

Team Update



Issue 68

April / May 2010

www.nhshighland.scot.nhs.uk

Quality care to every person, every day NHS Highland Medical Director outlines the big challenge facing us all



What does quality care mean to you? That's the question I've been asking all staff to consider as part of a survey to support our Quality and Patient Safety Framework. With the whole organisation focused on identifying savings that protect or improve patient outcomes this piece of work could not come at a better time. The Board has adopted the mantra "Efficiency without quality is unthinkable. Quality without efficiency is unsustainable". Is it possible to find examples of care that is both efficient and of high quality? The answer, fortunately, is yes.

Put simply quality care works. How would you rate the quality of healthcare that did not make your life any better? And if it did not result in an improvement would you not come back to try something else? Quality care is therefore effective and efficient. Quality care is also safe. The massive effort that we are all putting in to reducing healthcare acquired infection and thus

saving patients from harm is a prime example of an improvement in quality. It also reduces hospital stays and the cost of treating the symptoms of infection which makes it more efficient. Quality care also means putting the patient at the centre and listening to what they say matters to them.

The basis of our Quality and Patient Safety Framework is work done by the Institute of Medicine which lists six key foundations of quality care: effective, efficient, safe, timely, person centred and equitable. Our focus on patient centred, effective and safe is based on a belief that if we achieve these three ambitions then our care will also be efficient, timely and equitable. How effective, safe or patient centred is care that is too late?

The Quality and Patient Safety Framework will help us to identify areas for improvement and potential solutions.

Writing the Framework is just the first step we now have to ask you to help us move on by giving us your examples of quality care. These examples will help us to ensure that right across our area, from Caithness to Campbeltown, patients are benefiting from the best examples of quality healthcare in Highland. We have therefore designed a short electronic Survey to capture your views. It should only take a few minutes to complete so I would encourage as many people to access it as possible – your input really matters. The link to the online quality survey can be found under staff announcements on the home page of our intranet or type in http://www.surveymonkey.com/s/Quality_Strategy_Survey If you have not got access to the intranet you can ask your General Manager for a paper copy or get in touch with Susan Rose at susan.rose1@nhs.net or by phone on 01463 704781.

The Quality and Patient Safety Framework is part of the Strategic Framework approved by the Board earlier this month (April). This sets out how NHS Highland will meet the challenge of improving and speeding up care while dealing with much smaller budget increase and rising costs. The savings target for this year is £14.7m. It affects us all. You can find the document on the intranet under Well Informed.

Please see page 2 to read extracts of responses to the survey and about how an Audit Scotland report has highlighted the quality and efficiency of the orthopaedic service in Highland.

Inside...

3	Telehealth
4	Chronic Pain Service
7	Skye and Lochalsh
11	Staff Awards
13	Research and Development
14	Getting Greener
18	What's on

Quality quotes...

“we all have a responsibility to direct individuals around the hospital, offer a smile, hold a door for people on crutches”

“more link up between health and social services to reduce the delay that patients experience prior to discharge home with care packages or onto 24hr care provision”

“avoid situations where a patient attends the same hospital on different days in the same week for appointments”

“ensure all staff have access to motivational interviewing techniques to ensure that patients journey is not marred by a blame culture which dis-empowers them”

“clear signage around the hospital”

“remember there may not be a pharmacy open when a patient goes home on a Friday evening for them to get meds for the weekend”

Audit Scotland report highlights orthopaedic efficiency and effectiveness

A recent Audit Scotland report focussing on efficiency and effectiveness has shown that NHS Highland is performing exceptionally well on orthopaedic services.

And Consultant Orthopaedic Surgeon Kevin Baird has praised all the staff involved for their impressive achievements.

The full report is available at www.audit-scotland.co.uk/docs/health/2010/nr_100325_orthopaedic_services.pdf but selected highlights include:

- NHS Highland has the best survival rates following treatment of hip fractures at 30 and 120 days, and the lowest readmission rates for these procedures in the whole of Scotland
- Costs of knee and hip replacements are among the lowest in Scotland
- We have the highest activity rate per surgeon in Scotland for elective and emergency procedures, and our emergency admission rate per head of resident population is also the highest nationally
- The overall cost of index elective and day case procedures in NHS Highland is lower than for any other board in Scotland
- Orthopaedic throughput per bed is well above the Scottish average, despite the rural and visiting populations we serve and the consequent logistical challenges of early discharge
- Only GGHB matches Highland for overall numbers of inpatients and day cases treated per permanent member of medical staff, an indicator of efficiency

Mr Baird said: “It must be stressed that these achievements reflect the combined efforts of the entire orthopaedic team – ward nurses, theatre staff, pre-admission team, clinic receptionists, cleaners, anaesthetists, secretaries, porters, radiology, waiting list staff, outpatients staff, physiotherapists, labs and clinical support, occupational therapists, orthotists, patient transport and surgeons – to mention most of them.

“The hard work, dedication, professionalism and goodwill put in by all staff have delivered a first class service.”

Telehealth Project makes life easier for North Highland patients

Kidney patients in the far north should soon experience shorter waiting times for local appointments to see their consultants, with fewer outpatients having to make the 200-mile round trip to Raigmore Hospital in Inverness.

Video conferencing is already widely used by NHS Highland as a way of connecting health care staff who work in different places. It is also used for some patient consultations between Inverness and the Western Isles.

And NHS Highland has recently funded the installation of mobile video conferencing equipment in the main renal unit at Raigmore and the satellite renal unit at Caithness General Hospital in Wick.



Above: Caithness Renal Unit Charge Nurse Bruce Honeyman shows patient Eddie Harper how to work the video conferencing.

It will enable patients to receive the care they require as close to their own homes as possible, thus saving the time and inconvenience of travelling, and will mean the consultants can see more patients in the available time, which will reduce waiting times.

NHS Highland renal consultant, Dr Robert Peel, said: "The number of people in the Caithness area who need dialysis or who are referred to see a renal specialist at the monthly outpatient clinics continues to grow and these clinics have become very busy. This means it takes longer to get a local appointment and some patients are now travelling to attend clinics in Inverness."

Renal consultants from Raigmore will continue to hold monthly clinics at Caithness General Hospital to serve the growing number of outpatients in the area and to conduct regular reviews in person with dialysis patients. Every other month, these reviews will take place over the video link, using a state-of-the-art mobile unit that can be positioned alongside the dialysis stations.

Dr Peel said: "In this way, it should be possible for more outpatients to be seen locally during the monthly clinics, with shorter waiting times for appointments.

"Other health professionals, such as dietitians, pharmacists and physiotherapists, are closely involved in the care of Wick renal patients, and look forward to increasing contact with them by means of video conferencing."

The equipment will also enable nurses in Wick to discuss patients' treatment with the specialists at Raigmore during a regular live video link twice a week and at other times, whenever there is a specific medical need.

