

NHS Education for Scotland

Co-ordinated Learning and Development Network for General Practice Nursing

Newsletter Autumn 2015





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Editor's Review

Welcome to our autumn edition of the NHS Education for Scotland Co-ordinated Learning and Development Network for General Practice Nursing Newsletter. I hope you enjoy reading the articles and as always we welcome your feedback and suggestions. Look out for the NES GPN Education Advisors updates in this newsletter and very useful resources about autism, AF and feedback from the Macmillan GPN cancer course.

In Spring 2016 I would like to introduce a new section to the newsletters called "Portraits of general practice nursing." Our roles are so varied and continuously evolving and I would really like to capture and share this in the newsletter with you. The articles should be around 300-500 words and should have a focus on your learning and how this has changed / improved your practice.

This year seems to have gone so fast. It was certainly a very busy September/October from an immunisation point of view. I have found the resources provided by NES extremely valuable to getting up to speed quickly. I also use the Immunisation Scotland website **www.immunisationscotland.org.uk** with patients and parents. I give them a print out of the "What to expect after immunisation: Babies and children up to 5 years" and recommend they visit the site for further information.

It is the excellent resources we are provided with that help to make our job possible. Travax celebrated its 30th birthday in September this year (see boxed item). This is one resource that along with its sister site **www.fitfortravel.nhs.uk** has really made a difference to my ability to provide expert care and advice to patients. Thank you Travax!





Jaqui Walker, Editor, NES GPN Education Advisor. Please contact me about learning issues by email: medicalpracticenurse@nes.scot.nhs.uk or tel: 0141 223 1479.



Having been inspired by the NES Delivering Professionalism and Excellence in General Practice Nursing event in April in Edinburgh I am now studying for my Non Medical Prescribing course at Masters level at Stirling University. With a busy family life, many pets, my hobbies and my freelance medical writing work I was aware I had already made too many excuses for finding the "right" time to do this. It is a challenge to fit the supervised work, the portfolio development and the study for the December exam into an already busy life. I try and take small steps every day and not lose sight of the end goal. I was cheered along my way yesterday when one of the GP partners at work talked to me about staffing for 2016 and the development of my role. I hope to work towards an advanced practice position within the surgery and it is good to know there is the need and support for me to do this. The exciting developments for new ways of working discussed at the April event are translating into practice with huge opportunities for General Practice Nurses. We have to be ready.

NMC Revalidation is now confirmed and will commence April 2016. If you have any questions contact your local NES GPN Education Advisor or NHS Board Practice Nurse Lead / contact.

If you know of any new practice nurses please forward this newsletter and encourage then to contact us for their local education advisor contact details. Our website with past copies of this newsletter (including the April 2015 event conference review) is available at; http://www.nes.scot.nhs.uk/education-and-training/by-discipline/medicine/general-practice/general-practice-nursing.aspx

I hope you enjoy our newsletter and I look forward to writing again in Spring 2016.

A View from NHS Education Scotland

Transforming Nursing

It was with great expectations that I joined the general practice nursing team at NES at the beginning of July this year. Despite the fact that my feet have scarcely touched the ground during the past three months, those great expectations have not been disappointed. I have had the opportunity to meet NES educators who daily make a difference to the culture of learning that we have within the National Health Service. I have had the privilege of working alongside Susan Kennedy, my job share, whose experience has added a wealth of opportunities and development to the discipline of general practice nursing (GPN) in Scotland. I have also had the freedom and been thrilled to meet many of you around Scotland who work in remote, rural, urban and inner city areas making a difference to the working lives of approximately five million people.

In their delivery plan 2015-16 'Setting the direction for nursing and midwifery education' the Scottish government have identified six aims which have already started to make an impact on transforming the nursing role in Scotland. Deeply embedded in these aims is a desire to foster a sustainable culture of learning from student to senior management professional development. Implementing this culture requires a paradigm shift at all levels of nursing education. As Health and Social Care Integration gathers momentum we as practice nurses need to respond to meet the population needs with the appropriate knowledge and skills. These are becoming more available to us as the Health Boards strive to develop continuing professional education accessible to all practitioners. NES GPN Advisors around Scotland give the GPN population a professional and tangible resource which is evidenced by some of the reports in this newsletter.





