

Consultations for
carers to share their
views with external
organisations

FOR

FALKIRK
CARERS

Consultation with Ross McGuffie NHS Forth Valley Chief Executive and Karen Goudie Executive Nurse Director.

Held on 12th March 2026

at The Carers Centre, Falkirk

There were 16 people in attendance including Carers, presenters and staff.

Quick recap

The meeting focused on improving patient and Carer experiences within NHS Forth Valley, particularly around discharge processes and medication management. Karen, the Executive Nurse Director, discussed efforts to reduce open complaints by 70% and shared personal experiences caring for her mother. Participants raised concerns about inconsistent GP practices, communication gaps between medical professionals and Carers, and the need for better training of home care providers. The discussion highlighted challenges with medication management, including prescription waste and the importance of pharmacist involvement. Participants also emphasized the need for more coordinated discharge plans, especially for mental health patients, and suggested implementing QR codes for feedback collection alongside more traditional methods too. The conversation ended with a commitment to involve Carers in future discharge planning discussions and to explore ways to improve communication and support for unpaid Carers.

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Next steps

- Ross: Share the briefing document detailing actions to support dementia patients. (Actioned).
- Sharlene-Falkirk: Send Ross's email address to Carer online so they can contact Ross regarding concerns. (Actioned).
- Case study author (unnamed): Send the case study about Carers' experiences with 24-hour support at home discharge to Ross for review and learning. (Sharlene is awaiting consent from Carer).
- Relevant team: Ensure Carers' voices are included in the development of the new integrated discharge model and arrange follow-up discussion with Carers for input (Actioned).
- Relevant team: Set up QR codes and feedback collection system on wards for patient/Carer feedback, and ensure feedback is collated and reviewed at ward level.

Enhancing Patient and Carer Experiences

Karen led a discussion on improving patient and Carer experiences within the health board. Participants shared challenges, including difficulties in being included in medical decisions, lack of coordination among professionals, and issues with the "Care Opinion" platform. Key concerns highlighted were the need for better communication with Carers, improved training for some medical professionals on handling dementia and cognitive limitations, and more consistent support across different health services. Karen and Ross both mentioned ongoing efforts to streamline pathways, enhance dementia-friendly environments, and involve Carers in care plans, while also addressing specific feedback about improving support for patients with dementia from A&E through to discharge. Ross spoke about the need to look at ways that

people can access supports directly rather than having to go via GP referral.

NHS Technology and Patient Care

Karen discussed three key initiatives: recording patient outcomes to drive better care, collecting feedback on workforce and patient experiences, and improving electronic systems across the NHS. She highlighted issues with current NHS technology systems, advocating for a unified approach across Scotland rather than multiple bespoke systems.

Dementia Patient Support in A&E

Ross discussed two main points regarding dementia patient support in A&E and agreed to share a briefing document with details about the patient journey and requested specific information about actions being taken to support dementia patients, which would be followed up via email. (Sharlene will attach this with these notes).

Medication Management and Care Integration

Ross discussed the importance of medication management and quality prescribing within the healthcare system. Ross highlighted efforts to integrate pharmacists into supporting medication reviews and improve prescribing efficiency and spoke about medication reviews that should be occurring in all community hospitals. The discussion also touched on

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the benefits of having nurse practitioners and pharmacy teams involved in medication management, particularly for patients with conditions like dementia. Sharlene emphasized the need to address the health needs of Carers, who often neglect their own health due to caring responsibilities, and the importance of providing responsive and person-centred care, including respite services.

