NHS Greater Glasgow and Clyde

NHS Greater Glasgow and Clyde

Person-Centred Care Standard

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NHS Greater Glasgow and Clyde (NHSGGC) Person-Centred Care Standard Statement

Person-centred care in NHSGGC is tailored to individual needs and values, promoting compassion, dignity, clear communication, and shared decision-making. It supports individuals to make informed choices and live as independently as possible, through collaborative partnerships with patients, their support networks, and healthcare professionals.

Scope and Context

The NHSGGC Person-Centred Standard applies to all settings where people (adults and children) receive clinical care services in Greater Glasgow and Clyde.

What person-centred care looks like will depend on the changing needs, circumstances and preferences of the individual receiving care and the setting healthcare is being provided in, whether this is in the community, at home or in a clinical environment.

For purposes of this standard the term ‘person-centred’ will be used throughout. However, it is recognised there are a range of other terms also used to refer to similar principles and activities. Examples include patient-centred care, family-centred care, relationship-centred care, mutuality and values-based health and care.

In this standard, the term “people” can also mean a guardian, power of attorney, or advocate, where appropriate or when someone does not have capacity.



Rationale

NHSGGC has a legal responsibility to make sure each person using our services is treated with a person-centred approach, and that person-centred care and treatment is based on assessment of needs and preferences.

This includes the following key legislation:

- The Equalities Act 2010
- Patient Rights (Scotland) Act 2011
- Children and Young People (Scotland) Act 2014
- Carers (Scotland) Act 2016
- Human Rights Act and UNCRC (Scotland) Act 2024
- Health and Social Care Standards.

Other supporting frameworks, guidance, strategies etc. are detailed within Appendix B.

This standard has been aligned to the Healthcare Improvement Scotland Clinical Governance Standards and Maternity Care Standards (noted in Appendix B).



Criteria

These are a group of universal person-centred criteria which can be measured across all age groups and contexts of care, which describe what people across NHSGGC should experience when receiving healthcare. The NHSGGC Person-Centred Measurement Framework will be used to measure these person-centred criteria.

1. Personalisation



People, including children, young people and families, are given choices about their care and are encouraged to have open conversations with the staff supporting them. Understanding what and who is important to people is key to providing care that is personalised.

2. Enablement



People, including children, young people and families, are actively involved in making shared decisions about their treatment and care alongside the healthcare team. Together, they discuss what is important to them and work collaboratively to set meaningful, achievable goals.

3. Communication



People, including children, young people and families, are supported and encouraged to communicate in ways that are right for them and at their own pace, by healthcare staff who are sensitive to their needs, respond with kindness, openness and honesty, and make sure they feel valued and respected.

4. Information



People, including children, young people and families, receive clear information and advice, that is easy to understand and provided in words, pictures or practical examples and tailored to their needs and preferred ways of learning or communicating.

5. Coordination



People, including children, young people and families, receive coordinated, consistent care from various professionals and carers who work together as a team to deliver well-planned support and care that meets their individual needs.

6. Wellbeing

People, including children, young people and families, are supported by healthcare staff to identify, set and achieve goals that matter to them, promoting their developmental, emotional, psychological, spiritual, social and physical wellbeing and overall quality of life.



7. Compassion, Dignity and Respect

People, including children, young people and families, experience healthcare staff who treat them with warmth, kindness, compassion, dignity, and respect.



8. Safety

People, including children, young people and families, feel physically and emotionally safe in the care of healthcare staff, who clearly explain treatments and any potential risks, supporting informed, person-centred decisions. Staff balance safety with individual needs and preferences, helping people understand what to expect. People trust staff to notice changes in their health and respond quickly if they feel worse.



9. Environment and Equipment

People, including children, young people and families, are cared for in settings that are comfortable and welcoming, with access to equipment and resources that meet their individual needs and help them feel at ease.



10. Equity

People, including children, young people and families, experience care and support that is fair for everyone. Things are put in place to make sure no one is left out or disadvantaged, even though it might be harder for them to get the care they need.



