

In this issue:

- ▶ 01 Foreword
- ▶ 02 Shetland Trainee Stories
- ▶ 03 New Teaching Feedback Tool
- ▶ 04 Deanery Website Trainee Courses and Events Section
- ▶ 05 A Focus Group Study of Health and Care Safety Investigators
- ▶ 06 NES Bereavement Virtual Annual Conference
- ▶ 07 2022 iMatter survey for Doctors and Dentists in Training and Clinical Fellows
- ▶ 08 Health Literacy Month
- ▶ 09 Easier access to research, evidence and practice support materials
- ▶ 10 NES Websites

Welcome to the October edition of your Deanery newsletter.

As Autumn is drawing in and the nights and mornings are getting darker it is even more important to ensure you get a break in the daylight regularly through the week. For those of you new to Scotland the trade off of the beautiful long summer days, are cosy dark winter evenings!



Dr Emma Watson
Executive Medical Director, NHS
Education for Scotland

It was fantastic to hear the North Deanery were number one in the UK for FY1 as assessed by the GMC NTS, we are going to be looking for good practice to share across the whole of the country to ensure all Scotland's regions are in the top 5! A huge thank you to all of the multidisciplinary teams who have worked hard to deliver this great result.

Staying in the North Region, we start our newsletter with three trainees and a lead trainer sharing their experiences of living and learning in Shetland, my favourite quote "the learning experience was really what made me not want to leave" had to wrestle with the image of seeing seals on the beach on the way to Tesco ! Well done Dr Wilson and the team in the Gilbert Bain, NHS Shetland.

Thank you to Aoife Duignan (ST4 Geriatric Medicine) and Mathew Lyons (CT2 Anaesthetics) who have shared information on MeFB (**Medical FeedBack**, [medicalfeedback.org](https://www.medicalfeedback.org)) is a free, online tool that has been developed for health professionals to collect feedback after teaching.

Since its launch in 2019, MeFB has become extremely popular with over 1200 users across the country, have a look it may help you evidence your teaching sessions.

We then highlight the Courses and Events section of the Deanery website which has details of upcoming events across all specialties which may well be of interest to readers. After this we look at a Health and Care Safety Investigators study which explores previous training, ongoing experiences and learning needs of staff who conduct investigations and learning reviews in Scotland's health and social care systems. This study arrived at some clear recommendations - read the article to find out more.

Registrations are now open for the NES Bereavement Virtual Annual Conference which is on Thursday 24 November 2022. This is a free one-day virtual event which will be opened by Professor Jason Leitch (National Clinical Director, Scottish Government) and promises to be an informative, thought provoking day.

[Continued...](#)

01 FOREWORD

The 2022 iMatter survey for Doctors and Dentists in Training and Clinical Fellows has now launched. Depending on your Health Board, you'll be asked to complete the survey at different times which are listed in the article. The information you feed in is used locally to improve the environments in which you all work.

Health Literacy Week occurs in October. To raise awareness of Health Literacy we are planning a webinar on Tuesday 25 October 2022 at 1:30 - 2:30pm. You can book a place on Turas Learn. You will need a Turas login to book. If you don't have a Turas account you can register here.

As part of you said we did to reduce the numbers of log ins required rom Tuesday 27th September 2022 NHS Scotland staff can sign-in to OpenAthens using their NHS Scotland work email address and password.

Please remember taking breaks is an essential part of your working day, if you are struggling to get breaks raise this with your team, your clinical or educational supervisor or one of the managers in your area.

Poll

Do you know if your workplace has a “speak up Guardian” ? Please reply here: [Speak Up Guardian Poll](#)



Dr Emma Watson
Executive Medical Director, NHS
Education for Scotland

Shetland – the land of cool beauty and the people with the warmest hearts.

NHS Shetland – Make Shetland your next career move. Rise to the challenge and enjoy the opportunity to join NHS Shetland. Becoming an “Island Medic” is a job like no other. Not only will you get a chance to work in one of the UK’s most rugged and beautiful communities, you will get the opportunity to work in a busy healthcare environment where true “generalism” is practiced on a day to day basis.



