


FOCUS on...

IN FOCUS



IN FOCUS
Introduction

A very warm welcome to our autumn issue of FOCUS. Once again, it offers a varied and interesting reflection of our work.

The Scottish Government published its Community Hospital Strategy Refresh April last year and we give an over view of our work developing a Community Hospitals Improvement Network.

We also update on *Can I Help You?*, the recently launched e-learning modules designed to support staff deal with feedback, comments, concerns and complaints.

We take a closer look at the recent launch of an innovative child-centred tool - the Hospital Coping Kit - which has been developed to reduce hospital-based anxiety and procedural distress in primary school aged children.

In a previous issues, we reported on the introduction of the Scottish Examination of the Newborn Course in Istanbul. This issue brings us right up to date, describing the impact the work is having for frontline staff.

Articles on Practice Based Small Group Learning for Pharmacists, the ACE-III online training tool, a cognitive test that assesses five cognitive domains which forms part of a screening assessment for the diagnosis of dementia, the recent launch of Releasing Time to Learn and the recent first Hot Topics event, a day of GP clinical updates to support appraisal and revalidation, complete the picture.

As Autumn Focus 'goes to bed', we are preparing for our Annual Review. This is an important opportunity for us to demonstrate the range and depth of our activities to provide quality education for a healthier Scotland, training and developing staff in NHSScotland and, increasingly, across the social sector. We hope you are able to attend the event and we will be publicising the event information as soon as all arrangements are in place.

aWORD
from the Chair & Chief Executive

Join the
Conversation

▶ Don't forget you can follow NES on **Twitter** and like us on **Facebook** to find out what we're up to on a more regular basis.

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Community Hospital Improvement

The Scottish Government's Community Hospital Strategy Refresh, published in April 2012, committed to establishing a Community Hospitals Improvement Network (CHIN) that would be hosted by NES.

CHIN builds on the previous work of the Scottish Association of Community Hospitals and continues to focus on the workforce in Community Hospitals across Scotland by facilitating:

- learning and education
- exchange of knowledge and clinical skills
- sharing of good practice
- an Improvement forum

Work to develop CHIN began in September 2012 with the appointment of the NES team: Project Lead Frances Smith, supported by Educational Projects Manager Janice Turner, and Catriona Kerr, Network Administrator. Since that time, the team has been involved in a range of activities designed to develop and promote the network.

The team began by consulting with staff in NHS Boards about what they hoped CHIN could achieve. This consultation took place through visits to Boards, a national survey and culminated in April 2013 with a national Shared Learning Event, at which 125 representatives from the service discussed key priority areas for CHIN.

The resulting combined report was then discussed with NHS Board Leads in order to agree key priorities. As a result, we now have an agreed action plan to introduce an improvement programme focusing on these key priorities for 2013 -15 which include:

1. *Telemedicine / Telehealth*
2. *data sets collected in Community Hospitals*
3. *a clinical pathway of care for patients diagnosed with Dementia*

A CHIN Community of Practice website has been launched in collaboration with the Scottish Government's Joint Improvement Team on Intermediate Care at:

www.knowledge.scot.nhs.uk/chin.aspx

Year one has been an exciting one and we look forward to future developments – remember, It's For You!

It's for YOU!

Community Hospitals
Improvement Network



IN FOCUS

Equal Partners in Care

Spotlight on CARERS

New resource to support workforce learning on carers is launched



The EPiC core principles for working with carers and young carers were launched in June at a reception to mark **National Carers Week**. The reception at Edinburgh Castle was hosted by the Cabinet Secretary for Health and Wellbeing Alex Neil MSP and attended by 170 carers.



**Equal Partners
in Care**


Working together to achieve better
outcomes for carers and young carers

Equal Partners in Care (EPiC) is a joint project between NES and the Scottish Social Services Council (SSSC) to implement the workforce learning elements of the Carers Strategy 2010-15.

It links with the strategic theme, *Responding to New Patient Pathways*, and fits within the Integration of Health and Social Care and Reshaping Care for Older People agendas. It supports the strategic objective: We will support education in partnership that maximises shared knowledge and understanding. Carers are also key to person-centred health and care.

