A BROAD outline of how NHS Highland will work to meet the “most challenging savings target that the board has ever faced” was given to the board on 31st May.

At its April meeting, the board approved its revenue budget for 2016/17, and was told that savings of £28.8 million were required. At that time, around £13 million of savings had been identified “with a relatively high degree of confidence” and a further £11.7 million of “opportunities” that would require “transformational change” to deliver had been identified.

This meant there was a gap of £4.1 million in unidentified savings.

In a paper to the board, finance director Nick Kenton explained that several initiatives were being taken across Scotland that should help to reduce that savings gap, but he added that it had not been possible to close all of the gaps.

Continued on page 2
Savings target

**Continued from front**

yet been possible to quantify this.

He also set a national context for the board's savings targets. On average, he explained, boards require cash savings of around five per cent – roughly double the requirement for the previous financial year.

He added that since the last board meeting “good progress” had been made in identifying “further everyday quality improvement efficiencies”, totalling £8.1 million.

The director went on to explain a range of cost-cutting measures that could be taken. For example, reducing acute hospital patients' length of stay by half a day could save £2.8 million. Similarly, if community hospital patients' length of stay was reduced from 24.3 days to 22.3 days there would be potential savings of £2.5 million.

“Therefore, a relatively small change of length of stay has a potential benefit of over £5 million,” Mr Kenton stated, adding that these figures excluded NHS Highland's rural general hospitals and mental health in-patient facilities.

Reducing the number of new and return out-patient appointments – respectively 73,000 and 140,000 in 2015/16 – by just two per cent could yield £0.6 million.

Reducing delayed discharges, cutting the cancellation rate for planned theatre procedures and continuing to work to reduce the number of patients who harm themselves as a result of falling could also deliver cash savings.

In summing up, Mr Kenton told the board that he believes that delivering currently identified savings would bring NHS Highland to within £2.3 million of meeting its savings target, and that actions were needed to manage what he will call “underlying cost pressures” probably of around £6 million.

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**COMING SOON...**

Mental health minister to attend annual review

**NHS HIGHLAND’S** annual review for 2015/16 is to be held on Tuesday 16th August in Inverness with Maureen Watt, Minister for Mental Health, in attendance.

The performance of all NHS boards is reviewed by the Scottish Government Health Department at annual reviews. They provide an opportunity for members of Highland’s NHS board to highlight the year’s achievements and discuss issues with the Minister and members of the Scottish Government Health Department.

The agenda is set by the Scottish Government Health Department based on national standards and agreed local performance targets.

Members of the public can attend the open session and are also invited to submit questions to be answered on the day of the review.

More detail on timings and venue will be issued in due course.
SAMPLE exercise events organised for NHS Highland staff as part of a UK-wide workplace health week have proved such a success that several of them are still going strong.

According to co-ordinator Dan Jenkins, some of the taster initiatives set up for the week-long event last month proved so popular that staff have just kept on doing them.

Dan, a health improvement specialist, and other colleagues based at Assynt House in Inverness, had organised events such as yoga classes, mid-day mile walks and even a Hula Hoop contest as part of the national campaign.

The idea was to inspire staff to enjoy moving more and breaking up sedentary work habits.

Dan said: “We spend a large part of our lives at work and for lots of us with desk-based jobs we can go hours and hours without moving. That’s not good for our bodies, and it’s not good for our work or concentration either. Everyone I spoke to who joined in the activities during the week said they felt more energised and focused afterwards. I’ve met new people I didn’t know, and we had a lot of fun in a short space of time.”

With help from similar-minded colleagues he was able to stage a range of activities at NHS Highland sites including Larachan House in Dingwall, the Centre for Health Sciences and other departments at Raigmore Hospital, and Assynt House.

And now it appears that some of the activities such as the exercise bike sessions at the Centre for Health Sciences and the midday walks in several sites look set to continue.

Dan said: “It only takes a couple of people to start doing these things a bit more often, and then others feel more confident to join in. Doing different things and different exercises like those we had in the workplace health week is a way of threading exercise into your working day. What also helps is that by doing them with colleagues can make the activities mean a lot more because we are supporting each other.

“More than 400 of our staff members stated in the last staff survey that they would be up for helping motivate others so I hope the Health at Work Week, and little reminders like this article, can spur them on to grab their workmates and give something a go.”

Dan said that he was open to help start other group exercise events across NHS Highland.

“If people want ideas, then get in touch,” he said.

“It doesn’t have to be too formal. It can grow organically from what people want and like to do.”

The Health at Work Week programme at Centre for Health Science, led by technology enabled care team, included:

- A Raigmore staircase climb, in which people were urged to burn fat in 15 minutes by climbing up and down the Raigmore Hospital staircase.
- A cycle challenge, in which staff members were able to break their day by cycling on one of the cycle machines donated from Raigmore Sports & Social Club at the front foyer in the Centre for Health Science.
- A mid-day mile walk from the Centre of Health Science front desk 12pm
- A fitness session which involved a 20-minute basic circuit training exercise

In a similar spirit, events at Assynt House included yoga stretching classes every morning in the board room, Hula Hoop sessions on Tuesday either outside in the garden area or the staff room and a mid-day mile walk on Thursday around the nearby Beechwood campus.
Recruitment role for care home resident

A RESIDENT of a Caithness care home has participated in the interview process for NHS Highland employees as part of an innovative programme that aims to transform the way the board’s homes are run.

Under the ‘My Home Life’ initiative, 85-year-old David Bruce was asked to be the residents’ representative and apply his considerable life skills to help select and appoint members of staff at the 18-resident Pulteney House in Wick.

David, who will be 86 in November, not only interviewed the candidates, he drafted and asked his own questions. After the selection process was complete he even told the successful interviewees that they’d got the job.

David, who has been at Pulteney House since last August, certainly impressed home manager Penny Cormack with his attentiveness to the task.

But after working some 30 years at the nuclear test facility at Dounreay that is currently being decommissioned, it proved plain sailing for David.

Ending his time as executive officer, planning, for the prototype fast reactor, David had been involved in the interview process at Dounreay a number of times.

He said that Penny approached him to take part after learning about his life.

He explained: “She came and told me that they were recruiting more staff and was promoting residents to participate in the process and would I be interested in talking part? So I said ‘Why not?’.”

Once he agreed David was briefed and given the interviewees’ CVs which he started going through when the jobs were announced last March.

“I have been on the other side of the process, so what I was looking for was the number of qualifications and things like that. Using a point based system, it became obvious that some of the job applicants were not interested in the job and the others were,” said David, who was born in Wick.

Out of the seven CV’s received, David helped choose the five that were invited for interview.

Then in May, David was part of a four-person panel that included Penny Cormack, Morven Shone, NHS Highland personnel officer, and Julie Lewis, Pulteney House’s deputy manager.

“We all took notes at the meeting, and put down what we thought of the candidates’ answers,” said David.

As the residents’ representative, David also got to ask the interviewees questions.

He said: “All my questions were on health and safety. One of the jobs I’d done at Dounreay was to go to health and safety meetings. So I asked two questions: what was actually required if a certain situation happened, and what would the candidate do? Most of interviewees’ answers were very good.”

After the interviews David was fully involved in the deliberations about who got the job.

“At the end, we all talked about what we’d seen and heard. The point scoring system worked well. We agreed to take an average on how we thought they scored on their answers. The people who got the highest scores were offered the job.”

David was then given the pleasant task of telling the successful candidates face-to-face that they got the job.

“They all seemed very happy when I told them they’d got it,” he said.

Speaking about the whole process, David said he was impressed at the way that the NHS Highland employment process worked.

“It was much quicker than what was done at Dounreay in my day. Obviously we were restricted by the old civil service rules and regulations which slowed down the process,” he said.

As to having a resident involved in the employment process, David said: “I enjoyed it. It was good to be involved.”

But he did have some reservations.

“I think as long as the resident has got experience, it’s a good idea,” he said. “However, if they did not have experience, they would find it very daunting.”

NHS Highland chair David Alston catches up with David Bruce at Pulteney House
A WORLD-RENOWNED geriatrician and bestselling author has spent the week meeting healthcare professionals across the north of Scotland.

Dr Allen Power spoke to staff from NHS Highland and Alzheimer Scotland and members of the Highland Dementia Working Group about exploring ways to enhance the wellbeing of people living with dementia.

In his first trip to Scotland, he delivered workshops to NHS Highland care home staff and visited the Alzheimer Scotland Dementia Cafe in Avoch.

NHS Highland’s Alzheimer Scotland dementia nurse consultant Ruth Mantle said: “It’s a real coup to attract such a well known and respected geriatrician, author and educator to the north of Scotland. His presentation to the Dementia Action Network, which consists of NHS Highland, Alzheimer Scotland and the Highland Dementia Working Group, was attended by over 150 colleagues from the network, as well as professionals from other health boards and third-sector organisations throughout Scotland.”

Dr Power said: “This is my first visit to Scotland and I am very impressed by the work that is being done across Highland to support people living with dementia.

“Scotland is at the forefront in terms of national strategies and policies for dementia care, and I will take a lot of what I have already learned back to my colleagues in the United States.”

Kitty gets medal at diabetes symposium

Dr Kitty Campbell (fourth from left) was presented with the Robert Lawrence Medal at this year’s Diabetes Symposium, having lived with Type I diabetes for 60 years. Dr Campbell is pictured with the diabetestes team and Susanne Aitken (third from left), who also has Type I diabetes and attends the clinic dating back to when she was younger when Dr Campbell worked there as a hospital practitioner.

Pictured are, from left, Nancy McAdam, founding member of the Highland Dementia Working Group; Dr Allen Power; Ruth Mantle, NHS Highland Alzheimer Scotland dementia nurse consultant; Una Cranston, chair, Highland Dementia Working Group and Geraldine Dita, Alzheimer Scotland policy and engagement manager.
Reach Out campaign gets ‘extraordinary’ help offer from Spain

THE campaign launched by NHS Highland to tackle loneliness and social isolation has had an “extraordinary” offer of help – from an 88-year-old woman in Spain.

The board set up a dedicated website for its ‘Reach Out’ campaign, inviting people to sign a pledge to commit themselves to doing something of their choice to help make people feel less lonely.

And within days of the campaign’s launch, a woman living in Spain made a pledge through the site to strike up a weekly email correspondence with anyone in Scotland who feels lonely.

“Our campaign has been very well received throughout the NHS Highland area and beyond,” said Joanna Macdonald, the board’s director of adult social work, “but to get an offer of help such as this is quite extraordinary. It’s a fantastic gesture.”

Making her pledge in ‘Letter from Valencia’, the woman wrote: “Should any persons, feeling isolated and alone in Scotland and having a computer, would like to correspond by email weekly, I am prepared to dedicate time to ensure I regularly fulfil that commitment.”

NHS Highland has directed the woman – who has asked for anonymity – to the voluntary organisation Be-friends Highland but anyone who wants to take up her offer should email info@reachout.scot.nhs.uk

‘Reach Out – Make a difference for someone who’s lonely’ was launched on 20th May at Drakies Primary School, Inverness, but the health board plans to hold a series of regional launches throughout its vast area over the next few months.

Cold can make isolation worse

SOCIAL isolation can be made worse by living in a cold home. That’s the message from NHS Highland and Home Energy Scotland as the health board steps up its campaign to raise awareness of the impact of loneliness.

“High fuel bills may prevent people from going out as they are worried about getting cold outside, then returning to an already cold home”, said Cathy Steer, head of health improvement at NHS Highland. “People who are unable to keep their homes warm may also be reluctant to invite friends or neighbours to visit”.

Bob Grant, manager of Home Energy Scotland’s Highlands & Islands advice centre agrees, adding: “According to the 2012-14 Scottish House Condition Survey, 72 per cent of Highland pensioners were classed as living in a fuel-poor household, and the day-to-day effect of fuel poverty can be stark.

“Our advisors speak with people who move into one room during the winter as they cannot afford to heat the rest of their house. We’ve helped clients who don’t even switch on their lights because they are worried about their bills.”

NHS Highland and Home Energy Scotland are working together to raise awareness of fuel poverty and the health impacts of cold, damp homes.

“Our partners at Home Energy Scotland are funded by the Scottish Government to provide clear, impartial advice and support to people who are struggling with fuel costs” said Cathy Steer. “They deliver training to our staff and we encourage anyone working with vulnerable clients to get in touch and find out how they can help their clients.”
MEMBERS of Sutherland District Partnership have added their support to the ‘Reach Out’ campaign to target loneliness and social isolation.

And at a meeting in Golspie last month, the partnership agreed to get heavily involved in the campaign, helping to raise its profile throughout Sutherland.

Councillor Deirdre Mackay, who chairs the partnership, said: “Loneliness and social isolation are problems encountered throughout Scotland, but they can be particularly acute in places like Sutherland, with its ageing population and remote communities.

“We in the partnership are determined to do everything we can to support the campaign, and will be encouraging everyone in Sutherland to do likewise.”

The meeting agreed to explore the possibility of holding an older person’s summit meeting in Sutherland, at which the views of local residents and organisations will be sought.

“It’s important that we heed the views and experiences of local folk,” said Councillor Mackay.

“We know, for example, that we should not make assumptions about how people view loneliness, just as we should not assume that all lonely people are old.”

Another idea that the partnership agreed to pursue was the establishment of a Sutherland Transport Forum, given that distance and transport can be key factors in tackling loneliness. The forum would consider, for example, the potential for helping to facilitate community car schemes in the area.

The meeting agreed that a wide range of organisations would be invited to get involved in the campaign, including High Life Highland, Police Scotland, the Scottish Fire and Rescue Service, Highland Drug and Alcohol Partnership and the network of local hubs, lunch clubs and drop-in services that exist throughout Sutherland.

Councillor Mackay explained: “Loneliness isn’t just a personal problem for people; it’s a community issue that requires a community response.”

Joanna Macdonald, NHS Highland’s director of adult social care, said: “Reach Out has clearly caught the imagination of the public throughout the Highlands and Argyll and Bute, and has even been welcomed by First Minister Nicola Sturgeon and the Cabinet Secretary for Health, Shona Robison.

“The campaign was launched in Inverness and it’s our intention now to hold a series of regional launches, including one in Sutherland. It’s great that we will do so knowing that the Sutherland District Partnership is so supportive of the campaign.”

