

# Team Update



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## Changing for the Better - Bed Utilisation and Reconfiguration at Raigmore Hospital

As part of Changing for the Better NHS Highland is going through an ambitious programme of service improvement. We are looking into how we can make better use of our resources while still continuing to modernise and improve, and ensure we deliver a safe and high quality service to our patients.

In line with this Raigmore Hospital Management Team is addressing the need for a planned and phased programme of bed reconfiguration. This is essential in order to achieve our aim of "Better Health, Better Care, Better Value". By looking at our bed stock we can maximize current bed use, increasing efficiency and reducing waste without affecting accessibility or patient care or patient outcomes.

The work carried out so far has involved looking at the transferring of some services currently delivered in secondary care to the Community Health Partnerships (CHP) and the first phase of this is already underway with the Elderly Rehabilitation Service, currently delivered on Ward 2c, being transferred to the CHP from December 2009. This decision has been taken following extensive consultation with our clinical staff, our CHP colleagues and with others including the Highland Council.

The two CHPs affected are redesigning their community rehabilitation services to provide an integrated, multidisciplinary approach to service provision, supported by multidisciplinary (Social Work, Nursing and Allied Health Professional) triage of referrals and an increased focus on patient flow between Raigmore and the CHPs. This will ensure that patients, who would previously have been cared for on 2c, can be cared for within their own communities, in an environment which is focussed on rehabilitation and enablement.

The close links that exist between community services and community hospitals will lead to more effective discharge planning and so will reduce length of hospital stay for some patients. Spending less time in an acute hospital setting also reduces the likelihood of Hospital

Associated Infection for this vulnerable group of patients.

In recent years there have been challenges in the hospital, due to an imbalance of demand and capacity within surgical and medical beds. This is largely created by the designation of beds rather than the absolute number of beds available. Raigmore Hospital has never had to close to admissions due to a lack of beds, but the available beds are often within the a different specialty.

In general, it is not desirable to decant patients to a ward area with a different specialty, as there can be issues of staff training and expertise, and medical teams have to travel some distance to see the patients from their original ward. Patients also tend to have an increased length of stay as they may not be reviewed as frequently by the team whose care they are under.

There is an urgent need to reconfigure beds to cope with expected demand as winter approaches. It is also acknowledged that it may be necessary to have an increased number of beds available during the winter as this is a predictably busy period for both medical and surgical specialties.

However, conversely, there should also be proactive and planned closures of beds during holiday periods and weekends, as occupancy drops considerably at these times. It is also recognised that if all specialties review their current way of working, and ensure that patients are admitted on the day of their procedure or investigation, and not before, unless there are specific clinical reasons for an earlier admission, this will have a significant impact on the availability of beds across the hospital.

A proposal is currently being worked on, in consultation with clinical staff, and staff will be kept informed on its progress.

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## Digital Dictation and Patient Focussed Booking

There are two projects being implemented currently which you may be familiar with. These are Digital Dictation and Patient Focussed Booking. There have been several presentations and communications on both these projects and you may have been directly involved or have some knowledge of one or both of these developments.

Some information on both these projects is given below but it is necessary to further engage with staff on the possible impact that these developments will have. This work is underway. It will mean that for some staff, jobs will change and NHS Highland's Organisational and Service Change PIN policy will be integral to managing this process.

A project working group has been established led by the Business Transformation Manager and involving representatives from appropriate staff groups and partnership reps. This group is reporting to the 18 week Referral to treatment group and the Highland Operational Group both of which are chaired by the Chief Operating Officer.

It is likely over the coming weeks and months you will be come involved in the projects and you may have questions or concerns. One of the roles of the working group will be to communicate regularly and ensure that concerns are listened to and where possible addressed.

Should you wish any further information now or in the future you can address them to [linda.kirkland@nhs.net](mailto:linda.kirkland@nhs.net) (business transformation manager) or [cathie.walker@nhs.net](mailto:cathie.walker@nhs.net) (personnel manager) or [etta.mackay@nhs.net](mailto:etta.mackay@nhs.net) (partnership rep for patient focussed booking) or [callum.macdonald@nhs.net](mailto:callum.macdonald@nhs.net) (partnership rep for digital dictation)

### Digital Dictation

This is being rolled out across NHS Highland to most of the acute specialities and the associated secretarial staff. The intention is that this roll out will be extended at a later date to include Management, AHPs and, possibly, Nurse specialists.

The benefits from using such a system are many and include

- Improved sound quality from digital recording reduces misunderstanding and time lost clarifying doctors dictation
- Instant availability of dictation recordings through download process especially from multiple sites
- Clear identification of who is dictating the letter, job type, time of download and target turnaround time for job type
- Immediate identification of dictation through patient CHI number
- Immediate identification of high priority dictation
- Ability for those dictating to review and re-prioritise work without the need to interrupt secretarial staff
- Ability to listen to previous recordings at time of reviewing typed documents and reports
- Full visibility of work loads for individuals teams and departments
- Ability to allocate work throughout the system to alternative typists and departments even to those on different sites
- Ability to enclose electronic attachments to dictations
- Ability to automate template production through population of demographic details through integration

### From the editor ...

Welcome to the November 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](mailto:nhs.highland@nhs.net) or contact [Christina.macdonald1@nhs.net](mailto:Christina.macdonald1@nhs.net)

**Deadline for copy: 14th December**

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- With the correct integration the ability to report, manage and influence the activities from patient attendance to report production

The next phase of the project is to replace the current clinical letters system to enable electronic communication with GPs and then to develop Integration with SCI gateway and SCI store and NHS mail.

## **Patient Focussed Booking (PFB)**

### **The Issues**

Many different ways of booking appointments exist within NHS Highland, this can result in:

- Different interpretation of 'rules' around patient access to services
- Clinical time lost by being distracted or involved in booking process and procedures
- Booking administration takes place in many locations, so cross cover for departments during period of absence is challenging and leads to a high turnover of staff in some cases

### **Impacts**

All contribute to inefficiencies which result in additional waits for patients, wasted clinical and administration time, longer waiting times and ultimately have a financial cost.

