

Team Update



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Better Health, Better Care, Better Value NHS Highland Staff Awards 2009 – the results!

Nominations are in, judges have deliberated and we can now reveal the winners of the 2009 NHS Highland Staff Awards.

NHS Highland's Staff Awards are in their fourth year and were set up to recognise and celebrate the work of staff and volunteers who go the extra mile to improve health and patient care.

Ray Stewart, Employee Director for NHS Highland, chaired the judging panel. He said: "The recurring theme of this year's awards, and indeed previous years, has been the dedication and commitment of our staff. We cannot underestimate the impact on patients and carers that our staff have whether it be through innovation, creative problem solving or working above and beyond the call of duty."

"The judging panel found it difficult to decide on this year's finalists and my congratulations to all of them, but we must not forget that all of our staff deserve our thanks and recognition."

This year there are five award categories in total covering NHS Highland's three key aims of Better Health, Better Care and Better Value, which we have to meet for our patients and local communities, as well as categories on Changing for the Better and Volunteering. There are two winners in each category with nominations coming in from patients, the public and members of staff.

The **Better Health Award** was looking for an individual or teams who target inequalities, support people in the early years, promote health in older people or support carers.

Julia Nelson is an Early Years Development Officer, nominated for putting into practice the ethos and principles of 'Getting it Right for Every Child' and Better Health Better Care.

Julia's post is jointly funded by NHS Highland and the



Above: Julia Nelson with NHS Highland Chair Garry Coultts

Highland Council and she has made the most of these cross agency opportunities in improving the health of young infants and their carers, especially those who are most vulnerable.

Julia has impressed with the guidance she has produced and support she provides to those in early years education and is particularly aware of ensuring that her work tackles inequalities consulting with those who are often not represented, e.g. young mums, gypsy travellers.

Virginia (Ginny) Murchison is a Dual Diagnosis Nurse based at New Craigs Hospital. She was nominated for her tact and diplomacy in negotiating with individual clients and different staff groups how best to ensure that the needs of individuals with severe mental illness who are misusing substances can be improved.

Her focus on reducing barriers to care for this client group has improved clinical outcomes for individuals, their carers and communities. She also works with colleagues to improve knowledge, skills and confidence in substance misuse issues and has systems in place to identify individual clients early.

The **Better Care Award** was looking at innovation in practice, team work, patient safety and raising the standard.

Up first are the night sister team of Linda Wares, Donna Sinclair and Allison Stewart, based at Caithness General Hospital. The team were nominated for going that extra mile and holding the team together through thick and thin.

In an organisation which is continually changing – including



Above: Ginny Murchison, her nominator Jim Neville and NHS Highland Chair Garry Coultts

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hospital at night practitioners coming on board and the Scottish Patient Safety Programme – they are always willing and able to input as required.

Also winning in this category is Donna Macrae a district nurse at Riverside Practice in Inverness.



Above: Donna Macrae (Left) with her nominator Olive Thomson

Donna was nominated for going above and beyond the call of duty when it comes to her patients. As the relative of one patient points out Donna 'became one of the family. If we needed anything she would arrange for us to get it or bring it the next day. She offered to food shop and helped me to get a special mattress cover during her lunch break. She organised prescriptions which were delivered and if a GP was needed she would contact the surgery immediately.'

The **Better Value Award** is all about shifting resources into patient care, reducing waste and inefficiency, and redesigning working systems.

Health improvement is key to "better value" and Jane Groves', Public Health Network Coordinator based at Assynt House in Inverness, contribution to the health improvement agenda in changing the way people work should be recognised. She established the public health network and designs and delivers innovative and effective training. Her work with the NHS and partner agencies inspires staff and gives them confidence, skills and knowledge to make health improvement a fundamental part of their roles.



Above: (l-r) NHS Highland non exec Anne Clark with Sutherland Locality Manager Georgia Haire and Night Sister Alison Stewart

Her training is effective, delivered locally and makes a real contribution; it improves day to day practice in supporting patients in making sustainable changes to lifestyle behaviours.

Also a finalist in this section is the Malignant Spinal Cord Compression Multi-Disciplinary Team. Superintendent Radiographer Vicky Doughty and senior Physiotherapist Susan Nuttall are project managers on this new streamlined patient pathway that has been implemented within NHS Highland and the Western Isles where patients who are suffering from the serious condition Malignant Spinal Cord Compression (MSCC – which can cause paralysis) now have a better chance of being kept mobile, giving them a better quality of life.

Patients who are at risk from this can come into contact with members of staff across a wide range of different disciplines and although the service for patients with MSCC has always been there, it has been streamlined so that patients affected by MSCC are dealt with in a structured, efficient and coherent pathway thereby reducing the distress to patients and their families, staff stress and costs.

Vicky and Susan have championed with vigour and enthusiasm the introduction of this new service and along with the dedicated multi disciplinary team patient survival and quality of life will be greatly improved.

Next up are our finalists in the **Changing for the Better Award**. In this category the judges were looking for nominees who took leadership of change and improvement, were shifting the balance of care and involved patients and carers in change.



Above: The MSCC Team with Garry Coutts

From the editor ...

Welcome to the September issue of Team Update, NHS Highland's staff newsletter.

Remember this is your newsletter so please share your news with us so we can let the rest of NHS Highland know. Your views and opinions are also welcomed.

To submit an article, information or photos for future issues of the Team Update, please email

the Communications Team via the email address on the NHS Highland Website: nhs.highland@nhs.net or contact Christina.macdonald1@nhs.net

Deadline for copy: 15th October

**The Editor, Communications
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Raigmore Hospital's Coronary Care Unit's (CCU) thrombolysis nurses and the paramedics of the Highland Scottish Ambulance Service were



Above: Anne Clark with some staff members from CCU

nominated for their work involving the thrombolysis service which has saved lives and brought care closer to the patient.

The administration of thrombolytic or 'clot buster' drugs to patients with heart

attack is a crucial intervention, particularly in remote and rural areas. Every one minute delay in administering these drugs reduces a patient's life expectancy by 11 days i.e. a delay of 30 minutes reduces life expectancy by one year.

