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Do we need a new word for a new year?

As we come to the end of another year I wanted to wish all staff a Happy Christmas and a very Healthy New Year. Thank you for all your efforts to look after patients as well stop people from getting ill. It's brilliant to be part of NHS Highland and being able to say "well done" and "thank you" is a privilege. I don't think we need a new word for "thank-you" but may be we need to say it more often.

But I do wonder if we need a new word to describe new ways of working. Whenever Shakespeare could not find the right word he made one up. I think he had a point.

I spend a lot of time speaking to staff and public. Most understand that we are facing tough times - relatively less cash to deliver essential services and growing demand. However, when we go out and about and talk about achieving a high standard of service with less money what some people hear is cuts.

So this is where I think we need a new word. **Qualficient**; *a service that is both high quality and efficient in its use of resources.*

Any good organisations should always strive for qualficiency. As a single word neither quality nor efficiency becomes the dominant consideration. They are inextricably linked. This is not to say that every proposal for a change in service will be qualficient. And some changes might be cuts. But where we have professionals leading change and assuring the public and colleagues that a proposal is qualficient, then may be it can help us build trust and understanding.

During the year we have seen great examples of innovation where front line staff have been redesigning the way they deliver services. In their determination to make sure care is not compromised they have realised a need to do things differently and as efficiently as possible.

Happy New Year

Garry Coutts



Reshaping Care for Older People

Almost 100 delegates from voluntary groups, carer support groups, independent care providers, NHS Highland and The Highland Council met in Inverness last month (November) to plan how older people can be better cared for in their communities in the future.

The event was arranged by the Highland Third Sector Partnership, a group of local organisations funded by the Scottish Government to support voluntary activity and volunteering. Its aim was to bring together people to consider how to implement the Change Plan for Reshaping Care for Older People.

The event was opened by Elaine Mead, Chief Executive of NHS Highland, and Bill Alexander, Director of Social Work for The Highland Council.

Elaine explained that the way care is currently organised is not going to meet the needs of people of Highland going into the future. She said: “We now need a real focus to understand different approaches as to how we keep people independent and in their own homes for as long as possible. We want to reduce the amount of times people are admitted to hospitals as emergencies, but when they do have to be admitted we want to reduce their length of stay.

“There are thousands and thousands of beds in Highland – in people’s homes - and that is where we would like to keep them. But that poses many challenges not least how we make sure the right care is in place.

“Over the next few years, we will use the money available to us from the Change Fund to think and work in different ways. This will include supporting communities to support themselves.”

At a strategic level, NHS Highland and The Highland Council are carrying out a consultation to integrate health, social care and education services. This will deliver more co-ordinated and responsive care.

Bill said: “The £3.4 million available to Highland is not for funding new services, but to really shift the balance of care from acute hospital settings to more local settings and ideally in their own home.”

90 Day Improvement Programmes at Raigmore

At the beginning of November Raigmore Hospital commenced a 90 day Improvement Programme. The approach being used was developed by the Institute of Health Improvement (IHI) and was designed to produce innovation in a reliable and efficient manner, bringing new ideas to action.

These are ambitious programmes with ambitious targets for reduction which aim to reduce harm to patients which should result in shortened length of stay and occupied bed days.

The five programmes of work are Pressure Ulcers; Falls; Central Venous Catheters; Colo Rectal Surgical Site Infections (SSI); and Catheter Associated Urinary Tract Infections (CAUTI).

Teams, which are being supported by local Improvement Advisors and a National Facilitator, have been put together to take on this work and are made up of a Team Lead, subject expert and Senior Charge nurse.

There was an event to launch the programmes and a further event has just taken place to review the first 30 days. Mr Garry Coutts, Chair of NHS Highland, is pictured delivering the opening address at the 2nd event.



Telehealth projects up and running across Highland

Two telehealth projects recently started in Highland mean patients with mental health problems who are residents of the Abbeyfield Care Home in Ballachulish and patients accessing specialist substance misuse services in the far North will now have improved access to services and support to specialist teams based in Inverness.

Abbeyfield Care Home is pioneering the use of technology to get specialist mental health support for its' residents. Using video conferencing staff in Inverness will be able to provide specialist assessment and treatment for care home residents and to offer advice, support and education to care home staff with no need for travel.

It is believed that this is the first time a care home in Scotland has used such technology to support residents in this way.

Richard O'Keeffe (pictured waiting to start a telehealth clinic), Lead Nurse for Dementia for NHS Highland is based at New Craigs Hospital in Inverness. He explained that this new service will help improve the management of behavioural and psychiatric symptoms of dementia and will also improve the detection and treatment of depression in the elderly residents in the care home.



He said: "The increased access to services for patients and the advice and support we will be able to give staff and carers is of great benefit to everyone involved.

"Patients will see an increased availability of services, an increase in early intervention which will allow us to be proactive in our approach to managing patients showing early signs of developing problems, and it is an opportunity for both patients and their carers to have regular contact with hospital services to discuss diagnosis and treatment plans."

Meanwhile, work in the far North means that specialist staff in Inverness will be now able to link in with colleagues in Caithness allowing them to improve access to specialist substance misuse services for those accessing the Caithness Alcohol and Drug Dependency Service (CADDS) as well as provide support to staff.

Dr David Gordon, Consultant Psychiatrist and Addictions Consultant, is based at New Craigs Hospital in Inverness. He explained that both patients and staff are going to benefit from this new service.

He said: "It will mean more rapid access to service for patients. The clinical supervision for staff can be improved, and I can reduce the number of times I need to go up to Caithness saving me travel time, which means I will be able to see more patients.

"I am a big fan of this idea as it uses the most up to date technology for care delivery in order to address the challenges of remote and rural working."

NHS Highland has teamed up with the Scottish Centre for Telehealth and Telecare (SCTT), part of NHS24, in order to facilitate these projects.

Cathy Dorrian, Service Development Manager with SCTT said: "The Scottish Centre for Telehealth and Telecare is working with NHS Highland on the development of several new telehealth services. The development of these services would not have been possible without the support of video conferencing advisors within NHS Highland.

"These new services are another example of how we can work together to improve access to specialist services for patients and staff."

Telehealth arrives in Cowal

In the summer Cowal installed its first telehealth pods. The pods are similar to ipads in that they are computerised touch screen units which are installed in patients homes and link to a central server via a mobile phone signal.

The patients carry out daily checks using the pod and the results are accessed by the community nursing team. If any of the checks vary from the patients normal then a nurse from the team will contact them. At present the pods are being used for patients with respiratory problems.