### **Rationale for Approach being taken**

The Radiology Department has implemented a very successful patient focus booking system. This reduced the 'did not attend' (DNA) and 'can not attend' (CAN) lost appointments by a significant number (over 4000).

In-depth analysis using Lean techniques in ENT supported the need to introduce PFB for ENT outpatient appointments. DNA rates have reduced and waiting times are coming down.

As a result of these successful pilots, PFB is now being extended to all specialities and all booking systems across NHS Highland.

Evidence from other Health Board areas provide further support to improve booking systems in order to maximise patient access appointments.

## **Financial Position Update**

Everybody should be aware of the challenging financial position facing NHS Highland in the current financial year and, indeed, going into future years due to the reduced public sector expenditure which has been well publicised.

Health Boards are given financial targets each year and are not permitted to overspend. Previous updates have highlighted that, in order to maintain and develop our health services, NHS Highland needed to find around £16.9 million from working more efficiently and redesigning our services and the Board agreed a number of themes as a framework to help deliver this without detriment to patient care and this was outlined in the April team update. The themes are:

- Redesign Corporate Services
- Technology
- Prescribing
- Maximise utilisation of current Bed Stock
- Clinical Variation
- Access Payments
- Out of Hours Service
- Review of Non Essential Services
- Tertiary referrals and income generation
- Nursing and Allied Health Professionals contri-

bution to Long Term Conditions

- Workforce Efficiency & Effectiveness

Around £8 million of savings were allocated and identified by the beginning of the financial year and during the year, all areas of NHS Highland have been allocated further targets to identify the remaining £9 million.

As at September, there remained over £5 million still to find. Since then, plans to identify £3 million of savings have been drawn up although it must be stressed that these are still plans and they must be fully implemented if we are to realise these.

There remains just over £2 million of savings which still have to be identified. As previously highlighted, NHS Highland is not permitted to overspend and the challenge that we face is that all of this needs to be found over the remaining four months of the financial year.

We would like to thank all staff for their assistance in delivering this challenging position to date and ask that everyone continues to support the process to allow us to continue to provide our high standard of patient care.

## It's Awards Season! Highland Health Heroes Scoop National Health Awards

Three expert healthcare professionals from NHS Highland were recognised for their hard work and dedication to Scotland's health service this month as they picked up a coveted honour at the Scottish Health Awards 2009.

Jessie Colquhoun, Duty Nurse of Kilchoan Community Centre, Clare Rungay and the Lochaber Community Mental Health Team, and Lynn Garret, Project Manager at Aros, were amongst the winners at the exclusive ceremony held at the Edinburgh Corn Exchange.

The team were nominated for the Mental Health Care Award by a Bipolar patient who was grateful for the expert care and support that she received at Fort William Health Centre. The patient has suffered from the disorder for most of her adult life and Clare has been her Community Psychiatric Nurse for fifteen years. During this time Clare and her team has been unfailingly supportive, travelling many miles at a time to visit her.

At times when life was particularly difficult, Clare used her knowledge and experience to help the patient and her family cope with their struggles. In her nomination the lady describes the support that Clare and the Lochaber Community Mental Health Team has given her. She said: "Everyone at the Lochaber Mental Health Team have always been there for me and my family, however black the future seemed."

Lynn Garret, project manager at Aros in Lochilphead, picked up the Improvement and Innovation Award for her work on developing an extremely successful telehealth project to monitor patients on the Isle of Bute.

As a result of the project, sixteen telehealth sets have been installed within three months, which has saved patients travelling to the mainland for appointments and reduced costs as helicopter trips can now be avoided.

This service is not just a positive improvement for patients as nurses and doctors benefit from it too. The telehealth sets give healthcare professionals in the Isle of Bute more time to care for their patients by removing the need to do routine sign recordings, allowing them to prioritise their workload better.

Taking home the prestigious Nurses Award last night was Jessie Colquhoun, a duty nurse from Kilchoan, after giving fifty years of her life to NHS Scotland.

Jessie not only shares her vast knowledge,



*Above: NHS Highland Chair Garry Coutts with NHS Highland Scottish Health Awards winners and finalists*

experience and skills with other members of the team, she continues to keep herself up-to-date to provide excellent patient care. Consistently nominated by students as an exceptional mentor, Jessie also provides first aid training for the local fire and coastguard service, runs an exercise class for over 50's in her own time and is rarely off duty. The judges recognised Jessie's kind nature and professional attitude making her a truly deserving winner of a Scottish Health Award.

Roger Gibbins, Chief Executive of NHS Highland commented: "I would like to offer my warmest congratulations to the winners from NHS Highland's area. It is truly deserved and I am delighted that they have been recognised in this way.

"I would also like to congratulate all the finalists from Highland. I have always known that staff in Highland go that extra mile and to have their commitment acknowledged in this way is not only a boost for them but the organisation as a whole."



Pictured above: Some members of Raigmore Hospitals Cross Sectional Team who won Team of the Year Scotland at the Society of Radiographers Awards.

The Team were presented with the award at the House of Commons earlier this month (November).

## Awards Season Continues - Laundry Achiever of the Year

Normena McPhee (pictured right), laundry assistant at Raigmore Hospital in Inverness, has become Scotland's Laundry Achiever of the Year after receiving her award at the annual Textile Services Association conference in Edinburgh.

Normena, who has worked in the hospital's linen services department for 8 years, was nominated by Facilities Support Manager Alistair Wilson for her dedication to developing her skills in completing her SVQ in laundry. As well as working towards her own qualification, Normena took on extra responsibilities by acting as a trade union representative and assisting colleagues for whom English is a second language in their SVQ training.

Normena said, "I'm delighted to receive this award and I hope to continue mentoring the current SVQ candidates in their training so they can benefit from it as much as I have."



## Partnership Working and Joint Service Delivery Award

The New Craigs Re-settlement Project has won a Highland Council Award for Partnership Working and Joint Service Delivery.