A team of 10 CCU nurses at Raigmore undertook a nine month in-house training programme to take on the role of thrombolysis support nurse. A Lifenet telemetric receiving station was installed in the CCU that enabled GPs and paramedics to transmit ECG's from a victim's home directly to this nurse in CCU. The thrombolysis nurse would interpret the ECG and immediately call the pre hospital team to confirm the diagnosis and facilitate the delivery of pre hospital thrombolysis.

This system has been operational for six months and has emerged as a real success story for CCU and the Ambulance Service in NHS Highland. The rate of pre hospital thrombolysis has more than doubled and almost all of the patients managed using this system have received pre hospital thrombolysis.

The second finalist for this award is the Unscheduled Care Practitioner Team based at Raigmore Hospital in Inverness.

Over the last 17 months, unscheduled care delivered by nursing staff at Raigmore has had a significant overhaul and due to the dedication, enthusiasm and tenacity of this team of senior staff nurses, a previously unfocussed and sporadic service has transformed into a cohesive, dynamic and clinically useful one.

These individuals have overcome colleagues being dubious of the service and have proved, beyond doubt, their worth and abilities as well as successfully completing degree-level qualifications along side working and family commitments and have patiently explained and educated colleagues, patients and carers as things have developed.

Summing up the nomination the locality now has a seven night a week unscheduled care practitioner to provide unscheduled nursing care to patients and to support the out of hours GP in their work. This has raised the quality of care offered by Raigmore in the out of hours period.

Finally we have the **Volunteer Award**, here the judges were looking for outstanding commitment and going the extra mile and from the number of nominations received there are a number out there who match that description.

The Friends of Raigmore are a small group of volunteers with the reason for their nomination being that their commitment is second to none as year after year they fundraise for items all for the benefit of patients and staff in the hospital.

The item in question is always something the hospital needs with the chair of the group, Christine Cameron, always making a point of asking the hospital what they need but can't, for one reason or another, buy themselves.

Whether it is furniture for a relatives room, a scope for ENT, or a bed for bariatric patients once they have a goal this small group launch themselves into a fundraising campaign that very few will not have heard about by the end.

Considering the small group of people involved the amount raised year on year is fantastic and very much appreciated by all members of staff very much appreciate what they do.

The Day Hospice in Oban team of volunteers also wins in this category. This group of around 20 people give up their time freely and provide the patients with a social interaction that staff may not have time for. They also support the staff with tasks such as tea making, flower arranging and the fresh fruit salad, which the hospice is famous for, is prepared by the volunteers.



Above: Oban Hospice volunteers with Garry Coutts

The volunteers attend courses such as hand hygiene and fire safety in their own time and always have a smile for the patients and an ear for listening. The day hospice relies heavily on the volunteers, without whom the staffs' jobs would be much harder.

Agenda for Change Update

Reviews

We are still on track to complete the reviews by the end of 2009. At the end of August we had review requests covering about 180 jobs still to consider, and this number is coming down month on month.

There is an inevitable delay between completing the reviews and advising staff of the outcomes, because the review has to be consistency checked before a letter is issued. So in practice it may be February before the last few staff hear about the outcome.

If a review request is successful, we have to contact your manager to ensure we have all the up to date data about the post; for example, someone may have retired and a new start may have replaced them. To ensure we reassimilate everyone correctly, we do need this information, but managers sometimes delay in responding to our requests.

If your review has been successful and you are still waiting to be reassimilated, it would be appreciated if you could first check with your manager that our spreadsheet has been completed and returned.

Significantly Changed Posts

We have been advised of almost 200 posts that have changed significantly since October 2004, and this number increases every week. It has been agreed in partnership that dealing with these is of course important but that completing the reviews is the top priority. We do understand the frustration for staff and managers who have had to wait a long time for the outcome of these significantly changed posts, and we are fitting in small numbers as time and resources permit. But realistically it will be well into 2010 before we are absolutely up to date with these significantly changed (JC4) posts.

Managers are asked to only submit JC4s when the change is genuinely significant; most managers will now be sufficiently familiar with the Agenda for Change job evaluation scheme to be able to assess this, and advice is available on individual jobs from Donald Shiach, Pay and Equality Manager (01463 706331 or donald.shiach@nhs.net). When submitting a JC4, it is enormously helpful if the revised job description is based on the previous version with the changes tracked or otherwise highlighted. Finally, managers are reminded that any additional costs associated with JC4s will need to be found from existing budgets.

Mainstreaming Agenda for Change

By early next year, only new jobs will require to be matched and consistency checked. The time is therefore right to issue fresh guidance on how to write a job description that captures the key aspects of a job and allows it to be robustly matched. This will also allow the format of job descriptions to be consistent across NHS Highland. Work is already underway on this and is expected to be complete by the end of 2009.

Knowledge and Skills Framework - Update

Background...

The NHS Knowledge and Skills Framework and Personal Development Review Process (KSF) is one of three key strands of Agenda for Change (AfC).

During 2008/2009 97% of eligible staff had a Personal Development Plan (PDP) in place; this was monitored using HEAT target E3.

The next HEAT target (E10) is over two years and requires 80% of all staff to have a KSF Personal Development Review and subsequent Personal Development Plan completed and recorded on e-KSF by March 2011. Unlike the previous target there are no exemptions, this means that Bank Staff, those on long term sick and maternity leave are now included.

If you have concerns about your IT skills you may wish to speak to your manager about supporting you to develop those skills as part of your current PDP, or in the interim, there are "work around solutions" that we can support managers with.

To access e-KSF an individual login and password is required details of which can be obtained from the e-KSF and Learning & Development Data Officer, Iain MacDiarmid, (01463 706721, email iain.macdiarmid@nhs.net).

Benefits...

The e-KSF is the online software developed to support the implementation and subsequent monitoring of KSF. The online tool makes KSF more accessible for staff and their managers and has been developed with the following features in mind:

- e-KSF is web-based, so it is accessible from anywhere with internet access
- It was built specifically for the KSF and supports all aspects of the process from partnership working, creating and saving KSF post outlines, to storing Personal Development Plans (PDPs) and recording the outcomes of learning
- It has a high level of security. The only people who can see an individual's PDP are the individual themselves and their manager/reviewer
- e-KSF includes references between the KSF and National Occupational Standards, so users can see which Standards are related to each KSF dimension, and use these in their development planning
- It supports legislative workforce monitoring
- It is free at the point of use for NHS organisations
- e-KSF is supported by help and guidance online, as well as an email support desk to answer questions.

