

Team Update



Issue 51 October 2008

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Staff Awards - the results!

The dedication of NHS staff using new ideas to improve patient care is being recognised in this year's annual awards. The winners are people from many different roles, all linked by their desire to do their best for patients.

Anne Clark, Non Executive Director of NHS Highland, chaired the judging panel. She said: "This year's awards demonstrate the drive and determination our staff have to change services for the better. Throughout the entries for the ten categories there was a recurring theme of staff pushing forward change because they know it will improve care and outcomes for patients. It was incredibly hard to choose the winners and of course all of our staff deserve our thanks and recognition."

This year's winners are lead by Mary Clunas, Clinical Manager of Osprey House which supports people with substance misuse problems. Mary was nominated for the **Community Award** by her colleagues Kirsten Bilsland and Julie Davison for their exceptional level of commitment and dedication. They said: "Mary always communicates in a genuinely warm and friendly manner, She is able to develop a rapport very quickly with people and can bring a smile to the faces of people in the most difficult and desperate of circumstances."

Among her many achievements Mary used a secondment opportunity to develop a blood borne virus clinic and also helped to set up and run a methadone clinic for the Homeless Day Shelter.

This was a special day for the winner of the **Mental Health/Learning Disability Award** Eileen Alexander a Community Nurse with the Learning Disability Team based at the Corbett Centre in Inverness. As well as picking up her accolade Eileen was celebrating the start of her retirement. Eileen was nominated in a number of different categories by a group of colleagues, managers and people with learning difficulties in recognition of her 34 years service in the NHS.

Porter Alexander McGowan from Rothesay won the **Support Worker** award. He's the only full time porter for the Victoria Annexe and Victoria



Above: The winners from this years Staff Awards

Hospital on Rothesay. He was nominated because of the work he takes on to support patients and other staff. A colleague said: "Alexander frequently postpones his own work to assist the District Nurses in the community by taking equipment to patients' homes and ensuring they or their carers know how it works. In the hospitals he chats with patients and makes shopping trips for those who don't have someone who can help them. He's always joking and keeping everyone's spirits up, even when he's working extra hours or being called out at night."

A nurse from Lorn and Islands District Hospital in Oban had her work to reduce the need for some patients to travel for vital treatment recognised in the NHS Highland Staff Awards. Sister Helen Clark helped to develop the service providing Chemotherapy and Haematology services in Oban which reduces the need for patients to endure 2-3 hour journeys each way to city hospitals.

Helen was nominated for the **Hospital Worker Award** by Clinical Services Manager Veronica Kennedy. She said: "Helen is a very caring and compassionate practitioner who knows her patients well. She is constantly challenging boundaries in an effort to provide local services."

Patient Activities Coordinator Irene McKain won the

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Staff Awards - the results!

Improving Patient Service Award and North Highland Community Health Partnership Support Manager Kay Oswald won the **Behind the Scenes Award**.

Irene was nominated by Stuart Knox Charge Nurse on the Queen Elizabeth unit at Caithness General Hospital where she provides activities for patients undergoing rehabilitation, most of them older adults. He said: "Activity for patients in hospital is often limited to Bingo but Irene has introduced a huge range of games and activities for them and she makes many of them at home in her own time. Irene's activities help to stimulate the patients physically and mentally, keeping them active and alert."

Kay Oswald was nominated by Caithness locality manager Pauline Craw. She said: "Kay is our link person for public involvement and she is happy to look at how best we can ensure the public voice is not only heard but listened to. She's also our complaints manager and as a first port of call is often able to reassure patients at the informal stage that their concerns will be taken on board. Kay works behind the scenes in an ever dynamic role and grasps whatever is given to her with enthusiasm and without thought for herself."

The North Highland CHP Smoking Cessation Advisors have won the **Health Improvement Award**. Katie Wilson, Jean Macleod and Margaret Bremner were nominated by their manager Lorraine Coe. She said: "The advisors have made a big difference to people trying to quit smoking in the past year by increasing access across the CHP. Among their successes are training packages for staff which are nationally accredited, raising their profile with large employers and increasing the rate of people packing in smoking."

The Broadford Hospital Theatre Team which looks after patients before, during and after their

operations have scooped an award for their professionalism and dedication to improving services for patients. The seven strong group lifted the **Team Award**. Team Leader Agnes Dougan, Staff nurses Chrissie Barwick, Jo Cumine, Sarah-May MacLennan, and Gerry Ochojan, alongside auxiliaries Fiona Matheson and Lilly Preston were nominated by Hospital Manager Chrisann O'Halloran.

Ms O'Halloran said: "They're a wonderful team who work really well together and have put in a lot of effort to improve services for patients. They've cut down a lot of travel for people who are having operations in other hospitals and they are enthusiastic when it comes to learning new things. It feels like there's nothing I can't ask them to do, they just get on with it and have a laugh doing it."