The core principles were jointly launched by NES Chair Lindsay Burley) and Anna Fowlie, Chief Executive of the Scottish Social Services Council (SSSC). The launch was followed by a workforce event on 27 June to celebrate the launch, showcase the work of the EPiC project and involve people in the next stage.

The core principles will underpin workforce learning for the health and social services and will help ensure a consistent approach to working with carers and young carers. The next stage of the project is to distribute the core principles and make sure they are used in practice.

You can access the core principles, related practice examples and learning resources at: www.knowledge.scot.nhs.uk/equalpartnersincare 

For more information please contact Gill Ryan, Project Lead | gill.ryan@nes.scot.nhs.uk

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Launch of e-learning modules



Can I HELP You?

Launch of e-learning modules to support staff to deal with feedback, comments, concerns and complaints

- ❗ Did you know that patients now have a right to give feedback on their care, make comments, or raise concerns or complaints?
- ❗ Did you know that all healthcare providers have the responsibility to make sure they are equipped to deal with feedback in the most appropriate way?

To support this, NES and the Scottish Public Services Ombudsman have developed five e-learning modules around the handling of feedback, comments, concerns and complaints. These are now being launched across board learning management systems and are also available at www.knowledge.scot.nhs.uk/making-a-difference.aspx 

The modules include topics such as:

- how to encourage feedback
- why feedback can help to provide a better patient experience
- how to manage difficult behaviour

They encourage staff to try to deal with feedback as soon as possible, before simple issues escalate, demonstrate how valuable an apology can be and give more information about the complaints process.

SPSO Scottish
Public
Services
Ombudsman

FOCUS on...**The Hospital Passport Coping Kit**

Playing A CENTRAL ROLE

**Development of an
innovative, child-centred tool.**

The Hospital Passport Coping Kit is an innovative, child-centred tool developed to reduce hospital-based anxiety and procedural distress in primary school aged children.

It was developed by psychologists at the Royal Hospital for Sick Children in Glasgow and a training package and roll out of training to paediatric staff has been funded by NES. The Passport gives children a number of coping choices which they can openly discuss with their parents and staff and places them at the heart of decisions about their own healthcare.

This work links in with a wider, ongoing skills-based education programme for paediatric staff on psychosocial care developed by NES. An interactive resource is available on the Children and Young People's Services Managed Knowledge Network (CYP MKN). ***'Psychosocial Interventions for Improving Adherence, Self-Management and Adjustment to Physical Health Conditions in Children and Young People'***



FOCUS on...**The Hospital Passport Coping Kit****The Development of the Hospital Passport**

The Hospital Passport is an early intervention tool aimed at reducing anxiety and distress associated with hospital visits and medical procedures in primary school age children. It was developed by Dr Janie Donnan and Karen MacKenzie based at the Royal Hospital for Sick Children in Glasgow and is grounded in evidence-based research for reducing procedural anxiety and promoting locus of control. An initial pilot study investigating child, parent and staff satisfaction with the Hospital Passport demonstrated its effectiveness.

Following this initial pilot, NES funded the development of staff education on the Hospital Passport to train paediatric staff on evidence-based psychological strategies for reducing distress associated with medical procedures and attending hospital for children. It also demonstrated how using this tool can help children communicate their own coping and treatment choices to staff which enables individually tailored support and assistance with distressing procedures to be put in place. The training was explicitly designed to be brief and portable enabling access to clinical staff who can find it more difficult to be released for training eg. ward nurses and junior doctors. In addition, the training can be disseminated within pre-existing clinical meetings.

NES has been delighted to support and fund the launch of a national campaign to roll out the Hospital Passport across paediatric hospitals and wards throughout Scotland. The official launch held at the Royal Hospital for Sick Children in Glasgow was attended by the Cabinet Secretary, Alex Neil and a follow up event was attended by senior stakeholders from NHSScotland boards. Local training events are currently being delivered by a network of Paediatric Psychologists across Scotland.

What does the Hospital Passport look like?

