

The Scottish Rural Medicine Collaborative BULLETIN



DECEMBER 2020

Welcome to the December issue of the Scottish Rural Medicine Collaborative's newsletter.

This month's *Bulletin* is very much an interim publication and is intended to keep you up to date on the collaborative's activities during what has been a difficult and unusual time

for us all. Our hope is to issue a more comprehensive newsletter early in the New Year, probably in February.

In the meantime, everyone at the SRMC hopes you have as good a festive period as circumstances allow.

Board to get briefing on SRMC's many projects

WORKING with key stakeholders, the Scottish Rural Medicine Collaborative plays a key role in supporting the recruitment and retention of rural GPs.

But exactly how does it do that?

Although Covid-19 has put the brakes on some of its work, the collaborative has remained active during the pandemic, as members of its programme board were shown at their most recent 'virtual' meeting, on 17th December.

A presentation for the board showed the progress made with the collaborative's many projects, some of which have been continuing despite the pandemic, some of which have to some extent been affected by the Covid-19 restrictions and some it's planned to tackle by the beginning of summer 2021, when contributors will have fewer coronavirus commitments.

Included in the "business as usual" category are work on the SRMC's website (see Page 4) and on the GP training pathway, which provides information on the training required to become a general practitioner.

Works in progress...

Work is also ongoing on developing web-based resources to help practices recruit GPs and to help prepare for recurring recruitment and education events.

In addition, the SRMC's project team is working on initiatives to identify and make use of statistical data about GPs, and on supporting the development of GP wellbeing.

The team also has a significant body of work that can be tackled during the Covid-19 restrictions period,

while recognising that pandemic-related work takes priority.

Included in this tranche of work are 'Reflect and Rejuvenate', an initiative which seeks to give general practitioners a different perspective to help them reflect on their work; a marketing plan for the 2021 Rural Fellowship programme; developing guidelines for establishing GP peer-to-peer support; and producing PHEC

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New senior responsible officer set to take over

THE New Year will see the Scottish Rural Medicine Collaborative welcome a new person at the top.

As the last issue of *Bulletin* reported, Ralph Roberts is to stand aside as the collaborative's senior responsible officer in the spring and will be succeeded by Pamela Dudek (pictured left), the chief execu-

tive of NHS Highland.

She and Ralph – who is taking on new responsibilities with NHS Chief Executives of Scotland – have been working together to ensure a smooth transition.

Mrs Dudek joined NHS Highland as deputy CEO in April and started as chief executive on 5th October.

Setting new standards for rural general practice

WORK is under way on various initiatives aimed at meeting the growing demand for rural general practice to be regarded as a specialty in its own right.

And the Scottish Rural Medicine Collaborative is very much at the heart of much of it.

The General Medical Council is in the process of introducing a framework for GMC-regulated credentials for doctors. These credentials will be focused on particular areas of practice – including remote and rural – where consistent clinical standards that are recognised throughout the UK are felt necessary to support improved patient care.

Professor Alan Denison, Dean of Postgraduate Medicine, NHS Education for Scotland, represents NES on the SRMC's programme board, has been working on the credential in remote and rural health (the other four early adopters are interventional neuroradiology, pain medicine, cosmetic surgery and liaison psychiatry).

Key to the new credential is the fact that remote and rural communities have a low population density at significant distance from the nearest hospital and an acknowledgement that it is important to provide suitable care close to a patient's home. With a lack of support and framework to address training needs and service requirements; with patient safety and recruitment and retention issues and with small rural hospitals staffed by non-consultant grade staff, typically GPs, it's

felt there is a clear need for a rural credential.

Another important body of work in which the SRMC has been involved is the development of a rural advanced practitioner pathway. The collaborative has co-funded the initiative, along with the Remote and Rural Healthcare Educational Alliance (RRHEAL). The aim is to develop a new standard, accessible and affordable multi-disciplinary rural advanced practitioner training pathway.

Claire Savage, a project officer/researcher with NHS Highland, has been seconded to work on the three-phase programme of work which, it is hoped, will be completed by next spring.

A third workstream tackling this subject is being developed by the Faculty of Remote Rural and Humanitarian Healthcare, which was formally

launched in 2018 by the Royal College of Surgeons in Edinburgh.

The faculty was set up in response to the need to set standards of competence for organisations, as well as both medical and non-medical personnel, delivering healthcare in remote and rural settings.

Now, what is known as a capabilities framework is being drawn up to set out the scope and practice of those personnel working in these communities.

Martine Scott, the collaborative's programme manager, said: "Each of these initiatives underline the unique nature of remote and rural medicine, and we in the collaborative will be doing whatever we can to support them. I look forward to charting their progress through future issues of the SRMC's *Bulletin*."

Board briefing on SRMC's projects

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clinical guidelines and protocols to be applied nationally.

Among the projects that are likely to be started in the summer are developing web-based resources to help recruit MDT staff; an initiative to support the development of the NHS Highland process for medical electives; and developing ways to gather information from GPs who have left the service.