LONELINESS

Conference topic

COMPELLING evidence about the impact of social isolation and loneliness and the part the third sector plays in addressing this will be discussed at Voluntary Health Scotland’s annual conference and AGM, to be held on 24th November in The Roxburghe, Charlotte Square, Edinburgh.

New video echoes theme of campaign

TO Mark Men’s Health Week (13th-19th June), Inverness Men’s Shed have taken part in a video with NHS Highland to show how joining in with like-minded people can help men get back some enthusiasm for life which health problems, bereavement or age may have taken away.

The video’s message chimes with work being carried out under ‘Reach Out’, the campaign recently launched by NHS Highland to address problems associated with loneliness and social isolation.

“Tackling loneliness and isolation is not rocket science,” said Alan Michael, co-ordinator of Friendship Services, a network of organisations that provide social opportunities for people. “It’s easy to lose motivation if you are sitting at home all day but if you get out and take part in an activity or do things for others it can re-energise your life.”

He added: “Our members were happy to lend support to the ‘Reach Out’ campaign by taking part in the video to show that increasing well-being and happiness can be as simple as a phone call or giving people the space and opportunity to get together and make friends.”

NHS Highland consultant cardiologist, Professor Steve Leslie wholeheartedly supports what groups like the Men’s Shed do.

He said: “Having a condition can be a lonely and isolating experience. Not being able to get out and exercise or do what you’d like can limit your social life and make you retreat into your shell. Men’s Shed is invaluable in getting older men to socialise again.”

The video can be viewed at https://youtu.be/KQoSz54uBaU
THE vital importance of accurate and effective health record keeping is essential for the delivery of health and social care services across Argyll and Bute Health and Social Care Partnership (HSCP).

The HSCP has therefore been supporting health records staff to undertake an Institute of Health Records and Information Management (IHRIM) certificate.

This is a Scottish Government funded health record training programme which has at its core a range of modules that encapsulate the key functions of those staff who are involved in health records duties. It also helps staff to build on their existing knowledge and ensures that there is consistency across Argyll and Bute with regard to health record keeping.

A total of 42 health records staff across Argyll and Bute have now succeeded in gaining the IHRIM certificate with the latest tranche of eight staff completing the certificate at the end of last year. These recent candidates were presented with their certificate in Mid Argyll Community Hospital in Lochgilphead by Christina West, the chief officer of the HSCP.

Christina said: “This programme helps to build on the current knowledge and skills of our health records staff and also ensures that they remain up to date with any changes to government policy. “I was therefore delighted to be asked to attend this event and present the IHRIM certificate to the successful candidates.

“I would also like to congratulate the staff for their achievement as well as thank them for their hard work and commitment to delivering an excellent service for our patients and service users.

The following candidates were successful: Kara Black and Stephanie Auld, Cowal Community Hospital; Siobhan Dewar and Kirsteen Weir, Mid Argyll Hospital; Jane O’May and Angela Andrews, Campbeltown Hospital; and Annmareae Boyle and Shirley Morris, Islay Hospital.

CERTIFICATES AWARDED

The record takers!

William’s hospice challenge

A DESIRE to make a difference has encouraged one member of team NHS Highland to step away from his comfort zone and challenge himself while raising funds for the Highland Hospice.

William Craig-Macleman, surgical nurse manager at Raigmore Hospital, is in training to take part in the Grand Canyon Challenge in September to help raise funds for the hospice’s Project Build Appeal.

The five-day challenge has been graded as tough with participants tackling steep trails, tunnels and ladders but William is looking forward to the experience.

He said: “It is going to be a once-in-a-lifetime experience.

“I know this is going to really challenge me and I am in training for it but it is nothing compared to what the hospice does.

“Everyone knows someone who has been affected by cancer and to be able to give something back to them to help with the incredible work that they do every day is why I am doing this.”

William has been fundraising for the past few months, holding a number of different activities including a race night. He recently passed his £3,900 target but said he was looking to raise even more.

He said: “Everyone has been so supportive, particularly my family, and I hope that support continues over the next few months as this challenge gets closer. I’m looking forward to it.”

If you’d like to sponsor William you can via his everyday hero page - https://grandcanyon.everydayhero.com/uk/lorrainemurphy-william-craig-macleman

FUND-RAISER
NHS HIGHLAND has joined forces with Inverness Street League in a bid to create smoke-free environments for youngsters to play sport.

The board is relaunching its Smoke-free Sports initiative to prevent young people from starting to smoke, and encourage people to quit.

Coaches, players and spectators of the Inverness Street League are taking part in the project, and they have signed a pledge to avoid smoking while on official club duty.

The campaign also has the backing of Scottish Premiership side Inverness Caledonian Thistle.

NHS Highland senior health promotion specialist Susan Birse said: “It is vitally important that we support young people to make positive choices about their health. By getting local football clubs to pledge their support, we hope to encourage people to think about quitting or not starting smoking.

“It’s wonderful that Inverness Caledonian Thistle Football Club are backing the Smokefree Sports initiative, as they are such an active part of the community in Inverness, and many youngsters look up to the first-team players.

“A word of encouragement from any of the players at the club can resonate with young people, and we look forward to working in partnership with the club and Inverness Street League to promote this vital health message.”

Danny MacDonald, from Inverness Caledonian Thistle, was on hand at Inverness Royal Academy recently to award prizes to the winner of a competition between S1, 2 and 3 pupils to design a logo for the campaign.

He said: “it is important we encourage coaches and parents to refrain from smoking when watching their children play football or any other sport.”

The Smokefree Sports initiative was launched in 2013. It focused on football and had many youth clubs across the Highland capital signed up to create smoke-free environments for youngsters to play the beautiful game.

“This campaign will focus on more sports such as boxing and rugby as well as football,” Susan Birse explained.

“It’s important that we reach as many young people as possible and educate them about the dangers of smoking.

“One of our local teams, Balloan FC, is travelling to Manchester to represent Highland in a national tournament. They will be displaying our new Smokefree Sports website on their kits, so hopefully it encourages wider discussion among parents, coaches and players.”

James Fraser, from Inverness Street League, said: “We hope that Smokefree Sports will give coaches, parents and guardians the opportunity to provide positive role models to encourage youngsters to make informed choices about their health, and to think twice about starting to smoke.”

Julie MacLennan, from Inverness Royal Academy, said: “This was a great competition as it gave us the opportunity to combine design with health and wellbeing.

“The pupils responded positively to the idea that this campaign was trying to get smokers to consider where they smoke and who it effects.

ABOVE: Balloan FC are pictured beside the competition winners and Danny MacDonald, Susan Birse from NHS Highland, James Fraser from Inverness Street League and club coaches.

LEFT: The winning logo design.
AN Alzheimer Scotland dementia nurse consultant who travelled to Australia and the United States on a Churchill Fellowship actually has a connection with the famous statesman that is much closer to home.

Almost 100 years ago, Winston Churchill visited Ruth Mantle’s family home in Moy on his way to a historical meeting that would lead to the creation of the Irish Free State.

Speaking after an award ceremony in London to mark the successful completion of her Winston Churchill Travelling Fellowship, Ruth said: “My family home, Invermoy House, was the former Moy Railway station and Winston – and King George V and David Lloyd George – used the station to travel to Inverness in 1921 to go to a cabinet meeting in Inverness. The first time the cabinet ever met outside London.”

Ruth, who works with NHS Highland and who now lives in Avoch, Ross-shire, was talking after the prestigious biennial award ceremony in London, which also proved to be a memorable affair.

She was presented with a stunning blue cloisonné enamelled silver Churchill Medallion designed by the ceremony’s guest of honour, Professor Brian Clarke, a world-renowned architectural artist who was a 1974 Churchill Fellow.

Professor Clarke presented 129 Fellows, including Ruth, with their medallions at a ceremony in Church House, in Central London.

Coincidentally, Church House also has significant Churchillian associations. During the Blitz, Winston Churchill requisitioned Church House as a makeshift Houses of Parliament after the originals had been damaged by bombing. It was also from Church House that he made his famous speech announcing the sinking of the Bismarck on 24th May 1941.

The link with Ruth’s family home began twenty years earlier in September 1921, when the then Prime Minister, David Lloyd George, was on holiday at Gairloch in Wester Ross. While there, envoys from the nascent Irish government paid him visits after it became clear that the Irish wanted independence.

As these talks gained momentum, Lloyd George decided to call the cabinet to a meeting at Inverness, rather than travel back to London. Other cabinet ministers, including his deputy Austen Chamberlain and Winston Churchill, were holidaying in the Highlands at that time.

And on top of that, King George V was staying at Moy Hall, the home of

Continued on next page
Ruth’s Churchillian links

Continued from previous page

the clan chief Mackintosh of Macin-
tosh, 12 miles south of Inverness.

And Churchill, the King and Lloyd
George used the Moy station to travel
to the town house in Inverness where
the first cabinet meeting of the British
government ever held outside London
took place.

And at this meeting an agreement
called the ‘Inverness Formula’ was
made that set the scene for an Anglo-
Irish treaty the next year that saw the
creation of the Irish Free State.

Now, 95 years later, the Churchill
name is still making things happen. As
part of her Fellowship, Ruth travelled
to Australia and the USA to investigate
approaches to connect with people
with dementia and families, with a view
to sharing the practical application of
this with staff working in hospital and
community settings including care
homes.

Ruth said: “The Travelling Fellow-
ships provide opportunities for UK
citizens to go abroad on a worthwhile
project of their own choosing, with
the aim of enriching their lives through
their global experiences – and to bring
back the benefit to others in their UK
profession or community through
sharing the results of their new knowl-
dge”.

Professor Brian Clarke praised all
the Fellows for their outstanding
achievements, and said: “I know from
personal experience that the Fellow-
ship represents a wonderful opportu-
nity. I am continually amazed and in-
spired by the Churchill Fellows dedica-
tion and commitment to making a dif-
ference in so many areas affecting to-
day’s society.”
Chief officer says she’s impressed by IJB members

THE Integration Joint Board (IJB) is the new governance Board of Argyll and Bute Health and Social Care Partnership (HSCP) and has responsibility for the planning, resourcing and overseeing of the operational delivery of integrated health and social care services.

The latest meeting of the IJB was held in Lochgilphead on 18th May.

Christina West, chief officer of the Argyll and Bute HSCP, said: “The meetings of the IJB are an essential element in the overall governance and planning of resources for the delivery of services across the Health and Social Care Partnership and I am greatly encouraged by the breadth of skills and experience that we have within the IJB membership.

“The integration of health and social care has also presented us with an opportunity to change the way services are provided and accessed in Argyll and Bute to ensure that we put the person at the heart of the process and focus on the outcomes required by our communities.

“We also recognise that there needs to be a shift in our engagement with local communities and this engagement has to be carried out at a local level to reflect the demands and needs of the various communities within the HSCP.

“We have therefore established eight locality planning groups to lead on a range of work, including engagement, and these groups will develop closer partnership working with the public and other stakeholders at a local level.

“The feedback and information we receive from this ongoing engagement will assist in the development and planning of health and social care services that are required at a local level.”

The HSCP has also developed a three-year strategic plan which outlines the key aims and visions of the HSCP and the six key areas of focus are:

- Reducing avoidable emergency admissions to hospital and minimising the time people are delayed
- Supporting people to live fulfilling lives in their own homes for as long as possible
- Supporting unpaid carers to reduce the impact of their caring role on their own health and wellbeing
- Implementing a continuous quality improvement approach
- Supporting staff to continuously improve the information, support and care they deliver
- Efficiently and effectively managing all resources to deliver best value

A copy of the strategic plan is available on request and can be accessed on the websites of NHS Highland and Argyll and Bute Council websites.

The IJB meeting’s on 18th May considered a number of papers including the financial plan, performance management framework, public health report and the HSCP’s clinical and care governance arrangements.

IJB meetings for the rest of this year will be held on 4th August from 1.30pm -4.30pm in the Meeting Room, Timber Pier Building, Dunoon; 28th September from 1.30pm-4.30pm in the Meeting Rooms, Mid Argyll Community Hospital, Lochgilphead; and 30th November from 1.30pm-4.30pm in the Nelson Ward Meeting Room, Lorn & Islands Hospital, Oban.

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**Conference**

National platform for dementia projects

THE inaugural Dementia Scotland 2016 - A Human Rights Based Approach to Care conference will be held on 14th September.

To take place at Dynamic Earth, Edinburgh, the conference will examine progress of Scotland’s ongoing National Dementia Strategy, while dissecting the aspirations of the 2016-2019 strategy.

It will provide a platform for the leaders of all Scotland’s key dementia projects and many others to showcase their achievements and ambitions and provide insight on evidence based research and innovations to the leading health and care professionals from across all areas Scotland.

The conference website will provide ongoing commentary as the key priorities of the new strategy unfold.
Study tour planned
SENIOR clinicians and healthcare managers are to be given a first-hand insight into how NHS Highland delivers health and social care.

Leading experts from around the world have been invited to take part in a week-long study tour of the Highlands organised by influential think tank The King’s Fund, a charity which shapes health and social care policy and practice.

Giving details of the tour on its website, The King’s Fund described NHS Highland as an “exemplar” health board.

It’s planned to hold the tour in November.

HQA’s objectives
NHS Highland is continuing its work to embed the Highland Quality Approach (HQA) throughout the organisation.

At the May board meeting, members endorsed the HQA’s objectives for this financial year. These include, for example, making NHS Highland the employer of choice, increasing the number of people who can be supported through the use of modern technology and preventing people from falling.

The board was also be asked to help develop ways for measuring success in meeting these objectives.

No longer needed
THE old health centre building in Drumnadrochit has been declared as surplus to NHS Highland’s requirements and last month’s board meeting agreed to its disposal.

The building became vacant in December when the medical practice that occupied it moved to the new Drumnadrochit Health Centre.

Organ retrieval
WORK on the retrieval of organs at the Belford Hospital in Fort William has been highlighted nationally, board members were told.

A paper to last month’s board meeting explained that this work has prompted wider discussions across other rural general hospitals, as well as nationally, on the subject.

Sowing the seeds for good health...

GETTING people to have a go at gardening, whatever their age or fitness, is the aim of a small, Kingussie-based charity.

The name may be taken from the local hospital where it first started but St Vincent’s Therapy Garden has grown over the last four years, supporting gardening spaces and activities at the Aviemore GP practice, the Wade Centre care home, Caberfeidh House day centre and the Am Fasgadh Kingussie allotments as well as at the hospital.

NHS Highland has made a video showing them getting preparations under way during spring the and will follow up that work later in the year.

