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 as 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.
- 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 involve the people who matter to patients and families receive the optimum in patient care.”

Flexibility
We have no set visiting times.

Respect
We respect people’s individual needs and act on an individual basis to ensure the safety, privacy, and dignity of all patients. This means that there may be times when we need to ask people to leave a clinical area temporarily.

Our patients’ needs are firmly at the heart of PCV

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.

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.nhs.ggc.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, medical teams, anaesthetists, recovery ward and the staff on Ward 14 were exceptional. Thank you.

Glasgow Royal Infirmary
I was admitted to ward 12 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.

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.”

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. ‘The care and attention I received was second to none.

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iMatter

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
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 care’s mobile number and
this created a personalised
text message which was sent
to each individual carer.

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
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 that knowledge 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
of working to ensure that staff have more
access to that knowledge and we are about
to establish a communications working group.
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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 that health and wellbeing was important to NHSGGC and their line managers.

**A Healthier Place to Work**
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, with 40 per cent of staff reporting symptoms.

**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. 9.4 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 levels of awareness were Active Staff and Stop Smoking support. There was less awareness of Weigh in at Work, Running Groups and Smoking support. There was less awareness of the Walking Challenge.

**For more information on staff health visit:** [www.nhsggc.org.uk/staffhealth](http://www.nhsggc.org.uk/staffhealth)
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 and don’t hesitate to get in touch via email: ActiveStaff.Legacy2014@ggc.scot.nhs.uk

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