A member of the public was also recognised at the Staff Awards in the **Volunteer** Category for the commitment she gives to improving services for patients. Rona Membury, a member of Highland Health VOICES Network was nominated by the Public Engagement Team which supports people who want to give us some of their own time to help staff on the design of services. Rona's work is focused on the improvement of services for individuals with a hidden disability such as mental health, learning disability or autism.

The Award for **Best Patient Leaflet of Publication Award** went to Raigmore Hospital based physiotherapists Suzanne Lindsay and Morag Ross for their booklet giving advice to patients and relatives on rehabilitation after a stay in Intensive Care. They were nominated by Dr Jonathan Whiteside who said: "Before the design of the information leaflet there was no formal resource for patients and family to get information about their care in ITU. This has greatly reduced anxiety and stress for patients and their families. I have never worked with two more committed individuals who are prepared to use their own time and energy for the benefit of our patients. Our ITU is very fortunate and indeed unique in having these team members."

From the editor ...

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

In this issue we have the results from this years Staff Awards, as well as information on Agenda for Change and KSF.

If you would like to write an article or submit information (letters or photographs) for future

issues of the Team Update, please email the Communications Team via the email address on the NHS Highland Website: staff@haht.scot.nhs.uk or contact Christina.macdonald@hnb.scot.nhs.uk

Remember, **your** news and views are important!

**The Editor, Communications
NHS Highland, Assynt House
Beechwood Park, Inverness IV2 3BW**

Better Health for Highland: *Getting more for our money*

From Chief Executive Roger Gibbins

We've come a long way in the last few years with improvements to services for patients and we have exciting developments in the pipeline. Work is already underway on the new waiting times targets which will radically reduce the time it takes patients to be treated. We also have major programmes of work around Long Term Conditions, Mental Health and Patient Safety which will improve the quality of care for thousands of people. These are not small changes or challenges and come alongside a very difficult financial picture. Succeeding within our resources will involve each of us looking at everything we do. While I don't want anyone to underestimate what's being asked of us, I do want us all to approach this with confidence in each other's abilities and safe in the knowledge that our primary goal to improve services remains sharply focussed. This is a serious and complex matter and if we are to manage the situation well it will require the focus of all staff over the next few years.

In terms of our financial position we are entering a very different era. Over the last few years we have seen our funding allocation increased by up to nine per cent. That is equivalent to more than £25m per year. This year's extra funding, however, is only just 3% (an increase of £15 m). This means that over the next three years we need to save £3m each year to pay for basic increases linked to pay rises and prices. We also have some additional new costs and service developments resulting in a further £6 million each year. So for each of the next three years

we need to find £9m of savings from our current resources. Over and above this the Board has been reliant on what we call 'non-recurrent' resource, things we take advantage of, but only happen once. We have been working hard to reduce this and by the end of this year we will be down to £8m. The Board has now decided that we will try and address this entire deficit by the beginning of next year.

We can make the required savings and improvements but we need to scrutinise and challenge exactly how we are using our resources. We must change the way we deliver services and the way we think and work. This will mean working together across the whole of our health 'system' for the benefit of patients; working smarter, not harder, being more efficient, reducing any unnecessary work and ensuring that we are all working to our highest potential for the benefit of the patient. NHS Highland has an annual budget of more than half a billion pounds so the savings are not unrealistic. Please don't be concerned about your own job. But we do need to be aware that we will all be required to work in quite different ways if that is what is needed. I am clear, however, that we need to tackle this upfront to avoid building up a lot more difficulty in the future.

Over the coming months Team Update will be publishing a series of articles which will promote examples of working differently which not only make good economic sense but demonstrate better and more joined up services for our patients. Some of these will come from senior executives and clinicians but some must come from you and I look forward to hearing from you.

Save the Planet... and Help the Board

NHS Highland is working with the Carbon Trust to identify ways in which we can reduce the Boards carbon footprint.

The Board is aspiring to reduce the amount of carbon dioxide which is produced as a consequence of its activities by reducing its consumption of energy in all its forms, electricity, oil, vehicle fuel, both getting to work and on business. Considering our waste, how we can reduce the amount we consume, increase the volume we can recycle and reduce the volume we send to land fill.

To generate some innovative thinking around this topic we are holding an ideas workshop, facilitated by the Carbon Trust, in The Centre for Health Science in Inverness on Friday the 24th of October from 11.00am until 4.30pm. Video conferencing facilities will be available if you wish to join us remotely. If you would like to take part in what will be an interesting event then please contact Douglas Seago, Head of Facilities on 01463 705151 or e-mail douglas.seago@nhs.net. If you are unable to attend but have ideas about how we can reduce our energy consumption, travel more effectively, increase our recycling or any other associated topic then please get in touch using the above contact details.