11. Carers

Where friends and family are playing an informal caring role (including parents or guardians), they are identified at first contact or as soon as possible thereafter, informed in line with the patient's wishes, supported as individuals and treated as equal partners in planning and providing care, including discharge planning.



12. Listening, Learning and Improving

People, including children, young people and families, are encouraged to share feelings, ideas, thoughts and feedback, working with healthcare staff to improve care and services for everyone. Healthcare staff are enabled to actively listen, learn, reflect and act on feedback and experience to inform improvements to healthcare and services provided.



What does this standard mean for people receiving healthcare within NHSGGC?

Individuals receiving care should experience services reflecting these person-centred criteria, ensuring their voices shape the care they receive.

What does this standard mean for staff providing healthcare within NHSGGC?

This standard equips healthcare staff with clear, evidence-based criteria designed to ensure the consistent delivery of high quality, person-centred care. By following these criteria, staff are empowered to tailor support to each individual's needs, with an aim of improving outcomes for patients, carers, and the wider healthcare team.

Why is this standard important for the organisation?

By achieving the criteria set out in this standard, the organisation can demonstrate clear evidence and provide assurance regarding the quality of care delivered. Meeting these criteria offers a robust framework for evaluating care and ensuring that high standards are consistently maintained.

Adopting a person-centred and inclusive approach results in several key benefits. It enhances health and wellbeing outcomes for those receiving care, while also improving the experiences of patients, carers, and staff alike. Furthermore, this approach fosters stronger, more collaborative relationships between everyone involved in the care process, supporting a culture of partnership and mutual respect within our services.

Examples of what meeting this standard might look like?

The following examples illustrate how person-centred care can be practiced every day, making sure each person's voice is heard and their experiences shape their care. These examples are just a few ways person-centred care is put into practice; there are many more approaches that reflect individual needs and experiences.



Someone recovering from surgery is offered choices about their rehabilitation schedule, with options planned around their work commitments and family life, ensuring recovery fits their individual circumstances and priorities.



A stroke survivor works with the multidisciplinary team to set rehabilitation goals that include returning to gardening, focusing on meaningful outcomes that motivate recovery and build independence.



A nurse uses visual aids and professional translation services to ensure a person fully understands their diagnosis and treatment options, allowing time for questions and honest conversations when options are limited.



A child receives a comic style booklet explaining their upcoming surgery in age appropriate language, helping them understand what to expect and feel less anxious.



An individual with cancer has coordinated care through regular case conferences involving their oncologist, GP, and palliative care nurse, ensuring consistent information and seamless transitions between services.



A young person in Child and Adolescent Mental Health Services (CAMHS) works with their therapist to set goals around improving sleep and managing anxiety ahead of exams, with regular check ins to support emotional wellbeing.



Staff greet people by their preferred name, listen attentively, maintain privacy during consultations, and create a calm, respectful environment where individuals feel heard and valued.



People are actively involved in safety checks, such as confirming their identity before procedures, and staff clearly explain potential risks and benefits, so individuals feel informed, reassured, and confident in their care.

A paediatric ward provides sensory friendly spaces, child sized equipment, and appropriate toys to create a welcoming, calming environment that supports children's comfort and emotional needs.

An individual experiencing homelessness is proactively identified as being at risk of exclusion and is offered tailored support through social work, along with accessible information about health and community services.

A person's carer is identified early, involved in care and discharge planning in line with the person's wishes, and offered information about respite and support services as an equal partner in care.

A children's ward introduces a "Kids' Voice" board where young patients share ideas and feedback, which directly influences service improvements such as changes to play spaces and daily routines.



Measurement of the Standard

The NHSGGC Person-Centred Care Measurement Framework will evidence this standard through 10 NHSGGC core measures, which will be integral to all Excellence in Care (EiC) Families Assurance Tools at self, peer and corporate review levels. This includes an age-appropriate version for children, young people and families, alongside the 6 NHS Scotland Excellence in Care Patient Reported Experience Measures (PREMs). In addition, a more extensive enquiry tool will support a deeper dive into care experience and can also be used to select enquiry questions for further local application and improvement.