The Gilbert Bain is a busy Remote and Rural Island hospital providing healthcare to its 22,000 inhabitants as well as visitors and North Sea workers. There is an A&E department, medical and surgical wards, a two bedded critical care area as well as a 6 bedded consultant led maternity unit. The work is varied and trainees are exposed to a breadth of emergency and elective medical presentations under the supervising eye of the consultant in charge.

There are a number of training opportunities available on Shetland - Foundation Years 1 and 2, Core Surgical Training, Internal Medical Training as well as Rural Tract GP training schemes. Rotas are designed to meet each trainee’s curricular requirements and are working time compliant.

Shetland training posts are often found in the top 2% of all Scotland training posts with supervision and work life balance quoted as key benefits of living and working in Shetland. Trainees enjoy the varied work and the ability to provide continuity of care to their patients from admission to discharge.

Whether you plan to become a GP or a hospital specialist, undertaking a remote and rural job brings real personal and career benefits - you will get to practise medicine in a place where you have to rely on your clinical acumen rather than tests, you get to know your patients and gain a real understanding that healthcare sits at the heart of the community. Outside work, Shetland is a wonderful place to live with 1,679 miles of coastline and many beautiful unspoiled beaches. Shetland is a great place for a real adventure – an archipelago primed for hiking, active adventures and wild swimming. If you are interested in finding out more about remote and rural medicine please do get in touch: pauline.wilson2@nhs.scot.

Trainee Stories

My name is Stanislava Ivanova and I have completed my Internal Medicine Stage One Training in the North of Scotland Deanery. I would love to tell you about my fantastic experience during my six-months rotation in Shetland.

[Continued...](#)

02 SHETLAND TRAINEE STORIES

Going to Shetland was the best thing that has ever happened to me in my career so far. It was an amazing opportunity for my career development, has helped me grow not only as a clinician but also helped my personal development and overall is definitely the best time I have had in my three years of Internal Medical Training.

I am embarrassed to admit that I had my doubts about my allocation for the six-month rotation in Shetland as an IMT3. I was worried about relocation, travelling expenses, opportunities to improve my clinical portfolio, passing my PACES exam and ultimately going to an island I know very little of. In a hindsight, all of these worries now seem silly and this is why I really cannot emphasise enough that Shetland has a lot to offer and will be an invaluable experience for any medical doctor!

Dr Wilson has been my educational supervisor for my IMT3 year and was very kind to meet me in advance and help put my worries to rest. Looking back, I feel my anxiety was completely unfounded and

this is why I want to tell you all about my fantastic experience in Shetland:

Fearing the unknown, maybe wondering if you will manage with the local lingo, or wondering if you will find a circle of friends?

Shetland is the most welcoming place I have ever been to! People from the island are very friendly and the hospital team is the best team I have had the honour to be part of! The doctors and nurses in Gilbert Bain Hospital embody the true meaning of team spirit. They are very supportive and welcoming! Everyone makes friends quickly and in no time you will be invited to home gatherings, team building events and fun adventures with your new friends around Shetland. I have been so welcomed in this team that by the second month there they started to feel more like family than just colleagues.

Shetland is very beautiful place with lots to offer to everyone. From lovely walks amongst amazing scenery and rich wild life (you can see seals at the beach on your way to Tesco!)

or sailing trips and observing the wonderful bird life (the fun puffins and gannets) to the beauty of Aurora borealis and the most amazing sunrises and sunsets. You can do a lot of hill climbing, sea swimming – yes, even I, a Bulgarian ventured into this! As for the food – Shetland does not disappoint! The best fish and chips and fantastic local desserts are some of the many treats you will discover in Shetland. There may not be the widest variety of restaurants, but certainly they are of great quality. What I found absolutely amazing was also the hospital canteen food – simply delicious and very well priced.

The Accommodation

You will love your wee flat just next to the Sletts - a natural rock platform has been cut and shaped by the sea to create a natural pier or jetty on the shore of Brei Wick in Lerwick. The flats are comfortable, warm, you get a cleaning service, and they are just across the street from Gilbert Bain Hospital and within walking distance of the town and shops.