NHS Mail

The move to the new NHSmail platform has been nationally deferred until 9th January 2009. This was due to some components requiring further testing and improvement to give us the assurance that the whole service will meet or exceed the current levels of performance.

For those staff who have not yet moved over to NHSmail and have not requested to move before January, you will be scheduled once everyone has moved to the new platform in January. More information will be sent out to you nearer the time.

Many thanks for your continued co-operation.
Sarah Holt, Project Officer

Coming soon: NHS Highland Staff Survey 2008

A message from the Employee Director and Chief Executive

Later this month we will launch the NHS staff survey. This provides you with an opportunity to give your views on your job and other aspects of working for NHS Highland and NHSScotland as a whole. This year, the questionnaire is much shorter and should take no more than 10 minutes to complete. These questions are being asked across all Boards so we can compare across all NHSScotland organisations.

Please be assured that your views will be treated with the utmost confidentiality. We have asked ORC International, an independent research company, to collect and analyse the data. ORC International belongs to the Market Research Society and is bound by their strict Code of Conduct and confidentiality rules. The most important of these is that they cannot report back information that could be traced to an individual or a group of fewer than 10 people. So please be totally open and honest in your responses. We want to achieve a good response rate here in NHS Highland so that the results are representative of employees within this Board – so please complete your survey by **21st November 2008**.

The survey results will be communicated to all staff and comparisons made with other organisations in order to help us identify strengths and areas for improvement.

The survey within NHS Highland goes live week commencing **20th October 2008** and will be sent to the home address of every employee arriving at some point that week. In addition if you wish you will also be able to utilise an on line version of the survey. The address will be publicised by email and on our intranet when it goes live.

This is a top priority for NHS Highland and NHSScotland. Actions will be taken at both a local and a national level to make improvements based on your views, so please take this opportunity to have your say!

Thank You

Ray Stewart, Employee Director

Roger Gibbins, Chief Executive

Walking Aid Amnesty

The Physiotherapy Department at Raigmore Hospital is currently organising a walking aid amnesty to take place during **3rd to the 7th November 2008**.

In order to make best use of NHS Highland resources, we would ask any members of the public who have any **walking aids** (e.g. sticks, crutches, zimmer frames) or **kitchen/bathroom aids** to please return them to: **The Physiotherapy Department**, Raigmore Hospital; **Inverness Tesco Stores**, (i.e. Metro, Inshes or Retail Park); **Highland Homes Carers**, Stadium Road, Inverness

Your help in saving money for NHS Highland is greatly appreciated.

For more information, contact: Anna Cudmore, Physiotherapy, Raigmore Hospital, Tel: 01463 705580

Changes to the way in which staff are paid during periods of annual leave

INFORMATION FOR MANAGERS AND STAFF

1. This is to advise employers and staff of new provisions which have been introduced in respect of the way in which staff are paid during periods of annual leave. These no longer allow employers to pay staff an additional percentage in lieu of paid annual leave - staff will now be paid "as if at work" during periods of annual leave.
2. The effective date of these arrangements is 1 April 2008 but it has been agreed in partnership that the date of implementation in Scotland will be 1 October 2008. Staff who may have been disadvantaged by the six month delay in getting systems in place to manage this change will be appropriately reimbursed when new systems are up and running. Further communication on this will be issued in due course.
3. Staff who will be affected by the new arrangements are:
 - Full time substantive staff who work unsocial hours, contracted overtime or are paid an on-call allowance.
 - Part time substantive staff who work unsocial hours, contracted overtime or are paid an on-call allowance or who undertake regular additional basic hours.
 - "As and when required" workers.
4. A technical working group of the Scottish Terms and Conditions Committee are working in partnership to consider issues that will arise from these new provisions and to agree solutions to these. The group will ensure that staff and managers are kept fully aware of developments and understand how the new provisions might affect them.

Issues affecting substantive staff

5. For substantive staff this is really an extension of what is currently in place for sick leave.
6. With the exception of ancillary, building and maintenance staff, substantive staff are not currently paid their unsocial hours supplement whilst on annual leave but they do receive a payment of 11.59% when working unsocial hours, regular additional basic hours (part-time staff), contracted overtime and on any on-call allowance.
7. Under the new provisions staff must be paid "as if at work" during periods of annual leave. This will mean that staff will no longer be paid the 11.59% whilst at work, but will receive payment "as if at work" while they are on annual leave. This will be the annual leave entitlement under AfC.
8. Monthly paid staff will not see any changes until they receive their November 2008 payslip and weekly paid staff will see a change from week 27, paid on Thursday 9th October or Friday 10th October, 2008.