Healthcare Discharge Process Challenges

Karen led a discussion about challenges in healthcare, particularly focusing on discharge processes and Carer experiences. Carers highlighted the need for better discussions with Carers from the first moments of hospital admission. The discussion revealed concerns from Carers about unsafe discharges, particularly from mental health wards, and the importance of involving Carers in the discharge process. Ross mentioned ongoing work to develop an integrated discharge model and emphasized the need for Carers to be involved with these developments. Ross mentioned the need to try and prevent people staying in hospital if they don't need to be there, he spoke about the deterioration/muscle loss that occurs when people are lying in a hospital bed, Ross is keen for the discharge process to start as soon as possible. Ross spoke of the importance of trying to maintain people's independence and highlighted the positive outcomes from the new discharge to access pilot and shifting the balance of care pilot, 60% of people involved in this pilot were able to return home rather than moving into a care home. The conversation ended with plans to gather further feedback and involve Carers in developing solutions to the identified issues.

Carer Experiences/View and Comments

- A Carer stated that it can be frustrating when GP receptionists act like gatekeepers, other Carers in the room agreed with this comment.
- Communication needs to be better between health professionals and Carers, some Carers shared good experiences whilst others wished for better communication
- Some Carers felt that NHS staff did not value their input as a Carer, one Carer shared their experiences of trying “for years to get people to listen to me that the person I care for was acting very differently, the professionals believed the symptoms were related to an existing condition, I knew they weren’t, the cared for person was eventually diagnosed with dementia”.
- Carers feel that GPs are too busy, commenting that looking at one symptom at a time is not time effective for Carers in busy caring roles.
- A Carer shared their frustrations that whilst having respite care they could not access an urgent GP appointment; this appointment was a follow up from a recent hospital admission.
- A Carer shared their views about Care opinion, this Carer felt that it can be hard to navigate and stated that it’s not easy to submit things.
- A few Carers spoke about their experiences of attending hospital appointments with the person that they care for (dementia diagnosis), these Carers shared their experiences of medical professionals dismissing the Carers and chatting with the person with dementia, one Carer even presented the Alzheimer’s Scotland card to the professional who also went on to dismiss this.
- Carers spoke about personal preference, and some people may not want male staff providing personal care.

Meeting Minutes

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- Some Carers raised their concerns about staff when English is not their first language, it can be harder for people who have hearing devices to understand people if their spoken English is not fluent.
- A Carer caring for someone (who is using alcohol and drugs) raised their concerns that Carers are not being listened to, often the person that they are caring for is being discharged to their home without their knowledge.
- A Carer spoke about people “stock piling medications that are prescribed” other Carers in the room agreed with this statement.
- Sarah from the Carers Centre hospital team raised that some Carers are finding the person that they care for is being supported in a Ward that does not meet their needs due to lack of bed spaces.
- Sarah also raised that the old track system in the hospital allowed Carers centre staff to see Carers, the new system doesn't have a part for Caring status to be recorded, only next of kin, and the next of kin isn't always the Carer, therefore the hospital team are relying on NHS staff to refer to Carer centre staff, Sarah feels that NHS staff may not have time to do this.
- A Carer spoke about the frustrations that they have experienced. The 2 people that they care for shared a home and both had different care companies providing their care, the cared for people didn't understand and would ask the staff to do things that they could not as they were not commissioned to provide this person's support.
- A Carer spoke about their experiences of visiting Forth Valley hospital (FV) which was mainly very positive, however, on one occasion the person that they care for was admitted and during this time moved to a single room, the staff did not mention to the Carer on their next visit that the reason that they had been moved was that they had contracted an infection, this put the Carer and their family at risk.
- A Carer spoke about assisted housing and how this takes a lot of pressure of them, this Carer still visits everyday however this type of

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support is allowing the cared for person to remain at home rather than in a care home.

- A Carer spoke about their worry that they would lose their package of care and care providers when the person they care for was admitted to hospital.
- A Carer mentioned that they have created a spreadsheet for their cared for persons medications as the hospital system does not list these medications in alphabetical order or time order.
- A Carer spoke about the fantastic support that they get from a consultant at FV Hospital, and how great the communication has been.
- A Carer shared their frustrations at not being able to get an appointment for the person that they care for, the Carer emphasized to the receptionist that the cared for person would only see a particular doctor, there was a long wait to see this GP.
- A Carer spoke about the fantastic support they received from Strathcarron.