NHS Highland Head of eHealth, Bill Reid, commended the hard work of eHealth staff in bringing this project to fruition.

The link has been installed under the Competitive Health Services project, which has been set up with funding from the Northern Periphery Programme (NPP) of the EU to look at how modern communications technology can be used to bridge geographical gaps between patients and health providers in sparsely populated areas.

This project aims to transfer well-established telehealth solutions between Finland, Sweden and Norway and Scotland, making the most of each others' experience to ensure a smooth transition.

The Scottish partner is the Inverness-based Centre for Rural Health (University of Aberdeen), which is working closely with NHS Highland to introduce improvements into the renal service in North Highland by making greater use of video conferencing.

The Northern Periphery Programme has funded exchange of knowledge and experience between the Norwegian and Scottish partners, including a visit to Tromsø in December 2009 by three key NHS Highland renal staff to observe the remote teledialysis service at first hand.

The Competitive Health project will evaluate the new service as it develops during 2010, with a focus on the benefits for patients in Caithness.

New Chronic Pain Management Service for Highland

NHS Highland's new Chronic Pain Management Service started in April this year with Northern Highland patients being able to access the service from both primary and secondary care.

Pain which persists for more than three months is very common. Across Europe it affects about one in five people. In the Highlands area approximately 26 500 adults have persistent pain and, as with any other long term health condition, there is considerable need for services which help people manage their ongoing pain.

The new service will be largely community based. Outpatient appointments will be held mainly at the County Community Hospital in Invergordon, and a range of interventional pain management procedures such as epidural injections, facet joint injections, lumbar and cervical radiofrequency rhizotomy, pulsed and cooled radiofrequency procedures will be done at the Lawson Memorial Hospital in Golspie under image intensifier control.

Dr John Macleod, is a Consultant Anaesthetist based at Caithness General Hospital in Wick and is also the Clinical Lead for the Chronic Pain Management Service. He said: "Patients who are referred to the service can expect an individually tailored assessment to determine their needs and there are a variety of treatment options available to them including a new multidisciplinary pain management programme, individual and group input from psychology and physiotherapy; medication management; and a broad range of interventional pain management techniques.

"The emphasis of the service will be on managing patients in a primary care setting while encouraging self management. We also have formal links with Pain Association Scotland – a voluntary sector organisation which provides support for chronic pain patients throughout Scotland.

"The team of professionals we have working in the service are all specialists in the management of persistent or chronic pain. The aim of the service is to reduce the impact persistent pain has on an individual, by working with them we can help them get back to doing the activities that they value and enjoy."

Joining Dr Macleod, who was previously Lead Clinician for Pain Management Services and Anaesthetics at Sandwell and West Birmingham NHS Trust in the West Midlands, is lead physiotherapist Catherine Plant who comes from Birmingham where she worked previously as a consultant physiotherapist and Lecturer at the University of Birmingham. Jacqueline Brooker-Millburn has joined the team as nurse manager, and will be known to many of the Raigmore staff from her previous role as Acute Pain Nurse Specialist. Jackie has previously worked in chronic pain in Glasgow and Newcastle. The service also benefits from the input of Dr Rachel Atherton, Clinical Psychologist, who previously worked in Nottingham at a specialist unit for patients with chronic back pain.

The setting up of this service, which was previously a very limited service based within secondary care, is the result of a two year development project lead by Dr Ian Bashford, NHS Highland's Medical Director.

Managing Chronic Pain: How psychology can help.

Clinical Psychologist, Dr Rachel Atherton, has worked for NHS Highland since January 2009 and works with the Chronic Pain Management Service four days a week.

She said: "Many people who are referred to our service wonder, '*How could psychology be relevant for someone with a chronic pain condition? After all, pain is a physical problem isn't it??*' Of course, this is right, in that sensations of pain are very real, and often very unpleasant: Pain is NOT 'all in the mind'.

"However, many people who have long term pain find that over time, their pain begins to have an impact on their feelings and quality of life. It is quite common for people to feel depressed or low in mood, or worried about what the future may hold. Other common worries are about whether certain activities may make things worse, and this sometimes leads people to limit what they do, with the result that they can begin to feel as though they are missing out on some of life's day to day

pleasures. Other people may feel determined to carry on as normal, regardless of their pain, but may find that despite their best efforts they are gradually becoming more limited in what they can do on a good day.”

Dr Atherton explained that specific areas of work depend on an individual's need, but could include understanding what happens when we have persistent pain; helping tackle fears about activity and gradually reintroducing valued activities; developing relaxation skills; learning how to deal with worries about pain; overcoming low mood; improving sleep patterns; developing coping skills; and learning how to manage flare-ups of pain.

Dr Atherton said: “As part of the pain management team psychologists can help people with persistent pain learn to manage their pain, improve their quality of life and reduce distress.”

Patient Experience Project

Patients recently discharged from hospital asked to help with joint project

On 15 March 2010 the Independent Advice and Support Service (IASS) and Argyll & Bute Community Health Partnership launched a joint project to look at the experiences of patients discharged from hospital in the last twelve months.

The project wants to hear from any patients living in the Argyll and Bute area who were discharged from any hospital in the last twelve months and are willing to share their experience. Based on the feedback received, the partnership aims to look at the results with a view to improving people's experience when they are discharged from hospitals.

IASS was established in response to the restructuring of the Local Health Councils, supported by Citizens Advice Scotland, and funded by local National Health Service Boards. IASS is available for anyone who uses the NHS and aims to support patients, their carers and families in their dealings with the NHS and other matters affecting their health.

IASS is a free, confidential, independent and impartial service that can help people who require advice and help on a range of issues that can have an impact on health, assistance with identifying and exploring options to raise concerns about NHS services, and provide information on how to access health and community services that offer additional support for an individual's health care needs.

Jose Walker, IASS Worker based at the Citizens Advice Bureau office in Lochgilphead, said: “We are delighted to be working with Argyll & Bute Community Health Partnership on a project that affects anyone who was admitted to hospital for whatever reason. How people are discharged and their experience at this stage in their care is crucial to promoting health and well being.

“We would like to hear from anyone living in Argyll and Bute who has experience of being discharged from any hospital during 2009. You can write to us or if you wish we may be able to arrange to meet you in person. What you share with us will be treated with the strictest confidence.

“Please feel free to give me a call on 01546 605556, email me at j.walker@abcab.org.uk or write to me at Argyll and Bute Citizens Advice Bureau, Riverside, Oban Road, Lochgilphead, PA31 8NG.”

Caroline Champion, Planning & Public Involvement Manager for Argyll & Bute Community Health Partnership, said: “Argyll & Bute Community Health Partnership welcomes the opportunity to work with the Independent Advice and Support Service.

“For a while now, we have heard anecdotal stories about what has happened to patients when they have been discharged from hospital. Some of these are good, but others less so. This project will enable us to start documenting these stories and really get our patients involved in helping us to improve how they experience health services.