The inspiration for local therapy gardening came from project manager and horticultural therapist Mary Stewart, a former occupational therapist, who studied for a Diploma in Social and Therapeutic Horticulture in 2008.

She explained: “The opportunity arose for a therapy garden for patients at St Vincent’s Hospital, and after planning, fund raising and building a summer house the first bulbs were planted there in 2012. The first gardening sessions started in 2013.

“From these small beginnings we have extended our activities all year round and included day care centre clients and people with learning disabilities.

“Our gardeners keep coming back as the broad range of tasks allows everyone to join in to a certain extent, whatever their capabilities. It increases people’s self-esteem, builds confidence, and offers basic and social skills.”

Jinty Moffett, the organisation’s chair, added: “We were keen to take part in the video to show the range of opportunities our gardeners have to get green fingers and to invite anyone interested to get in touch and come along.

“Everybody can be a gardener and we’d like to see more people joining in. We want health and social care staff to consider recommending the therapy to their patients and encourage those they think would benefit from pottering about outdoors to give our scheme a try.”

To view the St Vincent’s Therapy Garden video go to: https://www.youtube.com/watch?v=iPNjzAQfBM0
HER commute to work may not be the longest we have ever highlighted, but Christina MacDonald claims the 17-mile trip certainly ranks as one of the most beautiful.

Every morning the Freedom of Information administrator leaves her home on the Black Isle and travels to work to NHS Highland’s headquarters in Assynt House, Inverness.

On the route each day she passes the majestic Ben Wyvis and the magnificent dark waters of the Cromarty Firth, before joining the rest of the rat race rushing to work over the imposing Kessock Bridge across the Moray Firth.

“It’s a delight to drive to work every morning,” said Christina, adding: “It’s the scenery. The colours, they are just beautiful. And I love the way the way they change with the seasons, and that they change all the way to work, all the time.

“Whether it’s Ben Wyvis itself, or the waters of the Cromarty Firth, there’s always something different to see.”

For six years now Christina has been making the 20-30 minute drive back and forth to Inverness.

And in that time it’s not only the natural changes that she has noticed.

“One major change has been the introduction of lights after you cross the Kessock Bridge. That has helped the commute over the Kessock Bridge, certainly at peak times. And it has made it a bit easier getting to work,” she said.

Sometimes, for variety, Christina takes a different route across the Black Isle to the bridge.

“When the Kessock Bridge was being repaired recently, and it took quite a few months, I would then take the single track road from Culbokie across to Munlochy. And I still take this route sometimes,” she said.

However, once across the bridge, Christina’s commute can take a turn for the worse.

“The traffic in Inverness, especially at the turn-off for Inshes, can have long tailbacks at peak times. So sometimes I just continue on up to Milton of Leys and then come back into town that way. It’s quicker, especially if there’s a long queue.”

“But it’s a lovely drive in the main; I enjoy the first part of the commute, especially the scenery and it really sets me up for the day,” she said, adding:

“Right now, I’m driving past yellow rapeseed fields on the way in.

“Admittedly, the traffic can be busy at peak times, so I have to concentrate, but it’s still a beautiful drive into work.”
COMMUNITY EVENT

Fair opening for Small Isles’ new health centre

RESIDENTS of the Small Isles of Eigg, Muck, Rum and Canna have a new health centre.
A team from NHS Highland had been working on the conversion of the former doctor’s house on Eigg to a health and wellbeing centre.

Eigg’s newest resident, three-week old Bryn Lovatt, officially opened the facility recently during a special Community Health Fair on the island.

The director of operations for NHS Highland’s north and west operational unit, Gill McVicar, said at the opening: “Today is the celebration of work NHS Highland has been doing with residents of the Small Isles for a few years.”

“The resident GP on Eigg passed away three years ago, and we needed to review the model of care for the people of Eigg, Muck, Rum and Canna.”

The model which NHS Highland and the residents settled on is one that is inspired by another remote community – only several thousand miles away.

“We worked with the community to find exactly what they needed, and we’ve put in a model of care that is developed from Alaska,” Mrs McVicar explained.

“The Nuka model of health and care services was created, managed and owned by native Alaskan people.

“The approach has been designed to bring about results by communities working together to achieve positive outcomes.

“We identified and trained four health and social care support workers based in the local communities to deliver health care to people in the Small Isles. There are three based on Eigg and one on Muck.

“We borrowed the Alaskan community health aid model and developed it here in Highland.

“There are five levels of training they can undertake, ranging from basic to advanced, and the beauty of it is that it is delivered by people living in these communities. They know the people they are treating, and they are more likely to remain within the community for longer.”

The health and social care support workers are part of an extended integrated team that is supporting them from the mainland.

Continued on next page
"They report to the integrated team leader in Mallaig and medical care comes from Skye using our rural support team model," explained Mrs McVicar.

"We have three GPs that visit all the islands on a regular basis. They travel to Eigg every week, and twice every second week, and visit the other islands every fortnight. Using this model, we have been getting to know the health needs of the populations and working with them to deliver sustainable high-quality healthcare."

And it was the potential of the Nuka model of care that convinced residents to get on board with this innovative and creative way of working.

"We couldn’t imagine any other way of working than having a resident GP," explained chair of the Small Isles Community Council, Camille Dressler. "We had to go through the process of exploring every alternative available to us."

"In doing so, we began to realise that the way GPs work has changed in the last 30 years. They are now very much part of a team, and the turning point was when we started to look at the Nuka model in a deeper way."

Mrs Dressler continued: "We liked the idea of having more community involvement and more say in how our care was delivered. We may have lost a resident doctor, but we are gaining access to more services."

"I’m very happy that NHS Highland has committed so many resources and is committed to new ideas and innovation because we think this is where the future lies for rural medicine."

It was a busy day on Eigg, as the Small Isles Community Health Fair was also held to mark the opening of the new health centre. NHS Highland healthcare professionals travelled to the island to deliver basic health checks, smoking cessation clinics and heart health sessions to the residents.

The senior medical director for quality improvement and chief medical informatics officer for the South Central Foundation in Alaska, Dr Steven Tierney, was a special guest on the day, and he was delighted to see the impact the Nuka model of care was having thousands of miles from home.

"We have collaborated with NHS Highland for some time now, and we found that we have so many similarities in terms of recruitment and retention of medical professionals in remote and rural communities," he explained.

"One of biggest challenges in Alaska was finding GPs to work in such isolated communities – in some cases they would require a six-hour flight to get to these communities."

"We decided to train people from within the communities to deliver basic healthcare, as they are adapted to the lifestyle of living in remote and rural Alaska, and they will remain in the community."

"It’s wonderful to have been invited to the opening of the Small Isles Health Centre and to see such community empowerment. The people of the Small Isles deserve a lot of credit for their resiliency and for embracing new ways of working."
**MENTAL HEALTH**

**Event aimed at helping people stay safe and well at home**

**SUTHERLAND** residents can stay safe and well thanks to the success of programme that originally taught schoolchildren how to safely navigate starting at ‘big school’.

Organised by High Life Highland, the first-ever Senior Safe and Well Highlander Event was held at Rogart Hall on 22nd June.

The event was open to all residents over the age of 55 living in Sutherland. The objective was to provide information and advice to people about staying safe and well in their own homes.

The move follows the popularity of the Young Safe Highlander event in Sutherland for Primary Seven pupils.

The event allowed youngsters from remote areas to meet each other and learn safety awareness skills before they go on to high school. It proved so successful that it is now being rolled out to other locations in the Highlands.

Starting with coffee, the participants spent the morning session with talks about how to keep your brain active, how to use the balancing exercise regime Otago and how to stay safe against doorstep crimes – scams and bogus calls.

After lunch there was a talk on fuel poverty with tips to help reduce costs, then first-aid safety at home and CPR, and finally a question-and-answer session about attendees’ main concerns around staying safe at home.

Partners in the Senior Safe Highlander event were NHS Highland, Highland Third Sector Interface, Voluntary Group – East Sutherland, High Life Highland, Police Scotland, the Scottish Fire and Rescue Service and The Highland Council.

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**MARRIAGE PROPOSAL**

**LOVE is in the air this month at Kyle Court, the patient accommodation at Raigmore Hospital, after a long-term patient proposed to his partner and she said ‘yes’**.

Iain Macfarlane (63), from South Uist, has been staying at Kyle Court every month for the past five years while he receives treatment for myeloma.

His partner, Shona Macintyre (47), travels with him and, although they had both been talking about getting engaged and had picked out rings, it came as a complete shock to her when he got down on bended knee and popped the question.

Shona explained: “We knew we were going to get engaged but I had no idea he was going to do it then. We hadn’t planned that part but I’m delighted that it happened at Kyle Court.

“The staff here have been so brilliant with us in all the times that we have stayed here, it really is like a home from home.

“They’re like family to us and we get to enjoy this moment with them.”

Shona revealed that the couple, who have been together for 10 years, will be having a double celebration as Iain, who has regularly attended Raigmore every month for the past five years has been told he doesn’t need to come back for two months.

She added: “He’s doing well so at his clinic this week we were told he doesn’t need to come back for about two months now. The staff at Raigmore have been fantastic as well. It’s been quite a week.”

The couple are planning to marry towards the end of the year but they would like the staff of Kyle Court to be involved in the celebration somehow.

Shona said: “I’m sure we will do something at Kyle Court. The staff have been behind us 100 per cent the entire time, they’re just so lovely and we are so happy being here celebrating our engagement with them.”

Maggie Melrose, accommodation manager, is delighted for the couple who she agrees have become like family.

She said: “This is the first engagement we’ve ever had at Kyle Court. We were all very excited when we heard the news and all the staff here could not be happier for them.”

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**Patient pops the question at Kyle Court**

Shona and Iain (seated) with the staff from Kyle Court (l-r) Maggie Melrose, Angela Irvine, Linda Toland, Pauline Fairbairn and Pat Maclean.
Several local newspapers have been running a series of articles by NHS Highland which puts the spotlight on people who work in healthcare. Here, Colin Hossack, a practice nurse in Caithness, answers questions for an article produced for North of Scotland Newspapers.

Q: Not every GP practice has a practice nurse, Colin. For the benefit of people who haven’t encountered one, what do you do?
A: A wide range of tasks. Around 50 per cent of my day is related to chronic disease management, which are health checks for people with conditions such as asthma, diabetes and hypertension. Other things we do are the immunisation programmes, ear syringing, treating warts and verrucas to name but a few. All of these involve minimal input from GPs. This job has been a steep learning curve for me but I know I can always ask for advice from the other two nurses or the GPs if I’m unsure of anything. Between our own patients and the occasional holidaymaker dropping in with some minor problem I’m always kept busy.

Q: What did you do previously?
A: I spent years in Caithness General Hospital. I spent most of that time in the renal unit dialysing people with kidney failure, but I also had two secondments on the Rosebank Wing, which I really enjoyed. I felt I needed a new challenge and this chance came up. I live in Castletown and I already knew most of the people who work in this practice so was confident I could fit in as part of what is an excellent team.

Q: What’s your background?
A: Apart from a year in the Black Isle when I was a child, I have lived in Caithness most of my life. After leaving Thurso High School I served my time as a joiner and five years later I joined the police in Dounreay. By the time I was 40 I needed a new challenge and became a nursing student for three years. My first real job as a nurse was on the gastroenterology ward in the Southern General Hospital in Glasgow. My plan had been to do a year there and return home but the weekly travelling to Glasgow was just too much and I left after three months. I then worked in the Royal Northern Infirmary in Inverness for a year but again travelling was an issue.

Q: So you came back to Caithness?
A: I took a part-time job in the renal unit which quickly became full time.

Q: You’re job is part-time as well, isn’t it?
A: Yes, I work 24 hours a week over four days split between Canisbay and Castletown. The practice currently has two full-time GPs, following the retirement of Dr Hercules Robinson last year. Since his retirement I have been asked to do an extra four hours a week. I suppose that underlines the fact that nurses can fulfil a wide range of meaningful tasks within the practice.

Q: What do you get up to outside work?
A: I enjoy running and cycling. Taking part in the Highland Cross, an annual charity duathlon, is a highlight of the year for me. I did it from 1993-1997 and after a 17-year break I returned in 2014. I’m just a lot slower now! I currently run between 10 and 15 miles a week. I also enjoy cycling.

Q: Do you have a family?
A: I have a son, a daughter and a granddaughter, who is 10. My wife and I have also been foster carers for the past eight years. We have had 15 children during that time, everything from babies through to teenagers.

Q: Finally, there can’t be many other male practice nurses around – or are there?
A: I think we probably are a rare breed. I’m definitely the only one in Caithness.
Here, Kit Cameron, manager of Invernevis House care home in Fort William, answers questions on her life and work for an article which has been published by the Lochaber News.

Q. How long have you been in post and what does your job involve?
A. I have been here for just over three years as manager, and I was here in 2008 for a year as a senior social care worker. Being a care home manager is a huge role, and our main remit is to deliver high-quality care for our residents. We have quite a lot of staff and have some new recruits coming in as well. It’s a very exciting time for us, and I believe that if you get the staff right, then everything falls into place. I work closely with the Care Inspectorate to ensure standards of care are met, and our latest report was extremely positive.

Q. What are some of the challenges you have faced in your time at Invernevis House?
A. First and foremost, the building was already undergoing an extensive refurbishment when I arrived in post, which lasted two years. It wasn’t an easy time for our residents and we managed it with as little disruption as we could. The end result is that we have a multi-purpose, modern facility that is bright, colourful and comfortable for our residents to live in. We also welcomed seven residents from the Mackintosh Centre in Mallaig, and huge credit has to go to both my staff and the Mackintosh staff for the way in which they handled such a challenge – they were outstanding.

Q. You must have a very strong team working with you at Invernevis House?
A. I have an excellent group of staff. They are absolutely fantastic and we couldn’t run Invernevis to such a high standard without them. The new staff members we have coming in will undertake a robust induction programme to ensure that they have all the required training to be able to work alongside our staff and maintain continuity of care for our residents.

Q. What role will the next staff take on?
A. They will be social care assistants, which is a new post that has been developed. We’ve recently undertaken a restructuring of our staff, where I have two deputy managers and 13 experienced social care workers. The social care assistants are more hands-on working with the residents. The social care workers will support the assistants, and ensure good practice. We have taken on six whole-time equivalents, but we’re on the lookout for five more. The posts are posted on the Scottish Health on the Web (SHOW) website. Please get in touch if this is something you are interested in.

