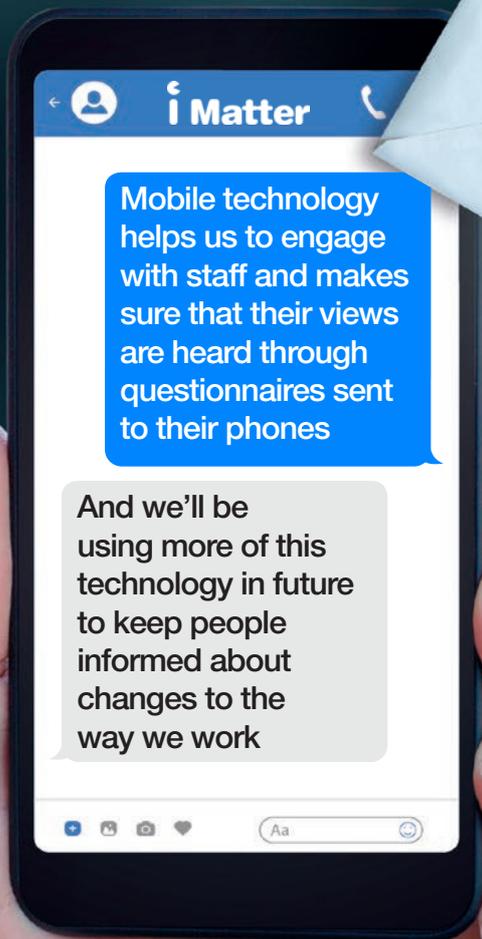




Staff Newsletter **March 2020**



Mobile technology helps us to engage with staff and makes sure that their views are heard through questionnaires sent to their phones

And we'll be using more of this technology in future to keep people informed about changes to the way we work

# A mobile messaging revolution

iMatter is making a difference  
Full story on **PAGES 4&5**

# Our patients' needs are firmly at the heart of PCV

Implementing Person Centred Visiting means that we will work together with patients, families and staff so our care is in line with the core principles of Person Centred Visiting (PCV).

All medical wards at Glasgow Royal Infirmary have recently introduced PCV. Patients can now have support from the people who matter most to them, when and how they need it.

Many wards have observed that PCV formalises and reinforces what they have been practising for some time already, providing them with further opportunities to involve the people who matter to patients in care.

Carol Prescott, Senior Charge Nurse, in Ward 8 at the GRI, a gastroenterological nightingale style ward, shares her experience of PCV.

She said: "We aimed to ensure all patients, visitors and staff in the ward were aware of PCV and that it was implemented as smoothly as possible for everyone involved."

"Initially we had feedback from patients which demonstrated we could be more consistent in our approach, for example, one patient said they thought visiting was from 11am to 8.30pm, when we thought we had moved to a person centred approach."

"The multidisciplinary team continually revisited the core principles of PCV, to instil the ethos of what we were aiming to achieve."

Carol's recommendations are:

- Ensure that all staff members are completely informed of the Core Principles



of PCV and understand the process fully before starting in the ward

- Ensure all members of the multidisciplinary team (MDT) are aware of the plan for implementation
- Ensure that all staff are consistent in their information giving to patients and visitors around PCV
- Constantly revisit the core principles of PCV, to ensure these are embedded in practice
- Provide support and guidance for staff (including bank staff) to ensure privacy and confidentiality, in particular around ward rounds and other significant conversations
- To ensure the safe administration of medicines, encourage staff to explain to visitors the importance of not

being interrupted when a medication round is in progress, unless the conversation is urgent and they would be happy to speak to the visitor on conclusion of this.

A patient in Ward 8 had shared their experience of Person Centred Visiting: "I like the flexibility of the visiting – not for my visitors, but for me. It allows me to organise who comes and when and I can control this."

"Sometimes I feel as a patient we have to entertain our visitors and PCV allows me to control it rather than visitors all arriving at set visiting times."