“I would encourage anyone who has been in hospital within the last twelve months to share their experience with us by getting in touch with Josie. Argyll and Bute CHP is committed to learning from the people who use our services, so together we can continue to make the improvements necessary for all our patients.”

Partnership between NHS Highland and charitable sector leads to improved service for wheelchair users

An innovative partnership between NHS Highland and ILM (Highland), an Alness based charitable organisation, has led to an improved service for wheelchair users across Ross-shire, Sutherland and Caithness.

The joint initiative was established at the beginning of April 2009 for an initial two year period as part of the NHS Highland's Wheelchair Services strategy of "shifting the balance of care" and providing services as close to people's homes as possible.

ILM (Highland), which runs the Handyperson service for Sutherland and Ross and Cromarty, have broadened the service to take on the delivery, uplift and repair of wheelchairs across Sutherland, Caithness and Ross-Shire. Over the past year the service has undertaken over 450 separate trips across the area.

Bill MacKenzie Chairman of ILM welcomes the initiative, he said: "The handyperson service is a great service helping elderly people and those with a disability with small jobs in their homes. It makes a lot of sense to use this facility to provide a more effective service for wheelchair users at the same time.

"Wheelchairs can now be repaired at the home of the user rather than returning them to Inverness for repair, a greatly improved service for the user. In addition, when new wheelchairs are delivered to the user's home, handyperson staff spend time with the user setting up the wheelchair to ensure they are comfortable with the new equipment as well as demonstrating its safe and correct use.

"We welcome the opportunity to work in partnership with the Wheelchair Service department of NHS Highland, particularly as it helps them deliver one of their key strategies."

Andrew Hulse, NHS Highland's Project Manager for Wheelchair Service Modernisation Project Manager, is pleased that the first year of this initiative has been so successful. He said: "The Wheelchair Service looks forward to continuing to work with ILM Highland over the next twelve months. The work they carry out has become an invaluable way of offering a quality repair and delivery service to those patients who live in Northern regions of NHS Highland."

Supporting Healthy Working Lives - Fit for Work Service

NHS Highland's has recently launched its 'Fit for Work' Service for smaller medium sized enterprises, which aims to improve health and support individuals to remain in work or return to work.

Employees working for smaller medium sized enterprises can be referred to the service in a number of ways including self referral, GP referral, and referral from another health professional or from a partner organisation.

Within two days of referral being received they will be contacted by an NHS Case Manager. An initial assessment will be given within five working days following a telephone appointment with a Case Manager.

The Case Manager will then work with the employee to design and agree their own personal action plan and any agreed therapeutic intervention will be accessed and delivered. The programme can last from 2-12 weeks depending on individual needs and, once completed, the Case Manager will contact them to review progress and discuss return to work plans.

If you are of working age and employed by a small to medium enterprise (less than 250 employees), are based in Scotland and have no access to occupational health / employment assistance programme and are experiencing a level of stress or anxiety that you are struggling to cope with or have issues with pain etc. you are eligible to be referred to the service.

For further information on the service please contact Eileen Webster, Fit for Work Case Manager on 01463 706794. To make a referral please call 08000 192 211.

New group to oversee redesign of NHS services in Skye and Lochalsh

A new group is being established to help shape the future of local health services in Skye and Lochalsh.

This follows recent work with patients, carers and other local people, including a survey, focus groups and a workshop looking at what local people consider to be the main priorities in planning services for the area.

Mid Highland Community Health Partnership (CHP) – the part of NHS Highland covering Skye, Lochalsh, Ross, Cromarty, West Ness and Lochaber - is now setting up a local reference group, made up of Highland councillors, community councillors, statutory and voluntary partners, clinical staff, professional advisors and NHS Highland managers.

Members of the group will consider the health needs of local people and use their combined expertise to plan for the future.

Their task will be to look at the priorities identified during the earlier work with patients, carers and other local people. These included the importance of working towards better integrated community services through partnership working between different service providers, exploring the potential for reaching some specialist services remotely through new technologies, known as telehealth, and the importance of local hospital care.

The group will also have an important role in ensuring that local people are kept informed and are able to feed in views as the work progresses.

They will develop an action plan for service change and improvement, and will ultimately oversee the implementation of the final plans.

Mid Highland CHP General Manager, Gill McVicar, said: “The CHP is committed to involving patients, carers and the public in its work.

“We look forward to working with the reference group, which will have the difficult task of getting to grips with the health needs of local people, to ensure we provide the best possible services for the people of Skye and Lochalsh by making the best use of the available resources.

“Each member will bring particular knowledge or expertise to the group. They will also be able to draw upon and consult with groups, organisations, networks or individuals when they feel it is relevant and members may be co-opted onto the group for specific issues.”

The first meeting of the Skye and Lochalsh Services Reference Group will be held on May 10 at the MacKinnon Country House Hotel at Kyleakin on Skye.

Mental Health Events

Argyll & Bute CHP held a series of briefing events during March to provide members of the public and staff with an opportunity to find out about the progress that has been made in the design of future mental health services for the Argyll and Bute area.

A total of 22 events/meetings took place across the CHP with approximately 269 people (184 members of the public and 85 staff) coming along on the day.



Extra breastfeeding support for new mums

A group of 12 mothers from the South East Highland area will be on hand to offer new mums help and support on breastfeeding after they responded to an appeal for mothers to train as breastfeeding peer supporters.

Those who responded to the appeal will be able to share their own experiences having breastfed their own children and, following a four-week training course, can now offer support to post-natal women after they leave hospital to help them breastfeed successfully.

NHS Highland Infant Feeding Advisor, Janet Kellock, said: "The response we received from our appeal was very good and we have found that all the women who have been in touch have been eager and keen to train as peer supporters and help to support other women who wish to breastfeed.

"Breastfeeding can be difficult and sometimes a friendly voice and correct advice is all that is needed to overcome a problem and these girls are the ones to do it. They've been through it and sharing their experiences with new mums who are maybe going through the same thing is invaluable."

The training has been delivered by Caroline Deacon, of the National Childbirth Trust, in accordance with public health guidance on improving the nutrition of pregnant and breastfeeding mothers and children.

The course involved four training sessions, each lasting four hours, with an additional six reflective sessions. The volunteers have also had to undertake all NHS Highland mandatory training and attend corporate induction sessions.

The support offered to mums by the volunteer peer supporters is in addition to the help and advice they already receive from their healthcare professionals.

Mrs Kellock said: "We already have a group trained in Easter Ross and further groups from Golspie, Wick and Fort William will start their training shortly so, as they progress, more mums in the NHS Highland area will receive support via this network."

She added that breastfeeding provided a baby with the very best start in life and also benefited the mother's health.

She said benefits for the baby may include



reducing the risk of developing obesity and diabetes. For the mother, they include a reduced risk of developing breast cancer and ovarian cancer.