Q. I have heard about the ‘My Home Life’ project. What does that involve?
A. We’re managing people, whether that is staff, patients or families and it is important to build relationships with all of them. At the moment, we have just completed a year-long project called ‘My Home Life’, and it gives you the tools to develop relationships with different people. It is the building of these relationships that enhances the resident’s experience in a care home. We use tools such as ‘caring conversations’ and ‘emotional touch points’ to name but a few, where you can ask a question and then use a selection of negative and positive responses, have a discussion around those words. It really is a wonderful way of exploring a person’s feelings. I have built-up better relationships with my staff and residents as a result of using it.

Q. How do you switch off from the pressures of your job?
A. I love cooking, and I spend as much time in the kitchen as I possibly can. I have a small croft where I enjoy working away at the weekends and enjoying quality time with my children, grandchildren and great-grandchild.

It’s a very exciting time for us, and I believe that if you get the staff right, then everything falls into place.
What’s nursing got to do with research?

THE director of research and development at the Department of Health, Dr Russell Hamilton CBE, once said: “Clinical research nurses are one of the most important professions in the National Institute for Health Research. The research they make happen underpins everything we do.”

The NHS Highland research, development and innovation department employs a team of clinical research nurses that support clinicians involved in a wide range of research projects, enabling clinical staff to develop innovative ways of delivering high-quality care to the people we serve.

Clinical research nurse Ian Shread explained: “We support research across NHS Highland, whether that is academic research, which tends to be funded by universities, or commercial research funded by pharmaceutical companies.

“The research may involve primary care, secondary care or both so, although we are based on a secondary care site at the Centre for Health Science in Inverness, we also support our colleagues in primary care.

“We are a small team, and don’t have the luxury of having an individual nurse look after all the trials in each disease area, but we do have the scope to share out the workload so that everyone gets the chance to work on something they find interesting.”

Ian continued: “The biggest challenge with any study is recruiting sufficient patients, and we are keen to raise our profile within the hospital to facilitate this.

“International Nurses Day took place recently, and it’s fair to suggest that many people wouldn’t automatically associate research with nursing, so we were delighted to be approached to write an article shedding some light on the work we do.”

The way in which the department’s staff members carry out their work is very heavily regulated, and each study has a strict protocol that needs to be followed to ensure that both patient safety and that data generated is scientifically valid.

And, according to clinical research nurse Charlotte Barr, this can be quite a challenge.

“We collate a lot of data from patients and volunteers, and we have to record it in a very precise way within tight deadlines,” she explained.

“It helps to ensure that we are doing things correctly, but it creates a lot of pressure to get things done in time. Thankfully, we have a great team here and we all support each other to get the work done.

“I have worked here for seven years now and I love it. You learn something new every day, and there is no such thing as a typical day.”

The department’s growing reputation has been underlined by the BBC’s recent decision to work with them on

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a major scientific study. Their involvement with the TV series ‘Trust me I’m a Doctor’ saw 30 volunteers take part in a study to determine if drinking yogurt-style probiotic drinks actually brings health benefits.

Dr Jim Finlayson is a specialist research doctor within the department, and is leading on the research for this project. He says that high-profile studies such as this can only help with the recruitment of volunteers.

“We have to find the right groups of people and approach them about taking part in studies,” he said. “However, we’re heavily reliant on our colleagues flagging those patients up to us. Hopefully, taking part in a study like this can increase our profile, and encourage clinicians to keep research at the back of their mind.”

There isn’t really a typical career pathway for clinical research nurses, as illustrated by clinical research nurse Lesley Patience. She worked as a nurse practitioner for seven years at Raigmore Hospital before joining the research team.

“I came to the world of research having been invited to help out with a pilot scheme that enabled people living with irritable bowel disease or Crohn’s disease to monitor their condition using smartphone technology,” explained Lesley.

“Having never really understood what was expected of clinical research nurses, I found the work both interesting and challenging and decided to leave role as a nurse practitioner to join the research team. We work in a variety of specialities and are encouraged to study and learn as much as we can to enable us to approach each study with confidence.

“As clinical research nurses we can sometime be quite isolated from our clinical colleagues. To try to combat this we have recently started our own Twitter account, which we hope people will follow and learn more about the work we do. You can find us @NHSHresearch.

“We are also in the process of establishing various notice boards throughout the hospital to let both patients and staff know what studies are currently running in the Highlands.

“As research nurses we feel it is important that all patients are aware of the research opportunities available to them.”

Hand Wishing

PATIENTS at the Highland Children’s Unit have got involved with Raigmore Hospital’s hand hygiene campaign by designing posters reminding people about the importance of washing their hands.

The campaign, held in March, helped to spread the message that ‘clean hands save lives’ and the infection prevention and control team was keen to involve young patients as well.

Phyllis Smith, infection prevention and control nurse, said: “We picked a day during the campaign when we asked patients in the children’s ward to design a poster that helped us to explain the importance of hand hygiene.

“Our aim was to remind and re-educate on the importance of hand hygiene and when you should be washing your hands. We were all very impressed with the entries. It was clear that our young patients really grasped the importance of washing your hands.”

Craig Mundie won the poster competition and Emma Parks was runner-up. Both are from Inverness.

All posters will now be displayed in the ward.

Pictured above, from left, are Fiona Johnstone, play specialist; Phyllis Smith, infection control; Craig Mundie and Leah Sutherland, Archie; and Emma Parks. Above left are all the posters designed by the patients.
The summer issue of ‘Take a Breath’, the newsletter of the Cardiac and Respiratory Support Service, was published recently.

The publication features some useful tips on travelling with oxygen — one of the most common topics that Chest Heart and Stroke Scotland’s advice line is asked about — and gives information about the air quality and weather text alert system.

It also features a sports quiz and has a range of useful contact details, including for the charity Signpost Handypersons, which helps people over 65 or those living with a disability to take small tasks in and around the home which may be difficult to do otherwise. The charity’s coverage area includes Inverness, Nairn and Badenoch and Strathspey.

The main article in ‘Take a Breath’ is headlined ‘A Problem Shared’ and reports on a survey by one of Chest Heart and Stroke Scotland’s affiliated groups in Kyle of Lochalsh which asked people how they managed their breathlessness and how their lung condition affected their lives.

Giving a selection of some of the comments that were gathered, the publication concluded: “It can often be helpful to hear how others deal with feeling breathless.”

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**Sweet gesture to mark nurses’ day**

The nursing staff at Campbeltown Hospital were recently presented with an International Nurses’ Day cake which was baked by a member of staff in the Tesco store in the town. Staff said they were grateful to the store and the person who baked the cake, which had the word ‘nurse’ written on it in several languages.
THE Craigmonie Hotel in Inverness was the venue for the 2016 Scottish One Day Podiatry Conference, the theme of which was technology within the profession.

More than 120 delegates and exhibitors attended the event from all over the UK, as did Ian Murphy, from Australia.

The Friday evening of the weekend event saw a session on Basic Life Support delivered by Andrew Small of the Scottish Ambulance Service assisted by Jan Carlyle from podiatry, Alison Stewart from A&E in Caithness General Hospital and Lorna Wells from A&E in the Bel- ford Hospital, Fort William.

Saturday saw the conference get under way, chaired by NHS Highland’s chief executive, Elaine Mead.

Topics covered during the conference included:

Podiatry: from the dark ages to future practice

Key message: How do the professions respond to ‘workforce flexibility’ i.e. role boundary change? Professional resistance: ‘core’ tasks defended, ‘peripheral’ tasks shared, marginal tasks shed (‘dirty work’)

New developments in treating superficial foot infections

Key message: Could microwave technology be the key? Positive suggestion it has potential.

PAD and CLI – assessing, detecting and pushing for best patient outcomes

Key message: Podiatry will play a leading role in the early detection, diagnosis and treatment of people with peripheral arterial disease across the UK to help save more lives and limbs.

Use of ultrasound, diagnostic and therapeutic

Key message: Why are more podiatrists not using this? Once learnt, the ease to confirm diagnosis and administer steroid injections is second to none.

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PODIATRY

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**Osteomyelitis**
Key message: It doesn't just affect the diabetic wound

**Technology in podiatry**
Key message: From Egyptian advice for corns, the journey to independent prescribing, to microwave technology. Podiatry has come a long way

**Care of the Diabetic Foot in Remission: Can we make prevention pay?**
Key message: Wherever we are—along the beautiful Adriatic or in the equally lovely Highlands, we are confronted with a common, complex and costly enemy in diabetic foot complications. We need to band together across the continent and around the world to confront this.

One of the best-received presentations came from Professor David Armstrong, who delivered his topic, Care of the Diabetic Foot in Remission, by video-conference from Slovenia. It was a surprise to delegates when Professor Andrew Boulton showed face to give attendees a wave.

The conference also had a well-supported exhibition which proved useful to podiatrists who don’t have much opportunity to view, or have hands-on, products and technology; it also provided a useful area for colleagues to meet and network.

The day ended with a ceilidh featuring the Full Tilt Ceildh Band.

A conference poster

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**What delegates said about event…**

**FEEDBACK** from delegates has been very positive and included:
- “I found each presenter highly informative and interesting. Those that I have scored highest I feel will and have had an impact on my practice since the event and will do in the near future.”
- “This was my first conference since qualifying last summer. I was not disappointed with the entire day. Each speaker was interesting to hear from. There was a good range of presentations. Fantastic event, thank you.”
- “Communication re:event (inc.e-mailing of presentations), content, location and value for money excellent. Many thanks to all.”
- “Yes, I will have no hesitation in attending again. I have recommended to my colleagues to do so also. Despite the venue necessitating a four-hour drive it was wholly worthwhile.”
- “A pure dead brilliant day!”

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I found each presenter highly informative and interesting
Living and working in a small rural community many miles from city life isn’t for everyone – but it’s just what the doctor ordered for two young GPs.

Fiona Neal and Johnny Emery-Barker, who are both in their 30s, are the sole doctors at the medical practice in Dunbeath, a small village on the east Caithness coast.

And though they are both from Scotland’s Central Belt, they’ve completely embraced rural living.

“This is a perfect place for me,” said fitness fanatic Fiona (34), who spends her spare time surfing, cycling, running, skiing, climbing, hill-walking and anything else she can think of to keep on the go.

“Much of Caithness may seem barren and bleak to some people but I see tremendous beauty in that – a different type of beauty to that most people associate with the Highlands. I often think Caithness is forgotten – a place to drive through on the way to Orkney. But it deserves much more attention than it gets – it’s a great place.”

But it wasn’t just the scenery and the leisure opportunities that attracted Fiona and keen walker, camper and cyclist Johnny (33) to Caithness. It was the opportunity to live, and just as importantly to practise as a GP, in such a remote and rural community.

And it was largely their experience of a national initiative designed to give newly-qualified doctors a chance to work in some of Scotland’s more far-flung places that persuaded them that country life was for them.

Both doctors signed up for NHS Education Scotland’s (NES) Rural Fellowship scheme, which offers fledgling GPs an opportunity to get a taste of work for one year in rural general practice. The fellowships, which are run as a cooperative venture between NES and health boards, provide contracted posts in which the GP are allocated a base practice, and are expected to work around half a year there, and have 13 weeks of protected time and a financial allowance to support educational work.

Given long-standing challenges in recruiting and retaining doctors in remote and rural communities, it’s a scheme NHS Highland embraces...
wholeheartedly, and it was through NHS Highland that Drs Neal and Emery-Barker came to work in Caithness.

They both spent their fellowship years working in small communities throughout the north of Scotland, and Fiona enjoyed the experience so much that she took over the Dunbeath practice not long after it finished. She subsequently recruited Johnny, who had spent part of his fellowship year there.

Fiona was brought up in a village and feels she was always likely to be drawn to a career in a rural community. However, that village was in East Renfrewshire, half an hour from Glasgow city centre, whereas her workplace now is 62 miles from Inverness, the nearest city. Johnny is also from a village, in his case one just outside Dunfermline and a short drive away from the bright lights of Edinburgh.

However, they both say they’ve been happy to swap the attractions of the Central Belt for what Fiona described as the “amazing lifestyle” they now enjoy. And both are grateful for the opportunity that the Rural Fellowship scheme gave them.

The Dunbeath docs agree that the big plus of working in a rural practice is that it’s easier to build up a relationship with their patients and the community at large.

“We have 520 patients and I like the fact that we can get to know them, build up a rapport with them and spend a good amount of time with them,” said Fiona.

“We have an ageing population here, many of them with multiple health issues, and I think I actually see quite a high percentage of our population.”

Johnny added: “There is a lot of stress associated with being in general practice these days, associated with GP shortages, increasing patient demand, the focus on trying to ensure that patients are kept at home, where they are more comfortable, rather than be admitted to hospital. In city areas, the stress can be constant, but here it comes in peaks and troughs, which makes it more manageable.

“And I love the fact that patients can call us for an appointment and, more often or not, be seen the same day.”

While the Dunbeath GPs have a good working relationship with neighbouring practices, and with medics at Caithness General Hospital in nearby Wick and Raigmore Hospital in Inverness, a two-hour drive away, they say that a particular attraction — and challenge — of rural practice is the range of work it offers.

“As GPs, we see more medical emergencies here than we would in the city,” said Johnny, who works for the Dunbeath practice two days a week and also does locum shifts in Brora and Helmsdale. “It may be quieter here but we’re kept on our toes!”

“And I think we both have the kind of work-life balance we were looking for.”

Fiona added: “I love my job, and I can honestly say that I look forward to coming to work every day. But I also love my time off. In a place like this, why wouldn’t I?”
African challenge follows Natalie’s marathon effort for trust

BIG-HEARTED Skye midwife Natalie Scott has travelled to Africa to raise money for charity.

Hot-foot from taking part in this year’s Virgin Money London Marathon, the 42-year-old arranged to participate in the Women V Cancer cycling challenge that started on 10th June, in the hope of raising £3,000 by completing a 350km ride across Tanzania.

The week-long challenge started in the shadow of Mount Kilimanjaro, the highest mountain in Africa, and finished at the impressive Ngorongoro crater.

There is no doubting Natalie’s ambition as she has only just recovered from running the London Marathon in April … an event in which she found she was both helped and hindered by cheering onlookers.

In front of an estimated 700,000 spectators, Natalie finished the 26 mile 385 yard course in four hours 50 minutes.

