

Spiritual Care Committee
Thursday 20th May 2021 2.00pm
Via MS Teams

Present:

Amy Anderson, Non-Executive Board Member, Grampian NHS Board (Chair);
Gillian Douglas, Lead Chaplain, Mental Health;
Jane Ewen, Nurse Director, Excellence and Innovation;
Anne Inglis, Head of Organisational Development;
Sue Kinsey, Public Partnership Rep;
Father Emmet O'Dowd, Roman Catholic Chaplain;
Dennis Robertson, Non-Executive Board Member;
Mark Rodgers, Head of Spiritual Care and Lead Chaplain;
Yvonne Wright, Chief Nurse, Division of Clinical Support Services;
Chantal Wood, Business Manager, MHLDS.

Attending:

Delaine Kennedy, minute taker.

1. Welcome and Apologies.

Chair welcomed members of the Committee to the meeting – apologies were received from: Louise Ballantyne, Head of Engagement; Mervyn Barr, Humanist Society Scotland; Nigel Firth, Equality and Diversity Manager; Fiona Forbes, Nurse Manager, Woodend Hospital; Ian Pallett, Healthcare Chaplain, Dr Grays, Elgin; Terry Taggart, Honorary Episcopalian Chaplain; Rev Maggie Whyte, Church of Scotland.

Chair opened by welcoming everyone; permission requested for the recording of the meeting for accurate minute purposes; no objections made to this. Introductions were made and Chair thanked everyone for attending.

2. Minutes of Meeting held on Thursday 26th November 2020.

The minutes of the previous meeting were confirmed as a full and accurate record of the meeting. Amendment made to point 3.2 Chaplains Week 2020 – replacement of 2020 date to 2021.

3. Matters Arising.

3.1 Values Based Reflective Practice.

Gillian Douglas outlined that she had been in contact with Sue Rayner, VBRP® Lead Facilitator and gave update on highlights.

2021 has been a busy year for VBRP® facilitators, receiving requests for sessions from a wider range of teams than ever before including Occupational Health, Podiatry, Radiography and Safer Workplaces Facilitators. This is in addition to the regular work undertaken in Theatres, NNU, 103, 110, 112, 114, Speech and Language, Clinical Nurse Specialists, ANPs and with Domestic and Portering Teams in ARI, RCH and Woodend. Sessions have continued to be appreciated by a range of teams in RCH including Loriston, Skene and Fyvie Wards, Forensic Rehab and Forensic Acute and the Eden Unit. The work at Dr Gray's continues to grow with requests from Pharmacy, Radiography and SCNs in Mental Health being explored in addition to the ongoing work in Ward 2 and ED. MS Teams has opened up the reach of VBRP® to GPs from the Covid-19 Hub and currently working with the Clinical Manager to see how best to provide VBRP® sessions for nurses in HMP Grampian. Sue Rayner gave an introduction to VBRP® at the New Graduate Nurses Welcome in April which was attended by over 50 nurses and a group of 4 facilitators gave a presentation and Taster Sessions for the Modernisation Group. VBRP® is also represented as part of the 'We Care' initiative which has generated referrals to the service. Since January 2021, there have been 214 sessions with 43 cancellations mostly due to staffing levels, working with 483 members of staff. Capacity is an area of concern, but with the start of the Essential Toolkit online training may begin to address this issue. Chair thanked Gillian for update and noted how useful VBRP® is just now.

Yvonne Wright highlighted that 7 years ago when VBRP® started, it was a brand new 'alien' concept – it took people a while to know that Chaplaincy can support them. Yvonne expressed delight at the success of VBRP®, and ongoing that it is needed more than ever during the next few months/potential 3rd Covid-19 wave. Jane Ewen emphasised and acknowledged the huge amount of time and resource VBRP® can mean for individuals. Jane has had recent conversations

with a manager re support and has secured administrative support to help ensure the burden and added pressure is taken away from Sue. Chair pointed out the balance of the popularity and usefulness of VBRP® making it a victim of its own success.

Rachel and Chair are to take VBRP® back to the Board – with input from Caroline Hiscox, Executive Nurse Director – who understand and are committed to VBRP®. Joyce Duncan, Chair of Staff Governance Committee, will do a VBRP® taster session soon.

4. Annual Report 2020 by Mark Rodgers, Lead Chaplain.

5. Chaplaincy Activity 2021, by Mark Rodgers, Lead Chaplain.

(Action points have been merged for this meeting – Annual Report 2020 would have been reported at February 2021 meeting, but meeting was cancelled.)

