misconnections by reducing the chance of unintentional cross-

connection with equipment intended for non-neuraxial routes. Non-adoption of the new connectors may expose clinical staff and organisations to legal challenges if a wrong-route incident were to take place that could have been prevented by use of ISO 80369-6 compliant devices.



**Immediate action** is required across all specialties. Affected equipment must be identified and a plan made for the switch within each clinical area. Toolkits and resources are widely available. The equipment list below is illustrative but non-exhaustive:

- Spinal needles
- Epidural needles

- Epidural/spinal catheters
- Nerve block needles
- Pre-filled syringes
- Syringes for neuraxial application
- Manometers
- NRFit Adjuncts - Drawing up needles/syringe caps

Anaesthetic departments across NHSGGC have been working on this and are set to make the change in the next few months. They would be happy to be approached for advice and guidance if this is required. Luer connectors will be phased out as the uptake of NRFit increases.

### Reporting salaries correctly

If you complete SSTS or eESS, or are a manager responsible for staff salaries, then we want your help in ensuring that staff are paid correctly and on time.

A simple way to do this is by making sure that all leave, absence, overtime and changes to pay are recorded and authorised on time and accurately through the appropriate systems in advance of payroll deadlines.

For payroll deadlines and FAQ's visit [StaffNet](#). For information or support on particular transactions or queries you can contact the relevant teams at:

Team or Service	Example of Queries or Support	Contact Details
eESS	Recording changes to location, band, hours, termination of employment, etc.	<a href="#">HR Portal - NHS GGC HR (service-now.com)</a>
HR Support & Advice Unit	Annual leave, maternity leave, terms & conditions of service, etc.	<a href="#">HR Portal - NHS GGC HR (service-now.com)</a>
SSTS	Recording shifts, absence, overtime etc.	<a href="mailto:ssts.team@ggc.scot.nhs.uk">ssts.team@ggc.scot.nhs.uk</a>
Central Bank	Shifts worked, annual leave requests etc.	<a href="mailto:staff.bank@ggc.scot.nhs.uk">staff.bank@ggc.scot.nhs.uk</a>
Payroll	Other payments, payroll guidance, etc.	<a href="mailto:GGCPayrollQueries@ggc.scot.nhs.uk">GGCPayrollQueries@ggc.scot.nhs.uk</a>
Expenses	New claimants, insurance certificates, etc.	<a href="mailto:eExpenses@ggc.scot.nhs.uk">eExpenses@ggc.scot.nhs.uk</a>



\*\*\*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.  
A full archive of printable PDFs are available on [StaffNet](#)