

BADENOCH, STRATHSPEY, ARDERSIER & NAIRN DISTRICT PARTNERSHIP

ACTION NOTE FROM THE MEETING HELD ON: Thursday 4th June at 2.15pm in the Aviemore Community Centre.

PRESENT: Chair: Cllr. Jaci Douglas (JD); Karen Derrick (KD), VABS; Kate MacLean (KM), NHS; Stuart MacKellaig (SM), Police Scotland; Cllr Stephen Fuller (SF); Fraser Morrison (FM), HLH; Cllr. Roddy Balfour (RB); Liz Cowie (LC), Ward Manager; Margaret Walker (MW), NHS Highland; Gavin Sell (GS), NHS Highland; Margaret Kinsella (MK), Highland Council; Shaun Finlayson (SF), HLH; Ian Murray (IM), HLH.

APOLOGIES: Cllr Bill Lobban, Cllr Liz MacDonald, Robert Farquhar - Scottish Ambulance Service, Jay Muirhead – Signpost, Fraser Nixon – Fire Scotland, John Grierson – Aviemore CC, Katrina Beaton – Social Work District Manager

IN ATTENDANCE: Lynne MacLennan (LM), HC Business Support; Graham Fraser (GF), Newtonmore CC; Anne Howe (AH), RCOP; Liz Prince (LP), Comm Mental Health Nurse; Muriel Berkeley (MB), Aviemore Comm Café; Kim Reddick (KR), Aviemore Comm Café; Jane Alexander (JA), Aviemore Comm Café; Mary Stewart (MS), St Vincent’s Therapy Garden; Simon Noble (SN), Nairn River CC; Marie McIlwraith (MM), Scottish Health Council.

ITEM	SUBJECT	ACTION AGREED	LEAD	TIMESCALE
1	Welcome and Introductions	Chair Cllr Jaci Douglas welcomed all to the meeting and round the table introductions were given.		
2	Apologies	Apologies were noted from Cllr Bill Lobban, Cllr Liz MacDonald, Robert Farquhar - Scottish Ambulance Service, Jay Muirhead – Signpost, Fraser Nixon – Fire Scotland, John Grierson – Aviemore CC and Katrina Beaton – Social Work District Manager.		
3	Action note of previous meeting of 2nd February 2015 and matters arising	<ul style="list-style-type: none"> ◦ Item 3 – Community Planning, Community Development and District Partnerships Review. Carry forward item for further discussion pending outcome of ongoing review. ◦ Item 4 – Highland Children’s District Delivery Plan. Carry forward item for future discussion. ◦ Item 5 – Change & Improvement Plan for Nairn, Ardersier, Badenoch & Strathspey. Carry forward item for further updates. ◦ Boleskine Care – Briefing paper circulated at the meeting. (Circulate with Action Note.) ◦ Vulnerable People – the NBS Emergency Liaison Group (ELG) meeting is being co-ordinated by Sergeant Fiona Wemyss. The next meeting will be called shortly. The issue of vulnerable people lists previously discussed will be picked up at the meeting. 	<p>LC</p> <p>LC</p> <p>LC</p> <p>LC/LM</p> <p>LC</p>	<p>C/f</p> <p>C/f</p> <p>C/f</p> <p>C/f</p> <p>C/f</p>

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4	Integrated Adults Services, Margaret Walker – general update	<ul style="list-style-type: none"> ◦ MW requested time be set aside at the next DP meeting for Paddy Luo-Hopkins, Health Analyst, to present the NABS Health and Wellbeing profiles. Action: This was agreed. ◦ Care at Home. In Nairn 3.4 and B&S 4.1 whole time equivalent staff have been appointed. The staff are trained in re-ablement work to develop more independent living for those patients who require home discharge. The Nairn team were able to remove 27 cases in a week through re-ablement, this demonstrates how well the model is working. ◦ South Area ‘re-new’ and ‘re-design’. An action plan has been set out to focus on service delivery so it is better planned to meet the needs of the area. Progress is being made. ◦ Care Home refurbishment. The Wade Centre refurbishment is planned to start on 1st October 2015. Additional room for step up/down beds has been added in to the refurbishment. ◦ Carer review and short breaks review. Waiting on the outcomes of the review. Theresa James will be contacting all the DP’s to give recommendations on how to implement the findings. ◦ Transition Group. This has been set up and is focused on identifying the needs of children into children’s services. <p>AH expressed grave concern over out of area care placement. Example given of a care placing in Pitlochry which had left an elderly lady having to travel by bus from Aviemore to visit her husband on a regular basis. Impacts include lack of support for those involved, costs associated with travel and health of relatives and carers being affected. There are concerns that places are being ‘reserved’ for hospital discharges to the detriment of local care placing. Action: JD to liaise with AH to determine how this can be taken forward with a solution based focus from the District Partnership.</p>	MW	Lead item at next DP
5	Main agenda theme: Mental Health and Wellbeing			
	Ian Murray, Chief Executive, Highlife Highland - The work of Highlife Highland	<ul style="list-style-type: none"> ◦ Highlife Highland (HLH) was established in 2011 and focuses on 9 areas of work; Adult Learning, Archives, Arts, Leisure Facilities, Libraries, Museums, Outdoor Education, Sport and Youth Work ◦ Prevention agenda: employability courses, early reading (Book Bug), teenage and parent volunteer development, multicultural support and also prison literacy. HLH are due to take over the prison library and courses will be run to help the inmates with reading etc 		

