

Core brief

Daily update

(30 April 2025, 3.30pm)

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Digital Clinical Notes

The implementation of Nursing Digital Clinical Notes (DCN, Trakcare®) within adult acute inpatient has been a collaboration between eHealth, Practice Development, Clinical Educators and The Person-Centred Health and Care Teams.



Currently 33 wards have gone live with DCN (including the Institute of Neurological Sciences, Gartnavel General Hospital, New Victoria Hospital, Stobhill and Lightburn Hospitals) and this includes the start of implementation within Glasgow Royal Infirmary at the beginning of April with a trajectory to complete by November 2025.

The Person-Centred Health and Care Team and Practice Development Nursing Team are working collaboratively with the Clinical Educators in each area to provide resources and education to continue to support the transition onto the new PCCP (person centred care plan) and improve quality of documentation and consolidate the APIE (assessment, planning, implementation and evaluation) model of nursing. The current approach is based on one new ward per week with an aspiration to increase this number to two. The project team on site is a combination of Practice Development Nurses and eHealth Facilitators. The wards are supported by the project team 24/7 in person for two weeks post go live with remote support provided via phone or DCN mailbox thereafter.

Evaluation is on-going and includes quantitative and qualitative data collection pre-implementation and post-implementation to demonstrate impact, effectiveness and

efficiency benefits over time as well as real-time data captured to inform immediate improvements to be actioned.

Early results from the evaluation have demonstrated that there is much more of a person centred and goals focussed approach to care planning documentation. One of the Hospital Falls Co-ordinator recently fed back: “The implementation of DCN has proven to be invaluable in obtaining a comprehensive picture of a patient prior to going into a clinical area. This has enabled me to interact with the patients, their families and staff having this knowledge. The other benefit of DCN has been having all the assessments/clinical notes in one location and easily accessible with multiple users having access as oppose to one person accessing a hard copy.”

Resource Scheduler Room Booking Application

We are excited to announce that our current room booking application, Workspace Manager, will be migrating to a new, cloud-based application called **Resource Scheduler**. This transition is part of our ongoing efforts to enhance our booking system's efficiency and user experience.

To ensure a smooth transition, we will be offering **Train the Trainer sessions** for our super users. These sessions are designed to equip them with the necessary knowledge to cascade training to all users. Additionally, **Quick Reference Guides** will be available on Proactive Support to assist you with any questions you may have.

We will be in touch soon to confirm the training dates. Rest assured, all future reservations currently on Workspace Manager will be seamlessly migrated to Resource Scheduler, so there will be no need to re-enter your reservations.

We are confident that Resource Scheduler will provide a more robust and user-friendly experience for all.

Local Clinician honoured at Palace of Westminster by Charity

Kirsty Anderson, Advanced Practice Physiotherapist, NHS Greater Glasgow and Clyde was awarded a Silver Changemaker Award at the dedicated ceremony for their outstanding contribution towards reducing the delay to diagnosis of axial spondyloarthritis (axial SpA) as part of the *Act on Axial SpA* Campaign, created by the National Axial Spondyloarthritis Society (NASS).



Axial SpA is an inflammatory condition of the spine and joints. It works silently, leaving people in increasing pain and exhaustion. The average age that people start to show symptoms is 26, starting for most in their late teens to early twenties.

The aim of the *Act on Axial SpA* campaign is to reduce the current average time to diagnosis from 8.5 years to one year from when people first get symptoms. The campaign follows the journey of the person with axial SpA from raising public awareness, presenting at primary care, entering rheumatology, and linking those presenting with related conditions such as inflammation in their eyes (uveitis), inflammatory bowel disease and psoriasis.

Kirsty has lobbied for axial SpA to be mandatory training for physiotherapists within NHSGGC, as well as delivering multiple educational presentations. Her work to improve education on the Advanced Practice Physiotherapist (APP) role in Primary Care, resulted in the agreement of direct referrals from APP to Rheumatology. Data demonstrates that people are appropriately identified in a timely manner thereby improving the effectiveness of the axial SpA pathway.

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