Person-centred care planning is assessed and evaluated via different measures and there are robust systems and processes out with this standard in place to ensure person-centred care provision is documented appropriately.



Appendix A - NHSGGC Person-Centred Care Measurement Framework

Contents

1. Introduction to the Measurement Framework

2. Adult Core Measures

3. Children/Parent/Carer Core Measures

4. 'Deep Dive' Review Question Bank (Adults and Children).

1. Introduction to the Measurement Framework

Understanding people's experience of care, alongside safety and effectiveness, is essential to building a clear and meaningful picture of healthcare quality. This insight helps identify variation, highlight what matters most to people, and drive continuous improvement.

Exploring how care is experienced allows services to assess how well they respect and respond to individual needs, preferences, and values, this is core to delivering truly person-centred care.

This framework offers a flexible approach to gathering feedback on person-centred care. It includes a range of question sets that can be used at different levels, from a small number of core questions for local, routine use, to more detailed question sets for deeper exploration. This includes the Level 4 Quality of Care Review question bank, which enables a more comprehensive "deep dive" into specific aspects of care. Services can select the approach that best meets their needs, ensuring feedback is meaningful and proportionate to the context.

The term person-centred is used throughout, while recognising that related terms such as patient centred, family centred, relationship centred, mutuality, and values based care are also used to describe the same principles.

In this framework, the term "people" may also refer to a guardian, power of attorney, or advocate, where appropriate or when someone does not have capacity.

Each question can be rephrased depending on the person's age, setting, and level of understanding. Questions should include a Likert scale response option (e.g. Always, Sometimes, Never), alongside an opportunity to provide qualitative feedback.

For some people, too much choice can be difficult to process, and open ended questions may not be suitable. In these cases, questions can be adapted to enable a yes/no or other appropriate response.

In some areas of practice, evidence of a person-centred approach may be observational.

2. Adult Core Measures

The following questions are designed to capture people's experience of person-centred care across the core criteria. Each question should be answered using the response options Always, Sometimes, Never or N/A, with an opportunity to provide additional comments where appropriate.

Personalisation

Do the staff take time to get to know you and ask about the things that are important to you?

Always	Sometimes	Never	N/A	
Comments				

Do you feel the people who matter to you are involved in your care in the way you want them to be?

Always	Sometimes	Never	N/A	
Comments				

Enablement

Do you feel involved in decisions about your care and treatment?

Always	Sometimes	Never	N/A	
Comments				

Coordination

Do you feel your care has been organised well?

Always	Sometimes	Never	N/A	
Comments				

Communication

Do you feel staff communicate with you in a way that helps you understand what is happening?

 **Always**	 **Sometimes**	 **Never**	**N/A**
Comments			

Information

Do you feel you've been given enough information about your care and treatment?

 **Always**	 **Sometimes**	 **Never**	**N/A**
Comments			

Wellbeing

Do you feel your care has supported your wellbeing?

 **Always**	 **Sometimes**	 **Never**	**N/A**
Comments			

Compassion, Dignity and Respect

Do you feel you are treated with compassion, kindness, respect and dignity?

 **Always**	 **Sometimes**	 **Never**	**N/A**
Comments			

Safety

Do you feel safe?

 **Always**	 **Sometimes**	 **Never**	**N/A**
Comments			

Equity

Have you experienced any unfair treatment while receiving care?

 **No**	 **Sometimes**	 **Yes**	**N/A**	
Comments				

Scoring Framework

Coming Soon

The scoring framework will use overall scores alongside domain results, trends and feedback to guide proportionate action. This will be integrated, where possible, into existing systems and processes such as Care Assurance tools, the balanced score-card and aligned to nationally reported patient reported experience measures when they are available. We are working closely with teams and services, to explore what local implementation of the scoring framework will look like.

What can teams and services do now?

