



**Qnis** THE QUEEN'S  
NURSING  
INSTITUTE  
SCOTLAND



# Annual Review 2025

Registered Scottish Charitable Incorporated Organisation SC005751





# Contents

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Staying in Touch Coordinator

**Dawn Cruse**  
Business Support Manager

**Sarah Doyle**  
Chief Executive and Nurse Director

**Lynn Gilmour**  
Digital Communications Officer

**Louise Hall**  
Business Support Officer

**Alison Jarvis**  
Staying in Touch Coordinator

**Emma Legge**  
Professional Nurse Lead (Leadership)

**Helen Reilly**  
Head of External Affairs

## Trustees

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Chair

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Vice Chair

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Jan Beattie  
Hazel Borland  
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Nicky Connor  
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David Williams  
Jenny Wilson  
Angie Wood  
Kim Barron - Clinical Advisor  
Katy Jenks - Clinical Advisor

Unless specified on the image, Queen's Nurse and QNIS photography throughout this review was taken by Lesley Martin with additional images by Elaine Livingston and Phil Wilkinson.

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# Greetings from the Chief Executive

## Letter from Sarah Doyle our Chief Executive and Nurse Director

**Writing this welcome letter gives me a chance to reflect on the past year and our work both inside the organisation, with staff and Trustees, and outside the organisation, with community nurses and midwives, funders, health and social care leaders, and our many stakeholders.**

The theme that emerges most strongly, I think, is cooperation. Scotland, like the rest of the world, faces a wide range of steep challenges relating to public health, and community nurses and midwives are caught up in those challenges as well as being an important part of the responses we must put in place. It seems clear that in health and social care, one of our key strengths is our capacity for cooperation: our willingness to work together to achieve a shared goal.

No single profession or person brings all the answers. We all need to step forward, with a generosity of spirit and inclusion that takes us beyond narrow interests to a focus on the common good. We have had this firmly in mind in all our work during 2025.

**“We all need to step forward, with a generosity of spirit and inclusion...”**

I am indebted to Emma, Helen, Dawn, Lynn, Louise, Alison, and Carol. Together we develop, design, organise, and deliver the Queen's Nurse leadership programme and the relational care workshops as well as the fellowship for our much-loved and respected retired Queen's Nurses who trained with us before 1969. We are actively engaged in supporting national policy development and recently held a successful parliamentary exhibition; our new website showcases community nursing and midwifery careers, and we continue to celebrate long service. We work hard to navigate the changes introduced by new legislation and regulation and reshape our business and financial processes accordingly – these are crucial for the successful



operation of the charity. I hope you enjoy reading more about all of this on the following pages.

A particular joy this year has been visiting seven of Scotland's territorial health boards to meet the community nurse leads and the contemporary Queen's Nurses in each region. Emma and I have been warmly welcomed everywhere, and we have been struck by the passion for community nursing, the commitment to improving population health, and the creativity in dealing with the many difficulties encountered in everyday clinical practice. It's truly a message of hope and optimism.

Best wishes

A handwritten signature in black ink that reads "Sarah Doyle".

# Greetings from the Chair

## Letter from Erica Reid, Chair of QNIS Council

**A warm welcome to the 2025 QNIS Annual Review. I encourage you to make yourself comfortable and take time to enjoy reading highlights of our work from this year, including news on the Queen's Nurse Development Programme refresh, and updates from both contemporary and retired Queen's Nurses from across Scotland.**

In July our Patron, Her Majesty The Queen, hosted a reception at the Palace of Holyrood for QNIS. It was such an honour to have the opportunity to speak with Her Majesty about the work we do, and to introduce our Patron to so many inspirational community nurses and midwives and, of course, the wonderful retired Queen's Nurses. In Her Majesty's words after speaking individually with many of those present, "you seem to cover everything... so many people are so indebted to your care". The reception was a happy occasion and the room resounded with many excited conversations as people connected with laughter and joy. You can read more and see photographs from the event on page 23.

I was also delighted to have had the opportunity to attend this year's Annual Gathering in Pitlochry. This important event in our calendar brings together Queen's Nurses who trained with QNIS prior to 1969 and is an opportunity for old friendships to be renewed and new connections to be made. It was a wonderful day, and I thoroughly enjoyed meeting everyone and especially reconnecting with some retired Queen's Nurses from the Isle of Lewis.

Earlier in the year I had the pleasure of presenting long service awards and meeting retired Queen's Nurses in Stornoway. It was such a privilege to present an award to a community nurse who had cared for my mother, and also meet, after many years, the nurse who lived next door to my grandparents' house in Barvas. Nurses who work in communities have such a reach into the lives of those in their area, and these two nurses were role models, as many of you are to others today.

As always, we are grateful to our funders and those who have generously donated to our work over this past year. QNIS relies on funding and charitable donations to enable us to continue our work. If you are able to support us with a donation of any kind, I would encourage you to consider doing so.



Your donation means that community nurses and midwives across Scotland are supported to address health inequalities and improve the lives of those they care for.

On behalf of my fellow Trustees, I would like to thank you for all you do to contribute to QNIS' work to support Scotland's community nurses and midwives.

Leis gach deagh dhùrachd  
(with all good wishes),

*Erica Reid*

# Hellos & Goodbyes

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## Staff Team

**We are pleased to introduce a new member of the team:**

**Louise Hall** - Business Support Officer

We were delighted to welcome Louise Hall to the team. Louise joined us as our Business Support Officer to provide administrative support to the Senior Leadership Team, support for QNIS' programme delivery, and secretariat support to Council and Committee meetings. Louise has an extensive administrative background, and has worked in the public and third sectors.



**We send our best wishes to Catriona and Alan, who said goodbye to QNIS in 2025 to explore new opportunities.**

**Catriona McClelland** - Project Coordinator

Catriona left us earlier this year for an adventure in France during the ski season. We are very grateful to her for all her hard work to support QNIS, particularly around the Queen's Nurse Development Programme, and our awards event.



**Alan Davidson** - Management Accountant

We are hugely grateful to Alan for all he has done for QNIS, both latterly as our Management Accountant but also as a Trustee for a number of years prior to joining the team. We wish him all the best for the future.



## Volunteer Visitor

**Phyllis Runciman**

This year, Phyllis stood down as a Volunteer Visitor. Phyllis has contributed to the organisation in many ways over a number of years, working on the Delivering Dignity sub-group, being part of the Projects Innovation and Research Committee, working with the RCN on history research and the archives, and supporting the Welfare Committee. We truly have been in her debt for a long time and we would like to pass on our grateful thanks.



## Trustees

**In 2025 we said goodbye to:**

**Josie Murray**

We have really valued Josie's contribution to the work of QNIS during her years as a Trustee.



# Hellos & Goodbyes

We were delighted to welcome four new Trustees this year:



## **Sarah Ballard-Smith**

Sarah has held a variety of clinical, managerial, and educational roles in nursing, and was Nurse Director for the acute hospitals in NHS Lothian. She has been involved with charities since 1999, most recently an Edinburgh-based charity for unpaid carers.



## **Ann Gow**

Before her retirement Ann, who is also a QNIS Fellow, was Nurse Director and Deputy Chief Executive at Healthcare Improvement Scotland (HIS). She has a passion for child health, tackling inequalities, and improving care for vulnerable people.



## **Fiona Houlihan**

Fiona, a Queen's Nurse, spent many years working in acute and community paediatrics settings before moving into senior management positions in HSCPs and Specialist children's services. She is currently working in Greater Glasgow and Clyde health board as professional nurse lead.



## **Jenny Wilson**

Jenny is the Executive Nurse Director at NHS Ayrshire and Arran. She has previously held senior leadership roles within the organisation, including Assistant Director of Quality Improvement and Interim Deputy Nurse Director.

## New Clinical Advisors for QNIS

At the end of 2024, we invited applications for two Queen's Nurse Clinical Advisors to QNIS Council. We are delighted that Katy Jenks and Kim Barron were appointed to the roles and joined QNIS Council in May 2025.

The Clinical Advisor role complements that of the Trustees by bringing a practice perspective to discussions, ensuring that the work of the charity is firmly connected to the needs of practitioners. The Clinical Advisors are appointed for a term of two years, and they are accountable to the Chair of QNIS Council.



# Meet the QNIS Staff Team



## Sarah Doyle

*Chief Executive and Nurse Director*

I lead QNIS and work closely with both the staff team and the board to ensure we meet our charitable aims and continue to be sector-leading and sustainable.