The award – a handsome Tain pottery plate was collected by Jan Baird, Director of Community Care on behalf of all those in NHS Highland who were involved in the Project. Other team members at the ceremony to receive the award were Neil Erskine, SENSE Scotland; Janet Spence, Social Work; and Helen Cameron, Albyn Housing. This project focussed on the re-settlement of 38 patients from New Craigs Hospital to their own homes in the community and involved a wide range of NHS staff across the services. Staff worked closely with providers to ensure needs were appropriately assessed and met. At the same time, support and advice was given to staff members for whom this was also a major change. Jan Baird said "it is really nice for the teams to be recognised in this way. Throughout the Project I was impressed by the way that staff came together across the agencies focussed on the individuals and making the moves from hospital as smooth as possible. Many congratulations to all involved."



## Is your Laptop Encrypted?

Following on from some recent incidents surrounding the discovery of data on portable devices in NHS Scotland, the Scottish Government eHealth Directorate, following consultation with NHS Board IT and security experts, have agreed a new NHS Scotland standard on mobile data protection (contained in CEL(45).

This standard outlines the minimum measures for the protection of mobile data in NHS Scotland and is primarily targeted at laptops and USB memory sticks, however, the controls are equally applicable to other mobile data devices such as PDAs, Blackberries, and removable media

NHS Highland's eHealth department are continuing to work on the "Encryption Project" in line with the new standards set out in CEL(45) for the protection of data on mobile devices

NHS Highland has been encrypting laptops for four years so it is very unlikely that there will be a large number of unencrypted ones out there in use, but we want to make sure. If you have an unencrypted laptop (see instructions below) then please contact Iain MacInnes (encryption project manager) so that we can identify a solution for you.

### **How to tell if your Laptop is encrypted or not?**

Encrypted: When powering up the laptop you are prompted to enter a password before the windows logon window is displayed

Unencrypted: If you power up and go straight to a windows login then your laptop is not encrypted.

### **What to do with your unencrypted Laptop?**

Please contact Iain MacInnes ([iain.macinnes@nhs.net](mailto:iain.macinnes@nhs.net), Ext 6311) and we will work with you to resolve your laptop encryption requirements

## Wheelchair and Seating Service Modernisation Project



NHS Highland Wheelchair and Seating Service covers the Highlands, Western Isles and West Grampian areas, has over 4000 patients with a wide variety of needs and maintains over 4000 wheelchairs.

In March 2006 a document called "Moving Forward" was published after a national review of the Wheelchair and Seating Services (WSS) across Scotland. In this document recommendations were made for the modernisation and improvement of the five services that make up the Scottish Wheelchair Service. In March 2009 a national action plan was published to bring about the recommended changes throughout the Scottish service.

The recommendations that were made include the modernisation of the wheelchair fleet to bring it inline with technological advances, the relaxation of eligibility criteria for the issue of powerchairs and moving some of the prescribing and issue of wheelchairs out into the community. Highland WSS is also working towards improving its overall efficiency to bring about the reduction of waiting times for assessments and wheelchair issue and repair.

### Staffing

The WSS has significantly increased its staffing levels over the last six months. The Service now has three teams consisting of an Occupational Therapist and a Rehabilitation Engineer. These three teams carry out home visits and local clinics for wheelchair patients across the Highlands, Western Isles and West Grampian. Their work involves patient assessment and issue of equipment to those that have more complex conditions.

There is also a band 5 Occupational Therapist that spends 6 months with the Service on a rotational basis and an Occupational Therapist Assistant to take on the less complex tasks.

A more patients can now be seen by the service because of extra staffing, two new administrative positions based at Raigmore have been created and filled.

### Wheelchair User & Carer Network

NHS Highland currently operates a Public Partnership Forum called Highland HealthVOICES. This is an established network of people that can get involved in health and community care services and on registering can note their particular area of interest. Highland WSS has now been added to the HealthVOICES registration documentation. Patients can state their level of involvement in the scheme when they register, whether they would like to attend patient and carer focus group meetings, complete surveys and questionnaires that are sent to them or simply be kept informed of developments across NHS Highland, including the Wheelchair Service, via a monthly news letter called Network News.

The Wheelchair Service has so far sent out over eight hundred invitations to its service users with the view to having invitations sent to all patients by early next year. The project for setting up a user and carer group has been registered with our clinical effectiveness department who will be giving assistance on gathering information from patients and will help in the development and issue of any questionnaires.

### Planned Preventative Maintenance

As part of the WSS Modernisation Project the Service is expanding its Planned Preventative Maintenance operation which provides regular equipment servicing at users homes. Two new PPM technicians have recently been employed and are undergoing training at the Wheelchair Depot at Walker Place. In January these technicians will be ready to deliver the PPM service out into the community to service users across the Highlands, Western Isles and West Grampian. Because of extra administration involved in the expansion of this service a new administration worker has been employed at the Wheelchair Depot.



### ILM Highland (Shifting the Balance)

In April, as part of NHS Highland "shifting the balance" strategy the Wheelchair and Seating Service began a pilot scheme working with a local "not for profit" organisation called ILM Highland. ILM is a social enterprise with charitable status that delivers

domestic support services across the Highlands to the elderly and more vulnerable people living in the community. These services include a handy person, care and repair and insulation service.

Over the last seven months ILM's handy person service have been working with Highland Wheelchair and Seating Service offering a repair, delivery and collection service to patients across Ross & Cromarty, Sutherland and Caithness.

This service is provided by the handy person team, all of which have undergone training from the WSS staff. This training covers areas such as repair, delivery and adjustment of the basic fleet chairs and instructing WSS patients in the safe and correct use of their chair. ILM operatives are also trained to being able to identify patients that have postural and pressure issues that may require a follow up visit by one or our occupation therapist and rehabilitation engineer teams.

Since the beginning of the pilot ILM have carried out nearly 300 work instructions for the WSS and is proving to be a valuable part of the Services structure, providing an improved quality of care to our patients.

