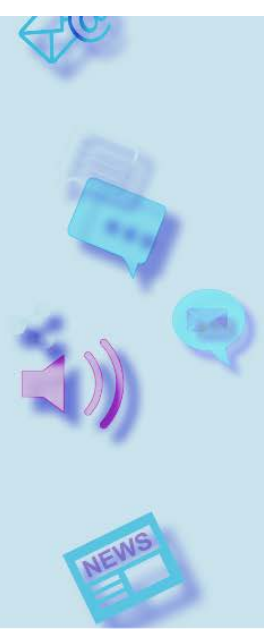


# partnership matters briefing



Susanne Millar, Chief Officer

## May/June 2022

Welcome to Glasgow City HSCP's 'Partnership Matters' briefing, to keep you more up to date with some of what's happening across our HSCP with partners. [Current and past briefings](#) continue to be available on our HSCP's website, and they can be accessed from work and personal ICT devices. We hope that you find our briefing useful. Any comments or suggestions for future topics are welcome, and they can be shared by contacting us at [GCHSCP\\_Communications@glasgow.gov.uk](mailto:GCHSCP_Communications@glasgow.gov.uk).

### Message from Susanne Millar, Chief Officer

As Glasgow's Health and Social Care Partnership (HSCP), we're always keen to improve the ways that we communicate and engage with you – whether you're being supported by us, working for us or working in partnership with us.

Throughout the COVID-19 pandemic, we've been using different technologies such as Microsoft Teams, Attend Anywhere, websites and social media to maintain connections and support as we couldn't use ways that we normally did pre-pandemic. This isn't to say that these technologies that are now readily available to us are a replacement. They're additional and can help us to continue to better understand and meet the health and social care needs of our city. Building on this, we thought we'd kick off this issue of our Partnership Matters Briefing with a video.

Back in March we launched our HSCP's new **Complex Needs Service** – a highly personalised, holistic and wrap-around service for people presenting with multiple and complex health and social care needs such as homelessness, addictions and mental health. Since the launch, we've put together a [video of our staff telling the story of the new service](#), how it came about and how it's working to make a difference for the people of Glasgow. At the heart of the video is Neil, a service user who shares his lived experience and how he's being supported through his complex needs.

### Inside this Edition

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### Keep Up to Date

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The video captures, in their own words, what health and social care integration is about and how together we're making a real difference to people's lives. The video is just under 10 minutes, and I encourage you to take the time to watch it.

Person-centred care and support continues in our briefing with features on **Trauma Informed Training** that we're rolling out with staff; work we're doing around **Power of Attorney (POA)** to raise awareness of it and our **Red Bag Scheme** for care/residential home residents attending and returning from hospital. We include [links to recent news articles](#) published on our HSCP's website, too.

Since our last Partnership Matters Briefing in April, we've been taking big steps in returning to a greater sense of normality. The last of the COVID-19 legal restrictions have been lifted, the rules around testing and self-isolation have been changed and guidance for health and social care settings has been updated. This reflects where we're at in the pandemic. Although there have been some reported increases recently, compared to early Spring we've seen less COVID-19 infections in the community across Scotland, less patients receiving treatment and care in our hospitals and less service users in our care homes with COVID-19. As I've said a number of times, the vaccines, treatments, protection measures and all of our individual and collective efforts have got us to this point.

We've also included with the Partnership Matters Briefing an update on how we've continued to respond to and manage the impact of the COVID-19 pandemic on HSCP services in our regular **COVID-19 Briefing**, and Robin Wallace, our Head of Service for Residential and Day Care Services for Older People, features in our **Senior Management Team video**. Given the current circumstances for COVID-19 is very different nationally and locally from where we've been, we'll be pausing the COVID-19 briefing after this one. If circumstances change significantly then we'll resume it.

However, it's still important to remember that the virus is still with us and I'd encourage you to continue to keep yourself and others safe by using '[COVID sense](#)'. That 'light at the end of the tunnel' that we've often talked about at different points in the pandemic seems to be more within our reach this time around, and we all have a part to play in getting us there.

As Summer approaches I truly hope that our staff and partners supporting our health and social care efforts throughout the pandemic get the chance to enjoy a break. I can't express enough the thanks and gratitude of myself and our HSCP's Senior Management Team for all your 'above and beyond' efforts and your commitment in ensuring that the health and social care needs of our city remain a priority. Thank you.

Susanne

## Complex Needs Service Video Now Available

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heart of the video is Neil, a service user who shares his lived experience and how he's being supported through his complex needs. [Find out more by watching the video.](#)

## Trauma Informed Staff Training Being Rolled Out

The Scottish Government, COSLA and partners have a shared ambition to develop a trauma-informed and trauma-responsive workforce across Scotland, to support the resilience and recovery of all children, young people and adults affected by trauma.

Glasgow was selected as one of the pilot areas to roll out Trauma Informed Training with the primary aim to ensure our staff are 'trauma informed'. Our HSCP pilot for rolling out the training began with staff who work in Addictions, Criminal Justice, Homelessness and Mental Health in the North East of the City.

