I am very pleased to introduce our updated ‘Nursing Midwifery and Allied Health Professions Strategy’. During the course of my work, through “Back to the Floor” and through Patient Safety Walkrounds, I am privileged to meet many inspirational individuals and teams.

In NHS Grampian, we are fortunate to have many different members of the Nursing, Midwifery and Allied Health Professional Team who have developed their skills and expertise in a wide variety of ways so that they can benefit the people we all serve directly and indirectly.

For example, a number of our health care support workers have undertaken SVQs and the Niche Programme to expand their skills.

We have a group of nurses, midwifery and AHP consultants who are demonstrating very clearly the benefits to patients and their families of having practitioners at this level.

Nurse practitioners in the Out of Hours Service and Hospital at Night have taken on new roles safely and brought significant benefits to services. Student nurses are invited to submit their nominations for “Mentor of the Year”, which shows the enthusiasm and skills that mentors bring to students that enhance the students experience in practice placements.

All this is very positive for patients and for student nurses as they prepare to become registered professionals.

However, I know from feedback that patients, their families and their carers do not always feel that their experience of health services is a positive one for a variety of reasons. Therefore it is so important that nurses, midwives and AHPs promote care that is person-centred, safe and effective.

This is encapsulated in the Ten Essential Shared Capabilities (page 5), which set out the value base for mental health nurses but which is equally relevant to all nurses, midwives and AHPs.

These values need to be applied to every area of our work, all of the time, especially when we consider the vulnerability of our patients at every stage of their journey.

I would want to highlight the following areas as requiring close attention to detail:

- Privacy and dignity.
- Record keeping.
- Diagnosis and treatment.
- Communication.
- Discharge management.

Nurses, midwives and AHPs work as members of many teams and have the opportunity to make a major contribution to health improvement and patient care. I would ask you to read and absorb this document and strive to live up to the high ideals of professional practice so that patients, their families and their carers can see the difference that nurses, midwives and AHPs make.
A subgroup of the Nursing, Midwifery and AHP Strategy Group was tasked with reviewing the 2007 NHS Grampian Nursing, Midwifery and AHP Strategy and producing an updated strategy that would reflect the challenges of the dynamic health care environment in which nurses, midwives and AHPs practice. The key themes that were identified in 2007 were accepted by the Group as remaining equally relevant for the new strategy.

These themes are:

- Caring.
- Quality.
- Education and training.
- Patient safety.

The Strategy recognises that effective communication and leadership support these themes.

NHS Grampian’s Health Plan for 2010-2013 identifies the following five strategic themes:

- Delivering safe, effective and timely care in the right place.
- Improving the health of the public and reducing inequalities.
- Involving patients, public, staff and patients towards mutuality.
- Developing the workforce and empowering staff.
- Improving efficiency, productivity and sustainability.

NHS Grampian’s Nursing, Midwifery and AHP Strategy 2010 complements the health plan by emphasising the nursing contribution to the strategic themes.

It is linked with other NHS Scotland policy documents such as Delivering Care, Enabling Health, NHS Quality Strategy, Better Together, and Patient Safety.

The contributions of nurses, midwives and AHPs are illustrated throughout this document.
Introduction

Change has always been a part of health care. This is reflected in the challenges of new ways of working, the development and emergence of new roles and greater emphasis on partnership working. It is, however, important to recognise that despite the constant presence of such change, the fundamental values and beliefs of the professions as identified in the themes of this document remain constant.

Workforce planning and redesign is an essential part of meeting changing health care needs. Part of ensuring sustainable services is our ability to predict, plan, recruit, develop and retain the required workforce to ensure the right staff with the right skills are in the right place at the right time.

NHS Scotland has identified five ambitions for the NHS workforce:

- Tackling health inequalities by ensuring that all staff are ambassadors for health improvement.
- “Shifting the balance of care” In other words moving care from acute settings to community by providing new models of care closer to home.
- Ensuring a quality workforce by offering an exciting and rewarding career for all.
- Delivering best value by providing quality services in a sustainable way.
- The growth of an integrated workforce through the development of a dynamic, flexible, multi-professional team and the integration of service, workforce and financial planning.

In addition to the above ambitions the following drivers have been identified in current NHS Scotland policy:

- A mixed model of health and social care.
- Shifting patterns of disease.
- An ageing population.
- Changing patient expectations.
- Supply of suitably qualified staff.

The result of these drivers is a demand for new skills and new roles. There is a need to ensure that Higher Education Institutes and NHS Boards can provide programmes to support such developments.

It is important that nurses, midwives and allied health professionals have a shared vision of how services must develop and change, and an understanding of how this will contribute to the overall provision of health and social care in Grampian. Furthermore, there is a need to take opportunities to develop new roles rather than increasing the numbers of existing roles.