***Which one record would want with you on a desert island:***

There are hundreds of tracks I could choose here but at the time of writing, it's the day after a sensational football game that secured Scotland a place at the 2026 World Cup. So, I'm going with the perennially hopeful 1982 Scotland World Cup Squad's *We Have a Dream*.



## Carol Crowther

*Staying in Touch Coordinator*

As one of the two part-time Staying in Touch Coordinators, my role is all about keeping in touch with our community of retired Queen's Nurses, that is, those who trained

at the Institute before 1969, ensuring connectivity, fellowship, and wellbeing.

***Which one record would want with you on a desert island:***

Anything by Procol Harum.



## Dawn Cruse

*Business Support Manager*

I'm responsible for financial administration, procurement, HR, and health and safety. I keep the office running and care for the building.

***Which one record would want with you on a desert island:***

Goodness – tricky question! And the answer probably changes with my mood! But I think *Big Calm* by Morcheeba. Might just be me, but music is like smells, and this album has me right back in my student years.



## Lynn Gilmour

*Digital Communications Officer*

I am responsible for our digital output, from the website and social media to design work and digital accessibility. I also work with colleagues to produce our print and digital newsletters and

publications, and support other projects as needed.

***Which one record would want with you on a desert island:***

This was a very hard question; there are quite a few albums that mean a lot to me. But I've gone with The Cranberries debut - *Everybody Else Is Doing It, So Why Can't We?*

# Meet the QNIS Staff Team



**Louise Hall**  
*Business Support Officer*

I provide secretariat support to QNIS Council and Committees and provide administrative support to QNIS programme delivery. In addition, I support external awards and events.

**Which one record would want with you on a desert island:** Sunshine on Leith by The Proclaimers. This song reminds me of my family past and present - an anthem of love which brings tears to my eyes and goosebumps every time I hear it.



**Alison Jarvis**  
*Staying in Touch Coordinator*

I officially joined the charity in August 2022, however I have had a long association with QNIS as an Honorary Fellow and lead of the welfare review. Like Carol, I focus my attention on the

fellowship of the retired Queen's Nurses who trained prior to 1969.

**Which one record would want with you on a desert island:** Grand Choral (from the film *La Nuit Americaine*) by Georges Delerue - it is so fabulous. I love the final crescendo with the trumpet – I have to conduct along.



**Emma Legge**  
*Professional Nurse Lead*

I am responsible for the ongoing evolution of transformational development programmes for QNIS. I work with Queen's Nurses across Scotland to strengthen the network and

raise the profile of community nursing and midwifery in Scotland.

**Which one record would want with you on a desert island:** Josh Groban - Awake, saw him perform in Glasgow and been a fan ever since. What a voice.



**Helen Reily**  
*Head of External Affairs*

I oversee all QNIS' external communications and engagement. It is my role to advocate for community nursing and midwifery and to make sure the voices of Queen's Nurses are being heard.

**Which one record would want with you on a desert island:** This question is too hard, and my answer has changed more than once, but I'll go with anything by Florence and the Machine. I could happily listen to Florence Welch sing for hours each day without ever getting bored.



# Meet the 2025 Queen's Nurses

**We were delighted to support 18 community nurses from across Scotland through this year's Queen's Nurse Development Programme.**

The nine-month programme included two residential workshops and one online workshop. During the workshops participants were asked to consider their own practice through the lens of contemporary nursing theories such as person-centred practice and awareness-based systems change. Participants were encouraged and supported to use their creativity to help explore complex work issues, considering how they might tackle these in fresh and creative ways once back in the workplace.

Throughout the programme, participants were offered individual coaching delivered by experienced coaches who have been working on the programme since it was first delivered in 2017. Coaching supported each nurse to explore and uncover what gets in the way of personal and professional flourishing so they might consider how they can continue to give their best, while prioritising staying well and thriving at work

The programme culminated in an awards ceremony where each participant was awarded the title of Queen's Nurse, surrounded by family, friends and others who supported them (see page 32). The end marks the start in many ways, and we look forward

to hearing how these nurses will go on to inspire others through creative, innovative, and courageous nursing practice.



**Ashley Lawrence**

**Donna Mitchell**

**Elaine Whelan**

**Emma Lindsay**

**Emma McAuley**

**Gemma McGregor**

**Jan Crooks**

**Jennifer Crawford**

**Katy Vickers**

**Leigh Williams**

**Lesley Campbell**

**Lisa Malcolmson**

**Lisa McArthur**

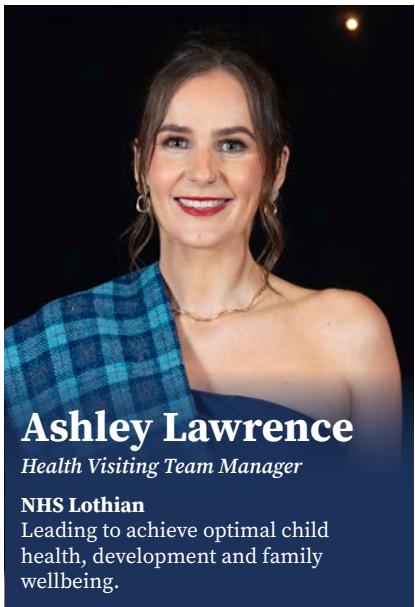
**Lynsey O'Dwyer**

**Michelle Dalgarno**

**Rachael McBride**

**Sharon Coggins**

**Thisbe Sinclair**



### Ashley Lawrence

*Health Visiting Team Manager*

**NHS Lothian**

Leading to achieve optimal child health, development and family wellbeing.



### Donna Mitchell

*District Nurse Team Leader*

**NHS Greater Glasgow and Clyde**

On a mission highlighting the vital role of community nurses.

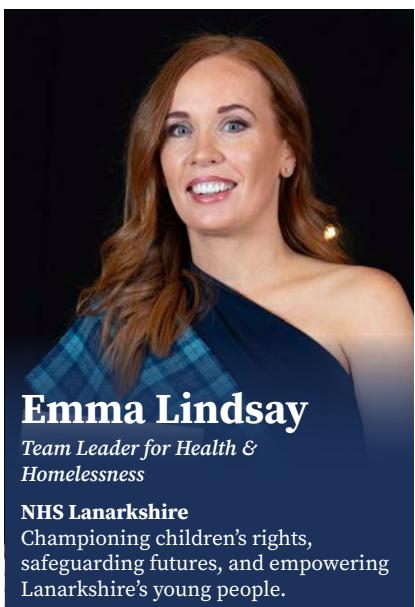


### Elaine Whelan

*Team Leader for Health & Homelessness*

**NHS Lanarkshire**

Increasing understanding of intellectual disability for young people in Tayside.



### Emma Lindsay

*Team Leader for Health & Homelessness*

**NHS Lanarkshire**

Championing children's rights, safeguarding futures, and empowering Lanarkshire's young people.



### Emma McAuley

*District Nursing Team Leader*

**NHS Fife**

Leading compassionately to inspire a culture of person-centered care.



### Gemma McGregor

*Clinical Nurse Specialist Team Lead*

**NHS Greater Glasgow and Clyde**

Passionate about transforming care centred around children's rights.

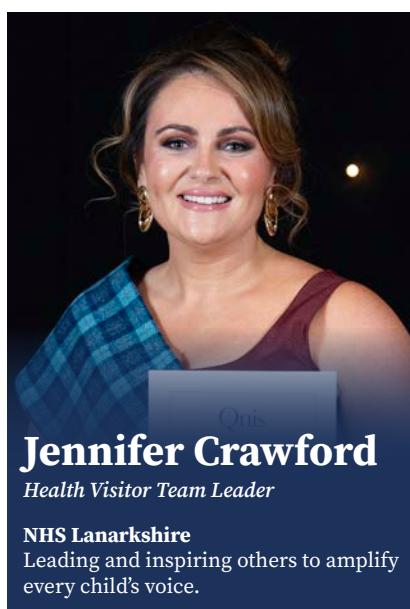


### Jan Crooks

*Family Nurse*

**NHS Dumfries and Galloway**

Empowering teenage parents to become the best they can.

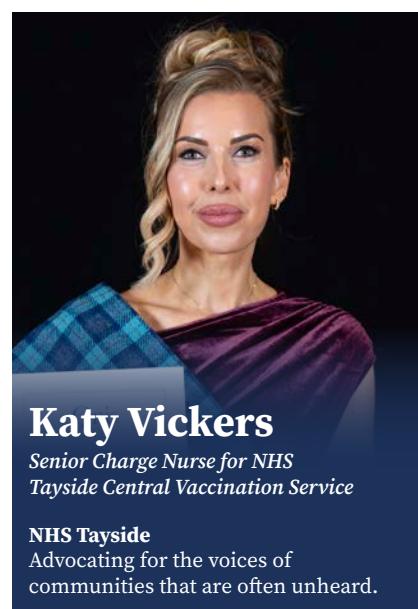


### Jennifer Crawford

*Health Visitor Team Leader*

**NHS Lanarkshire**

Leading and inspiring others to amplify every child's voice.