## Go ahead given for new hospital in Sutherland

The Scottish Government has given the go ahead for a new £8.3million hospital to be built at Bonar Bridge in Central Sutherland to replace Migdale Hospital, which is almost 150 years old.

The Government's Capital Investment Group considered the full business case for the 22 bed unit on September 22. NHS Highland has now been advised that the business case has been approved and told it can go ahead with the project.

The project was included in the capital programme agreed by the NHS Highland Board in August. It is hoped that work will start on site early in the New Year and that the hospital will be fully operational in March 2011.



*Above: Architect's drawing of what the new hospital will look like*

Locality General Manager, Georgia Haire, said: "This is such good news for Sutherland. We are now working hard on the very detailed implementation phase of the project.

"The hospital will be a hub for mental health services for older people, covering the whole county, and will also enable people with a wide range of conditions to be treated closer to home.

"Specialist community staff will be based at the hospital to enhance the range and flexibility of services available."

The new hospital, which will provide inpatient and some outpatient services, is to be built in the centre of Bonar Bridge, close to the Bradbury Centre - a day centre for older people - and the GP surgery at Cherry Grove.

Inpatient facilities will be divided into two units – one for older people with mental health needs and the other providing GP-led beds, offering a range of in-patient services, including palliative care, general medicine and less intensive rehabilitation services.

All the bedrooms will be single occupancy, with en-suite toilets and showers, and the internal layout has been designed so two of them can be used by either unit to provide flexibility.

The new hospital forms part of NHS Highland's programme of service improvement and change, called "Changing for the Better", which includes providing safe, quality care for patients as close to their homes as possible.

It also promotes independence by encouraging and supporting people to take more responsibility for their own health.

# 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.

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](mailto: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

During the past few months the KSF team, (rather grand title for a very small group of people), have been attending meetings with key managers to discuss how we can best support them and their staff with the transition from paper based PDP&R to the use of e-KSF.

One activity that has been working really well is the use of 'live' e-KSF demonstrations; a member of

the KSF team will login to an e-KSF account and show staff how it works. This can be done in workplaces with small groups around a single computer but works really well when projected onto a wall for larger groups. The demonstrations have purposely been kept as short as possible and vary in length from 15 minute overviews to more informative 30 to 45 minute sessions; these often over run as staff ask to see more and more.

These live demos are not intended to replace the formal training provided by eHealth (details below), but rather, act as a lead in to the training, feedback has been extremely positive and comments have included:

*"We found the live demo very useful, we really liked the fact that you showed us the minimal input required rather than every button and function..."* Staff Nurse, Caithness General Hospital, Wick

*"Since seeing the live demo our team have been sharing information on how to enter evidence into our review page without putting in lots of detail, my portfolio full of paper could soon be a thing of the past..."* Condition Management Practitioner, Inverness

*"I was really scared of using e-KSF but now realise it's no more difficult than using my mobile phone or my son's iPod, the technology is simple and although there is a lot functions I don't need to know them all..."* Administrative Assistant, Town & County Hospital, Nairn

To book a live demo please call Paul or Nick using the contact details below; we do need access to an internet connection but can bring a laptop and projector with us if required.

The KSF team are currently working on producing a series of short guides for NHS Highland to assist staff using e-KSF. Guides will shortly be available under the headings; Creating KSF Outlines, Completing a KSF Personal Development Review on Paper and Entering Evidence for a KSF Personal Development Review. The guides will be distributed widely using a variety of methods. In order to encourage managers to use the functions available to them on e-KSF the KFS Mailbox will close from the 30<sup>th</sup> November 2009, from that date new, amended or customised KSF Post Outlines will have to be submitted for approval using e-KSF. If you require further information or assistance with this please contact Iain MacDiarmid using the details above. The mailbox closure also ties in with work being undertaken by eHealth to move to full migration to nhs.net

Please be aware that if you have forgotten your e-KSF password you can use the 'forgotten your password' link available on the login screen, it is advisable to access this function when you first login and follow the prompts that enable you to reset your password 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 or go to the eHealth site on the NHS Highland intranet.

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.

A new format for these sessions is currently being trialled using screen shots of e-KSF pages so that participants can gain awareness of what to expect when they start using e-KSF themselves.

If you would like more information please use the contacts below or visit the Learning & Development Team pages on the NHS Highland intranet to view the latest training schedule.

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

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

## DATIXweb Incidents Implementation - Update

DATIXweb Incidents is an on-line reporting system which will eventually replace the IR1 / IR2 system. 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 and Implementation

Training is now drawing to a close in Raigmore Hospital and the Community Health Partnership (CHP) Management Teams are currently being contacted with a view to organising training dates for the New Year. A training day will be provided at each Community Hospital which staff from the wider community can drop into. The training days will comprise 1 Reviewer Session and 1 Reporter Awareness.

**Reporter Awareness Sessions - 30-45 mins**  
For anyone in NHS Highland to learn how to log an incident on the 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. If your staff have used the internet and logged incidents in the past they should find the online reporting form easy to use.

**Reviewer Training Sessions - 1hr 30 - 2hrs**  
Required for all managers identified as needing to approve / review / investigate incidents on the DIF2. Managers identified will need to nominate one deputy to be trained, unless they will cross cover with another manager. Training will also be delivered to operational unit management teams. Please note you do not need to attend the reporter session as well.

Once training has been provided to each community hospital further sessions will be available centrally in Inverness and via VC.

A full list of training dates for the community hospitals will be posted in the next edition of Team Update.

### Corporate Services

Discussion took place at the DATIX Project Board in November concerning the implementation of the online reporting system within Corporate Services. It was agreed that due to the small numbers of incidents logged by Corporate Services staff that training would not be provided for Corporate Services and that Managers would not be provided with usernames and passwords, as this was felt to be impractical. As the majority of incidents concerning Corporate Services staff are accidents it was agreed that staff should log an

incident on the DIF1 form and send this to the relevant Health and Safety Manager for review. If the incident concerns security, IT systems etc then incidents can be logged to security managers or ehealth etc.