Wearing a pink t-shirt with her name on the front, she found taking part in the marathon was an awe-inspiring experience – until she hit the dreaded ‘wall’.

However, Natalie overcame the urge to quit and finished the race to raise £2,150 for her chosen charity, the Iolanthe Midwifery Trust.

“The first 15 miles went like a dream,” she said. “There was support everywhere and because you had your name on your t-shirt everyone was shouting your name. Between 21 miles to 22 miles, I just wanted to stop. But I thought just keep going, you are so close to finishing, so just keep going.”

After a well-earned break to recover, Natalie now has plans to do more running.

“Next on the horizon is the Loch Ness Marathon in September and then back to London next year,” she explained. “For next year’s marathon, I’m just going to train harder and run faster.”

Natalie said she would like to thank those who sponsored her, and those colleagues and friends from the Mackinnon Memorial Hospital in Broadford who attended the two curry nights she organised before the race.

“I’m really grateful to everybody who contributed to the Iolanthe Midwifery Trust on my behalf,” she said.

We hope to report on Natalie’s African adventure in next month’s Highlights.
NHS HIGHLAND has appointed Ros Philip to be its new head of finance for North and West Highland.

As part of her role Ros will also be a member of the N&W unit senior leadership team, and will be based at Lara-chan House, Dingwall.

Ros joins the board from FirstGroup headquarters in Aberdeen, where she was a group finance manager for the past four years.

She said: “I am delighted to join NHS Highland and look forward to increasing my knowledge of integrated health and social care. While challenging, it’s going to be interesting and energising to work in a public-sector organisation which presents a different culture to the private sector. It will be a difficult year ahead with the current pressures in the NHS. However, we have a great team who will work hard to deliver efficient and effective quality services.”

Originally from Inverness, Ros graduated from the University of Aberdeen in 2001 with a joint honours degree in accountancy and economics.

After three years as an accountant with oil service company Halliburton, she qualified as a chartered management accountant as part of their graduate rotation scheme.

Ros subsequently worked for Johnson & Johnson for five years prior to working with CHC Helicopters in Aberdeen and later joining FirstGroup.

In her spare time Ros enjoys spending quality time with her three-year-old son, but can also be seen regularly at her local gym. She is also a keen sports enthusiast and is looking forward to being able to return to sporting activities when she has fully recovered from a sporting knee injury.
Pam becomes rural general hospitals manager in Wick

NHS HIGHLAND has appointed Pamela Garbe as the rural general hospitals manager for Caithness General and Town and County Hospitals, Wick.

Pamela, who is originally from Thurso, trained as a registered nurse and midwife in London. After qualifying, Pamela specialised in midwifery at Westminster Hospital and practised as a staff midwife and midwifery team leader before working in Riyadh, Saudi Arabia.

On coming back to the UK, she returned to Caithness taking up a position as a midwife in the Henderson Maternity Unit.

She continued to develop and led a number of redesign projects including the first Caithness and Sutherland maternity review.

During this time, Pamela completed a degree in Public Health with Specialised Practice through Aberdeen University and went on to practice as a public health practitioner in Caithness gaining community experience.

Pamela was later appointed to the role of clinical nurse manager/lecturer for Caithness General Hospital and Stirling Training Campus at Raigmore.

Prior to taking up the appointment of rural general hospital manager she was the associate lead nurse for the North and West Operations Unit and was the project lead for the Caithness General Hospital redesign.

Pamela’s wide range of experience and knowledge will benefit her in this management position.

She said: “As rural general hospital manager I look forward to continuing working with healthcare staff and the local community to continue to develop services to meet the future needs of the area.

“Key to improving services and facilities is working closely with the integrated teams to increase community-based care to enable people to be cared for at home or in a homely setting when possible.”

Video bid to recruit new board member

NHS HIGHLAND has produced a short video in support of an advert for a new non-executive member of the organisation’s board.

The recruitment video shows scenes of a recent meeting of the board and features brief talks about the role by recently-appointed chair David Alston and non-executive director Elaine Wilkinson. It can be viewed at https://youtu.be/Nm8ZCy46_xM

The Scottish Government is looking for applications from people looking for what it describes as a “challenging, rewarding and worthwhile opportunity”.

The successful candidate will be expected to play a central role in guiding the strategies which address the health priorities and healthcare needs of the population of NHS Highland’s vast catchment area.

Applicants must be able to demonstrate knowledge about or connection to the delivery of health and social care services in the board’s area. However, they need not be an expert in healthcare or have previous experience of being on a board.

Scottish Government Ministers particularly welcome applications from people currently under-represented on Scotland’s public bodies, such as women, disabled people, people aged under 50 and people from a BME background. They are also keen to receive applications from residents of Argyll and Bute, although this is not an essential requirement.

Non-executive board members receive remuneration of £8,168 a year, for a time commitment of around eight hours a week – time involving a mix of daytime board meetings, committee meetings, reading documents and attending stakeholder events. The term of appointment will be for up to four years, although the successful applicant may be considered for a further term.

The closing date for applications, which can be made on the Public Appointments website (http://www.appointed-for-scotland.org/), is 8th July.

Anyone who wishes more information about the role can contact David Alston by calling his PA, Seonaidh Laing, on 01463 704811 or by emailing Seonaidh.laing@nhs.net
THE newly appointed Highland Council representative on NHS Highland’s board, Councillor Jaci Douglas, already has considerable experience of working with the health authority.

Not only is Jaci the chair of the area district partnership for Badenoch and Strathspey, she also chairs the council’s working group on dementia. In addition, she has been involved with the board’s Badenoch and Strathspey service redesign since its inception.

Now, she wants to use that experience to help local people engage more in the board’s decision-making processes.

Jaci said: “I’m looking forward to the opportunity to help make closer links with the community in my new role and create a positive and open relationship. I would like the board to become really visible and for the public to understand how it works. Sometimes it seems a bit inaccessible, and I want communities to feel that they are able to understand and be part of the decision-making processes. It’s about helping people understand the role they can play, and that they can make an input that influences decisions about the services in their area.”

As an independent councillor, Jaci doesn’t agree with bringing party politics into local government as she feels it gets in the way of good local decision making, and has always believed in putting the community first.

The twice-elected councillor hopes that, by taking this approach, she will help to make the board even more inclusive.

She said: “I’m going to try hard to get everyone involved. Often people don’t know who to talk to and if we can help people to speak to the right person, we can try to ensure the right outcomes for people in the community.”

Involved with the Badenoch and Strathspey service redesign from the very beginning, Jaci has an impressive track record in delivering this approach.

With the redesign, including the provision of a new hospital in Aviemore, scheduled to open by the end of 2019, she has also been at the heart of discussions within the community including about the two existing hospitals – Ian Charles Memorial Hospital in Grantown on Spey and St Vincent’s in Kingussie – that are set to close.

“There are obviously a lot of concerns when a much-loved facility closes so it’s about making sure the enhanced services are there for the communities and that they feel reassured of this.

“For instance, there are a lot of concerns about palliative and end-of-life care and so we are looking at how this can be enhanced and improved with the service redesign.”

Jaci has not just been involved in the discussions, she has taken on active roles in the redesign.

“I sit on the transport group, which is looking at the transport needs within the wider community and what opportunities we can get from the redesign and new hospital provision. I am also on the project board which is overseeing the project along with two other community members.

“One thing though,” she added, “from my discussions locally is the strong feeling that the Continued on next page
NHS staff in Badenoch and Strathspey are our best asset. It’s this high quality of care that is important to people.

“Another discussion we are starting to have is what to do with hospital buildings once they close. We now need to start talking with the communities about what alternative uses could be made and what their aspirations are for their future.”

Outside the redesign, Jaci has considerable experience on a range of health issues. As well as being chair of the council’s working group on dementia, she used to chair the Highland Drug and Alcohol Partnership and has been the council’s children’s and transitions champion.

“Transitions is so important because there has previously been a disconnect between children’s and adults services and problems for people and families when they transfer from one to the other at aged 18. So for many years I’ve been championing that they work in a way that puts the focus on the individual during the transition. There can be a gap between the two and we need to consistently bridge that gap.”

Also on the board of High Life Highland, Jaci is supportive of the current holistic approach that sees wellbeing as being about physical and mental health as well as the social side.

She said: “There is a huge amount of research now that shows social isolation is really detrimental to people’s health, so at High Life we try to offer opportunities for people to meet, get some exercise but also have some time to chat afterwards. This approach is working well especially with older people.”

Outside her work, Jaci has been involved in volunteering for Girl Guiding and the Duke of Edinburgh Award scheme for a number of years.

She said: “I have four daughters so have been involved in the Girl Guides for 14 years – I was asked to get involved helping out a unit when my oldest daughter was five and, 14 years on, I am still volunteering with Guiding.”

Having been a Rainbow leader and a Brownie leader, Jaci is currently a Senior Section Rangers Leader.

She said: “The Rangers are the oldest age group of the Girl Guides so we keep a focus on life skills. Many of the young women will soon be leaving home so we have activities from car maintenance and money management to ironing and laundry! We even did a session on sushi making, which was a big hit.”

Jaci somehow manages to find time for a hobby.

“As often as I can, I sing in my local community choir, Bella Voce,” she said. “It’s a fantastic stress reliever. You can have had a really difficult day, and you go along and sing your heart out for an hour and a half or so with a bunch of friends and have such a good time you always feel better afterwards.”

Originally from Fife, Jaci did a Masters Honours in Philosophy at Edinburgh University before spending some time abroad. After a nomadic 12 years living in Denmark, Ireland, the United States and Norway, she and her journalist husband settled in Grantown on Spey with their four daughters.

Now, with her appointment to the board, Jaci is positive about the future for health services in Highland.

She said: “I think it’s a really exciting time for us with the integration of social care continuing to be embedded across Highland. There is still a bit to go, but I am optimistic that working with communities and other agencies we can make a really positive difference to people’s lives.”
Doc swaps Everest for Raigmore...

RAIGMORE Hospital’s latest recruit has swapped the mountains of Nepal for the mountains of the Highlands as she joins the Inverness hospital after spending eight weeks at Mount Everest’s base camp.

Dr Tash Burley, who started as a speciality doctor in anaesthetics this month, is delighted that she is now working in Raigmore Hospital but explained she really loved her time working in Nepal.

She said: “I hadn’t been to Everest before but had worked for a Himalayan rescue association in Pheriche in the autumn of 2011. You can’t work in the Everest camp unless you have worked in one of their other clinics. Working in those clinics essentially makes sure you can cope in an uncomfortable environment, a different diet, working in isolation and making decisions on your own. Most people there are anaesthetists or work in emergency medicine; there are a few GPs too.”

Tash explained that the medical camp was set up by an emergency doctor from Montana called Luanne Freer, who realised that those at base camp were not getting any medical care and over the years it has progressed.

She said: “Western climbers are charged $100, about £70, and although they do have to pay for their medication we will see them every day if they want us to. Not all climbing companies will sign up to it, some do have their own doctors, but the majority of them do as they want that reassurance that it is ok for them to climb.

“About three-quarters of the people you see are Sherpa and Nepalese people. I was there for eight weeks and saw about 350 patients during that time.

“For the locals it’s about 500 rupees, around £5, for a consultation and that could be their only medical care.

Tash added: “I didn’t see that many unstable patients but there were still a number of challenges. At base camp you can’t just not get on with someone, you have to work it out so you can work together in that environment.”

Tash explained that while this year was a successful year as there were no earthquakes seven people did die which is above average.

She said: “The earthquake in Nepal last year did make me question my decision to go to base camp but Nepal is so resilient, they just get on with things and they have done so much building.

“There were avalanches every night when I was there and with one of them the powder cloud came right up to our tent but you can’t spend your whole time there being petrified, you’d just go home.”

As much as she loved her experience at base camp Tash is very much looking forward to becoming part of the team at NHS Highland.

Having lived in a town in New Zealand, which had a population of 300, Tash and her partner like living in a rural community. They have settled in Badenoch and Strathspey, close to the mountains which are a big draw for them.

She said: “I’m hoping that I’ll be able to share my experiences of working in a different environment. I have a diploma in mountain medicine and air and medical retrieval medicine and plans are in place to allow some transport training for some of the junior doctors at the hospital.

“I’m looking forward to being part of a team and to be able to contribute and be part of the community. I’m really looking forward to sowing seeds and making friends.

“I’ve learned a lot in the last few years and for me personally it’s great to be getting back into anaesthetics and sharing my experiences but also learning everything I can from everyone else. I’ll be among people who are experts in their field and I can learn from them.

“I’m very much looking forward to working here.”
SUCCESS AT THE DOUBLE FOR WICK TEAMS

THERE was a double celebration in Caithness this week when two teams from Wick each received an NHS Highland staff award.

Being enthusiastic, showing commitment and having a caring attitude are just some of the reasons why the domestic and nursing team from the Queen Elizabeth Rehabilitation Unit at Caithness General Hospital were nominated for a Highland Quality Award.

The team works in a ward which cares for patients who receive long-term care, which makes gaining access to these rooms for cleaning purposes more challenging.

In the nomination, which uses an in-house unannounced audit of cleaning standards as an example, the internal auditor praised the team for the very high standard of cleaning across all areas and said it was clear from speaking to them that "they were very enthusiastic and committed to their duties, aware of their daily task and responsibilities and displaying a caring attitude towards their patients".

They have been commended for working well as a team in such a challenging environment.

Also presented with an award were members of staff at the Newton Wing in Town and County Hospital, who were nominated for going above and beyond the call of duty for a patient who was receiving palliative care in the ward.

The woman and her partner were keen to get married and asked the staff if they could help.

Within two weeks, and with help from the local community, everything from interior design, wedding dress hire, wedding cake, flowers, wedding car hire, photographer and wedding DVD was arranged for the couple, with staff doing what they could in their own time to ensure that they enjoyed their dream day.

Patients in the ward, and their relatives, were kept informed of what was happening and had the opportunity to attend on the day if they wished.

The team’s nomination said it was "very poignant" for those who did attend as they witnessed "an absolute tear-jerker of a day when the bride had her fairytale wedding".

Both teams were presented with their awards by NHS Highland chair David Alston, who praised them for their good work.
JUST under 300 staff across NHS Highland have been recognised for the years of service given to the NHS at the board’s annual Valuing Service Awards.

Staff who have served 20, 30 and 40 years in the NHS were commended at ceremonies across Highland as a thank-you for their commitment and dedication to the NHS.