- the Hospital Passport Coping Kit comprises a booklet with sections including About Me, Coming to Hospital, Needles and Jags, Check Ups, Staying in Hospital, My Operation and Questions for Doctors and Nurses
- activity sheets and pages for stamps, stickers and written praise from staff
- a Bright Ideas Cards pack with evidence based coping strategies to choose from
- a parent/carer information sheet with guidance to help the child fill in the relevant sections of their booklet
- stickers to put on medical/nursing files so staff are aware the child has the Hospital Passport
- stickers / stamps for staff to put in the Praise and Stamps section in addition to comments



FOCUS on...**The Hospital Passport Coping Kit**

Children are given a blank Hospital Passport pack during one of their initial clinic visits and a sticker is put on their medical file to alert staff to this. Children take the Hospital Passport home, read it with their parents and complete the sections relevant to them. In each section, children are presented with a range of options that they can tick to identify what would make a procedure more manageable for them and they are prompted to use evidence based coping strategies via 'tips' in the booklet and the accompanying Bright Ideas Cards.

Children bring their completed Hospital Passport with them to future clinic or hospital visits to show to staff who read the child's preferences and attempt to meet these where possible to support them during their procedure. In addition, building on behavioural and motivational theories, the Hospital Passport can be used by staff explicitly to reinforce positive behaviour through use of the reward section inviting stickers, stamps and written praise in the booklet, thereby increasing the likelihood of a successful procedure (or attempt at one). A particular strength of the tool is that it is a strong visual reminder and cue to both staff and families to use appropriate strategies and therefore makes it more likely that healthcare staff will continue to promote appropriate strategies on an ongoing basis in clinical practice.

This project is a wonderful example of applying psychological care in an accessible way and is expected to make a real difference to patient care and experience. It complements pre-existing NES education initiatives on psychosocial care in Scottish Paediatric Healthcare relating to reducing distress for children and young people.



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National Approach to Mentor Preparation

Be PREPARED

The Second Edition of the National Approach to Mentor Preparation

Students on pre-registration nursing and midwifery programmes must be supported and assessed by mentors. Responding to specific regulatory requirements, the first edition of the National Approach (2007) provided a Scotland-wide core curriculum framework for the preparation of nursing and midwifery mentors. This 2nd edition updates the curriculum framework and introduces guidance to strengthen mentorship in practice.

The review of the National Approach supports NES Strategic Objective 7 - Supporting education that maximises shared knowledge and understanding through a consistent and transferable programme across all mentor preparation providers in Scotland, and was a key action for practice education in the 2012/13 NES Corporate Plan.



The review of the *National Approach* aimed to support contemporary programmes of preparation for nursing and midwifery mentors through a short-life working group; scoping of research and current programme delivery; and engaging with key groups and networks.

In response to findings from these activities, the second edition places increased emphasis on mentor clinical skills teaching and competency assessment, mentor accountability for decisions on student progression throughout the programme and entry to the professional register and implementing reasonable adjustments in practice. Updated supporting evidence underpins the core curriculum outline content alongside three new sections to strengthen mentorship in practice and reflect the range of practice contexts in which mentors now support students. These new sections include an outline process for the identification and selection of mentors, a common understanding of the supervising mentor role and guidance for continuing professional development of mentors.

www.nes.scot.nhs.uk/publications-and-resources/corporate-publications/national-approach-to-mentor-preparation-2nd-edition.aspx

IN FOCUS

Scottish Newborn Examination Course (Update)



Making Steady PROGRESS

Supporting the introduction of the Scottish Examination of the Newborn Course in Istanbul

A personal account of Helene Marshal's most recent visit to Istanbul

In the spring edition of fOCUS, we highlighted the planned replication of the Scottish Examination of the Newborn Course in Istanbul to support the reduction of the newborn mortality rates. Istanbul has a population of 13 million and has only around 137 neonatologists / paediatricians and a few additional newborn examiners, therefore many babies do not have a full physical examination after birth and some serious problems are not recognised.

This international work spreads the word of the work of NES, and links into a number of NES themes, such as improving quality and reshaping workforce.

With the introduction of a series of initiatives, Turkey has managed to reduce its under 5 mortality rates from 84 babies per 1000 in 1990 to 15 per 1000 in 2011, a reduction of 75%; however there is still a way to go if we compare this to the UK's rate of 5 per 1000.

IN FOCUS**Scottish Newborn Examination Course (Update)**

Dr Serdar Comert and his team hope that the introduction of this course and the standardisation of the Newborn Examination by all practitioners should help to improve these mortality and morbidity figures.

As Scottish Multiprofessional Maternity Development Programme (SMMDP) lead, I visited Istanbul at the invitation of Ministry of Health to support the replication of this course.