Its use is mandatory in Scotland and has the potential to offer significant benefits for NHS Highland as it:

- Enables monitoring of departmental and organisational performance in applying the KSF
- Provides information for compulsory national reporting requirements in relation to the KSF
- Supports NHS Highland to take action to address any governance, safety or quality issues
- Increases clarity of staff progress and equality and diversity monitoring
- Minimises paperwork and administration management and increases confidentiality of staff records
- Ensures a fair and equitable KSF process (everyone has access to the same system)
- Identifies local and national competencies and gaps
- Supports knowledge and skills for succession planning
- Creates a structured method of capturing development needs
- Facilitates the targeted use of learning and development budgets
- Acts as a driver for IT skills and infrastructure development.

Focus on...Using e-KSF

Many staff and staff groups are finding e-KSF quite easy to use and have now made the transition away from a paper based annual personal development review to the new electronic version. One such person is Linda Burgin, Nutrition Champion,

'I am not a whiz on computers and the language of e-KSF was alien to me at first...but after the training I just logged into the system and went for it...I did need some assistance with some aspects of the system but this was mainly due to my lack of familiarity and me forgetting what to do...a couple of calls to the KSF Team soon kept me right and my confidence with the system is increasing all the time...I particularly like the way I can enter as much or as little text in the evidence box as I want and also that I can upload documents I have worked on or produced that are stored on my computer (as long as they do not infringe data protection or confidentiality).'

An example of using e-KSF en-masse has been set by members of the Occupational Therapy staff group, all staff have their KSF outline loaded onto e-KSF, their login details and passwords have been received and to date over 50% of them have logged in and used the system.

Gillian Macdonald, Specialist Occupational Therapist had this to say, *"I have been using e-KSF for over a year now and have therefore been 'reviewed' using this system twice (July 08 and August 09). I have also reviewed two junior staff members within this time.*

Overall, I find e-KSF relatively easy and effective to use, although it did take some time to get used to. It is good to be able to see at a glance when reviews are due and to look back and see what objectives still have to be met. Giving targets of when objectives should be completed (and this being highlighted if the deadline has passed) is also a good way of trying to keep on track. It's too easy to write things on the old paper copy file them and forget about them!

As we as a department are spread over the hospital at times and can be busy with clinical work, it

was good to be able to sit down at my own pace and fill in my own objectives and comments. I only really needed to sit down with my 'reviewer' to decide what had and had not been achieved. Previously, a KSF review often took a whole afternoon if not more (out of two people's time).

As a reviewer, it has been beneficial to be able to hand some of the responsibility onto the reviewee themselves and, with minimal guidance, the staff usually come well prepared for a review session.

Overall, e-KSF is something which we are gradually introducing to the whole department. Any new staff are registered for the training as soon as possible and we all have a set person who is responsible for our e-KSF review".

These are just a couple examples of good practice within NHS Highland, many other individuals and staff groups are using e-KSF, the key message here is that it is not as difficult as it seems and there are some real and often immediate benefits. Why not give it go for yourself!

Training

Many staff are successfully using e-KSF already, some are self taught and some have participated in the training that is available through eHealth, the training is not always necessary, if you are confident using a computer and have a login and password you can access your individual account and start using it; however, two courses are currently available;

K1001 for Reviewees (course length is 2.5 hours) and K1009 for Reviewers/Managers (course length is 2.5 hours for Reviewers and 3 hours for Managers).

For more information regarding these courses please contact eHealth on 01463 257500.

It is highly recommended that prior to attending one of these courses you attend a PDP&R awareness session (or have participated in a KSF review within the previous 12 months) delivered by the Learning and Development Team; these sessions are delivered independently from e-KSF courses so can be delivered to larger groups with more flexible access, or small groups in work places, sessions last approximately one hour.

If you would like more information please use the contacts below.

PDP&R /e-KSF (NHS Highland) Paul Simmons (Learning & Development Facilitator), telephone 01463 706885 or email paulsimmons@nhs.net

PDP&R/e-KSF (Argyll & Bute) Nick Putnam (Learning & Development Facilitator), telephone 01546 605636 or email nick.putnam@nhs.net

DATIXweb Incidents Implementation - Update

DATIXweb Incidents is an on-line reporting system which will eventually replace the IR1 / IR2 system. Instead staff will report an incident via an electronic DIF1 form (DATIX Incident Form 1) and managers will complete the grading and any investigation on a DIF2 form (DATIX Incident Form 2).

Training

Reporter Awareness Sessions - 45 mins

For anyone in NHS Highland to learn how to log an incident on a DIF1. Not all staff need to attend these sessions, it is recommended representatives from each area attend and then get involved in cascading that information to their colleagues. "**Show Me**" clips are now available on the DATIXweb Homepage accessible via the intranet, non clinical applications, DATIX. Watch these short clips to see how to log an incident on the DIF1, how to log a Disruptive, Violent and Aggressive incident and how to log a Medication error.

Reviewer Training Sessions - 1 hour 30 - 2 hours

Required for all managers identified as needing to approve / review / investigate incidents on the DIF2. Manager's identified will need to nominate 1 deputy to be trained to cover sickness / absence. Training will also be delivered to operational unit management teams. Staff attending Reviewer training do not need to attend the Reporter session as well – this is covered in the first part of the Reviewer training.

Update on Implementation

Following training in New Craigs Hospital, Belford Hospital and Caithness General all 3 sites are now

logging live incidents directly into the system via the DIF1 form and Reviewers are grading and approving these.

Training has now commenced in Raigmore Hospital, starting with the medical directorate, further dates have now been secured and are noted in the table below.