Here at NES we are continually evaluating the way in which we deliver education to General Practice Nurses. The NES General Practice Nursing Programme this year enrolled a record number of 23 participants from across Scotland. The Professional Development work stream delivered a well evaluated short course on Leadership for General Practice Nursing which will be repeated early next year and 60 nurses attended the NES Cervical Cytology courses. A short course on The Management of Asthma Reviews in General Practice is being delivered in December with the promise of further short courses being developed in 2016.

We are presently looking for GPNs who would like to be involved in education, especially in the areas of Lothian; Western Isles; Dumfries and Galloway and Highland South. If you would like to be involved in one of these areas of our learning and development network then please contact ruth.aird@nes.scot.nhs.uk or susan.kennedy@nes.scot.nhs.uk

We would particularly like to thank The NES General Practice Nurse Education Advisor for Highland South Sheena Edwards for her work in that area and wish her all the best in her new post in Orkney. We welcome Gillie Henry as our new NES Education Advisor in GGC and Alison Parmley who starts on her journey to become one of our NES GPN Education Supervisors. Alison is based in north Tayside. It has been an exciting three months and I am sure that as you read through the GPN Newsletter this autumn you too will be inspired by the many opportunities that exist within practice nursing in Scotland.

Ruth Aird NES National Coordinator for General Practice Nursing (Job Share with Susan Kennedy)

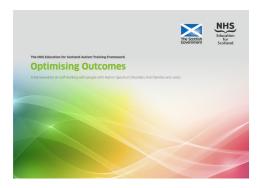
Optimising Outcomes: Autism in Primary Care

Since late 2013, NES Psychology has been working to support the recommendations outlined in the Scottish Strategy for Autism (2011). The Scottish Government has funded NES to produce a national **Training Framework: Optimising Outcomes** and a **Training Plan for ASD** to assist health and social care staff to consider autism in relation to their particular role.

Practitioners can use **Optimising Outcomes** to identify the knowledge and skills they require to offer the best possible service and hence best possible outcome for individuals on the autism spectrum, their families and carers.

There are many available resources and opportunities for training in autism spectrum disorders in Scotland so how can practitioners decide on the best training for them?

The **NES Training Plan for ASD** should assist practitioners and managers in deciding what type of training or support is needed and how this should be accessed, e.g. classroom-based or e-learning, and **Autism Network Scotland** host a directory of training providers. NES has been praised for the active involvement of the autism community (individuals on the spectrum, their families and carers) in updating the existing NES autism web resource, and providing examples of core difficulties and essential good practice for **Optimising Outcomes:**-



"Well, my major issue with medical people is the way in which I understand things literally. There is something particular to talking with someone in a medical context that amplifies my problems with literal interpretation."

"Consider providing easy-read information leaflets for medication."

"Gather contextual information to understand reasons behind health issues (esp. mental health)."

The RGCP has designated Autism a Clinical Priority for 2014-2017, and has appointed an Autism Champion. In line with this NES Psychology would like to maximise opportunities to develop further skills and expertise within Primary Care. In recognition of the key role that a range of Primary Care Practitioners play in accessing diagnosis and ongoing support, NES has developed an excellent range of online resources, including an e-learning module and a web resource aimed at Primary Care Practitioners.

Addressing Autism Knowledge and Skills in Primary Care

NES autism resources, including the **Training Framework** and the **Training Plan**, are all available in one place on the Knowledge Network;

http://www.knowledge.scot.nhs.uk/home/learning-and-cpd/learning-spaces/autism-spectrum-disorder.aspx

Optimising Outcomes: Autism in Primary Care

NES already had a comprehensive web resource for Primary Care Practitioners, which has been updated and is now easier to navigate.

http://www.knowledge.scot.nhs.uk/home/learning-and-cpd/learning-spaces/autism-spectrum-disorder.aspx

- We involved the autism community in reviewing the resource and have made use of valuable comments and insights from people's experience of visiting their GP surgery from seeking diagnostic referral, managing mental health symptoms or requesting a prescription.
- The resource was launched in September and will be promoted via NES as well as attendance at the annual RCGP conference hosted in Glasgow this year.
- Whilst the web resource is a detailed and valuable resource, NES recognised the time constraints for primary care practitioners and developed an **e-learning** module to focus on the practical strategies section of the NES Web Resource. It is a quick way for practitioners to access key advice about adapting routine consultations in primary care to accommodate the needs of people with ASD, their families and carers.