Two pilot one-day courses for neonatologists, paediatricians, general practitioners and family physicians were developed and delivered at the Çocuk Dostlari Yenidogan Kongresi (Baby Friendly Congress), in Istanbul. Many of the materials from the Scottish course and a film detailing the standardised examination recently produced by the SMMDP to support practitioners in Scotland was translated and voiced over in Turkish. Over 60 practitioners attended the course and it was well evaluated by those attending.

Further development is underway by the Turkish team, to translate further materials and adapt these to meet local needs and to produce a suitable course to train the nurses and midwives in the city to carry out this very important examination.

In addition to supporting the pilot courses, I met with Istanbul's Minister for Community Health and his team and learned of their work to reduce maternal and infant mortality. During my time there I learned of their progress and enthusiasm for identifying innovative ways to change their health service and to support improvements. While the main focus of my visit was to advise on the introduction of the examination of the newborn course, we had a many discussions around SMMDP's and other Scottish work around maternal health.



Pictures taken during my visit with the Community Health Team



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Scottish Newborn Examination Course (Update)



The Blue Mosque

The maternal mortality rate in Turkey is considerably higher (137 per 100,000 compared to UK's 7 per 100,000) than it is in Scotland and the community health team were very interested in our health service, how we educate our staff, staff roles and organisational change.

I had an opportunity to share with them by presentation (with simultaneous translation, an interesting experience!) and discussion of other initiatives, developed in Scotland, that the SMMDP, Child and Maternal Health team in NES have been involved in and/or lead.

They were particularly interested in obstetric emergency training (SCOTTIE), Keeping Childbirth Natural and Dynamic (KCND) care pathways, advanced practice roles such as neonatal nurse practitioners (ANNP) and our work supporting the Refreshed Framework for Maternity Services.

Visiting Turkey's oldest maternity hospital and a number of family practitioner clinics, I felt I was taken back to where Scotland's maternity services were in the 1980s. However, I was impressed with what was being delivered with limited resources, training and staff. There is much work to do in supporting the reduction in the Under 5s Mortality rate. Hopefully with excellent leadership from the neonatal team in Turkey. The advice and materials provided by NES will help them develop their workforce which will in turn improve their services. More discussion is underway regarding maternal mortality initiatives.

Istanbul itself is a very beautiful, interesting and vibrant city where east and west meet, a place I would suggest is well worth visiting. The people were welcoming and I have been privileged to share work and a little leisure time with them. I would like to give thanks to Dr Özlem, community health specialist, Dilek Bilbut, midwife and particularly Dr Serdar Comert for their care and friendship during my stay in Istanbul, giving up their precious free time to be with me, and to the organisers of the 'Cocuk Dostlari Yenidogan Kongresi' (Baby Friendly Congress).

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PBSGL for pharmacy practitioners

Best Practice MAKES PERFECT



The PBSGL programme is designed to give practitioners the opportunity to define and engage in self-directed learning activities and related to authentic practice problems.

Supporting and developing the role of pharmacists and pharmacy technicians is core business for the Pharmacy Directorate within NES. This article focuses on the introduction of Practice Based Small Group Learning (PBSGL) as part of the NES Pharmacy Continuing Professional Development (CPD) Programme from Autumn 2013. This development aligns with providing education for care which is closer to people in their communities (NES Strategic Objective 6).

NES Pharmacy is introducing a new learning activity called Practice Based Small Group Learning (PBSGL) for pharmacy practitioners. PBSGL is a form of problem based learning, originated in Canada over 25 years ago, to support GP Continuing Professional Development (CPD). GP colleagues in NES have helped adapt this format for pharmacy practitioners.

PBSGL Groups, comprising a trained facilitator and around seven participants, meet regularly to discuss modules on specific topics. Modules contain an introduction, sample cases, evidence-based information from the literature and case commentaries. These form the basis for participants to reflect and discuss clinical cases from their practice with their peers, attempting to reduce the gap between current practice and 'best practice'.

In 2012, groups in Ayrshire, Lothian and Glasgow were included in a pharmacy uni-professional pilot of PBSGL. To date, 10 modules have been 'pharmacised' and 35 facilitators have been trained to support new group formation. Two modules, Patient Safety and Patient Safety – High Risk Medicines will be offered to all Scottish pharmacists and pharmacy technicians as part of the NES Pharmacy CPD Programme Autumn 2013.

