

Executive Lead-Grampian: Paul Bachoo Clinical Lead-Orkney: Jay Wragg SRO: Lorraine Scott/Judy Sinclair Programme Lead: Cathy Young
 Programme Manager: Amanda Gotch Senior Project Manager: Leigh Ewen

Report Date 16/12/2022

Progress since last report

- **Value Based Healthcare** Project – first meeting with Progressive Partnership 13/12/22, to commence Jan
- **Minor Surgery** in NHSG Phase 2 commenced
- **Shared Decision Making** - BRAN questions being incorporated on Grampian Guidance GP referral pathways (used by both Boards)
- House of Care training and refresher sessions
- Demand Optimisation Group Lab Data analysis and direction of the group – second meeting 16/12/22
- Bowel and Bladder project in Orkney progressing
- Met with NHSG Public Engagement colleagues
 - First public engagement events next week (SDM)
- NHS Orkney Rheumatology improvement work progressing
- Providing input into the NHSG draft Commitment to Culture
- NHS Shetland meeting (potential collab on NHSO website work)
- NHS Orkney survey
- Visual Display Screens
- Discharge Lounge wide review – promote use of / shared decision making
- 07/12/2022 RM Network Meeting
- Flash report back catalogue
- Various presentations:
 - Strategic Advisory Group for Palliative Care
 - GANMAC - Community Nursing Management

Making an Impact

**People receiving care feel at the centre of decisions about their care.
 Waste, variation and harm are reduced, and innovative approaches are taken across the pathways of care provided. Risk is managed.**

Key issues/risks

The key risks that pose concern to the programme are:

- Potential for rapidly changing situation and the requirement for services to be agile in their priority response
- Pace of cultural change – both historical and recent
- Funding – lack of clarity re recurring SG funding and non-recurring element for shortfall of Programme Manager
- Staff health and wellbeing
- Workforce capacity and engagement at service level/improvement fatigue
- Public understanding and engagement
- **Atlas of Variation Phase V, no national team capacity at present to support this work**

Next steps

- Gap analysis for RM across NHSG and NHSO
- Identify RM Champions in both Boards
- Plan to meet with PELS in NHSG and senior team in NHSO
- House of Care and MEOC training - identify how current self-management information and resources can be optimised to support people in a way that is helpful to them and their families
- Communication and engagement plan 'launch' – video with wide input from colleagues - SDM
- Commence planning a Realistic Medicine conference for Spring 2023
- Pilot Shared Decision-Making Masterclass – Feb '23
- Minor surgery project – next steps
- Collate Comms strategy In collaboration with NHSG Public Engagement colleagues (baseline measurement will be established 1st)
- Providing input into the draft inequalities plan for NHSG – meeting 19/12/22

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NHS Grampian - Staff Awareness Survey Actions