Issues for "as and when required" workers

9. Staff who work on an "as and when required" basis currently receive a payment of 11.59% on all hours worked to reflect their entitlement to statutory annual leave. This payment will no longer be made, but staff will be paid during periods of annual leave based on the hours worked prior to the leave being taken.
10. It will be important to ensure that hours worked are carefully recorded and collated, including how many hours are unsocial hours. Staff will have to submit a claim/time sheet when going on leave to ensure that they are paid the appropriate amount of statutory annual leave.
11. Monthly paid staff will not see any changes until they receive their November 2008 payslip and weekly paid staff will see a change from week 27, paid on Thursday 9th October or Friday 10th October, 2008.

Agenda for Change Update

Progress with assimilation

We are continuing to reduce the number of staff still to be assimilated, with the totals now standing at 742 for Argyll & Bute CHP (526 bank staff, 216 substantive) and 294 for the remainder of NHS Highland (164 bank and 130 substantive).

Completing this exercise is dependent on good quality information from managers in response to queries from the team. If you are a manager and are asked for information about a postholder's employment history, it is helpful if you respond by return and that you answer all the questions asked – otherwise we will just keep coming back to you! All the information requested is essential and assimilation depends on it being available to us.

Argyll & Bute CHP issues

All managers in Argyll & Bute CHP should have received a list of the job codes which apply to their staff. Please use these codes when contacting the Agenda for Change team with a query or with further information; remember that a staff member may have had several changes of job since October 2004 and the only way we can keep track is by linking the person to the relevant job code for that period.

Some confusion has arisen in Argyll & Bute CHP about Agenda for Change codes compared to KSF codes. The history of this is that NHS Highland

took responsibility for rolling out KSF in Argyll & Bute in April 2006, whereas it was August 2007 before the matching and assimilation processes started to move to NHS Highland. This means there are several different types of code. Briefly:

- If the code looks like ADMIN123 or NM345, it is an old Argyll & Clyde code which is still relevant for matching and assimilation. It is not used for KSF purposes.
- If the code starts with the letters AB, it is purely a KSF code and is not used for matching or assimilation.
- If the code starts with ARGL, it applies to both KSF and the matching and assimilation processes.

Over time, we intend to harmonise these codes, but as KSF outlines are required primarily for current jobs, it makes sense to wait until all historic jobs are matched and the associated staff assimilated before embarking on that exercise.

Reviews

We have received review requests from 1283 staff across NHS Highland covering 819 separate posts. So far we have processed 158 reviews out of that 819 and advised jobholders of the outcome. At present, just under one-third of review requests are successful, but it is too early to tell if this level will be sustained throughout the review exercise. We have now started reassimilating staff whose review requests have been successful.

KSF Update

NHS Highland has to ensure all staff affected by Agenda for Change has to have a current Personal Development Plan (PDP) in place by the end of March 2009. A KSF Outline has to have been submitted and approved in order to use the PDP.

Currently NHS Highland's KSF Outline position stands at 77% of staff. This large number of staff should be working towards, or have, a PDP in place. A significant amount of training and support has been allocated to assisting both the understanding and the development of PDPs over the last 4 years. This is ongoing and can be accessed through the KSF Team (details below).

Over the last year or so organisational efforts have gone in to identifying every staff member in post, where they work and who their line managers are. This has helped the completion of KSF Outlines and monitoring of progress as staff groups engage with the PDP process. This information will now be used to identify Line Managers along with the

staff they have to ensure completion of PDPs with. Only through a comprehensive system like PDP can staff be sure of what support they need and can expect within the remit of their post. Only through fully applying a system like PDP can the organisation be sure it is supporting its staff in a consistent and standardised way – with no detriment regardless of location, profession or otherwise. It is fair and has been developed and implemented in Partnership throughout.

If you do not have an up to date PDP, contact your line manager now. They are likely to be planning how best it is done and would probably appreciate your interest. In terms of carrying out PDPs not all locations will do this the same, however the outcomes of staff being supported will be consistent across the organisation.

The feedback from those accessing this support already is extremely favourable. We can save a whole lot of concern and time. Contact details for Outlines is Gordon.MacDonald@hpct.scot.nhs.uk and for PDPs it is Paul.Simmons@hpct.scot.nhs.uk.

Busy Times for Health Promotion Team

Argyll & Bute CHP Health Promotion staff faced hectic times with **Mental Health week** and **Alcohol Awareness week** scheduled in the same week. This is the second year that the Alcohol Awareness campaign has had a designated week to highlight the issue. This year it falls on the 5-11th October, the same time as Mental Health Week.