Adam Palmer, employee director for NHS Highland, said: “These ceremonies are just a small token of our gratitude. It was with great pleasure as a board member speaking on behalf of NHS Highland to say thank you.”

Over 160 staff were recognised for 20 years’ service having started with the NHS in 1996, which was also the year that Take That split up and we met the Spice Girls. Over 100 staff were recognised for 30 years’ service and they were reminded that 1986 was the year Prince Andrew married Sarah Ferguson and the first episode of Casualty aired. Just over 20 staff have reached the 40-year mark, having started with the NHS in 1976 – the year of the first commercial Concorde flight and the UK winning the Eurovision Song Contest.

There are no captions here … see who you can identify.

More pictures of this year’s Valuing Service Awards are on the next two pages.
NHS HIGHLAND’S gastroenterology team won the top prize at a national award ceremony which recognises excellence and innovation in patient care.

The Shire Awards for Gastrointestinal Excellence is an awards programme in gastroenterology which recognises innovative work and allows individuals, units and healthcare networks to be recognised for their work. It also allows teams to share best practice and raise the standards of patient care.

The team in Highland was nominated for the way it has redesigned its service and used innovative change to ensure that all patients living with inflammatory bowel disease (IBD), no matter where they live, have the same access to care.

The successful team have won £10,000 which will go towards developing psychological support for their younger patients who are transitioning into adult services.

Speaking before the award ceremony, Dr Lindsay Potts, consultant gastroenterologist and IBD lead for NHS Highland, explained that Highland had the highest prevalence of IBD in the UK but there was a challenge in providing equity of care to all patients in a remote and rural environment.

With support from a number of groups including patient representatives, Crohn’s and Colitis UK and various staff groups, the team’s aim was to redesign the service to provide high-quality, patient-focused care, irrespective of geography.

Dr Potts said: “As a group we looked at developing a number of improvements including a new telephone helpline for our IBD patients, video-conferencing clinics to reduce the need to travel for our patients, rapid access to the IBD clinic and increased dietetic support for patients with IBD.

“Patient feedback has been very positive. They have a rapidly responsive service and there has also been a marked reduction in the number of IBD patients who have needed to be admitted to hospital.

“Patients using video-conferencing have welcomed the development of these clinics and the telephone helpline has allowed patients to feel confident that they can speak to an expert in their condition very quickly and have access to all services without delay.”

Dr Potts continued: “We have also significantly reduced the need for travel for patients who do live quite far away, including those from the Western Isles.

“The work put in by everyone has been second to none and while we’re all pleased that it has been recognised in this way we’re delighted that our patients are benefiting from an improved service.”

**AWARDS**

**Willie Crowe**, driver/storeperson with the integrated equipment store in Helensburgh, has been awarded the British Empire Medal.

Willie has been involved in charity fundraising and voluntary work with children’s charities for over 17 years. During that time he has raised about £100,000 for charities such as CHAS, Scottish Society for Autism, Marys Meals, National Deaf Children’s Society and the Dumbarton Deaf Children’s Association.

He is pictured with his wife Isabel, daughters Alisa and Amy (24), and Amy’s boyfriend Andy.
Staff raise funds for judo star

STAFF at Bruce Gardens in Inverness have held a fundraising event for Stephanie Inglis, the Scottish Commonwealth Games judo star from Inverness who went in a coma following a motorbike accident in Vietnam in May. She travelled home to Scotland earlier this month.

Community mental health service staff held a bake sale and raffle to help raise funds to bring the 27-year-old home.

Ariane Jamieson, a support worker at the centre, said: “We have all been shocked by what has happened to Stephanie and we wanted to do something to help.

“We consulted with everyone who uses the centre and we decided to hold a bake sale and a raffle. All the staff and some of our service users brought in home baking, and we raffled off a hamper full of goodies.

“We were thrilled at how many people turned out to help support Stephanie.

“She has represented her country at the Commonwealth Games, and now she needs the support of her local community more than ever.”

The effort raised £213 to help bring Stephanie back to Scotland.

Work gets under way for health and care forum

THE Mid Argyll Health and Care Forum held its first meeting on 31st May.

John Dreghorn, locality manager for Mid Argyll, Kintyre & Islay, and Kate MacAulay, local area manager for Mid Argyll, attended the meeting to describe the work of the Mid Argyll Locality Planning Group which was set up following the integration of health and social care services in the form of the Argyll and Bute Health and Social Care Partnership (HSCP).

The planning group has been established to govern and account for planning the delivery and development of local services, engaging and communicating with staff and local communities and overseeing the implementation of the HSCP’s three-year strategic plan.

Caroline Champion, public involvement manager for the HSCP, commented: “We had very constructive discussions. What was shared with us will now be used as we start to develop a local action plan for how services will look in the future.”

The main points discussed included:

- the need to ensure services support people staying well and preventing people coming into hospital – for example, falls prevention
- the need to ensure services are in place quickly to enable people to return home sooner after a stay in hospital, especially those who require ongoing treatment in their own local areas
- the importance of further developing relationships between the Glasgow hospitals and aftercare
- the need to improve how the organisation communicates with local communities, development and support for staff

In another development, the Oban and Lorn Health and Care Forum held a conversation café style meeting on 6th June. Annie Macleod, locality manager for Oban, Lorn & Isles, attended and described the work of the Oban and Lorn Locality Planning Group.
NHS HIGHLAND has held an event encouraging businesses in the north of Scotland to provide training and employment opportunities for people with learning disabilities.

Over 150 people attended the conference, entitled ‘Gie’s a Job’, that asked organisations to remove some of the barriers that prevent people with learning disabilities find working or training and voluntary opportunities.

NHS Highland self-directed support team manager Jennifer Campbell said: “We were thrilled with the turn-out for what proved to be a very interesting day. There was a wonderful atmosphere and positive and empowering stories being told.

“It proved to be an ideal platform to showcase the talent we have in Highland. We now have to build on this event by ensuring people with learning disabilities are given a chance to show how valuable their skills are in a working environment.”

NHS Highland chair David Alston opened the event and the board’s director of adult social care, Joanna Macdonald, gave a presentation on the benefits of having a job. ENABLE Scotland’s performance manager Jamie Rutherford and Highland Council chief executive Steve Barron also spoke to the audience.

However, it was a presentation by three self-directed support peer advisors about their experience of paid employment at Cantraybridge College that stole the show.

“Theyir session was extremely powerful,” Jennifer explained. “Their enthusiasm for working is inspiring and highlights what being given a chance means to people.

“NHS Highland was among a series of employers who had stalls for people to find out more about employment and voluntary opportunities, and a special ‘diary room’ was available for people to record their thoughts and feelings on the conference.

Jennifer continued: “We’ve had some great feedback from people who attended, and we hope they are given a chance to showcase their skills in the near future.”

GOOD mental health helps us flourish and positive relationships can play a part in this with research highlighting that positive relationships can help us to stay well and recover from illness.

With mental health problems being one of the main causes of the overall disease burden worldwide it suggests we should be taking steps to improve our mental wellbeing.

Mental Health Awareness Week this year focused on relationships. Good relationships help us live longer and happier lives with fewer physical and mental health problems.

Fewer relationships can contribute to loneliness.

Research suggests that 31 per cent of people feel lonely sometimes and the negative effect of loneliness has health consequences such as higher blood pressure, depression and higher rates of mortality.

The Mental Health Foundation believes that we cannot flourish as individuals or communities without strong relationships.

Action we can take is to invest in our relationships – make time to spend with family and friends, really listen and engage with things they talk about.

Helensburgh and Lomond Young Carers produced a short video for Scotland’s Mental Health Arts and Film Festival 2015 which highlights the importance of talking and listening.

The film, Talking is Power, can be viewed, along with two other films developed by young people and the Choose Life Project, on NHS Highland’s Facebook page.
WORK has progressed at the Town and County Hospital in Wick ‘memory garden’ project thanks to a team of staff from Highlands and Islands Enterprise (HIE).

The Friends of Town and County Hospital Garden had appealed for help in making the garden space at the hospital a therapeutic, enjoyable, accessible space for patients, their relatives and friends.

Staff from HIE spent a day on site digging and clearing beds.

Iain McHardy, acting senior charge nurse, said: “I would like to thank the staff from Highlands and Islands Enterprise for the donation of time and effort that they put into our memory garden.

“Their contribution has significantly advanced our project and I am grateful for their support.”

Claire Farquhar, from HIE, said: “We were delighted to have the opportunity recently to spend a day of hands-on volunteering at the Town and County Hospital to support the regeneration of their gardens for their residents.

“The team at Town and County have developed such an inspiring and creative plan for the gardens, and so we urge other businesses in the region to get in touch with them and volunteer to help them realise their plan to create an enjoyable garden experience for their residents.”

NHS HIGHLAND staff working directly with patients may be exposed to various infections, including tuberculosis (TB).

Despite BCG immunisation and standard infection control precautions, there is still a small risk that they could be exposed and become infected.

Healthcare workers also have a professional duty to ensure they do not place their patients at risk of infection should the healthcare worker become infected.

Common symptoms of TB can include: a persistent cough that lasts more than several weeks, losing weight for no obvious reason, fever and unusual sweating at night, a general and unusual sense of tiredness and being unwell, and coughing up blood.

Staff members who have any of these symptoms should discuss them with their GP and ensure that the GP is aware of their work and the risk of TB, so that it is considered as a possible diagnosis.

Such staff members should also contact NHS Highland’s occupational health service on 01463 704499 as soon as possible to ensure prompt investigation and treatment if required.

It is a readily treatable condition particularly if treated early.

TOWN AND COUNTY HOSPITAL

Volunteers team up to help create garden
CHRISTINA WEST, chief officer of Argyll and Bute Health and Social Care Partnership, was recently invited to open an outdoor gym within Blarbuie Woodland in Lochgilphead.

She thanked Blarbuie Woodland Enterprise for the invitation to open the facility, which she described as a valuable community resource and a true example of partnership working.

Christina concluded by thanking Sara Heath, mental health physiotherapist, for driving the project forward.

Pictured, from left, are Christina West and Sara Heath.

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THE Corbett Centre and APEX Scotland have joined forces to rejuvenate a community space for service users and the people of the Merkinch area of Inverness to enjoy.

The garden at the centre had become so overgrown that manager Ian Clayton decided something had to be done.

And he says the project offered positive outcomes for everyone involved.

“We were delighted to be approached by APEX Scotland to help clear a community space for our service users,” he said. “They secured a number of individuals to help clear our garden and the work they have done is incredible.

“We now have a garden that our service users and the wider community can enjoy, and it offered the people involved with APEX Scotland an opportunity to learn new skills and give something back to the community.”

The Corbett Centre provides a service for people with complex learning, physical and communication disabilities and health needs.

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Service users are encouraged to learn and sustain new skills, which helps develop their social skills, independence and confidence. These can be achieved through group work or targeted one-on-one support.

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Work under way to create space for community
NHS HIGHLAND has become the first territorial board to sign up as a diversity champion through Stonewall.

Stonewall’s Diversity Champions programme is Britain’s leading best-practice employers’ forum for sexual orientation and gender identity equality, diversity and inclusion helping public, private and third sectors to create inclusive and accepting environments.

By signing up NHS Highland now has access to a package of support and resources and will also be able to share and learn from best practice.

Helen Sikora, principal officer health inequalities, equalities and diversity for NHS Highland, explained that the focus was on equality in the workplace.

She said: “Some evidence suggests there are a number of cultural issues to address relating to the unfair treatment of LGBT people so this is something that as a public sector employer we should be challenging.

“As we have just signed up we have a long way to go and a lot to do but it’s great to be proactive and this is going to benefit everyone.

“We know there is strong feeling out there as witnessed at the recent vigil in Inverness (pictured) in support of Orlando and in memoriam to those who died.”

A report by Stonewall called Unhealthy Attitudes looked at the treatment of LGBT people in health and social care and the results and comments are quite shocking.

The report highlights that while the majority of health and social care staff want to deliver the best possible service to LGBT people, LGBT bullying and discrimination are often left unchallenged, and there is too little understanding of LGBT health concerns across health and social care services.

In the last five years alone, 24 per cent of patient-facing staff have heard colleagues make negative remarks about lesbian, gay and bisexual people, and one in five have heard negative comments made about trans people.

Lesbian, gay and bisexual staff echoed this, with a quarter revealing they had personally experienced bullying from colleagues over the last five years.

Shockingly, one in 10 health and social care staff across Britain have witnessed colleagues express the dangerous belief that someone can be ‘cured’ of being lesbian, gay or bisexual.

Helen added: “One of the ways we will find out just how we are doing is asking staff to take part in the workplace equality index.

“This is a powerful evidence-based benchmarking tool which will assess achievements and progress on LGBT equality in the workplace by looking at our policies, training and engagement across the whole organisation.”

A UK-wide Stonewall survey will be opening in July. Stonewall would like to hear from all staff on their experiences in the workplace.

The information that is provided is entirely anonymous and will go to Stonewall’s Workplace team, and not to NHS Highland.

“Once the feedback is collected and analysed, only aggregated scores are shared with us,” said Helen. “It is extremely valuable for NHS Highland to hear your views and experiences on LGBT equality and it will take less than 10 minutes.”

NHS Highland chief executive Elaine Mead is keen that as many staff as possible fill in the survey when it comes round.

She said: “As a board we are absolutely committed to having an inclusive workplace.

“Working with Stonewall will be a huge support to us in terms of LGBT and I look forward to building on this partnership.

“The upcoming survey will be a key part of how inclusive our staff find their place of work and what we can do to progress.”

Equality leads at public agencies in Highland have announced that they will attend the Highland LGBT Forum open day on 9th July.

It will take place in the Spectrum Centre in Inverness from 9.30am-1.30pm and will be open to all LGBT+ people, friends, families and supporters.

The event will have information stalls from third sector and local organisations as well as providing the opportunity to meet with the forum committee and other LGBT+ people.
Stand Up – Go Otago

Gentle exercise to keep you fit, flexible and fabulous!

A new class designed with the more mature adult in mind.

Improve your strength, balance, flexibility AND have a good time! Join us after the class for a cuppa, a chance to relax and meet new people.

Every Tuesday in Inverness at:

James Cameron Community Centre, 12.15-1pm
Limetree Avenue, Inverness, IV3 5RH  01463 718773
jamescameroncc@highlifehighland.com

Spectrum Centre: 1.30pm-2.15pm
1 Margaret Street, IV1 1LS, 01463 221842
info@spectrumcentre.co.uk

£2.60 per class
NHS HIGHLAND staff members who took part in the Ben Nevis Challenge this month have been congratulated.