Learning Resource on Autism Spectrum Disorders (ASDs)

For GPs & Primary Care Practitioners

NES Autism Spectrum Disorders: Practical Strategies for the Primary Care Practitioner

The resource is available at http://www.knowledge.scot. nhs.uk/scormplayer.aspx?pkgurl=/ecomscormplayer/ Autism/ or via Learn Pro.

- NES Psychology Autism team has, and continues to contribute to CPD events such as Learning Disability & Psychiatry for GPs and would be delighted to contribute to learning events for General Practice Nurses.
- For comments or further information about the work that NES is doing in Autism please contact: Janine Robinson, 0131 656 4371 or email: janine. robinson@nes.scot.nhs.uk



A note from the Stroke Association: AF and stroke in Scotland

What is AF?

Atrial fibrillation, or AF for short, is a common arrhythmia of the heart which leads to an irregular pulse and is associated with a five-fold increased risk of stroke. In general the strokes associated with AF are more severe and are therefore more likely to lead to hospital admission, death or long term disability.

Identification and diagnosis

In primary care, people are identified as being in AF through reporting of symptoms by patients or through a standard pulse check - thereafter confirmed by ECG. Paroxysmal AF is challenging to diagnose so 24 hour monitors are used by some primary care staff for diagnosis.

SIGN Guidelines recommend that in all patients in AF, stroke risk should be assessed routinely using CHADS2 or CHA2DS2-VASc score. If the CHADS2 or CHA2DS2-VASc score is ≥1, patients should be considered for warfarin or a newer anticoagulant. Antiplatelet therapy should only be considered where warfarin or one of the alternative new anticoagulants has been declined.

Anticoagulation

There is clear evidence that many strokes a year could be avoided if atrial fibrillation (AF) was identified and those people with AF who are at risk of stroke were treated in accordance with SIGN Guidelines.

As AF is a risk factor for stroke that can be managed, the Stroke Association is keen to work with Practice Nurses and GPs to help prevent stroke through better understanding and awareness of the condition and to ensure people are being identified and treated appropriately.

stroke.org.uk





Reducing your risk of stroke



Atrial fibrillation and stroke awareness and management

Given that the projected number of people in AF in Scotland is expected to rise, the Stroke Association is keen to work with Practice Nurses and GPs to help prevent stroke through better understanding and awareness of the condition and to ensure people are being identified and treated appropriately. The Scottish Stroke Care Audit 2015 National Report stated that: ...many patients with AF are still not receiving anticoagulants to help reduce their risk of future stroke. There is significant variation across Scotland which probably reflects different methods of screening for AF, and different guidance on the use of new oral anticoagulants.

The Stroke Association in Scotland

There are many organisations doing important work to help people reduce their risk of vascular disease. We are focusing our efforts on raising awareness of AF and the link to stroke and also advocating discussion of options with individuals in particular the use of anticoagulant medication to manage stroke risk in AF patients.

Resources for primary care staff

Last November, the Stroke Association launched a digital marketing campaign aimed at healthcare professionals to highlight issues around the identification, diagnosis and management of AF to reduce the risk of stroke. Visit the resource centre at https://www.doctors.net.uk/Login/ to see the infographics, videos and professional/patient interviews bringing the issue of AF to life. Please also visit our website for further information: www.stroke.org.uk/AF

AF leaflets for waiting rooms

We have produced a leaflet about AF as a condition highlighting AF and its link to stroke. If you would like some leaflets, please contact **Angie Macleod** at: **Angela.Macleod@stroke.org.uk** or call: **0131 555 7244**



Clinical Update: SIGN 143 Diagnosis and management of epilepsy in adults May 2015 guidance

SIGN have developed a new guideline for managing epilepsy. They recommend a structured management system for epilepsy in primary care and that this should include an annual review and an up to date register of patients. A shared care management system should be used to;

- identify patients
- make provisional diagnosis
- monitor seizures and improve control
- minimise adverse effects from medication
- facilitate a structured withdrawal from medication where appropriate in agreement with the patient
- introduce non clinical interventions and help improve quality of life for patients

An epilepsy specialist should make the diagnosis of epilepsy through a first-seizure or epilepsy clinic. A clear history from the patient and eye witness accounts of the attack form the mainstay of diagnosis. Recommendations for starting treatment and antiepileptic drug (AED) choices are outlined.