Patients who are offered the pods are also given a course in pulmonary rehabilitation to support their knowledge of their disease. The pod helps the patient manage their condition and through identifying any deterioration early it can help stop the condition worsening which can improve the patient's quality of life. At a recent public event in the Hospital an example of a pod was available for people to try.



New telehealth clinic piloted in Caithness

Caithness patients with diabetes have been involved in trials of a new telehealth clinic that would help to speed up appointments with their consultants.

North Highland Community Health Partnership (CHP) is piloting telehealth consultations in the diabetes service at the Dunbar Hospital in Thurso.

This would reduce consultant travelling time, which would enable them to see more patients, thus reducing the length of time patients have to wait for return appointments.

It would also reduce the need for patients to travel to Raigmore Hospital in Inverness if they needed a review before the next planned local clinic in North Highland CHP.

Consultant Diabetologist and Endocrinologist, Professor Sandra MacRury, explained that a trial telehealth clinic for diabetes was held in October and the first real telehealth clinic with patients was held on November 4.

She said: "The patients involved were comfortable with the technology and felt that videoconferencing (VC) consultations worked well.

"A formal evaluation of the clinic will be carried out within the next month and we are hoping they will be implemented in January of next year."

Three patients took part in the first telehealth clinic and all strongly agreed or agreed that VC was an acceptable way of meeting the specialist, there was enough time to discuss problems, they felt comfortable talking via a television screen and the clinic met their needs.

One of the patients said they would be quite happy to use VC again as they could see it saved on time to travel and another described it as "a cost-effective and efficient way of having a consultation".

Prof. MacRury said telehealth clinics would not replace face to face consultations, but could be used for alternate appointments with consultants.

The diabetes clinic telehealth pilot builds on the success of other telehealth projects across the area covered by NHS Highland.

Audit Scotland's review of telehealth in Scotland, published in October of this year, stated that telehealth is most well used in the north of Scotland. It says: "NHS Grampian and NHS Highland are responsible for nearly half of the telehealth initiatives that have been introduced in Scotland."

Workshops consider future of services for older people in the Dingwall area

Almost 60 people attended a second workshop in Dingwall to give local people ongoing opportunities to be involved in designing local health services as part of a review of all services provided from the Ross Memorial Hospital site.

The latest workshop, on Friday December 9, was attended by representatives of community groups, patient participation groups, community councils, The Highland Council, other local groups and organisations, GP practices, hospital and community staff and managers from Mid Highland Community Health Partnership (CHP). Delegates who attended the first workshop in October asked for further information on the condition of the building and details of the cost of bringing it up to standard.

And NHS Highland Head of Estates, Eric Green, explained that the condition of the building is not favourable to the delivery of modern health care and it is estimated that it would cost £2.6 million to bring it up to the minimum standard.

Locality General Manager, Alison Phimister, explained that a number of options had been suggested by the project team, members of the public and staff. These are:-

- The status quo or minimum intervention
- Improving the hospital building to bring it up to standards
- Building a new hospital
- Building a new wing on the hospital to accommodate the inpatient medical beds
- Closing the inpatient medical beds and refocusing all resources on the development of a day hospital service and community support services
- Fewer inpatient medical beds provided in a different part of hospital with some refocusing of resources into the development of a day hospital service and community support services
- Closing the inpatient medical beds with services provided in a different hospital location, such as Raigmore or Invergordon
- Five day admission so no patients stay over the weekend with some refocusing of resources on community support services

The delegates then split into groups to identify which options best met the criteria identified as important by those who participated in the earlier workshop. At this stage, costs were not taken into consideration. This work will follow at a later date.

The option which the delegates believed met most of the criteria was a service that provided integrated health, social care and voluntary sector services, including the provision of inpatient beds, on a single site in a new hospital. This was followed by improving the hospital building to bring it up to standards and the third highest scoring option was to build a new wing on the hospital.

Mid Highland CHP Head of Finance, Tom Slavin, told delegates that, in line with other health boards across Scotland and the public sector as a whole, NHS Highland is facing a much reduced budget over the coming years. Okain McLennan, who is Chair of Mid Highland CHP Governance Committee, added that, if plans for the future of the site included any building, alternative sources of funding would have to be considered.

NHS Highland drop-in event in West Caithness

Around 50 people attended an open drop-in event in Thurso on the redesign of health services in West Caithness earlier this month (December).

NHS Highland is currently re-evaluating a number of possible options for changes to health services in West Caithness, including changes to some services which are delivered on the Dunbar Hospital site, as well services provided in the community.

And the aim of the open event was to provide a further opportunity for local people to be involved in providing further comments and preferences around some of the options.

Pauline Crow, Locality General Manager for Caithness, said: “We were pleased that so many people attended this event, despite the bad weather, and that they were able to discuss their concerns with NHS Highland staff and managers.

“We heard that, while local people support many of the proposed changes, some people are still concerned about the option to close the 12 inpatient beds at the hospital and particularly about the provision of palliative care.”

Pauline added that NHS Highland had received a petition from local people headed up ‘Save the Dunbar’ prior to the open event.

She said: “We have read all the comments and we are grateful to local people for taking the time to inform us of their concerns. We summarised the feedback and included this as part of the information presented at the open event. We hope we have been able to address most of the outstanding concerns at this event.

“We agree with the headline of the petition - Save the Dunbar. We want to revitalise the site as a modern centre for delivering the highest quality health and social care, bringing more services to people closer to where they live. This includes reducing the need for inpatient treatment whenever possible.”

Information was provided on all the options that have been developed so far and on the outcome of additional work that had been requested by the North Highland Community Health Partnership (CHP) Governance Committee.

This additional work related to the provision of inpatient access to palliative and end of life care in Thurso, providing greater clarity around the use of the Dunbar site, assessing the impact of proposed changes on the Scottish Ambulance Service, analysing the socio-economic impact, including transport, and looking at the impact of the redesign on staff.

Those attending the open event were given the opportunity to provide feedback on all the options and to suggest any further options.

The feedback from the open event, together with the findings from the petition, will be included as part of the additional evidence to be fed into an extraordinary meeting of the North Highland CHP Governance Committee on Tuesday December 20.

Community group looks at possible improvements to Lawson Memorial Hospital

North Highland Community Health Partnership (CHP) has set up a community group to involve local people in possible improvements to the way in which it uses the Lawson Memorial Hospital site in Golspie.

It has also set up a staff group, including staff from all areas of the hospital, to look at the options for improving the estate and the efficiency of services whilst ensuring that all existing services are maintained and enhanced where possible.



The CHP needs to consider changing the way the Lawson site is used because recent surveys have shown that the hospital is in need of considerable work, much of which is associated with the flat roof areas. The current backlog for maintenance at the hospital is £3.3 million, £1.85 million of which is likely to be needed within the next five years. The Lawson site currently provides a range of inpatient, outpatient and rehabilitation services in two units.