Hospital / Area	Training Date	Time and Type	Location
Raigmore Hospital Surgical & Anaesthetics	15th September	2-4 Reviewer Training	Coffee Lounge
	17th September	1-1.45 Reporter Awareness 2-4 Reviewer Training	4th floor teaching rooms
	22nd September	1-1.45 Reporter Awareness 2-4 Reviewer Training	
	24th September	2-2.45 Reporter Awareness 3-3.45 Reporter Awareness	Coffee Lounge
Raigmore Hospital Woman and Child	29th September	10-12 Reviewer Training	Parentcraft Room, near Ward 8
	30th September	10-10.45 Reporter Awareness 11-11.45 Reporter Awareness	
	7th October	10-10.45 Reporter Awareness 11-11.45 Reporter Awareness	
	8th October	10-10.45 Reporter Awareness 11-11.45 Reporter Awareness 2-4 Reviewer Training	
	9th October	10-12 Reviewer Training	
Raigmore Hospital Clinical Services	27th October	10-12 Reviewer Training	Coffee Lounge
	29th October	2-2.45 Reporter Awareness 3-4.30 Reviewer Training	
	4th November	2-2.45 Reporter Awareness 3-4.30 Reviewer Training	
	6th November	10-10.45 Reporter Awareness 11-11.45 Reporter Awareness	
	6th November	1.30 Reporter Awareness	Physiotherapy Gym (1/2 audit day)
Raigmore Hospital Cancer Services	10th November	10-12 Reviewer Training 2-2.45 Reporter Training 3-3.45 Reporter Training	Coffee Lounge
	11th November	10-12 Reviewer Training	
Raigmore Hospital Pharmacy	28th October	10-11.30 Reviewer Training 11.30-12.15 Reporter Awareness	Pharmacy - not a drop in session due to space
Extra sessions	17th November	10-12 Reviewer Training 2-2.45 Reporter Training 3-3.45 Reporter Training	Coffee Lounge
	19th November	10-12 Reviewer Training	

PLEASE NOTE: Places on training will be organised locally, Managers liaise with your local Management Team regarding places on the Reviewer Training. Each area should decide how many staff to send to the Reporter Awareness Sessions – please note they will need to be involved in helping to cascade the information to others.

Staff unable to attend their own directorate sessions can cascade into the next directorate's training. Extra sessions at the end of Raigmore's roll out have also been provided to capture any outstanding staff.

Raigmore Hotel Services, Hub Staff, Highland Sexual Health and Occupational Health have been provided with the above list of dates and can drop into any of the sessions. A meeting with Facilities to discuss implementation is being held at the end of September 2009, however facilities staff at Belford and Caithness were included in local training and it is anticipated that facilities staff at Raigmore will be able to drop into any of the above scheduled sessions. Corporate Services and the Management Teams are also yet to be contacted.

Training for the wider communities is yet to be organised.

Follow-Up Sessions

Follow up sessions for each of the sites will be provided, however dates for these have not been scheduled as it is important that these are provided when each area needs them. Please contact the Project Lead when you would like a follow up session in your area, this can also incorporate additional training if needed to capture staff who may have missed out earlier.

If you have any queries concerning the implementation, please contact Louise McInnes, Project Lead on 01463 706910 or louise.mcinnis@nhs.net

Zero Tolerance on Hand Hygiene - What does it mean?

Effective Hand Hygiene is recognised as the single most important intervention in the prevention and control of Health Care Associated Infections. Compliance by all staff is therefore paramount.

The Cabinet Secretary for Health and Wellbeing acknowledged this when she announced in January 2009 that a Zero Tolerance approach to non compliance was to be adopted across NHS Board areas.

The issue, therefore, is no longer whether Hand Hygiene is effective but how to produce sustained improvement and compliance with standards. This is a positive step to allow continuous improvement which within NHS Highland requires setting aims and specific improvement targets.

All staff are reminded about NHS Highland's Handy Hygiene Policy and that we must meet Hand Hygiene requirements. Zero Tolerance is a positive move to improve standards and conditions for patients and effective Hand Hygiene can significantly reduce disease transmission rates. While we want staff to achieve a 100% compliance with hand hygiene opportunity and technique you are reminded that anything less than 90% compliance does not meet the required standards.

Anyone seen not following hand hygiene practice can expect to be challenged. Staff are also reminded that they too must expect to be challenged if they are seen to be failing in following correct practice.

A number of supportive measures have been introduced to enable staff to achieve 100%. However, those who, despite support, fail to reach required standards will be managed as per NHS Highland conduct policies.

**Remember:
Infection control and hand hygiene is everyone's business.**

6 Steps of Hand Washing

Remove any hand and wrist jewellery



- 
 - Wet hands
 - Apply soap
 - Rub hands palm to palm
- 
 - Rub right palm over back of left hand
 - Rub left palm over back of right hand
- 
 - Rub hands palm to palm with fingers interlaced
- 
 - Backs of fingers to opposite palm with fingers locked
- 
 - Rotational rubbing of thumb clasped within palm
 - Repeat for other hand
- 
 - Group fingers together
 - Rub finger tips rotationally in palm of opposite hand
 - Repeat for other hand
 - Rinse hands

Remember

- Dry hands thoroughly with paper towels
- Use foot pedal operation of bin to dispose of used paper towels
- Always cover cuts on hands with a waterproof dressing
- The appropriate use of hand creams can help to prevent hands from becoming dry

Staff - please refer to NHS Highland Hand Hygiene Policy for more in-depth information on hand hygiene.

Work is good for your back

As part of the 2009 National Back Pain Awareness week, the Occupational Health Physio team are running a campaign about managing back pain at work. The campaign will run for a week from the 12th – 16th October, in the canteen at Raigmore and the team will be available daily, except Friday, from 12.30 – 1.30pm to answer any questions.

The main focus is to provide advice and information for staff on how to deal with back pain, “busting some of the common myths” and advising staff about the current evidence that surrounds back pain. Key messages about staying at work and why work is good for you will be highlighted, and also how staff and managers can work together to achieve this aim.

There will be booklets and leaflets to take away and the team hope that all staff will find the information helpful. They will also answer questions on the role Occupational health has in managing back pain, and what the current evidence based practice recommends.

Anyone requiring any further details can contact the Occupational Health service on ext 4499.