[Continued...](#)

Travelling

The ferry is very reliable and offers a fantastic service on board. You can take your car (very useful if you want to explore the more remote sites of the island). Flying is also an option and you will really enjoy the beautiful views from up above. There is a travelling expenses budget that is very reasonable and will cover your visiting trips to the mainland. The actual medical experience is simply invaluable!

I came to Shetland as an IMT3 trainee – it was my very first rotation as a medical registrar! The team was very supportive to help me develop my skills in this new role and develop independence in my clinical practice. I have been able to lead my own clinics (registrar-led clinics), all of the consultants are very encouraging and help you improve your medical knowledge and skills and enhance your portfolio.

By the end of my rotation, I had managed to complete pretty much all the requirements of the IMT3 portfolio curriculum!

This shows the level of support and help I have had with my personal development. Dr Wilson is an amazing mentor and the best educational supervisor I could have ever wished for!

I am personally interested in cardiology so I was very well supported by the Gilbert Bain hospital team to get more exposure relevant to my pursuit of a career in cardiology field. Dr Amorgianos and Sean Thuis, cardiac physiologist, and their team were very supportive and there I have managed to run my own cardiology clinic lists, do some echocardiogram scans and implant a reveal device. It was an invaluable experience! This is a great example of how the team tries to support you in your career development.

Island medicine is unique and offers you exposure to challenging medical scenarios. You will improve your skills in the general acute take and will leave the island with a much improved medical knowledge as well as organisational and team-working skills. To give you some examples - I have been involved in the management of shocked

patients, polytrauma patients, patients with life-threatening asthma attacks requiring intubation and island evacuation, arrhythmia cases and I have thrombolysed patients with acute STEMI. I am very grateful to have been given the opportunity to rotate to Shetland as it has tremendously improved my clinical practice!

Passing membership exams is a worry for any doctor facing PACES. I have been extremely lucky to rotate to Shetland as the team there were very helpful with my practice preparation, and particularly Dr David Fryer, to whom I will be forever grateful for all the time and support he given me!

Shetland has been fantastic for my professional development – this rotation helped me develop not only my medical skills but also my soft skills and become really independent with my clinical practice. In conclusion, I cannot recommend enough having a Shetland rotation as an IMT3 trainee! This rotation has been not only a fantastic experience for my career, but

[Continued...](#)

02 SHETLAND TRAINEE STORIES

also gave me the opportunity to work with an amazing team of people and enjoy the beauty and wonderful wildlife of one of the most amazing destinations in the world!

Stanislava Ivanova, IMT3

I am an ST6 in Acute and General Medicine in the North Deanery, and had an eight week placement in Shetland in July and August 2022. I chose to go to Shetland as my training programme includes an interest in remote and rural medicine, and I wanted to gain more experience of working in this environment.

It was an excellent training opportunity, as I was exposed to a very wide range of presentations in the A+E. There was an emphasis on managing patients as an outpatient where possible, and making decisions around this was challenging and rewarding. For one day per week I was first on call for Medicine for 24 hours. This experience, with calls at home and through the night, was a great opportunity to get used to this pattern of working under the supervision of the on call Consultant.

Outside the Hospital my family and I had a brilliant time exploring Shetland, and were made to feel really at home by everyone in the community. Altogether it was a brilliant summer!

Hamish Myers, ST6 in Acute Medicine in Highland

As an internal medical trainee having done no general practice or emergency department work, I had been spoiled by the luxury of always having a senior filter in the decision making process especially with discharges. So having to be the senior on call for the whole hospital, initially seemed a daunting task. But from the moment I landed on the runway strip that allowed for normal cars to drive over, with views that would beggar belief even in Tolkien's world, I knew I was in for a treat. Not only were the staff extremely warm and welcoming, everyone you met from the local pubs to the leisure centre were keen to host you and show everyone a good time. The learning experience was really what made me not want to leave. In one weekend, I was the

lead to thrombolysed a pulmonary embolism, MI and an ischaemic stroke. Even though it is small population, it has a large sea based out reach (summer time cruise ships, off shore oil and gas workers etc), which added to the variety of cases I'd managed to come across - from complex neurology to congenital paediatrics; extremely unpredictable, extremely interesting.