We would encourage teams to start small. Begin with one domain that feels particularly relevant to your service and use it as an opportunity to reflect on current strengths and identify one area where you may want to improve. The measures help bring the person's voice into the conversation. By gathering feedback from patients, families and carers, we can better understand experiences, identify variation, and ensure we're focusing our improvement efforts on things that matter to the people who use our services.

3. Children and Young People/Parent/Carer Core Measures

The following questions are designed to capture people's experience of person-centred care across the core criteria. Each question should be answered using the response options Always, Sometimes, Never or N/A, with an opportunity to provide additional comments where appropriate.

Personalisation

Do the people looking after you/your child ask what's important, including likes and dislikes?

Always	Sometimes	Never	N/A	
Comments				

Can the people you care about, like your family, help take care of you the way you want?

Always	Sometimes	Never	N/A	
Comments				

Enablement

Do staff help you make choices about your/your child's care, like what happens next or what you'd like to do?

Always	Sometimes	Never	N/A	
Comments				

Coordination

Do you feel your/your child's care has been organised well?

Always	Sometimes	Never	N/A	
Comments				

Communication

Do you feel staff communicate with you in a way that helps you understand what is happening?

 **Always**	 **Sometimes**	 **Never**	**N/A**	
Comments				

Information

Do staff give you information about your care/your child's care and treatment?

 **Always**	 **Sometimes**	 **Never**	**N/A**	
Comments				

Wellbeing

Do the people looking after you ask you about how you are feeling inside, like if you are worried, sad, or needing help?

 **Always**	 **Sometimes**	 **Never**	**N/A**	
Comments				

Do the staff check how you are coping as their parent/carer?

 **Always**	 **Sometimes**	 **Never**	**N/A**	
Comments				

Compassion, Dignity and Respect

Do you feel cared for and treated kindly by the people looking after you?

 **Always**	 **Sometimes**	 **Never**	**N/A**	
Comments				

Safety

Do you think the people looking after you notice when you feel poorly or if something feels wrong, and do they listen to you when you tell them?

 **Always**	 **Sometimes**	 **Never**	**N/A**	
Comments				

Equity

Whilst your child has been receiving care have you experienced any unfair treatment or barriers to care?

 **No**	 **Not sure**	 **Yes**	**N/A**	
Comments				

Scoring Framework

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The scoring framework will use overall scores alongside domain results, trends and feedback to guide proportionate action. This will be integrated, where possible, into existing systems and processes such as Care Assurance tools, the balanced score-card and aligned to nationally reported patient reported experience measures when they are available. We are working closely with teams and services, to explore what local implementation of the scoring framework will look like.

What can teams and services do now?

We would encourage teams to start small. Begin with one domain that feels particularly relevant to your service and use it as an opportunity to reflect on current strengths and identify one area where you may want to improve. The measures help bring the person's voice into the conversation. By gathering feedback from patients, families and carers, we can better understand experiences, identify variation, and ensure we're focusing our improvement efforts on things that matter to the people who use our services.

4. 'Deep Dive' Review Question Bank (Adults and Children)

Personalisation

- Do the staff looking after you introduce themselves?
- Do the staff take the time to get to know you and ask about the things that are important to you?
- Do the staff listen to what matters to you and include your preferences in decision-making?
- Do you feel the people who matter to you are involved in your care in the way you wish them to be?

Child

- Can the people you care about, like your family, help take care of you the way you want?

Child/Parent/Carer

- Do the people looking after you/your child say hello and tell you their name?
- Do the people looking after you/ your child ask what's important, including likes and dislikes?

Parent/Carer

- Do staff consider your child's existing individual needs? (This could include language support such as translations, large print or additional equipment / adaptations on the hospital ward.)

Enablement

- Do you feel involved in decisions about your care and treatment?
- Do you feel your care has been organised well?

Child/Parent/Carer

- Do staff help you make choices about your/your child's care, like what happens next or what you'd like to do?

Parent/Carer

- Do you feel involved in decisions about your child's care and treatment as much as you want to be?
- As a parent or carer, do you feel staff have supported you and your child in identifying and working towards goals that are important to your child's wellbeing?