John Stuart, Chief Nurse, North Sector, said: "The number of 'nightingale style' wards in the GRI has sometimes presented challenges when introducing PCV due to the open nature of the ward environment and shared facilities."

"However, staff have really embraced this and are seeing the benefits, in particular that there are more opportunities for the MDT to communicate with family members and involve them in aspects of care."



John Stuart

"Staff are seeing the benefits, in particular that there are more opportunities for the MDT to communicate with family members and involve them in aspects of care"



Last year's award winners celebrate

## It's time to celebrate excellence by nominating staff for awards

This year we are making changes to the NHSGGC Chairman's Awards. Staff, patients and visitors will now be able to nominate in the newly named NHSGGC Excellence Awards.

Last year we introduced new categories to reflect our key aims and we are retaining these categories for our NHSGGC Excellence Awards. The categories are:

- Better Care
- Better Health
- Better Value
- Better Workplace
- Global Citizenship
- Nursing
- Volunteer

Each and every day, staff deliver outstanding patient care and go that extra mile to ensure our patients and their families receive the optimum in patient care.



And we want you to tell us by nominating them in the new Excellence Awards.

Colleagues can nominate any member of staff that they feel has made a special difference to their patients.

Last year we received a record number of nominations – more than 400 – which is testament to the high regard that the public have for our staff and equally staff have for colleagues.

This is a great opportunity for staff, patients and visitors to show their support for the tremendous hard work and dedication of our staff. Over and above our

Excellence Awards, Chairman John Brown will select a winner for his very own prestigious Chairman's Award. This could be a team, individual or project.

Chairman John Brown said: "I visit teams and projects and hear about such fantastic innovations taking place across the organisation and these aren't always nominated in our awards."

"So I want to create the opportunity to recognise the people that I see first-hand going above and beyond to ensure the highest standard of patient centred care."

**Nominations are now open so don't delay and get your nominations in now, visit: [www.nhsggc.org.uk/excellenceawards](http://www.nhsggc.org.uk/excellenceawards)**

**Closing date is 31 July 2020.**

### NHS Heroes

All about you – written by patients for you

#### Gartnavel General

I had surgery for breast cancer. All the staff from Surgical Admissions, porters, radiology staff, nuclear medicine, anaesthetists, recovery ward and the staff on Ward 4a were exceptional. Thank you.

#### Queen Elizabeth University Hospital Glasgow – A&E

To all the wonderful staff on ward 6. Where do I begin? We came here for a holiday and spent three weeks in Glasgow

Royal! Their patience and understanding is immeasurable. The high level of care demonstrated by all doctors, nurses, nursing assistants, and food and drinks attendants has not gone unnoticed and both Martin and myself are eternally grateful to each and every one of you. Having said that, we hope to not ever meet you again in such circumstances! We wish you all the very best and thank you sincerely.  
*Anne and Martin Perth, Australia.*

I was admitted to ward 10c via A&E and I am writing to thank everyone who took good care of me from A&E to being

admitted to the ward for overnight observation. I cannot thank you all enough. The care and attention I received was second to none.

#### Royal Alexandra Hospital

Yesterday we visited accident and emergency at the RAH in Paisley with my mother-in-law who had fallen and hurt her knee. She also has dementia. I would just like to praise the nursing staff who helped her through the treatment she received. They went above and beyond to ensure she was looked after.



# iMatter

## Better Employers. Better Staff. Better Care.

Staff who feel engaged, involved and valued provide for a strong workforce and a strong workforce is essential to achieve continuous improvement in delivering healthcare services across our organisation.

Here, SN talks to Richard Heard, Care at Home Service Manager, West Dunbartonshire HSCP about his experience with iMatter.

I've seen plenty of changes during my 18 years working in Care at Home Services in West Dunbartonshire. When implementing change, it has always been important to us to make sure that we hear the views of as many of my colleagues as possible, but it has often proved challenging to engage staff in the self-evaluation process. Like most HSCP's we have invested in using the latest technology in our service provision and yet, when it comes to staff surveys, we have still asked staff to complete paper questionnaires.

