



Lochaber Health & Social Care Redesign

including the latest on the new
Belford Hospital

USE:

Questions and Answers No.2 Version 1.0

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Background

This document should be read in conjunction with the Question and Answer (Q&A) Document [Q&A No 1, 22nd August 2017](#) available on NHS Highland website.

NHS Highland has confirmed that a replacement for the Belford Hospital in Fort William is required as part of a wider redesign of local health and social care services in Lochaber. The redesign will look at the balance between services provided at home, in the community, in care homes as well as in the hospital.

Question & Answer No. 1, published in August, largely focussed on what will be provided in the new hospital. This has prompted a number of follow up queries which we summarise below.

Questions and Answers

SERVICE PLANNING

Will the predicted changes in the population be allowed for in plans?

Yes. A number of planning assumptions will be made including any new local developments, population predictions, age profile of the workforce, recruitment challenges as well as advances in medicine and technology. For instance NHS Highland is aware of planned expansions at the Smelter.

Given all the pressures will the hospital be down-graded?

No. That is not what the plan is. But there are challenges to overcome particularly around senior medical staffing such as consultant surgeons and physicians.

Is there a possibility that the new Belford will be staffed like Caithness General Hospital and be Rural Practitioner-led and not consultant-led?

As set out in Q&A No. 1, the plan for senior medical cover in the new Belford Hospital is that it will be consultant-led. Exactly how it will be staffed is still being considered.

It is worth pointing out that Caithness General Hospital is also a consultant-led service. Senior medical staffing is provided through a combination of locally based consultants (anaesthetist and surgeon), with consultant physicians and surgeons working in the hospital but rotating from Raigmore. There is also a small team of Rural Practitioners based in the hospital. Locum consultant cover is used to cover any gaps.

Rural Practitioners have enhanced skills in emergency care and resuscitation. They are usually GPs who have had extended training or consultants in Emergency Medicine.

Is there a possibility that the hospital won't be built at all?

While nothing can be 100% certain, everyone is working towards building a replacement hospital as part of wider redesign of services. This is subject to the business case being prepared, and approved by the Scottish Government.

The five year capital plan (funding for future buildings) which was considered by the board of NHS Highland on 27 March includes indicative funding for the replacement for the Belford.

SERVICE IMPROVEMENTS

Is building the new hospital a chance to do things differently and improve efficiency and access.

Definitely, but we don't need to wait for a new hospital to make improvements. Local staff are always striving to carry out improvement work. The current building, however, limits some developments and the new building will make it easier to improve access and deliver modern services.

What is being put in place to avoid people having to travel long distances for very short appointments?

A number of things including the roll out of NHS Near Me.

What is NHS Near Me?

One element of NHS Near Me is to use technology for remote consultations with specialist staff. It includes the use of the most up to date technology to reduce the need for people to travel. NHS Near Me appointments will initially take place in the Belford, and you will see your consultant or other specialist via a video link. It will also be possible for some people to have their appointment in their own home or in local health and social care facilities

Testing this out does not need to wait for the new hospital, and we hope to confirm a plan for local use in the next few months once initial testing has been evaluated.

Use of technology will not replace hands-on care and will only be used when appropriate.

WORKFORCE

What is being done to ensure that enough staff can be recruited to the hospital?

A lot of thought is going into this national problem. There is no single or easy answer and it will require different solutions over the short, medium and longer term. Senior clinicians and managers are looking at different options as to what the best way to staff the hospital will be.

While recruitment is a challenge, retention is also problematic. This is because of the onerous on-call arrangements. Work is also underway to look at how this might be improved.

HOSPITAL SERVICES

What services will be provided in the hospital?

These will be similar to those provided at present but more detail should become clear in the next few months

Can we improve the appointment system in Raigmore to take into account local individual circumstances?

Yes. This already happens in a number of specialities in Raigmore where patients are given some choice around their appointments.

How many hospital beds are there currently in the Belford?
There are 44. The combined assessment unit has 17 beds; Ward 1 has 15 beds; there are 10 day case beds and two beds in the High Dependency Unit.
How many hospital beds will there be in the future?
It is likely to have around the same number. A detailed assessment will be made of future needs. This is likely to become clear in the next few months.
Will there be specialist mental health beds incorporated in the new hospital?
No.
It has been suggested that all the beds will be located in single rooms?
This is correct. It is current Scottish Government Policy that all new build hospitals will be built with single en suite rooms.
Have any concerns been expressed about single rooms?
While the majority of people tend to be in favour of single rooms some people do have some concerns. This is mostly around a fear of being isolated, not having other patients to look out for them and fear of not seeing staff so much. Such concerns will be addressed through the design of the building, including communal eating areas and spaces.
Will there be adequate parking spaces?
Yes. The number of spaces that will be required will be determined as part of the planning application.
Will there be a bus stop, taxi rank, waiting area, bike shed close to entrance with covered seated area?
Yes that is what is being proposed. There is a Transport and Access Group overseeing this part of the plan.
Will it be possible to have live information bus displays outside and in waiting areas?
Yes.
Is there a plan to have a helipad at the new hospital?
Yes.

Question & Answer No 3
<p>It is also important for everyone to be thinking about what is required to look after general health and well-being of the local population. We will also actively engage with younger people to hear direct from them about their views on services.</p> <p>It is often the case that we all focus on services provided in hospitals. Thankfully most people spend only a tiny amount of time receiving hospital care. Thinking about the range of local services and support is really important and will be the focus of Q&A No.3. Please send in any questions you have and the group (*) will seek answers on behalf of the local community.</p> <p>We plan to publish the next Q&A No 3 in June 2018.</p>

(*) A local communications and engagement group has been set up to support the redesign. The Terms of Reference for the group are [Here](#)

You can find out more information on the NHS Highland website [Here](#)