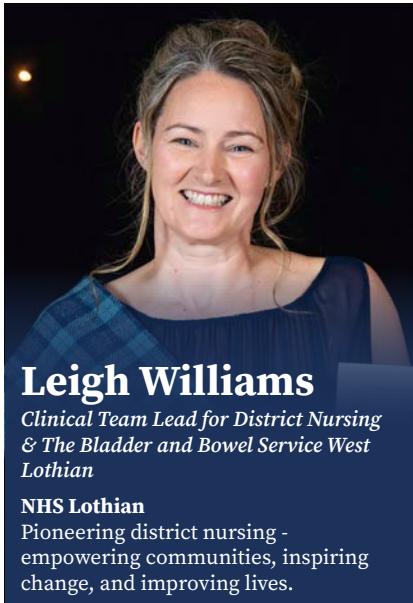


### Katy Vickers

*Senior Charge Nurse for NHS Tayside Central Vaccination Service*

**NHS Tayside**

Advocating for the voices of communities that are often unheard.



**Leigh Williams**  
*Clinical Team Lead for District Nursing & The Bladder and Bowel Service West Lothian*

**NHS Lothian**  
Pioneering district nursing - empowering communities, inspiring change, and improving lives.



**Lesley Campbell**  
*Advanced Practice/ Professional Lead*

**NHS Highland**  
On a mission to improve substance use recovery care.



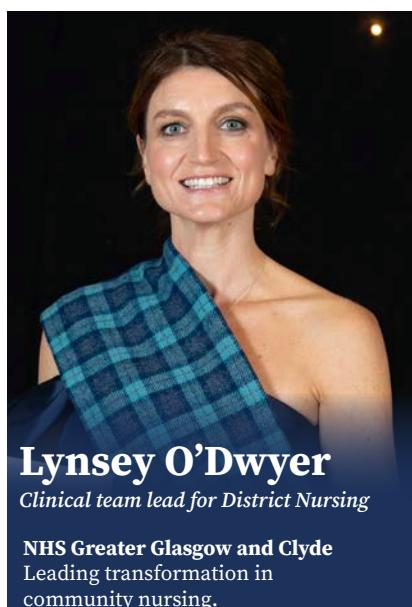
**Lisa Malcolmson**  
*Regional Consultant Nurse for Perinatal Mental Health & Deputy Clinical Director, Mental Health Specialisms*

**NHS Grampian**  
Transforming access, shaping strategy, improving perinatal mental health across communities.



**Lisa McArthur**  
*Advanced Tissue Viability Nurse Specialist - Community*

**NHS Lanarkshire**  
Transforming practice, empowering others, promoting excellence in pressure ulcer prevention.



**Lynsey O'Dwyer**  
*Clinical team lead for District Nursing*

**NHS Greater Glasgow and Clyde**  
Leading transformation in community nursing.



**Michelle Dalgarno**  
*Lead Advanced Practitioner*

**NHS Greater Glasgow and Clyde**  
Inspiring collaborative approaches to person-centred care.



**Rachael McBride**  
*Specialist Nurse Child Protection*

**NHS Grampian**  
Championing safety, wellbeing, and the rights of every child.



**Sharon Coggins**  
*Lead Midwife for Community and Outpatients Department*

**NHS Greater Glasgow and Clyde**  
Championing equity, compassion, and excellence to empower every family's journey.



**Thisbe Sinclair**  
*School Nurse*

**NHS Orkney**  
Supporting and caring for children and young people in Orkney.



## QNIS Strategic Plan

**We are passionate about community nursing and midwifery and about the vital role of these professions in delivering high quality health and social care in Scotland. Our founding charter clearly states that our aim was to care for the most disadvantaged. Today, we continue to increase our efforts to put addressing inequalities at the heart of our work.**

Our purpose is the improvement of health with a focus on prevention and social justice. We do this through supporting nurses and midwives whose roles within Scotland's communities enable individuals, families and communities to maintain or improve their health.

To ensure our work continues to drive our purpose effectively, in August we published the QNIS Strategic Plan which outlines our objectives for the next five years. The plan sets out a clear vision for the future of the charity and its work supporting and developing Scotland's community nurses and midwives.

Our strategic plan for the next five years will focus on ensuring QNIS is sustainable and sector-leading in everything we do. When people think of QNIS, they will know exactly who we are and what we do, and they will associate us with high-quality activities and outcomes.

### **The four key priority areas are:**

1. Renew and refresh our programmes so they offer innovative opportunities that energise, inspire, and support participants.
2. Strengthen our financial position to ensure sustainability and sector-leading value for beneficiaries, funders, and stakeholders.
3. Widen our reach so that we increase the proportion of the community nursing and midwifery workforce that benefit from our charitable activities.
4. Develop a clear, reflective organisational voice that communicates our values and mission and helps us contribute positively to selected dialogues.

# QNI S News

## The Future of Health in Scotland



**QNI S Chief Executive and Nurse Director, Sarah Doyle co-signed an open letter which was published in *The Scotsman* on 10 June.**

The letter was written following meetings with a diverse group of committed senior figures in health. Together, the group is working to engage with politicians and decision-makers to deliver the change our health system urgently needs.

Working with Enlighten, the independent public policy institute, the group of 13 senior professionals and executives called on politicians to “reimagine” healthcare in Scotland.

In the letter, *The Future of Health in Scotland*, the group called for politicians to agree on a framework to engage in private, respectful discussions which allow long-term planning beyond normal electoral cycles.

In the letter, the group says:

- The current system of delivering health care and social care in Scotland is unsustainable, often stretched beyond capacity, overly complicated, difficult to navigate, often inefficient, and is perceived as not always meeting need
- Health care is not the sole responsibility of the NHS. We need to look beyond the NHS to the broader determinants of health and prioritise prevention and health creation as a national imperative

- Transformation is beyond the capacity of any one political party, government, or group of stakeholders, who should not be expected to carry that burden alone.
- Spending more money will not solve all of the problems we face.

The group of signatories was brought together by John Sturrock KC, a leading mediator. Mr Sturrock said:

“It has been an enormous privilege for me to convene and facilitate informal conversations among those listed as signatories to this statement and a number of others, as we all wrestle with the complexities and challenges of improving health in Scotland.

“As a mediator, I have taken my inspiration from the Edinburgh Conversations of the 1980s which I was privileged to observe - and whose model for informal, candid, off-the-record discussions among British, Soviet and US participants about the most important issues of the day can serve as a useful practical guide for any group seeking to address difficult issues, such as the future of the nation’s health and social care.

“Building trust and confidence is key to finding constructive solutions to what sometimes can feel like intractable problems. That is what our conversations seek to encourage”.

# QNIS News

## The letter was signed by:

**Dr David Caesar**

Emergency Physician & Associate Medical Director

**Dr Sarah Doyle**

Chief Executive and Nurse Director, Queen's Nursing Institute Scotland

**Professor Andrew Elder**

President, Royal College of Physicians, Edinburgh

**Professor Liz Grant**

Assistant Principal (Global Health) & Director of the Global Health Academy, University of Edinburgh

**Jane-Claire Judson**

Chief Executive, Chest Heart & Stroke Scotland

**Dr Elizabeth Kelly**

Former Chair, Improving Wellbeing and Working Cultures Strategic Board

**Dr Tamasin Knight**

Consultant in Public Health Medicine

**Dr Donald Macaskill**

Chief Executive, Scottish Care

**Dr Alastair MacGilchrist**

Chair, Scottish Health Action on Alcohol Problems (SHAAP)

**Tejesh Mistry**

Chief Executive, Voluntary Health Scotland

**Rami Okasha**

Chief Executive, Children's Hospices Across Scotland (CHAS)

**Professor Stephen Turner**

former chair, Academy of Medical Royal Colleges and Faculties in Scotland

**Charlotte Waite**

National Director, British Dental Association, Scotland.

## State of the World's Nursing Report launch

QNIS Chief Executive and Nurse Director, Sarah Doyle, was invited to the House of Lords in May for the launch of the 2025 World Health Organisation report on the State of the World's Nursing.