Last year we were invited to take part in an iMatter questionnaire, and I felt sure that this would prove to be an excellent tool for improvement, allowing us to see clearly how staff felt about the service that we provide. Paper copies of the questionnaire were

issued to all staff, but once again our home carers failed to engage in significant numbers.

That is when we decided to look into using mobile technology as a means to:

- communicate about the iMatter questionnaire with carers using text messaging; and
- allow carers to complete the iMatter questionnaire directly on their mobile telephones. Webropol allowed us to use existing technology and we were able to create a template text message with staff's personal details and a unique URL [similar to a mail merge in word]. We simply completed a look-up from our HR system to select each carer's mobile number and this created a personalised text message which was sent to each individual carer.



The new method of communicating helps us to gather employees' opinions

A pilot took place involving 40 home carers. An initial text message was sent to carers' mobile phones explaining the purpose of the questionnaire, followed by two further text messages, one to provide the questionnaire link, and a follow-up reminder message two days before the closing date.

The process was straightforward and not time consuming, and resulted in an unprecedented 80 per cent response rate. The carers that we spoke to advised us that the questionnaire was quick and easy to complete.

Following the success of the pilot, we decided that we would immediately introduce the use of SMS to engage with our workforce. Home carers overwhelmingly embraced the use of SMS to complete the questionnaire, and over 85 per cent of our carers responded.

As part of the process team reports were generated, allowing staff to discuss and celebrate the things that we do well, giving

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the whole team a real sense of achievement and allowing everyone to feel ownership of the improvement priorities identified from the responses to the questionnaire.

As a result of the feedback obtained from the questionnaire, improvements will be taken forward in the areas of communication, staff training, and the involvement of staff in decision making. We have started to develop new ways of working to ensure that staff have more access to their line managers and we are about to establish a communications working group. We are working jointly with our home carers and the employee development team to look at additional training opportunities and new ways of providing training using e-learn technology.

We shared our iMatter journey and the results with the Care Inspectorate during our recent inspection. They were pleased to see how we had used a new method to effectively engage with our staff and develop actions for development.

Their findings during the inspection mirrored what came out of the iMatter results, which is even more evidence of the effectiveness of iMatter. We are thrilled with the success of the project, and excited about the potential of using this SMS technology to engage staff in the improvement process even more widely in the future.

For more information on iMatter, visit: [www.nhsggc.org.uk/imatter](http://www.nhsggc.org.uk/imatter)

# Staff Witness Support Service



Did you know that NHSGGC has an in-house Witness Support Service? Please keep a look out for Staff Witness Support Survey coming out in March 2020, your feedback is greatly appreciated.

NHS staff may be cited at any point in their professional career to attend court and give evidence. This can be a very stressful and daunting process, causing much anxiety with staff across the organisation.

NHSGGC is unique in this area of staff support, as we have a dedicated point of contact in-house offering staff support currently provided by Rachel McGowan, Legal Claims Manager, part of the Corporate Legal Team.

Rachel said: "The primary aim of the Witness Liaison and Support Service is to ensure NHS staff, from a wide variety of medical and non-clinical professions, have access in-house to a dedicated point of contact offering practical and emotional support on court and legal processes."

There is support open to NHS witnesses cited on a professional basis in respect of the undernoted legal matters:

- Fatal Accident Inquiries
- Nursing and Midwifery Hearings (NMC)
- Criminal Trials
- Children's Hearings
- Support during Sudden and Unexpected Death investigations with Procurator Fiscal
- Civil Legal Cases raised against the Board ( Personal Injury/Medical Negligence Claims).