The group decided not only to challenge themselves physically but to raise money for cancer care in the Highlands as they have all known someone who have been affected by cancer in the past year, including colleagues who have inspired them.

Yvonne Mckenzie, senior charge midwife, said: “I am happy to report that everyone who took part made it and as a group we would like to say thank Pam Clark and family and Diane Smith and her team from surgical department, who have supported the group all the way.”

She also thanked nursing auxiliaries Keri and Karmen, and all the midwifery team who put in “a massive effort under all types of weather: sun, rain, fog, gales, snow and not forgetting the midges”.

“They were all amazing,” Yvonne added.

The final total raised will be known mid-July but just before the climb £1,000 had been raised.

SCOTTISH HEALTH AWARDS

Who will be this year’s winners?

THE Scottish Health Awards 2016 is the most prestigious and recognised awards ceremony for healthcare professionals within Scotland.

Run by the Daily Record, in partnership with NHS Scotland and the Scottish Government, the awards ceremony is now well established in the Scottish calendar.

Hosted by top comedian, Fred MacAulay, this year’s glittering awards ceremony will take place on Wednesday 3rd November, at The Corn Exchange, Edinburgh.

The awards will reward Scotland’s most dedicated and caring NHS workers.

The organisers want to know about those workers who have genuinely made a difference to someone’s life. It might be an individual or a team who have provided outstanding care to their patients or those who are in jobs that normally don’t have a high profile and who generally should be recognised for their commitment to the NHS.

There are 16 award categories - whether it’s the local doctor or dentist, the support worker, nurse, paramedics or a volunteer.

No matter what their title, or where they are based, if they have made a difference, the organisers want to know about it.

Nominees must work for NHSScotland, with the exception of the Healthier Lifestyle, the Volunteer, the Integrated Care for Older People, the Innovation and the Unsung Hero categories, where nominations are welcomed from those that support healthcare in the communities in which we live.
NHS HIGHLAND is to take responsibility for the patients registered with Riverview Medical Practice in Wick on 1st August, a move that will mean three of the seven GP practices in Caithness are the responsibility of the health board.

Riverview has latterly been functioning with three GP partners and, when they are available, locums. However, the imminent departure of one of the GPs, Dr Helen Hillhouse, will make it unsustainable for the remaining two partners to continue to provide services as specified by the General Medical Services contract.

NHS Highland has therefore agreed to provide medical services for the 7,500 patient practice and will employ the two remaining doctors, Dr Emily Cobb and Dr Sarah Rootes, as salaried GPs to work in the practice. Both GPs will continue to work their usual patterns: 40 hours for Dr Rootes and 35 hours for Dr Cobb.

The board will continue to seek GPs willing to practice at Riverview and will use locums to supplement the work of the permanent doctors and the practice team. Riverview already has locums booked to the end of the year and work will continue to supplement these and provide additional cover beyond that.

The practice has been advertising nationally for doctors without success for several years.

As a result of the shortage of doctors, Riverview has developed its entire team, including experienced advanced nurse practitioners, to enable them to perform their tasks to a high standard to support the clinical work within the practice.

Fiona Duff, NHS Highland’s primary care manager for the area, said: “It is quite unusual for a health board to take over a practice as big as this but the fact that we will soon be running three practices in Caithness reflects the ongoing difficulties there are in recruiting and retaining doctors both nationally and in Caithness.”

Dr Rootes and Dr Cobb said they were very disappointed and saddened at reaching the stage where the responsibility for the patients has to be handed over to the health board but stressed that they remained totally committed to the practice and to Wick.

“We would like to reassure our patients that we will strive to provide them with the best service possible in a way that can be sustained,” they said in a joint statement.

“Making savings across NHS Highland

The pilot project with Medacs Healthcare to provide an on-site Managed Service across NHS Highland has been extended for another six months. The Managed Service was first implemented in December 2015 and has made savings in excess of £135,000 to date.

What is the Managed Service pilot?

Working in collaboration with the Medical Staffing team, Medacs Healthcare manages the process of booking locum doctors and allied healthcare professionals for the health board. This pilot is one of the only two managed services operating in Scotland at this time.

Why was the service introduced and how does it work?

The Managed Service has been implemented to help NHS Highland make savings in locum costs by reducing the rates currently being charged by other agencies. Medacs Healthcare does this by working closely with departments to improve compliance, negotiate the best rates and find efficiencies. We ensure that all doctors put forward are appropriately qualified and that their training is up to date. We are regularly audited on this as are all of our supply chain agencies. Medacs Healthcare supplies locum doctors and allied healthcare professionals from agencies that are on the National Framework. We make sure the right person, is in the right place, at the right time and that the patient is at the centre of everything we do.

Future plans

With over £135,000 of savings made so far, the Managed Service team is already looking into other ways to help NHS Highland make even more savings over the coming months. Direct engagement is currently being rolled out which will reduce VAT costs. In addition, Medacs Healthcare will soon be managing the process of booking nurses for NHS Highland.

How can I get in touch?

The Medacs Healthcare team is based within the medical staffing department at Raigmore Hospital. You can contact Paul Mellis (client relationship manager) at highland@medacs.com or by phone on 01463 706065. For any locum requests outside the hours of 9am to 5.30pm, Monday to Friday, call 0800 442215 or email outofhours@medacs.com
New medicines factsheet issued

A MEDICINES factsheet has been published by Healthcare Improvement Scotland.

It focuses on the patient journey, starting at consultation, and explains how healthcare professionals decide whether to prescribe a medicine and, if so, which to prescribe.

The new medicines factsheet has the potential to underpin the conversations required between patients and healthcare professionals to fulfil the quality ambitions of NHSScotland, educate the public about the benefits and risks of medicines and engage patients in shared decision-making, ultimately leading to higher quality care and better outcomes.

The factsheet replaces the 2010 Health Rights Information Scotland leaflet New Medicines in Scotland: Who decides what the NHS can provide?

Shootings vigil

INVERNESS held a vigil on 17th June at the city’s castle in honour of and in solidarity with those affected by the shootings at a gay nightclub in Orlando, USA, earlier this month in which 49 people were killed and 53 injured.

The vigil was organised by the Highland LGBT Forum with the support of The Highland Council, the Inverness Pipe Band and Police Scotland.

The council lowered its flag and also lit up the Ness Bridge in rainbow colours as a mark of respect.

Inverness Sheriff Court also lowered its flag.

Support on line

SUPPORT around death is an NHS Education for Scotland website that aims to support healthcare staff who are working with patients, carers and families before, at and after death.

In June, it launched five new video animations which are available at www.sad.scot.nhs.uk along with other resources.
Who Am I?

My name is Shona - I am a Project Support Officer working with the NHS Highland Technology Enabled Care Team. I want to visit local communities to promote how Living It Up can help people aged 50 and over, living with a long term condition and ANYONE in the Highlands who wants to be healthier.

What is Living It Up? ***www.livingitup.scot***

Living It Up is an award-winning online health and wellbeing information hub which empowers people, aged 50 and over, to use technology to manage their health and wellbeing, and be better connected to their communities. The key areas of the website are:

1) Your Area: find out what’s going on in your local community
2) Your Condition: find trusted health information about Heart Disease, Diabetes, COPD, Dementia and High Blood Pressure
3) Your Stories: read inspirational stories and experience guides from others in a similar situation for example how to get started with walking/ cooking/ dancing, living with MS, Caring for people with dementia etc.
4) Tools and Service- a variety of tools which enable people to be more active, social and manage their health online. Our ‘Falls Assistant’ aims to help you understand your risk of falling and easy to follow exercise videos to reduce your risk. Or try out the Person Centre File which helps you store all your health information and appointments in one place. There are also community challenges and an activity log to get people more active.

What kind of things can I do?

○ Digital upskilling – I can run workshops to help people get online, or pass on the skills to you to help others.
○ Telecare Talks – telecare helps people live more independently and safer at home. The technology consists of a red pendant, a base unit and smoke alarm – if a venerable person finds themselves in trouble they can press the red button and get emergency help quickly. We also offer more advanced Telecare options
○ Community Challenges – community challenges encourage physical activity and socialisation.
○ Interactive Sessions – could your community group share their experiences to help others?
○ Advertise your events/ club on Living It Up
○ Tailored Talks – how can Living It Up help you

Get in Touch

shona.gilfillan@nhs.net or call 0777 3484 772
Moves to transform office environment in North Highland

WORK has started on the Office Redesign Project in north Highland. This project will provide a real opportunity to transform NHS Highland’s office working environments for the benefit of staff and the organisation as a whole.

Staff working in John Dewar Building, Alder House, Larachan House, Southside Lodge, Assynt House and Larch House will be affected by this project, as staff members working across these buildings will be re-located to Assynt House or Larch House.

The project will realise a number of potential benefits to both NHS Highland as an organisation and to individual staff members. For our staff, working in a modern, flexible environment in newly refurbished facilities provide numerous health and well-being benefits. Furthermore, the opportunity for teams that are spread over different sites to work closer together makes for easier collaboration and exchange of ideas and innovation.

In many cases it will also reduce time spent travelling and the board’s carbon footprint. For our organisation there will be a net saving through not having to renew leases, a contribution to our efficiency targets and our priority to reduce corporate administrative costs.

This is a complex and lengthy project with a target date of completion in September 2017. Therefore, we are going to use that time wisely to listen to office staff, listen to how they work, how they would wish to work and what they feel NHS Highland can do to realise a smarter working approach and work space aspirations, and address any work environment concerns.

Your help and input to the design of this project is crucial to its success. To achieve this, NHS Highland is currently engaging with an external consulting firm with significant experience in executing similar changes.

They will support you to be part of this project by running a series of workshops which will provide opportunities for each department to input their needs and ensure that we develop a high quality working environment based on input from a wide range of staff.

A member of the redesign team from NHS Highland estates department, Zhen Ron Tan, has been working with each department of the affected buildings to identify a representative to become a member of a Stakeholder Group and to attend the series of planning workshops.

There are also several ways that you can make a positive contribution to this project by contacting your departmental representative with your thoughts and ideas, by emailing me directly at hugo.vanwoerden1@nhs.net or by sending an email to High-UHB.NHSHighlandEstatesProjects@nhs.net.

You will be kept fully informed and up-to-date with project developments by regular updates in future editions of the Office Redesign Project Newsletter. In order for us to achieve this goal, this must be a two-way process and I urge you to fully engage with the workshops.

I am looking forward to working with you on this project to make our office working environments the best that they can be for all of us.

I look forward to working with you on this project to make our office working environments the best that they can be for all of us.

Prof Hugo Van Woerden
NHS Highland
director of public health
Who will this affect?
NHSH staff working in John Dewar Building, Assynt House, Alder House, Larch House, and Southside Lodge, all in Inverness, and Larachan House in Dingwall will be affected by this project. Staff working in these buildings will move to a new ‘agile working’ environment with a permanent base in either Assynt House or Larch House.

What is agile working?
Agile working is a modern way of working which embraces both the physical and digital workplace, supporting staff to work where, when and how they choose with maximum flexibility and minimal constraints. It’s based on the concept that work is an activity we do rather than a place we go to, and aims to improve productivity while enabling staff to achieve the best possible work/life balance. In practice, this can include better access to home working and the digital tools which support this, access to different types of workspaces suited to different tasks, and flexible hours.

How can I get involved?
Each department will have a representative who will attend a series of workshop sessions to feed into the redesign process. The workshops will discuss how each department works, what you need to work efficiently, what problems you currently face, which other departments you frequently interact with, etc. Your views and any concerns you have should be raised by this person. A list of all the departmental representatives will be emailed out so you can check who your rep is.

Will I have to hot-desk?
Agile working is not just about hot-desking, although as the project aims to make better use of NHS Highland’s office space, hot-desking will be one feature of the redesigned workplace. Not everyone will hot-desk and this will vary much depend on the type of work you do and your work patterns. Determining this will be one output from the workshop sessions.

What is the timescale for this project?
We aim to complete all office moves by September 2017 as this is when the leases expire on a number of our offices which will not be kept. According to the existing programme, the first moves will start in November 2016; however we’ll confirm the exact dates and who’s affected following the output from the workshop sessions.

How do I raise concern?
You can raise concerns by:
- Speaking to your departmental representative and asking them to raise your concerns at the workshops
- Emailing Hugo Van Woerden as the Senior Responsible Officer on hugo.vanwoerden1@nhs.net
- Speaking to Adam Palmer who will act as staff side representative on the project team.

Is this all about saving cost?
This project will lead to significant financial savings in terms of rent and maintenance costs which will allow NHS Highland to spend more of our limited resources on delivering services to our patients. However, cost is far from the only driver behind this project.
Other benefits include:
- An opportunity to transform and modernise our work environment, increasing the flexibility of our working space and patterns to better suit all staff
- Giving staff more control over their work environment which has been shown to improve productivity and moral, and decrease rates of sickness
- Opportunities to work closer with departments of similar working environment, reducing travelling time and increasing productivity
- To increase health awareness by increasing physical movement
- Providing more collaboration space for teams and departments
- Reducing travel thereby reducing our organisational and personal carbon footprint
- Making better use of digital resources and reducing waste
And many more...
TECHNOLOGY

How getting digital can improve health...

NHS HIGHLAND’S technology enabled care team is holding a series of interactive workshops across north Highland designed to explore how technology can improve patients’ health and care.

Health and social care professionals are invited to attend workshops entitled ‘Digital Health – How can Digital Help You?’ that will take place in various locations.

Each session will include three workshops, and you have the choice of attending as many as you like:

- **Workshop 1** – Telehealth. Find out how NHS Highland is using Florence – an interactive text messaging tool – to reduce clinical workloads and improve patient care. Explore how it could be used to help you and your patients.

- **Workshop 2** – Living it Up. Explore the range of online interactive tools and services which empower users to self-manage and lead happier, healthier lives. It is a simple yet effective digital platform for health and care.

- **Workshop 3** – Discover how telecare can help your patients live safely and independently in their homes. In this workshop you will learn about Telecare options and the referral process.

You can choose your preferred location from the following: Tuesday, 30th August – Portree; Thursday, 1st September – Wick; Friday, 2nd September – Dingwall; Tuesday, 6th September – Inverness; Thursday, 8th September – Fort William.

