It’s what’s inside that counts .............

Kirkcaldy & Levenmouth CHP
I was very proud to have been elected as a Non Executive Director of NHS Fife in June 2010. This period of time has proven to be a severe learning curve with regard to understanding the various health needs of people living within Fife.

I and all my colleagues in Kirkcaldy and Levenmouth CHP are endeavouring to meet the needs of all our patients. To me there is a requirement to address the poverty affecting our children, the high unemployment and drug misuse, which has a serious affect within our part of Fife.

Working in partnership with all agencies to address these concerns will inform the children of today, the future parents of tomorrow, and make Fife a healthier place to live.

May I take this opportunity to wish you and your families a Happy Easter.

Harry Blyth
Vice Chair of Kirkcaldy & Levenmouth CHP
The Kirkcaldy & Levenmouth CHP Committee were shown a record book which was found at Stratheden hospital during a recent archiving exercise.

Bob McLean, General Manager, Mental Health Services explained that the book was the record of the meetings and business of the “District Board of Lunacy for Fife and Kinross Shires” commencing from 1857. The board had been established to commission and build Stratheden hospital and the records demonstrated that many of the issues that occupy our minds today were equally prominent in the late 19th century.

For example, the original cost of the first phase of the hospital was estimated at £13,500, but the eventual cost was double at £26,000. There was also reference in the minutes to debate over the lack of single rooms for patients.

The board was chaired for part of the time by the Earl of Rosslyn and the land on which Stratheden now sits was known as the “Lands of Retreat” and was purchased from a Mr Robert Wilson at a cost of £3,000.

It is planned to retain the record book on site and have it on display along with some other archive material within the medical library which is currently being relocated and refurbished.

Retirement

Jane Bayliss, Specialist Public Health Nurse, Addiction Services will be retiring on 31st March 2013 after 36 years in the National Health Service. Jane has worked for the last 7 years with Addiction Services at Cameron Hospital, Windygates. The CHP would like to wish Jane all the very best for her retirement.
Prevention and Management of excessive gestational weight gain: A survey of overweight and obese pregnant women

Anne Gibson, Dietitian, NHS Fife | Catherine Hankey and Wilma Leslie, University of Glasgow
Published 16.1.13 in BMC Pregnancy and Childbirth
http://www.biomedcentral.com/content/pdf/1471-2393-13-10.pdf

There are many published documents e.g. Maternal and Infant Nutrition Framework, giving guidance on the health risks maternal obesity brings to mother and baby, during pregnancy and in the future. NICE Public Health Guidance 11 (and the Scottish Perspective) suggests we should tailor services to the needs of an individual or group and identify and address individual barriers to change. It also suggests we combine advice on healthy eating and physical exercise, identify why women may find it difficult to lose weight and provide ongoing support over a sufficient period of time to allow for sustained lifestyle changes. It is also well documented that midwifery staff’s find it difficult to raise the issue of risk and weight management with patients, which may account for the lack of knowledge and motivation amongst women.

There are many papers offering guidance showing risk and what services should be considered to help but nothing found to suggest what the women themselves knew or would find beneficial so this study was designed to try to find out.

With the help of Clinical Effectiveness, a short tick box questionnaire was devised. All women who booked with a BMI above the healthy range (above BMI 25) were invited to complete a questionnaire asking if they had had any previous pregnancies, weight history from these pregnancies, how they felt about their current weight and any potential gestational weight gain. what would help in managing their weight and any potential barriers. A total of 428 completed questionnaires were obtained. Some of the results follow:

- 43% of 252 previously pregnant women had not lost the weight gained before
- Of these, 19% (49) were comfortable with their weight gain and retention, even though most (39) were already classified as obese
- Only 57 of the 428 women were really concerned about weight gain in this pregnancy
- 47% expected to gain some weight but had some concerns about this

It was interesting that women said physical activity was of more interest to them. Was this seen as an easier option than trying to change eating patterns? Many complain of tiredness and excessive joint, back and pelvic pain which limits their activity so is increasing activity a realistic option? Evidence shows that focusing solely on increasing physical activity has little effect on minimising gestational weight gain and that reduced activity will continue for at least 6 months post partum.