Dr Charlie Siderfin, the SRMC's clinical lead, said: "We knew when the collaborative was established that we were facing a massive challenge but it seems that the more we do the more we have to do. However, I am satisfied that we are making a significant difference to the primary care landscape in Scotland and look forward to seeing more of our projects come to fruition."

Collaborative gears up for RCGP conference

We'll be there ... virtually, of course

ATTENDING conferences and other key events has always been important to the Scottish Rural Medicine Collaborative.

And that continues to be the case in these days of 'virtual' events, such as the conference to be held by the Royal College of General Practitioners on 11th and 12th February 2021.

The pandemic meant that the 2020 RCGP annual conference in Glasgow in October did not take place and the February conference has been organised as an interim event until the scheduled, physical conference can take place in Liverpool in October 2021.

Tagged 'A Fresh Approach to General Practice', the online conference will provide RCGP members and other primary healthcare professionals an opportunity to join together to understand how general practice developing and how best to adapt to changes.

It will feature healthcare leaders and experts, continuing professional development sessions and, crucially to the work of the SRMC, networking opportunities.

The SRMC anticipates it will be participating in the remote event under the Scotland Is Now brand, as it did in 2019, and the collaborative is working with the Scottish Government in developing the stand and promotional materials, shaping the team and presenting at the event.

The collaborative has good experience of participating in such online events, having had a presence at the World Extreme Medicine Conference on 17th and 18th October.

It attracted more than 700 people from all over the world and the SRMC was among the nine virtual exhibitors.

The collaborative produced a [video](#) which people saw when they visited its virtual booth.

Although the event was for people working in, or interested in, extreme

medicine rather than specifically general practice, it proved to be a good learning experience for the SRMC and it had meaningful contact with 26 people.

Royal college co-chair role for member of SRMC board

A MEMBER of the Scottish Rural Medicine Collaborative's programme board has been named co-chair elect of the Royal College of General Practitioners' Scottish Council.

Dr Chris Williams, a GP at the Grantown on Spey Medical Practice, will take over as joint chair in January, succeeding Dr Carey Lunan. He will share the post with Tayside general practitioner Dr David Shackles.

Dr Lunan explained in a recent post that having co-chairs was a model that worked well for the RCGP's Welsh Council, in that it offered the benefit of greatly extending the experience and skills brought to the role, as well as providing resilience and sustainability.

Currently the Scottish Council's clinical lead for IT and chair of its North of Scotland Facility, Dr Williams has served as a GP in the Highlands for nine years and will bring to his role expertise and experience in digital healthcare – as well as in his particular interest in remote and



rural healthcare, something which has served the SRMC well since he joined the programme board.

His co-chair elect, Dr David Shackles, is the RCGP Scotland's executive officer for interface and out of hours.

He has worked as a GP in Tayside for 26 years and has particular experience and expertise in education, training and interface.

The RCGP Scotland's top team will be augmented by Dr Catriona Morton, a GP partner in Craigmillar, Edinburgh, who has been named deputy chair (policy).

Martine Scott, the SRMC's programme manager, said: "Chris has fulfilled a valuable role on our programme board and I'm looking forward to continuing to work with him both on the collaborative and in his new role. Everyone at the SRMC congratulates him on his appointment."

New developments in SRMC's 'shop window'

Timeline added to improved website

THE pandemic may have put the brakes on some of the Scottish Rural Medicine Collaborative's work but it has provided the project team with the opportunity to develop the SRMC's [website](#).

One of the most striking innovations on the site is a [timeline](#) developed by project manager Ian Blair which charts key milestones both in the collaborative's short history and in remote and rural healthcare in Scotland, beginning with the publication of the Dewar Report by the Highlands and Islands Medical Service Committee in 1912.

Ian said: "The timeline is very much a 'live' resource which we intend to keep updated. The idea is to chart significant developments in the primary care landscape in Scotland, so helping to put the work of the SRMC in context."

Another significant new develop-



ment is the reworking of the website's 'About Us' section, which outlines the collaborative's objectives, explains how the SRMC goes about its work and summarises some of its key achievements.

Ian added: "We know how important our website is to us; as I have said before, it's the collaborative's shop window and we believe that it is an important resource in primary care recruitment and retention.

"We'll continue to develop and improve it and, as ever, we welcome feedback on it."

Fond farewell to member of project team

A VALUED member of the Scottish Rural Medicine Collaborative's project team has moved on.

Shirley Feaks, who joined the team as a project manager in April 2019, has rejoined the staff of Moray Council, where she previously worked in health and social care.

Shirley came to the SRMC with experience in data management and IT training, and worked in setting up the collaborative's internal systems.

She provided important marketing support on the rural fellowships scheme promoted by NHS Education for Scotland and also supported work with a number of partner organisations on helping young people on their pathway to a medical career.

In addition, she was involved in helping to formulate a role for the SRMC in the wellbeing of general practitioners in remote and rural practices, and helped to collate useful statistical information for the collaborative.

The collaborative's senior responsible officer, Ralph Roberts, said: "Shirley was a great driving force in the team – even 'virtually', as things tend to be these days – and played a key part in developing the collaborative.

"She will be missed and we wish her well in her new job."



The home page of the SRMC's ever-improving website