

Improving Person-Centred Care Planning in NHSGGC: Before and After Evaluation following Implementation of Digital Clinical Notes and the new Person-Centred Care Plan

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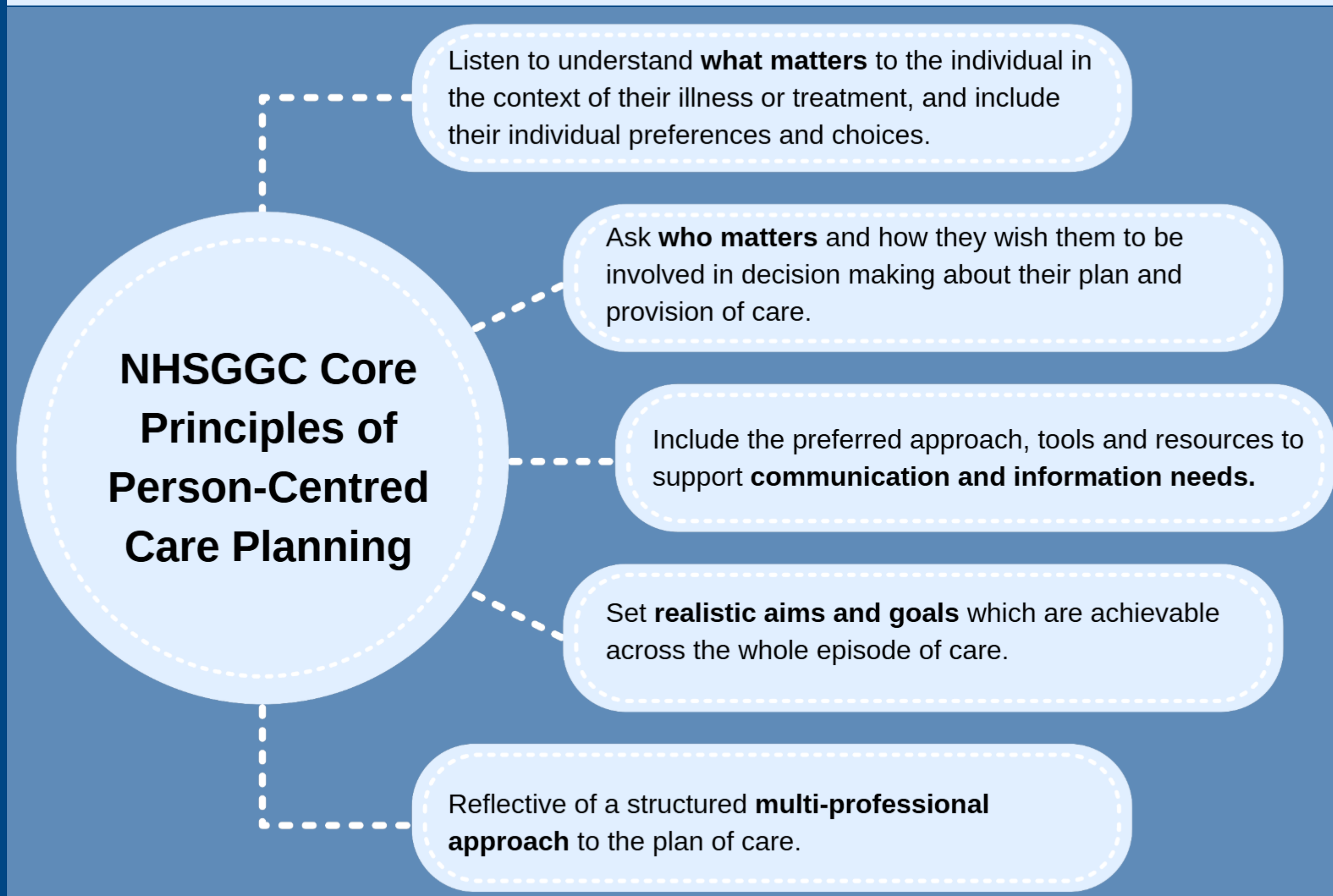
COLLABORATE. INNOVATE. TRANSFORM.

Introduction and Aim

Person-centred care planning (PCCP) is central to delivering high-quality, compassionate care. In NHSGGC, the transition of nursing documentation to Digital Clinical Notes (DCN), including a new Person-Centred Care Plan (PCCP), aims to improve the structure, consistency, personalisation and evaluative quality of inpatient notes. A pre- and post-implementation evaluation has been undertaken across five acute hospital sites to determine the impact of DCN and the new PCCP.