IN FOCUS**Online dementia training tool**

The ACE-III online training tool was recently launched by NES Psychology and Psychological Therapies in Dementia in collaboration with the University of Glasgow. The tool sets out to improve knowledge, skills and accuracy of healthcare professionals administering the ACE-III as part of a screening assessment for the diagnosis of dementia.

This tool aligns itself with the key objectives in the NES Strategic Framework by supporting education that maximises shared knowledge and understanding. This tool forms part of a programme of educational resources and high quality training developed to meet the National Dementia Strategy objectives and the 10-point National Action Plan.

The tool was officially launched during Dementia Awareness Week in June this year and has received an extremely positive response.

What does the tool do?

The ACE-III Trainer is an online training programme designed to help staff administer the Addenbrookes Cognitive Examination - Third Edition (ACE-III). The ACE-III is a brief cognitive test that assesses five cognitive domains: attention, memory, verbal fluency, language and visuospatial abilities.

The test can be used as part of an assessment process to screen for impairments indicative of dementia. It provides appropriately trained staff with knowledge, practical examples and exercises in using the application of the ACE-III, giving those staff the opportunity to become familiar with administering the ACE-III prior to gaining clinical experience.

Maximising Shared **KNOWLEDGE** and **UNDERSTANDING**

ACE skills in cognitive screening



IN FOCUS**Online dementia training tool**

This resource covers seven main modules and includes video clips of a health professional administering the ACE-III. It is designed to assist users to develop their cognitive assessment skills and improve their ability to accurately score test results for individuals presenting with cognitive difficulties.

It includes examples of prediagnostic conversations with individuals, how to administer and score reliably, and how to give sensitive feedback to individuals in clinic. Live scoring of case examples aims to support the development of work-related skills.

The training helps staff and organisations ensure that staff administering cognitive screening tools, to individuals who may be cognitively impaired, have the required knowledge and skills to ensure good clinical practice. The ACE-III Trainer does not enable individuals to diagnose dementia on the basis of completing the trainer. A multidisciplinary assessment by qualified clinicians remains essential for diagnosing dementia, as per clinical guidelines (SIGN 96). The trainer aims to improve patient safety and clinical governance specific to the clinical assessment of cognitive impairment.

Who will use the tool?

This e-learning resource is for health professionals working at the Enhanced/Expertise Dementia Practice Level as identified within 'Promoting Excellence: A framework for all health and social services staff working with people with dementia, their families and carers'.

All staff who currently administer and score cognitive screening tools as part of their routine clinical role would benefit from completing this training. Staff administering cognitive screening tools should be health professionals who have received training and supervision in administering these as part of professional training. The ACE-III Trainer has been devised to be appropriate for the following professional groups: general practitioners, psychiatrists, nurses, occupational therapists and clinical psychologists working with patient populations that require cognitive screening. This list however is not exclusive.

Why was the tool developed?

It was designed in response to a perceived need we identified to give staff the opportunity to practise skills in administering the ACE-III cognitive assessment tool. In line with Scotland's National Dementia Strategy the trainer tool will improve knowledge and skills specific to assessment and identification of cognitive impairment as part of 'Promoting Excellence: A framework for all health and social services staff working with people with dementia, their families and carers'.

IN FOCUS


Online dementia training tool



How can I register for the course?

On registration applicants will be asked to supply their work email address which then serves as their login. To assist NES and the University of Glasgow in ensuring all appropriate services and staff groups are able to access the trainer, applicants must provide some details - including their professional group. The individual user log-in enables users to access the trainer from any computer and continue from where they left off each time.

How do participants log on to the course?

The course is hosted by Glasgow University and can be accessed via the website at: www.fom.gla.ac.uk/aceiiitrainer 

What's next?

Raising awareness of the tool to a wider audience will be a focus of 2013, starting with a promotional event at a General Practitioners CPD day in August 2013.

In addition, planned audits will be conducted to identify which professional groups are accessing the tool and completing the training programme.