Craig McNally, Senior Health Promotion Officer for Addictions, said: "This situation presents us with an ideal opportunity to highlight the links between alcohol use and mental health. Alcohol used in moderation can be a pleasant addition to a social situation however people often drink more than the recommended daily limits and this can have a negative effect on mental health and wellbeing."

Sam Souter, Health Promotion Officer, continued: "There are clear links between alcohol misuse and poor mental health and so it makes sense for us to work together on this. Craig and I have worked closely on previous pieces of work such as a Christmas Quiz which raised awareness of a range of health promotion issues and were distributed through the local papers.

"This year we introduced similar techniques to

highlight our health promotion messages and one of the most popular was t-shirts printed with 'I am sensible. Drink Sensibly: Women 2-3 Units Men 3-4 Units per day'. We also produced cotton shopping bags printed up with 'Your Mental... Health is Important' on them to raise mental health awareness issues and promote positive health messages with groups we are working with.



"For people who are suffering from poor mental health or are feeling a bit low, alcohol can make them feel worse and it is important that people are aware of this. We aren't the alcohol police but are keen that people use other strategies to make themselves feel better when they are feeling low. Talking to someone about how you are feeling, whether that is a friend, family member, colleague or a professional such as your Doctor, is a more constructive way of helping yourself to feel better."

Welcome to Childsmile

Childsmile, a national programme aimed at improving the dental health of young children, is coming to NHS Highland. The programme involves a multiagency approach and engages with children and their families at the earliest opportunity offering appropriate oral health advice and supporting registration with a dental practice.

Childsmile incorporates the nursery and school supervised tooth brushing programme which has been established in Highland for some years. In addition those children with the greatest need will be offered further preventive interventions in nurseries and schools in the form of six-monthly fluoride varnish applications.

The national programme has been developed in Scotland's southern NHS Boards and will be rolled out in two areas of Highland later this year. The phased implementation programme will see these two initial sites, Merkinch/Dalneigh in Inverness and Caithness in the North, followed closely by all other areas of Highland within the next four years.

Recently at the Black Isle Show the public were able to find out about the Childsmile programme. The Childsmile Stand welcomed over 800 visitors who were able to hear about the scheme and received information and advice from the Childsmile Team.



The Childsmile Team prepare to welcome members of the public to the stand at the Black Isle Show

For further information about Childsmile see www.child-smile.org or contact: David Babb Programme Coordinator (NHS Highland) tel. 01463 704635 or email david.babb@nhs.net Maggie Fawkes (Argyll & Bute CHP) tel. 01389 817013 email mfawkes@nhs.net

Patients' Rights Bill

Scottish Government "Consultation on a Patients' Rights Bill for Users of the NHS in Scotland"

The Scottish Government intends to create a clear legal framework of rights for patients, along with a system for redress if patients feel their rights have not been delivered. The Government has launched a national consultation on their proposal for a Bill of Patients' Rights which runs from 22nd September 2008, until 16th January 2009. This is an important topic for NHS staff – we are all service users as well as service providers – so this has implications for each of us and our families, as well as for NHS Highland and the other NHS organisations across Scotland.

The full consultation document and consultation questionnaire is available from <http://www.scotland.gov.uk/Publications/2008/09/22091148/0>.

The consultation paper builds on the concept of the "mutual NHS" in which citizens are recognised as part owners of the NHS in Scotland. This means patients being more involved in decisions about their care, and citizens more involved in how services are run.

The consultation is based on eight key themes: **Access** – to services, includes a waiting time

guarantee; **Respect** - and dignity for patients and staff; **Safety** – safe, effective care and patients' responsibilities (compliance); **Communication** – between patients and clinicians; **Information** – on individual care, health and wellbeing, services and standards; **Participation** – in patient care decisions and service design. New "Participation Standard" and "Ownership Report"; **Privacy** – and confidentiality for patients, information governance; **Independent Support and Redress** – patient feedback and complaints, Board "Patients' Rights Officer", redress and compensation.

The consultation document describes these in more detail, and each section carries a pre-set consultation question. The NHS Highland Board will respond to the consultation, and is keen to hear the views of staff and local patients. If you have views on the Government's proposals and are willing to share them with the Board, please send your comments or a copy of your response to the Government to:

Gill Keel, Head of Public Engagement, at gill.keel@hnb.scot.nhs.uk or by post to Assynt House, Inverness IV2 3BW. Please mark your correspondence "Patients' Bill of Rights".

The Scottish Government hopes to run two national consultation events, one of which they suggest is in Inverness, during November 2008. Further details will be placed on the Board website on receipt.

Cath Lab Up & Running

After much preparation and planning, Raigmore Hospital's Cath Lab went live last month (8th September) allowing more space for both radiology and cardiology to carry out their work.