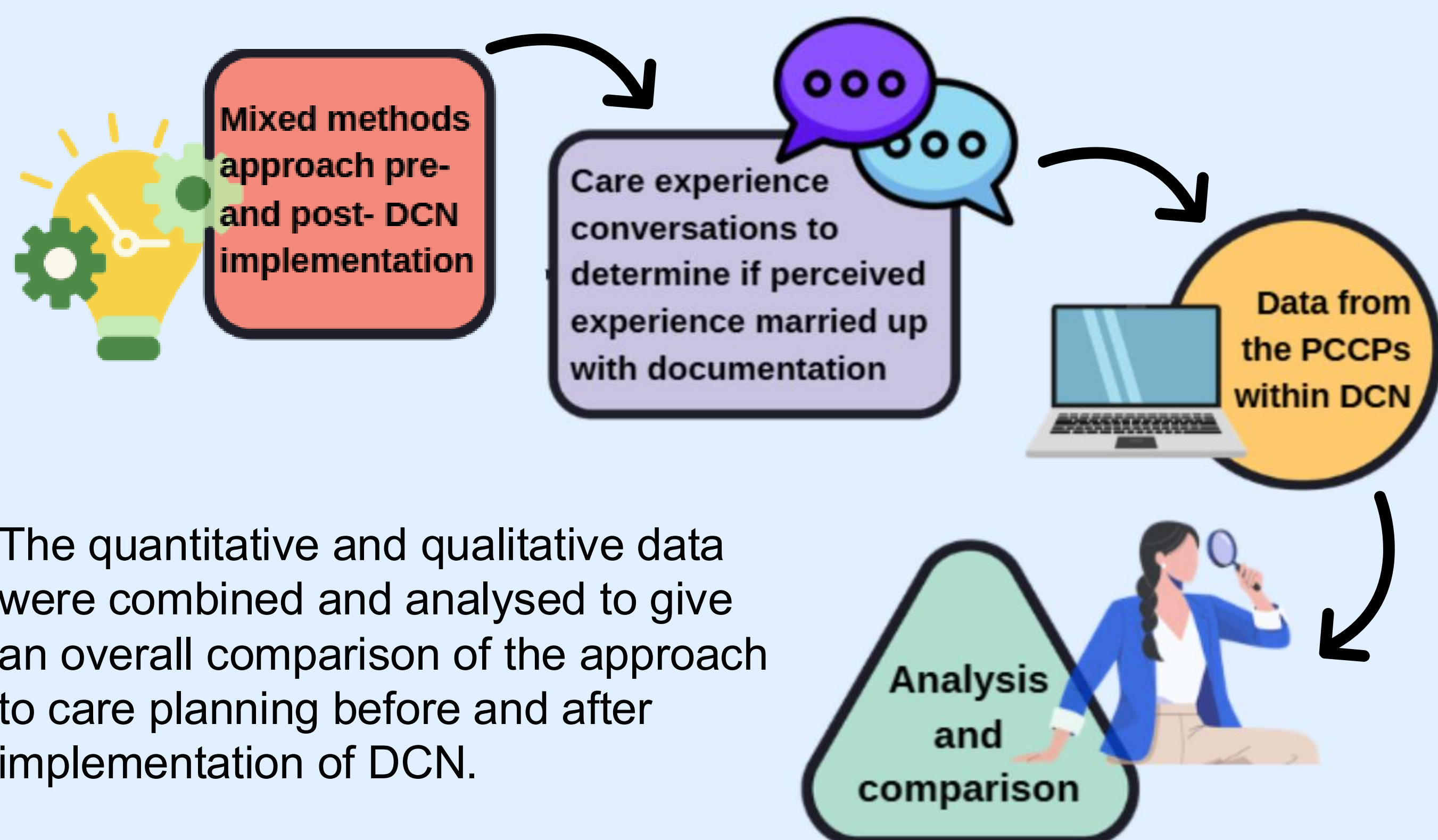
The evaluation was conducted by the Person-Centred Health and Care (PCHC) Team between September 2024 and November 2025 to assess improvements in documentation quality, consistency, structure and alignment with NHSGGC's Core Principles of Person-Centred Care Planning (Figure 1) and the APIE (Assess, Plan, Implement, Evaluate) Nursing Model. The Core Principles were developed in 2021 through extensive stakeholder engagement.

Figure 1:



Method

A mixed-methods approach was used to evaluate the PCCPs pre- and post-DCN implementation. Quantitative audits assessed alignment with the APIE nursing model and NHSGGC's Core Principles of Person-Centred Care Planning. Qualitative data was gathered through care experience conversations with patients and family/carers to determine if perceived experience of a person-centred approach to care planning married up with what was documented in each person's care plan.