Communication

- Do you feel staff communicate with you in a way that helps you understand what is happening?
- Do you feel the staff give you time to ask questions to help you understand what is happening to you?
- Do you feel staff make an effort to speak to the people who are important to you?
- If your needs are not able to be met (i.e. at a time suitable to you) have you been fully advised of the reasons?

Child/Parent/Carer

- Do you/your child get to ask questions or talk about anything you are thinking about or feeling worried about?
- Do staff explain your/your child's care and treatment to you?
- Do staff listen carefully when you/your child explain how they were feeling?

Information

- Do you feel you've been given enough information about your care and treatment?
- Have the staff offered information about support services if needed, i.e. Support and Information Services, Family Support and Information Services, Social Work, Discharge Co-coordinators, Spiritual Care, Healthy Eating, Weight Management?

Child

- Do the people looking after you explain to you why you are at the hospital or clinic and what is happening?

Child/Parent/Carer

- Do staff give you information about your care / your child's care and treatment in a way that you can understand?

Parent/Carer

- Do the staff keep you informed about what is happening while your child is receiving care and treatment?
- Have the staff offered information about support services if needed, i.e. Support and Information Services, Family Support and Information Services, Social Work, Discharge Co-coordinators, Spiritual Care, Healthy Eating?

Coordination

- Do you have to tell your story multiple times?
- Do you feel like information shared with you is consistent between all staff looking after you?

Parent/Carer

- Do you have to tell your child's story multiple times?
- Do the staff caring for and treating your child work well together?

Wellbeing

- Do you feel your care has supported your wellbeing?

Child

- Do the people looking after you ask you about how you are feeling inside, like if you are worried, sad, or needing help?

Parent/Carer

- Do staff take the time to listen to your child's fears or worries?
- Do the staff check how you are coping as your child's parent/carer?

Compassion, Dignity and Respect

- Do you feel you are treated with compassion, kindness, respect, and dignity?

Child

- Do you feel cared for and treated kindly by the people looking after you?

Parent/Carer

- Overall, do you feel you and your child were treated with kindness, compassion, respect and dignity by the staff?

Safety

- Do you feel safe?
- Do you feel the staff explain the benefits and risks of your treatment?
- Do you feel confident in the way staff respond to and manage your care and treatment?

Child

- Do you think the people looking after you notice when you feel poorly or if something feels wrong, and do they listen to you when you tell them?

Parent/Carer

- Do you feel confident in the way staff respond to and manage your child's care and treatment?
- If you raise a concern about your child's care and treatment, is this taken seriously by staff?

Environment and Equipment

- Do you feel the facilities and general environment accommodate your individual needs?
- Do you feel you have access to the appropriate equipment to suit your needs?

Child

- Do you have what you need here to help you feel comfy and happy, like toys, things to play with, or a quiet place?

Parent/Carer

- Do you have what you need to feel comfortable and to look after your child?

Equity

- Have you experienced any unfair treatment while receiving care?
- Have you experienced any barriers while receiving care?

Child/Parent/Carer

- Do you feel included and listened to when you or your child share your thoughts or feelings?

Parent/Carer

- Whilst your child has been receiving care have you experienced any unfair treatment or barriers to care?

Carers

Questions for carers only

- Did the staff know who you were in relation to your child's care, and did they recognise the role you play?

Inpatient setting only:

- Have you been involved in decisions about the care, treatment, and discharge of the person you care for?

Questions for parent/carers in an inpatient setting only

- Do you feel that the staff acknowledge the important role you play in your child's care?
- Have you been involved in decisions about planning to go home and what will happen next with your child's care and treatment?

Listening, Learning and Improving

- Would you know who to contact or how to provide feedback about your experience of care?
- Have you been supported and encouraged to tell the people looking after you how they can look after you better?