The event was chaired by Lord Nigel Crisp and sponsored by the Burdett Trust for Nursing. The discussion was led by Professor Aisha Holloway, in her previous role as Nursing Now Challenge Programme Director, supported by senior nurse leaders in conversation with newly qualified and student practitioners.

The report examines the global challenges for nursing including education, employment, migration, regulation, working conditions, leadership and more. The data show complex disparities between and among countries, regions and socio-economic contexts. For example, low- and middle-income countries are facing challenges in graduating, employing and retaining nurses in the health system and will need to raise domestic investments to create and sustain jobs. In parallel, high-income countries need to be prepared to manage high levels of retiring nurses and review their reliance on foreign-trained nurses, strengthening bilateral agreements with the countries they recruit from.



# QNI S News



**QNI S published a Manifesto ahead of the 2026 Scottish Elections. We believe that Scotland needs leadership that fosters real collaboration between powerful opposing interests in order to deliver a prevention-oriented, community-first approach to health and social care.**

To have the best possible chance of addressing the health and social care problems we face, QNIS wants to see:

- Cross-party working to enable long-term planning beyond electoral cycles.
- An ambitious, fair, and feasible plan to guide the distribution of increased resources to primary and community health care.
- Planning approaches that understand primary health care is delivered by a range of clinical professions and not limited to general practice.
- Meaningful involvement of communities and people with lived experience in decision-making about health and social care services.

- Sustained focus on improving health equity and ensuring high-quality health and social care is accessible for those facing the most severe disadvantages.
- Strengthened relationships with third sector providers and a robust vision for their long-term contribution to Scotland's population health.

QNI S Chief Executive and Nurse Director, Dr Sarah Doyle, said: "QNI S is a charity that provides high-quality professional development opportunities for Scotland's community nurses and midwives, and so our priorities include developing and protecting career pathways for community nursing and midwifery. Right now, we believe that community nurses and midwives most need the thing we all need – a modern, fit-for-purpose and fit-for-the-future arrangement for the safe and sustainable provision of health and social care."

## Shining a spotlight on community nursing and midwifery

We were delighted to have the opportunity to share our Manifesto with politicians at an exhibition in the Scottish Parliament. Sponsored by Tess White MSP, the exhibition, which ran for three days, gave us the chance to meet with MSPs and tell them about the work of QNI S. It also allowed us to raise awareness of the vital work that community nurses and midwives do across Scotland and the wide scope of the services they deliver.

We had some very thoughtful and interesting conversations and were able to emphasise how important it is to ensure that community nurses and midwives can access professional and leadership development opportunities.

We were delighted to be visited by the Cabinet Secretary for Health and Social Care, the Minister for Drugs and Alcohol Policy and Sport, the Minister for Social Care and Wellbeing, and the Minister for Public Health and Women's Health. We talked about the pivotal role of community nursing and midwifery in the prevention focused approach that has been set out by the Scottish Government and COSLA in the Population Health Framework, and in delivering health and social care close to, and in, people's homes.

# QNI S News



## Assisted Dying for Terminally Ill Adults (Scotland) Bill

Liam McArthur MSP introduced this Member's Bill back in March 2024. If passed, it will allow terminally ill adults in Scotland, who are eligible, to lawfully request, and be provided with, assistance by health professionals to end their own life. MSPs voted in favour of the general principle of the bill during the Stage one debate in May. Stage two is when MSPs can propose changes to the bill. In November this year, the Scottish Parliament's Health, Social Care and Sport Committee started the review of the almost 300 amendments that had been proposed.

Whilst QNI S is neutral on the principle of assisted dying, given that there will be a role for community nurses if the bill is enacted, we have taken steps to support some amendments to the bill.

Liam McArthur has submitted some amendments to the bill, including one that we raised with him which addresses the qualifications and experience of authorised health professionals giving assistance.

We have also worked with BMA Scotland, RCN Scotland, RPS Scotland, and RCGP Scotland to support amendments to the bill on establishing an 'opt-in model' for health professionals and to ensure there is a prescribed training requirement for those supporting assisted dying. We will continue to follow the bill's progress and influence it where appropriate.



# QNI S News

## QNI S hosts students from the USA

In August, we were delighted to host a visit to Castle Terrace from nursing and healthcare students and tutors from Wisconsin, in the USA.

The group of fourteen, which comprised mostly nursing students but also included others studying sonography, radiology, and health administration plus two tutors, joined us towards the end of their ten-day study trip to the UK, which included London and Glasgow along with Edinburgh.

Emma Legge, QNI S Professional Nurse Lead, gave a presentation to the group which provided a brief history of QNI S. She also discussed the health care inequality gap in Scotland with them, outlining the factors that contribute to this and demonstrating how nurses - particularly community nurses and midwives - are helping to address this through small innovations and projects, and by having the right conversations with the right people.

The group was particularly interested to hear about the NHS and how it is funded and paid for, and about free access to prescription medication in Scotland. There was also discussion about how the Scottish system compares with what they have in their state. There were some parallels, but the conversation always returned to care being contingent on your level of health insurance in the United States. The group was also interested in the nursing workforce and training structure in the UK, how nurses are regulated and requirements for revalidation.

QNI S was really pleased to have the opportunity to meet with the students who had also managed to fit in a visit to RCN Scotland, a trip to the Tattoo, and some Fringe shows whilst in Edinburgh.



## The Garden Party at Buckingham Palace

QNI S was honoured to be invited to Buckingham Palace to attend the Garden Party for those working in Education and Skills from across the nations. Sarah Doyle, QNI S Chief Executive and Nurse Director; Hazel Borland, QNI S Trustee; Dawn Cruse, Business Support Manager, and Emma Legge, Professional Nurse Lead, attended this memorable afternoon.

The sun shone for the entire event which included performances from military bands, a performance from young ballerinas, ample opportunity to explore the stunning grounds and of course, a very British Afternoon Tea.

The group did catch glimpses of the King and Queen, who met with some of the guests. All guests were made to feel welcome, and staff were on hand to ensure that everyone had an enjoyable day. Sarah, Hazel, Dawn and Emma felt privileged to be part of such a special event, representing and celebrating the work of QNI S, in the company of our Royal Patron, Her Majesty The Queen.



# New QNIS Website

**After months of planning and development, our new website launched in the summer.**

The refreshed site was designed to celebrate, support, and connect community nurses and midwives across Scotland, and as a space to learn, connect, and be inspired.

It features: an easier-to-navigate design, a dedicated Community Careers section, refreshed stories and nurse profiles, and a clearer picture of who we are and what we do.

There is also a dedicated section where you can find out more about us, including the values, vision, and legacy of QNIS — championing community nursing and midwifery since 1889 — as well as news and project pages.

The new Community Careers section spotlights some of the many roles within community nursing and midwifery across Scotland. It provides an insight into the day-to-day experiences of those working in community roles — from health visiting and district nursing to specialist community mental health and midwifery care — and shines a light on how these professionals support people where they live, learn and work.



Whether someone is considering their first step into nursing or midwifery, planning to take a new direction in their career, or thinking about progression in community care, these pages are designed to inform, inspire, and highlight the many ways community practitioners make a difference every day.

The News section keeps our community up to date with stories that matter, national and local. You'll find, for example, the latest on long service awards, strategic developments, and events and initiatives that spotlight the work of community nurses and midwives across Scotland — from celebrations at the Palace of Holyroodhouse to reports on local gatherings and professional development events.

This section of the site not only showcases achievements and organisational updates but also reflects QNIS's ongoing commitment to championing, advocating for, and connecting with the people at the heart of community nursing and midwifery.

We hope you enjoy browsing the content and finding out more about our work.

# Queen's Nurse Leadership

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Queen's Nursing in Scotland dates back to the 19th century when our charity was established to train community nurses, around sixty years before the NHS was formed. Queen's Nurses worked as autonomous and often lone practitioners in cities, remote villages and island communities all over Scotland. They were midwives, district nurses and health visitors and indeed many took up 'triple duty' positions where they provided cradle-to-grave care from birth to end of life, as well as bringing a clear public health perspective to the communities they served. From around 1969, the state took over the training of nurses and midwives and QNIS turned its attention to education and professional development.

Today there are nearly 200 contemporary Queen's Nurses working in Scotland, who have been awarded the title of Queen's Nurse since we introduced an advanced leadership programme back in 2017. Contemporary Queen's Nurses work in schools, care homes, prisons, community mental health teams, community learning disability services, GP practices, and many other community settings.

## Queen's Nurse events 2025

QNIS' Chief Executive and Nurse Director, Sarah Doyle, and Professional Nurse Lead, Emma Legge, have been making their way around Scotland to catch up with Queen's Nurses and their local community nurse leads in each territorial health board.