Raigmore Hospital Patients' Council 10th Anniversary

In the 10 years since Raigmore Patients' Council was formed, members have been involved in a variety of changes and developments including hospital food and patient nutrition, hospital cleanliness, ward visits and confronting communication barriers for patients.

Marjorie Sanderson from the Patients' Council explained: "We are a voluntary group who can act as a link between those who use the service and those who provide them.

"Over the years we have had input in a variety of ideas for improving patient care including hospital food, cleanliness, bereavement services and counselling, and waiting times to name but a few and we're very pleased we can say that after 10 years we are still listening, investigating, contributing and participating."

As part of their 10th anniversary celebrations an event was held in the city's (Inverness) Town House giving staff in NHS Highland the opportunity to show members of the council, both past and present, just how much their hard work over the past ten years has been appreciated.

One former member of staff made the trip up from Grampian to pay his own personal tribute to the Patients' Council.

Richard Carey, Chief Executive with NHS Grampian, was Chief Executive with the former Highland Acute Hospitals NHS Trust when the council was formed. He said: "I thoroughly enjoyed working with the Patients' Council during my time at Raigmore and found the feedback from council members really helpful in our efforts to improve services to patients and enhance the patient experience.

"I have used this anniversary celebration as an opportunity to say thank you again to council members past and present who have made such an important contribution to improving care over the past ten years."

Una Lyon, Lead Nurse for Raigmore Hospital is Chair of the Patients' Council. She added: "It's only right that we pay tribute to the volunteers in this way for all the work they have put in over the years. They deserve the recognition for what they have achieved and I look forward to continue working with them."

Fergus Ewing, MSP for Inverness East, Nairn and Lochaber was also at the event. He said: "I am delighted to attend today the tenth anniversary of the Raigmore Patients' Council. Patients in the Highlands face particular difficulties in often being far from home and their families. Their loved ones often face equal



difficulties in travelling to and from and communicating with the hospital.

"The Patients' Council does a great job in

easing these difficulties and communicating better to the hospital the needs of patients and families, needs that are often greater than those faced by hospital in urban areas. I congratulate all the volunteers and staff involved for the commitment they show for the work that they do."

The Patients Council is always looking for more members, if you are interested please contact Una Lyon, Chair of Raigmore Patients' Council. Una is based at Raigmore Hospital.

NHS Highland has other ways that people can volunteer and get involved in their local health service. If anyone is interested in finding out more they can contact the Public Involvement Team on 01463 704702 or look at the 'Get Involved' section on the website.

Public Holidays 2010

The Highland Partnership Forum recently agreed public holiday dates for NHS Highland for 2010. They are as follows:

The dates for NHS Highland (excl Argyll and Bute CHP) are:

Friday 2nd April 2010 (Good Friday)
Monday 3rd May 2010
Monday 2nd August 2010
Friday 15th October 2010
Monday 27th December 2010
Tuesday 28th December 2010
Monday 3rd January 2011
Tuesday 4th January 2011

The dates for Argyll and Bute CHP are:

Friday 2nd April 2010 (Good Friday)
Monday 5th April 2010 (Easter Monday)
Monday 3rd May 2010
Monday 27th September 2010
Monday 27th December 2010
Tuesday 28th December 2010
Monday 3rd January 2011
Tuesday 4th January 2011

New Emergency Planning Officer for NHS Highland



The long arm of the law has extended into NHS Highland with the arrival of former police officer Peter MacPhee who has taken up post as Emergency Planning Officer (EPO).

After 32 years with Northern Constabulary Peter is looking forward to a new challenge

although knows that some will remain the same: "I fully anticipate a lot of similarities in terms of how best we deal with the geographical spread but my knowledge of the area is good. Argyll and Bute is a new area for me to brush up my knowledge of but it will all be part of the process of getting to know my counterparts and the wider team that I will be working with."

Peter has spent the last five years as Deputy Head of Crime Support where he assisted in dealing with serious crimes, overseeing

investigations and leading investigations. He's confident that his experience in the job will help him in his new remit: "The key to being EPO is preparation and this is where thorough training and exercises come in. If something falls within your role you have to know what your team expects of you. It's crucial that people can see how they fit into the bigger picture because in a situation where you need to react quickly and carefully time doesn't always permit fundamental questions."

One of Peter's first major missions is to meet as many people as possible to enable his role to be most effective: "I've been really impressed with my first week here. I've met lots of very friendly and helpful people. It's now my intention to get to know the organisation a lot better and to meet my colleagues in each of the community health partnerships so as when we need to act quickly there is no hesitation."

Peter will be based at Assynt House in Inverness and is contactable on 01463 704970.

Legal Services within NHS Highland

Staff working within the NHS can sometimes be caught up in legal matters such as

- Medical negligence claims
- Employee Injury/Illness claims
- Public liability claims
- Fatal Accident Inquiries
- General legal issues

Would you know where to get advice if you were affected by any of the above?

Heather Campbell (pictured right) is NHS Highland's Legal/Claims Officer dealing with medico-legal matters, covering the whole NHS Highland area, including Argyll & Bute. She is part of the Clinical Governance Support Team based at John Dewar Building.

Heather works closely with specialist NHS solicitors at the Central Legal Office to investigate clinical negligence and non-clinical claims against NHS Highland as well as Fatal Accident Inquiries. She is also on hand to assist any member of staff who requires expert medico-legal advice/guidance on issues relating to your work.

Heather is currently working on reducing the delays in being notified of new claims which are raised against NHS Highland and asks that any

members of staff who receive such letters from solicitors should contact her as soon as possible. There are some staff who, in the course of their work, will receive letters from solicitors. These letters should not be responded to directly but we would ask you to contact Heather for advice.



Occasionally staff can get involved in legal matters such as having to give statements to police, solicitors, or being required to appear in court as a witness. This can be very stressful for those involved but it is not something you need to go through alone. Heather is here to provide advice and support during this time should anyone require it. She also works closely with Health & Safety colleagues to provide more specialist support and counselling for staff involved in legal cases.

Anyone receiving letters from solicitors, and/or wishing advice or support on medico-legal matters, can contact Heather on 01463 706816 or email Heather.Campbell1@nhs.net. Further information is also available on the intranet on the Clinical Governance & Risk Management web page.