To book a place email nhshighland.technologyenabledcare@nhs.net or call 01463 255 733.

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From Motivation to Habit: Unlocking the Health Behaviour Change toolbox

**The MAP of Sustainable Health Behaviour Change: A Scottish Diabetes Group Funded Project**

**funded by the Scottish Diabetes Group**

Health behaviour change (HBC) can be challenging for all of us. Even when we feel motivated to make changes, putting them into practice and maintaining them can be difficult. For health professionals, it can feel frustrating to know WHAT changes might help people to be healthier, whilst not knowing HOW to help them to make these changes. To change behaviour we need to be Motivated, know how to put motivation into Action and to maintain behaviour, and use Prompts and Cues.

We call this the behaviour change MAP. MOTIVATIONAL, ACTION PLANNING AND PROMPTING techniques can help us to help individuals improve their health, by implementing, maintaining, and adjusting their health behaviours to fit with their own needs and lifestyles. This requires skilled practitioners who can support individuals in a collaborative and patient-centred service that operates in a way that maximises opportunities for re-thinking and consolidating healthy behaviours.

**Stirling University HBC MAP project**

Health psychologists expert in behaviour change will deliver the training. The course is 2 days (one long day, followed by a shorter day 2 or 3 weeks later) delivered locally. Participants should be prepared to attend the full two days. This course focuses on how to move from Motivation to Action to Prompted healthy habits.

**Who is the course for?**

Practitioners who work with those who have diabetes

Skills learned will be useful in a range of settings and in use with people who have different long term conditions.

**Course Structure**

Pre course manual – you will be sent a pre course manual with short interactive homework activities.

Day 1: Generally 9:30 to 4:30 but this has been adapted to fit into an afternoon/evening slot where requested.

Day 2: Generally 9:30 – 2:30 but again this can be flexible and commence later in the day and finish later.

**We’re coming to a place near you!**

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<thead>
<tr>
<th>Location</th>
<th>Day 1</th>
<th>Day 2</th>
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<tr>
<td>Wick</td>
<td>12th May</td>
<td>23rd May</td>
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<td>Inverness</td>
<td>22nd August</td>
<td>5th September</td>
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<td>Fife</td>
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<td>Tayside</td>
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<td>7th October</td>
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**Booking a place on the course**

To book a place on any course, contact Nicola Hunt at Stirling University on Nicola.hunt@stir.ac.uk

More dates and venues to be confirmed – if you are interested in organising to have a course near you, please contact wendy.maltinsky@stir.ac.uk

Act quickly, places fill up fast.
EXPERTS in healthcare, housing and home design from across Highland have come together to form a unique partnership to build sustainable homes for people with assisted living needs.

Led by NHS Highland, Albyn Housing Society and Carbon Dynamic, its aim is to create highly adaptable homes which can support people to live independently in their homes for longer through technology and remote monitoring by social care agencies.

The project is the first of its kind in the UK and will take input from a wide variety of stakeholders including patients and public service providers. As part of this process, the partnership held its first interactive co-design session at Highlands and Islands Enterprise’s new headquarters on UHI Inverness campus earlier this month.

NHS Highland director of research, development and innovation, Professor Angus Watson, said: “In order to source feedback from a whole range of multi-professional health and care staff, we have used the very latest technology to create a virtual reality model, helping users to experience the built environment in an innovative way.

“This was on display at Friday’s event in the campus’s new #hellodigital space, which makes use of the recent rollout of superfast broadband to connect business and technology.”

Lucy Fraser, head of innovation at Albyn Housing Society, added: “The central concept of the homes is that they will include ambient, physiological and building sensors to collect data that can be monitored and responded to by a variety of agencies – potentially transforming the way health and social care is delivered.

“The collaboration includes potential residents, doctors, nurses, therapists, health and social care managers, technologists, enterprise executives – anyone who can offer experience, expertise and insight to ensure this project results in a sustainable and successful model for the future.”

Set to commence in August, the first building phase at Dalmore, Alness, will include 14 new homes and two community spaces. A further 32 houses, including homes for veterans, will be built in Inverness.

The innovative homes are constructed off-site by Carbon Dynamic and delivered to their location 90 per cent complete.
ORGAN Donation Scotland is set to launch a bold new campaign next month – We Need Everybody – which aims to motivate more people in Scotland to join the NHS Organ Donor Register and save more lives.

‘We Need Everybody’ will hit television screens on Monday 4th July and looks set to dominate social media channels.

And NHS Highland will be asked to play its part in getting behind the national drive to increase numbers on the register.

Some 44 per cent of the Scottish population are on the register yet still someone dies every day waiting on an organ transplant.

And that’s the dilemma the new campaign aims to address.

It’s known that people in Scotland are supportive of organ donation, but many haven’t got round to thinking about it in the ‘here and now’, or showing their support by joining the register.

There are many myths that stop people from registering, but in reality there are very few barriers to an individual being an organ donor.

The challenge of ‘We Need Everybody’ is to capture the attention of Scots who haven’t joined, make them reassess their perceived barriers and their believes and, importantly, make joining the organ donation register online as quick and simple as possible so that they act there and then.

The four-week campaign, which will use humour to convey what is a serious message, will be followed by further PR activity during Organ Donation Week, to run from 5th-11th September.

Future of shape of health and social care services in Skye, Lochalsh & Wester Ross

NHS Highland and partners are holding an open drop-in session for members of the public

Friday 15 July 2016

Dornie & District Community Hall, Aird Point, Ardelve, Dornie, Kyle of Lochalsh IV40 8DY

1pm – 6pm

There will be opportunity to meet with the NHS Highland management team, front-line clinicians and partner agencies providing local health and social care services.

Please come along and tell us your views

Working with you to make Highland the healthy place to be

Annual meeting

THE 25th annual meeting of the Scottish Cardiac Society will be held in the Dunblane Hydro Hotel, Dunblane, on 30th September and 1st October.

The society is inviting abstract submissions related to academic clinical and scientific research as well as the results of projects in service development and quality improvement. Submissions are welcome from clinical and research physicians, nurses, cardiac physiologists and other allied healthcare professionals as well as medical students.

Details of prizes of travel grants are available on the NHS Highland intranet.
A REVIEW of neonatal services activity at Raigmore Hospital has recently been published for the first time thanks to the introduction of the Badger computer system which allows the gathering of information on patients during admission and cot occupancy and staffing levels.

The review shows that over the past year 292 babies were admitted to the neonatal unit. The majority of the babies admitted to the unit were term babies (born around their due date). However, there were the premature babies who needed care at the unit for a significant time (sometimes months). The data also show that the unit was closed to admissions for 45 days due to all available cots being occupied.

As very small babies born at a pregnancy duration less than 28 weeks are preferably cared for in bigger tertiary university hospitals, the aim is that these pregnant women are transferred out before the birth of their premature baby. However, when birth is imminent this is not always possible. Fortunately, over the past year the majority of these very premature babies (83 per cent) were born in tertiary university hospitals and later, after some weeks, they were transferred back to Raigmore to be cared for closer to home.

The review also details that five babies were cooled after birth as they had experienced difficulties around birth. Body cooling is a relatively new treatment for babies which has shown a positive effect on later outcome. The neonatal unit in Raigmore is unique in Scotland in that it initiates cooling in babies before transport to a National Cooling Centre. Cooling needs to start within six hours after birth, but given our geography it would be impossible to achieve this within that time frame if the baby had to be transported to the nearest university hospital first.

The Neonatal Community Liaison Service provides discharge planning and ongoing support following discharge from the unit for both families and healthcare professionals. The babies eligible for this service are those born very premature and also include babies who require home oxygen therapy or tube feeding. During 2015, a total of 27 families (29 babies as there were two sets of twins) were followed up on discharge from the unit by the NCLS nurse/midwife.

This service has been very effective in preventing subsequent readmissions to the children’s ward as to date only three of the 29 babies have required an inpatient admission.

The review concludes by detailing a number of aims for the unit. These include an increase in the number of babies who are fed with breast milk by the time they are discharged from hospital; to participate in a national audit programme; and to develop short and long-term plans on how to increase the physical space of the unit.

A developmental care group has also been established which will look at a broad range of interventions designed to minimise the stress of the neonatal unit environment on the preterm infant's development.

SCOTLAND’S first graduate medical programme was unveiled earlier this month.

And, responding to the challenge for the health service in remote and rural locations, the project will work closely with NHS Highland and the University of the Highlands and Islands.

To be delivered by the Universities of the Highlands and Islands, Dundee and St Andrews, the Scottish Graduate Entry Medical Programme (ScotGEM) is a four-year programme that could accommodate up to 50 students per year.

The programme will have a particular focus on recruitment of Scottish graduates to increase the likelihood of trainees remaining in Scotland, particularly in more rural and remote areas.

Bids were invited by the Scottish Government for a graduate entry programme and Cabinet Secretary Shona Robison announced the Dundee, St Andrews and Highlands and Islands bid had been successful in a speech to NHSScotland.

ScotGEM will be led jointly by the Medical Schools at St Andrews and Dundee.

Professor Crichton Lang, deputy principal of the University of the Highlands and Islands, said, “We are excited to have been selected as one of the universities which will deliver the Scottish Graduate Entry Medical Programme. “Through the initiative, a significant number of medical students will access and undertake the majority of their training in communities around the Highlands and Islands region.

“This will both align with and contribute to our existing work in addressing remote and rural healthcare and will be another important strand in the development of our School of Health, Social Care and Life Sciences.”
THE librarian belongs to a long line of seafarers. Among the ephemera adorning the wood panelled walls of his office is a painting of himself and his crew sailing past Mount Vesuvius on his way to an ‘event’ (another conference?) in Naples, another one (above) shows him in a more modest boat somewhere on the west coast.

Often times he takes it into his head to take to the high seas. Like mackerel clouds predicting rain the minions can always know when one of these trips is coming on as the bottles of spirits are removed from the inner sanctum table and replaced with Admiralty charts. Tortured fragments of sea shanties can be also be heard drifting out of the office.

The Librarian recently got wind of a health fair being held out on Eigg. Eigg holds special memories for our great leader. Once, during a heatwave, after a long night sailing up from the south the boat beached, the crew tumbled out and fell asleep. Feeling sorry for them the librarian gathered up some driftwood, got a fire going and prepared breakfast. The crew were then roused with a chortled bellow – “Breakfast is ready – on your feet, wash the Egg off your faces.”

So the lure of a boat trip was too much and the librarian was away. Supporting rural areas is a key concern of the librarian – he is currently working on a couple of projects involving the latest technology. These involve assisting the health and social care support workers on Eigg and Muck. No technophobe, he is using some new communications software he has been playing with and intends to try to communicate back to the library, as he says “in real time”. In his role as ‘knowledge broker’ he sees information management as one of the vital ways librarians can support health care.

Once he gets going the librarian can yarn so this event suited him well. Most of the island community turned out and had loads of fun. The librarian had great enjoyment pedalling a bike and turning a pile of fruit into a smoothie (an idea for cocktail production back in the confines of the library?). He spoke to a wide range of people and made some useful follow-up contacts. He also saw the benefits of QiGong, gardening and sheds as therapy.

The librarian realises that when possible it is much better meeting people face to face than via a computer so the highlight of the visit was to meet the health and social care support workers in person.

Remember, whatever your needs the Highland Health Sciences Library exists to help you. Save time and money. Don’t spend more than 10 minutes on a problem you may be having – contact the library instead. To find out more about the library call 01463 255600 (x7600).
Get your skates on!

A SIMPLE request to go ice skating from his six-year-old daughter has led to a new found hobby and gold at the Scottish championships for one Raigmore employee.

Ian Beange, principal physicist in radiotherapy physics, joined the adult Highland synchronized skating team, known as the Highlanders, when it started three years ago.

The team took part in their first competition at the British championships in 2014, when they came fifth, and this year at the Scottish championships in Dumfries they came first.

Ian explained there were about a dozen teams across the UK with four in Scotland, an increase compared to a few years ago.

He said: “I couldn’t skate 10 years ago. When my daughter was six she wanted to go to the skating club so I took her along and she wanted her dad on the ice with her. It just went on from there really.

“There were already younger teams in Highland and I was quite pleased when the opportunity came up to join the new adult team. I enjoy skating and was doing it for fun anyway; being part of the team has given it some purpose.”

Synchronized skating allows you to have a minimum of eight people on the ice and a maximum of 16. The Highlanders are an 11-person team in which the youngest person is 20 and, at 52, Ian is the eldest.

He said: “As a group you do a series of formations which can be in hold or not. They can vary but as a discipline it’s regarded as being quite close to ice dance.

“I’m currently the only man in the team, which is slightly unusual, but I really do enjoy it. Of course, you still get nervous before a competition but I would absolutely recommend it. If you can skate you can do this.”

Joining Ian in the team are two more NHS Highland employees: Jennifer Collen, a physiotherapist based in the Nairn and Grantown area, and Caroline Fraser, an orthoptist based at Raigmore.

As a team they aim to train once a week and usually get about 12-16 practice sessions in before they take part in competitions.

To find out more, check out: www.highlandicesynchro.co.uk
How would you describe your job?
I am responsible for the management of a multi-disciplinary flow team incorporating operational, strategic and quality aspects combined with the future development of the service, including the management of safe and effective patient flow across Raigmore and Inner Moray Firth Operational Unit.

How would you describe yourself?
I am 44 years old I have one son, Matthew. I am very family orientated and I enjoy time with friends. I have worked within NHS Highland for 27 years, the majority of that time within the surgical directorate.

Do you have any hobbies and interests?
I love reading and listening to music.

What was the first single you ever bought?
I can’t remember — I am that old!

What is your favourite food?
Chocolate.

Do you have a favourite film?
Bridget Jones Diary

What about a favourite TV programme?
Gogglebox

And is there a book you’ve particularly enjoyed?
Harry Potter books

If you won £10 million in the lottery, what would you spend it on?
A luxury yacht with no wifi so that the outside world could not contact me.

What about a smaller sum, say £1,000?
A wee holiday for Matthew and I.

What are you pet hates?
Rudeness and people all speaking at once.

If you could have dinner with three people, dead or alive, who they be and what would you cook them?
I would invite my mother, the Pope and Brad Pitt. I would cook mussels in white wine, roast beef and all the trimmings, banoffee pie and cream.

What are the best and worst parts of your job?
The best part of the job are the team I work with. They are great people and we support each other on the difficult days. And the worst part? There are difficult days and sometimes they are tough to get through.