Purpose of Report
This report updates the Grampian NHS Board on key issues arising from the Area Clinical Forum (ACF) meeting on 15 March 2017.

Theatre Transformation Programme
The ACF heard a presentation about the Theatre Transformation Programme. Committee members were supportive of this programme of improvement, highlighting in particular the centrality of patient safety, clinical engagement and leadership, and closer multi-professional collaboration and communication. The improved experience for nursing staff was also noted. This will benefit retention and in time, recruitment. Reflecting on experience in other areas, members agreed that stopping reliance on non-contract agency staff will improve team-working, staff experience and the quality of patient care.

Whilst members welcomed the fact that clinical prioritisation will ensure that patients with most urgent need will avoid waiting for surgery, concern was also expressed about the impact of longer waiting times on less urgent patients, particularly in terms of quality of life, patient experience and possible deterioration of physical symptoms. Members highlighted the importance of communication with patients and the public at a number of levels. It was felt that letters to patients about expected treatment waiting times need to be clear and concise, including an option for patients to be able to phone to discuss concerns or ask questions. In addition, it was felt that attention also needs to be focussed on communication between individual patients and clinicians (in both primary and secondary care) to ensure realistic expectations and maximise patient involvement in decision-making about both referral and treatment decisions. A number of innovative ways to involve patients (and family members) in conversations were discussed including copying clinical letters to patients, patient access to health records and other uses of IT to share information with patients.

Facilitating communication and shared understanding across NHS Grampian
The ACF discussion about the Theatre Transformation Programme highlighted the importance of ensuring that colleagues across acute and community services share understanding of current challenges, priorities and service changes, to ensure clear and effective communication to patients and to promote improvements in practice and patient care. The GP sub committee newsletter was discussed as a good example of effective and accessible communication which also service to increase awareness of the work of advisory committees. The development of the Clinical Guidance Intranet will also help to facilitate shared understanding and awareness of service priorities.

It is recognised that service structures and delivery across the Health and Social
Care Partnerships are still developing and becoming established. Members reiterated the suggestion that a concise and simple guide to the structures and operation of the three partnerships would help to facilitate shared understanding and collaboration. It was noted that this could also help to facilitate collaboration with third sector organisations. The importance of ensuring a pan-Grampian perspective and where appropriate, shared practice was also highlighted, for example in relation to prescribing practices.

**Staff well-being, recruitment and retention**
Members continue to highlight areas of significant concern about staff recruitment and retention including clinical physiologists, psychologists, community nurses, learning disability nurses and theatre nurses. The importance of close working and collaboration with training providers, such as RGU, was noted in this context. Members spoke of concerns about the impact of staff shortages on both patient experience and staff experience and retention. ACF members are aware that a huge amount of effort has gone into efforts to improve recruitment. It was suggested that it would be valuable to facilitate shared learning about which recruitment strategies have been most successful.

**Electronic Patient Records**
The ACF noted the need to accelerate the development of the TrakCare Electronic Patient Record because of the likely closure of the ARI sub-basement records store by December 2017 due to fire safety requirements, which will mean that paper records are no longer accessible locally. Steve Baguley, Clinical Director of eHealth, outlined a number of proposals to support this process which members will share with professional advisory committees for further discussion and feedback. Members noted the need for additional tablets and PC’s to support reduction on reliance on paper records. The value of moving towards patients having routine access to their own medical records was also agreed, with members citing benefits in terms of both patient – clinician communication and promotion of self-management.

*Helen Moffat*
*Area Clinical Forum Chair*
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