Staff are able to evidence the following:

1. There is a process in place where people are given information about the range of ways, they can provide feedback (which might include Care Opinion, NHSGGC website, paper-based surveys, comment cards, web, text, devices, kiosks, and apps) and are supported by staff to use these. (Approaches offered take account of the needs of patients who are less able or less willing to give feedback.)
2. Feedback and complaints information is clearly displayed in the department and available to access.
3. There is a process in place to actively listen, learn, reflect and act on feedback and experience to inform improvements to healthcare and services provided.
4. A 'You Said, We Did' board is in place in a public area of the department and completed with up-to-date information (previous 3 months).

Appendix B - NHSGGC Person-Centred Care Measurement Framework: Examples in Practice

The person-centred care domains described in the standard are highly interconnected. In practice, you rarely demonstrate one domain without demonstrating several others.

For example:

- Good communication enables shared decision making
- Personalisation depends on information, coordination and equity
- Carer involvement supports safety, wellbeing and continuity.

The examples below are grouped by the most relevant criterion, but many span multiple domains at the same time. Services do not need separate evidence for every domain - the same examples often meet several criteria.

1. Personalisation

- People are routinely asked what matters most to them during care planning, and this shapes how care is delivered (for example, recovery plans planned around work or family life).
- Children and young people are offered meaningful choices, such as appointment times that fit around school and activities.
- Personalised care and support plans are co-created with individuals, capturing preferences, strengths, priorities and agreed goals.
- “Getting to know me”, “All About Me” and personal profile documents are used to support individualised care.
- Strengths based approaches focus on interests, abilities and goals beyond medical treatment, including education, work, hobbies and social participation.

2. Enablement

- People work in partnership with staff to set realistic and meaningful goals, such as returning to valued activities after illness or injury.
- Children, young people and families are supported to actively participate in decisions about treatment and care.
- Enablement approaches promote self management and independence wherever possible, reflected in care plans and ongoing support.
- Goal setting tools (including CAMHS goal based outcomes) are used to support motivation, confidence and progress.

3. Communication

- Staff use clear, plain language, check understanding and allow time for questions.
- Communication passports explain how someone communicates, what helps, what doesn't, and what matters to them.
- Accessible communication tools are used, including Talking Mats, picture boards, symbol systems, visual schedules and digital AAC tools.
- Play based and creative approaches (toys, drawings, visual aids) help children express feelings and concerns.
- Staff are honest and compassionate when explaining why certain options are not available.

4. Information

- Written and verbal information is tailored to individual needs and shared in preferred formats, including Easy Read, large print, translated and age appropriate materials.
- Health literacy approaches, such as teach back and visual explanations, are used to support understanding.
- Digital patient portals support access to appointments, test results and care plans where appropriate.
- Information about support services is routinely offered, including support and information services, social work, discharge support and spiritual care.

5. Coordination

- Multidisciplinary teams work together to deliver organised, consistent care aligned with what matters to the person.
- Named nurse or key worker models provide continuity and a single point of contact.
- Shared electronic records reduce duplication and the need for people to repeat their story.
- Care transition and discharge planning tools support safe handovers between hospital, community and home (including Future Care Planning and Treatment Escalation Plans).
- Care plans and MDT templates explicitly include the person's goals and priorities.

6. Wellbeing

- Staff support people to set goals that promote emotional, psychological, social and physical wellbeing, not just clinical outcomes.
- Regular wellbeing conversations explore how people are feeling and coping.
- Mental health and emotional support resources are used where appropriate, including brief interventions and therapeutic groups.
- Health improvement support is offered, such as smoking cessation, physical activity and wellbeing resources.
- Spiritual care services support meaning, belief and emotional support.

7. Compassion, Dignity and Respect

- Staff greet people by their preferred name, introduce themselves and explain their role.
- Privacy is maintained and sensitive conversations are handled with kindness and respect.
- Trauma-informed practice principles guide interactions, particularly for people with past or ongoing distress.
- Values based and compassion focused initiatives support a respectful culture and positive behaviours.
- Reflective practice opportunities (such as Schwartz Rounds) support compassionate care delivery.