If you are involved in an incident, please report this via the DIF 1 (intranet, non clinical applications, DATIX Incident Reporting, Report an Incident). If you have any questions please contact the Clinical Governance Support Team.

### New Users Post Implementation

Once an area has received their training new users should apply for access to the system via the New User Procedure – which is available for downloading from the DATIX Homepage. This requires the approval of either a directorate manager or locality manager.

### Leavers and Changes

The Clinical Governance Support Team will be conducting a 6 monthly audit of users to ensure that we have the correct managers with access to the system. However if you leave a post or change to another ward or department please ensure you notify the DATIX Admin Team on 01463 706910, 706822 or 706873 so that we can keep our user lists up to date and also ensure that we don't have staff with access to incidents that they are no longer responsible for.

The New User Procedure form also includes an area to highlight when a new user is a replacement for another member of staff and who that member of staff is.

### IR1 Pads

Once training has been provided at a location IR1 pads are to be returned to the Clinical Governance Support Team. Some pads from Belford Hospital, New Craigs and Caithness General have now been received, however if you work in these locations and still have a pad please return this as soon as possible.

Raigmore staff are requested to return their pads as soon as possible, however outstanding pads will be collected by the Clinical Governance Team at the beginning of December 2009.

*Please note: any areas that have now received their training and continue to complete and send in IR1s will have these returned for inputting locally.*

If you have any queries concerning the implementation, please contact Louise McInnes, Project Lead on 01463 706910 or [louise.mcinnnes@nhs.net](mailto:louise.mcinnnes@nhs.net)

# NHS Highland and Baby Friendly

NHS Highland's commitment to the UNICEF Baby Friendly Initiative has taken another step with the organisation recently achieving Stage 1 in the community health section of the initiative.

The Baby Friendly Initiative is a world wide programme established in 1992 to encourage maternity hospitals to promote and maintain successful breastfeeding. In 1998 this extended to the community setting with the introduction of the seven point plan for the Promotion, Protection and Support for Breastfeeding in Community Health Care Settings.

Karen Mackay, NHS Highland Infant Feeding Advisor, explains what Stage 1 means. She said: "To achieve stage 1 you have to have developed methods to ensure that the breastfeeding policy can be implemented and maintained. This will include an education programme for staff, an antenatal education programme and an audit tool to ensure we are compliant with the standards."

Breastfeeding gives your baby the best start in life and has many health benefits for both mother and child. Women who breastfeed are helping protect themselves against ovarian cancer and breast cancer, and they also return to their pre-pregnancy figure faster.

For the child, by breastfeeding you are helping protect your baby against chest infections, eczema, obesity and asthma.

Karen also explained that as part of the Baby Friendly Initiative NHS Highland is committed to raising the profile of breastfeeding in the

community. Breastfeeding mothers are encouraged to look out for the welcome sticker displayed in public places and premises that support and encourage breastfeeding in public.

Karen added: "Raising awareness and changing the public attitude towards breastfeeding will help to increase breastfeeding rates throughout the Highlands.

"Given our geography in Highland, for the whole area to have reached stage 1 is a great achievement and I want to thank everyone for their hard work and commitment in ensuring that this happened. Stage 1 is laying the foundation to allow a smooth transition to staff and patient awareness.

"We will now be working towards stage 2 which will allow us to focus on our staff education."

Congratulations also to Raigmore Hospital which has maintained 'Baby Friendly' status after impressing UNICEF with the significant progress made when they visited in September.

Raigmore Hospital was first given Baby Friendly status in 2006 and, thanks to the hard work from the staff within the maternity unit, has maintained the high standards expected by UNICEF during each visit.

Karen added: "It is a fantastic achievement to maintain the extremely high standards sought by UNICEF. This is a very hard award to achieve and all staff within Raigmore's Maternity Unit must be congratulated for the huge amount of time and commitment they give to breastfeeding women on a daily basis."

**hi from chi**

Make sure you have the right J. Garland

Please use the **chi** number

With thanks from eHealth

Use her **chi** number.

**Safer • Quicker • Better**

## Garelochhead Open Day

Members of staff from Garelochhead Medical Centre & The Oasis recently held a very successful Open Day where members of the public were invited to visit and find out more about the joint Health Board and Argyll & Bute Council facilities that are provided from the Centre.

## Highland Pupils Learn About Health Career Opportunities



Above: 4<sup>th</sup> Year Inverness Royal Academy Pupils Connor Noble and Elaine Murdoch with a model eye

123 S4 pupils from 16 Highland secondary schools attended a special event at the Centre for Health Science in September to find out more about careers in medicine and other health professions.

Organised by The Highland Council in partnership with NHS Highland, Highlands and Islands Enterprise, The University of Aberdeen Medical School, LifeScan Scotland Ltd, the Centre for Health Science Company, UHI, the prospective University of the Highlands and Islands, Robert Gordon University, Stirling University and the Scottish Ambulance Service, the day included plenty of interactive activities to give the young people a flavor of the variety of jobs available in the healthcare sector and the diversity of skills required.

Pupils were able to talk and spend time with health professionals to hear first hand about their individual experiences of working across a wide range of roles.

With a choice of twelve themed workshops to choose from including Pharmaceuticals Nursing and Midwifery, Dental Hygiene and Therapy, Dietetics and Clinical Skills there was plenty of opportunity for young people to learn in more detail about specific careers during the four morning and afternoon workshop sessions.

All sessions were very interactive and a big hit amongst pupils as they tested their skills on a range of special simulation equipment and took part in role play activities under the helpful supervision of clinicians and health staff.



Above: Sophie Frost from Nairn Academy with Consultant Surgeon Mr Kevin Baird

The young people were able to meet Professor Ian Megson, director of the UHI Department of Diabetes and Cardiovascular Science, and members of his research team, and see a demonstration by Isobel Madden, UHI joint Head of the School of Oral Health Science, where dental professionals are honing their skills in a state-of-the-art clinical facilities and phantom

heads training room. Dr Fiona Skinner, academic leader of the UHI Faculty of Health, was also on hand to talk about courses and training opportunities available.