The first meeting of the group is taking place in the Spectrum Centre coffee shop on Wednesday 14th April at 11am.

Anyone wanting more information or support with breastfeeding should contact NHS Highland Infant Feeding Advisors Janet Kellock or Karen Mackay on 01463 704842 or by email at Janet.kellock@nhs.net or Karen.mackay3@nhs.net.

Legal Correspondence What to do with it

Staff are reminded that correspondence relating to Legal/Complaint investigations, copies of Incident Reports (IR1/Datix Reports) and Police reports or medical reports prepared on a private basis should not be filed within Patient Health Records. These should be held in a separate file held by the Consultant/Department.

Requests for information under Freedom of Information should also be filed separately and not form part of a patient's health record.

For further information and guidance please contact Heather Campbell, Legal/Claims Officer on 01463 706816 or email heather.campbell1@nhs.net

Recording Clinic Procedures and Clinic Outcomes within Outpatients - April 2010

As part of the 18 Weeks Referral to Treatment (RTT) project it is critical that a system is developed to ensure accurate recording of the outcomes from outpatients to identify clock starts, stops and pauses. *So what does this mean?*

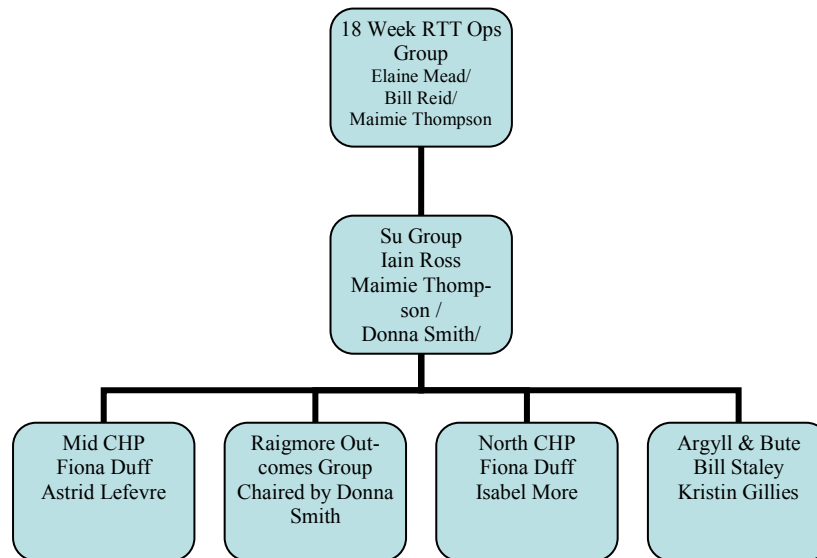
The 18 Weeks RTT Clock starts on receipt of referral but currently the end to end pathway can not be measured. Capturing clinic outcomes will allow the 18 Weeks Clock to start, stop, pause or be re-set. For example if a patient is seen in out patients and discharged then the clock will stop as the episode of care is complete. These are termed as “*Non Admitted Pathways*”. If the patient requires an admission then the clock will remain ticking – “*Admitted Pathways*.” If the patient’s condition dictates that a period of waiting is required (eg decision to operate) then the clock may be paused. Within our current ways of working this decision is not routinely captured electronically.

In addition, it is widely accepted that a significant workload of carrying out procedures is undertaken in the outpatient setting. Currently this is not recognised and therefore this project is also looking to address that.

The aim of the project is:

- To record clinic outcomes to allow the extraction of data from the Patient Administration System (PAS).
- To ensure that clinical procedures are recorded in outpatients

Project Structure



The process is already embedded in ENT, Renal and Neurology. Work is underway in some of the surgical specialties to develop specialty specific information in terms of procedures that are undertaken in outpatients.

This group is running in parallel with an e-health project group looking at how the data will be extracted, analysed and reported across the Directorates in Raigmore Hospital and the Community Health Partnerships (CHP). NHS Highland is required to submit this data Nationally on a monthly basis. This Report will be signed off by the Chief Operating Officer. The ultimate aim is that the data will be captured electronically, possibly via the Digital Dictation Project.

The roll out is now underway in General Out Patients (Medical - week beginning the 29th March 2010), with surgical specialties commencing from 12th April 2010. The time-table is being finalised for the remaining clinics, and will be published as soon as this is completed.

Lucy Briggs and Mairi Fraser are key contacts within the Main Outpatient Department. They will be keeping a communication log of all questions asked with a view to developing a Frequently Asked

Questions Sheet.

Implementation within Rural General Hospitals and wider CHPs will continue in parallel for visiting Consultants.

Awareness Sessions for Northern Highland

Awareness Sessions have been organized for those keen to know more. These sessions will provide all staff with an opportunity to find out more about the project, including early results and feedback from the initial stages of the project.

Coffee Lounge, Raigmore 12.00 – 12.30 and 12.30 – 1.00pm 10th, 13th 17th & 21st May 2010	Coffee Lounge, Raigmore 5.00 – 5.30pm and 5.30 – 6.00pm 17th May 2010
---	---

Communications

A section on the Intranet has now been set up and a range of Briefing Materials is being prepared; this will also be supplemented by national materials. Information is also available on 18RTT Notice Board (Outside 18 RTT Hub, 7th Floor, Raigmore Hospital) or by contacting Donna Smith or Maimie Thompson.

In addition a member of the Project Group will be happy to attend any regular meetings to provide additional information and support. A range of meetings have already taken place in Surgery & Anesthetics, Women & Children's, Medical and Clinical Directorates and the management meeting in Mid Highland CHP.

SAVE LIVES: Clean Your Hands

On 5 May 2010, the World Health Organisation (WHO) will again issue a global call to action inviting healthcare workers throughout the world to actively campaign for improved hand hygiene to reduce healthcare associated infections (HAI) and demonstrate their commitment to this important global movement.

Who Patient Safety launched this initiative on 5 May 2009, supported by more than 5000 hospitals and healthcare facilities from 125 countries which had already registered their commitment.

Now WHO Patient Safety aims to double the level of commitment to 10,000 by 5 May 2010 and Professor Didier Pittet, external lead for WHO's First Global Patient Safety Challenge: Clean Care is Safer Care, is encouraging all healthcare facilities to register their support now – www.who.int/gpsc/5may/register/en/index.html

HAI places a serious burden and significant economic impact on patients and healthcare systems throughout the world. WHO is committed to encouraging and supporting good hand hygiene everywhere. The simple task of cleaning hands in the right way and at the right time at the point of patient care can save lives.

A range of activities are being planned throughout NHS Highland to mark the day including staff manned hand hygiene stands will be set up in various locations across the area where staff, and members of the public, will be able to test their hand hygiene skills using UV light boxes as well as a range of staff and public leaflets on how to keep on top of hand hygiene.