8. Safety

- People are involved in safety checks, including identity verification, consent discussions and explanation of risks and benefits.
- Staff use structured communication tools (such as SBAR) to support safe information sharing.
- Early warning and escalation pathways support timely recognition of deterioration.
- Safety briefings and huddles highlight individual needs, communication adjustments and risks.
- Incident reporting systems support learning and improvement.

9. Environment and Equipment

- Care environments are accessible, comfortable and adapted to individual needs.
- Sensory friendly resources are available, including lighting choices, quiet spaces, weighted blankets and fidget tools.
- Child friendly and dementia friendly design principles support comfort, orientation and dignity.
- Appropriate assistive equipment and moving and handling resources are available and used safely.
- Comfort focused resources support families and carers, such as recliner chairs and private spaces.

10. Equity

- Services proactively identify and address barriers to access, including disability, literacy, language, poverty and digital exclusion.
- Reasonable adjustments are made to communication, environment and processes.
- Interpreting and communication support services ensure inclusion.
- People at risk of exclusion are offered tailored information, guidance and support.
- All interactions respect protected characteristics and uphold equality and human rights principles.

11. Carers

- Carers are identified early and recognised as equal partners in care, in line with the person's wishes.
- Carers are involved in care planning, decision making and discharge where appropriate.
- Adult Carer Support Plans and Young Carer Statements assess and support carers' wellbeing.
- Care Emergency Plans support continuity and safety when situations change.
- Carers are offered information, advice and support services.
- Carer details and interactions are recorded in the appropriate documentation.

12. Listening, Learning and Improving

- People are encouraged and supported to provide feedback through a range of accessible methods.
- Feedback platforms are actively promoted and used.
- "You Said, We Did" approaches show how feedback has led to change.
- Case studies and experience stories inform service improvement.
- Teams listen, reflect and act on feedback to improve care quality.
- Public involvement and engagement activities support service design and improvement.

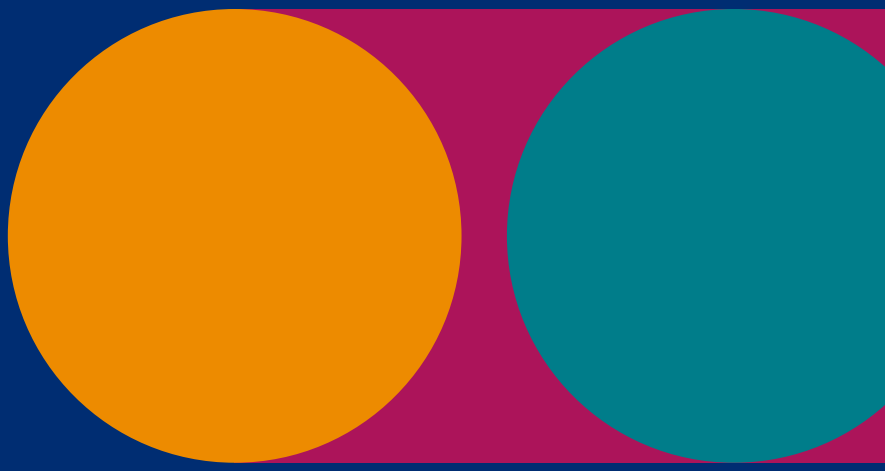
Appendix C - Resources (A-Z)

- Adults with Incapacity Act (AWI) | Right Decisions
- A Fairer NHSGGC – NHSGGC
- British Sign Language (BSL) Resource – What support can I get and where do I get it?
- Care Information Scotland
- Care of deteriorating patients (SIGN)
- Care Opinion
- Carers – NHSGGC
- Carers (Scotland) Act 2016
- Carers' Charter – gov.scot
- Civility Saves Lives – NHSGGC
- Clear to All – NHSGGC
- Communication aids and augmentative and alternative communication (AAC) – Sense
- Complex care management for children and young people with Exceptional Health Care Needs protocol | NHSGGC
- Developing a dementia inclusive hospital environment using an Integrated Care Pathway design: research protocol - PMC
- Discovering meaning, purpose and hope through person-centred wellbeing and spiritual care: Framework
- Equality Act 2010: guidance – GOV.UK
- Equality Compliance – Audits & Assessments – NHSGGC
- Equality Impact Assessments – NHSGGC
- Equality Scheme Engagement – NHSGGC
- Equalities in Health – NHSGGC
- Equalities Information for Patients and Service Users – NHSGGC
- Equalities Information and Resources for Staff – NHSGGC
- Equalities in Health – Useful Links – NHSGGC
- Estates & Facilities – Useful Information – NHSGGC
- Excellence in Care
- Family Support and Information Service – NHSGGC
- Feedback, Comments, Complaints and Concerns Annual Reports – NHSGGC
- Future Care Planning Training Hub – NHSGGC
- Getting it Right for Every Child