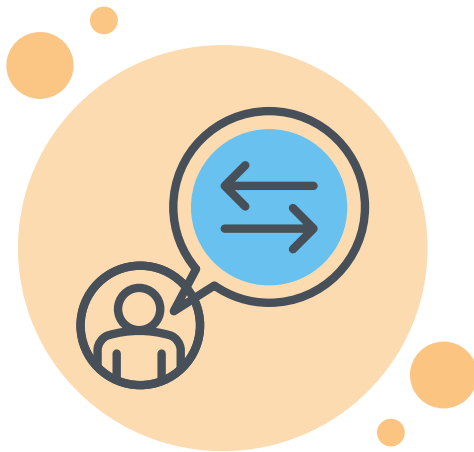
The consultants and other health care staff are very supportive and are easy to contact at all hours of the day, so you're never left alone to feel out of your depth. They also live in close proximity to the hospital which makes on site support also a straight forward option. In hindsight the biggest gain I've had from 6 months in Shetland is confidence. I've become more self assured with decision making and more comfortable in making diagnoses based on clinical presentation. I'd highly recommend working in Gilbert Bain Hospital and looking forward to the next time I'll be there.

Sarathy IMY3

03 NEW TEACHING FEEDBACK TOOL

MeFB (Medical FeedBack, medicalfeedback.org) is a free, online tool that has been developed by two Edinburgh trainees for health professionals to collect feedback after teaching.

Trainees are required to evidence teaching activities in their portfolios and at interviews.



Traditionally, feedback for teaching is collected on paper forms, requiring the tutor to produce, print, distribute and collate forms for each teaching event. This results in feedback forms going missing or feedback not being collected at all.

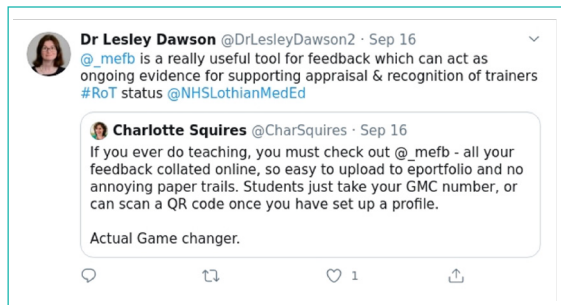
MeFB solves all of these issues. Tutors simply register once with the site for free*. When they teach, they ask learners to visit medicalfeedback.org and fill in the short feedback form on the spot. The site collates and analyses the feedback and produces a summary certificate for the tutor to include in their portfolio. There is no requirement for learners to register with the site.

MeFB has pre-made feedback forms for many kinds of teaching, including online lectures and tutorials, bedside teaching, clinical skills and simulation teaching. Feedback forms take no more than 3 minutes to complete and all have Kirkpatrick Level 2 questions to assess learning. For further ease of use, tutors can, if they wish, create QR codes and custom links in advance of a tutorial.

These shortcuts direct learners straight to a feedback form prefilled with tutorial information, making the learners' experience even easier. Other features include the ability to have multiple tutors receive the same feedback for a single tutorial and grouping or collating of multiple teaching events to create a summary certificate (eg all bed-side teaching provided in a semester).

Since its launch in 2019, MeFB has become extremely popular with over 1200 users across the country who have collected over 11,500 feedback forms. It has been adopted by NHS Borders as their feedback tool for all formal teaching and is featured in the Edinburgh Clinical Educator Programme's "Planning and Evaluating your Teaching" workshop. MeFB has users throughout the UK and Ireland and we would love to see its use continue to spread to make collecting feedback easier for everyone. Institutional accounts (also free) are also available for societies, health boards, hospitals, or other groups to use for their teaching.

03 NEW TEACHING FEEDBACK TOOL



Please contact us if you would like further information at help@medicalfeedback.org.