Donna Mackay, Project Manager for the Angiosuite/Cath Lab development, said: "In the simplest terms we now have more space. Cardiology activity previously took place in the Angiosuite, but pressure on this resource meant that we needed a solution to create further capacity. With the Cardinal Inhealth modular lab in place we now have a lab that is used for cardiology only, freeing up the Angiosuite for the increase in radiology activity.

Between September 2008 and February 2009 the modular lab will be used for four angiogram and two pacemaker sessions weekly, treating more than 650 angiogram patients and 180 pacemaker patients yearly. In February we hope to increase the lab program by repatriating some PCI activity

that currently takes place in Aberdeen."

Dr Steve Leslie, Consultant Cardiologist for NHS Highland, added: "The additional lab means we can do more angiograms which is very important as demand for these is increasing all the time, as well as allowing us to do implantable defibrillators (ICDs), which has been an important development for Raigmore the first of which happened earlier this year. It will also allow us to start doing urgent pacemakers more quickly as well as being able to do more of the urgent inpatients rather than have them wait for a space in Aberdeen.

It will also allow the technicians, radiographers, nurses and cardiologists to expand on their skills thereby enhancing the service we deliver."

Looking ahead to 2009 it is hoped that an extra interventional cardiologist can be recruited allowing the team to develop PCI (angioplasty) at Raigmore Hospital. At the moment this procedure is mainly carried out in Aberdeen but, if the search is successful, it would be anticipated that this could start in February 2009 benefiting up to 200-250 patients a year.

Spiritual Care

NHS Highland Chaplains and members of NHS Highland's Spiritual Care Committee met at the Craigmorie Hotel in Inverness for a two day conference which hopes to result in the delivery of an NHS Highland strategy for Spiritual Care. The gathering was an extremely positive one and a number of important issues were raised. In particular, the need for greater awareness of the Chaplaincy service among other NHS staff was highlighted. Some old myths still prevail about the nature of Chaplaincy which may work to prevent this excellent service reaching people (patients, their families and carers, members of staff) that would benefit greatly from spiritual care.

It is hoped that, following on from the conference, a strategy document can be submitted to the Health Board in February of 2009, dealing with such issues as the training, development and deployment of Chaplains throughout NHS Highland, engagement with other NHS staff in Highland and their training needs in this area, and the provision of the service, especially to patients and their carers, but also to NHS staff.'

For further details of Chaplaincy contacts and Spiritual Care provision in your area, please phone the Chaplaincy Department Secretary, Clara Delaney, on 01463 704463, or e-mail her at clara.delaney@haht.scot.nhs.uk. Alternatively, contact Iain Macritchie, Lead Chaplain for NHS Highland, on 01463 704464 or e-mail him at iain.macritchie@haht.scot.nhs.uk.'

What's their opinion?

Have you ever wondered about gathering information on how new systems have been received by patients? Or determining if a patient's experience of their visit has been favourable or otherwise? But then thought it was too difficult to administer!

The Public Involvement Team has access to two 'Opinionmeters'. These are independent computers which can be placed in your waiting area, your GP Surgery or reception area, requiring only connection to an electric socket. A series of questions can be asked - which are visible in paper format on the Opinionmeter - and individuals can just work their way through them. The recommended number of questions is usually

9, with each question offering a number of options.

One of the limits of the Opinionmeter is there is no capacity for open questions or free-text responses. The responses gathered on the Opinionmeter can be easily and quickly downloaded, with further detailed analysis and the production of graphs possible.

The Opinionmeters have worked well in the past - gathering data on visits to Accident & Emergency, patient experience of Outpatients, evaluating public events, and Radiology appointments.

If you would like more information on this piece of kit, or would like to use an Opinionmeter, then please contact the Public Involvement Team on (01463) 704862 or pfpi@hnb.scot.nhs.uk

Farewell to Alison Cornfield



Staff across Raigmore Hospital made sure that, after more than 33 years of service, Domestic Services Manager Alison Cornfield had a retirement to remember when she left Raigmore Hospital at the end of September.

Since starting as a Domestic Superintendent in 1975 Alison has seen a lot of changes over the years including a new Raigmore Hospital, which has grown and grown, getting busier all the time.

Alison will be keeping herself busy in retirement, her plans are to enjoy her golfing, gardening, walking, curling and dancing!

Congratulations

Well done to Linda Campbell, Stroke Coordinator for NHS Highland and Janet Macrae, Clinical Ward Manager in the Stroke Unit, Raigmore Hospital who have had their publication "Stroke Nursing in Scotland" accepted for publication with the International Journal for Stroke.

The new Pink one

The Pink One, which started in 1992, is being redesigned this month so that it combines the Pink One information with the Formulary Update.