The Lawson Community Group, which met for the first time on December 6, considered the results of the NHS Highland Property Condition Survey for the Lawson site and will be involved in the work on options to improve the condition and efficiency of the buildings.

Sutherland Locality General Manager, Georgia Haire, said: “The options identified so far include doing nothing, which is not something that can be sustained in the longer term, upgrading the Lawson and moving outpatient services to the Cambusavie Unit or putting the inpatient units together and redesigning the Lawson ward as an outpatient facility, including physiotherapy.”

Open event to explain proposals for emergency cover in West Ardnamurchan

NHS Highland and the Scottish Ambulance Service (SAS) held an open event in West Ardnamurchan this month to explain proposals for new arrangements for emergency cover for the area.

The aim of these new arrangements is to ensure that safe and timely emergency and urgent cover can be provided across the West Ardnamurchan peninsula during the out of hours period.

The proposed changes relate specifically to unscheduled urgent and emergency care. Core community nursing services will continue to be provided, including out of hours end of life care, and General Practice services in hours are unchanged.

The SAS delivered a leaflet about the proposals and a letter inviting everyone to attend the open event to every household on the peninsula.

After the event, Gill McVicar, who is NHS Highland’s Mid Highland Community Health Partnership General Manager, and Milne Weir, who is General Manager for the North Division of SAS, issued the following joint statement:-

“The SAS and NHS Highland hosted a public engagement event in the community centre at Kilchoan on December 6 to allow people to talk to paramedics, nurses and managers about the future provision of services to the area.

“There was an opportunity to hear from practitioners about their work, both planned and unscheduled, and to see demonstrations, including a fully equipped ambulance with modern technology.

“A small number of people attended and were interested to hear about the possibilities for the future. Some also took the opportunity to have their anxieties and concerns listened to.

“The next step will be to gauge any interest from healthcare professionals living in the area in participating in an emergency responder model.”

The current arrangement is strongly reliant on an immediate response provided by two community nurses providing a 24/7 service 365 days a year. This is above and beyond the call of duty and cannot continue in the future. It is therefore essential that NHS Highland and the SAS work with the local community to put in place an alternative safe and sustainable solution.

The emergency responder model that is proposed will build on the skills of existing healthcare professionals who live in the area. They will receive additional training, equipment and access to a vehicle. Road and air ambulance back-up will be immediately dispatched. They will have contact through airwave radio to paramedic advisors, GPs and, where necessary, accident and emergency support. Modern technology will also be introduced to support all of this.

Working Group set up to examine and develop options for sustainable out of hours GP services in Cowal

As part of the NHS Highland Better Health, Better Care, Better Value process a working group 'Cowal 24/7' has been convened to examine and develop potential options for the sustainable provision of GP out of hours services for the Cowal peninsula and medical cover within Cowal Community Hospital.

The Group, which is co-chaired by Heather Grier (a member of the public) and Dr Brian McLachlan (Clinical Lead for Helensburgh & Lomond) held its third meeting in November. Membership also includes GPs, councillors, public and Community Council representatives, Scottish Ambulance Service, NHS 24, nursing staff and other health professionals.

Heather Grier said: "The Cowal 24/7 Working Group has made some considerable progress in the project. Our Communications and Engagement sub-group has put forward a proposal for wider community representation on the main Working Group which would then feed through to the various sub-groups. It is anticipated that community representation will be sought from North to South and East to West of the peninsula so that all our communities will have a voice through which we can have a two way communications process with the public.

"There has also been a considerable amount of discussion in relation to the community in Lochgoilhead. They currently receive out of hours provision from NHS Greater Glasgow and Clyde through the Vale of Leven Hospital, although other services are provided by NHS Highland. Members of the Cowal 24/7 Working Group attended a community meeting in November to find out what local residents felt about the current service and their thoughts on joining with the rest of Cowal in the review.

"Following the Working Group meeting in November and feedback to the Argyll & Bute Community Health Partnership (CHP) Management Team it was decided that the Lochgoilhead community will be included in the overall review and when we are at the stage of formulating options to appraise we will have an option to include and another to exclude this community so that we have a balanced and transparent process."

Low risk inductions to restart at Caithness General in the new year

Some Caithness mums will be able to have labour induced at the maternity unit at Caithness General Hospital (CGH) in Wick in the New Year.

Low risk inductions for women giving birth to second or subsequent babies are to restart at the hospital from January 9. First time mums requiring a low risk induction will still go to Raigmore Hospital in Inverness to have their babies.

The service at the Caithness maternity unit was temporarily changed in April 2009 due to staff shortages to ensure the safety of mothers and their babies. Since then, pregnant women requiring low risk inductions have been transferred to Raigmore Hospital. This has only affected a small number of the mothers who would otherwise have given birth in Caithness during this period. Mothers requiring high risk inductions were already transferred to the Inverness hospital and this has continued.

However, the staffing situation at the Caithness maternity unit has now improved. In October, the Caithness Maternity Services Group agreed to restart low risk inductions for women giving birth to second or subsequent babies and this decision has now been ratified by the NHS Highland Maternity Services Strategy and Coordination Group. The decision to restart inductions at the Caithness unit was also based on a review of the outcomes for mothers having low risk inductions at both Raigmore and CGH, which showed that the outcomes were similar in both hospitals.

General Manager for North Highland Community Health Partnership, Sheena Macleod, said: "We are very pleased that we were able to fill the vacant midwifery posts and that we are going to be able to restart this service for some mothers in Caithness in the New Year."

New service for patients with chest pain at Caithness General Hospital

A new service for patients with chest pain which has speeded up access to treatment was introduced at Caithness General Hospital in Wick in November.

The Rapid Access Chest Pain Service provides a quick and early specialist assessment for patients with new onset of suspected angina, which is caused by the narrowing of one or more of the blood vessels in the heart.

It is led by Dr Nas Naqvi, who is Acting Consultant in Acute and General Medicine at Caithness General Hospital, and is the first service of its kind for the Caithness and Sutherland area. A similar nurse-led service, with support from consultant cardiologists, is offered at Raigmore Hospital in Inverness.

Dr Naqvi explained that patients are referred to the new service by their GP and stressed that it is only for patients who are in a stable condition. These patients will be seen within five working days of referral. Those requiring urgent assessment continue to be seen at the hospital's Accident and Emergency department.

Patients who have been referred to the service attend at Rosebank Ward in the morning. The relevant tests and assessments are carried out by the medical consultant and they are able to go home the same day.