Aoife Duignan (ST4 Geriatric Medicine) and Mathew Lyons (CT2 Anaesthetics)

Follow us on Twitter [@_mefb](https://twitter.com/_mefb)

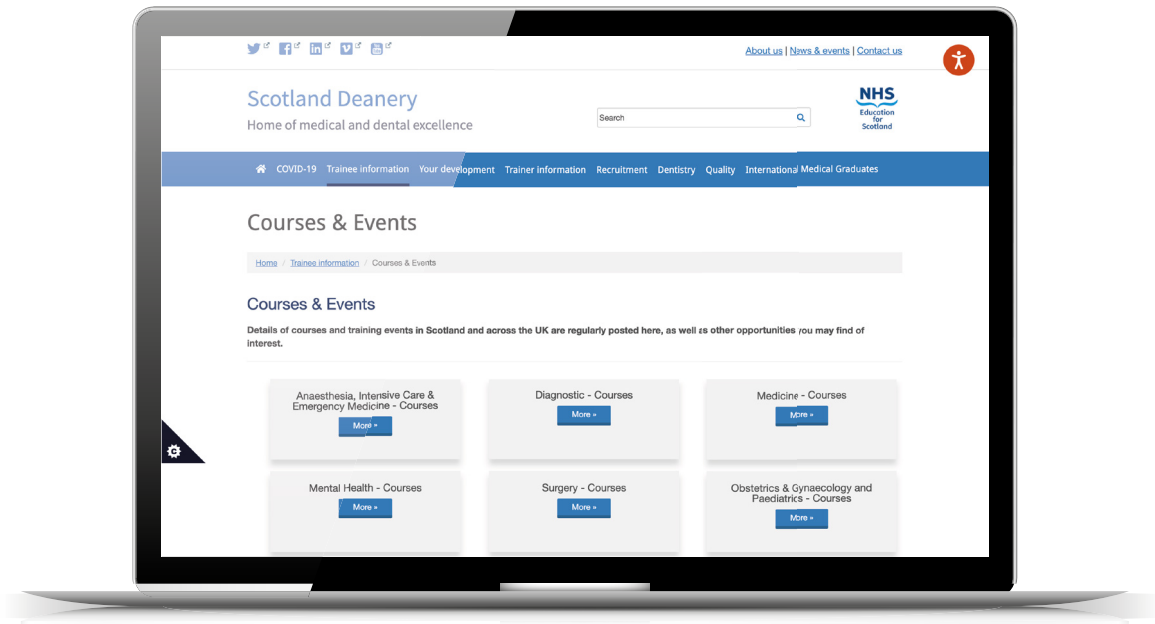
**Disclaimer: This is a simple, free tool created by two trainees in South East Scotland to make trainees' lives easier! It is not a commercial product and is not endorsed by NHS, NES Digital or any health board. Only minimal personal information is stored, we have robust privacy policy in place and data are stored on a secure UK server. This article does not imply endorsement by NHS Scotland.*

04 DEANERY WEBSITE TRAINEE COURSES AND EVENTS SECTION

The Scotland Deanery website has a Courses and Events section here:

www.scotlanddeanery.nhs.scot/trainee-information/courses-events/

This section lists events for medical trainees and trainers which may be of interest. This section is updated regularly with new information as we receive it.



What do we know?

Evidence about the learning needs of safety investigators in health and care, the relevance of ongoing education, and challenges faced after initial training is limited.



We do know that

- There is a lack of a consistency to investigating and learning from safety issues in healthcare.
- Staff undertaking the investigator role benefit from appropriate training and ongoing development in investigation concepts and methods, but available opportunities are limited.
- There is variation in knowledge and application of modern safety investigation concepts and methods across health and social care systems.

Study aims

To explore previous training, ongoing experiences and learning needs of staff who conduct investigations and learning reviews in Scotland's health and social care systems.

What did we do?

- We undertook seven online focus groups using MS Teams with a convenience sample of 71 staff (e.g. clinical governance, risk and safety advisors and leaders) from territorial and special health boards in Scotland.
- The focus group meetings were recorded with permission, transcribed verbatim and data were subject to thematic analysis.