The new Pink One will be two pages (or four sides) of information. It will include: Topical prescribing news from primary and secondary care; Updates from the Area Drug and Therapeutics Committee; A feature article; and Formulary additions and deletions

Contributions are welcome from everybody – please see the advice below on how to contribute.

The Pink One editorial team (contact details below)

Formulary editor – Evelyn Cromarty
Secondary care editor – Mairi Dunbar

Primary care editor – Findlay Hickey
General editor – Clare Morrison

Publication schedule for 2008-09

Issue	Deadline for contributions	Circulation
October/November	Thursday 2 October	w/c 20 October
December/January	Thursday 27 November	w/c 15 December
February/March	Thursday 29 January	w/c 16 February
April/May	Thursday 26 March	w/c 13 April
June/July	Thursday 4 June	w/c 22 June
August/September	Thursday 20 August	w/c 7 September

Contributions to the Pink One

News articles are welcomed from everybody – the more people who highlight prescribing issues to colleagues across NHS Highland, the better the Pink One will be.

In the first instance, ideas should be sent to either Findlay Hickey (primary care editor) or Mairi Dunbar (secondary care editor), depending on the sector in which you work.

Tips for contributions:

News articles should be kept to a maximum of 250 words; shorter pieces are absolutely fine.

If 250 words is too limited to fit in all the information, just cover the key points and provide details of where to get further information (eg, a website). Always try to put the main point of the article in the first sentence so readers know what the article is about.

If possible, please send contributions a week before the deadlines given above. Ideas for longer feature articles would be welcomed too. Please send any ideas to Clare Morrison (general editor).

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Caring with Confidence

Free training sessions for unpaid carers are being run by the Highland Carers Project right across Highland during the autumn and winter. Carers Can is a training programme that offers sessions based on what carers have identified as being important to them. Some of the topics covered include:

Looking after yourself; Managing stress; Relaxation; How to communicate confidently; and Becoming aware of things which affect your own health.

It's also an opportunity for those taking part to relax, enjoy themselves and meet other carers.

There are other events in the pipeline looking at navigating information for carers and planning for the future so if you'd like to talk to someone about Caring with Confidence or these other sessions please contact:

Tina Morrow, Highland Carers Project Tel: 01463 723573, Email: tmorrow@hccf.org.uk

Melissa O' Riordan Tel: 01463 723564, Email: moriordan@hccf.org.uk

Highland Health Services Choir

Each year singers from NHS Highland come together to form the Highland Health Services Choir. Their yearly performance is the annual Clic Sargent Carol Service in Eden Court. Rehearsals this year start on the 26th October at 2pm in the Recreation Hall at Raigmore Hospital, dedication and hard work are required as the Choir only have seven two hour rehearsals in which to pull together a full programme of Carols and Choral pieces.

Choir Co-ordinator, Shauna Morgan, said: "The choir are looking for enthusiastic members who love to sing, all are welcome!"

All proceeds will be going towards Clic Sargent who offer children and young people with cancer all round care and support, during treatment, both in hospital and at home and following treatment, helping the survivors, supporting the bereaved and performing research.

Shauna added: "Come along on the 26th, exercise your lungs, have a good time, make new friends and help raise some money for a great charity." For more information contact: Shauna Morgan – shauna.morgan@haht.scot.nhs.uk

Trainers Wanted for Managing Violence & Aggression

- Do you want to develop your training skills?
- Do you want to tackle violence & aggression?
- Do you want to promote good practice?

Full training and ongoing support provided

- For an informal chat contact: Debbie Stewart Tel: 01463 706884, Liliias Coyne Tel: 01463 704638 or Angela Caruana Tel: 01463 706882
- If interested, please complete the application form and send back to: Managing Violence & Aggression Team, John Dewar Building or Email: fiona.gordon@hpct.scot.nhs.uk by 28th Oct 2008
- Informal interviews will be held in Inverness on 4th Nov 2008

Christmas is coming...

ARE YOU APPLYING FOR
ENDOWMENT MONIES FOR
YOUR STAFF CHRISTMAS
PARTY?

DO YOU KNOW THE PROCEDURE
TO BE FOLLOWED?

See the Endowments Team
Intranet Page in the STAFF section
for details

Any questions? Need some help?
Please call the Endowments Team
on:

01463 704778/01463 704284/01463
704707

Letters to NHS Highland



"My wife and I have just returned to New Zealand after a holiday in the UK, of which half was spent in Scotland. During the course of this stay I found it necessary to call on the 'Cottage Hospital' at Salen on the Island of Mull, who due to the limitation of their facilities referred me on to Fort William. They were unable to help fully, it being a Saturday and not all their techniques being on hand, so sent me on by ambulance to Raigmore Hospital, Inverness.

