Introduction
MT welcomed everyone to the meeting and apologised for the faults with the PA system.

Background
MT gave a bit of background to the process which had taken place to reach the current stage. It was stressed that the event was about launching the consultation process which was taking place between 20 August and 23 November 2018 and not about getting into too much detail.

Outline of Proposals
MT outlined the proposals which had arisen from the workshop events held and invited questions on the process or proposals presented.

Q&A’s:-
A member of the audience reflected on a previous document which mentioned the state of the current NHS buildings, highlighting that the Town & County was in good condition and only needed slight modification.

EG confirmed that the assessment only reflected the state of the building. He added that the Scottish Government are looking for 50% of rooms in hospitals now to have ensuite facilities and for this to happen at T&C would require the building to be demolished.

The same member of the audience mentioned the levels of endowment funds held for the various areas at T&C, adding that endowments money had been used to refurbish the canteen at CGH.

EG confirmed that there were rules and regulations in place for the use of Endowments funds and these could not be used for the work being planned.

MJ proceeded with the presentation and highlighted some improvement work which had already been carried out with the integration of health and social care and the revised clinical model at Caithness General. However she added that further work is required to ensure workforce sustainability and to modernise the estate and the use of the estate in Caithness.

MJ added that there had been positive options developed at the redesign workshops around care hubs/care villages for both sides of Caithness. She highlighted the strengths, weaknesses, opportunities and threats of maintaining the Status Quo position.

EG outlined the other options which had been developed and some of the reasons why Pulteney House came out as the preferred option of the workshop. He stressed the strategic
importance of CGH within NHS Highland and the requirement for upgrading the facilities there.

MT invited further questions from the floor:-

**Q&A**

A lady at the front of the audience queried the total budget mentioned of £30m, adding that there were multi million pounds plans for CGH and her fear was that there would not be enough to do all the things suggested and she was scared that they were giving up things but not sure that they would get what they need.

EG confirmed that there was a due process to go through and a business case would need to be completed for taking to the Scottish Government (SG) for the funding. This cannot take place however until after the consultation is complete and NHS Highland is clear as to what is being proposed. Based on other work he has taken forward he has given the £30m budget figure as an estimate but this could be more once more detailed estimates are done.

A gentleman in the audience asked whether the Scottish Government budget would be enough given the other capital spends being proposed within NHS Highland.

EG confirmed that this business case would be separate from the capital allocation the SG makes to all Health Boards each year and would be an investment request which NHS Highland would be bidding for. EG stressed that on past experience if the strategy is right and the community is behind the bids then the Scottish Government tends to support it.

The same gentleman also suggested that there was another option to be considered whereby Pulteney House and T&C could both be kept open.

MT confirmed that during the consultation period all options were being considered and any new suggestions would be looked at.

Another gentleman raised concerns over the running of the services currently and the staffing issues being experienced causing the MIU at Dunbar to close periodically. He added that there needed to be an immediate improvement in the provision of Mental Health services given the waiting lists for Clinical Psychology appointments and the lack of Consultant Psychiatrists in the area.

MT advised that this was the point of the consultation and the redesign. The current services are unsustainable and there is a need to change.

Another lady at the front of the audience reflected on an incident when she had been in hospital recently and a palliative care patient was sharing the ward with elderly confused patients as a bed was not available at T&C.

MT confirmed that any changes taking place will be done together so that everyone can participate in what is happening and have their say.

Another gentleman in the audience referred to the NHS Website and the services being provided at Oban and Fort William, adding that they were Rural General Hospitals but had far more services than being provided at CGH. He added that the CGH information only gave out visiting hours and did not give out information on the services.

MT acknowledged that the website information was obviously not accurate and that updating of the information was required.
A young lady in the audience indicated that she had heard that the Medical Centre would be moving to Pulteney House site and suggested that this was not central enough for the people of Wick to access.

EG confirmed that these views would form part of the process and nothing was set in stone as yet.

Another gentleman in the audience suggested that NHS Highland did not have a budget problem but they had too many managers. He added that he did not think there had been an improvement in services as his GP Practice had now lost Dr Echavarren and they now only had one GP.

MT acknowledged his comments but suggested that the managers present would perhaps not be of the same opinion.

A gentleman at the rear of the audience disagreed with the former’s comments and added that he found that services provided locally were good and that those present were there to try their best to resolve issues for everyone.

The lady who had previously discussed the endowments funds at T&C advised that given that elderly people were now more fit that the best place for the care hub would be the T&C site as they would have access to the shops there and could access the library and swimming pool on the nearby school community site. She added that there were no buses went past Pulteney House. This was disputed by local residents in the area of Pulteney House who were present who said there was a bus stop outside Pulteney House.

A further lady at the front spoke of "knowing at least 2 consultants who wanted to apply/stay but would not be given permanent contracts".

MJ advised this had not been the case.

**Engagement Activities**

MT advised that a diary of consultation events was being planned and there were over 40 dates already scheduled but the Project Team wanted to hear from the public what times/venues were most appropriate for them. She confirmed that various forms of consultation would take place to try to reach as many people as possible and well as the “hard to reach” members of the public. She confirmed that a mail drop would be taking place and surveys would be distributed in the area but asked for everyone to advise of any other means they thought appropriate.

**Thank you**

MT thanked everyone for giving up their time to attend and closed the meeting at 7:10pm. She invited anyone who wished to speak on a one to one basis to stay behind and a member of the team would speak with them.

Several people stayed behind to take up that opportunity.