The guidance gives attention to specific groups of patients with epilepsy such as women, older people and people with learning disabilities and includes sources for further information such as Epilepsy Scotland www.epilepsyscotland.org.uk.

Access the full guideline and quick reference guide at http://www.sign.ac.uk/guidelines/fulltext/143/index.html

Summary provided by Jaqui Walker NES GPN Education Advisor





We asked each of the GPN Advisors to give an update from their area looking back over what has been achieved in the past 3-4 years. Here are some of the overviews others will be included in our spring newsletter.

Tayside - Sheilagh Macfarlane

Having started as GPN Advisor from its inception I have thoroughly enjoyed setting up a network of information sharing amongst the practice nurses of Tayside. This has given me the opportunity to be involved in both local and national projects outlined below and given Tayside a national voice in education for practice nurses

I have been involved with many national and local projects that have impacted on GPN.

National projects included the Scottish diabetes medication review group, NES Safety projects (including 'Results Handling') and Health Care Support Worker Roles. I am a member of the NES GPN Programme Board as the representative for the GPN Advisors (ongoing until 2016). Annually I interview applicants for the GPN Programme that can take up to four days. As one of the new NES CPD Leadership course leaders I have been able to encourage GPN's to manage change and use leadership skills in their own practice. The pilot course was well evaluated and more are planned (see diary events).

Over the last four years I have been able to become involved in areas out with my own practice. One example was attendance at the Non Medical Prescribing (NMP) annual conference on behalf of the NES GPN Network and this led to becoming involved in my own CHP's NMP group and an offer of a conference place via that group for this year.

Local activity included setting up Practice Based Small Group Learning (PBSGL) in Tayside – for 2 years I have had my own group of 10 in Dundee. An impromptu taster to a large group of Tayside and Fife nurses was well received and people interested in becoming members and facilitators were sent to PBSGL administrators.

The Angus PN group are quite enthusiastic and are looking at ways to make it possible within PLT. There are other groups, including one in a practice in Kinross.

By collaborating with the RCGP I have set up three annual GPN study days in Tayside. These are very successful events covering a wide range of subjects from wound management, travel, women's health and vascular assessment. NES offered a two day appraisal training when I first started which I enjoyed and now can help my peers with their appraisals. In April / May I was involved in supporting one of the new models of primary care (based on NUKA) in Forfar by carrying out a variation on appraisal for an educational needs assessment for their GPNs.

As Tayside was one of the UK pilot areas for NMC revalidation so I was one of the GPNs who volunteered to test this out to enable me to help my colleagues with this in the future. I used the NES ePortfolio as part of this.

My role is educational and for some time I have recognised the need to find a method of offering GPN's in Tayside some help with governance issues. A direct link has now been identified, in part due to working on the revalidation pilot and connections made through this and the work of NES.

Highland North - Heather Crockett



My key achievements have been:

- Developing a well-established distribution list for NHS Highland North GPNs, updated yearly (phoning each practice). I mail relevant emails / information linked to GPN CPD to the Highland North GPNs.
- Biannual GPN Updates, held in Inverness, in collaboration with the RCGP. All administration is carried out by the RCPG North administrator. My role is to put the programme together and contact the speakers. I am always delighted at how keen the speakers are to be involved in the events. We have been very fortunate to benefit from guest speakers from NES and specialists based in the central belt, along with local specialists. Our last GPN Update was in May with our key note speaker, Linda Tripney, facilitating a session on HCSW delegation and supervision. Our GPNs are widely geographically based and so it is encouraging when 25 nurses attend these events. We do use VC at times but I am currently exploring ways of recording the sessions to improve access for those unable to attend.
- Member of NHS Highland Professional Practice Education Group providing an important GPN influence.
- Involvement in the championing of lymphoedema training in NHS Highland.
- Involved in the cytology update training provided by NHS Highland Sexual Health.

- GPN training and education signposting, in particular for new GPNs in post.
- Facilitator for PBSGL group in Dingwall.

It has been difficult to measure but I have a sense that over the last four years there has been an increased GPN profile in NHS Highland. This has been in part the result of having the opportunity to network and learn from a skilled team of GPNs across Scotland (the NES Education Advisor team). I have also had personal professional development in the form of targeted training and education linked to the post.