At Raigmore I was greeted by name by the consultant Mr Irving, and approximately an hour after my arrival I was undergoing a CT scan and an hour or so after that an operation for a ;Stragulated Incisional Hernia.'

The purpose of this letter is to pass on to everyone concerned in all the hospitals not only my thanks but also my

congratulations to an amazing number of dedicated doctors and nurses who really looked after me during the period of this incident.

I am aware of the (probably) worldwide tendency to criticise hospitals for just about any reason but my experience of the NHS (Highland) left no reasons at all to be dissatisfied. Your medical staff should be congratulated - they were just great!"

A Patient from New Zealand

"I recently had a spell in the orthopaedic department of Raigmore Hospital (Ward 3C) having a complete hip replacement.

The treatment I received was second to none, and I cannot praise the staff highly enough - sister, staff nurses, student nurses, auxiliaries and cleaning

staff and physios were kind and efficient and made my stay there as pleasant as it could be under the circumstances.

One hears plenty of adverse criticism of the NHS and I feel it should be put on record when praise is due."

A Patient from AIness

"I wish to thank all the staff in the hospital who helped me during my short stay in Ward Bignold in July.

I am much appreciative of the kindness shown to me and the help and attentive care I received.

I send you all my best wishes and may good health me yours to allow you to continue the important work you do for everyone."

A Patient from Perth

Make-a-wish

Make-A-Wish grants magical wishes to children and young people fighting life-threatening illnesses. Make-A-Wish was founded in the UK in June 1986 and, since then, we have granted over 5,000 wishes.

At any given time, over 20,000 children in the UK are living with life-threatening conditions and our aim is to grant 21 wishes a week by the year 2010. Whether a wish is to be a princess or a policeman for a day, own the latest computer equipment, meet a favourite celebrity or just enjoy some special time away from home with their family, a wish come true brings so much to a child's life and provides memories for the family that last a lifetime.

Referring a Child for a Wish

Who is eligible for a wish?

Any child or young person aged 3 to 17, who is living with a life-threatening illness and who has not had a wish granted by a similar organisation.

Who can refer a child?

Family: parents, guardians, grandparents, siblings
Medical professionals: consultants, nurses, social workers

Friends of the family, school teacher or even a wish child themselves

What Happens Next?

Once a child is referred to us for a wish we contact their family to sign a medical information release form. Once we have received this form we then contact the child's named consultant to establish eligibility for a wish to be granted. In due course, once eligibility has been established, trained volunteers will visit the child to ascertain the child's wish. Then the magic begins!

"The most amazing experience of our lives! Emily does not smile much, but here she did smile. We now have some amazing memories which we will all hold very dear for the rest of our lives. Thank you all so much!"

HDLs

You can find all recent HDLs in the SEHD Weekly bulletin at <http://www.sehd.scot.nhs.uk/publications/bulletin/bulletin2008list.htm>

These are also linked from the Intranet News section.

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

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

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

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

eLibrary

www.elib.scot.nhs.uk

Have you registered yet?

Forthcoming Events:

NHS Highland Board Meetings 2008 November 4th December 2nd

The Heart of the Matter Symposium

Wednesday 26th November, Newton Hotel, Nairn
Hosted by the Coronary Care Unit, Raigmore Hospital
The programme includes sessions on Thrombolysis, PPCI/Angioplasty, and Rapid Access Chest Pain; and is relevant to GPs, practice nurses, paramedics and people working in hospitals. To register please contact HOTM@agendaevents.co.uk

Wound Care Conference

RCN Central Highland Branch and Coloplast will be holding a Wound Care conference on 24th November in the Centre for Health Sciences. This event will be open to all nurses, health care support workers and AHPs. Anyone wishing further information can contact us on rcncentralhighland@yahoo.co.uk .

Stroke Foundation Course

29th and 30th October. For more details contact Linda.campbell8@nhs.net or 01463 704086

Care Programme Approach Awareness Training

27th Oct, 12th Nov, 20th Nov, 28th Nov all held in the Stuart Room, Roberston FM Building, New Craigs, Inverness from 1.30 to 3.30pm. Places can be booked by contacting the CPA Office on 01463 253610 (ext 3610) or completing the booking slip on our page on the intranet. 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.

Union Learning Reps Event

Ross County Football Club, Dingwall
5th November 2008 09.30 - 16.15

This event is primarily intended for current Union Learning Reps (ULRs), however, if you are interested in becoming a ULR why not join us for the day?

To book your place by email: john.evans@hpct.scot.nh.uk or tel: 01463 704615

Advertise your event here: Contact Erin Greig on 01463 705771 or email Christina.macdonald@hnb.scot.nhs.uk

Submissions by 3 November for the next Team Update please to Christina.macdonald@hnb.scot.nhs.uk