

Lochaber Health & Social Care Redesign Stakeholders Group

Thursday, 17th March 2022 at 2pm – 3pm
Via MS Teams



Present:	Alan Wilson, Director of Estates, Facilities and Capital Planning, NHS Highland
	Marie McIlwraith, Project Manager for Community Engagement, Communications and Engagement Team
	Heather Cameron, Senior Project Manager, NHS Highland
	Rebecca Weir, GP Partner, Glen Mor Medical Practice, Fort William
	Ian Langley, Community Councillor, Spean Bridge, Roy Bridge and Achnacarry Community Council
	Stephen Gilbert, Consultant Anaesthetist
	David Sedgwick, Belford Appreciation Group representative
	John Hutchison, Chair, Kilmallie Community Council
	John Gillespie, Chair, Caol Community Council
	Patricia Jordan, Secretary, Fort William Inverlochy & Torlundy Community Council
	Malcolm Gillespie, Chair, Ewen's Room – Promoting Wellbeing and Mental Health
	Josie Thomson, Clinical Advisor, Estates Team, NHS Highland
	Donald Stewart, Director South Lochaber Community Company
	Karen-Ann Wilson, District Manager Lochaber, NHS Highland
	Brian Murphy, Chair of the Transport and Access Sub-Group
	Bryan Gregg, Voluntary Action Lochaber
	Denis Rixson, Liberal Democrat Councillor, Ward 11, Caol and Mallaig
	Stephen Gilbert, Consultant Anaesthetist
	Denise Anderson, Sunart Community Council representative
	Iain Macniven, Chair Arisaig & District Community Council
	Jo Cowan, Highland Senior Citizens Network and Age Scotland
	Emma Tayler, Assistant Wards Manager
	Michael Foxley, University of Highlands & Islands
	Lydia Rolmer, University of Highlands & Island
Apologies:	Louise Bussell, Chief Officer Community Services, NHS Highland – Chair
	Melanie Poduschnik, Secretary of Mallaig Community Council
Minutes:	Anna Chisholm, Meeting Administrator, Corporate Services

1.	Welcome and apologies Alan Wilson welcomed everyone to the meeting and apologies were noted as above.
2.	Minutes from previous meeting – 17th February 2022 The minutes of the previous meeting were agreed as an accurate record of the meeting. Malcolm Gillespie asked for the addition of mental health care to be included in the AOB, Community Transformation Planning.

3. Progress Update

Clinical workshops

Heather updated on the focusses of the clinical workshops:

- The first focus was to establish what are the core services that all rural general hospitals should deliver.
- Which services are currently delivered in a rural general hospital but could be better delivered within a community setting.
- What services in the future would we like to deliver in a rural general hospital.

The discussions were valuable and there is some work to come out of that regarding maternity care, antenatal care in particular scans and is there anything that can be done to bring this back to Fort William. In the other rural general hospitals, there is work needed to define what level of paediatric care that can be provided locally and some work regarding mental health services.

The feedback from these workshops will be reviewed by our healthcare planning colleagues with Buchan Associates which will feed into the option appraisal event on Tuesday 22nd March of which some of the Stakeholders will have been invited to. The agenda and papers will go out for this today or tomorrow (17th/18th March)

The option appraisal will slim down what was previously 5 options down to ideally 1 preferred option. The Finance team will review the cost implications of this.

Following the second workshop there are updates to be made to the Initial Agreement, some of which are ongoing, some of those will follow on from the output of it. However, there is an expectation to have the IA updated and ready to go by the end of first week in April.

John Hutchison queried the date of the IA submission as this was documented as 16th March. When will the criteria be known so this can be considered for at the option appraisal meeting on 22nd March.

Alan confirmed the conversation with Scottish Government and of the initial plan to submit 6 weeks before with an addendum. It has now been agreed for one submission once the feedback from the option appraisal meeting on 22nd March has been included.

Heather confirmed of the investment criteria developed in the first phase of the initial agreement, these are now more refined and will be discussed at the session on Tuesday 22nd March.

Action: Heather to share the investment criteria with the Group prior to the meeting on Tuesday, 22nd March.

Michael Foxley asked for confirmation of the outcomes and recommendations of 3 clinical workshops at the meeting on Tuesday.

Heather confirmed this will feed into this however, the meeting on 22nd March is more high level so in terms of what this means for local health service provision. The level of detail will not be provided at the option appraisal as this will take more time to decide. However there will be enough detail to feed into the schedule accommodation and staffing model for the new hospital.

Michael Foxley asked about the matrix of services that Emma Watson had previously produced and stated there is a need to cover some of the low-level detail and a constructive discussion about it is long overdue.

Alan confirmed the level of detail will happen once the IA has been submitted and of the first piece of work thereafter. The feedback received following the workshops will provide more emphasis on what previously has been available.

David Sedgwick made the comment there are 6 rural general hospitals in Scotland, not just 3 in Highland. There is a need to engage with the teams in Shetland, Orkney and Stornoway as well as the teams here so that we can learn from them and also to strengthen the recruitment processes.