Dr Naqvi said: "There has been a change in the guidelines for the management of angina, which have led to a shift away from treadmill testing to rule out angina and towards newer forms of diagnostic testing.

"Patients in Caithness and Sutherland will benefit from best practice, evidence-based medicine, including timely referral for diagnostic cardiac tests, such as heart scans and angiograms, as appropriate.

"This service enables earlier diagnosis of angina, which improves the chances of managing the condition more effectively. It will increase patient satisfaction, reduce waiting times and streamline the care they receive."

He added that he and other members of the team in Caithness are extremely grateful to their Cardiology and Radiology colleagues at Raigmore Hospital for their valuable input and support in helping to set up this service.

Get Connected Project

Three years after it was originally launched the Get Connected Project has produced a Facebook 'like' page, which has links to useful information on a broad range of topics such as leaving home, benefits advice, mental health and wellbeing, stopping smoking and alcohol and drugs. There is valuable advice and contacts for local and national services and support.

Sam Campbell, Health Promotion Specialist from NHS Highland, said: "The launch at Helensburgh's Got Talent was great because there were lots of young people at the event and the Get Connected info is just what young people want to know about."

A group of young people from Route 81 youth project based at Centre 81 in Garelochhead have been heavily involved in designing the page and tailoring the content. Michelle MacDonald from Route 81 said: "The young people have been fab. They are so enthusiastic and are promoting the Get Connected page through their own networks. They all have a Get Connected wristband as well which are individually numbered so once a month a number will be drawn and the winner can collect a prize. The young people are taking ownership of the page designing it and linking into the useful information leaflets on the NHS Highland website."

The wristbands will be given out through Hermitage and Lomond High School to fourth, fifth and sixth year pupils over the next few weeks and will help to promote the Get Connected Facebook page. Michelle continued: "There will be regular updates and offers on the page so it's well worth checking out!"

Less is more – save our antibiotics!

Antibiotics are a precious resource that we risk losing within a generation if we do not safeguard their use.

This was the message issued by Black Isle GP Dr Gail Haddock (pictured) as part of European Antibiotic Awareness Day on Friday November 18.

Dr Haddock, who is a member of the Scottish Antimicrobial Prescribing Group and NHS Highland Antimicrobial Management Team, explained that, in many cases, antibiotics are prescribed when they will have absolutely no benefit and may cause harm to the patient.



She said: “Antibiotics are appropriate for specific conditions, such as urinary tract infections, skin infections and some fevers that are not caused by the flu. For serious infections, such as meningitis or pneumonia, antibiotics can be life saving. Most antibiotics are anti-bacterials, which are drugs that kill bacteria, but have no effect on viruses.

“Antibiotics will not help someone with the common cold, flu or most sore throats to recover more quickly. And, even when bacteria are involved, antibiotics only shorten the duration of symptoms of a sore throat by eight hours compared to taking simple painkillers.

“The more we prescribe antibiotics the more likely it is that resistance will develop. Whereas, the less we use them when they are not necessary, the more effective they will be when they do need to be prescribed.”

Dr Haddock added that some patients believe antibiotics are a cure for all ills and are quite insistent that they get a prescription when they should really be challenging their GPs and asking why they are being prescribed antibiotics.

If children have a rash, a sore or stiff neck, or are not drinking fluids or passing urine, then advice should be sought from their local GP practice or NHS 24. The doctor or nurse practitioner can then assess the need for treatment, which may or may not include an antibiotic.

Otherwise, anyone wanting to alleviate the symptoms of a common cold, flu or a sore throat should seek the advice of their local pharmacist.

What happened within NHHSH...

Within the organisation the NHS Highland Antimicrobial Management Team raised awareness of the need to use antibiotics to best effect recently.

They distributed information to clinical staff and community pharmacists throughout the organisation raising awareness of the day and why it was important.

Alison MacDonald, NHS Highland Antimicrobial Pharmacist said: “NHS Highland has one of the lowest rates of prescribing of antibiotics in primary care in Scotland. More than three quarters of antibiotics prescribed by GPs are associated with a low risk of infection with *Clostridium difficile*.

“Ongoing audits of antibiotic prescribing in Raigmore Hospital’s admission wards show the antibiotic guidelines being consistently applied.

“Prescribers are to be commended for adopting and implementing the recommendations in The Highland Formulary.”

The Antimicrobial Management Team (AMT) is responsible for developing antibiotic prescribing guidelines and monitoring how they are used by prescribers. Antibiotic prescribing audits and reviews of prescribing information are used to identify areas where prescribing can be improved.

The AMT is a multidisciplinary committee with membership from all four CHPs, primary care, eight medical consultants, nursing and Pharmacy. For more information, see the AMT webpage on the intranet <http://intranet.nhsh.scot.nhs.uk/Org/CommNet/ADTC/AMT/Pages/Default.aspx>

Lung cancer patient urges others to get symptoms checked by their GP



A Highland man who has received treatment for lung cancer is urging other people to consult their GP if they have any of the symptoms of the condition.

David Atkinson (pictured), 57, of Inverness, is hoping his experience will encourage others to seek help at the earliest opportunity and help people to realise that a lung cancer diagnosis does not necessarily mean a dramatic change to their life.

Symptoms that need to be checked by a GP include coughing up blood, a cough that lasts for more than three weeks, worsening or change of a long-standing cough, persistent chest infections, hoarseness of voice, persistent chest pain and/or shoulder pain. Other symptoms which should be reported include unexplained persistent breathlessness, tiredness, lack of energy or weight loss.

There are many possible causes of these symptoms. However, they may mean something is wrong, so it is always worth seeking medical advice.

Mr Atkinson first consulted his GP about shortness of breath and a persistent cough in September 2010. He was diagnosed with lung cancer the same month, had one of his lungs removed in December, then underwent a course of chemotherapy.

He is now back at work full-time, goes to the gym regularly and recently completed a 28-mile walk that raised more than £2,000 for Maggie's Centre and a local church.

And he is keen to encourage anyone with any of the above symptoms to seek medical advice at the earliest opportunity.

Mr Atkinson said: "I'm worried that people with these symptoms may delay seeing their GP because many think that lung cancer diagnosis always leads to a bleak outcome. My marathon walk and return to full time employment are proof that this is not the case. The sooner people go to their GP, the better the outcome."

Lydia Morrison, Lung Cancer Clinical Nurse Specialist, explained that although lung cancer mainly affects people over 65, it can also affect younger people. She said: "About 90% of people with lung cancer are smokers or ex-smokers. However, about 10% have never smoked. As with most cancers, lung cancer can be cured if found before it has spread to other areas."