NHS Highland is committed to the delivery of a consistent message in relation to hand hygiene and has recently developed a Hand Hygiene Awareness Training Pack with mandatory learning objectives. Over the next few months the pack will be trialled by a varied staff group from each of the operational units throughout Highland. On completion of this trial it is expected that the training pack will be delivered within the wards/departments by a member of staff from their own teams.

Valuing Service Awards



Above: Staff from the North Highland Community Health Partnership Awards ceremony



Members of staff in NHS Highland who have worked 20, 30 and 40 years for the NHS have been honoured at this year's Valuing Service Awards.

Three ceremonies were held across NHS Highland during March paying tribute to staff and thanking them for the huge contribution that they made to NHS Highland and other NHS organisations.



Above: Staff from the Argyll and Bute Community Health Partnership Awards ceremony

This is the second year these awards have been held, recognising NHS service across the UK.

Left: Staff from the Raigmore, Mid Highland and South East Highland Community Health Partnership Awards ceremony

Recognising Excellence - staff awards are back!

People across the Highlands and Argyll and Bute, are being invited to nominate individuals and teams for the NHS Highland Staff awards.

The Awards are now in their fifth year and were set up to recognise and celebrate the staff and volunteers who have gone the extra mile to improve health and patient care.

This year there are six award categories in total. The 'Better Health' category is for staff who have made a real contribution to helping people to improve their own health. 'Better Care' is for staff who have made changes which improve the quality of care for all their patients. The 'Better Value' category recognises staff whose good ideas help to ensure the best possible use of public money for patient services. There is a category for staff who have shown real imagination in changing and reshaping services for our patients, and one for Volunteers who play a hugely important role through the many roles they provide. There is a new 'Behind the Scenes' category for the many staff who provide essential services which are less visible to patients.

The awards are for any of the wide range of staff who work in the community, in clinics, health centres, hospitals, or any other setting, whether in clinical teams or in support services.

Anne Gent, NHS Highland's Director of Human Resources said: "Staff in the NHS are known for going that extra mile and we want to recognise the special efforts and innovation shown by NHS Highland staff. Although patients often tell us how much they appreciate the excellent care they receive, this is an opportunity to recognise some of the extraordinary characters."

Last year's Award winners included Virginia (Ginny) Murchison, a Dual Diagnosis Nurse based at New Craigs Hospital in Inverness. She was nominated for her tact and diplomacy, in negotiating with 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; Raigmore Hospital's Coronary Care Unit's (CCU) thrombolysis nurses and the paramedics of the Highland Scottish Ambulance Service, were nominated for their work, involving the thrombolysis service which has saved lives and brought care closer to the patient; and the night sister team of Linda Wares, Donna Sinclair and Allison Stewart, based at Caithness General Hospital in Wick, who were nominated for going that extra mile and holding the team together through challenging times.

Anyone can nominate an individual or team. Forms can be downloaded from our website or you can request one be sent to you in the post by phoning NHS Highland on 01463 717123 and asking for Communications. The closing date for entries is 6th August 2009.

The Best. Dressed

The new national uniform, which has been designed specifically for NHSScotland, will help patients easily identify members of staff and their respective roles.

Action was taken after research showed that patients, as well as staff, had difficulty identifying uniformed members of staff. This was due to the wide variety of uniform styles and colours currently in use. The Scottish Government also undertook a six-week public consultation.

From a total of 647 responses, almost 90 per cent agreed that there was a need for greater simplicity and consistency in uniforms. The new uniforms, which promote a national corporate image, will appear in all hospital wards and clinics in NHS Highland and will be phased in gradually across NHSScotland by the end of 2012.

Clinical staff involved in patient treatment will wear tunics in shades of blue with navy trousers. Senior Charge Nurses will wear navy blue. Facilities staff, including Porters, Catering and Domestic staff, will wear shades of green with navy trousers. Darker shades of green represent Catering and Domestic supervisors.

It is available in a wide range of sizes and lengths, including maternity sizes, and is branded with the NHSScotland logo. Polo shirts may be available as an alternative to tunics but this depends on the local policy for particular staff groups.

The new uniforms will provide significant savings for the public purse because they are purchased through a bulk-buying process via a single supplier.

This enables better quality garments to be purchased, which are more appropriate for staff needs. They are lighter and more flexible than existing uniforms and also have short sleeves, supporting staff in following the "bare below the elbow" policy which supports infection control, and air vents to help staff work in warm environments.

Donald Macleod, Charge Nurse based on Raigmore Hospital's busy Surgical Admissions Ward has had his new uniform now for the past two months. He said: "The new uniform is certainly a lot lighter and more practical. I have found it keeps you cool when it's warm but at the same time you don't feel the cold either.

"I think it will make it a lot easier for patients and members of the public to identify staffing roles making it consistent across all of NHS Scotland."



Above: Nursing Auxiliary Cynthia Wilson and Charge Nurse Donald Macleod wearing the new uniform

Apprentice Day

Yes it is that time again when I don my pin-stripe suit and bud tie and take on an apprentice for a day!

But seriously this is a good opportunity to spend the day with a young person who is part of the Youth Voice Xec Team. Originally developed in Highland Council and extended over the last few years to include strategic partners in NHS, The Prison Service, Northern Constabulary, Fire & Rescue Service etc, a young person shadows a senior manager for a day. The main objective is to share knowledge and understanding of the service and the views and needs of young people. This year our day involved a visit to the Palliative Care Network advising policy and implementation of Living and Dying Well, a visit to the prison for discussion of drug and alcohol issues and a guided tour and discussion with the Looked After and Accommodated Nurse about her role and the service provided from the Bridge. At the end of our day we met up with other apprentices and their 'Alan Sugars' to share our experiences which were wide and varied. I would recommend this to all senior managers as it provides a very different perspective on what we do, the difference we make, and the expectations of young people. My apprentice described parts of her day as 'cool' and got a real flavour of caring from all the professionals we met.

Thanks to all who contributed and made this such a worthwhile experience for this young person. If you would be interested in taking part next year and sharing your experience with a young person please do not hesitate to contact me.

Jan Baird, Director of Community Care



Launch of Helensburgh Carers Information Sessions

NHS Highland and Argyll and Bute Council have come together to launch a new style drop in clinic in Helensburgh to provide information and assistance for carers across the Helensburgh and Lomond area.

The first of these information sessions was held at the end of March in the Princess Royal Trust for Carers office in Helensburgh and carers had an opportunity to join an occupational therapy workshop.

Mavis Gilfillan, NHS Highland Clinical Services Manager for the Helensburgh & Lomond Locality, said: "My colleagues in the Council and I have been working together for some time to develop a plan where we could help deliver support and advice to the large number of carers in the Helensburgh and Lomond area.

"This came about through our normal day to day work with the public as we noticed that in many cases carers were too busy looking after other people to look after their own needs properly.

"We therefore started this drop in clinic to provide carers with an opportunity to pop in for some lunch, have a chat with one of our guest speakers and then pick up some advice on areas such as health, benefits and social work needs.