Alan confirmed of the representation of Orkney at the last meeting and David McArthur is the contact there. The standards of care and for example paediatrics in trained staff and the appropriate area to see people.

Stephen Gilbert confirmed of the engagement from Caithness at the meeting and the increasing of services being offered at Belford. There is a need to treat people more in Belford rather than being sent to Raigmore immediately. This will take some organisation in nursing and medical staff being in place to do that, ensuring this is good quality and safe.

John Hutchison said of a feeling of anxiety in the lack of detail of services to be provided. A certain definition of the service is needed for the IA and a different level of service for the OBC. The important thing is to ensure the IA is at that high level and then work to be done on the OBC in a more detailed level. John asked for the SCIM document be recirculated to reassure people to the point aimed for next Tuesday which is high level.

Action: Alan will circulate the SCIM process and outcomes diagram for information.

<https://www.pcpd.scot.nhs.uk/Capital/scimpilot.htm>

David Sedgwick said all the standards over the last 30 years are generally have been set by city centre 'super-specialist' consultants. Whilst it is obviously important to adhere to their essential safety standards, there are compromises in the rural setting, which mean they may not necessarily be of the same standards of a London hospital.

Alan confirmed that the organisation supports trying to introduce as much service back to as close to the community as possible but patient safety was paramount.

Jo Cowan confirmed of an email confirming ambulance service is renewing the provision for the Highlands service over the next month and aware of the external support network which may affect the future and having an input to that would be good for this Group.

Alan confirmed the first consultations will be going through the team at Belford.

Transport

Heather confirmed Scottish Government have asked for more information on the wider transport plan which will feature in the Initial Agreement. Work will be undertaken by Derek Holden who has previously worked in Skye when there was a review of services in the north and south of Skye on the impact of patient travel in relocating services. There is a meeting next week with service planning to gather some data, allowing Derek to establish a baseline and from that work forward. Once more detail on the proposed services is available this will enable to qualify the impact better.

The more detailed picture discussed earlier particularly around the access of the bus routes via the Health Centre. Comments have been submitted to Highland Council, where slight changes have been made to the plans, these have been reissued to others for comment and are ongoing in the planning process.

Alan confirmed of the proposal and the work to be carried out in terms of transport and this will be issued to the Group for oversight on what to be expected. A meeting has been arranged with the owners of the Health Centre next week to discuss a way forward as NHS Highland are fully supportive of the scheme. Correspondence has been received from various areas expressing staff concerns about security and assurance can be given by NHS Highland and Board to address these. This has been discussed with Highland Council however no update has been received on the drawing layout.

Michael Foxley welcomed the strong support. There was the intention to meet one of the GPs of Tweeddale together with other GPs to discuss however despite that request and a follow up email that meeting did not take place with a subsequent email being received 2 months later stating they were opposing. There was a useful meeting yesterday with Michael Foxley, John Hutchison, David Sedgwick and one of the GPs who raised a number of concerns regarding the safety of health workers. The GP expressed of this being forced on them however, there is a long history on the master plan which was put in place a long time ago for the co-location of the Fort William Health Centre and the Hospital. . Therefore, it may be worth expressing the understanding of their concerns and highlighting this is not a new idea and a very old one

Alan acknowledged the security concerns and will give assurances wherever needed to ensure no one is at any risk. The benefits of the road to the hospital with regards to late appointments and ensuring people are there on time and taking the need away for some of the need for carparking. As an organisation the benefits outweigh the risks however there is a need to review the finer details as we go along.

Brian Murphy asked of the access from the Health Centre to the hospital and of a strong transport link between the 2 centres.

Alan confirmed of discussions with the bus companies highlighting the different issues and progressing as a Board. The land belongs to the owner of the Health Centre and a meeting has been arranged next week to obtain a resolution. An update will be provided.

Rebecca Weir confirmed from a GP point of view there is a communication issue and of being out of the loop. Are there any plans to meet with the representatives from the GP practices as it is key to have everyone on board and the need for some gentle ground work.

Alan confirmed he is happy to meet with the GPs and to discuss the benefits of the new Hospital and any issues needing to be addressed.

Action: Alan Wilson to arrange a meeting with Rebecca Weir.

Donald Stewart asked, who receives the information from the cluster meetings as his GP has given input to one, has a report been received from HITRANS and could the consultant be in contact regarding access to the new hospital.

Ian Langley asked if the HITRANS plan regarding the future of rail around Fort William, which included the proposal of a new station near the Distillery, has included the transport links, and if not, it should be. Has there been a provision for a helicopter landing area. Ian suggested the use of an electric travelator to connect the Health Centre and Hospital.

Alan confirmed HITRANS are starting that process and will issue a report which will feed into the work that is ongoing. The purpose of the link between the Health Centre and the Hospital is to ease the traffic on the main road and to ensure patients arrive at their appointments on time.

John Hutchison confirmed the purpose of the bus link is to ensure the buses re-join the A30 at the roundabout rather than a t junction where there is known congestion when the schools are scaling and the overall view to perhaps improving the bus timetable.