Mark explained that the Report will merge with **5.0 Chaplaincy Activity** and that it is a narrative of Chaplaincy activities and different phases, transitioning one way or another, for worse or better – with Lockdown, lifting of Lockdown, remobilising and back into Lockdown. Also included were some key figures from ‘nature of encounters’ - significant increase in staff support and reduction in relatives activity. Report also put virtual activity e.g., memorial services and staff changes, on record. Sue Kinsey noted the above was very much an understatement of the work Chaplaincy Team have put in over the last 12 months and thanked Chaplaincy for their efforts during a horrendous year, hoping that support was available to Chaplaincy also. Mark Rodgers thanked Sue and noted that there were uncertainties for the Chaplaincy Team which made life a struggle at times. Jane Ewen explained that she was assured Chaplaincy team were being supported and did some exploratory work around that which gave assurance that processes were in place and Chaplaincy has produced phenomenal work. Chair added her thanks to Jane. Chair thanked Mark Rodgers and the Chaplaincy team for the gathered statistics which is useful for sense of self awareness of the team and is a real success story, emphasising that visibility of patients, staff, family members wanting support and the high number of staff is right and reflective of the year staff have had; finally expressing the amazing empathetic listening across the system. Chair enquired of Father

Emmet how busy he had been with his client group; he explained that he had not been as busy with restrictions in place, unless it was an emergency or end of life situation. Father Emmet did emphasise there was very good communication and interaction with Chaplaincy Team. Chair extended her thanks. Mark Rodgers highlighted that during late April 2020 and again in January/February 2021, Chaplaincy were using their premises for facilitating relatives and supporting ICU staff for goodbyes to take place in tragic circumstances. In the transitioning phase supporting return of relatives, staff used the Sandpiper Sanctuary as a dining area but now with relatives back to visiting, the space has been handed back to relatives (which staff have been very good about). It is also a learning curve for faith group visitors coming back and facilitating the 2 additional visitors as well as nominated visitors. Mark expressed his pleasure at 95% sustained in-person Chaplaincy service throughout Covid-19 acknowledging not all departments have been able to do this, for various reasons. Gradually the very part-time Community Hospital Chaplains are getting back into the Community Hospitals. Due to age constraints, they were not allowed to visit. Their way of working in the past was not of a referral but bed-to-bed basis which they cannot presently do. Mark mentioned changes being mentally tiring but that Chaplaincy were not unique in this regard. Chair expressed her gratitude, thanks and support to keep going, adding the SCC is very grateful and for Chaplaincy to continue doing what Chaplaincy can.

6. Supporting Well-being in NHS Grampian, by Anne Inglis, Head of Organisational Development.

Anne Inglis thanked the Committee for the invitation to present, explaining that she had been deployed as a senior responsible officer for the We Care programme – which is a programme of support for staff and will be a permanent hub of access to practical training, development support for staff and to pull everything together, making it clearer and easier for staff to access. In summary, the primary objectives are to align, improve access to and enhance existing support for staff resilience; provide access to key resources and support for wider determinants of health and support those working remotely to do so safely and help them keep well. Three further objectives being progressed with/by other established groups are to

increase staff break and rest areas, taking account of physical distancing; ensure timely and equitable access to psychological support where appropriate and monitor ongoing stability of PPE supply and its appropriate use. The programme was launched 6th April 2021 with a letter and short film from CEO and Chief Officers. Mug, pens and bag of treats to advertise website and programme were distributed with new web page bringing support and information together. Other activity included posters, Wellbeing pulse survey, Charities Together Bid and funding secured for this financial year. www.wecare.com also accessible on NHSG Intranet. Chair thanked Anne for her presentation. Mark Rodgers replied to Anne Inglis that pre-Covid-19, Sue Rayner and Carole Clarke, Healthcare Chaplain, ran Resilience Days and although there was potential to put a bid to facilitate these Resilience Days, this may be complex as they were previously held in-person. Gillian Douglas echoed Mark Rodgers comments re Resilience Days and spoke about “Wellbeing Days” – explaining there is a slightly different emphasis to both days and that fund applications can be very time consuming.

Yvonne Wright spoke about the teams that did not stop during the whole pandemic. There is commitment to back having partnership meetings to involve staff in decision making and how staff are feeling; recognition that staff are feeling exhausted rather than stressed and are trying their best involving any decision but staff are generally more tired. Teams posted chat by Chantal Wood: “I would echo that in our service”.