In 2025 they visited Tayside, Fife, Ayrshire and Arran, Lanarkshire, Lothian, Grampian, and Dumfries and Galloway, and appreciated the warm welcome they received at each event. Sarah and Emma have shared the newly published QNIS Strategic Plan and discussed their plans for a refresh of the Queen's Nurse Development Programme. These events have not only been an opportunity for Sarah and Emma to connect with Queen's Nurses but have also been a chance for Queen's Nurses to connect with each other, and for them to start

conversations about how they might work together to promote health equity.

Further events are planned in 2026 with Sarah and Emma intending to arrange visits to all 14 territorial health boards.

## The Queen's Nurse Development Programme 2026

QNIS is delighted to be launching a refresh of the Queen's Nurse Development Programme after nine years of delivering its flagship programme. The refresh was undertaken to enable wider participation and remove some barriers for community nurses and midwives seeking leadership and development opportunities. Queen's Nurse Leadership continues to be values-based leadership in the context of public health, health equity, inclusion, and community nursing. Participants develop a deeper understanding of professional leadership and leadership skills, which enables them to strengthen their own voice and actively listen to the voices of the community or communities they work with. Our programmes focus on learning more about systems, leading change in relational ways, and reflecting on the circulation of power, political influence, and community nursing and midwifery leadership for the future.



# The Wellbeing Power of Gardening

Liz Stewart  
Chief Executive, Scotland's Gardens Scheme

Scotland's  
**GARDENS**  
Scheme  
OPEN FOR CHARITY

The origins of Scotland's Gardens Scheme are firmly rooted in wellbeing, with its long history of gardens opening to raise funds for the wonderful work of the Queen's Nurses to support the health of our communities in Scotland. It's a tradition we are proud to carry on today with our continued partnership with QNIS. Today, however, gardening itself has become an agent for change, for wellbeing and a force for good in its own right.

Over the last decade or so, gardening has undergone a quiet revolution in popularity. There's now a more relaxed approach to gardening, which is becoming more accessible and inclusive. Small spaces are beautiful and community gardens are popping up in every town and city. You can tell a lot about a person from how they garden, as an expression of values and passions; a garden might be filled with art, be a wildlife haven, a productive edible plot, an apothecary's medicine cabinet or even a sensory paradise – and often a combination of all of these.

Anything goes – and with a little bit of space to call their own or to share, anyone can have a go at creating their own wellbeing garden to nourish mind and body with these suggestions to whet the appetite.

## Nourishing gardens

### Grow your own

Even a small raised bed or planter can be enough to grow something edible. Try fast-growing salad leaves for instant results, or hardy winter veg like kale, cabbages and leeks. Courgettes, beans and strawberries not only feed you but their flowers attract pollinators too.

### Healthy herbs

Herbs bring flavour, fragrance and history. Perennials like rosemary, sage, thyme or oregano need little care, thrive in small spaces and pots and don't mind a bit of neglect. Grow mint in a pot to keep it from taking over your entire plot and root supermarket basil cuttings in water for a steady kitchen supply all year long.

### Get physical

Gardening doubles as exercise – it burns as many calories as a brisk walk and improves strength and flexibility. Studies show that outdoor activity lowers stress and boosts mood so consider your garden a natural gym.

### Our hands in soil

Soil is alive with microbes that strengthen our immune systems. The Royal Society of Public Health notes that early exposure to these 'good' bacteria can build a healthy biome. Another excellent reason to dig in – just make sure you wash your hands afterwards!



## Create a Sensory Sanctuary

### Protective planting

Use hedging, shrubs, or climbing plants to soften noise and filter pollution, creating a cocoon of green calm.

### The sound of water

A bubbling fountain or simple water bowl with a solar fountain is a cost-effective way to add a soothing soundscape. Even the smallest pond will attract wildlife; just add water and your plot will come to life.

### Textures and tones

Grasses, bamboos, and seedheads bring movement and gentle rustling to create a distraction from street noise. Leave stems standing through the winter months to provide food for wildlife and allow frost to coat the seedheads for a winter display.

### Colour for mood

Embrace the green for a cool, relaxing and calming space and punctuate with soft grasses. Blue is one of the most popular flower colours and paired with purples and pinks, can create a calming and harmonious effect.

## Garden for the Planet

When you garden for yourself, you garden for nature too. Ponds attract birds and insects, frogs and damselflies. Pollinators will buzz into a planting scheme that spans the seasons, from the early spring bulbs and hellebores to late summer sedums, michaelmas daisies, cosmos and honeysuckle, while birds feast on crab apples, rowan and seedheads left standing.

Gardening connects all of us; to the soil, to each other and to the wider living world.

Come and be inspired by the wonderful range of gardens open through Scotland's Gardens Scheme, whatever kind of gardener you are, or even if you're not a gardener at all. There's joy to be had in gardens of all shapes and sizes.

[Scotlandsgardens.org](http://Scotlandsgardens.org)



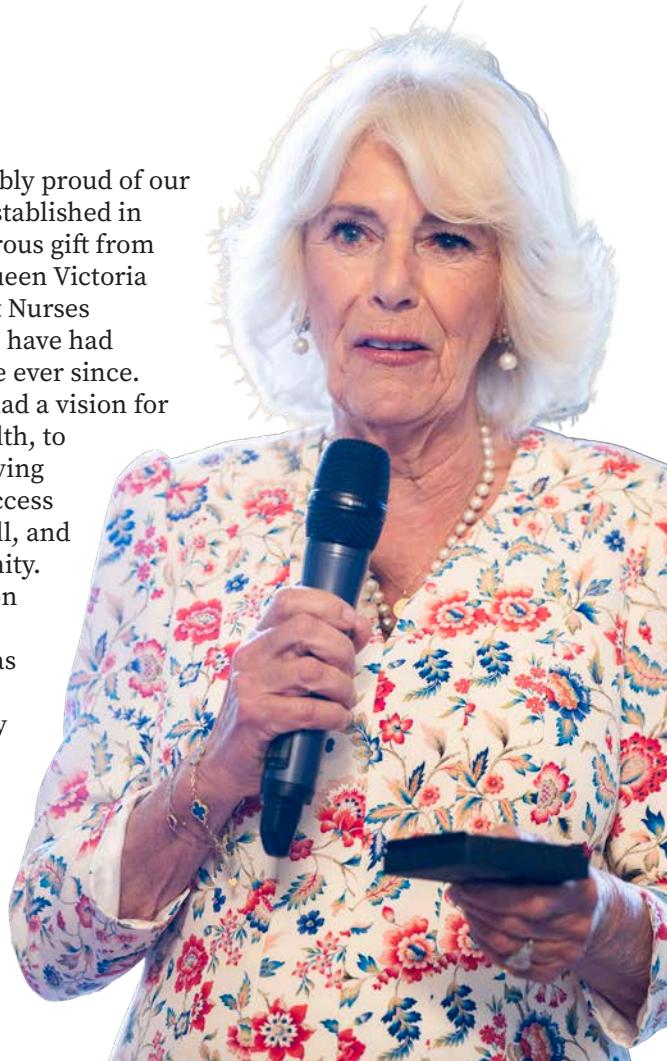
## Meeting our Patron

**We were delighted and very honoured that our Patron, Her Majesty The Queen, hosted a reception at the Palace of Holyroodhouse for the Queen's Nursing Institute Scotland.**

Her Majesty met current and former nurses, staff, trustees, supporters, and volunteers, and was presented with her very own Queen's Nurse badge by QNIS Professional Nurse Lead, Emma Legge. It was a great privilege to have had the opportunity to introduce our Patron to some of Scotland's community nurses and midwives, alongside some retired Queen's Nurses who trained with QNIS prior to 1969. We were also pleased to be joined by representatives from some of the organisations and charities we are proud to partner with, including Scotland's Gardens Scheme, Venture Scotland, and Chance2Change.

The buzz in the room was fantastic, and many of the guests were able to speak with Her Majesty and share stories about their work.

QNIS is incredibly proud of our long history. Established in 1889 by a generous gift from Her Majesty Queen Victoria to train District Nurses in Scotland, we have had royal patronage ever since. Our founders had a vision for promoting health, to enable those living in poverty to access care, to live well, and to die with dignity. This is a mission we continue today, and it was lovely to have the opportunity to thank Her Majesty The Queen for her continued support of our work.