Examples of new role developments aimed at providing the highest quality of care include assistant practitioner roles in midwifery and AHP practice. In addition there are also advanced practitioner, and consultant nurse, midwife and allied health professional roles.

Caring

For a long time, nurses, midwives and allied health professionals have adopted a holistic approach to care. All see and value the patient as an individual first, not just as a diagnosis.

NHS Education Scotland commissioned work on 10 Essential Shared Capabilities (ESCs) to be delivered by all mental health nurses in Scotland. This approach promotes people’s rights, respect for individuals and requires nurses and allied health professionals to:

- Work in partnership.
- Respect diversity.
- Practice ethically.
- Challenge inequality.
- Promote recovery.
- Identify people’s needs and strengths.
- Provide service user-centred care.
- Make a difference.
- Promote safety and positive risk taking.
- Engage in personal development and learning.

It is now recognised that the essential shared capabilities are relevant not only for mental health, but for all branches of nursing, midwifery and AHP practice. They are all about values-based practice, our values and the values of those health professionals care for. The ESCs are now included in all pre registration branches of nursing.

At a time when the context of care is changing, it is crucial that the 10 ESCs are strong and that nurses, midwives and AHPs feel empowered to challenge their dilution or omission and act where appropriate. NHS Grampian gives a commitment to maintaining a culture where caring is valued and seen as central to the provision of effective quality care. The NHS Quality Strategy (2010) recognises that the patient’s experience is about more than speedy treatment – it is the quality of care they get that matters most to them.

Nurses, midwives and allied health professionals are responsible for the delivery of patient-focused care that is of a high quality and is safe and effective.

PEOPLE WITH LEARNING DISABILITIES IN GENERAL HOSPITALS.

Before:
People with learning disabilities having difficulty accessing appropriate care in general hospital settings. Nurses and midwives were aware that they required additional skills in communication and adjusting the way they deliver their care.

Actions:
Learning disability specialist nursing support available to advise on communication, consent, assessment of individual need and how to make reasonable adjustments to care delivery.

After:
People with learning disability and their carers report a more positive experience in hospital. Nurses and midwives in general hospital are developing more skills and understanding in how to care for people with a learning disability, accessing the specialist advice service when necessary.
For the first time, the quality of care provided will be measured by individual senior charge nurses with support from the clinical governance unit and the nurse consultant for patient experience. There is a need to act on feedback from patients on their experience, whether from patient stories or from patients complaints or suggestions.

NHS Grampian’s progress will be reported locally and nationally and the information will be used to improve the quality of care delivered. Patients can expect to experience improvements in the areas patients have highlighted.

These are:

- Caring and compassionate treatment.
- Clear communication and explanation.
- Effective collaboration with the clinician.
- Clean and safe care environment.
- Continuity of care and clinical excellence.

“Patients who are admitted to hospital believe that they are entering a place of safety where they, and their families and carers, have a right to believe that they will receive the best possible care. They feel confident that should their condition deteriorate they are in the best place for prompt and effective treatment” (Armitage et al 2007)

The National Better Together Programme is Scotland’s patient experience programme. It uses the public’s experiences of NHS Scotland and builds upon our existing good practice in improving patient-centred care. In addition the work of the Patient Safety Programme and the healthcare associated infection taskforce will be integrated into the quality strategy.

This will support better links between national initiatives and closer more effective working locally to implement those initiatives.

There is a range of resources to support the development and delivery of effective high quality care. For example:

- Position statements, clinical guidelines and best practice statements can be accessed from NHS Quality Improvement Scotland.
- The Royal College of Nursing and the Royal College of Midwives.
- Research evidence together with local clinical risk management activity.
- Multi-disciplinary discussions.
Quality is a dynamic process which requires strong leadership at all levels in the organisation. To improve quality of care, all staff need to be open to change and feel supported and encouraged to implement new evidence and change in practice. Effective communication, clinical audits, and networking and sharing practice with colleagues, at both local and national levels, will facilitate improvements to patient care. The NHS Grampian nursing and midwifery website and the midwifery managed knowledge network provide a focus for sharing and learning.

PERSON-CENTREDNESS IS RECOGNISED AS A VITAL COMPONENT OF QUALITY CARE.

Before:
If patients wanted to give us feedback about our services they were limited in the ways they could do this. They could send an email or a letter to the feedback team or use the official NHS Grampian feedback forms. We know that formal routes for feedback can be off putting and so we wanted to encourage more feedback by providing more informal ways for feedback.

Actions:
We have provided all staff with a toolkit which explains a variety of ways in which people can be encouraged to give us their feedback.