Throughout the day an exhibition area was open featuring lots of practical information on the qualifications required for different jobs, how to access training, career prospects and pre-registering as a student. Members of staff from each of the agencies were joined by career advisers to answer questions and provide advice.

Councillor Bill Fernie, Chairman of The Highland Council's Education, Culture and Sport Service very much welcomed the opportunity the event gave pupils. He said: "This is a great chance for young people in Highland to decide whether a career in health or medicine is for them. Many might consider becoming a Doctor or a Nurse but what today has really highlighted is the very varied range of different health careers available. I'm sure everyone taking part will now be much clearer on their options and I wish all the young people well in their chosen careers."

Pamela Cremin, Workforce Planning and Development Manager with NHS Highland said: "This event has been a fantastic opportunity for young people to understand and experience the diversity of NHS Careers and learn first hand from a range of NHS Highland clinicians, who have found the time in their busy and demanding schedules to provide interactive and hands on workshops across a number of healthcare settings, that will inform and encourage young people to consider a career in health in the future."

Lindsey Moodie, Business Development Manager for the Centre for Health Science Company, is delighted that the event was hosted at the Centre for Health Science. "The Centre is an excellent venue for this type of event and we are delighted that so many of our partners participated in the event. With our state-of-the-art teaching and training facilities the pupils were able to get a real hands-on, practical experience and will hopefully go away with a great understanding of the opportunities that exist in the health / life sciences sector."



Above: Jenna Dole from Dornoch Academy (L) and Lauren Sinclair from Wick High School with Nursing tutor Katherine MacKenzie

## COPD Support Group for Invergordon

Chronic Obstructive Pulmonary Disease (COPD) can make those affected, whether they are someone with COPD or their carer, feel isolated and cut off from normal day to day life.

Support groups can play a key role and evidence has shown that support from your peers can be really beneficial in chronic conditions. The latest group to be set up in Highland is the 'Grumpy Gaspers', a support group for those affected by COPD in the Invergordon area.

Michelle Duffy, a COPD Rehabilitation Nurse for NHS Highland, explains the need for a support group in the area and what they do. She said: "There is a high incidence of COPD in the Alness and Invergordon area. The most common symptom is breathlessness which can be very distressing. People feel short of breath on sometimes the least bit of exertion. This can make it difficult to get out of the house and carry on with their usual activities.

"People can often feel as though they are the only ones who are affected and, until now, there has been no form of support group."

Michelle conducted a survey during the summer to gauge interest for a support group and was impressed with the positive response she received. The first meeting of the group took place in August where the group decided how they wanted to take things forward, which included becoming affiliated with Chest, Heart and Stroke Scotland (CHSS) who will provide support and advice to the group.

George Gray, from Invergordon, is Chairperson of the Grumpy Gaspers. He has had COPD for a number of years now and is the first to admit that it affects everything he does.

He said: "The breathlessness takes me by surprise. I find it hard to walk very far; I'm short of breath after 30 yards.

"I hate having to ask for help and try to do as much as I can but some things are just virtually impossible now. I really enjoy the garden and although I still love to get out in it I find it hard to bend down or raise my arms above my head."

George explains how thankful he is that he can drive as it means he can get out and about; he even looks forward to shopping but does find that he is limited to what he can carry as carrying heavy bags is hard for him.

He goes on to say how he has had to learn to adapt over the years and now takes his time in doing things although admits it was very hard for him to learn to slow down but he is getting there.

George is delighted and grateful that the support group has been set up as it means meeting others with the same condition and being able to support each other even if it's just a chat over a cup of tea.

He said: "I find it very supportive to have the Grumpy Gaspers. We all feel much better having met others from the same area with the same condition.

"Our group sessions last about 90 minutes, we have an educative session of about half an hour that gives us tips on how we can cope better with symptoms as well as having a general health discussion.

"We occasionally have light exercise which can help our condition, we all find this quite enjoyable and feel safer doing it within our group as we can all relate to how we are affected and feeling.

"COPD changes your life but knowing that the support is there and that you are not alone makes a huge difference."

The Grumpy Gaspers meet fortnightly in the Day Hospital at Invergordon County Community Hospital from 3-4.30pm. The next meeting is on Thursday 26<sup>th</sup> November.

### Islay Hospital Donation



Congratulations to Mr and Mrs Campbell, Bowmore who celebrated their Golden Wedding Anniversary on 2 October. Family and friends attending the celebration party, in Bowmore Hall, were asked not to bring gifts but to make a contribution towards the purchase of an Oxygen Concentrator for use in Islay Hospital. Thanks to the generosity of everyone, the magnificent sum of £1200 was raised. The photo shows Dr Jean Knowles, Clinical Director receiving the cheque on behalf of hospital staff, from Mr and Mrs Campbell. Also in the photo are Dr Chris Abell, Depute Ward Manager Steve White and Dr Sandy Taylor.

## Mouth Cancer Action Month

NHS Highland is working with local pharmacies in Caithness and Sutherland to encourage people to seek professional help if they notice any changes in their mouth which could be early warning signs of mouth cancer.

These include ulcers, which do not heal within three weeks, red and white patches in the mouth and any other unusual changes in the mouth.

In the UK, mouth cancer is diagnosed in more than 5,000 people annually and kills almost 2,000 people each year – that is one death every five hours – and this month is Mouth Cancer Action Month.

The campaign, which features the tagline 'If In Doubt, Get Checked Out' and runs throughout November, is urging people to visit their GP, dentist or pharmacist for oral screening.

Professional check-ups and regular self-examinations are the best route to early detection of mouth cancer and early diagnosis saves lives, improving survival chances from just half of cases to more than 90%.

Mouth Cancer Action Month also aims to raise awareness of a disease which has remained under-reported for too long. The campaign points out the importance of prevention and explains that lifestyle choices can help minimise risks.

NHS Highland Senior Dental Officer, David Babb, said: "Three-quarters of cases are linked to tobacco and alcohol, so it is important that

smokers are encouraged to quit and alcohol is drunk in moderation."

