

Tuesday 25 July 2023

Reinforced Autoclaved Aerated Concrete (RAAC) - update Last Friday we shared information with you about RAAC. In case you missed this, RAAC is a type of lightweight concrete, commonly used in building projects from the 1950s to the 1990s. There are some concerns about its durability, especially if it sustains water damage or if there were problems with its original fabrication.

We, along with all NHS boards, were asked by NHS Scotland Assure to carry out a desktop survey of our buildings, using their age and type of construction as a guide. This was to find out which buildings – or parts of buildings – require a more detailed survey to confirm if RAAC is present. This work is complete, and we will be requesting more detailed surveys in 53 buildings – or parts of buildings. We have been contacting teams working in these areas directly to make them aware and we are now sharing the complete list with you all, attached to the email used to send this brief.

We do not need the teams in these buildings to do anything different at present. We will require your support during the survey period; we are awaiting confirmation of the timeline and we will share this when it is available.

[We have compiled an FAQ document, available here.](#) At this early stage, there is still a lot we do not know. We will update the FAQ as we get more information, and we welcome your suggestions too. We will also be hosting two virtual drop-in events next week. All staff are invited to attend and either ask a question, or simply listen in to understand more. These sessions will take place as follows (we will record them and make them available for anyone unable to attend):

- [Tuesday 1 August, 10-11am](#)
- [Thursday 3 August, 11am-12noon](#)

You do not need to register, simply click the link to attend the session of your choice. If you would prefer to submit a question in advance and/or have it asked anonymously, please email gram.communications@nhs.scot with the title 'RAAC question'

Finally, we'd like to take this opportunity to remind everyone, wherever you work, of the importance to [reporting any building issue, no matter how small, to the Estates Helpdesk](#) (intranet link, networked devices only). The team cannot resolve problems they are not aware of.

HEPMA – planned downtime HEPMA will be unavailable from 11.59pm on Thursday 27 July until 2.30am on Friday 28 July to allow for planned system updates. In addition, the CDD/HEPMA medicine import (via CDD Check HEPMA button) will be unavailable. Medication can still be manually added to a patient's CDD during this time. [Further instructions and guidance are available here](#) (intranet link, networked devices only)

Clinical presentations of Gonorrhoea (GC) infection Grampian Sexual Health Service recommend always testing for gonorrhoea and chlamydia for sexually active people presenting with symptoms in the table below. Clinical colleagues in primary care, emergency departments, gastroenterology, gynaecology, obstetrics, ophthalmology, orthopaedics, rheumatology, and urology are asked to include such tests when seeing sexually active patients presenting with such symptoms.

Male, transfemales and non-binary (assigned male at birth, AMAB)	Female, transmales and non-binary (assigned female at birth, AFAB)	Any gender
Dysuria	Dysuria	Conjunctivitis
Epididymo-orchitis	Inter-menstrual bleeding	Neonatal conjunctivitis
Urethral discharge	Pelvic pain (PID)	Proctitis (rectal pain and discharge)
	Post-coital bleeding	Reactive arthritis
	Vaginal discharge	Septic arthritis

Testing should be as follows:

- Male/AMAB urethral infection - first pass urine in white topped container for GC and chlamydia NAAT
- Female/AFAB genital tract infection a self-collected vulvo-vaginal orange swab for GC and chlamydia NAAT
- A pharyngeal swab and rectal orange swab are recommended for gay, bisexual and other men who have sex with men and/or individuals at risk of infection at those sites (can be self or clinician collected)
- Cultures using charcoal swabs at infection sites are recommended prior to treatment in those with diagnosed infection or contacts of infection.
- An endocervical culture is recommended for females/AFAB and urethral culture for urethral infection.

Joint RCGP and BASHH guidelines recommend **chlamydia, gonorrhoea, syphilis and HIV testing** should make up the minimum STI screen. For specialist advice, please contact the Sexual Health Service Team on 0345 337 9900 or email gram.gshhealthadvisers@nhs.scot

Tune of the day We round off today with a somewhat belated tribute to Tony Bennett. The legendary crooner died on Friday, at the ripe old age of 96. Equally comfortable in the jazz clubs or duetting with Lady Gaga, his fame spanned decades. [I've Gotta Be Me](#) is our tune of the day (EP)

If you want to request a tune, follow up on items included in this brief, or suggest an item for sharing, drop us an email via gram.communications@nhs.scot