Barriers included getting time off work, other children to look after, too shy to go into new situation and cost of travel. Participants stated that they would be more likely to attend groups or clinics near home and out-of-hours. There were no particular differences noted in women living in different SIMD deciles. Conclusions of this study –

- Weight management should be included in all routine antenatal care
- Many already obese women are unconcerned about potential gestational weight gain
- Apparent lack of knowledge about health risks
- Perception that increasing activity is easier than changing dietary intake
- Numerous barriers to be addressed - NHS staff's and women themselves

This represents a short summary of the full study. The full published paper can be viewed as referenced above.
The Hub is a sexual health drop-in for 12-25 year olds. It does not only provide free confidential advice on sexual health issues, including condom provision and pregnancy testing, but information/advice on all health issues affecting young people, i.e. relationships, sexuality, alcohol, smoking and Mental Health. In addition The Hub can signpost young people to other relevant agencies.

The Hub aims to empower young people to make positive choices about their health and in particular their sexual health.

The Hubs are 2 hour drop-in sessions; so no appointments are necessary. The Hubs are facilitated by trained Health Improvement Nurses who are approachable and young person centred.

To find out where your nearest Hub is and for more information about The Hub, please visit The Hub website: www.thehubfife.org.uk

Staff Briefing Sessions

It is intended to hold four CHP Management Team/Staff Side Briefing Sessions in April/May 2013 to which all CHP staff are invited.

**Cameron Hospital**
Ivy Room, Training Centre, Ward 7
Friday 19th April 2013 at 2:00pm

**Whyteman’s Brae Hospital**
Gymnasium
Wednesday 24th April 2013 at 2:00 pm

**Queen Margaret Hospital**
Forthview Day Hospital
Wednesday 1st May 2013 at 2:00 pm

**Stratheden Hospital**
Seminar Room 4
Mental Health Quality Improvement
Friday 10th May 2013 at 2:00 pm
As you will be aware, NHS Fife is currently replacing the current paper-based incident reporting system with one based around the electronic incident reporting system called DatixWeb.

This is being taken forward as a formal NHS Fife e-Health Project and is being managed by members of the NHS Fife Risk Management Team in collaboration with staff from the CHP. The following areas have become ‘live’ in the CHP over the last couple of months:

- Mental Health Services
- Addiction Service
- Older People Inpatient Services

Incidents submitted to DatixWeb are subject to a 2-stage process whereby they are reviewed by the line manager with immediate responsibility for the area in which the incident occurred and then given final approval by another, more senior manager.

For example, reviewers could be staff such as Charge Nurses, Chargehands or Team Leaders. Reviewers for DatixWeb will almost always be the person who is already completing the manager sign-off section of the current paper form. Approvers could be Clinical Nurse Managers, Heads of Service or Department Managers.

**Reviewers will:**
- Receive newly submitted incident reports
- Check the content and completeness of each report – following-up on gaps where necessary
- Check the grading of the incident
- Initiate investigations where appropriate
- Send the incident for final approval

**Approvers will:**
- Receive reviewed incident reports
- Check that investigations have been satisfactorily completed
- Approve the incident into the main Datix database

The Heads of Service within the CHP have been contacted to identify who their Reviewers and Approvers will be for their service and these are currently being prepared on the system by members of our Clinical Governance Team.

The deadline for completion of this work is 30th April 2013. After this date there should be no paper-based incident report forms being completed. For more information please do not hesitate to contact:

- Julie O’Neill Ext. 46729/email julieoneill@nhs.net
- Sharlyn Dobbie Ext. 46793/email sharlyn.dobbie@nhs.net
On a similar subject of “Keeping up the Pace” Jane Phillips, a patient within the Balcurvie Ward at Cameron Hospital celebrated her 103rd birthday on Wednesday 13th March 2013. Flowers were presented by the Staff and Alastair Robertson, Kirkcaldy and Levenmouth CHP Chair.

The NHS Fife Musculoskeletal Physiotherapy Service has been undergoing a period of integration and redesign for some time now. In the coming weeks one of the major changes for Service referrers will be taking place. This will involve the activation of TIARA software within the CHP which will be coordinated from a Hub within Victoria Hospital, Kirkcaldy.

All referrals for the Kirkcaldy & Levenmouth area will be submitted centrally to the Hub before being allocated their initial assessment appointment at one of the nine venues in the Hub’s catchment area.

For patients this represents an improved service whereby they will be offered the shortest waiting time in the area if they are prepared to travel to that venue. For staff this represents less daily administration time as initial appointments will be arranged by administration staff and monthly statistics will be generated automatically by the software system.

