

## **Research & Development Committee Meeting February 2016 – Carol Allardyce**

The R & D Committee is one aspect of NHS Forth Valley Research & Development and is concerned with funding through Endowments. The Committee considers a range of projects for small-scale funding, enabled by annual funding received.

The R & D Committee is made up of a range of FVHB staff including clinicians, R & D staff and medical staff, representatives of the University of Stirling, representative of SHIL (Scottish Health Innovations Ltd) as well as two lay members. We meet quarterly.

I find it interesting to learn of projected new work and am given ample opportunity to seek clarification as well as to voice concerns or approval. I am made to feel my opinion matters.

There is also a Research Club which is held twice a year, providing an informal setting where Researchers can bring along their work to share with colleagues.

## **Volunteering in Ward B21 – Evelyn Finnie**

This is a short stay ward for patients with dementia, but they are being treated for physical ailments.



As part of a Friends of Forth Valley Royal Hospital project, I volunteer in Ward B21. My role is to encourage a Social get-together with patients that are willing to join in. They choose the activity, i.e. board games, cards, dominoes, making cards, colouring books, conversation, mostly memories, music before having lunch together. They all seem to enjoy it, passing the time, and I enjoy the hands on / interaction.

The Charge Nurse sees the benefit of this and is keen to expand it to other days, so more volunteers are needed.

### **Observations from Across the Pond – Margo Biggs**

As we are looking at alternative models of care from the United States a recent visit there and the experiences of friends undergoing treatment led to reflection and to comparison.

In California an acquaintance undergoing hip replacement surgery was discharged to Rehabilitation after 48 hours in Acute Care. The Rehab facility next door to the hospital was full and so he was transferred at night at the weekend to another Rehab Centre at some distance and minus the antibiotics prescribed which, being the weekend, took a couple of days to be restored.

On the other hand those requiring follow up treatment in Florida are often picked up by a hospital bus and, given parking difficulties at many of our hospitals and the increasing models of centralisation at Centres of Excellence for surgery, pressures on the Scottish Ambulance Service may well increase and some in house transport be considered.

New challenges lie ahead but the models being considered must build in safeguards for patients.

### **Funeral Poverty – Margo Biggs**

As part of our involvement in helping the bereaved have as positive an experience as possible at this difficult time we have put together bereavement packs as well as the sensitive issue of returning the belongings of the deceased relative in special bags, jewellery bags and a card with a floral photograph.

At our last meeting Mr Easton our member representing funeral directors shared the news that the registration process in Falkirk is now centralised in Newmarket Street Falkirk and that the existing offices in Denny and Grangemouth are due to close. Also refurbishing the Crematorium in Camelon over the summer will involve bereaved families having to travel further to lay their relatives to rest.

The rising cost of cremation and burial were also discussed as were the fees charged by civil celebrants show that a distressing time is now also a more costly one. The Bereavement service will share all changes with those bereaved and continue to support them with information. Our packs have been praised in other health boards

On behalf of Helen ,Christina ,June and Evelyn.

### **Deteriorating Patient Collaborative Learning Session – Margo Biggs**

This was held in the Lecture Theatre on March 4<sup>th</sup>. I attended as a patient member of the group. It was a very interesting day launched by a presentation from Salford Manchester on ways they have reduced the number of Cardiac Arrests. There was wide ranging discussion throughout the day on whether resuscitation was always in the best interest of patients.

We moved on to our local success in treatment of Deteriorating Patients. Dan Beckett revisited the theme of person centred care not increasing patient suffering. In the afternoon we had case studies of two patients on their deteriorating patients journey and then simulations of patients experiencing resuscitation. This was followed up by presentations on transition to Community Hospitals and the updated DNACPR policy and leaflets from Sandra Campbell.

### **Notes from the Full PPP Meeting – 26 February 2016 – Helen Macguire**

This was our first meeting of the year and it proved to be a very busy agenda.

It was a pleasure to pay tribute to Greta Preston who, for health reasons, cannot continue as an active member. She sent her regards and best wishes to everyone.

The signed card and flowers from the members will be given to Greta when Helena and myself visit her in March.

Pauline Marland, NHS Forth Valley Person Centred and Patient Experience Coordinator gave the members some background information on the work she was doing with 'Patient Stories'. After some discussion, Pauline asked if those who were interested in working on this would get in touch with her.

An excellent presentation on Efficiency and Productivity was given by Scott Urquhart, NHS Forth Valley's Assistant Director of Finance. He gave the Panel an insight into the challenges facing the Health Board, which has to make £26m savings next year. He said while fixed costs cannot be altered, there are a number of other areas that can be looked at. Examples given were: good housekeeping, prescribing and procurement.

A lively question and answer session followed and members provided Scott with some proposals to take back to the Board.

Jonathon Horwood, NHS Forth Valley Infection Control Manager, and Patricia Miller, Lead Nurse, gave the members an update on Infection Control.

Under our own Business Meeting, updates were given to the members on the PPP Steering Group, Communication and Media, Leaflet Task Group, Diary of Involvement, PPP Participation Request Forms and PPP e-mail Accounts.

There was a slight time over-run, which resulted in the Cabinet Portfolios and the Way Forward workshop having to be carried over to the April meeting. This workshop is being facilitated by

Morag McLaren, NHS Forth Valley Head of Organisational Development, and she asked members to think about the following prior to the meeting:

- 1. What is the PPP role in the future transformation of healthcare in Forth Valley?**
- 2. In the midst of this Transformation, what needs to be different in how the PPP works with the organisation in the future?**
- 3. Where do you think the PPP will bring most value in the future?**

She also referred to the National Clinical Strategy Report and the Chief Medical Officer's Annual Report on Realistic Medicines and suggested members should look at these as well.

**Greta Preston – Helen Macguire**



On Friday 18 March 2016 Helena and I visited Greta and gave her your card and a bouquet of flowers. She was really pleased to see us and delighted that everyone had been thinking about her.

Before we left, Greta asked that we let you all know how appreciative she was and to thank you all. She looks forward to seeing everyone when she is able to join us at any future special occasions.

As one of our founder members, Greta was one of the first PPP members to be involved with the new hospital build, and she had a ring-side view when the Queen visited NHS Forth Valley Hospital for the official opening. Greta performed many other duties during her 10 years with the PPP and received an award from the NHSFV Chairman at the PPP 10<sup>th</sup> Anniversary Celebration.