"It has been difficult to measure but I have a sense that over the last four years there has been an increased GPN profile in NHS Highland."



Lanarkshire - Kate Mallin

Working as the NES Lanarkshire GPN Education Advisor has been a huge learning curve. In the beginning I felt out of my depth and it did take quite a bit of time to understand the role and establish how I was going to achieve the goals that were set. At that time I was lucky enough to have a Practice Nurse Lead to help and encourage me.

During the last 3-4 years I feel that I have improved my communication skills greatly. I have met a lot of lovely, stimulating and helpful people. I now feel comfortable talking within environments that would have previously terrified me. I go to meetings and I find I understand most of what is being said. The NES training that I have been able to access has enabled me to change my own practice and also pass on that information to others.

It is still a bit of an uphill struggle trying to engage with everyone. The Practice Nurse Leader retired and was not replaced. This was a huge loss to the nurses within Lanarkshire and I feel this has fragmented us as a practice nurse community. Anne (retired Practice Nurse Lead) kindly allowed me to accompany her to the Lanarkshire Education Committee meetings. I continue to attend these in order to give the practice nurses a voice.

The nurses communicate with me mostly via e-mail but I do go out to practices and enjoy the personal touch. I have completed appraisals and have facilitated PBSGL modules. I cascade information that I think is relevant to GPNs and spend a lot of time trying to answer questions that nurses ask via e-mail. The big challenge at the moment is NMC revalidation. I was involved in trying to set up a meeting where this was the focus but unfortunately it was cancelled due a poor response. I would be very happy to receive suggestions for how we can develop my educational role further in Lanarkshire.



Forth Valley - Andrea Davidson

I joined the team of NES Education Advisors, representing Forth Valley, in April 2014 and have enjoyed getting to know my colleagues during the past year and the opportunities that have arisen as a result of my role.

I attended the 2014 and 2015 NES education conferences. These provide excellent speakers and focus on professionalism within GPN (see diary dates for next conference).

GPNs in Forth Valley are fortunate in that a Lead Practice Nurse is employed by the Health Board and I enjoy working closely with her, sharing information, cascading NES education material and signposting to fellow GPNs and Practice Managers.

Nurses new to GPN contact me and I have been able to provide information on local and national education, including the NES GPN Programme. I feel this is a vital role, during what can be a very challenging transitional period.

I attended a facilitation course for PBSGL recently and enjoyed learning more about facilitation skills and am planning my first PBSGL taster session for GPNs in Forth Valley.

As for the coming year, revalidation and ePortfolio is extremely topical and I will be working closely with my Lead GPN and plan an educational event to update and inform my GPN colleagues in Forth Valley.

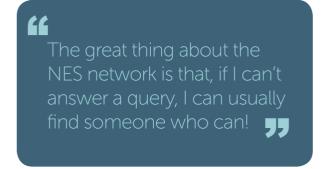
Fife -Gill Dennes

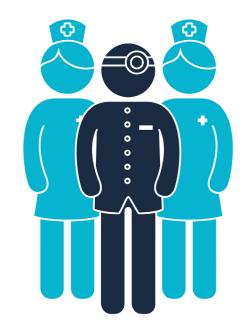
I'm confident that the NES initiative to create a GPN network has had a big positive impact on GPN education and professional support, and will continue to go from strength to strength. I have personally learnt a lot from being involved and the support from Susan Kennedy, from my fellow Education Advisors across Scotland, and from NES have been invaluable along the way. This is a brief summary of what I have achieved in Fife so far:

- Set up Fife practice nurse email database to enable dissemination of information direct to practice nurses and a way for them to contact me with queries, ideas and general comments.
- Completed a Fife learning needs analysis as an online survey, the report of which informed future educational events and was shared with NES, LMC and Fife Health Board.
- Organised two Fife wide educational events which focused on the top key learning needs from the survey. It was unfortunate there was no ongoing funding as these events were well evaluated.
- Trained as a NES appraiser and completed five appraisals during pilot year, as well as a few subsequently. Again, this initiative was well received by those that took part but there is no ongoing funding to roll this out more widely.