"Yet early diagnosis can make a real difference, so make sure you examine your mouth as often as possible and, if in doubt, get it checked out professionally."

Clare Morrison, who is Lead Pharmacist for North Highland Community Health Partnership, said: "Community pharmacists can provide advice and treatment for mouth ulcers.

"They will be on the look out for anyone with warning signs of mouth cancer and can refer these patients on to their dentist or GP.

"Pharmacists can also provide advice and treatment to help people to stop smoking, which is one of the best ways to prevent mouth cancer."

Anyone wanting local support with giving up smoking should call the Highland Smoking Cessation Service on 0845 757 3077.

For those living in Sutherland, alcohol advice and information is available from the Alcohol and Addictions Counselling Service in Tain on 01862 894097 and those in Caithness should contact Alcohol Focus Scotland on 0800 7314314. Alternatively, people living in either county can ask their local community pharmacist.

And, for help and advice on dental registration, contact the NHS Highland Dental Helpline on 0845 644 2271. More information is available on the website at [www.mouthcancer.org](http://www.mouthcancer.org).



Pathology: the heart of modern healthcare was the theme for the 2<sup>nd</sup> National Pathology Week, which took place November 2<sup>nd</sup>-8<sup>th</sup> 2009. During this week public events throughout the country focused on the central role of pathology in the prevention, diagnosis, treatment and monitoring of all types of heart disease.

At Raigmore Hospital on Thursday 5<sup>th</sup> November the Department of Pathology had a display in the main entrance



to the hospital aiming to increase the awareness of the risk factors for ischaemic heart disease, including the effects of smoking and high cholesterol on our coronary arteries. The display coincided with the fruit and vegetable stall held every Thursday, promoting the need for healthy eating.

This event was a great success! The visitors to the display found it informative and interesting.

National Pathology Week is co-ordinated by the Royal College of Pathologists.



## Vulnerable Families Pathway Project

NHS Quality Improvement Scotland (NHS QIS), on behalf of the Scottish Government, is leading the development of a multiprofessional and multiagency framework for pregnancy and early years (0-3) to implement or enhance local pathways of support that meet the additional needs of children and families.

A multi-disciplinary steering group is overseeing the project and working groups took forward specific areas of work. The working groups were:

- Common language/approach to assessment
- Pregnancy
- Early years

A combined working group then met to ensure that a consistent approach had been taken and tested the first working draft of the framework against real-life scenarios. The draft framework will be widely distributed in mid-March 2010 for a three month consultation period.

Further information can be found on the NHS QIS website ([www.nhshealthquality.org](http://www.nhshealthquality.org)). Go to Our Support Services, Practice Development, Vulnerable Families Pathway Project. Or contact Mairead Hughes, Programme Lead ([Mairead.Hughes@nhs.net](mailto:Mairead.Hughes@nhs.net) / 0131 623 4286) or Joanne McDonald, Project Co-ordinator ([Joanne.McDonald@nhs.net](mailto:Joanne.McDonald@nhs.net) / 0131 623 4350) for further information.

## Moderator of Church of Scotland visits Caithness General

The Moderator of the General Assembly of the Church of Scotland visited Caithness General Hospital in Wick last month as part of his week-long visit to the Caithness Presbytery.

The Right Reverend William Hewitt and his wife, Moira, who is a pharmacist, met the hospital chaplains and the Pastoral Partnership Team over lunch in the hospital canteen.

The role of the Pastoral Partnership Team is to ensure the spiritual focus of care is brought into the holistic approach to all care.

The Moderator and his wife were then given a guided tour of the wards and departments at the hospital, during which they had the opportunity to speak to patients and staff.

Caithness Locality Manager, Pauline Crow, said: "We are very pleased that the Moderator was able to find the time to come and meet with us.

"It was a good opportunity to show him how a rural general hospital works and to discuss the wider issues around working in a remote and rural location."

And John Crow, who is Moderator of Caithness Presbytery and one of the three chaplains at Caithness General Hospital, said: "The Moderator's visit was very encouraging for the hospital staff and the people of Caithness."

During his week in Caithness, the Moderator visited local schools and churches and meeting local dignitaries and representatives of a wide range of local groups and organisations, including Caithness and North Sutherland Regeneration Partnership and North Highland Initiative.

He also visited the Youth Rock Café in Wick and the Castle of Mey.

A spokesman for the Church of Scotland said: "The Moderator has a number of presbytery visits during his or her year as Moderator of the General Assembly of the Church of Scotland.

He said: "The Rt Rev Hewitt visited Caithness General Hospital to thank the staff there for all their tireless efforts. He often says that people, such as nurses, never get the thanks they deserve and he just wanted to say well done.

"Visiting hospitals is also a way of spreading the word and extending care and support to both patients and staff."

The spokesman added that the Moderator was a former hospital chaplain and hospice chaplain.



*Above: The Moderator is pictured with some of the people he met at Caithness General Hospital.*

# Letters to NHS Highland



"After 71 years of wonderful illness free robust health in March this year I hit the buffers, a colonoscopy had shown a cancerous growth. I now would appear, at the moment, to be free of cancer!

I would like, through you, to thank the following for saving and extending my life - Dr Finlay, Riverbank Practice; The Highlands and Islands Surgical Team; The Oncology Team and the wonderful nurses of Bignold Ward.

Through my wife's family I have had experience of several hospitals in London and Kent. The service that you provide in the Highlands and Islands is far, far superior."

**A Patient from Caithness**

"I recently had a TURP procedure at Raigmore Hospital after being referred by my GP at Culloden Medical Practice. I know that we live in a climate that makes it easy to complain and the NHS has come in for some criticism in the press and media in recent times.

However, I feel it is important to pass on my thoughts and feelings after my first experience as a patient in a hospital as an adult.

I was kept well informed at every step of the process and was reassured by the information. I was admitted to 5C and from the moment I arrived I received attention from both nurses and doctors on the ward and all staff were pleasant and informative pre and post operation.