Recognising and responding to people affected by trauma at different life stages can require different skills and knowledge but the training will help staff to become 'trauma informed'.

Trauma is often defined as 'an event, a series of events or a set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening'. It can be something that happens once, such as rape, suicide and sudden bereavement, or it could be a serious accident, or a complex trauma that takes place over a prolonged period of time, such as child abuse, human trafficking or different forms of violence including domestic abuse. Trauma can be experienced at any stage or stages in a person's life and they can then find it difficult to trust people and can find it hard to get on in life and be safe. It can also make it difficult for them to seek help.

Being 'trauma informed' means that our staff will be able to:

- recognise where people are affected by trauma and adversity
- respond in ways that prevent further harm by thinking about what will make the patient / service user feel safe
- empower the patient / service user to have control and take an active role in what happens to them
- be clear about what will happen.

Jackie Kerr, Assistant Chief Officer (Adult Services and North West Operations), Interim Chief Social Work Officer and the Trauma Champion for the HSCP said, "Trauma is more common than most people think. It's estimated that around 60% of the UK population has experienced psychological trauma in their lifetime. For more vulnerable groups, including people in in-patient mental health, drug and alcohol services and the justice system, the figure is even higher. Helping our staff to become trauma informed means that they'll be able to recognise when someone has been affected by trauma and adapt how they interact with the service user, enabling a more person-centred approach for anyone using our services".

Following the pilot, the training will be rolled out to all staff. There are different levels of training and the staff member's level of interaction with patients / service users will determine their level of training.

Jackie added, "Trauma is everyone's business regardless of role or job – we all have a part to play!"



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## Why We All Need a Power of Attorney

Who would you trust to make the important decisions about your future if ill health meant you couldn't do it for yourself? You'd probably want someone who knew you well enough to follow your wishes about how and where you're cared for.

However, for hundreds of people in Glasgow each year, these decisions are being made on their behalf by someone who's never even met them in their day to day lives, and has only seen them as a hospital patient. That's because, if you lose capacity to make decisions for yourself through illness, decisions are made on your behalf by the health and social care team looking after you unless you have a Power of Attorney (PoA) in place.

You might think it's something you don't need to trouble yourself with because you have a partner, parent, brother or sister or child who'll be there to do that for you, but that's not how it works by law. If you're incapacitated and don't have a PoA, you're in the hands of people who, while doing their best, can't possibly know what matters most to you.

Crucially, not having a PoA in place can lead to delays in being discharged from hospital when you are fit to leave, for hundreds of days for some people. This is very distressing for patients and families, and also costly for our health and social care system, estimated to be around £250 million each year with 358,426 days spent in hospital by people whose discharge was delayed (up to end of March 2021). Recent data shows that around 9% of adults in Scotland have registered a PoA since 2013.

So, what are we doing to address this?

When we identified the impact on delayed discharges in Glasgow back in 2013, we began a campaign to raise awareness about the benefits and the very real adverse impact of not having a PoA in place. [The PoA campaign website](#) was set up in 2013 as a one-stop source of information for the public and health professionals.

The success of the campaign led to it being taken up more widely, to Greater Glasgow and Clyde and Tayside in 2015, and then Scotland-wide in 2019, and we continue to support Health and Social Care Scotland's PoA Day each September to raise awareness and increase uptake.

Overall, the most important thing we can all do is to start the conversation and get the message out there with our networks. Share the message with the people we care for and support, as well as with their families and carers. So, for example, it's important that people who have a dementia diagnosis know how having a PoA in place can protect them in future.

We're talking to the decision makers who can make the whole PoA process easier and more accessible for people, because we know from our research that there's barriers that need to be removed such as cost, lack of clear information about the where to go to get a PoA and the complexity of navigating the whole system, as well as a reluctance to talk about something that's naturally so 'put offable' on our to-do lists.

We're looking to work with organisations such as the Office of the Public Guardian, the Scottish Government and Scottish Parliament, the Scottish Legal Aid Board and the Law Society of Scotland to see how we can take away barriers, make information clear and accessible and make the whole process of getting a PoA as straightforward and affordable as possible. A recent mapping exercise



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of PoA registrations in Glasgow highlighted most people who don't have a PoA in place live in our most economically disadvantaged areas, meaning there's an issue of equality of access to wellbeing and independent living, given that people living in these communities are more likely to live with long term conditions from younger ages and more likely to need hospital treatment at an earlier stage in life.

In short, we're talking with everyone who will listen with the aim of increasing the numbers of people who have a PoA in place.

### **Get Involved and Spread the Word**

Most of all, our workforce and our partners are our biggest assets in spreading the message, so we're developing new information material to help you start the conversation with your networks, at work and even with your own family and friends.

Ann Cummings, Service Manager at our Glasgow City Health and Social Care Partnership (HSCP), who chairs the National PoA Steering Group for Health and Social Care Scotland, is encouraging everyone to have the conversation about PoAs at work and at home: "It's so important to have your PoA in place, no matter what age you are or what your family situation is. Please help us to spread the message. You can find videos, social media assets and information sheets at [the PoA website](#), and please just let us know if there's anything else that you'd find useful that isn't there already. This year's PoA Day takes place on 29 September, so look out for more information on that soon."