- Worked with Fife Cytology Group and Tayside NES GPN Education Advisor to organise an annual smear update for Fife and Tayside GPNs.
- Set up links with nursing leads, LMC, the acute sector, Practice Manager Network, SPNA, QNIS and RCN to raise profile of practice nurse professional development and educational support.
- Supported individual practice nurses with educational advice, shadowing opportunities, local training and general support.
- Taught on the NES GPN Programme.
- Piloted multidisciplinary PBSGL alongside a pharmacist.
- Established West and East Fife GPN groups that meet bi monthly. Include education and addressing current issues/ sharing information. Minutes from the groups are shared with nursing/HB management.

Many of the above initiatives are ongoing and form a large part of my 2 monthly NES sessions. I constantly look for new opportunities to support the GPNs in Fife. It is difficult at times having no lead GPN in our Health Board as no 'central point' to work from, but I expect there are some advantages too. I think the most important thing is to be a consistent point of contact and support for my GPN colleagues. The great thing about the NES network is that, if I can't answer a query, I can usually find someone who can!



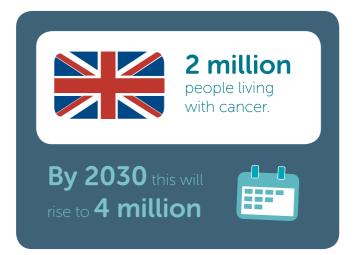


Macmillan Practice Nurse Cancer Course

The UK currently has an estimated 2 million people living with cancer. By 2030 this number will rise to 4 million. These figures are due, in combination, to an increasing elderly population and also the success of many current cancer treatments. This shift means that many cancers are now considered to be long term conditions, requiring the same surveillance as many other conditions very familiar to GPNs.

Macmillan Cancer Support, driven by some Macmillan GPs recognised the difference that Practice Nurses specifically, could make to the lives of many people affected by cancer and thus, The Macmillan Practice Nurse course was born.

Since 2013 Macmillan Cancer Support has run 5 courses for Practice Nurses and we are currently half way through our 6th course. The courses have been held in Glasgow, Edinburgh, Dundee and Aberdeen.



The course consists of 5 separate days (held at three weekly intervals). The course begins by looking at the current cancer picture in Scotland and compares and contrasts cancer with other chronic diseases and looks at the Practice Nurse's role in carrying out quality Cancer Care Reviews. Over the next four days cancer treatments are explored as well as cancer survivorship. The course finishes by examining how the Practice Nurse can increase her skills in bereavement support because it is also recognised that the Practice Nurse, along with the GP, are the only health care professionals who are constant in the person affected by cancer's health-care life; from pre diagnosis, through diagnosis, treatment, post treatment and in some cases to end of life when the Practice Nurse is best placed to offer bereavement support to other family members attending the same Practice.

We believe this course is fairly unique as it is both educational and also fun. The course evaluations tell us that the attendees feel more confident to carry out cancer care reviews, are more knowledgeable about cancer and its treatments, are more willing to contact clinical nurse specialists about their patients and much more confident to speak to the people affected by cancer about their disease and its treatments and to sign post patients to local rehabilitation services.

For further information and to find out the dates of the next course please contact Karen Ramsay at **KRamsay@** macmillan.org.uk.

Fiona Whyte, Senior Learning and Development Manager, Macmillan Cancer Support

Case Study: ANP / CNP Role in Practice

Editor's Note

This is the first example of the type of article we are seeking for our GPN Portrait Series. The following report describes the introduction of a new advanced practice nursing role within one practice in Ayrshire. The practice already has an ANP, Diane, however to help support the GPs with home visits a Community Nurse Practitioner joined the team. An audit of the ANP role provided an indication of the need for the role.

Case History of Developing GP Advanced Nursing Practice

Between the 14th May and 22nd of May the Advanced Nurse Practitioner (ANP) audited her same day and next day appointment list. SMART goals were set as listed below. 102 patients (adults and children) were examined.

The specific goals were to keep ANP consultations requiring GP input below 20% and to identify any areas where clinical skills were below average. These were measurable goals with 98% of consultations managed exclusively by the ANP. This confirmed that the target was attainable. The most relevant finding was that within the paediatric group of patients only 70% were managed exclusively by the ANP. However the numbers were small and when studied closely it was thought to be entirely appropriate that they were referred to the GP. The details on the 8 patients (adults and children) requiring GP input are available for any interested parties and have been approved as entirely appropriate by the ANP's mentor and GP partners.