# Queen's Nurse Updates



**Kirsty Cartin**

I guess what I'm most proud of this year is winning RCN Scotland Nurse of the Year 2025 in June. Being in a room full of remarkable nurses was awe-inspiring. Winning my initial category of Leadership was unexpected but going on to win overall Nurse of the Year was incredible. I'm proud to be a nurse, to be a Queen's Nurse, to be a social care nurse – and as we shift the balance from acute to community care, this seems like a pivotal achievement.



## Irene Scott

Since receiving my Queen's Nurse title in November last year, with the strapline 'Making Ripples in Preventative Healthcare', this has been a year of significant growth and progress. I take great pride in my role within the RSABI Health Hut initiative. What began as a simple idea – taking healthcare directly to farming communities – has developed into a trusted space where conversations flow naturally and individuals feel genuinely listened to.

Alongside a dedicated team of healthcare professionals, predominantly nurses, we continue

## Emma Watson

This year I felt honoured and blessed to complete my MSc in Mindfulness Studies at Aberdeen University receiving a distinction award. I would never have commenced on my journey if it wasn't for the beautiful insight given to me completing the Queen's Nurse Programme. The Queen's Nurse Programme invites you to take a deep dive into your inner soul and, not unlike mindfulness studies and the practice of meditation teaches you to go into the depths and the darkness and the struggles and come out the other end knowing more about who you are and what is emerging. Thank you so much for the QNIS for believing in me and helping me see my possibilities to help others as I continue my journey.

to deliver on-the-spot health checks, advice, and signposting at agricultural shows and events across Scotland. Hearing someone say, "I've not had my blood pressure checked in years", serves as a powerful reminder of why this work matters.

Over the past year, we have strengthened both our reach and impact. The range of health promotion campaigns offered at the Health Hut has expanded – all tailored to farming life – from sepsis awareness and oral health to the risks associated with energy drinks. A particularly engaging initiative has been the "baler twine" campaign, where waist circumference is measured using baler twine

# Queen's Nurse Updates



— a familiar, practical tool that resonates with farmers and sparks meaningful discussions about health.

It has been deeply rewarding to see farmers take proactive steps to improve their wellbeing: making lifestyle changes to reduce cardiovascular risk, booking GP follow-ups, and beginning treatment that could alter their long-term outcomes. Equally positive has been the growing openness among farmers in discussing blood pressure, general wellbeing, and mental health. These conversations are helping to break down stigma and normalise the importance of self-care within rural communities. Completing the Queen's Nurse Programme has been instrumental in enabling me to find my professional voice, lead with compassion, and appreciate the transformative power of a single conversation. It has also strengthened my confidence to represent and advocate for rural health at both local and national levels.

This confidence has been reflected in opportunities to share the work of the Health Hut through several high-profile platforms. I was honoured to speak at the SHARP Conference, presenting on this rural health innovation. The Health Hut's work has also been featured on BBC Reporting Scotland and BBC Radio Scotland, offering valuable opportunities to raise public awareness and contribute to national discussions on rural health and wellbeing.

Through the Queen's Nurse Programme, I have developed a firm belief that my voice, and the voices of those delivering grassroots healthcare, deserve to be heard in policy arenas. I have learned to articulate clearly the vital connections between farmers' wellbeing, food security, and the sustainability of rural communities.

By engaging with policymakers, rural leaders, and partner organisations, I have shared real stories from practice: farmers taking control of their health, the measurable benefits of preventative care, and the importance of meeting people where they are. These conversations have fostered greater recognition of the Health Hut — not simply as a service, but as part of a wider movement for meaningful, sustainable change.

Gaining the confidence to represent this work publicly and advocate for the farming community's health has been one of the most rewarding outcomes of the year. What began as a local, hands-on nursing initiative has evolved into a platform capable of shaping perspectives and influencing policy at a national level.



“When you create a difference in someone's life, you not only impact their life, you impact everyone influenced by them throughout their entire lifetime. No act is ever too small. One by one, this is how to make an ocean rise.” – Danielle Doby.

# Queen's Nurse Updates

## Kerry Anderson

**This year I have been actively involved in a co-produced research project funded by the RCN Foundation.**

The UCAN project: Driving Equity in Urgent and Emergency Care for People with Learning Disabilities began as a successful bid to the RCN Foundation, responding to clear inequities in urgent and emergency healthcare access for people with learning disabilities.

The three-phase project set out to answer:

- How do people with lived experience access urgent and emergency care?
- How does this affect health inequalities and quality of life?
- What would an effective tool look like to support equitable access?

Working in collaboration with Consultant Nurse Colleagues from England, Northern Ireland and Wales, and people with lived experience, we partnered with Keele University which brought academic and research expertise.

UCAN supported people with lived experience to consider what they need to make it easier to access urgent and emergency healthcare and our co-producers highlighted the need for an educational tool.



The creation of the new careLeD tool represents the culmination of research, stakeholder engagement and collaborative design thinking. The careLeD tool provides practical, user-friendly guidance on urgent and emergency care. It includes:

- Clear advice on who to call in urgent care or emergency services based on real-life scenarios.
- Preparation activities such as creating an emergency bag or a social story (a personalised, visual guide to help someone understand and respond appropriately in a health crisis).
- Accessible communication principles: easy-read formats, visual supports, and multi-modal presentation methods.

Its interactive design allows users to learn at their own pace, revisit sections, and build confidence through repeated exposure.

For our launch in July 2025, we were fortunate to have actor, author and activist Tommy Jessop deliver the keynote speech, bringing a valuable lived experience perspective to the event.

## Fran Nice

I have completed my Masters research study on "Exploring the transition experiences of recently qualified health visitors to understand their support needs and future career aspirations - an interpretative descriptions study".

I was delighted to pass my Viva examination with very minor

considerations. The initial idea for the study came from my Queen's Nurse project.

I now hope to implement the study findings in practice to help to ensure a strong and well-resourced health visiting workforce which can meet the increasing needs of children and families.



# Queen's Nurse Updates

## Jess Davidson

**In August 2025, as a RCN Fellow and Scottish QN, I found myself making a film in the Imperial War Museum (IWM) to link nursing to its powerful exhibition, 'Unsilenced: Sexual Violence in Conflict'. Alongside colleagues from RCN and IWM, our purpose was to explore the role of nurses caring for those affected by sexual violence and our responsibility to bear witness.**

Nurses have a uniquely trusted position in society and deliver services that respond to sexual violence, they gather evidence directly following the incident. This does not have to stand alone but is embedded in the process to protect the chain of evidence alongside emergent healthcare needs. If this evidence is lost though, it can be lost forever. In conflict zones, nursing presence can be the difference between silence and justice, between ongoing trauma and the first step toward healing. Their role is essential in addressing the needs of survivors and building accountability systems in post conflict recovery.

In a world that is increasingly hostile toward women and girls and routinely using sexual violence, including homicide, as a weapon of war, nursing is needed more than ever to bear witness and offer a humanitarian geo-political answer.

Sexual violence against women and girls today, is as much a threat to the global economy as microbial illness. In armed conflicts, humanitarian conflicts and domestic crisis situations, nurses are often the first health professionals to encounter survivors of sexual violence. Their role places them in the frontline of medical, nursing, psychological and humanitarian response. As a result of this, nurses frequently become key witnesses to the immediate and long-term impacts of these crimes including war crimes.

In this unique collaboration between the Royal College of Nursing and The Imperial War Museum, we sought to make this link explicit- as forensic nurses help or lead on documentation of injuries, trauma and distress as well as providing contemporaneous notes that can later serve as evidence in legal or humanitarian investigations. We often advocate for survivor safety, confidentiality

and access to services, especially in settings where provision is weak or compromised.

Being witness to violence can provide public health insights that help build broader protection and response strategies. I was very keen to make this link to demonstrate how powerful nursing is for our populations. If this testimony is lost, or not prosecuted, how can states and citizens be held accountable?

For all of us in 2025, we have heard daily about extreme sexual violence in the news and this can trigger very intense and real emotional reactions in us all- including helplessness and moral distress. It can activate old memories and fears; it can become overwhelming or numbing.

What we can do as nurses is take positive action to be prepared for disclosure and be learned about consent, trauma responses, survivor experiences, and how our systems handle sexual violence. We can call out rape myths, and challenge harmful attitudes in daily life. We are not meant to process this alone, we can join supportive communities in our workplace and build collective progress.

I experienced overwhelming sorrow when we finished filming. I was desperate to acknowledge, embrace and convey the collective pain from past victims and survivors, and that sexual violence is the cheapest weapon of war that exists. I felt so sad that people had suffered agony and continue to do so. There is hope, there must be hope. Sometimes this comes from the testimony of survivors, their fierce altruism- we exist for them, and we must shine the light for them and alongside them, even in the darkest places and the darkest hours.