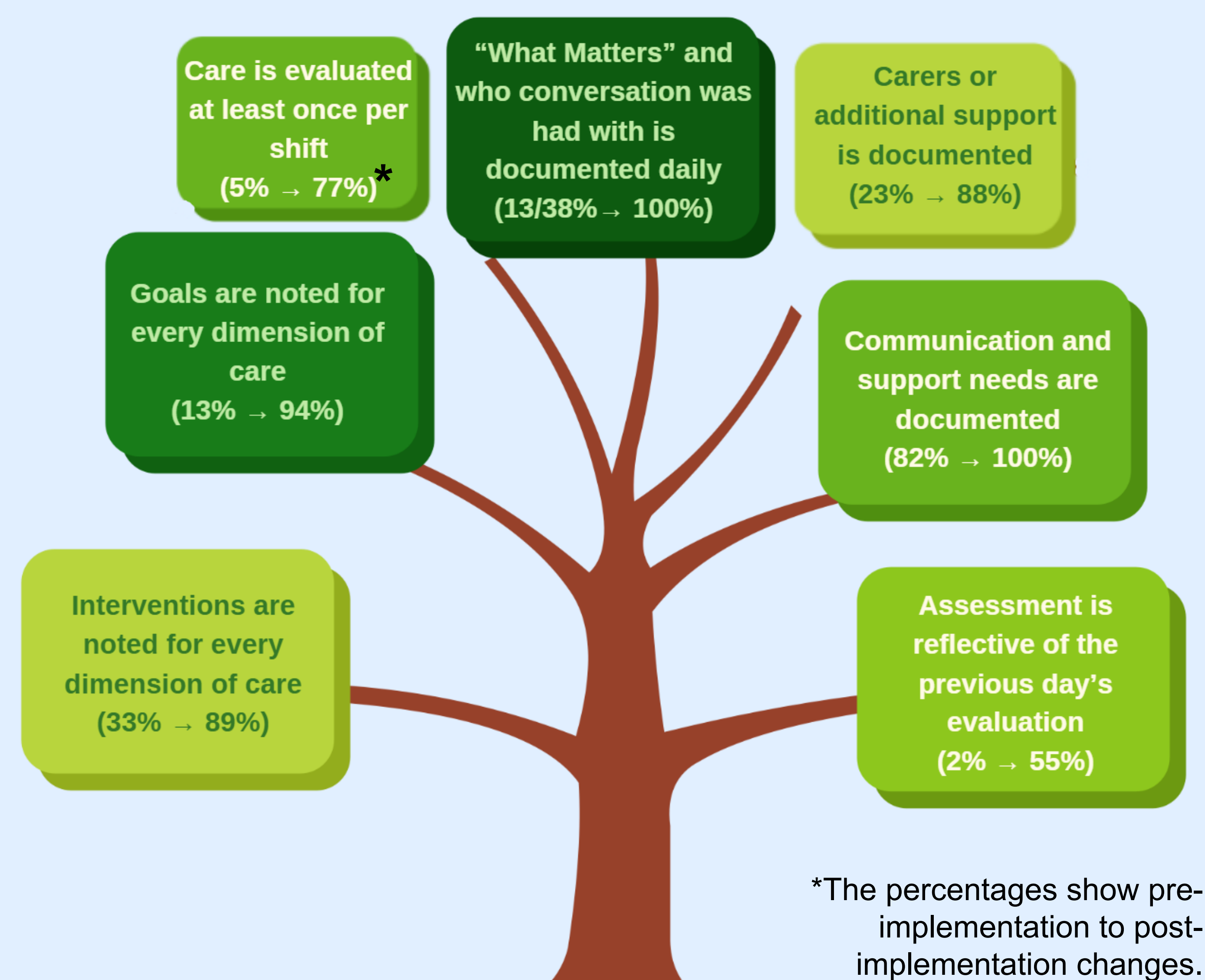
Outcome



Pre-implementation evaluation showed that paper care plans lacked structure, consistency and personalisation.

In contrast, patient experience was found to be overwhelmingly positive and of a person-centred approach, highlighting a gap between documentation and patient/family experience.

Post-implementation of the PCCP, what is going well?



*The percentages show pre-implementation to post-implementation changes.

What could be even better?

Further focused improvement is required to strengthen documentation quality - particularly around outcome-focused evaluations, consistent use of the patient's name within their care plan to strengthen personalisation and embedding 'What Matters' across all dimensions of care. Existing initiatives, including work on motivational and behavioural engagement with the care plan and enhanced AHP integration, continue to drive safer and more co-ordinated person-centred care.

Conclusion

The implementation of DCN and the new PCCP has demonstrably improved the quality, structure and consistency of nursing documentation across acute inpatient settings in NHSGGC. These developments represent a significant step towards excellence in person-centred care planning. Through sustained measurement, reflective practice, commitment to best practice, benchmarking and collaborative improvement, Person-Centred Care Planning will continue to evolve, ensuring high-quality, consistent and person-centred care that meets the needs and priorities of patients, families and staff.

Acknowledgements

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