Support will be dependent on individual staff needs with varying levels of support such as:

- One-to-one practical and emotional support to listen and address your specific concerns and/or questions
- Court familiarisation visit in advance of trial
- Group/ward support – at times,

various staff from one ward/department may be cited

- Q&A sessions covering expectations of witness
- Working in collaboration with external agencies such as Witness Service, Victim Information and Advice, NMC enabling a dedicated staff centred approach for vulnerable witnesses
- Support in court on the day of giving your evidence
- A dedicated point of resource and support to you throughout the legal process aiding in your preparation and familiarisation of court and legal process.

Further details on the service and how to access support for yourself or your staff are available at [StaffNet > Corporate Services > Staff Witness Support Guidance](#) or email: [NHSGGCWitnessSupport@ggc.scot.nhs.uk](mailto:NHSGGCWitnessSupport@ggc.scot.nhs.uk)

You can watch a short video on staff witness support, visit: [www.youtube.com/watch?v=Z4j8FfQxgJQ](http://www.youtube.com/watch?v=Z4j8FfQxgJQ)

Rachel McGowan is on hand to provide employees with legal support



# Fresenius pumps are coming to a clinical area near you

**Volumetric and syringe driver pumps are being replaced as part of a new 10-year contract with Fresenius Kabi.**

Ian Pyper, Commodity Manager, said: "We are very pleased with the outcome of the tender process for the pumps and feel this will really benefit the patients we care for. Our current pumps require upgrading and this will allow us to replace all the current volumetric pumps and syringe drivers that are recorded on the Medical Physics equipment database."

Suzanne Madden and Gill Heirs, both Senior Charge Nurses from ITU, in GRI and QEUH respectively, said: "Volumetric pumps and syringe drivers are used in many clinical areas to deliver intravenous fluids and medications and are a vital piece of kit for looking after some

of our most vulnerable and unwell patients.

"We trialled the pumps at the end of last year and were absolutely delighted with the outcome. The design of the pump, the ease of use and the training provided by the company meant they were user friendly for staff. Most importantly they allow the safe delivery of fluids and medications to our critically ill patients."

An implementation group has been set up to oversee the roll out across the organisation. It has been agreed that the first hospital to receive the new pumps will be the Royal Alexandra Hospital.

The Technical User Group for the project expect that the roll out of the pumps across NHSGGC will take approximately six to nine

months and will also include the Royal Hospital for Children once their current agreement expires in June 2021.

A team of clinicians from Fresenius will lead an extensive training programme to ensure that all staff who use the pumps are trained before the pumps are received. In addition, the procurement team will ensure that all ordering codes for the infusion sets are available to allow for a smooth changeover.



## Value Management Collaboration will help deliver the highest quality of care

**NHSGGC is one of five adopter Boards participating in the Value Management Collaborative. Our NMAHP directorate is supporting this collaborative which brings quality and associated cost data to the point-of-care to drive sustained improvement. This is underpinned by three components:**

- creating the conditions for quality improvement through organisational culture, leadership and infrastructure interventions
- team, ward level quality, value improvement interventions and coaching
- quality improvement, coaching capacity and capability building.

The aim is to maximise the potential of "value" in collaborative working, empowering teams at all levels to equally contribute to the improvement and added value agenda.

It provides an opportunity for multidisciplinary teams to continue to deliver the highest quality care and focus on the innovation required for an ever-changing future healthcare system. This illustrates the mix of quality improvement developments endorsed by the Board and inclusive of staff groups from across the system.

The aim is to maximise the potential of value in collaborative working, empowering teams at all levels

The Collaborative requires testing of the model to be carried out by three wards/services on one site. Led by the Senior Charge Nurse, the test teams identified are:

SITE	WARD / UNIT	SENIOR CHARGE NURSE
RHC	3C	Emma McGinlay
QEUH	1C	Sally Baird
Phillipshill	Spinal Injuries Unit	Helena Richmond

Each multidisciplinary team includes a Team Lead, Lead Nurse, Management Accountant, Clinical Service Manager and a General Manager. These teams will utilise:

- ✓ weekly collection of quality and finance data
- ✓ a visual management board that includes the display of data over time, linked analyses, and related improvement work
- ✓ multi-disciplinary weekly huddles in which point-of-care team members, team leads, finance staff, and leadership meet to discuss shared learning from the data and continuous improvement work.