The timing of this report was following the ANP appraisal and in preparation for the start of the new community nurse practitioner (CNP) post. The ANP agreed to repeat the review of these smart goals in August following a 5 day on call duty to cover the CNP's holidays. Within the 5 days the ANP had 23 requests for home visits and 4 of these were covered by a GP, 82% were visited exclusively by the ANP again meeting the set goal.

It is worth noting that the ANP working within the surgery receives fortnightly random case analysis sessions with her GP mentor. These are 30 minute sessions and give an opportunity to analyse the cases and ensure that management has been appropriate. It has been fundamental in the ongoing development and success of the post to date. The CNP has access to a GP throughout the day for advice, and debriefing opportunities on return from visiting which again has proven to be invaluable.



Case Study: ANP / CNP Role in Practice

The Practice employed a Community Nurse Practitioner from 1 June whose remit was to support the GP On Call by carrying out first line assessment for those patients seen at home. As this was a new development, the Practice aimed to gauge the opinion of those patients the CNP had visited. Patients seen in the last 2 weeks were contacted by telephone and asked for their experience of their recent CNP home visit. No set questions were asked, patients (or their carers) were merely asked to comment. Sixty home visits have been recorded by the CNP between 15 and 26 June 2015. Six were contacted, and their comments were very favourable for example;

"It's a good service", "Excellent service and did everything she needed to do". "Absolutely fantastic!"

Although early days, it would seem this new development has been well received by those contacted, and importantly the quality of the care provided was not affected.

Diane Lindsay ANP Barns Medical Practice Ayr



Bereavement Service/Travax celebrates 30 years

"Are you working with a client/patient that has lost a loved one due to a drug-related death in the last 3 years? Do they need someone to talk to?"

Scottish Families offers a **FREE** and confidential support service providing listening and emotional support in the immediate period after the loss of a loved one and, if appropriate, we can arrange up to 6 face to face counselling sessions. We also provide information about local peer support groups where people who have experienced a similar loss can meet to discuss their experiences.

How to access the service Contact our Helpline 08080 101011 (free from landlines and mobiles)



Outwith these times you can leave a voicemail message and you will receive



BEREAVEMENT

a call back from our Bereavement Support Team within 48 hours.

You can also email bereavement@sfad.org. uk or karin@sfad.org.uk







Travax celebrates 30 years

Travax held an anniversary seminar on September 10th in Glasgow to celebrate its 30th Birthday. Speakers included Professor Robert Steffan from the University of Zurich who gave an overview of travel medicine from the 1700s to the present day, Professor Eric Caumes from Paris spoke on travellers' skin diseases and Shiela Hall explored the issue of volunteering. Jane Chiodini, Travel Health Nurse Specialist from Bedford discussed 21st century technology and travel with the audience. Professor Sara Bhattacharji of Velore India gave a presentation about community outreach in India and Dr Sharon Irvine from Glasgow described her time working in Sierra Leone treating people with Ebola. Dr Alisdair MacConnachie from Gartnaval in Glasgow shared the achievements that have been made in travel medicine in Scotland and Dr Lisa Ranford-Cartwright from Glasgow closed the day with a presentation on global malaria eradication and the current unacceptable situation where 450 000 child deaths occur annually in Africa from malaria. Ruth Aird and Susan Kennedy NES National Co-ordinators for GPN both attended along with other GPNs and would like to thank Travax for a wonderful day.

A full report is available from the September TRAVAX enewsletter at http://www.travax.nhs.uk/news/news-record-page.aspx?id=21209

Conference and Courses Diary Dates



Diabetes UK professional conference

Date: 2-4th March 2016 Venue: SECC Glasgow

Contact: 0345 123 2399 or email eventsteam@

diabetes.org,uk



International Nursing Research ConferenceDate 6-8th April 2016

Venue Edinburgh International Conference Centre Contact: tel **02076473577** email **research@rcn.org.uk** Website: http://www.rcn.org.uk/research2016



NES GPN Learning and Development Conference Date: Friday 6th May 2016

Venue: Edinburgh International Conference Centre

If you are interested in attending this NES funded day please email **medical practice nurse**@nes.scot.nhs.uk for more information on how to attend. This year's programme will focus on new models of primary care and the learning needs of the nurses.