What did we find?

Five principal themes were generated from data analysis:

1. Initial investigator training by itself was not enough to feel confident in carrying out a safety investigation.

Continued...

After doing the training, I thought the training was really comprehensive ... But then when I actually tried to put that in practice, that was much more difficult.... So I thought the training was great but as for whether I feel competent and confident to lead a review, I would say not. I think a bit more support, maybe a bit more mentoring support would have been useful, I think.

2. The role of investigator is a complex one requiring a wide array of personal and workplace skills (such as integrity, communication skills, empathy, teamwork, report writing skills, theoretical knowledge).
3. “Good Practice” in safety investigations involves establishing clarity of scope of the review at the outset, comprehensive family involvement, peer review, sharing the learning and meaningful implementation of recommendations.

If you're doing investigations that don't result in making a change for the better, then I think that's an indication that it's not a good investigation. And there can be multiple things that let you down in that. So one is that the investigation doesn't get to the actual causation that's the problem. Two, that it doesn't take into consideration the context, the human factors within that event. Three, that even though you've investigated well and you've got to the causes, you've not translated that into realistic and worthwhile recommendations. Four is the recommendations are not actually enacted. So, there are many reasons as to why, even starting out with the best intentions, nothing really changes.

4. Barriers to “Good Practice” include a lack of protected time for investigators to devote to a learning review, as well as differing expectations of those involved and inefficient working across organisations.
5. Continuing Professional Development needs identified included: mentoring, ‘shadowing’ more experienced staff and the support provided by adverse event review groups. Specific training needs mentioned included: training in report writing, including how to formulate action plans. Participants wanted greater consistency in training and the use of standardised templates and report forms.

Continued...

I do feel that probably we need to start moving away from root cause into looking more at the whole system. And I feel that any training out there at the moment doesn't bring everything together, not just how to review it, but report writing as well, and how to write these reports and position them. I think it would benefit our organisation.

Our Conclusions

- Participants were clear that staff undertaking safety investigations need to possess an accredited package of knowledge and skills to be able to confidently complete this important activity, but it emerged that there is currently no consistency in how investigation training is delivered in Scotland.

- The lack of a consistent approach also extends to how patients, families and staff are supported either during or after the event. The outcome of this study supports existing knowledge that greater harmony and standardisation are required in the content and delivery of training programmes and in the implementation and application of processes that support investigators and learning from safety investigations in Scotland.

Potential Next Steps

- Explore by consensus a set of core competencies for safety incident investigators
- Create comprehensive guides for conducting investigations
- Agree on a national safety training agenda

- Create an ongoing programme of professional development
- Build consensus on curriculum content for investigation training
- Create a peer network to allow interaction and sharing of learning and resources
- Provide access to a learning platform to deliver hybrid investigation training

Judy Wakeling
Ian Davidson
Laura Walker
Paul Bowie

Thursday 24 November 2022 - Registration now open

Registration is now open for this year's NES Bereavement Conference, 'Exploring bereavement from a new perspective' which is being held virtually on Thursday 24 November.

View the [conference flyer](#)

View the conference flyer in plain text format [here](#)

Register via the [NES Events website](#)



Programme

This free, one-day virtual event, will be opened by Professor Jason Leitch (National Clinical Director, Scottish Government) and is relevant to health and social care staff working in many different settings. Delegates will have the opportunity to hear from a wide range of speakers, including the author Michael Rosen who will speak on 'Finding ways to talk about death'.

Workshops will explore grief across the life course and the diversity of experiences within a variety of settings and cultural groups e.g. people who are in custody, those who are homeless and people who are bereaved following substance use.

Speaker conference clips

Short video clips have been recorded by speakers to give an overview of their content and key learning points. If you would like to watch these to learn more about each session, [please visit the Events page](#).



Register your place

Make sure to secure your place by registering at the [Events website](#) by the deadline of Thursday 3 November.

This is to inform you about the 2022 iMatter survey for Doctors and Dentists in Training and Clinical Fellows.

