

Belford Replacement: Progress Update

This is the second update in our series which aims to keep you up to date with our progress towards the design and building of a replacement Belford Hospital.

I have been working as a Consultant in Anaesthetics and Pain Medicine at the Belford since December 2020 and in January this year I was appointed as Clinical Lead for the hospital.

The hospital has a long history: it was first built in 1865 on the site where Invernevis House now stands. A prefab extension was built in 1893, but burnt down 7 years later, following which a more permanent extension was built. The original hospital was again extended in 1928 and the current incarnation of the Belford was opened in 1965. It was a modern hospital at the time; designed for the future, but it is showing its age now and is only kept going by the ingenuity and skill of our fantastic maintenance team.

The Belford is designated one of the 6 Rural General Hospitals in Scotland and was at the forefront of developing the concept. A Rural General Hospital is defined by the Scottish Government as a hospital, which for geographical reasons, is staffed by consultants in medicine, surgery and anaesthetics, as well as nurses and allied health professionals, providing a generalist medical and surgical service and able to provide intensive care for critically ill patients until they are able to be safely moved by the Emergency Medical Retrieval Service to a larger hospital. Although the population that the hospital serves in Lochaber is smaller and scattered over a wide area, there is a strong commitment to maintain a Consultant-led service and the Rural General Hospital status

The planning process described in the Initial Agreement has compared five possible service models for the new Belford. These range from Option 1:do nothing (a necessary baseline), to Option 5 where only minor surgery and day case treatment would be provided and patients would have to travel for inpatient care. After a series of workshops and meetings of staff and local stakeholders Options 3 and 4 were clearly identified as the preferred options to be taken forward:

Option 3 keeps the current medical and surgical services and includes a transformation in the Rehabilitation service. This would provide intensive multi-disciplinary rehab on a day case basis and an inpatient service where required. The aim will be to support patients to be able to return to living at home and recognises the challenges in the lack of a local community hospital and care home provision locally.

Option 4, in addition to the above, expands the range of surgical procedures that could be carried out at the Belford and would seek to provide access to a wider range of visiting medical and surgical services locally, where safe to do so.

We will be giving more details about these options and what they will mean to you in coming articles. I believe we can be confident that the services that the Belford can provide will be improved rather than there being any question of them being downgraded.

NHS Highland plan to have a stand at the Coal Community Event on 4th June where we'd love to hear your views, and you can also contact us via the NHS Highland Feedback team Nhshighland.feedback@nhs.scot or via our project email address on nhsh.nhshighlandestatesprojects@nhs.scot.

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June 2022