The care and attention I received was excellent from beginning to end, the food was satisfactory and, after vacating my bed, I waited in the ward for my lift and within minutes the bed was stripped and thoroughly cleaned ready for the next patient.

I cannot praise too highly my own GP and all the doctors, nurses and staff in the outpatient department and especially on the ward. I would like to thank Mr Borgaonkar and his team for carrying out the procedure. I cannot say I am looking forward to being in

hospital again, however, should this be necessary I am reassured by my previous experience."

**A Patient from Inverness**

"I'm writing rather belatedly to thank you and the staff at Mackinnon Memorial for your care of my nephew, me and my sister. I know it was a brief time but you and your team were fantastic.

Looking back over that day and the following week does bring back some horrible memories but there are some nice memories amongst all the worry and upset. These were provided by your sensitive, caring and appropriate actions and those of with nurse who sat with me.

My sister and I were both very touched to hear you had contacted Glasgow to check up on my nephew.

I know that in some ways you were 'just doing your job' but I still think it needs to be said that you weren't just doing your job, but were doing them very well!"

**A Patients Relative from Shropshire**

## NHS Highland looking good in pink

Staff from across NHS Highland had 'pink' days at the end of October as part of Breast Cancer Campaign's Wear it Pink day.

Here are just a few of the photos from staff doing their bit on the day...



Left: staff from Mid Argyll



Right: Staff from Personnel, Raigmore



Left: Staff from Dunoon

## What's on... November



**What: Inverness Inter Faith Group**

**Who:** Open to all

**Why:** Launch of Inverness Inter Faith Group with an inspiring Lecture on "The New Context of Spiritual Care in the NHS Today" by Geoff Lachlan MBChB FRCSEd MA (Religious Studies), Health Development Officer For the Spiritual Reflections Project

**Where and when:** Monday 7th December, the Lecture Theatre, Centre for Health Science, Inverness 6.30pm for 7pm for a 40 minute presentation

**Need more?** please contact Dr T Reddy, Consultant Paediatrician, Chair, Inverness Inter Faith Group. Email: [t.reddeppa@nhs.net](mailto:t.reddeppa@nhs.net) or Tel: 01463 705687

### Cabinet Secretary to review NHS Highland's performance

Cabinet Secretary for Health and Wellbeing Nicola Sturgeon will lead this year's Annual Review of NHS Highland's performance.

NHS Highland Chair Garry Coutts said: "The Annual Review is an opportunity to showcase some of the achievements of the past year including faster treatment for patients. It also gives us an opportunity to explain how we are preparing to meet next year's challenges of even shorter waiting times and continue to deliver frontline health services to our local communities. People are welcome to ask us questions about anything health related. We will get through as many questions as possible on the day and every question will be answered in writing."

The Annual Review is being held in the Centre for Health Science in Inverness on Monday 7<sup>th</sup> December starting at 2.15pm prompt. Video conferencing links are being set up in Wick, Golspie, Fort William, Skye and Lochgilphead. For information on the live web cast or to register your interest, please contact Carol Duncan on 01463 705529 or email [carol.duncan3@nhs.net](mailto:carol.duncan3@nhs.net)

### LISP

#### Language Improvement Service for Professionals

Improve your spoken English and public presentations

LISP exists primarily to help to reduce clinical risk from poor comprehension of instructions between health professionals, but the personal benefits of effective communication are obvious.

Personal tuition  
Contact  
[donaldboyd@nhs.net](mailto:donaldboyd@nhs.net)

### NHS Highland Learning Partnership Agreement Managers Information Pack

NHS Highland's Learning Partnership Agreement (LPA) Steering Group have produced a Managers Information Pack in support of this agreement.

The pack reproduces in full the Learning Partnership Agreement (LPA) and the Union Learning Representatives (ULR) Charter, it gives information on who Union Learning representatives (ULRs) are, what ULRs do and what National Legislation and NHS Highland PIN Policies cover their activities. It describes the terms of reference for the Steering Group and gives an indication of future plans surrounding the LPA, plus edited results of the Learning Survey.

To view the Managers Information Pack please see the Well Informed section on the intranet.

Please contact any of the Steering Group members for further information, a list of these is below. They are all on NHS Mail except those where a separate email address is highlighted.

Louise Corbett, RCN ULR; Muriel McNab, RCN ULR; Janette McQuiston, Unison ULR - [highunison@btinternet.com](mailto:highunison@btinternet.com); Philippa Clark, Unison Lifelong Learning Fieldworker - [P.Clark@unison.co.uk](mailto:P.Clark@unison.co.uk); Denise Thomson, Unite ULR; John Evans, Unite ULR; Judith McKelvie, Head of Learning and Development; Michelle Williams, Learning and Development Facilitator.

## SURVEYING BUILDINGS – THAT CAN'T BE RIGHT? WHAT ELSE DOES THE HIGHLAND HEALTH SCIENCES LIBRARY STOCK?

There is a possible tendency to think that the Highland Health Sciences Library only supports clinicians. This is not so as one of the remits of the library is to support all healthcare staff in NHS Highland. This includes the acquisition of materials which you may not expect the Library to hold.

Thus for Estates staff we have books on building surveying and working with asbestos



For Catering staff we have materials on food safety



We also have books on British Sign Language

There are many more surprises in store at the library – why not pay us a visit? We are in the Centre for Health Science Building, or check out our online catalogue (<http://libcat.stir.ac.uk>) – regular updates on new item purchases are at: <http://libcat.stir.ac.uk/search/ftlist%5Ebib03>, our NHS web site (<http://www.is.stir.ac.uk/nhs/index.php>), or contact us by phone 01463-255600 (ext. 7600).

Rob Polson ([rp5@stir.ac.uk](mailto:rp5@stir.ac.uk)) Highland Health Sciences Library.

### 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](mailto:smokefree@hnb.scot.nhs.uk)**
- **[Givingupsmoking.org.uk](http://Givingupsmoking.org.uk)**
- **[Quitnet.com](http://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](http://www.elib.scot.nhs.uk)  
Have you registered yet?