Mental Health Week

In October Mental Health staff from the Argyll and Bute Hospital in Lochgilphead put together a display for Mental Health week in the foyer of the Mid Argyll Hospital. The display contained information, posters and pens highlighting the issue of stigma and mental health.

One in four of us will experience mental ill health in any year and 58% of people with a mental health problem told the See Me campaign that they had experienced stigma or discrimination because of their illness. The campaign encourages that we see the person, not their mental illness.



Smoke-Free Home Challenge helped me quit

With more people making an attempt to stop smoking in recent years one Highland resident is urging those who want to stop to sign up to the 'Smoke-Free Home Challenge'.

Madison Addams (pictured), 47, from Alness, successfully stopped smoking in April this year and credits making his home smoke free as playing a big part in why he has managed to stay away from the cigarettes.



He said: "I have tried stopping before but I didn't stick at it. I wanted to stop, especially as my wife successfully quit the first time round, so I was determined to keep trying.

"My Smoking Cessation Advisor had explained the Smoke-Free Home Challenge to me and I was more than happy to give it a go.

"At the beginning of April this year I went back to using Champix and also signed up to the Smoke Free Homes and Cars Project. I have not had a cigarette since the 20th April."

The Smoke-Free Home Challenge involves smokers and non-smokers promising to make part or their entire home, and their car, smoke-free for themselves, their family and friends.

Mr Addams, who also cut out caffeine at the same time, explained that stopping smoking in the house before stopping completely has helped. He was a lot more positive about it and was actually looking forward to stopping smoking.

He said: "I'm really chuffed that I've done it and I don't have to feel jealous of my wife anymore! I have more money in my pocket, I taste my food better and I just feel better in myself as well.

"If I had one piece of advice for people trying to stop smoking I would say stop smoking in the home before you tried stopping altogether. I can't stress enough how much that helped me."

Anyone who'd like advice or a FREE Smoke-Free Homes pack to get them started can contact the Smoke-Free Homes line on: LO-CALL 0845 7573077 or speak to a health professional in their area. If you would like help or more information to give up smoking, you can contact the Highland Smoke-Free Service on Tel: 0800 84 84 84 or e-mail susanbirse@nhs.net.

Steroid clinic hits the gym

A one-off 'Well Man and Performance and Image Enhancing Drug (PIED – steroid) clinic' was held during November in a bid to raise awareness of the steroid clinic as well as giving them some general health advice.

Linda Macleod, Clinical Harm Reduction Nurse, and Health Improvement Nurse, Jean Macleod, attended The Forge Gym in Inverness for what was supposed to be a 2-hour awareness session, over three hours later gym members were still queuing for MOTs and advice.

Linda said: "We know that there are guys out there using steroids but not accessing our service. I thought by getting my face known, showing them that I wasn't scary or judgmental may lessen any embarrassment or fear they have about attending!

"We mainly focussed on the "well man" advice but a couple of clients did take PIED info leaflets and were asking advice. It was very successful and the feedback from the gym has been very positive."

Reasons to be *cheerful*

New community pharmacy for Wester Ross

NHS Highland has welcomed the opening of a new community pharmacy at Gairloch in Wester Ross on Monday November 21.

The application to open a new pharmacy was unanimously granted to Two Lochs Dispensing Limited by the Pharmacy Practices Committee on November 9, 2010.

NHS Highland Head of Community Pharmaceutical Services, Mary Morton, said: "Providing a community pharmacy will enable patients to access an increased range of healthcare services locally. The skills and experience of the pharmacist will complement the existing primary care team of healthcare professionals.

"Pharmacists have a key role in providing health education and promotion, supporting the population with self care and self management of long term conditions by using their expertise on the best use of medicines."



Above: (l-r) Alison MacRobbie, MacMillan Palliative/Community Care Pharmacist; Mary Morton, Head of Community Pharmaceutical Services; Helen MacDonald, Community Pharmacy Business Manager; Nigel Carling, Pharmacist - Gairloch Pharmacy; and Richard Greene the local Councillor.

Partnership working recognised

Partnership working in learning disability services was recognised at the annual Highland Council Quality Awards held in November.

The Sense Reprovisioning Project led by Highland Council Social Work won the award in the Partnership Working and Joint Service Delivery Category.

The project oversaw the withdrawal of a service provider for 43 people with learning disabilities and the introduction of new providers to ensure that people continued to receive the support required to live in their own homes.

In August 2010 Sense Scotland gave The Highland Council six months notice on all its contracts in Highland. This affected 43 people with a learning disability living in 17 separate care arrangements across Highland. From the beginning the project was delivered in close partnership by a Project Team led by the Social Work Head of Community Care.

Operational staff from the Highland Council and NHS Highland Learning Disability Services worked jointly to ensure that information around the support and health needs of the people affected were up to date to ensure that new providers could tailor their tenders appropriately.

Communication was important throughout the life of the project, with service users, their families, staff, providers, professional staff, managers and Members. Council and NHS staff and managers also met with service users and carers/family members on a regular basis to ensure that quality of care was maintained throughout the transition of provider. Several months down the line the success of the project is evident with clear indications of improving outcomes for all of the people being supported, as well savings in the costs of the support packages.

Jonathan Gray, Consultant Nurse Learning Disability, said: "The award provides recognition for all the hard work that staff from NHS Highland, The Highland Council and the independent providers put in to ensure that care for the people affected was not comprised during this challenging time. It's an excellent example of what we can accomplish when we work together to achieve common goals."



Above: (l-r) Muhunda Satchithananda, Fujitsu (presented the award), Jan Baird (Transitions Director), Nicky Marr (host for the awards), Brian Robertson (Head of Community Care, Highland Council Social Work), Elaine Barrie (Personnel Manager, Highland Council), Matt Smith (Senior Contracts Officer, Highland Council Social Work)

Photo taken by Ewen Weatherspoon

NHS Highland congratulates local doctors honoured in national awards

NHS Highland was delighted with the achievements of Highland GPs at the Royal College of General Practitioner (RCGP) Gala Evening held in Edinburgh last month.

The patient-nominated award for GP of the Year was won by Dr Joe Tangney (pictured), of Glen Mor Practice in Fort William. Dr Paul Coulter, of Lodgehill Clinic, Nairn, was a runner up for the GP of the Year award and Dr James Douglas, of Tweeddale Medical Practice, Fort William, was joint winner of the Alastair Donald Award.

The GP of the Year award allows patients to give their own account of care they have received which they consider to have been of an outstanding quality.

And the aim of the Alastair Donald Award is to recognise outstanding achievement in the areas of service delivery, education, research and wider contribution to society.

NHS Highland's Associate Medical Director, Dr Ken Proctor, said: "GPs do not actively seek out praise or thanks. So, when it is spontaneously offered in this way, it helps boost morale, not just of the individual nominees, but of their practice colleagues and extended teams.