- Getting it Right for Everyone
- Having Realistic Conversations | Turas | Learn
- Health Improvement – NHSGGC
- Health literacy | Turas | Learn
- Hello My Name Is – A campaign for more compassionate care
- HIS Care Experience Improvement Model
- HIS Clinical Governance Standards
- HIS Maternity Care Standards
- Home – Civility Saves Lives
- Home – EC4H
- Home | HMIPS
- Information and Support Services – NHSGGC
- It's OK to ask, bring your questions | Right Decisions
- Mental Health (Scotland) Act 2015
- Mental Health and Wellbeing – NHSGGC
- Mental Welfare Commission for Scotland
- Moving and Handling – NHSGGC
- Must Do with Me Principles
- My Health, My Care, My Home (2022)
- My Health, My Rights – Children and Young People's Charter
- NHS Staffing Pool Hub – The 6 Cs of Care | NHS Professionals
- NEWS2 assessment for sepsis in deteriorating patients | Right Decisions
- NHSGGC Anti-racism Plan 2025 - 2029 - NHSGGC
- NHSGGC Continuous Interventions Policy
- NHSGGC Public Protection Policy
- Paediatric Early Warning Score (PEWS) – NHSGGC
- Patient Experience and Public Involvement (PEPI) – NHSGGC
- Patient Hub – NHSGGC
- Patient Reported Outcome Measures: A toolkit to measure outcomes that matter | Turas | Learn
- Person-centred Care Planning – NHSGGC
- Person-centred Care Planning – Good Practice Guide (August 2019)

- Personalised approach to care | Realistic Medicine
- Personalised approach to care | Turas | Learn
- Planning Your Care – NHSGGC
- Play in hospital – RHCG
- Psychological First Aid – NHSGGC
- Realistic Medicine
- Realistic Medicine – Shared decision making, reducing harm, waste and tackling unwarranted variation
- Regulation 9: Person-centred care - Care Quality Commission
- SBAR Implementation and Training Guide
- Scottish Compassionate Communities Toolkit | Good Life, Good Death, Good Grief
- Scottish Commission for People with Learning Disabilities
- Scotland's Population Health Framework
- Sexual Harassment: 'Cut it Out' and Equally Safe at Work (ESaW) Programmes – NHSGGC
- Shared Decision Making – Realistic Medicine
- Shared Decision Making | Turas | Learn
- Specialist Children's Services – NHSGGC
- Spiritual Care Service – NHSGGC
- Stand Against Racism Campaign – NHSGGC
- Staff Forums and Networks – NHSGGC
- Staff Governance Framework
- Support and Information Service: Support for Carers – NHSGGC
- The Health and Care (Staffing) (Scotland) Act 2019
- The Plan More, Stress Less Toolkit – NHSGGC
- The Promise for Care Experienced
- The United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024
- The Sleepy Doctor wins the Lifetime Achievement Award – NHSGGC
- Toolbox Talks – NHSGGC
- Trauma – National Trauma Transformation Programme | NHS Education for Scotland
- Trauma informed | Turas | Learn
- Using Future Planning Tools – NHSGGC
- Useful Documents and Resources – NHSGGC
- Value Based Health and Care | Turas | Learn

- Voice of the Infant Pledge
- Wellbeing – NHSGGC
- What Matters to You?
- Women and Families Maternal Mental Health Pledge



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