**For further information, contact: Rosie Cameron Programme Manager [rosie.cameron@ggc.scot.nhs.uk](mailto:rosie.cameron@ggc.scot.nhs.uk) or Hazel Devlin VM Improvement Coach [hazel.devlin@ggc.scot.nhs.uk](mailto:hazel.devlin@ggc.scot.nhs.uk)**



## Sign up for your Long Service Badge

If you have reached 20, 30, 40 or a staggering 50 years service in the NHS and haven't yet applied for your special Long Service Badge, then why not apply now?

All years working within the NHS count – so the scheme applies to staff who have worked for NHSGGC, or any other Board or Trust anywhere within the UK, as long as you are currently on the NHSGGC payroll.

So if you haven't yet signed up for your long service badge then all you have to do to get your hands on one is complete the online form – it's that simple.

Request for badges are now being batched and will be sent out every three months (February, May, August and November).

**To receive your badge, complete the online form at: [www.nhsggc.org.uk/longservice](http://www.nhsggc.org.uk/longservice)**



## Staff Health – what you told us

**We are pleased to have the results of the Staff Health Survey and thank you for your contribution. These will help us to build the next three-year Staff Health Strategy (SHS) 2020-2023 Action Plan.**

While much has been accomplished across NHSGGC to establish a positive culture built on occupational health provision, employee assistance, protective health and safety guidance, supportive human resources policies and staff health improvement practices, there is still much we can do.

A summary of the results is as follows:

### Knowledge of Staff Health Strategy

Fifty-five per cent of respondents were aware that NHSGGC had a Staff Health Strategy.

### Support for Health and Wellbeing

Most respondents believed their health and wellbeing was important to NHSGGC and



70 per cent knew where to find information to support their health and wellbeing. Most respondents also felt comfortable discussing their health and wellbeing with their line manager, while 80 per cent of staff knew where to find Human Resources policies.

### Stress and Mental Health and Wellbeing

Stress and Mental Health remains our main concern and there is a range of self-help support and services to support staff. Fifty-two per cent of respondents felt that NHSGGC support staff with stress and mental health

issues and 18 per cent of respondents had used the materials on stress and mental health staff web pages and found them useful. This requires more exploration as to what we can do to help you.

### Caring

Prior to this survey we had little information on the number of staff who identified themselves as a carer or with caring responsibilities outside of work. Now we know that 45.5 per cent of respondents identified themselves as a carer. While the survey had a 10 per cent response rate if we apply this across our workforce, this may mean that as many as one in three or one in two employees have a caring role. The application of the Carer's Policy requires to be consistent and we will continue to work with Carer Positive.

### Disability

Staff were asked if they considered themselves to have a disability as defined by the Equality Act 2010. 12.3 per cent of respondents identified themselves as having a disability. Positively, 52 per cent of respondents had been supported with a reasonable adjustment.

### Lifestyle

The most popular lifestyle activity staff had participated in was the Walking Challenge. The activities with the greatest level of awareness were Active Staff and Stop Smoking support. There was less awareness of Weigh in at Work, Running Groups and Money Worries. Support with money worries is a newer area of development which may explain the reduced awareness but we will undertake further promotion of these services. More than 14,000 staff now participate through Active Staff.

### Discrimination

Twelve per cent of respondents said they had been discriminated against at work in the last year. Of those who had been discriminated against the top three were:

- Disability: 18.6 per cent
- Age: 15.6 per cent
- Gender: 14 per cent.

This information will be further analysed through our Workforce Equality Group to determine appropriate actions to reduce discrimination and support our staff.