The survey will begin soon, but, depending on your Board, you'll be asked to complete it at different times:

- Week beginning 26th Sept 2022: NHS Borders, NHS Western Isles, NHS GGC
- Week beginning 3rd October 2022: NHS Lothian, NHS Orkney, NHS Shetland, NHS State Hospital, NHS Dumfries and Galloway, NHS Tayside, NHS Forth Valley, NHS Grampian
- Week beginning 31st October 2022: NHS Ayrshire and Arran, NHS Lanarkshire, NHS Highland, NES, NHS Fife, Golden Jubilee Foundation

You will receive an email from a company called Webropol containing a link to the survey. If you don't get the email, please check your spam / clutter folder.

Please note that GP Trainees in GP Practices and Dental Vocational Trainees in Dental Practices will not be included in the iMatter survey. This is because Practices do not participate in the iMatter process.

What is iMatter?

iMatter is an established tool designed with staff to help individuals, teams and organisations understand, measure and improve staff experience.

What will be the benefit for me in taking part?

You have the chance to feed back and to influence change and improvement in your workplace. You can make things better for the next group of trainees, and the trainees you are going to replace can make things better for you.

What will the benefit be for patients and service users?

All the evidence shows that the better the experience of staff at work, the better the

experience of patients, clients, service users and their families. By focusing on your experience at work, iMatter will also help to improve their experience.

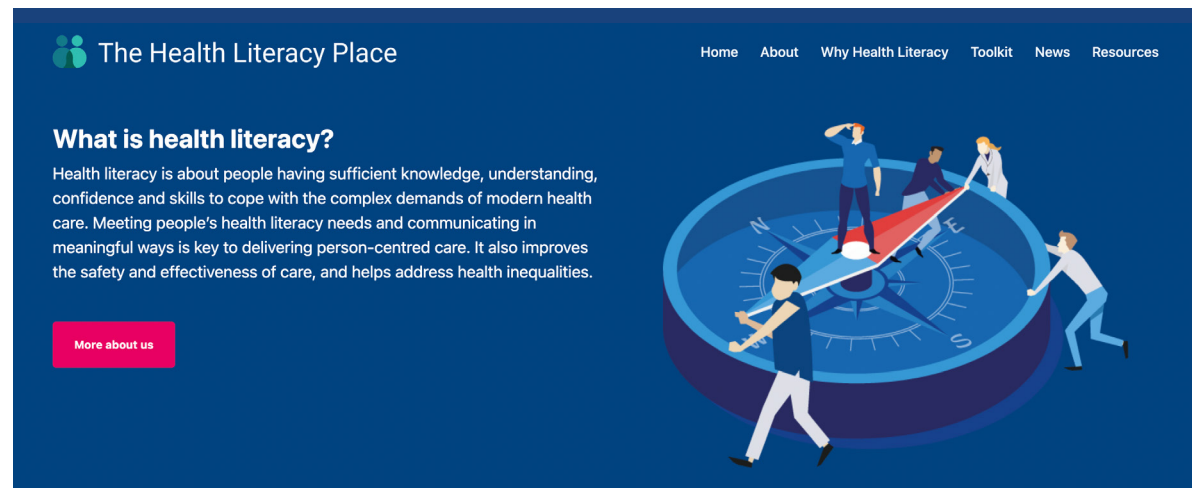
What about other Staff Surveys?

iMatter is different from other Staff Surveys, such as the GMC National Training Survey, the Scottish Trainee Survey, and the National Dental Specialty Trainee Survey. iMatter is run at team level and results will be reported in teams. It complements other Staff Surveys by allowing you, in your teams, to understand the issues that matter most to you more clearly and work on these together.



October is Health Literacy Month. A person's health literacy affects their ability to gain access to, understand and use information to make choices about their own health and care.

With the increase in remote and telephone consultations it can be even more challenging for practitioners to know if the person has understood.



Would you like more confidence to communicate sometimes complex health information in a way that it can be easily understood?

How can you empower the people you support to make informed decisions about their health?