Brian Murphy asked with the ongoing transport conversations and concerns is there any chance of a transport study being done. This Group should have sight of this for comments.

Alan and Heather confirmed the scope of work from HITRANS would include:

- An impact assessment for the new hospital taking account of the impact on other hospital facilities available including at Oban and Inverness and complementary provision of health services in local communities.
- An improvement plan to tackle existing and growing transport and access problems in the area
- A review of the potential business cases for future approaches to transport and access
- Assisting all partners including community groups to develop an action plan to improve access to health and social care.

Once this information has been gathered, they undertake lot of analysis with maps where this happened with the North Syke work in understanding the costs of transport.

John Hutchison confirmed on waiting for this remit for 6 months and sight of the remit so to obtain assurance that it answers some of the items that Ian Langley and Bryan have raised.

Action: Alan to take this offline for discussion

4. **Communications and Public Engagement Planning**

Marie McIlwraith confirmed reviewing the invitations for the option appraisal event next week and if anyone does need any help or support regarding this event to let herself or Heather know to ensure everyone has access and fully take part in the event.

Heather, Marie, John Hutchison and Patricia Jordan to then discuss how best to update the community and to enable views are raised going forward. A radio interview, maybe a short interview describing what the options are and what that might mean and drafting public information.

Alan confirmed a discussion with Pam & Louise regarding a monthly column in a local newspaper where they are keen to take this forward. A conversation is needed on what column space could be provided and what information to include, maybe an update after each project team meeting.

Action: An agenda item to discuss further.

Bryan Gregg confirmed there is a need to issue communications as there is a limited knowledge in the community on the progress of the Hospital.

Ian Langley suggested Nevis radio could help with a pod cast or live interview to get the message out to the community.

Action: Marie McIlwraith to discuss with Ian Langley, Anna to share email details.

Emma Tayler advised of using other methods to engage with the younger population. It would be useful to have a summation of where things are at, even with the RAG system, helicopter pad being dealt with elsewhere, dates changing etc as it can be difficult to follow progress.

Marie confirmed Highlife Highland and the ways to engage with young people.

5.	<p>AOB</p> <p>Alan confirmed Tara French will attend the next meeting to give an overview regarding the ongoing work, going forward and how it will link with this piece of work. Confirmation from the Stakeholders if this is to be on the agenda at the next meeting.</p> <p>Alan also asked the Stakeholders if an update on transport should be included on the agenda and which would be preferred.</p> <p>Action: Stakeholders to confirm whether an update on transport or Tara French to be included as an agenda item for next meeting</p> <p>Rebecca Weir asked if Tara has plans to speak to Denise McFarlane and the local GPs.</p> <p>Action: Alan to arrange a meeting with Rebecca Weir, Tara French Denise McFarlane and Louise Bussell</p> <p>Michael Foxley confirmed of the critical element on the number of care home beds there are in Lochaber related to the scale of bed blocking in the current Belford. In Lochaber there are less than half the Scottish and Highland average and it is clearly of importance in terms of the number of beds in Belford. This is an understanding on the need to minimise the number of beds in hospitals as they are expensive but when there is significant bed blocking, the last time asked there was 10. The critical thing is what are the intentions to increase the number of care home beds locally as NHS Highland has refused to reopen Dalmore even in the resuscitated form.</p> <p>Alan confirmed this is part of the ongoing work Tara French will be reviewing.</p> <p>John Hutchison asked about an update on the information Heather has added in the chat during this meeting regarding there not being provision of a helipad. A group have been reviewing the need for a helipad for the last 10/15 years so assurance is needed on whether this is going forward with some momentum.</p> <p>Alan confirmed Chris Stirrup receives invites and meeting correspondence for the Fort William Helicopter Landing Site meeting. Alan will forward any available correspondence to the Group for information.</p> <p>Action: Alan will forward any available correspondence regarding the Fort William Helicopter Landing Site meeting to the Stakeholders for information.</p>								
6.	<p>Agenda items for next meeting:</p> <p>HITRANS update or Community Services Tara French</p>								
9.	<p>Date of next meeting</p> <p>Thursday, 21st April at 2pm - 3pm via MS Teams</p>								
10.	<p>Date of future meetings:</p> <table border="1" data-bbox="183 1948 1117 2085"> <tr> <td>Thursday, 26th May 2022</td> <td>2pm – 3pm</td> </tr> <tr> <td>Thursday, 23rd June 2022</td> <td>2pm – 3pm</td> </tr> <tr> <td>Thursday, 21st July 2022</td> <td>2pm – 3pm</td> </tr> <tr> <td>Thursday, 18th August 2022</td> <td>2pm – 3pm</td> </tr> </table>	Thursday, 26 th May 2022	2pm – 3pm	Thursday, 23 rd June 2022	2pm – 3pm	Thursday, 21 st July 2022	2pm – 3pm	Thursday, 18 th August 2022	2pm – 3pm
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	Thursday, 27 th October 2022	2pm – 3pm	
	Thursday, 24 th November 2022	2pm – 3pm	
	Thursday, 22 nd December 2022	2pm – 3pm	