### Health and Safety

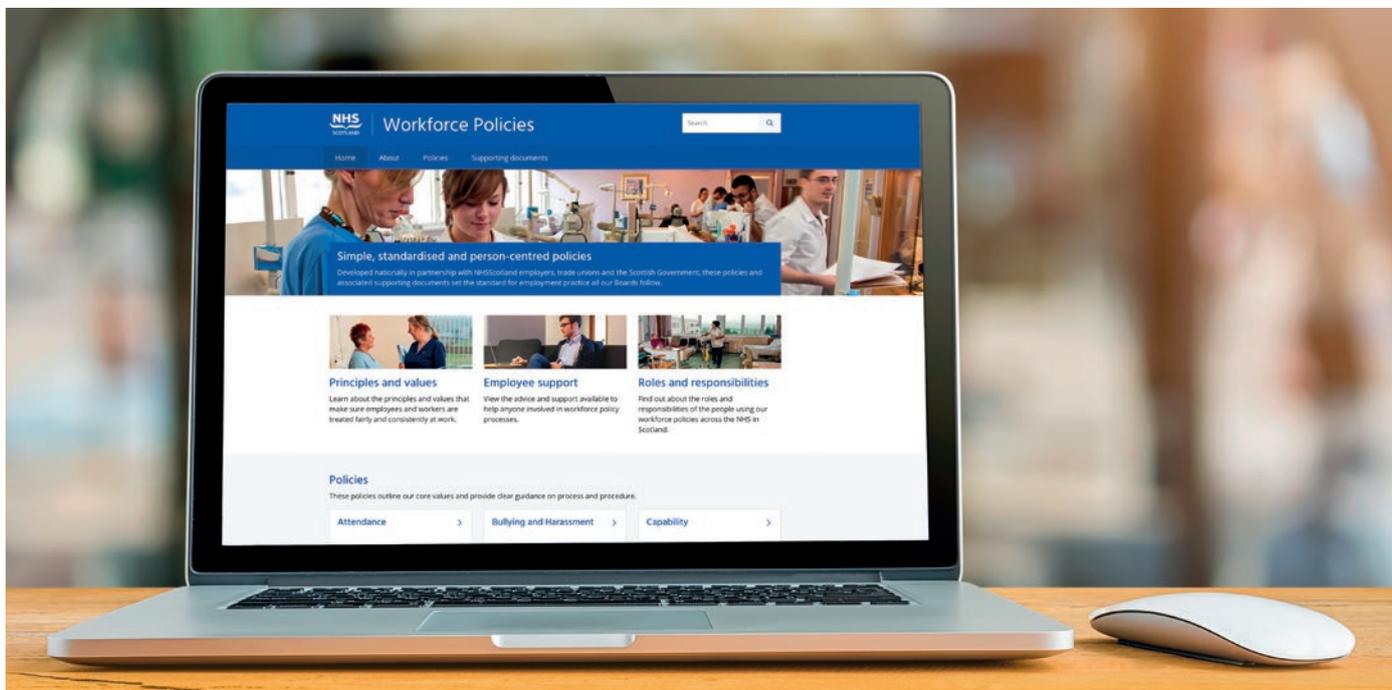
Thirty-three per cent of respondents had participated in the stress survey, which is rolling out across areas. Of concern was the fact that 54 per cent of respondents considered themselves to work in an area where they were at risk from violence and aggression.

Anne MacPherson, Head of Human Resources and Organisational Development, said: "We are delighted at the response from the Staff Health Survey and will use these results and the outcome of our seminar held in February 2020 to focus the 2020-2023 Staff Health Strategy Action Plan on what matters to staff."

**For more information on staff health visit: [www.nhsggc.org.uk/staffhealth](http://www.nhsggc.org.uk/staffhealth)**



**Anne MacPherson**



# Simple, standardised and person-centred NHSScotland workforce policies

**Staff across NHSScotland are set to benefit from a comprehensive refresh of workforce policies which means no matter what Board you work for, the policies will be the same, and easily accessible on any device.**

Until now, Boards have operated with different local policies based on the minimum standards outlined in the national 'PIN' (Partnership Information Network) policies and enhanced at local level. This has meant that staff working across different Boards have been subject to different approaches and personal experience.