Early data collection indicates that *484 people have registered to use the ACE-III trainer since its launch last month.*

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Launch of *Releasing Time to Learn*

taking the TIME

Recognising the relationship between enhanced learning and improvement in health and wellbeing



Launch of Releasing Time to Learn

Responding to challenges for learning, teaching and assessment, NES has worked with NHS Institute for Innovation and Improvement and NHS Scotland stakeholders to develop *Releasing Time to Learn*. This resource helps teams to implement measurable, sustainable changes to clinical learning environments supporting delivery of safe, effective, person-centred care.

The resource supports work across Practice Education and Quality Improvement workstreams within NES. It promotes an enhanced learning experience for NHS workforce by increasing opportunities for learning. It recognises the relationship between learning and health and wellbeing outcomes. This supports the quality ambitions for safe, effective, person centred care.

The improvement methodologies contained in Releasing Time to Care (RTC) quality improvement programmes have increasingly supported staff to review processes and practice, and to free-up time that can be re-invested on activities focused more directly on care outcomes. This new module is complementary to the wider RTC series.

Responding to challenges for learning, teaching and assessment within departments, T2L supports teams to implement LEAN improvement tools that will build on existing strengths.

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Launch of *Releasing Time to Learn*

Teams are asked to look afresh at the way they work, identify how they can make measurable and sustainable changes to their environment and working methods, and so increase opportunities for learning activities, enhancing the learning experience.

Individual teams implementing T2L have reported the introduction of:

- **learning and education**
- **a new Patient Falls Programme:** resulting in more time spent providing a person-centred approach to patient falls education with the long term goal to reduce the incidence of falls
- **training patients/carers/relatives on the use of specific equipment in their own home:** providing a more efficient and effective process potentially saving five hours and £70 per patient trained
- **reflection on the agenda of all team meetings:** improving the process for clinical supervision, *"We changed the culture of supervision by doing it as a team"* pilot team
- **an electronic learning zone for staff- potentially saving 1,577 hours/ year:** an added bonus was that users were confident the resources they accessed through the Learning Zone were up to date
- **T2L as a support to professional development planning (PDP):** *"streamlining the PDP process has resulted in a less cumbersome process, relieving staff of unnecessary stress and anxiety"* pilot team
- **updated student learning packs:** this adds value to the student journey and improves learning opportunities for learners

- **a simplified process for login to educational resources within the department:** reducing the time spent looking for resources from 10 minutes to 30 seconds
- **protected learning time for all staff members:** staff report that they feel more involved, empowered and valued and that they can take a more considered, organised approach to their professional development plans and learning experience

“ *I was very impressed this module looks great and a fantastic tool to tie into the QI Hub* ”

RTC Facilitator

“ *I started Time to Learn - cross referencing with e-KSF - this ticks all the boxes - Love it.* ”

District Nurse

RTC is a key component to delivering safe, effective, person-centred care. (1,2,3,4,5).

The T2L module and toolkit was launched to an enthusiastic audience at the NHS Greater Glasgow and Clyde Releasing Time to Care Event held in June 2013 and can be accessed on the Releasing Time to Care Community of Practice at: <http://www.knowledge.scot.nhs.uk/rtccommunity.aspx> using an Athens password.

References:

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GP CPD Conference

GEARING UP for GP CPD

NES's first GP CPD Hot Topics conference

Hot Topics was a day of GP clinical updates to support appraisal and revalidation

Hot Topics, a conference of clinical updates for general practice, took place on 31 August 2013, hosted by NES and in conjunction with the Partnership, an educational resource for GP Continuing Professional Development, (CPD).

This was the first time NES held a Hot Topics day focusing on clinical updates relevant to GP CPD to assist with appraisal and revalidation preparation.

The day aimed to provide updates for GPs, Practice Nurses, Newly Qualified GPs and Retainers throughout Scotland on a range of subjects covering cardiology, respiratory, dermatology, rheumatology, ENT, dementia, and GP CPD made easy. Attendees gained between 6-12 CPD credits for their appraisal and revalidation by attending.

The conference was established in response to the demand from busy GPs to satisfy their CPD requirements in a time efficient manner.