After:
Patients can now share their views about our services in lots of different ways without going through the formal feedback process. Staff are encouraged to seek the opinions of patients, relatives and carers as part of their normal working practices and experience information is being used to improve services.
Learning and education

The Healthcare Quality Strategy for NHS Scotland (2010) (previously referred to as NHS Quality Strategy) identifies the importance of developing and supporting staff to make best use of their skills, knowledge, accountability and professional leadership to ensure quality of care at all levels. Learning and education is a central part of this process and both national and local strategies support the following:

- Local Learning Plans in each clinical area that outline the learning needs of staff. This will ensure proactive planning of learning which is linked to workforce development.
- Personal Development Plans for all nurses, midwives and allied health professionals linked to the Knowledge and Skills Framework (KSF).
- Continuing Professional Development (CPD) for nurses, midwives and allied health professionals to ensure knowledge and skills are developed, maintained and updated in support of professional requirements, lifelong learning and workforce development.

Career development across nursing, midwifery and AHPs groups is directed through a range of national development packages which aim to support all levels of staff with personal and professional development in existing roles and in new roles. This is about encouraging staff to be the best they can be in their work role.

Safe and effective practice

Patient safety in NHS Grampian is good by international standards. However, it is believed that much more can be done to make the care that is delivered safer and more effective. For that reason the motto of:

“Every patient, every time – building a safer NHS for the people of Grampian” is adopted.

The adoption of this philosophy is embodied in the NHS Grampian Patient Safety Strategy. Patient safety is the responsibility of every NHS employee, whether directly or indirectly involved in the delivery of effective care.

NHS Grampian is committed to working with other organisations, such as NHS Quality Improvement Scotland and the Scottish Patient Safety Alliance, to demonstrate through measurable indicators that we are, year on year, making health care safer for the people of Grampian. NHS Grampian is working hard to embed patient safety into everything that is done, from staff education, to the delivery of care in all settings and to the redesign of services and in the monitoring of patient safety. For example:

- 94% of hand washing compliance in NHS Grampian at May 2010.
- Increasing numbers of Nurse and Midwife Cleanliness Champions.
- Senior Charge Nurse Development Programme reinforcing role of Senior Charge Nurse in cleanliness and hygiene standards.
- Dress code re-launch.

ACHIEVE AGREED REDUCTIONS IN RATES OF HOSPITAL ADMISSIONS AND BED DAYS OF PATIENTS WITH PRIMARY DIAGNOSIS OF COPD, ASTHMA, DIABETES OR CHD.

Before:
Some patients with chronic health conditions sometimes being managed ineffectively, resulting in hospital admission.

Actions:
Increased education and role development of Practice Nurses, District Nurse Team and AHPs around long term condition management.

After:
Long term condition management has become a key element of the role of Practice Nurses. District Nurse Team have developed early supported discharge plan for patients with COPD as part of four stage plan to manage the condition more effectively. Physiotherapists now provide pulmonary rehabilitation in the community. Reduction in hospital admission and length of stay, self care being facilitated and nearer to home.
IMPROVING PATIENT SAFETY AND EXPERIENCE AT MEALTIMES.

Before:
Varying routines at patient’s mealtimes.

Actions:
Observational audits of patient mealtimes were taken by a member of staff from the clinical area and the Nutrition Champion to capture areas of good practice and identified areas for improvement.

After:
Patients, public and staff are striving to ensure patient hand hygiene prior to meal service is always carried out. Staff are stopping non-essential clinical activities during patient meal service and ensuring that there are adequate numbers of nursing staff to provide individual assistance to patients.

Patients need to be confident in NHS Grampian’s ability to deliver safe and effective care. They have a right to:

- Expect exemplary quality of care.
- Not be harmed by health care encounters.
- Receive care, which is based on evidence.
- Have a positive health care experience.
- Not to be afraid of health care encounters.

Nurses, midwives and AHPs need to feel confident that NHS Grampian supports them to deliver safe and effective care they will then:

- Put patient safety at the heart of everything they do.
- Participate with enthusiasm in the monitoring of patient safety.
- Take positive action to improve patient safety.
- Value and make good use of patient experience and information.

NHS Grampian and its staff have pledged to work with patients, to deliver the safest and most effective care possible, for patients. Nurses, midwives and AHPs are in the enviable position of being pivotal in delivering this pledge to the people of Grampian.
From a patient perspective, quadruple amputee Olivia Giles on her forward to Delivering Care, Delivering Care Enabling Health (2006) illustrates the importance of communication:

“When any nurse, midwife or allied health professional takes the time to genuinely try and put him or herself in the patient's circumstances and really imagine how he or she could feel in that situation (and consequently, how he or she would like to be engaged with, listened to, spoken to and asked what information he or she would like to receive) and then acts accordingly then that nurse, midwife or AHP automatically cares for his or her patient as well as he or she can.”