NHS Education for Scotland – HOT TOPICS

Date: 28th November 2015

Queen Margaret University, Edinburgh

Cost: nurses £100. Lunch and refreshments are provided throughout the day. Please note that this event is free from commercial influence.

View the draft programme on the GPCPD website http://www.gpcpd.nes.scot.nhs.uk/hot-topics.aspx

How to Make your Booking

- All bookings and payments can be made via NES Portal at https://portal.scot.nhs.uk/
- If you already have an account then please login and search for either Hot Topics or the course code 01-02-04-035033
- If you do not have an account then go to NES Portal at https://portal.scot.nhs.uk/ and click on Sign Up in the top right hand corner and it will take you through the registration process.

Should you require any further information please contact the team at **cpdconnect@nes.scot.nhs.uk**



RCGP North Faculty & NES: Practice Nurse Update

Date: Friday 27 November 2015, 9.30am - 4.00pm Venue: Fairways House, Inverness.

Cost including lunch: £25

Confirmed keynote speakers are Sally Bentley, Advanced Nurse Tissue Viability NHS Highland and Lorraine McKee Health Protection Nurse Specialist NHS Highland.

NMC revalidation will be covered with opportunity to look at local and on line resources. More sessions yet to be confirmed. This is a great opportunity to share good practice and for peer support. We look forward to seeing you there.

Contact **heathercrockett@nhs.net** for more information

Conference and Courses Diary Dates

NES GPN Learning and Development CPD

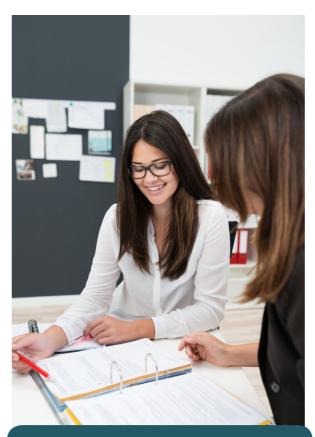
Introductory Short Course on Asthma Reviews in General Practice

A new NHS Education for Scotland short course for reviewing asthma in general practice is being offered as a two day course on Thursday 3rd December 2015 and Thursday 28th January 2016 to be held at Lochleven Health Centre, Muirs, Kinross KY13 8FP (which is just off the M90). Cost is £120 / person.

The course content is designed by general practice nurses who have previous experience of delivering asthma courses. Applicants must meet all the following criteria before applying:

- Currently employed in general practice as a registered adult nurse
- Supported by employer to undertake annual reviews of asthma as part of their role
- Access to completing 5 annual reviews for assessment within a 3 month period.

Applicants are expected to name a supervisor for clinical practice that is experienced in annual asthma reviews as part of their initial professional training or successfully completed a recognized training programme on asthma. In addition a supervisor should be currently undertaking asthma reviews and can demonstrate they have kept their knowledge and skills up to date.



If you would like to be sent application forms or have any questions please email **MedicalPracticeNurse@nes.scot.nhs.uk**

Conference and Courses Diary Dates

NES GPN CPD Leadership for GPN

This second short course is offered to nurses working in general practice with the aim of developing their leadership and management skills. The three day course is on 3rd February, 2nd March, and 10th May 2016. The first two full days are to be held in NES offices in Edinburgh and the third day in Glasgow. Cost is £120 / person

The course content provides an introduction to leadership, recruitment, appraiser skills, performance management, delegation, workforce planning and more.

Applicants must meet all the following criteria before applying:

- Currently employed in general practice as a registered nurse
- Supported by employer as leadership & management is / will be part of their role
- Be prepared to undertake and present a small project to demonstrate learning
- Able to attend all three course dates.

Applicants are expected to name a supervisor in their employing practice for support in completing their project. This is normally a senior nurse, GP or practice manager.

If you would like to be sent an application form, more information or have any questions please email **MedicalPracticeNurse@nes.scot.nhs.uk**

Our NES Initial General Practice Nurse Training Course for Cervical Cytology Screening are held approximately three times / year. For more information and to be placed on the waiting list email MedicalPracticeNurse@nes.scot.nhs.uk

2016-17 **NES GPN Programme** Applications from nurses newly employed in general practice nursing will be advertised in April 2016 for interviews in June 2016.



This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or **email altformats@nes.scot.nhs.uk** to discuss how we can best meet your requirements.



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