Dr David Cunningham, Assistant Director of GP CPD at NES welcomed the rationale behind the conference:

"As the daily workload for GPs mounts, it is becoming increasingly hard for GPs to find the time to keep themselves up to date with clinical practice and meet the demands of the appraisal process. We hope GPs welcome the chance to learn on a Saturday and cover a varied mix of clinical updates in one day while providing an opportunity to socialise with GP colleagues"

The programme featured top speakers - both leading NHS consultants and GPs with specialist interests covering a range of clinical subject areas in a quick fire presentation style.



IN FOCUS GP CPD Conference

Dr Niall Cameron, National Appraisal Lead at NES held a drop-in session for any ad-hoc questions on appraisal and revalidation. He said: *"Many GPs are still unsure of the process for revalidation and Hot Topics was a great chance to informally discuss queries and share best practice"*.

There were a large number of exhibitors spanning healthcare and education including: NES Knowledge Services, SOAR, NES Psychology, Arthritis Care, NES Self Management Workstream, Scottish Recovery Network, MCN on Rheumatology, MDDUS, Head Medical, NHS Lanarkshire Physiotherapy Service and Diabetes UK.

Speakers included:

- Niko Tzemos (senior lecturer in cardiovascular, University of Glasgow) and Andrew Docherty (consultant cardiologist, NHS Lanarkshire) on cardiology updates
- Dr John Farley (GP with specialist interest) and Andrew Smith (respiratory consultant NHS Lanarkshire) on respiratory updates
- Dr Barry Gibson Smith (GP with specialist interest) with dermatology in primary care interactive quiz
- Dr Gillian Guthrie (GP with specialist interest) and Karen Donaldson (consultant rheumatologist, NHS Lanarkshire) on rheumatology updates
- Haytham Kubba (consultant otolaryngologist, Royal Hospital for Sick Children) and Craig Murray (consultant in ENT, Greater Glasgow & Clyde) on ENT updates
- Margaret Brown and Anna Waugh (senior lecturers in mental health, the University of the West of Scotland) on Dementia updates
- Derek Boyle (senior knowledge manager for NES KSG) on GP CPD made easy and accessing clinical and non clinical updates



IN FOCUS**Making Communication Even Better**

NOW we're Getting BETTER

An interactive resource created for all health, education, social work and voluntary sector staff by people with communication support needs

Making Communication Even Better is a learning resource for staff who want to improve their own communication and make their service communication more accessible. The resource is in two formats: online and as a workbook. It comprises film clips and reflective activities with signposting to additional learning resources.

Making Communication Even Better was developed by our Allied Health Professionals team alongside voluntary organisations and people with personal experience of communication support needs. The resource therefore provides communication education from the perspective and experience of people who have communication support needs. This is a key priority in the NES AHP Education Strategy The Next Chapter.

The Making Communication Even Better resource comprises:

1. a DVD of film clips in which people with communication support needs interview one another or talk direct to camera about their experiences of health and social care
2. a Learner's Workbook which shows learners how to use the film clips to reflect on their own practice and identify ways to improve their communication



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Making Communication Even Better

Who is it for?

Communication continues to be a frequently cited learning need across NHS and other services. There are many other learning opportunities that focus on improving communication, but this resource comes from the perspective of individuals who have personal experience of communication support needs. It makes for a powerful learning experience for anyone who provides health or social care services in the statutory or voluntary sectors. It is for frontline staff and for managers who are involved in the design of services. If we can get our communication right for people with communication support needs then everyone who uses our services will benefit from our improved communication. Learners can work through the resource on their own or as part of a group.

What is a Communication Support Need (CSN)?

Communications Forum Scotland defines a communication support need as any individual who needs help to:

- understand (verbal or written communication)
- express themselves
- interact with others

An individual may have had this need all their lives because, for example, they have autistic spectrum disorder, a learning disability, cerebral palsy or a sensory impairment. Alternatively, an individual may have developed a communication support need as a result of an accident or illness: for example, dementia, motor neurone disease, a stroke or multiple sclerosis.

Anyone who is involved in providing a service to the public needs to be aware of CSN, understand the potential barriers to inclusion and adapt their own communication to help remove those barriers.

How was Making Communication Even Better developed?

People with Communication Support Needs (CSN) were invited to express their vision for an inclusive health service.

The Making Communication Even Better project involved sixteen people with CSN. They thought about their experience in the health service and how they would like the health service to support them and take account of their needs.