Education for staff - Learning and support tools	Awareness campaigns
I only have a broad understanding	<ul style="list-style-type: none"> Relaunch TURAS modules Relaunch NHS Inform It's Okay to Ask Intranet banner to change with campaigns Social media posts
Differing knowledge base around medication	Continue presentations at events / meetings / committees
Will complete TURAS modules	
Mandatory training takes time	Launch Realistic Medicine Shared Decision Making Master Class Toolkit (Maternity initially)
No one size fits all	
Listen more to our patients	Include in new start introduction (all staff) TURAS Modules
Conversations	
Awareness sessions for staff needed	Approach to offer support to deliver RM objectives
Is the Realistic Medicine approach up to date	
I am not a doctor so thought it did not apply to me	<ul style="list-style-type: none"> Pharmacy Radiology
Principles must be at forefront of my role	Improvement Ideas
Ethos is embedded in Clinical Psychology	
Conversations	<ul style="list-style-type: none"> MDT proformas (Include person centred care section) Create a localised education resource (chunked up TURAS module type learning module) Include quiz Tea trolley training sessions RM Champions Network Lunchtime <u>drop in</u> sessions (Sustainability, SDM, VBC)
I reflect a lot on using the principles every day	Gather baseline of understanding / PIN Network / NHSG Public Engagement Team / Survey
I had not heard of BRAN before	
I need time to do TURAS modules	Raise awareness via RM events in Community / Libraries
Needs to be used by all of MDT	
First time I have heard of Realistic Medicine	Add RM information to
Depends on one individual's interpretation and understanding of others	
Regular reinforcement helps	<ul style="list-style-type: none"> eConsult Patient information leaflets Corporate Graphic Design leaflets
I plan to do TURAS modules	Set up a session with Radiology
I use Shared Decision Making myself	
Education for Patients	Set up a session with Pharmacy
It's just good medicine	
Inform patients of resources	Set up a session with Pharmacy
Manage patient expectations better x 2	
Increase public messaging	Set up a session with Pharmacy
Realistic Medicine has value for those of an older age	
Can be challenging in paediatric services	Set up a session with Pharmacy
Add principles to eConsult	
Ideas / Service Improvement / Supportive of ethos	Set up a session with Pharmacy
Transparent conversations with patients and public	
Could improve reason for Radiology requests	Set up a session with Pharmacy
Could limit futile treatments	
We need to become less risk averse	Set up a session with Pharmacy
Realistic Medicine gives a strong ethos and principles to follow	
Increase recording of GP / Patient discussions	Set up a session with Pharmacy
Requires organisational support	
Helpful underpinning principles	Set up a session with Pharmacy
Essential for NHS to survive	
What happens if patients pick expensive or high-risk option?	Set up a session with Pharmacy
Have heard interesting examples from service users	
Widen to Realistic Medicine, Care and Treatment	Set up a session with Pharmacy
Let's do it!!	
Big fan!	Set up a session with Pharmacy
Difficult balance between Realistic Medicine / Formulary guidance	
Realistic diagnosis by examining patients, rather than depending on diagnostics.	Set up a session with Pharmacy
Older generation happy for doctor to be in charge	
Younger people want to be part of their care decisions	Set up a session with Pharmacy
it is hoped realistic medicine will go some way to relieving the pressure on radiology	
These are the basic principles Pharmacists practice by daily	Set up a session with Pharmacy

Data points/measures

- Completion of TURAS eLearning package
- Website page visits
- Staff survey of Shared Decision Making
- Public survey of Shared Decision Making
- Near Me survey of SDM using collaboRATE
- Reduce unwarranted variation in blood test request rates
- Reduce inappropriate (blood) testing

Next steps

- Update RM webpage with focus on adding blogs / vlogs / podcasts / videos on SDM
- Near Me surveys for Shared Decision making
- Opportunistic baseline surveying with public and colleagues
- Gap analysis in both Boards

TURAS module completion

	Complete	In Progress	Total
Grampian	413	208	621
Orkney	16	8	24

Realistic Medicine - Near Me Post Consultation Questionnaire – total responses 25

Community Dietetics 11 / 42 appointments
 Dermatology 19 / 132 appointments
 GMEDs 23 / 57 appointments
 Fertility 54 / ?? appointments

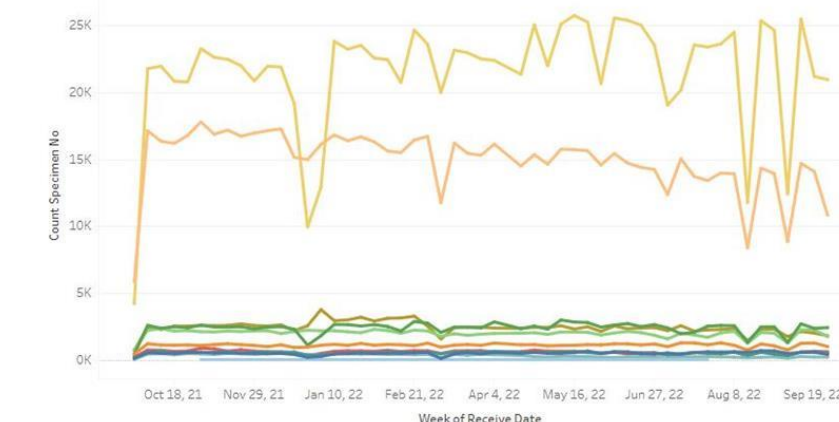
NHS Orkney Staff Awareness Survey 33 responses closes Friday 23/12/2022

Views NES Vimeos total views

Requested C/F to next report

Demand Optimisation Group (DOG)

Estimated Blood Tube Usage Over Time (Summary)



GROUPED_HOSPITAL_NAMES

- Aberdeen Community Health & Care Village
- Aberdeen Dental School
- Aberdeen Maternity Hospital
- Aberdeen Royal Infirmary
- Community Hospitals
- Dr Grays Hospital
- Other
- Primary Care
- Royal Aberdeen Children's Hospital
- Royal Cornhill Hospital
- Woodend General Hospital