Public perceptions are that communication is often poor and leads to a high number of complaints. Although it may be hard to define, everyone knows when they have been treated well by others but also when the experience has not been so good. Small things can and do make a difference.

How something is said can be as important as what has been said. Acknowledging someone, even when busy with another task, helps to make that person feel valued and put them at ease. Receiving an explanation of any investigation or treatment and the opportunity to ask questions, makes the patient feel a true partner in care.

Effective communication is not necessarily about extra staffing or additional resources. It is about a willingness to put the patient and their carers at the centre of what is done. Communication is inextricably linked to caring.

Empathy is a vital factor in effective communication. It is one thing to receive quality care; it is another to feel that you have received a quality experience. Patients can feel not listened to and marginal to the assessment and care planning process. Empathy is about putting yourself in someone else's position and seeing things from their point of view.
Leadership

NHS Grampian is committed to supporting and developing its nurse, midwife and allied health professional leaders. This is evidenced by its commitment to recognised programmes such as the RCN Leadership Programme, the Scottish Government programme Delivering the Future for Strategic Clinical Leaders, and, more recently, Leading Better Care.

Delivering Care, Enabling Health (2006) set out the nurses, midwives, and AHPs contribution to the delivery of high quality, safe, effective and patient centred services. The Senior Charge Nurse Review (SCNR) and the Clinical Quality Indicators (CQI) projects were identified as areas for action. Better Health, Better Care (2007) confirmed support for their implementation across Scotland through its quality dimensions of improving safety, quality, effectiveness, efficiency, equity and timelines.

Leading Better Care aims to improve care by redesigning the senior charge nurse role around four functions:

- Ensuring the effective contribution to the delivery of organisational objectives.
- Ensuring safe and effective practice.
- Enhancing patients’ experiences and managing and developing the performance of the team.

To ensure the quality of care for patients in NHS Grampian, senior clinical leaders will be supported to adopt the following fundamental principles of leadership:

- Inspiring a shared vision.
- Enabling others to act.
- Challenging the process.
- Encouraging the heart.
- Modelling the way.

(Kouzes and Posner, 2000)

There are many opportunities for clinical leaders to support the achievement of Continuous Service Improvement in NHS Grampian (CSI). CSI is about creating a culture of continuous service improvement where each and every member of staff looks at the service they provide for ways to ‘make a difference’ every day. CSI takes the form of both structured programmes and projects, coupled with local ideas for making smaller improvements.

Nursing requires strong leadership at all levels create and sustain this culture and to ensure high standards of patient care in NHS Grampian.

ACHIEVING MILESTONE OF 18 WEEK REFERRAL TO TREATMENT FOR PATIENTS.

Before:
Milestone of 18 week referral to treatment not being met.

Actions:
- Nurse led clinics established for colposcopy investigation and treatment.
- Nurse led GP referral screening to ensure patient referred to correct consultant.
- Specialist Nurse services in Breast, Eye, Urology, Cardiac, Gynaecology and ENT all now contribute to reduction in waiting times.
- The Joint Continence Clinic (JCC) in Aberdeen City CHP is a joint nursing and AHP initiative. The service is a multidisciplinary service to jointly assess and manage patients with complex continence problems. The JCC philosophy of treatment emphasises rehabilitation, self management through support and education for patients and staff.

This alleviates patient distress as evidenced by using the Distress Inventory/ Patient questionnaire and assists in progressing patient pathways across the system achieving the 18 week referral to treatment target.

After:
Milestone of 18 week referral to treatment being met.
Nurses, midwives and AHPs are among the most recognised and trusted professions in our society. They bring high expectations and comfort to patients and their relatives at all stages of the patient journey. It is known however, that it is not the name or status that provides the quality of care but a combination of skills through training, education, emotional awareness and a strong belief that they can make a difference to people’s lives.

The recently published Healthcare Strategy for Scotland aims to support the delivery of the highest quality healthcare services to people in Scotland. Nurses, midwives and AHPs are crucial to the implementation of the quality strategy and the Grampian Nursing, Midwifery and AHP Strategy sets out the essential areas of focus and responsibilities for all of us to deliver high quality individualised patient care in an ever changing healthcare environment.

Thank you for reading and thinking about the issues in this document. I hope this strategy encourages and inspires all nurses, midwives and AHPs to be the best they can possibly be and to live up to the ideals that prompted you to join your professions.

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Bibliography


Scottish Government (2007) Getting it right for every child Edinburgh, Scotland


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