Improved health services for older adults in Lochaber

A recent review of services for older adults in Lochaber has resulted in redevelopment that will see more services delivered at or as close to home as possible.

The review, which looked at care in the community and hospital beds used for adults, particularly the elderly, resulted in the closure of Glencoe Hospital, with the money previously spent on running the hospital being used to improve community services for older adults throughout the area.

Tracy Ligema, NHS Highland's Locality Manager for Lochaber, said: "We are using the funding that would have been spent on Glencoe Hospital to create a better and more appropriate community-based service."

Tracy explained that the community nursing teams had been realigned geographically, so there were now separate teams covering the west, east and south areas of Lochaber. She said: "We have also started to increase the community nursing teams by adding extra staff,

some of whom have been transferred from Glencoe Hospital."

The Belhaven ward - a small unit close to Belford Hospital, which is used for care of the elderly - will also be redesigned to become the hub of community-based care for patients with long-term conditions, for rehabilitation services and for intermediate care.

Tracy said: "We want to use some of the money from Glencoe to totally redesign the Belhaven premises to create additional and improved therapy space and to provide en suite facilities. We are also going to create an independent living area so that people who need to come into the hospital will be able to look after themselves, if they are able helping them to retain their independence, making it easier for them to return to their own homes when they are discharged from hospital."

It is not yet known when the work will start, but it is hoped that it will be completed by the end of this year.

Return of a familiar face



NHS Highland is delighted to welcome back Rob Henderson as Consultant in Public Health Medicine.

Rob previously worked with NHSH as a Public Health Registrar before moving to NHS Grampian in 2006. His main roles with NHS Highland will be to co-ordinate adult

cancer screening programmes and work with the South East Community Health Partnership. He will take a lead role in co-ordinating the local roll-out of the national bowel cancer screening programme which is due to start in the Highland Council area in December. Bowel screening commenced in Argyll & Bute in April this year.

Rob's looking forward to ensconcing himself here once again: "It's good to be back in Inverness, and it's great to work with people who I worked with previously as well as new colleagues who've joined since I left. It's a hard-working, friendly team which I'm enjoying being part of.

"One of my main priorities is to co-ordinate the adult cancer screening programmes so I'll be making an effort to meet colleagues involved in these. The bowel cancer screening programme for men and women aged 50-74 years is an

exciting initiative and I'm keen that everyone eligible for the programme is aware of it and has an opportunity to take part.

"Bowel cancer can be treated effectively if it's caught early enough so I'd encourage people to complete the testing kits when they drop through their letterbox. The kits are simple to use and come with full instructions."

NHS Highland is the final health board in Scotland to launch the bowel cancer screening programme. It aims to help identify people who have the disease before they develop symptoms to enable early treatment.



hi from chi

Hit a hole in one

chi identifies your patient 1st time

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Please use the **chi**

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The Princess Royal visits Sutherland Hospital



Above: Princess Anne and the Lord Lieutenant for Sutherland Dr Monica Main walking up from the Gatehouse Centre to the Cambusavie Unit

The Princess Royal this month (September) visited The Gatehouse Centre and the Cambusavie Unit, which are both in the grounds of the Lawson Memorial Hospital at Golspie, where she unveiled an ambitious glass artwork created by service users of The Gatehouse – a facility for Sutherland people recovering from mental illness run by National Schizophrenia Fellowship (Scotland).

On arrival Princess Anne was taken to The Gatehouse, where she was introduced to Jennifer Fraser, Manager of the Gatehouse Centre, and senior representatives from NSF (Scotland) National Office, Edinburgh, together with the artists and service users' who completed the glass project.

At the Cambusavie Unit she was introduced to members of staff and the local management team and was then taken to the occupational therapy and physiotherapy department, where

she talked to the intermediate care team about the new outreach project, which involves taking some of the services they currently provide in the hospital out into the community.

The glass project was laid out in the day room at the Cambusavie Unit, covered with a Saltire, which the Princess removed to reveal the work of art. She was then presented with a posy by Nicki Hughes, who was one of the artists.

Princess Anne signed the Cambusavie Unit visitors' book before meeting the members of the pipe band, who gave her a rugby shirt and played her a selection of tunes.

NHS Highland Locality General Manager, Georgia Haire, said: "We are delighted that the Princess took the time to come and meet us as Patron of the College of Occupational Therapists.

"She took a real interest in everything we are doing at the Cambusavie Unit."



Above: Princess Anne signs the visitors book in the day room at the Cambusavie Unit.

Cast away for better health



Staff at NHS Highland have been learning to knit as part of a Healthy Working Lives initiative to help boost wellbeing and develop a more

motivated workforce.

They've been spending part of their lunchtimes knitting squares which will be sewn together to form a large panel destined for the Skye Bridge in October as part of the Highland Homecoming celebrations.

The Stitches on the Bridge project is being organised by a Skye textile group. It hopes to cover the railings of the Skye Bridge with knitting from various groups throughout the area, known as guerrilla knitting (covering everyday objects with knitting).

Fiona Clarke, NHS Highland said: "We heard about the Skye bridge project and thought it would be a nice idea to have a 'knit in', where we could teach people how to knit. Lots of people

have had a go and everyone has knitted or crocheted at least one square. Now all we need to do is sew them together in time for the celebrations.

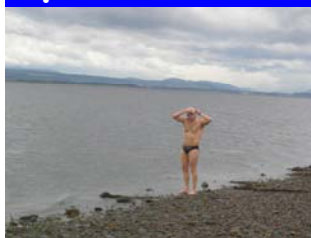
"There is growing evidence that knitting has health benefits such as helping to lower stress levels and reducing the risk of memory loss. A clinical trial has previously demonstrated the benefits of knitting as therapy for those with mental illness."

Fiona is part of a local group, INstitches which meets every Tuesday night at Eden Court café in Inverness at 6pm to knit, crochet, and tell jokes to the woolly minded.



More information on the Skye Bridge project is available at www.stitchesonthebridge.co.uk and for Healthy Working Lives see www.healthyworkinglives.com

Sponsored Swim for Friends



Above: Juan preparing to set off

Wearing only swimming trunks, goggles and a cap Juan Warshawsky, an OT for NHS Highland based at New Craigs, entered the Moray Firth at Chanonry Point Fortrose to swim the nine miles to

Inverness Marina to raise funds for the Friends of Raigmore Hospital.