7. Operational News by Jane Ewen, Nurse Director, Excellence and Innovation.

Jane Ewen spoke about the following points and to capture a few elements; Dr Debbie Baldie joins from NHS Tayside and who has worked with Queen Margaret University as Senior Nurse in Practice Development. She has a very strong person centered skill set and has done a draft outline around Recovery Workshops to dovetail with Psychology and We Care teams; has a workplace culture to progress a flourishing, positive, happy workplace and supporting work with teams here. Nursing and Midwifery Strategy is another piece of work

being looked at – it is due for renewal at present. Nursing and Midwifery Council have considered it and all components are relevant. This will be paused until 2022 - progress with minor tweaks but foundation is the same – clinical excellence, ensuring safe and person centered to staff with positive patient outcomes. VBRP®/Spiritual Care – new graduate team joined earlier this year (which was paused due to 2nd wave) but very welcomed by them and service has been widely accessed. Project Wingman – at ARI then RCH - concept for furloughed or redundant airline cabin crew/pilots for staff providing a comfortable environment – is now a Charity across the UK. Mass vaccination centre at The Event Complex Aberdeen (TECA) offered opportunity to explore as further venue for Project Wingman and which was established for a couple of months. Staff feedback survey still open and there have been positive replies from grateful staff. Yvonne Wright explained how one Wingman has since trained to become a Healthcare Support Worker for the NHS. Chair summarised exciting news about Dr Baldie, how this would embed really well with Magnet, sensible news that strategy will now be 2022 and thanked Jane for the update.

8. Bereavement Services by Yvonne Wright, Chief Nurse, Division of Clinical Support Services

Yvonne spoke concerning Trial of bereavement bags in ARI – literature has been developed, tags and booklets produced. Roxburghe House and ARI Wards 104/112/114 have already been using these bags – with good feedback so wanted to spread to other wards with pilot starting at end of May 2021 and staff information sheets have been produced. Acknowledged that some surgical wards may use less bags than other wards and bags are to be collected from Chaplaincy offices. Yvonne explained how she worked closely with Mortuary as they meet lots of families and was heavily influenced by Chaplaincy support from Carole Clarke. Chair expressed how hard it is to quantify how plastic is so inappropriate and hessian is more appropriate – critical to have human understanding. Chair asked how are we using the information that we collect to make the whole experience better and how are we raising awareness with staff? Yvonne responded that some staff are more skilled than others regarding difficult conversations and aware of good practice. It is a challenging thing particularly for young graduate

nurses to deal with but some can do it very well – down to the individual. There are items online re difficult conversations and some charge nurses support the young nurses. Chair expressed this was very helpful and reassuring and explained there is work planned ahead with NES and Jane Ewen noted it was interesting to see how this work develops in the future. Yvonne stated that they could not have done the bags without support from Endowments.

9. Sector News.

9.1 MHLDS.

Chantal Wood delivered MHLDS report with the following points; ongoing challenges around bed capacity, boarded patients, waiting list, contingency status and staffing levels. Safer Workplaces – ongoing work to ensure that staff and patients are safe in the hospital and other settings. Work ongoing to create more and better spaces for staff to have breaks. Chaplaincy staff have continued to work throughout the pandemic, being present in the hospital and available to support patients and staff. Two of the chaplains have continued to facilitate VBRP® groups with staff, meeting with 124 members of staff in the first 4 months of 2021. Staff find these sessions helpful and engage really well, sharing in the safe space held by the facilitator, having their voice heard and feeling valued. Some great work has been done with a number of the Learning Disabilities patients, providing tailored programmes of activities and support for them, using the Chapel space and ensuring all Covid-19 guidance is followed. It has been a joy to see these patients flourish and some have moved on to supported accommodation (or are due to move soon) in recent months. In January, the Chapel was used for an inpatient to watch the live stream of his partner's funeral. He was supported by staff from the ward in which he was a patient and it was clear that having the space and privacy to view the service was really important. All Chaplains in MHLDS have stayed in touch with outpatients by telephone over the past year or so and this contact has been appreciated. Unfortunately Sunday Services continue to be paused but we are hopeful that we can start planning for them to resume later in the year. Much depends on the return of volunteers to hospital. Chair thanked Chantal for their work during a difficult year and recognised the work the team has been doing.

10. AOCB

- 10.1 Mark Rodgers raised that the next SCC on Thursday 16th September 2021 is presumed to be held completely virtually, but possibility of hybrid.
- 10.2 Jane Ewen announced Mark Rodgers retirement later this year and his replacement is being sought. Position advertised on 19th May and aim is for handover period. Thank you was extended to Mark for all his valued contributions.

Chair closed the meeting, with thanks.

2021 Meeting Dates (all 2pm):

Thursday 16th September

Thursday 18th November

Format and venues to be confirmed.