"This provides them with an opportunity to leave the caring environment for a couple of hours each month so that we can sit down and assess what their own needs are as well."

The next drop in clinics is Wednesday 26th May (physiotherapy workshop), taking place in The Princess Royal Trust for Carers offices at 17e East King Street, Helensburgh from 12.30pm-3.00pm. For more information please call 01436 673444.

Research and development day

Showcasing work already being done in Highland and inspiring future projects was the aim of this year's NHS Highland Research and Development Day.

Speakers looked at ageing, alcohol use, obesity and climate change as some of the major issues facing NHS Highland and highlighted some of the main areas where more research is required.



Keynote speakers included NHS Highland's Senior Health Promotion Specialist Fiona Clarke (pictured left) who spoke about obesity, outlining how 65% of Scottish adults are overweight or obese and in Highland 15% of primary 1 pupils and 27% of primary 7 children are overweight or obese.

Ms Clarke spoke about "passive" obesity and how easy it was for people to put on weight gradually because they ate just a little bit more than they needed and did just a little bit too little exercise every day.

Also speaking on the day was Professor David Harrison, Chair of Medical Research Scotland. Professor Harrison spoke about the importance of translational research, which is the turning of

basic research into new treatments and products for patients.

This is the third research and development day organised by NHS Highland's Research and Development Office, located in the Centre for Health Science in Inverness.

Professor David Godden, who is Research and Development Director at NHS Highland, said: "Research activity has grown steadily over the past 10 years, involving increasing numbers of doctors, nurses, allied health professionals and others. All of this is good news for patients living in the Highlands and Western Isles."

Research and Development Manager, Frances Hines, said: "The research and development day brings to the forefront some of the major issues facing the NHS in the near future.

"We wanted to show how NHS Highland is working with all of its partners, including the Universities of Aberdeen, UHI, Stirling and the West of Scotland, the NHS in the Western Isles, local government, local charitable organisations and local businesses, to address these issues in a creative and effective way.

"Research is the key to bringing change to how patients are treated and cared for, how disease is prevented and managed and how health problems are understood and dealt with."

Getting Greener - Travel and Transport

Do you think your drive to work takes unnecessarily long? Ever reflected on the fact that your input and gain from a meeting is a fraction of the time it took to travel? Fed up being overtaken by a cyclist whilst you are at a standstill burning fuel?

If the answer to one or more of these is Yes, then this month's article on Travel and Transport may be good for you – in terms of wellbeing, finances, working life, the Community and your personal Carbon footprint. Fret no longer, one or more of the 4 sections below may help you help yourself.

Must use the Car?



Better Driving

Last month we introduced the support of the Energy Saving Trust – and specifically the option to have short training sessions to help us all drive better. This

is free of charge and won't put a dent into our cash-strapped budgets. The BBC's Breakfast show did an item recently that identified up to a **20%** improvement through better driving habits. Quite a financial saving as petrol and diesel

hover around **£6 per Gallon!** – good news for your pocket, the Car and the environment too! Contact details are given at end of article. All your needs will be considered, whether your part of a small team or one of a hundred.

Spread the word to colleagues, friends and neighbours. The Energy Saving Trust would be glad to visit workplaces or communities to help us all drive better and more economically.

Contact them directly on www.energysavingtrust.org.uk/

Car Sharing

What else can be done if you need to travel by car? Simple, share the journey with others. Most of us agree its good to talk yet are reluctant to share the often short journey to work. One such website that seeks to link people together in car sharing is www.ifyoucareshare.com - allowing you to set preferences and limits without any issues; e.g. work colleagues only or gender. If you don't drive and want a lift – this is also an option. Registration takes about 2mins. Go on, just what does the price of travel have to be before you would consider this option?

Need to Travel?



Videoconferencing

Some journeys necessitate the use of a car due to time constraints, location or pre and post meeting requirements. However, what is often not considered is whether we really need to travel in the first place? AS the Health Board with the largest

geographical spread in Scotland we should be leading the way in using videoconferencing. Especially when a VC call can theoretically be made anywhere on the globe that has compatible equipment, not just with NHS Highland.

Some statistics to encourage a re-think include -

- Current average usage is a paltry **3%** of the
- available hours per unit
- Maximum usage with NHS Highland peaked at **20%** for a single VC unit

- Current usage saves around **7,000 tonnes of CO₂** per year
- NHS Highland has around **145 VC** units available to all staff and patients
- Finding out more is easy via the intranet

Organisationally moving forward with this opportunity sits within our operational areas and should be strongly encouraged by the Chairs of the various meetings. Questions relating to the need for all individuals all of the time, meeting location and care sharing are very relevant. However, just as important is the cultural shift that reinforces the position that where VC is available it should be the preferred choice over physical travel.

More information on locations, training and general support can be gained directly from the team on the link below -

<http://tinyurl.com/nhshv> or by emailing highland.videoconferencing@nhs.net

Other options

Surveys over the years indicate around **70%** of people in Scotland travel by car to work and **yet 50%** of these average a distance of less than **2 miles**. This offers options on increasing the **13.5%** on Public Transport, **11.8%** walking or **1.6%** cycling to work. Let's focus on one of these -

Cycle to Work



NHS Highland is delighted to announce the reintroduction of the **Cycle to Work Scheme** - an opportunity for staff to ride a tax-free bike to work. We have partnered with **Cyclescheme Ltd.**, who will help us run this scheme in accordance with the Government's guidelines.

Payments are spread out over the term of the hire of 12 months by a salary sacrifice reduction - saving you income tax and national insurance.

There is an option to buy the bike at the end of the hire term. Last year 250 staff took up the opportunity and feedback has been extremely positive.

The scheme will run from 01 May until 01 September 2010 to allow plenty of time for people to sign up. There will be road shows in main locations as in the past the assist understanding. Dates etc are still being confirmed.

Meanwhile personalised NHS Highland information can be found on www.cyclescheme.co.uk/722047 or by calling 01463 705151.

Contact Details

Should you have any queries on the particular points included above, or should you wish to identify possible areas to focus on in future, my details are gordon.macdonald1@nhs.net or direct dial 01463 703778

Theme for May: Renewables - NHS Highland and you.

'SUICIDE. DON'T HIDE IT. TALK ABOUT IT.' Suicide prevention TV campaign is a first for Scotland

In September 2009 NHS Highland and University of Stirling entered into a Knowledge Transfer Partnership (KTP) – Europe's leading programme helping businesses to improve their competitiveness and productivity through the better use of knowledge, technology and skills that reside within the UK knowledge base.

The Partnership aims to facilitate the application of the Dementia Services Development Centre and the Nursing and Midwifery Department expertise and research evidence in the work of the Mental Health Collaborative (MHC).