Juan said: "It was a life changing experience. The first choppy hour changed to two magical hours of glass conditions. It was for the most part dark overcast skies and it rained for a while. The rain does not bother the swimmer – once in the water, light rain makes no difference. As is always dreamed by open water swimmers the skies opened up and the final sunrays of the day were making me feel warm.

"The last drink break before the hard section of

the swim was calm. Six dolphins were playing nearby, in particular a calf that must have thought that I was a new play mate! Its moments like this that makes open water swimmers understand why they left the confines of the swimming pool.

"After 4 hours and 26 minutes a cheer from the shore told me that people were there to greet me and applause ruptured as I clambered up the rock wall to Terra firma. This was the first time that I have left one shore and stood on another. I felt fantastic!"

An estimated £2000 has been raised to date which is a tremendous help to the Friends of Raigmore who are fundraising to raise £10,000 to buy a specialised bed for the hospital and rolling monitors for outpatients.

The next fundraising function will be an 'entertaining on a budget dinner' on the 30th October in the Waterside Hotel where the head chef will demonstrate each course before it is eaten. Tickets are £25, please contact Christine Cameron on 01463 221420.

Royal College of Nursing Nutrition Now Workshop

The RCN Nutrition Now Workshop was held at the Centre for Health Sciences in Inverness in August to highlight the principles of good nutritional care for patients. Fifty staff members attended the day from nursing, catering, and dietetics, coming from all areas of NHS Highland and the private sector.

The aim of the day was for participants to gain a better understanding of the importance of good nutrition and ways to improve food for patients. The day kicked off with a session on Protected Mealtimes (aka keep unnecessary folk off the ward), the use of the red trays to ensure vulnerable patients are monitored, and the importance of ensuring patients get enough time to eat their meals.

Also highlighted was assessing patients for malnutrition, explaining the MUST tool (Malnutrition Universal Screening Tool), information regarding the evidence of malnutrition throughout the NHS, the cost of this, and the importance of screening to improve the care for patients.

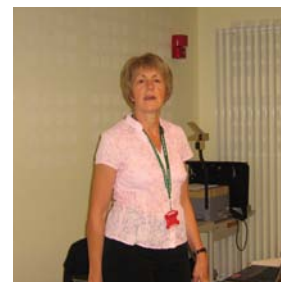
Delivery of Service was reviewed by the participants who went onto some of the wards at Raigmore to carry out an observational audit at lunchtime. This was really enjoyed by everyone and it showed that by carrying out observations of care we can identify good/not so good

practises. This will be shared with ward colleagues and other staff.

Following on from this everyone looked at designing a plan of work that would improve nutritional care within their areas. The whole day was really entered into with enthusiasm and all of participants were eager to work on a plan that would benefit their patient group.

Heidi May, Nurse Director to the Board, highlighted the importance of good nutrition to all areas of patient care and Nigel Hobson, Associate Nurse Director, summed up at the end of the day, his last duty before taking up his new post in the Western Isles. Feedback from the day was positive with people really enjoying the day and getting a lot out of it.

The day was facilitated by Linda Burgin Nutrition Champion for NHS Highland and Caroline Gibson Specialist Dietitian from Raigmore. Helping to make the day a success also were Muriel McNab, Practise Facilitator, SN Nikki Russell 6c, NA's Cath Scobbie and Rhea McBrier 2c.



Above: Linda Burgin, Nutrition Champion for NHS Highland

Letters to NHS Highland



"Compare and contrast these two sporting incidents that took place in the USA and the UK. First the UK, covered by the NHS - this took place in the Sound of Mull where I had an uncontrolled ascent without a stop. I was given water and oxygen on our dive boat and the lifeboat before being met by ambulance and taken to the decompression chamber. I was treated, assessed, treated, assessed and everything was done very professionally and during the whole episode I was cared for in the most brilliant manner and given superb treatment. My thanks go to the whole team from the Lifeboat and ambulance through the 'diving doctors team' and the nurses and doctors at the hospital. Wonderful! Now relate that to an experience a number of years ago in the USA. My niece fell badly skiing and was taken to a clinic where the first words out of the doctors mouth were 'it costs \$55 to talk to me'. She was also told x-rays would cost \$88. She then made a medical (i.e. financial) decision not to

have the x-rays - I paid for them.

Compare and contrast - I think the UK system makes a lot more sense!"

A Patient from the USA

"Just a short note to say thank you to you and your staff and all the doctors for the attention my wife received whilst in your care.

To be quite frank she was extremely frightened when she left home on what was to be a bit of a marathon journey to Raigmore, but in her own words 'it was like being greeted by friends' when she arrived at Ward 11. She was immediately reassured and made comfortable as everyone worked to assess her condition and start treatment.

As her condition improved she was treated with the utmost kindness and respect and I know it was a great relief to me that while my own visiting was restricted, she was treated as a friend by everyone while she was so far from home. Once again, many thanks."

A Patients relative from Argyll

"I am writing to pass on my thanks and gratitude to all the staff I met during my husband's illness and would like to thank everyone that was involved in his care.

Throughout his stay at Raigmore he was very aware of how everyone was doing their best to diagnose his illness and treat his symptoms. We had numerous disappointments and but even as his health deteriorated and he was admitted to ITU we were still optimistic but despite everyone's best efforts it wasn't meant to be.

I am very grateful that my family and I were able to spend time with him and were always made welcome whatever time of day it was. I am very grateful that I was able to be with him during his final hours and especially to be there during the time those last efforts made by everyone to help him.

May I again give my heartfelt thanks for the care and compassion given both to my husband and I during his stay in ITU."

A Patients relative from Nairn

Staff survey for employees who have a disability/ies

NHS Highland is now developing its new Disability Equality Scheme 2009-12 and want you to have your voice heard and provide us with valuable feedback, which will inform our Action Plan for the next 3 years.

Please complete our anonymous and confidential survey only if you have any form/s of disability.