Developed nationally in partnership with NHSScotland employers, trade unions and

the Scottish Government, the project team tested a new model of policy development.

The first set of policies, published on 1 March 2020 are:

- Conduct
- Capability
- Bullying and Harassment
- Grievance
- Attendance
- Workforce Policies Investigation Process.

Anne MacPherson, Head of Human Resources and Organisational Development, said: "Together, these set the standard for employment practice across all NHS Boards, underpinning the Staff Governance

Standard that staff are treated fairly and consistently.

"They are an excellent resource and have been refreshed to make them as person-centred as possible."

They are now entering the second phase, which will refresh the remaining PIN policies. It is expected that the refresh will be completed in spring 2021.

**A new website has been developed in collaboration with users to host the refreshed policies. The policies can be accessed anywhere, at any time and on any device [mobile, laptop, desktop] at <https://workforce.nhs.scot/>**

## Staff Walking Challenge

Congratulations to the 2,189 members of NHSGGC and local authority staff who formed 400 teams and took part in the New Year 2020 Walking Challenge.

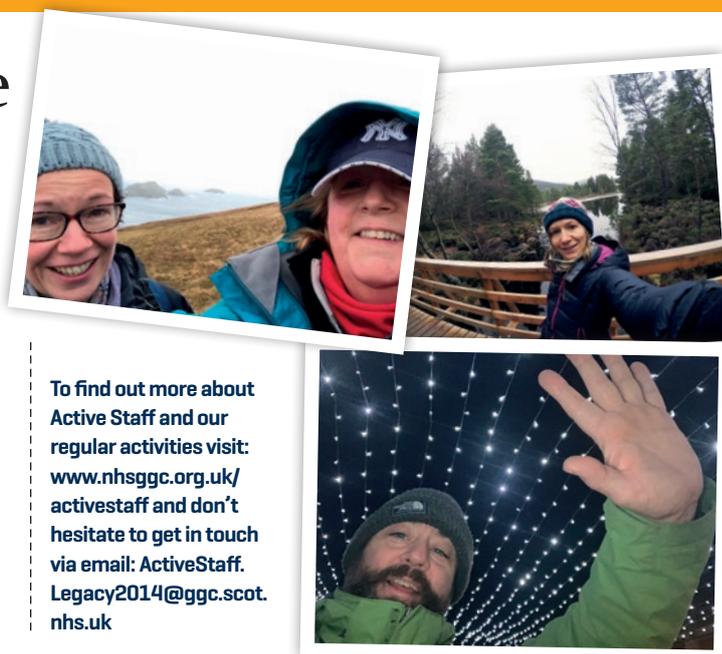
The route saw everyone virtually walk their way across the country starting from Gretna and hoping to finish on the Isle of Skye taking in some of Scotland's most famous landmarks along the way. That would be 871.9km!

With our selfie competition it seems some staff really were walking across the country with friends and family. We had snaps

from the Shetland Isles, the Cairngorms and even far-flung places like Cambuslang.

Barry Hope, Active Staff Co-ordinator, said: "As ever, the Walking Challenge is about trying to make physical activity part of your normal day and challenging yourself to do a bit more than before.

"We'd like to say huge congratulations to you all for getting out in the wintery weather, taking part, getting a bit fitter and making the first walking challenge of 2020 a success."



**To find out more about Active Staff and our regular activities visit: [www.nhsggc.org.uk/activestaff](http://www.nhsggc.org.uk/activestaff) and don't hesitate to get in touch via email: [ActiveStaff.Legacy2014@ggc.scot.nhs.uk](mailto:ActiveStaff.Legacy2014@ggc.scot.nhs.uk)**