# Queen's Nurse Updates

## Lorna Dhami

**Along with fellow Queen's Nurse Inger McGowan, I have been working on what can be done to encourage pre-conception/inter-contraception health conversations and advice. This is an area of healthcare that I am very passionate about and in general isn't currently being addressed. Initially, we volunteered to be Steering Committee members for Healthier Pregnancies, Better Lives (HPBL) which at the time was sponsored by QNIS.**



It was the beginning of a shift in traditional thinking that expected antenatal care to prevent problems with pregnancies and birth. Instead, we learned antenatal care can be too little too late and that significant harm can be prevented or lessened if health and lifestyle risks are identified and addressed before conception. Evidence is clear there is great benefit to changing women's health before and between pregnancies.

Both Inger and I continued to volunteer along with a small HPBL workgroup even when grant funding ended. The immediate work focused on a strategy for identifying women thinking about a possible pregnancy and those who wanted to prevent a pregnancy and needed contraception, based on an initiative that spread across the US called One Key Question® (OKQ). In general practice and a variety of other service areas, healthcare professionals and providers routinely ask women about women's pregnancy intentions, thereby enabling them to receive relevant advice on suitable steps they could take to support their intentions.

Inger and I developed a clinical pilot that adapted OKQ to test in Scotland based on what women and their practitioners told us in HPBL's listening sessions. We developed the question and protocol. The pilot was so successful and the evidence so strong that Scottish Government Maternal and Child Health and Wellbeing has adopted the approach to improve pregnancy outcomes for both the mother and child. The Scottish Government has worked swiftly to develop a plan to scale and spread this approach across Scotland. It is called Scotland's OK Question. The focus is on better preparation for a healthy pregnancy for those thinking about a pregnancy now, in the future, or using contraception until a woman is ready to become pregnant.

We know from the listening sessions done by the Healthier Pregnancies, Better Lives project that women want to be asked the question, and that they want to be given appropriate advice, so this initiative aims to set out how health and social care professionals can routinely approach this issue and offer preventative information and services and early intervention where appropriate. This could have a huge impact on a woman's health and the health of her unborn baby or child.

We have been utilising our community nursing experience advising development of this initiative to make sure that it is workable in practice and to ensure that appropriate training is given so that anyone asking the question does so sensitively and without bias. There have been some very promising pilots undertaken, one in a 'deep end' GP practice and one led by Inger in the homelessness practice where she works in Edinburgh. NES is also involved and will soon be introducing training on Scotland's OK Question for new GPNs and their Practice Assessors.

Our vision is that in the next five years we want every woman of reproductive age to be routinely asked about their pregnancy intentions, including through opportunistic practitioner, healthcare provider, and social care contacts. We want women to feel comfortable and confident discussing their pregnancy desires and want to see these kinds of discussions normalised within communities and societies by 2030.

# QNIS Awards for Long Service

We were delighted to have been able to support and attend a number of Long Service Award events in 2025. In total, certificates were awarded to 110 community nurses and midwives who have given 21 years or more of service to the community. These events recognise the invaluable contributions of healthcare professionals who have devoted their careers to the wellbeing of their communities.

**Those who received their award in 2025 are listed below. Many congratulations to them all.**



Karen Aitken	Fiona Doig	Mary Ann Maciver	Diane Roberts
Sheona Ballanytne	Laura Douglas	Kevin MacKenzie	Joanne Scott
Gillian Barrett	Yvonne Duncan	Ann Macleod	Laura-Jane Shanahan
Kath Baxter	Dorothy Duncan	Marion MacRitchie	Lynn Shepherd
Anne Black	Mike Easton	Fiona McConnell	Karen Smith
Sharon Brown	Jackie Fitzpatrick	Lesley McDonald	Angela Smith
Jacqueline Brown	Elaine Fleming	Dorothy McFarlane	Eileen Smith
Aileen Brown	Lyndsay Forbes	Barbara McGlashan	Samantha Smith
Gill Buchan	Dorothy Fraser	Susan McGregor	Alison Sneddon
Pauline Burke	Pam Goodall	Blythe McGrory	Dawn Stewart
Christine Burrows	Angela Gorman	Joanie McKay	Anne Stirling
Anna Busse	Cindy Graham	Sinead McLaughlin	Lynne Summers
Claire Cameron	Kerry Hamilton	Fiona Mercer	Virette Swift
Shirley Campbell	Denise Harrison	Jeanette Millar	Gwyneth Thom
Fiona Campbell	Karen Hathaway	Janice Monro	Jane Thomson
Alixandra Cannon	Carole Hatten	Elizabeth Newton	Shirley Thomson
Angela Chalmers	Beverley Hervey	Marie O'Hare	Nicola Torrance
Lesley Chalmers-Richardson	Lesley Inglis	Karen Oliver	Pamela Urquhart
Jane Christie	Louise Johnstone	Katarzyna Pacyk	Brenda Wade
Elaine Clark	Darren Karrim	Ray Pert	Elma Walley
Gail Clarke	Carol Keddie	Heather Petrie	Marie Watt
Leigh Combe	Sheila Kelly	Alison Prentice	Gillian Wilkie
Tracey Corbett	Ruth Lamond	Leesa Radcliffe	Jane Winch
Jane Coward	Dianne Law	Lesley Rafferty	Jill Wright
Moira Crawford	Alison Lawrence	Sharon Ramsay	Claire Young
Belinda Cunningham	Kay Lees	Jane Reid	Karen Younger
Joanne Currie	Marie MacAninch	Jillian Richmond	
Lindsay Dailly	Kerry MacDonald	Gayle Riley	



# Qnis Awards

**This year we were delighted to award the title of Queen's Nurse to 18 community nurses from all over Scotland. Their expertise spans many specialties.**

Each new Queen's Nurse received a certificate signed by our Patron, Her Majesty The Queen, a badge designed by Orkney silversmiths Ortak, and a specially commissioned Harris Tweed sash.

At this year's awards, we celebrated: nine years of the Queen's Nurse Development Programme, 192 contemporary Queen's Nurses in Scotland, and 136 years of Queen's Nursing.





# Relational Care



**Relationships are at the heart of community nursing and midwifery, and indeed perhaps all health and social care. The word 'relational' is now making its way into policy documents which is great. But as a rule, the education and training routinely available doesn't include very much about how relationships develop, or what 'relating' actually entails, or how we all learn to do it. It is more likely to focus on for example, generic communication and listening skills, how to have difficult conversations, and on initiatives such as, 'what matters to you'. It might also include reference to service delivery being organised to promote relational continuity of care i.e., people being able to see the same health professional over time e.g., midwives and GPs.**

At QNIS, when we offer workshops and events focused on relational care, we mean focusing on understanding human dynamics in work settings. We mean learning about the core theories and concepts that help us make sense of states of mind and behaviour we might otherwise find difficult to understand. We think about the emotional impact on professionals of being alongside people in pain and distress, and create awareness of professionals' own contributions to human dynamics in work settings. We aim to help participants cultivate the

special kind of attention, patience, and consistently reflective curiosity that relational approaches to care require.

For all of us, it's our early experiences that shape our later relationships. We all have templates that influence how we relate to other people; we have a set of unconscious assumptions and feelings about other people based on how we were treated and cared for as babies and young children. Understanding what has gone before can help us understand what is needed in the present.

Relational approaches to care are especially relevant in contexts of poverty and adversity. As community nurses and midwives, we can't immediately fix all the housing problems or undo all the discrimination faced by marginalised communities – though those ambitions shouldn't simply fall off our radar. We can't go back in time and erase the traumas people experience. But relational approaches to care can help us make and sustain the kinds of human connections that might stop people falling all the way into an abyss of despair. They can help us make someone feel seen, understood, and listened to, even for a few moments at a time. Every relationally skilled encounter has the potential to contribute something good and valuable.

# Relational Care

## Relational care in the context of suicidal thinking and suicidal crisis

In October 2025 we delivered a one day in-person event focused on relational care in the context of suicidal thinking and suicidal crisis. This event was funded by QNIS and Suicide Prevention Scotland. We were joined by two excellent speakers Dr Rachel Gibbons and Dr Adam Burley, as well as Dr Celeste Foster who supported us with evaluation.

The day provided space to consider how relational concepts can help make sense of suicidality for those affected by it, even when it is such a shattering experience. Participants also spent time reflecting on the impact of suicide on the bereaved, including clinicians.