"There are an increasing number of contractual measurements nowadays against which GP practice teams are judged, but none measure the individual practitioners' personal qualities. The RCGP Awards do just that and it is reassuring to see a number of nominations highlighting some of our local GPs.

"As the NHS constantly strives to modernise and improve in tight fiscal times, it is heartening to see the personal touch of GP colleagues acknowledged and celebrated."



Two more national awards for new health awareness leaflet



A North Highland physiotherapist has received two further awards for her work on creating a leaflet on pelvic floor health awareness for teenagers and young people.

Sylvia Craine (pictured), who is Clinical Specialist Physiotherapist for Continence based at Caithness General Hospital in Wick, worked on the leaflet with healthcare staff from other Health Boards. They also worked with high school students to ensure it meets the needs of teenagers.

Earlier this year, the leaflet was awarded the Association for Continence Advice "Pelvic Floor Special Interest" award and the team that created it has now won two accolades in the 2011 Nursing Times Awards.

Their entry - entitled "By Teenagers for Teenagers: engaging teenage girls in an innovative approach to pelvic floor health promotion" - was announced as the winner in the Continence Promotion and Care and the Child, Adolescent, Maternity and Neonatal Services categories at a special awards ceremony in London in November.

Sylvia said: "The leaflet is unique in that its design and format has been developed by teenagers for teenagers. It provides them with simple advice and exercises to strengthen and promote the health of the pelvic floor for young women.

"One in four adult women suffers with bladder weakness and leakage at some point in their lives, so we felt that by targeting girls at a younger age we could equip them with the skills to keep their pelvic floors strong for the future."

She added that everyone involved in the leaflet was delighted with the awards it has attracted.

Design of North hospital gains national recognition

The new Migdale Hospital at Bonar Bridge in Sutherland was highly commended in the annual NHSScotland Environment, Estates and Facilities Awards.

It was entered in the Design Award category and the commendation was announced at the Scottish Healthcare Conference held in Crieff in November.



The new facility, which opened at the end of June this year, offers patients spectacular views over the Kyle of Sutherland to the hills beyond. There are 10 inpatient beds for GP patients and 10 for older adult psychiatry patients, plus two beds which can be used flexibly between the two units. The accommodation is all in single en-suite bedrooms. There are also facilities for outpatients, particularly physiotherapy.

Locality General Manager, Georgia Haire, said: “We are delighted with the new building, which is enabling us to provide our patients with the best possible environment in which to receive the care and treatment they need.

“And we are very pleased that its design has been recognised in this way. It is a real boost for everyone who has been involved in this project.”

Project Manager, John Bogle, explained that the hospital was built to be very energy efficient and has an Energy Performance Certificate rating of B+. The building is very well insulated and as airtight as possible, and its thermal performance exceeds the requirements of the building regulations.

Mr Bogle said: “The wall insulation used was formed from recycled newspaper. The windows are triple glazed in inpatient areas and the primary heat source is a biomass boiler using locally sourced woodchip.

“The energy strategy was chosen after comparing the total cost of the various options over the life of the heating system and initial results show that the building is delivering the designed energy performance, as well as healthcare benefits for patients.”

European inspiration for Highland parenting services

NHS Highland’s health development officer, Julia Nelson (pictured) from Invergordon, has just completed a Winston Churchill Travelling Fellowship (www.wcmt.org.uk) to Europe to research how Dutch and Italian families are helped bringing up their children.



It’s probably the most important job in the world and one for which there is no training! Raising children can be rewarding and challenging and now insights from Italy and the Netherlands are helping to shape the type of support that Highland parents might expect in future.

“A parenting support framework is being developed in the Highlands so I wanted to look at how community settings can be used to strengthen parents’ confidence”, said Julia. “While formal ‘programmes’ might be suitable for some situations, we also need to find ways that families can help each other.”

Julia’s travels in northern Italy and around the Netherlands included meeting staff in schools, early years groups and family centres. “Sometimes the methods used were similar to what we already have in Highland, but taken a bit further. For example, practical workshops that were fun and informative, ‘time-banks’ which made the most of local skills and talents, and different approaches to connecting with parents via schools.”

“It was great to have this opportunity to get inspiration and fresh ideas. I strongly recommend others to apply for a Travelling Fellowship – it’s a straightforward process and the Trust provides excellent support.”

NHS Highland poster achieves national recognition

Congratulations to Caron Cruickshank, John MacKintosh and Helen Bryers who have had their poster, which was designed for the maternity dashboard, recognised at a national forum.

The poster (pictured) won an award in the abstract poster competition which was held at the Annual Reproductive Health Forum, held every year at the Royal College of Physicians in Edinburgh.



NHS Highland in the pink!

Staff across NHS Highland took part in October's Wear it Pink day raising money for Breast Cancer Research, below are just some of the images taken across the organisation.



Medical Staffing and Employment Services staff at Raigmore Hospital raised £546 this year for Breast Cancer Campaign by holding a raffle, tombola and baking stall. Many thanks to those who contributed and supported the stalls!



Staff at the Belford Hospital held a pink baking stall & bottle stall/tombola for Wear It Pink day on 28th October. There was also a beautiful Pink Ribbon cake (made by Janet Shepherd, post graduate secretary) to guess the weight of. Staff, patients and visitors were very generous and we raised the fantastic sum of £450.65.



NHS Highland congratulates Dental Practice on winning national award

NHS Highland has congratulated a Fort William dental practice on winning the best NHS practice category in the Dentistry Scotland Awards.

The NHS committed dental practice M&S Dental Care, of Glen Nevis Place, was presented with the award at a special event at Gleneagles Hotel in November. The practice also won the best practice award for North Region.

NHS Highland Dental Service Development Manager, Alex Fraser, said: "We were very pleased to hear of their success and wish to congratulate them on winning this prestigious award.

"The M&S team has been key in improving access to NHS dental services in Lochaber, where there are now no waiting lists of patients seeking NHS registration."

Director of M&S Dental Care, Gregor Muir, said: "It's nice to be recognised in this way, particularly as the practices entered for these awards were of a very high calibre.

"The team quietly gets on with their work and provides high quality dentistry to everyone that wants it. The whole working environment is great. We've got an enthusiastic team and the facilities are excellent."

NHS Highland SVQ Presentation 2011

On Thursday 1st December 2011, NHS Highland held its 11th annual Scottish Vocational Qualification (SVQ) Presentation in the Lecture Theatre at the Centre for Health Sciences, Raigmore Hospital.

