



SLÀINTE AGUS CÙRAM SÒISEALACHD EILEANAN SIAR

Health and Social Care Western Isles



Colleagues

Issue 128

A number of us (myself included) benefited from a break over the October holidays but inevitably that can only be enjoyed if others decide to stay at work and keep things ticking over – I wanted to say thanks to those who worked through that period. Our staffing challenges are significant – but we need to ensure that we are all given an opportunity to rest and recharge our batteries. This is as much about clearing the head as it is about physical rest – the modern workplace has blurred the lines between ‘at work’ and ‘not at work’ and many of us are only one phone call or email away from being activated into work mode. I wonder whether this is straining the psychological contracts we have, which make an important distinction between work and private life. As this has strained, so levels of stress have increased. It’s something I’m giving thought to, how we might recapture and consolidate that private space that we all need to flourish.

Have a read at the following article on mental health, which I was really taken by. It considers the much repeated and honourable aspiration to put mental health on the same footing as physical health - but also points to the key differences from the perspective of those experiencing poor mental health.

https://www.theguardian.com/society/2018/jun/30/nothing-like-broken-leg-mental-health-conversation?CMP=Share_iOSApp_Other

I read an interesting statistic from the Institute of Fiscal Studies the other day - as a percentage of public spending, healthcare is taking up a bigger and bigger proportion: having been 23% in 2000 and 29% in 2010, it is projected to be 38% by 2023. The point has been made that at some point we’re going to have to remedy this by paying higher taxes - otherwise other public services may be squeezed beyond recognition.

Despite this, the NHS in Scotland faces massive challenges. Here are the opening two paragraphs from Audit Scotland’s recent review:

To meet people’s health and care needs, the NHS urgently needs to move away from short-term fire-fighting to long-term fundamental change. The type of services it offers, and the demand for those services, have changed significantly over the 70 years since the NHS was created. The challenges now presented by an ageing population means further and faster change is essential to secure the future of the NHS in Scotland.

The NHS in Scotland is not in a financially sustainable position. NHS boards are struggling to break even, relying increasingly on Scottish Government loans and one-off savings. The Scottish Government’s recent health and social care medium-term financial framework and other measures are welcome steps but more needs to be done.

http://www.auditscotland.gov.uk/uploads/docs/report/2018/nr_181025_nhs_overview.pdf

Locally, we're trying our best to move away from 'fire-fighting' and ironically perhaps a few of us met last Friday in the community room of the Scottish Fire and Rescue HQ to discuss how we might deliver more and better early intervention. We're working on a proposal to streamline referral pathways between public bodies for those people who are only just managing - who don't yet qualify for formal care but who need a little extra support. If we can identify people in this circumstance and intervene early, our thinking is we can prevent the escalation of need.

I attended the HHP (our local housing association) business planning day on Wednesday. It was really positive discussion about the role of the housing sector in contributing solutions to the central challenges we face as an island community. One policy I'm interested in is the idea of 'key housing' - in other words offering people who are thinking about moving to the islands a housing option to go with their job.

I also met with the respective council committee chairs this week to discuss our ongoing recruitment challenge. It was a helpful discussion, which brought a number of key thoughts to the fore, including our need to bring more male carers into our employment - social care (and many health professions for that matter) has traditionally been seen as the preserve of a female workforce and that's something we need to challenge. If you know any men looking for a new challenge who you feel would be well placed to begin a career in care, then point them in my direction...

Over the October break, we discharged the last two patients from the Clisham Ward. As you know, our redesign plans had focused on supporting patients residing in Clisham into more appropriate care environments - people with dementia should not have to live in a hospital. Having achieved this objective, we can now test out our new model, deploying more of the mental health team to support people in community settings.

By contrast, APU will remain open until assurance can be provided regarding the availability of acute mental health beds on the mainland. And at any rate, under the new model, hospital beds will continue to be available for patients who require short term acute psychiatric care. It's worth saying again - no changes will be made to APU unless and until the NHS Board is satisfied that alternative provision is at a similar standard of care.

That's all for this week

Ron

1 November 2018

Ragnall Culley | Prìomh Oifigear | Seirbheisean Slàinte agus Sòisealachd | Seirbheisean Slàinte Nàiseanta Eilean Siar/Comhairle nan Eilean Siar | Rathad Shanndabhig | Steòrnabhagh | Eilean Leodhais | HS1 2BW | F: 01851 822706 (211334) | 01851 600 501 - Comhairle | <https://jibwesternisles.scot>

Ronald Culley | Chief Officer | Health and Social Care | NHS Western Isles/Comhairle nan Eilean Siar | Sandwick Road | Stornoway | Isle of Lewis | HS1 2BW | T: 01851 822706 (211334) | 01851 600 501 - Comhairle | <https://jibwesternisles.scot>