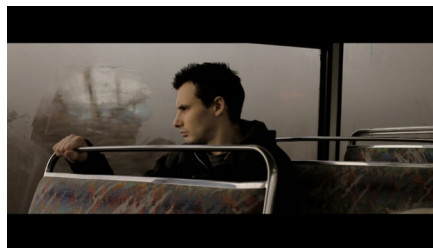
MHC is a national improvement programme focused on supporting NHS Boards to make the improvements needed to deliver against HEAT targets set out by the Scottish Government.

The KTP will support NHS Highland in improving the quality of care in our dementia service and increasing efficiency.

The first outcome of the Project is a 'Best Practice Review' collating key international research evidence around dementia diagnosis and post-diagnostic services with particular emphasis on remote and rural areas.

The information included in the report has underpinned the evaluation of current services and was used to outline the key functions that should be in place at NHS Highland memory clinics and will be further used to support other service improvements.

A survey is currently being carried out across the four Community Health Partnerships to investigate the role of Community Mental Health Teams in provision of care and support for people with dementia and their carers.



Results from this survey along with feedback from other professionals, people with dementia and their carers will help to identify and evaluate different service models operating across NHS Highland.

Training and education will be developed to help NHS staff facilitate their delivery of services including understanding of person and relationship centred nursing and allied healthcare interventions.

The KTP Project will allow for not only learning across NHS Highland, but national learning through the regional and national Mental Health Collaborative networks.

Anyone wanting more information about the project should contact Paulina Szymczynska, Dementia Project Officer or Lynda Forrest, MHC Programme Manager on 01463 253612 or by email at paulina.szymczynska@nhs.net or lynda.forrest@nhs.net

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).

The next HEAT target (E10) is over two years and requires 80% of staff on Permanent Contracts to have a KSF Personal Development Review and subsequent Personal Development Plan completed and recorded on e-KSF by 31 March 2011. Although this means that reviews for staff on Fixed Term contracts and Bank Staff are not reportable as part of the target they **should still receive an annual review.**

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). You will also require an nhs.net email address, if you do not have one already please discuss this with your line-manager.

Focus on... New function to assist staff with e-KSF.

“Delegated Secretary Access Rights” is a function available to **Managers** which allows **one** nominated member of staff (usually administrative staff, i.e. Secretary or Personal Assistant), access to all the functions available to the Manager when logged into e-KSF.

The key benefits of using this function are;

- It further enables implementation of e-KSF.
- It has the potential to ensure achievement of HEAT Target E10.
- It permits the rapid transfer of information from a paper based review into the e-KSF tool.

To use the function the Manager assigns “Delegated Secretary Access” to **ONE** member of staff and then passes completed review documents to that person to be typed into e-KSF.

A short guidance document has been produced to assist Managers who may wish to use the function, to access it please check the intranet under Training, Learning and Development.

Training

Many staff are successfully using e-KSF already, some are self taught and some have participated in the training that is available through e-Health, two courses are currently available;

K1001 for Reviewees K1009 for Reviewers/Managers

For more information regarding these courses please contact e-Health on 01463 257500 or view the information on the e-Health intranet site.

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).

The KSF Team provide short PDP&R awareness sessions with an e-KSF slant. For more information please do not hesitate to contact Paul Simmons (Learning & Development Facilitator), telephone 01463 706885 or email paulsimmons@nhs.net

Details of awareness sessions can also be obtained by accessing the intranet under Training, Learning and Development.

Letters to NHS Highland



"Just a short note to show my appreciation for the excellent care and attention I received from the staff and doctors whilst I was in Ward 8 at Raigmore Hospital. I would also like to commend them for the cleanliness of the ward."

A Patient from Beaulay

"In March an Audiologist returned my hearing aids. I write to thank you for the excellence of the work. The returning of the aids has restored my ability to enjoy meeting people. I no longer feel that I have to become a recluse. Please pass my thanks to the appropriate staff."

A Patient from Nairn

"My husband just spent over a week in Surgical High Dependency following surgery. I cannot thank the staff there enough for their care, consideration and understanding of his condition."

He is now home, secure in the knowledge that everything possible has been done to return him to good health. Please convey our thanks to the staff of HDU."

A Patients Relative from Inverness-shire

"I live in Perth, West Australia and my brother is a patient in Ward 5A, Raigmore Hospital. We had been advised that he was seriously ill. I called the hospital and spoke to a couple of members of staff on the ward - can I say how helpful they were and I managed to speak to my brother thanks to them. Please pass our thanks on to all staff who have been looking after my brother."

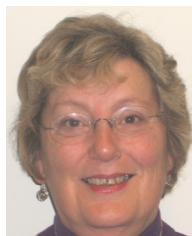
A Patients Relative from Australia

"I wish to put on record my deep appreciation for the services provided at Raigmore Hospital."

I was referred to physiotherapy due to severe pain in my lower spine. From there I was referred to Mr Kent who scheduled an operation, in the meantime I continued to receive regular treatment from the physiotherapy department. From my initial referral to physiotherapy up to and including my discharge from Raigmore I couldn't have been treated better if I was staying at a five star hotel. I would like to express my thanks and gratitude to everyone that I encountered during my treatment and stay at Raigmore, including Helen Robinson at the physiotherapy department, Wendy MacIntosh of Ward 3C, Mr Kent and all their respective teams for their professional and reassuring attention at all times."

A Patient from Inverness

Retiral Corner



Alana Straughan, Clinical Services Manager, Mid Argyll Community Hospital and Integrated Health Care Centre

Alana was born and brought up in County Durham, training as a State Registered Nurse at Shotley Bridge General Hospital in Consett, County Durham.

Before moving to Argyll in 1981 she worked at Sunderland Royal Infirmary, Sunderland Social Services and Sunderland Area Health Authority.

In 1984, Alana started work in the Duncuan Geriatric Unit as a full time Staff Nurse before moving on in 1986 to take up post as District Nursing Sister for the Mid Argyll Unit. In 1996 she was temporarily promoted to acting H Grade District Nursing Sister, being appointed as Community Services Manager in October 1998. A personal review undertaken in December 2000 notes that under the heading of Career Development, Alana indicated that she would like to "retire sooner rather than later!"

In April 2007 Alana took on the role of Clinical Services Manager for the Mid Argyll Community Hospital and Integrated Care Centre where she remained in post until her retirement in March 2010.

A forthright personality with a very strong work ethic, Alana will be much missed in the hospital and her colleagues wish her a very long and happy (but not necessarily quiet) retirement!

If you wish to acknowledge the retiral of a colleague please send copy (no more than 200 words) and a photo to nhs.highland@nhs.net - we can only accept electronic copy / photos

What's on...May



What: Care Programme Approach Awareness Training

Who: Open to all

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.

Where and when: Thursday 6th May, 1.30-3.30, Conference Room (Report to Reception) Fort William Health Centre; Wednesday 12th May and Thursday 20th May, 1.30-3.30, Stuart Room, Robertson FM Building, New Craigs, Inverness; Wednesday 2nd June, 1.00-3.00, Seminar Room, Caithness General.