This year 66 candidates from all areas of NHS Highland achieved 68 awards in qualifications which included Business & Administration, Management, Security Services, Professional Cookery and Health & Social Care.

The Awards were presented by Judith McKelvie, Head of Learning & Development, NHS Highland and Philip Walker, Head of Personnel, NHS Highland, who said 'It was wonderful to see SVQ awards being presented over such a wide range of topics, demonstrating a commitment from all services to providing quality patient care'

Notable "firsts" this year included Thomas McFadyen, a Security Officer at Raigmore Hospital, who became the first member of staff in NHS Highland to achieve the L&D9D1 Award – the new Workplace Assessor Qualification - and our first "home grown" Security Services candidates.

Following the presentation of commemorative certificates, Graham Campbell, SQA's Business Development Manager for the Highlands and Islands spoke, congratulating staff members on their achievements and encouraging staff to access further qualifications.

For further information on SVQ qualifications in NHS Highland, please contact;

John Evans, SVQ Training Centre Co-ordinator on 01463 704615 john.evans3@nhs.net or visit our Intranet Site at <http://intranet.nhsh.scot.nhs.uk/Training/LearningAndDevelopment/SVQ/Pages/Default.aspx>



Above: (l-r) Helen MacDonald, Mary Morton, Ian Rudd, Deborah Rollo, Liz Aitchison, Dace Lazdina, Audrey Campbell, Fiona Boussaikouk, John Cromarty & Mary Panton



Above: (l-r) Philip Walker, Head of Personnel, Judith McKelvie, Head of Learning & Development & Graham Campbell, Business Development Manager, SQA, Highlands & Islands



Above: (l-r) Catering Department Staff William MacKenzie, Joy MacLean, Anna Frankowska & Colin Lewis

SVQ Roll of Honour, 2011

Providing Security Services (Static & Patrol Guarding) Level 2 - Michael Walker, Peter Boyle, Both Inverness; Laundry Operations, Level 2 - Yvonne MacLean, Margaret Gauld, Lyudmyla Adamiec, All Inverness; Food Processing and Cooking, Level 2 - Roseina Stewart, Dingwall; Professional Cookery, Level 2 - Colin Lewis, Joy MacLean, Marilyn MacDonald, All Inverness; Housekeeping, Level 2 - Jacqueline Kennedy, Yvonne Clarke, Both Inverness; Pharmacy Services, Level 2 - Dace Lazdina, Isabel MacDonald, Deborah Rollo, All Inverness; Pharmacy Services, Level 3 - Mary Panton, Inverness; Clinical Laboratory Support, Level 2 - Claire Cameron – Raigmore Hospital, Elizabeth MacLeod – Raigmore Hospital, Lindsay MacLeod – Raigmore Hospital, Graeme White – Raigmore Hospital; Health & Social Care, Level 3 - Melanie Mitchell, Inverness, Sharon Jack, Inverness, Ausrele Ripley, Bonar Bridge, Donna Moore, Inverness, Teresa Tillman, Inverness, Deborah Mackay, Inverness, Dorothy Boyd, Fort William, Mary M Nicolson, Inverness, Maryellen Campbell, Fort William, Fiona Josey, Invergordon, Janet Banks, Wick; Business and Administration, Level 2 - Shona Beattie, Wick, Dianne Thomson, Inverness, Ann Georgeson, Wick, Carolina Cunningham, Inverness, Geraldine MacDonald, Aviemore, Margaret Young, Wick, Lesley Small, Inverness, Anna Frankowska, Inverness; Business and Administration, Level 3 - Stephanie Rodgeron, Isle of Skye, Katy Ramsay, Inverness, Ross Balfour, Invergordon, Catherine Laidlaw, Inverness, Laura Coutts, Inverness, Nicola Patullo, Inverness, Tracey Ross, Inverness, Heather MacDonald, Inverness, Ruth K Currie, Inverness; Team Leading, Level 2 - Margaret Wilson, Inverness; Management, Level 3 - Hamish Wyllie, Inverness, Kerry Smith, Wick, Juliann Mackay, Inverness, Lisa Murphy, Invergordon, Dolores Allan, Fort William, Laura Calder, Dingwall; Management, Level 4 - Nicola Anderson, Inverness, Susan Glass, Inverness, Dianne Fryer, Inverness, Kerry Smith, Wick, Helen MacDonald, Inverness; Learning & Development, Level 4 - Liz Aitchison, Inverness; A1 Work Base Assessor Award - Fiona Boussaikouk, Pamela Burrows, Sheila Archibald, Margaret Anne Martin, Andrew Wilson, Lorraine Wilson, Cynthia MacDonald, All Inverness; V1 Internal Verifier Award - Audrey Campbell, Jacqueline McCairn, Julie English, All Inverness; Professional Development award (PDA) Planning & Implementing Change - Dianne Fryer, Inverness; Professional Development award (PDA) Workplace Assessment Using Direct & Indirect Methods - Thomas McFadyen, Inverness

Letters to NHS Highland...



"I wish to express my sincere gratitude for the service and kind attention received from the NHS at Raigmore Hospital, the 999 staff, Ambulance Medics and Dr Neil Anderson from Evanton after my wife was taken unwell.

My call to the 999 service was received totally professionally and within 15mins an ambulance had arrived, followed by Dr Anderson, who happened to be on his way home. He offered his service to the medics, which they readily accepted. All three worked together as a team and it was soon arranged for my wife to be admitted to Raigmore, Ward 4C. Dr Anderson, outside the call of duty, also visited the ward the following day.

Despite our arriving at the change over of shift, arrangements were made for her prompt admission in a most commendable way. Here again, the cleanliness of the hospital and ward in particular, plus good food, was most appreciated. This is not the first time we have needed to seek help from Raigmore, but it reflects the kindness and attention we have both received from time to time.

I wanted to bring this excellent service to your attention and ask you to pass on our thanks to all parties involved."

Patients relative from Ross-shire

"I am writing to thank you and the Scottish Government for maintaining the highest standards of medical care within the NHS in Scotland, and particularly the Highlands.

I realise that the NHS is under almost daily attack for alleged errors, incompetence and poor practice, but, having just experienced the full efficacy of NHS Scotland and have found its quality of service to be incredible, I feel I ought at least try and redress the balance a little.

I live on the Isle of Skye and shortly after my 65th birthday I received in the post details of the bowel cancer screening programme being run by the NHS in Scotland. Although fit, healthy and without any symptoms whatsoever, I still submitted to the screening programme. To my horror the tests registered as positive. Within days I had been contacted by support nursing staff, had been given assurances and a date to attend the hospital at Broadford for a colonoscopy by Mr O'Callaghan. He told me he had found a tumour which required surgery. Two days later I attended the Belford for a scan and shortly after this my GP at Dunvegan, Dr Moran, explained the scan results and operative procedure. Within 21 days I was undergoing major surgery at the Belford.