Communication will be sent out to Practice Managers in due course, meantime if you would like to find out more information then please do not hesitate to contact

Mhairi Leslie Ext. 23944 or Fiona Cameron Ext. 27916

Celebration of a 103rd Birthday

Jane Phillips
As a result of the HAI Mock Audit Programme within the CHP one of the areas which has been identified is access to Infection Control Training. Therefore the CHP Clinical Governance Team has in conjunction with our Infection Control Nurse developed a programme for the following year. **Drop in Session - No Need to Book**

### Standard Infection Control & Antimicrobial Stewardship

<table>
<thead>
<tr>
<th>Time of Session</th>
<th>19.04.13</th>
<th>30.04.13</th>
<th>14.05.13</th>
<th>30.05.13</th>
<th>11.06.13</th>
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</thead>
<tbody>
<tr>
<td><strong>Medical, Nursing, AHP</strong> (Registered/Unregistered)</td>
<td>1.00 - 2.00pm</td>
<td>Training Room 1 Ward 7 Cameron Hospital</td>
<td>Lecture Hall Playfield Institute Stratheden</td>
<td>Pentland Ward WBH</td>
<td>Meeting Room 1 Cameron House Cameron Hospital</td>
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<tr>
<td><strong>Admin &amp; Clerical</strong></td>
<td>2.15 - 3.15pm</td>
<td>Lecture Hall Playfield Institute Stratheden</td>
<td>Pentland Ward WBH</td>
<td>Lecture Hall 2 Education Centre QMH</td>
<td>Clinical Training Area Cameron Hospital</td>
</tr>
<tr>
<td><strong>Community Staff</strong> (Registered/Unregistered)</td>
<td>3.30 - 4.30pm</td>
<td>Lecture Hall Playfield Institute Stratheden</td>
<td>Pentland Ward WBH</td>
<td>Lecture Hall 2 Education Centre QMH</td>
<td>Clinical Training Area Cameron Hospital</td>
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### Outbreak Management

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<tr>
<th>Time of Session</th>
<th>02.09.13</th>
<th>24.09.13</th>
<th>30.09.13</th>
<th>15.10.13</th>
<th>17.10.13</th>
<th>22.10.13</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ALL STAFF</strong> (clinical and non-clinical)</td>
<td>1.00 - 2.00pm</td>
<td>Staff Club VHk</td>
<td>Meeting Room 1 Phase 1 QMH</td>
<td>Training Room 1 Ward 7 Cameron Hospital</td>
<td>Lecture Hall Playfield Institute Stratheden</td>
<td>Pentland Ward WBH</td>
</tr>
</tbody>
</table>

If you require any further information please contact Margaret Selbie on ext 28563 or by email margaret.selbie@nhs.net or Julie O'Neiil on ext 46739 or by email julieoneill@nhs.net.
Family Nurse Partnership (FNP)

Family Nurse Partnership (FNP) is an evidenced based licensed programme that works with young parents aged 19 and under expecting their first baby.

FNP is an intensive programme that starts ideally before the client is 16 weeks pregnant (and has to be started before the client is 28 weeks) and continues until the child is two years. The client receives 14 visits in pregnancy and 50 visits in infancy and toddlerhood. The programme uses a range of approaches based on Attachment, Self-efficacy and ecology theories and is a manualised programme that is tailored to the needs of the client. FNP aims to improve maternal and child health, help children to be ready to learn when they reach school and encourage parents to become economically self-sufficient by gaining meaningful employment or retuning to education.

FNP uses a relational style to build a therapeutic relationship with the clients. This is further supported by FNP’s strength based approach that acknowledges the skills and attributes that parents have that can make a difference to their baby. FNP starts from the premise that clients can achieve and focuses on the client’s natural desire to do the best for their child.

To enable the Family Nurses to work with this approach they undergo an intensive initial training programme that is continued within the team, facilitated by the Supervisor on an on-going basis.

In Fife we have been testing the FNP programme since August 2012 and have a team of 1 Supervisor and 6 Family Nurses. Recruitment onto the programme has been brisk since the start thanks in the main to the referral pathway established in partnership with midwifery and to support from other services, for example The HUB (sexual health service for 12-25 years) and our partner agencies.

Our clients are recruited from the whole of Fife and the programme is delivered by the same Family Nurse as long as the client remains within Fife. If they move to another area that offers FNP they may continue with the programme if that site has a space for them.

We are delighted with the progress that we have made in Fife and know this will continue.

Here’s what our clients have said so far……………..

“I love it when you come to visit ‘cause I feel like somebody’s actually listening.”

“All the information is in the books but it doesn’t really make sense until someone talks it through. My family nurse helps me with this.”