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 (Mental Health and Learning Disabilities page)



What: Stroke Intermediate Course

Who: Those who have completed the Stroke Foundation Course

Why: The course includes the Oxford Stroke Classification, Perception and cognition, goal setting, advanced communication and sexuality and sexual function following stroke

Where and when: 2 day course. 19th and 20th May

Need more? For further information or to book a place contact: Linda Campbell, Stoke Coordinator on 01463 704086 or email:

linda.campbell8@nhs.net



What: Stroke Thrombolysis Masterclass

Who: Aimed at medics working in emergency medicine and stroke

Why: It will cover all aspects of delivering Stroke Thrombolysis and includes scenarios to work through

Where and when: 24th May

Need more? For further information or to book a place contact: Linda Campbell, Stoke Coordinator on 01463 704086 or email:

linda.campbell8@nhs.net



What: Talking Mats Training

Who: Open for anyone whose work includes people with communication difficulty

Why: Talking Mats is a visual framework which uses picture symbols to help someone with communication difficulties. It has the potential for use with a wide range of people and is an approach which helps them think about issues and provides them with a way of expressing their views more easily

Where and when: Friday 21st May and Friday 25th June, Seminar Room, Highland Heartbeat Centre, Raigmore Hospital

Need more? Joanne Lewin, 01463 705424, joanne.lewin@nhs.net or info@talkingmats.com www.talkingmats.com

What's on...June



What: 2010 NHSScotland Event - Making Quality Count

Who: Open to all

Why: The 2010 NHSScotland Event 'Making Quality Count' will be aligned to the ambitions and aims of the new Quality Strategy and will examine the most recent thinking in healthcare quality

Where and when: 7 and 8 June, Edinburgh International Conference Centre

Need more? www.nhsscotlandevent.com or contact 0141 639 8123 or email info@nhsscotlandevent.com



What: The Facilitators' Network CPD Event

Who: This CPD event is aimed at all those staff with G1: Learning and Development and / or C2: Personal and People Development at level 4 in their KSF outline.

Why: The focus of the day will be our role in supporting NHS Highland during this time of change, sharing best practice and developments in L&D

Where and when: 9th June, 9:30–16:00, Centre for Health Sciences, Raigmore, Inverness

Need more? For further information contact: michelle.williams8@nhs.net

Managed Clinical Network

What: MCN for children with kidney and bladder problems open forum

Who: Those whose children have renal/urology problems

Why: The purpose of the meeting is to encourage families in having a say in how they wish to be involved in the network, their experiences within the NHS and how services can be planned for the future.

Where and when: 25th June, 12-5pm, Recreation Hall, Raigmore Hospital

Need more? For further information contact Linda.watson3@ggc.scot.nhs.uk or 0141 232 1851

**TOMORROW'S
HEALTHCARE TODAY:
SEE THE FUTURE
IN 3D**

**Centre for Health Science
Public Open Day
Tuesday 8 June 2010 from 11am**

Exhibition | Health Checks | Workshops | 3D Visualisation | Business Seminar

**For full details about the Open Day visit:
www.centreforhealthscience.com
or find us on Facebook**

Centre for Health Science, Old Perth Road, Inverness IV2 3JH

Learning at Work Days

Raigmore Hospital, Inverness, Caithness General Hospital, Wick, Town & County Hospital, Invergordon, Lochalsh Health Centre, Kyle of Lochalsh as well as various locations in Argyll & Bute

Thursday 20th May 2010

Find out about **Lifelong Learning in NHS Highland** including -

Information On

- IT Courses available to NHS Highland Staff
- Scottish Vocational Qualifications
- Management Development Programmes
- Open University Courses
- Funding for Courses, including
- Individual Learning Accounts (ILAs)
- NHS Highland Endowment Funding
- Union Learning Reps – who are they and what do they do?
- Gender Based Violence Awareness Training

Speak to Representatives from

- NHS Highland's e-Health Team
- NHS Highland's Learning & Development Team
- NHS Highland's Learning Partnership Agreement
- Highlands & Islands Fire and Rescue Service
- Staff Organisations including Royal College of Nursing, Unison & Unite
- Health Information and Resources Team
- Equality and Diversity Team
- UHI

And Much More



Endowment Funding for Non- Core Learning and Development 2010/2011



The Endowment Committee for NHS Highland has allocated funding for staff to use in personal learning and development. The funds may be used for learning activities that contribute to your individual career or personal development. The funds cannot be used for learning and development that is a requirement of your KSF Outline or essential to your role as this should be met from NHS Highland Learning and Development resources. Many wards and departments in NHS Highland have local endowments that should be considered before making an application to this funding.

Applications are welcomed from all staff employed with NHS Highland. The learning activities supported in previous years have included:

College courses Study tours Conferences Distance learning

For more information please contact:

John Palmer, john.palmer4@nhs.net or 01463 706855; Margaret Wilson, margaret.wilson1@nhs.net or 01463 706880; Aileen Trappitt, aileen.trappitt@nhs.net or 01463 706877

Application forms can be found on the training pages on the Intranet. <http://intranet.nhsh.scot.nhs.uk/Training/LearningAndDevelopment/Pages/Default.aspx>

Completed forms should be returned to the address below no later than **Monday 24 May 2010**. A copy of the plan for the activity from a current personal development plan should be included with the application form.

John Palmer, Learning and Development, John Dewar Building, Inverness Retail and Business Park Highlander Way, Inverness



becomes

The Knowledge Network

Scotland's source of knowledge for health and care

Users of the eLibrary (now the Knowledge Network - <http://www.knowledge.scot.nhs.uk/home.aspx>) will have noticed some major changes in the home page of the system. The old static page is gone and has been replaced with a much more dynamic system based on widget design. Widgets are small sections of pages which can be easily added, removed or edited. This means that the new system allows much more user customisation of the page so you can set up the page (within the limits of the system) as you like it. By logging into the page you can customise it by adding, removing or editing widgets. If you don't like what you have created you can reset the page back to the original.

The new front page looks like below:



So to edit this log into the system and go to the base of the page - on the left hand side you can see that the BBC weather link is mapped to the Glasgow area. To change this to local is simple. Click on edit – change the postcode from G1 to your postcode and press save – next time you log on the page will automatically load up the BBC weather for your local area.

Want to clear most of what is on the page? Then go to Add/Remove Stuff and uncheck all the boxes (note there are some you cannot uncheck) – what you get is a cleared out minimal

homepage. You can also add to and edit the quick links, databases, e-learning and journals widgets to maximise your access to these and to other resources you frequently use.

The Highland Health Sciences Library runs courses on how to use the Knowledge Network – these are held on the second Wednesday of every month (2pm-5pm) and details on prerequisites and booking the course can be had by contacting us on 01463-255600/extension 7600.

Rob Polson (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@hhb.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/bulletin2010list.htm>