### **Staff Urged to 'Think Red Bag' to Improve Patient Care**

All staff working in hospitals and care / residential homes are being urged to 'Think Red Bag' when preparing for a care / residential home resident to attend and return from hospital.

The Red Bag works as a visual prompt to provide a central location for the transfer of information, appropriate medication, belongings and preferences of an individual. The bag is used if a resident is required to be transferred from their care / residential home to hospital.

The Red Bag Scheme operates in care and residential homes in Glasgow City and across Scotland, improving links between hospitals and care and residential homes. Using a red bag helps decision-making and management of the resident while in hospital and on discharge, promoting person-centred care.

The Red Bag contains:

- standardised information about the resident's general health
- information on any existing medical conditions that they have
- any medication that they're taking
- information highlighting any concerns around their health and
- any personal belongings that they may have (for example, clothes for discharge and while in hospital, glasses, hearing aids, dentures etc.)



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The Red Bag stays with the resident at all points of their hospital journey. When residents are ready to go home, a copy of their discharge summary (which details every aspect of care that they received while in hospital) will be placed in the Red Bag so that care home staff have access to this information when the resident returns.

Alan Gilmour, Planning Manager, Glasgow City Health and Social Care Partnership (HSCP) said: “Care homes play a central role in supporting key Partnership strategic priorities, in particular early intervention and reducing unscheduled hospital admissions. The Red Bag aids better hospital discharge arrangements and better management of patient care in the most appropriate setting. After using the Red Bag our care homes reported fewer occasions of a resident’s paperwork, property and belongings going missing, and staff said that the Red Bag made it easier to manage paperwork as everything can be stored safely and securely inside. Overall the Red Bag Scheme has improved the management of unplanned admissions for both the resident and staff whenever they had occurred.”

By everyone remembering to ‘Think Red Bag’ we’re helping to support our care home residents and the professionals caring for them in the best possible way.

### **What we need from you (staff)?**

- Make sure the Red Bag information and leaflets are visible.
- Share the information with colleagues and explain that this is best practice.
- Ensure that the Red Bag stays with residents throughout their whole in-patient stay in hospital.
- Ensure to complete attached checklists to help make sure paperwork is returned to the Red Bag throughout the in-patient journey and prior to discharge.

If the Red Bag is not with a resident or is lost, please contact [redbagenquiries@ggc.scot.nhs.uk](mailto:redbagenquiries@ggc.scot.nhs.uk) urgently.

### **COVID-19 Update & SMT Video**

Keep up to date on how we’ve continued to respond to and manage the impact of the COVID-19 pandemic on HSCP services in our regular COVID-19 Briefing available on our [HSCP’s website](#). Robin Wallace, our Head of Service for Residential and Day Care Services for Older People, also features in our [Senior Management Team \(SMT\) video message](#). As the current circumstances for COVID-19 is very different nationally and locally from where we’ve been, we’ll be pausing the COVID-19 briefing after this one. If circumstances change significantly then we’ll resume it.

### **News**

We also regularly publish [news articles](#) and [briefings / bulletins](#) on our HSCP’s website about specific topics or work happening across our HSCP with partners – whether it be about current services, projects, service developments or achievements. If you would like to have something featured, please email [GCHSCP\\_Communications@glasgow.gov.uk](mailto:GCHSCP_Communications@glasgow.gov.uk). Some recent news items include:



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- [Healthy Smiles All Around](#)
- [HSCP's Day Care Services Compete in Challenge Cup](#)
- [WAC Ensemble wins 'Best Play for Young Audiences' at the 2022 Writers' Guild Awards](#)
- [Project SEARCH – 2022 Applications Open!](#)
- [Glasgow Celebrates Nurses on International Nurses Day](#)
- [£4.4 Million Investment in Glasgow's Health And Care Centres Rolls Out Across Communities](#)
- [Life Restarts For Joseph After NHSGGC Support](#)
- [New Breastfeeding Friendly Scotland Scheme](#)
- [New Health and Wellbeing \(HWB\) App Assists Glasgow City Education Staff](#)
- [New Creative Partnership between ALLIANCE and Glasgow City HSCP – The Legacy of COVID-19 in Care Homes.](#)

## Meetings & Events

We have regular meetings and events to discuss and / or make decisions about health and social care in Glasgow. More information about them with upcoming dates is available below:

- [Glasgow City Integration Joint Board \(IJB\)](#)
- [IJB Finance and Audit Scrutiny Committee](#)
- [IJB Public Engagement Committee](#)
- [North East Locality Engagement Forum](#)
- [North West Locality Engagement Forum](#)
- [South Locality Engagement Forum](#)

## Our Vision & Priorities

The City's people can flourish, with access to health and social care support when they need it. This will be done by transforming health and social care services for better lives. We believe that stronger communities make healthier lives.



Prevention, early intervention & harm reduction



Providing greater self-determination & choice



Shifting the balance of care



Enabling independent living for longer



Public protection



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