The people involved in the project had CSN for different reasons. Some had had them all their lives as a result of cerebral palsy or a learning disability. Some acquired them in later life as a result of a car accident, stroke, dementia or other illness.

Regardless of what caused their CSN, their experiences of health services were similar.

- they recognised when the service they received from staff was good and when it was not
- they were helpful in suggesting ways for staff to improve their service

NES worked with Communication Forum Scotland member organisations, Capability Scotland and Talking Mats. Over three workshops, the project group came up with ten vision statements for an inclusive, accessible service and created film clips to share their thoughts and experiences. Although these statements were developed in relation to health care services, they are relevant across health and social care settings.

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Making Communication Even Better

The ten vision statements relate to:



Booking Appointments,
Contacts and Attracting
Attention



Staff attitude



Time



Patient at the
Centre



Knowledge of
Communication tools



Physical
Environment



Communication
Support and Health



Patient Feedback



Information



Signage

The Making Communication Even Better Learner's Workbook is organised around the ten vision statements. Each statement is illustrated by personal experiences told by members of the project group, presented in film clips.

In addition to the film clips of people with CSN, two further clips provide an introductory activity and explore communication from the staff point of view.

The Workbook guides learners through the clips and asks them to:

- reflect on their own responses to the film clips
- consider how their attitudes and feelings may influence their communication
- examine their service from the point of view of people with CSN
- identify ways to make their service more inclusive and accessible for people

The Learner's Workbook is available on-line http://www.nes.scot.nhs.uk/media/2036508/mceb_workbook_interactive.pdf as an interactive workbook (with links to the film clips). It is also available as a hard copy with accompanying DVD for those who are unable to access the resource on-line. For a hard copy of the resource, please contact: AHP@nes.scot.nhs.uk

NES Board Meetings

NES Board business meetings are held throughout the year and are open to the public. The meetings normally begin at 10.15 am and last 2 - 3 hours.

Anyone interested in attending a Board business meeting should contact David Ferguson, Board Services Manager, on 0131 656 3424 or via:

[✉ david.ferguson@nes.scot.nhs.uk](mailto:david.ferguson@nes.scot.nhs.uk)

The Board business meeting dates from now until March 2014 are set out below. Details of the venues will be publicised in due course, although the meetings normally take place at Westport 102, West Port, Edinburgh, NES's Edinburgh office base.

2013

Thursday 24 October

Thursday 5 December

2014

Thursday 23 January

Thursday 13 March

Editorial Group

Christine Patch (Corporate Communications)

[✉ christine.patch@nes.scot.nhs.uk](mailto:christine.patch@nes.scot.nhs.uk)

David Ferguson (Board Services)

[✉ david.ferguson@nes.scot.nhs.uk](mailto:david.ferguson@nes.scot.nhs.uk)

David Rome (Dentistry)

[✉ david.rome@nes.scot.nhs.uk](mailto:david.rome@nes.scot.nhs.uk)

Rosemary Porter (Psychology)

[✉ rosemary.porter@nes.scot.nhs.uk](mailto:rosemary.porter@nes.scot.nhs.uk)

Karen Adams (Educational Development)

[✉ karen.adams@nes.scot.nhs.uk](mailto:karen.adams@nes.scot.nhs.uk)

Jennifer McColgan (Corporate Communications)

[✉ jennifer.mccolgan@nes.scot.nhs.uk](mailto:jennifer.mccolgan@nes.scot.nhs.uk)

Christine Clark (HR)

[✉ christine.clark@nes.scot.nhs.uk](mailto:christine.clark@nes.scot.nhs.uk)

Ann Rae (NMHAP)

[✉ ann.rae@nes.scot.nhs.uk](mailto:ann.rae@nes.scot.nhs.uk)

Val Findlay (Pharmacy)

[✉ val.findlay@nes.scot.nhs.uk](mailto:val.findlay@nes.scot.nhs.uk)

Anne Dickson (Medicine)

[✉ anne.dickson@nes.scot.nhs.uk](mailto:anne.dickson@nes.scot.nhs.uk)



NHS
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Published by
NHS Education for Scotland
Westport 102
West Port
Edinburgh EH12 5HD
Tel: 0131 656 3200
Fax: 0131 656 3201

www.nes.scot.nhs.uk

enquiries@nes.scot.nhs.uk

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