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		<ul style="list-style-type: none"> ◦ Close working with health professionals in Leisure Centres. E.g. Cardiac Rehabilitation Programme (Lochaber): Offers cardiac patients, after they experience a cardiac event, the opportunity to work with HLH staff through a Cardiac Rehab Programme at the Leisure Centre in Fort William. ◦ Falls Prevention and Otago: In 2012 80 beds a day were used throughout the Highlands for patients that had some type of fall. It costs Raigmore £400 a night, which totals £10.5 million a year for falls. Otago is a falls prevention programme which is proven to reduce the number of falls by participants. ◦ Four staff members from HLH have been trained to deliver the programme with classes now being delivered in Tain, Golspie, Wick and Thurso. An outreach service has been developed for a care home in Tain. Training for NHS staff is now being offered. ◦ Fit Plus at Craig MacLean Leisure Centre: Classes taken by a 21 year old instructor. Three sessions per week and approx. 45 people, mostly over 65 years old take part in the sessions. ◦ Health Projects development: Prostrate Cancer UK project starting in Nairn <p>JD advised that she sits on the HLH Board and is happy to take forward suggestions from the DP and also to signpost where necessary. AH agreed with the value of falls prevention work and asked if this could be rolled out to private care homes. Staffing and transport key areas. This could be provided. Action: AH to provide details to IM.</p> <p>MK asked if local are opportunities identified could these be progressed with HLH. IM/JD happy to have any initiatives raised that could work with the preventative agenda outlined.</p> <p>Fraser Morrison, Youth Development Officer based at The Hub in Aviemore. Has been involved in supporting youth and intergenerational project work. FM can be contacted on 01479 812842 and at fraser.Morrison@highlifehighland.com .</p> <p>IM concluded by advising that HLH Managers were being assigned to DP's to provide continuity, liaison etc. Judi Menabney will be rep for BSNA DP. Action: LC to pick up</p>	<p>AH</p> <p>All</p> <p>LC</p>	<p>Following DP meeting</p> <p>Following DP meeting</p>
	<p>Sean Finlayson, Youth Convenor – Presentation: Young people and positive mental health</p>	<ul style="list-style-type: none"> ◦ Background to Youth Convenor Role given. ◦ Trying to change people's perspectives on mental health issues which could improve young people's lives. Difficulty in young people accessing services highlighted. 		

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		<ul style="list-style-type: none"> ◦ SPEAK – ‘This is Me’ is the Highland wide voice of young people affected by, or passionate about, mental health issues. SPEAK is part of HUG (HUG is a collective advocacy group representing the interests of users of mental health services across the Highlands). ◦ £3,000 was won by local girls at school and they used this money to set up SPEAK. Groups have now been set up in Ullapool and Nairn. Wrist bands were designed and are available at the opticians in Nairn. ◦ Issue with patient notes not being transferred between services leaving the patient to go over everything again with each person. There is also an issue with confidentiality; information that is given to school guidance is then being passed onto others. ◦ SF sits on the board at Raigmore and the current transition is focussed on patients with additional support needs but nothing for children with mental health needs. <p>LP – The Child and Adolescent Mental Health Service (CAMHS) waiting list is so long, young patients are caught between CAMHS and the Phoenix centre. Small practical things can be very frightening when changing from child to adult services. The patient leaves child services at 16. If the patient is in education they will be picked up by adult services at 16 but if they are not in education they are not picked up until they are 18. There needs to be specific guidelines to make transition kinder to the patient. SF – CAMHS and SPEAK are starting discussions for better transition.</p> <p>JD – Older people with mental health issues can feel targeted by young people. SPEAK could visit local schools to raise awareness about mental health. This hasn’t happened yet, but Sean is working towards achieving this for Primary School children and older.</p>		
	<p>Margaret Kinsella, Mental Health and Wellbeing – Children and Families</p>	<p>For Highlands Children 4 (FHC4) is the Children’s Service Plan for the Care and Learning Service, and incorporates, as far as possible, the contribution of children’s services delivered by NHS Highland. The plan identifies outcomes for children and their families and improvement priorities for the next five years.</p> <ul style="list-style-type: none"> ◦ Human cost, emotional cost and actual cost to people in NHS, police etc that deal with the consequences of mental health. ◦ How we see things, what can be done as a community to make things better? What can be done as a partnership to make things better for young people? ◦ Mental Health and Wellbeing is something everyone can take part in. 		