“I love learning about how I can help my baby to grow…….who knew that I can help to build my baby’s brain even before it’s born!”

“It’s great having the same person to speak to as I don’t need to tell my story again and again.”

“My Family Nurse gave me confidence to ask questions I would never have asked before. I really feel like I know what is happening now.”

For further information, please contact; Lesley O’Donnell Family Nurse Supervisor, Tel. 01383 674097 lesleyodonnell@nhs.net
Through consultation with young people it was identified that there is a need for input from Health services to engage with young people regarding access to sexual health advice, support and treatment and to develop services in this area. Liaison with Sexual Health Services Fife reveals that Young People do not access mainstream services.

With this evidence in mind, the Headmaster and senior guidance staff at Kirkcaldy High School were approached by the School Health Team to offer a sexual health drop-in service within the school. The proposal was that this service would offer support and advice, signposting to other services, pregnancy testing and condom distribution. Following talks with senior education management it was agreed that a pilot project be developed and evaluated over the course of a school year.

The Kirkcaldy High School Sexual Health Drop-In service is situated within Kirkcaldy High School. Its current hours of operation are Fridays 12.45pm – 1.50pm. It provides a confidential service to support young people with their sexual health and to provide support, advice and signposting. Condoms are available as is pregnancy testing.

The Sexual Health Drop-In has been running since August 2012

A total of 165 consultations have taken place. An evaluation will be developed at the end of the current school year.

The full report is available from v.reid@nhs.net and was presented by Derek Allan, Rector KHS to the Health Committee at Scottish Parliament on 19th February 2013. This can be viewed by visiting:

http://www.bbc.co.uk/democracylive/scotland-21506424
Podiatry Service
Electronic Patient Booking System

Across Fife the Podiatry Service is implementing an electronic patient booking system called TIARA. 6 members of staff initially undertook extensive training to learn about the system, how to build the diaries and integrate all necessary documentation. As with many things this turned out to be a bigger job than expected! Prior to any site “going live” the huge task of registering all existing podiatry patients was undertaken. Administration staff from within and out with the service along with podiatrists worked extremely hard to achieve this.

Adamson was used as a test site to highlight and rectify any problems with the initial build. There then began a staged implementation programme, starting with single practitioner clinics which makes the process a little more straightforward.

Currently all podiatry clinics in NEF & DWF CHPs are live and within this CHP Glenwood, Cardenden, Markinch, Kennoway, and Leven clinics are live.

The goal is to have all clinics and staff up and running by the end of March and this target is still very much achievable.

TIARA will always be an ongoing project; changes to the diaries will be the biggest part of the continuing workload along with alterations and updates to associated documents.

The next challenge will be the introduction of electronic patient records and the podiatry IT strategy group has commenced this work.

Additionally TIARA can facilitate automated text/call reminders for appointments and this will soon be piloted in the Paediatric Service.

Lisa McPhee,
Podiatry, Personal Secretary
Sir George Sharp Unit Welcomes Visit From Australian Colleague

Feife Rehabilitation Service (FRS) recently had the pleasure of a visit to the unit by Dr Christopher Poulos a Lead Consultant in Rehabilitation Medicine in Australia.

Dr Chris Poulos is the Hammond Chair of Positive Aging and Care at the University of New South Wales. He has previously directed rehabilitation and aged care services in the Sydney and Illawarra regions for a number of years, across both hospital and community settings. Dr Poulos is also the current President of the Australasian Faculty of Rehabilitation Medicine (AFRM). Dr Poulos had heard about FRS through the CARF accreditation system.

Following his visit Dr Poulos commented, “You are doing really great work and it is all about getting the word out and I can honestly say that we sought you out because of the leading work you are doing in quality and accreditation and we are planning to emulate that in Australia. The fact that you have voluntarily undertaken a programme like CARF within the constraints of the NHS is even better.” FRS has been CARF accredited since 2003 achieving the maximum 3 year accreditation on four occasions for the inpatient programme.

Dr Lance Sloan, Consultant in Charge of FRS said, “It was a great pleasure to welcome Chris to the unit and to be able to discuss the challenges of rehabilitation in our respective health systems. Chris has a wealth of experience from his work in Australia and it is his aim to seek CARF accreditation for his service in due course and we are happy to assist where possible. It is our intention to keep in touch and liaise to the benefit of both our services.”

Articles for the next newsletter should be emailed to:

brendaward1@nhs.net

Or sent via the Internal Mail to:

Brenda Ward
Corporate Services Admin.
Cameron House