



Colleagues

Issue 131

When I was growing up, I loved listening to Bruce Springsteen - the Boss, as he came to be known. I always felt his music was authentic and stood in contrast to the manufactured sugar-sweet pop that we're all over exposed to. He recently wrote his autobiography, and then developed that as a Broadway theatre production. I watched a film of it the other night. It has a confessional quality, where he reaches back into his past and plays his music as a narrative of his life. He talks about his mum and how he is gradually losing her to Alzheimer's Disease. Despite her decline, she loves to dance - he observes the elemental quality of music and how we dance in its presence, even when we've lost other means of self-expression.

At the IJB this week, we agreed a new Advocacy Plan for the Western Isles. Independent Advocacy is a hugely important function, in that it allows patients and service users to challenge power imbalances that can exist within health and social care services. Despite the best efforts of health and social care professionals, people often need extra help to express their views.

At the same meeting, Dr Dave Rigby provided a really thoughtful presentation on realistic medicine. Realistic medicine will help to improve the health and social care system by:

- sharing decision making between health professionals and patients
- providing a personalised approach to care by asking what matters to people
- reducing harmful and wasteful care, moving away from over-treatment and testing unnecessarily
- collaborative work between health professionals to avoid duplication and provide a joined up care package that better meets people's needs and wishes

At the IJB, we also had the usual updates on mental health redesign, the reform of residential care in Lewis, St Brendan's redesign, our emerging work on learning disabilities, our analysis of a recent Audit Scotland report on Integration, discussion about our workforce challenges and demand drop-off in our care units - the latter will be the subject of a further report looking at alternative uses and the levels of need they can sustain.

Finally, at the meeting my colleague Fiona Macleod from the Western Isles Carers, Users and Supporters Network asked for a short animation produced by the King's Fund to be circulated. Here it is:

<https://www.kingsfund.org.uk/audio-video/joined-care-sams-story>

Our response to growing levels of need has to reach beyond considerations of core community care capacity to an examination of service design and workforce change. Partly, this is about instituting change by pursuing our established strategies – the implementation of the dementia strategy, for example. However, we also need to be reviewing service delivery arrangements in a fundamental way. To offer a case in point, the IJB Lead Nurse recently hosted a session with our community and specialist nursing leaders to consider how we respond to fast changing profile of need (both in respect of complexity of care and presence of comorbidities). We are interested in developing a model of service

which is focused on supporting patients to self-manage, where the community nurses themselves not only offer clinical intervention but function as key facilitators of holistic care and support, liaising with the full range of community health and care professionals supporting individual patients. Specialist nurses would in turn deliver support to community teams to deliver care that maintains independence and supports self-management. This also aligns to wider primary care reforms, where we anticipate closer working relationships between practice teams, led by the GP as an expert generalist, and NHS employed community healthcare staff. We plan to host a series of development sessions with practices in the new year to begin to sketch out how these new relationships will form.

Got a couple of nice letters this week, both of which asked me to pass on thanks to our home care teams. Here is an excerpt from one:

I write to express our appreciation of the work carried out by the Homecare team. In particular, we were impressed by their respectful and thorough attention to my father's personal needs, their positive approach to his frailty and disability, and their encouragement to both my parents. They provide a vital function to enable my parents to stay in their own home, which is their fervent wish.

In many ways this sums up our mission as a health and social care partnership - doing what we can to support people who are frail, disabled or ill to live independent and purposeful lives.

The national Children & Young People's Mental Health Taskforce Delivery Plan has been published and is available on the Taskforce website;

<http://taskforce.scot/delivery-plan-2/>

The delivery plan sets out how over the next 2 years the taskforce aims to address the significant challenges facing children and young people's mental health services. In the months ahead the Taskforce will continue to work with a range of partners to take this plan forward.

Before we start drifting off on leave over the festive period I just wanted to record my thanks for another year of hard work. It has felt especially challenging this year but despite this I feel we've made real progress across our services and that's really great to see. The fact that the Care Inspectorate and Healthcare Improvement Scotland came to us in April, three years after a hard hitting report about our effectiveness as a partnership, and offered a positive assessment of our work is testament to the effort that you've put in. That wasn't an easy win – in the same circumstances, the City of Edinburgh got a follow up report which indicated limited progress had been made. So despite our challenges, we're on the right track.

For those of you who are taking leave over the festive period, enjoy a well-earned rest. For those of you who will be working - especially on Christmas Day and New Year - thank you. I look forward to working with you all in 2019.

Ron

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