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	General discussion	<p>JD then facilitated a general discussion on points arising from the presentations.</p> <ul style="list-style-type: none"> ◦ PC McKellaig gave an overview of the 'Staying Safe Online' presentations he gives to schools and the focus being taken on cyber bullying - particularly on social media and the negative impacts that e.g. Facebook can have on children's mental health and wellbeing. SM asked how to access the services of SPEAK. Action: SF to liaise direct with SM ◦ LP – Social skills issues and community withdrawal are common especially in schools. A healthcare worker went a walk with a young person and was saying hello to people they met. The young person couldn't understand why the healthcare worker was saying hello to people she didn't know. There are issues with communication and technology. Computers/tablets are constantly to hand and people feel they have to reply to texts straight away. People need to slow down and we need to promote 'mindfulness'. ◦ MB/KR – There is a huge stigma attached to mental health, and educating young people on mental health issues would help. The work that SF is doing is great. A massive amount of support is needed for people with mental health issues. Every person deserves to be valued and respected as a human being. All who come to the Aviemore Community Cafe are respected and treated as individuals. Older people could talk with younger people to make them aware what it is like to have mental health issues. There are opportunities here that the ACC would be happy to offer. ◦ GS - Mental health issues range from slight to severe. As a Partnership we are responsible for promoting the creation of small local groups and getting people doing things together (if that is what they want to do) and helping people maintain good mental health. Groups need to be encouraged and promoted especially in the more isolated areas. ◦ Young mums group meeting at the community cafe for example? How would we start this and what opportunities are there that can be taken? We need to build a sense of what we are doing and come back to the DP with the progress that is being made. ◦ AH – Those that have had issues could be good contacts/support for others with similar issues however they are reluctant to come forward due to the stigma surrounding mental health. A "group" for mental health patients isn't always the solution. There was an article in the Metro about a community that started 'Kind Gesture week'. A 'Kind Gesture' week initiative could be started in B&S. 	SF/SM	Following DP meeting

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		<ul style="list-style-type: none"> ◦ SF – You do not have to have mental health issues to join in with SPEAK and if you do, you do not need to disclose this information. People can also be involved even if they do not want to participate in group meetings. SF has found that young people do want to be involved with the groups and if they want to change something about their life they will attend the meetings. ◦ KM – Generations working together. <p>JD thanked everyone for the informative and very useful discussion on what is a vitally important and not often highlighted issue. The importance of ‘Mindfulness’ also highlighted. The DP can play a key role in this and other potential initiatives highlighted during the discussion. Action: JD undertook to take an overview of potential initiatives and to liaise with key partners. Report back to next DP.</p>	JD	Following DP meeting
6	Badenoch & Strathspey Healthcare Redesign Provision – update from NHS Highland	<p>MW updated on the B&S Healthcare Redesign process. The first initial document has been agreed, this was approved at the Asset Management Committee. The document was then tabled and approved by the NHS Board. It will now go to the Government Asset Management on 30th June for consideration and hopefully be approved. The layout of the building is being looked at first, with Clinical Services delivery second and thirdly the finance to form all parts of the new hospital. A project group has been established. Cllr. JD is part of this group and information produced locally will be fed back up the board.</p> <p>Action: Updates to be brought back to the District Partnership</p>	NHS	Ongoing
7	AOB	<ul style="list-style-type: none"> ◦ Update report on the Boleskine Care will be circulated with the action note. ◦ AH – Pilot is being started by RCOP on 13th August in the British Legion in Grantown. Friendly Food is a cookery programme for older men living on their own for the first time in years, or who are first time care givers. It encourages the men to cook for one another which will help create friendships along with providing cooking experience. Outcome is to have 4-6 men that can cook for themselves and that will have gained a in terms of support and friendships. ◦ Dying to Know Event – 5th October at the Cairngorm Hotel. Kate MacLean, Community Development Officer, Services for Older People is key contact. Action: Item to be picked up at next DP 	LC/LM	Next DP
9	Next District Partnership meeting	To be confirmed		