The link below will direct you to the survey:

http://www.surveymonkey.com/s.aspx?sm=wyHxFzKfZ9Ti0SDOAGw_2bcw_3d_3d

The Disability Discrimination Act (DDA) defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term (meaning it has lasted for 12 months, or is likely to last for more than 12 months or for the rest of their life) adverse effect on his or her ability to carry out normal day-to-day activities.

Examples of a disability may include:

- physical disability
- mental health condition
- Learning Disability
- sensory impairment
- long term condition (eg. diabetes, cancer, HIV/AIDS, asthma, MS, long term mental health condition such as depression, schizophrenia)

This survey will take approximately **10-15 minutes** to complete depending on the depth of the info you wish to share, the deadline is **30 September 2009**.

For further information about the survey or to discuss/obtain access to alternative way of participation in this survey, please contact:

Anna Maria Kaczmarek, Policy Development Manager, Community and Health Improvement Planning Team, Assynt House. Email anna-maria.kaczmarek@nhs.net or tel. 01463 704918

What's on... October & November



What: Managing risk and behaviour through teamwork

Who: All grades of staff

Why: Sharing lessons learnt from an accident in the aviation industry focusing on the Human Factor element, Tall Poppy will be examining measures introduced to minimise future risks, namely team decision making, reducing human error, effective communication and effective feedback and considering the roles of leadership, motivation, situational awareness and problem solving. This will be of particular interest to those involved in the provision of quality patient care, particularly team leaders, managers involved in assessing risk and clinicians.

Where and when: 13th October, 12noon-2pm, Fairways Golf Club, Inverness

Need more? Charlotte Leggatt charlotte@gp55751.highland-hb.scot.nhs.uk



What: Care Programme Approach Awareness Training

Who: Those who provide support to clients (16 years and over) with severe and enduring mental health problems

Why: These sessions are intended for staff and people who provide support to clients (16 years and over) with severe and enduring mental health problems, including dementia, plus people with learning disability, all of whom also have complex health and social needs. These clients may already be living in the community or are being discharged into the community and may receive support from the private and public sector

Where and when: Tuesday 27th October, 1.30-3.30pm, Stuart Room, Robertson FM Building, New Craigs, Inverness

Need more? Places can be booked by contacting the CPA Office on 01463 253610 or Ext 3610 or completing the booking slip on our page on the intranet



What: NHS Highland: Changing for the Better

Who: Open to all

Why: Catch up with Maimie Thompson who will be updating us on NHS Highland's progress on 18 RTT and the financial challenges facing the organisation as well as Health Board's Strategic and Operational objectives

Where and when: Wednesday 28th October, 12-2pm. Pentland Hotel, Thurso; Wednesday 4th November, 12-2pm. Corran Halls, Oban; and Monday 9th November, 8.30-10.30am, Kingsmills Hotel, Inverness

Need more? please email charlotte@gp55751.highland-hb.scot.nhs.uk



What: Stroke Intermediate Course

Who: Those who have completed the Stroke Foundation Course

Why: Topics include- Stroke Classification, Thrombolysis, perception and cognition, goal setting, sexuality and sexual dysfunction, supporting communication, psychological support following stroke, a personal experience of caring for someone with stroke.

Where and when: 26th and 27th Nov 2009- Cost £25, Venue Raigmore Site

Need more? contact. Linda Campbell, Stroke Coordinator on 01463 704086, linda.campbell8@nhs.net

You, the Highland Health Sciences Library, KSF and PDP

A number of NHS Highland groups have been booking the Highland Health Sciences Library training room for various sorts of training.

We have noticed that a lot of this training relates to KSF and PDP issues, we have also noticed that the majority of attendees and organisers are not library members and even if they are they do not appreciate how the library can help with these two increasing important facets of staff development.

The Library provides a wide range of books, journals and other items which are available to all NHS Highland staff no matter where you are located (Argyll and Bute staff contact Linda Kerr at the Health Information and Library in Oban 01631 789020). We provide training and advice on how to make best use the electronic resources available via the NHS Scotland eLibrary. We can also save you time by doing literature searches to provide information on for example: service developments, and best practices in patient care.

The Library can be contacted at 01463-255600 (ext. 7600). Our catalogue can be found at: <http://libcat.stir.ac.uk/> and our main website for NHS users is at: <http://www.is.stir.ac.uk/nhs/index.php>, we also have a presence on the NHS Highland Intranet: <http://intranet.nhsh.scot.nhs.uk/Resources/LibraryServices/HHSL/Pages/Default.aspx>

Please contact us to join, use our services and to see how we can help you.

Rob Polson (rp5@stir.ac.uk) Highland Health Sciences Library.

Progressing your career in health?

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MA Health and Wellbeing

If you want to take your career to the next level and further improve the health and wellbeing of others this part-time taught masters degree can help you achieve this.

The flexibility of this course means that you can study online from anywhere in the UK, whether you are rural or urban based, and at the same time manage your work and family commitments.

You can study the MA Health and Wellbeing part-time over three years, or you can pick and choose individual modules to count towards your continuing professional development. The next course intake is February 2010.

To find out more contact rachel.tearse@lews.uhi.ac.uk or call 01851 770491

Smokefree NHS Highland Useful Helplines and Websites for Information and support on Smoking Cessation

- **Highland Smoking Cessation Service—lo-call 0845 757 3077**
- **Smokeline 0800 84 84 84**
- **Quit—0800 00 22 00**
- **Enquiries and advice - smokefree@hnb.scot.nhs.uk**
- **Givingupsmoking.org.uk**
- **Quitnet.com**

Occupational Health are now offering smoking cessation support to the staff of Raigmore Hospital. This can include one to one support for smoking cessation as well as advice in regard to products such as nicotine replacement therapy. Appointments can be made within Monday to Friday 9-5pm. Please phone 01463 706147 (ext 6147 for internal) for an appointment.

Smoking Cessation Support Service for New Craigs and RNI staff at New Craigs hospital call 07920247930 to make an appointment.

HDLs

You can find all recent HDLs in the SEHD Weekly bulletin at <http://www.sehd.scot.nhs.uk/publications/bulletin/bulletin2009list.htm>

eLibrary

www.elib.scot.nhs.uk

Have you registered yet?