There I received the most outstanding care from all the staff. From theatre assistants to the Consultants, all were friendly, open and incredibly caring. No request was too trivial., no task too awkward. Absolutely every member of staff, even the cleaners who worked tirelessly and the catering staff were outstanding. The biopsy report was explained to me after I returned home and all had gone well and the cancer fully removed with no residual effects at all.

Had I not had this screening - and without symptoms - I would have likely gone on for several more years, totally unaware of the danger. The result would have probably been terminal.

The follow up support has been excellent from the Consultant, the Stoma Nursing staff and my GP.

In these difficult times I feel that the success of the NHS and your Governments determination to support it in the Highlands especially, deserves far more and full credit.

As far as my family and I are concerned, my life has been spared by a highly professional screening programme, by caring, sympathetic and understanding staff, in a superbly organised service.

I would be grateful if you would pass on my thanks to all the staff at the Belford and my own surgery at Dunvegan."

A patient from Skye

"My husband was recently admitted to Caithness General for major surgery and the service and care he received from the doctors and nurses was second to none. You couldn't have met a more attentive and professional group of people. We were kept informed of every detail of his operation before, during and after, no matter how small, and the staff made sure we understood all aspects of his treatment.

The level of aftercare was also exceptional. We are fortunate here in Caithness to have such a high standard of medical care. It's something that should never be taken for granted."

Patients relative from Wick

"Yesterday I was admitted to Ward 3C for orthopaedic surgery. The procedure and my care was exceptional.

It was pleasing to note in these days of much criticism being directed towards hospital cleanliness in general, that a constant effort was made by your staff towards ward hygiene.

Please pass on my thanks to Mr Michels, his surgical team and ward staff for the care and consideration extended towards me."

A Patient from Sutherland

The Archie Foundation - News

Thank you to everyone who voted for the Archie Foundation in RBS Community Force, we secured enough votes to win £6000 towards our appeal.

A total of £106 was raised at the recent Archie / Raigmore raffle which is a fantastic amount of money, we did try and get round as many areas of the hospital as possible but a lot of people were extremely busy and our time was limited.

We are delighted to announce the winner was drawn by Angie in the Children's Ward and the winning ticket was orange 399 who was Maureen from the WRVS shop. Congratulations to Maureen who won the cupcake. Thank you to everyone who purchased a ticket and helped us raise a fantastic amount of money.

Interested in saving some pennies? The City Saver Book has a number of fantastic offers on food, health and beauty and fitness deals to name just a few. For every book sold £5 goes to the Archie Foundation.

We wish you a very Merry Christmas from the Archie Team based here at Raigmore.
Allana, Catherine and Katy



Need to know...

Pharmaceutical Care Services Plan Consultation

The Pharmaceutical Care Services Plan is currently out for consultation and we would welcome your views on this draft paper. In particular we would welcome your comments on whether you feel the plan meets your requirements for pharmaceutical services.

The Plan can be found on the NHS Highland website at the following link: <http://www.nhshighland.scot.nhs.uk/Meetings/PharmacyPracticesCommittee/Pages/welcome.aspx>

Responses are sought by the end of February 2012 at the latest to be returned to: High-UHB.PCSPlan@nhs.net

Find out more about the Highland Health Sciences Library without leaving your desk

Every wondered what Ludwig Wittgenstein, Peter Reid frae Peterheid, an empty raincoat, and Tony Blair have in common? The answer is they have all been used to highlight resources available to NHS Highland staff via the Highland Health Sciences Library.

The tool used to publicise this material is the Library Blog. Unlike other blog sites this one is accessible from any NHS Highland PC. At the present time a different section of the Library is highlighted each week. Hopefully you will be amazed at the range of material the Library holds and will find something useful to help you in your work.

Remember also the Library is more than a book repository – it is a place to work and a font of all sorts of knowledge. Try us and see. To keep up to date with the Library and its resources point your browser to the Library Blog site at: <http://connect.stir.ac.uk/pg/blog/rp5?view=rss>

For more details come and visit us – we are located in the Centre for Health Science, telephone: 01463 255600 (ext 7600).

Need to know...

Do you give respect and get respect at work? 2

This is the second in the series about Dignity@Work. Every issue, we'll be giving you tips, stories or discussion points to make sure we all give respect and get respect in the workplace.

This month.... Listening

Being listened to helps us feel respected but it seems that listening is the one bit of communication we forget all about.

Questions to ask.....

Are you a good listener? How do you know?

How do you share information? Which ways work best? How do you know?

What happens when we don't agree? How do you make your viewpoint heard and how do you listen to others? Do you move forward positively?

Netiquette tip 2 -

Be clear and concise

Emails should be easy to understand, so avoid too much background information. If the message needs a lot of detail, perhaps email is not the best way to communicate it.

The Highland Compact - Improving Partnership Working

If you read the title of this article and thought "the Highland what?", then please read on, as you probably aren't alone and this article is particularly relevant to all colleagues who work with voluntary organisations.

The Compact is in fact a formal written agreement which defines and manages the relationships between the Third Sector (comprised of voluntary and community organisations, charities, social enterprises and mutuals) and public sector bodies. The organisations who currently subscribe to this agreement are the Highland Council, NHS Highland and Highlands and Islands Enterprise and there are in fact some 1,200 charitable organisations in Highland, with a significant number being supported by the public sector.

The Compact is, at a high level, a means of ensuring that each party can expect a shared commitment to build mutual trust and confidence and an appreciation of the roles and contributions of both the Public and Third Sector. In practice it means that partners should expect to see the consistent use of behavioural skills such as - **Respecting and valuing partner organisations; Communicating without the use of organisational jargon; Conducting business in an open and transparent manner; and Challenging in a constructive way.**

All of the above may seem common sense but how many of us actually achieve this consistently in our working lives? The Compact encompasses nearly 30 jointly agreed behavioural traits to facilitate partnership working and further information can be found by clicking on this link - <http://highlandlife.net/content/download/24700/99266/file/The%20Highland%20Compact.pdf>

This is more than just a static agreement and the Compact Partnership meet on a quarterly basis to both work on the Compact action plan and organise an annual event, which is an excellent forum for meeting Third Sector partners from all across Highland. The last Compact event was held in June 2011 and feedback from the NHS Highland attendees was very positive. It is intended to hold another such networking event in June 2012 and further details will be sent out in the early spring.

If you have any queries about the Highland Compact please contact David McRonald who is NHS Highland's representative (david.mcronald@nhs.net)