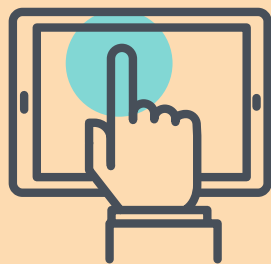
Do you know where to go for trusted health information? Can you spot fake health news and help others to do the same?

To raise awareness of Health Literacy we are planning a webinar on Tuesday 25 October 2022 at 1:30 - 2:30pm. You can book a place on [Turas Learn](#). You will need a Turas login to book. If you don't have a Turas account you can register [here](#).

There is also an eLearning module on Turas Learn <https://learn.nes.nhs.scot/26672/health-literacy>. It takes 30 minutes to complete, and learners can create an action plan to revisit later.

Have you noticed a change in how NHS Scotland staff can log into their OpenAthens account?

From Tuesday 27th September 2022 NHS Scotland staff can sign-in to OpenAthens using their NHS Scotland work email address and password. They will still get access to the full range of library services they have been used to, including e-journals, articles, eBooks, databases and evidence summary resources.



The change means that NHS Scotland staff who already have an NHS Scotland OpenAthens account will no longer have to use their old efs details and new NHS Scotland registrants will no longer have to self-register for an account.

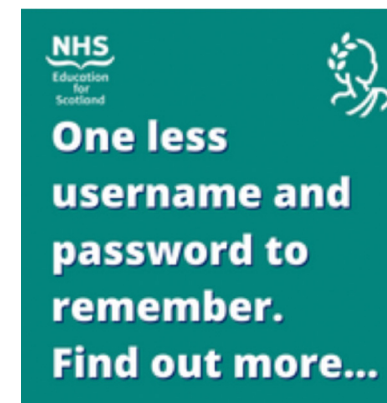
Staff who do not have an NHS Scotland work email and password will continue to sign-in using their existing OpenAthens account details, or when applying for a new account use the self-register system.

What will users see?

When users first sign-into a service requiring an OpenAthens account they will be presented with the following options:

- Sign in with your NHS Scotland email address and password
- OpenAthens

NHS Scotland staff should select the 1st option. This will authenticate access regardless of whether they are a new or current user of our services.



Other users should use the 2nd option and continue to authenticate with their previous NHS Scotland OpenAthens account (username starts with efs and includes name and a number. e.g. efsaname001).

There are further details on our [OpenAthens Update page](#).

For information about OpenAthens accounts eligibility and resources [visit our help pages](#).

If there any questions on this change or staff experience any issues contact the [Knowledge Services Helpdesk](#).

Created specifically for the needs of Scotland's Medical trainees and trainers, are the following resources:



The Scotland Deanery Website

The Scotland Deanery, along with our Local Education Providers, is responsible for managing Medical Training and Training Programmes across the four Scottish regions. Here you'll also find details of the Deanery's Quality Management activities, its key staff and locations plus information on Professional Development for doctors.

www.scotlanddeanery.nhs.scot



Scottish Medical Training

This site is the principal resource to learn more about how to apply for Foundation, Core and Specialty Medical Training in Scotland. Here you'll find regularly updated information about application windows (how and when to apply), a directory of 50+ GMC-approved medical specialty programmes and first-hand accounts about training from trainees and trainers. There are also useful insights on career direction and what it's like training and working in Scotland.

www.scotmt.scot.nhs.uk



SOAR

Designed for doctors (in both Primary and Secondary Care) working and training in Scotland, for their Appraisal and Revalidation needs. SOAR is used by Appraisers and Appraisees to aid the appraisal process, and for Trainees to complete their self-declarations. Here you'll also find a SOAR user guide, handy FAQ's and examples of Quality Improvement Activities.

www.appraisal.nes.scot.nhs.uk

Please **Contact Us** with information on any initiatives and projects you are involved in that you would like to share with your colleagues across Scotland. Also, please **Contact Us** with any feedback on the Deanery Newsletter or Deanery Websites.

Social

Join the conversation



This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email altformats@nes.scot.nhs.uk to discuss how we can best meet your requirements.