The overall focus was on understanding how all of this can make it more difficult for professionals to sustain therapeutic engagement with those who are suicidal. And importantly, that there are at least some things we can do to increase our capacity for the kind of warm, thoughtful, open-hearted relational connections that are most likely to be helpful for people experiencing suicidal crisis. For example, if someone is struggling to

put overwhelming feelings into words, carefully supporting their ability to mentalise and symbolise can sometimes help to reduce a person's urge to harm themselves.

Rachel talked about the significance of population-level public health approaches to preventing suicide, such as reducing access to means of self-harm and tackling wider socioeconomic conditions that give rise to such distress. She also highlighted that suicide can be thought of as a relational event driven by multiple, complex, and often unconscious factors that we do not yet properly understand.

Some of the feedback from participants highlighted their appreciation of space to explore the meanings and impacts of suicidality, and to make sense of their own emotional experiences at work, as well as deepening their understanding of the emotional experiences of others: people seeking care, colleagues, managers, and the human dynamics that influence how organisations function.

These ways of thinking and working have been shown to help increase practitioners' compassion, professional optimism, and confidence, and to reduce frustration and burnout.



# Making a difference

## How funders, legacies, and donations support our work

**The generosity of donors has enabled QNIS to educate, support, and develop community nurses and midwives throughout its history. We were founded with a donation to celebrate the Golden Jubilee of Queen Victoria, and we have continued thanks to the generosity of generations of fundraisers, garden openers, and individuals.**

Our founding charter clearly states that Queen's Nurses are there to care for the most disadvantaged in our society, the term at that time being the 'sick poor'. Today we continue to put addressing inequity at the heart of our work as you will see throughout this review of the year.

We are incredibly grateful to the charitable trusts and organisations who have helped to fund our work in 2025:

- **Vivensa Foundation**
- **The General Nursing Council**
- **Fife Health Charity**
- **LGT Private Banking**

### How can you help?

QNIS is a unique charity with big ambitions, and we need your help to realise these. We are fortunate to have some income from an investment portfolio, but that only covers a proportion of our charitable expenditure. We need to fundraise to cover the costs of running our programmes.

With your donations, we can support and develop Scotland's community nurses and midwives, helping them to find innovative ways of improving the health of those they serve in their communities.

### There are a number of ways that you can support our work:

#### Individual or regular donations

You can support us by making either a regular or one-off donation. You can do this by scanning this QR code:



Scotland's Gardens Scheme has been our funding partner since 1931, and we remain hugely honoured to be supported by this remarkable group of gardeners.

If you'd like to donate, but prefer not to do so electronically, please contact the office on 0131 229 2333.

#### Leave a gift in your will

After you have ensured your family is looked after, you might like to consider leaving a gift to QNIS. By leaving a sum of money in your will or a small percentage of your estate, you can help community nurses and midwives continue to make a real difference to people's lives.

#### Remembering a loved one

Supporting QNIS in memory of a loved one is a touching way to celebrate their life and create a lasting legacy that will help to improve the health of people across Scotland.

The family of Mary Dalgleish made a much appreciated donation of over £600 to QNIS having asked for contributions at her funeral in lieu of flowers. Her name will be added to our Celebration Wall.

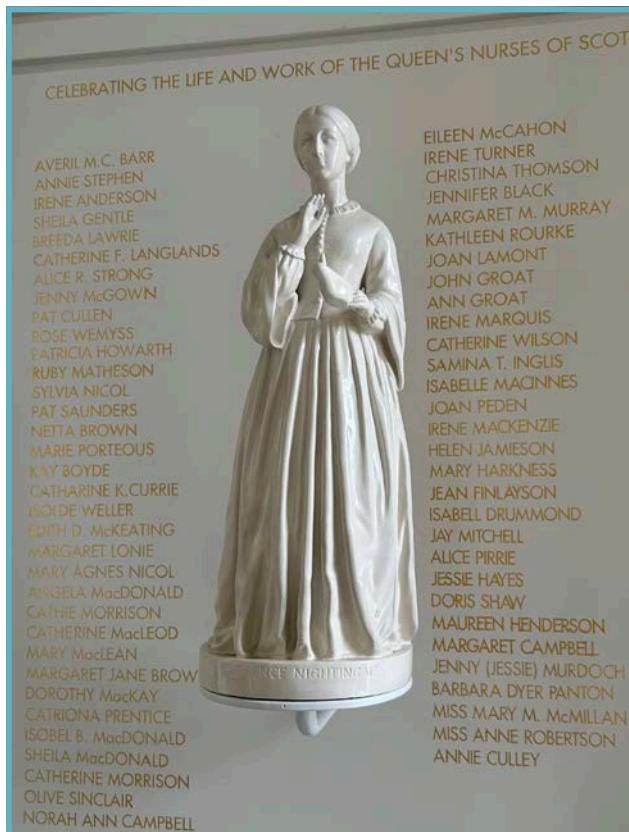
#### The Celebration Wall

The QNIS Celebration Wall in the foyer at Castle

# Making a difference

Terrace was created by Roz Barr whose mother Averil was a Queen's Nurse. It contains the names of retired Queen's Nurses and allows the opportunity for all retired Queen's Nurses both living or in memory to be remembered and celebrated.

If you would like your name added or have a name that you would wish to add either in memoriam or as a gesture of friendship, we ask for a minimum donation of £100 to cover the cost of inscribing.



This year we were delighted to receive a generous donation of £300 from Fiona Higgins in memory of her mother, Marna. Her name will be added to our Celebration Wall.

## Corporate support

There are a number of ways your staff teams can work with us for mutual benefit. You could choose us as your charity of the year, donate a percentage of your profits on a particular product to us, take part in an event on our behalf, or partner with us on a project.

## Events

Why not get a group of friends or colleagues together and take on a challenge whilst raising funds for QNIS? There are lots of organised events taking place across Scotland such as the Kiltwalk, Edinburgh Marathon, and the Scottish 10k, or why not organise your own challenge and raise funds for QNIS?

If you are interested in finding out more about how you can support us, please visit our website or contact the QNIS office: [office@qnis.org.uk](mailto:office@qnis.org.uk) or 0131 229 2333.

[www.qnis.org.uk/support-us](http://www.qnis.org.uk/support-us)



# Retired Queen's Nurse News

## Annual Gathering & Holiday 2025

The sun was out in Pitlochry in April at the QNIS Annual Gathering and Holiday, which took place for a second year at Fisher's Hotel. Around 50 retired Queen's Nurses, volunteer visitors, staff, Trustees, and guests came together to renew friendships, share memories, and enjoy a delicious lunch.

The Annual Gathering is an opportunity for our retired community to come together and enjoy spending time with others. In addition, around 20 of the retired Queen's Nurses stayed on in Pitlochry for a holiday of up to four nights, offering an extended period of companionship with other retired Queen's Nurses.



### Staying in Touch update

Our Staying in Touch Coordinators, Carol Crowther and Alison Jarvis, work together to connect with and organise events for our community of retired Queen's Nurses (rQNs), who trained with QNIS prior to 1969.

**Here they give us an update on the events that took place in 2025.**

What an exciting year it has been for us all with plenty of opportunities to reflect and make new memories whether it be at the Annual Gathering and Holiday in Pitlochry, the afternoon at Holyrood Palace meeting with our Patron, Her Majesty The Queen, or at one of the local gatherings. As the photographs show, all events were joyful.

We were very fortunate this year to have recruited four new volunteer visitors and they, along with

some of our other visitors, supported Alison and Carol at the local gatherings. With increased opportunities for connection, we look forward to keeping in touch with even more retired Queen's Nurses in the coming months.



# Retired Queen's Nurse News

## Celebration Wall

This year several families and retired Queen's Nurses have asked for names to be added to our Celebration Wall. This is a wonderful thing to be able to do and allows families and friends to remember individuals both living and no longer with us.

We have welcomed several families to Castle Terrace in the past year to see first-hand the names on the wall, with these visitors coming from near and far including a visitor from Jamaica who, along with her family, had time to meet with staff and reminisce about her time as a Queen's Nurse in Scotland.



## Local gatherings

Local gatherings for retired Queen's Nurses have taken place across Scotland over the past year, with additional events planned over Christmas and into the new year. We were delighted to see so many of you at these events.

Events took place in Inverness in September, at an event hosted by Angela and Elsa, and in Inverurie early in October hosted by Linda and Ally.

The Edinburgh event, and the Glasgow event, both hosted by Alison and Carol were also held in October.

These events, organised by QNIS, are an opportunity for friends and former colleagues to catch up, reminisce and make new connections.

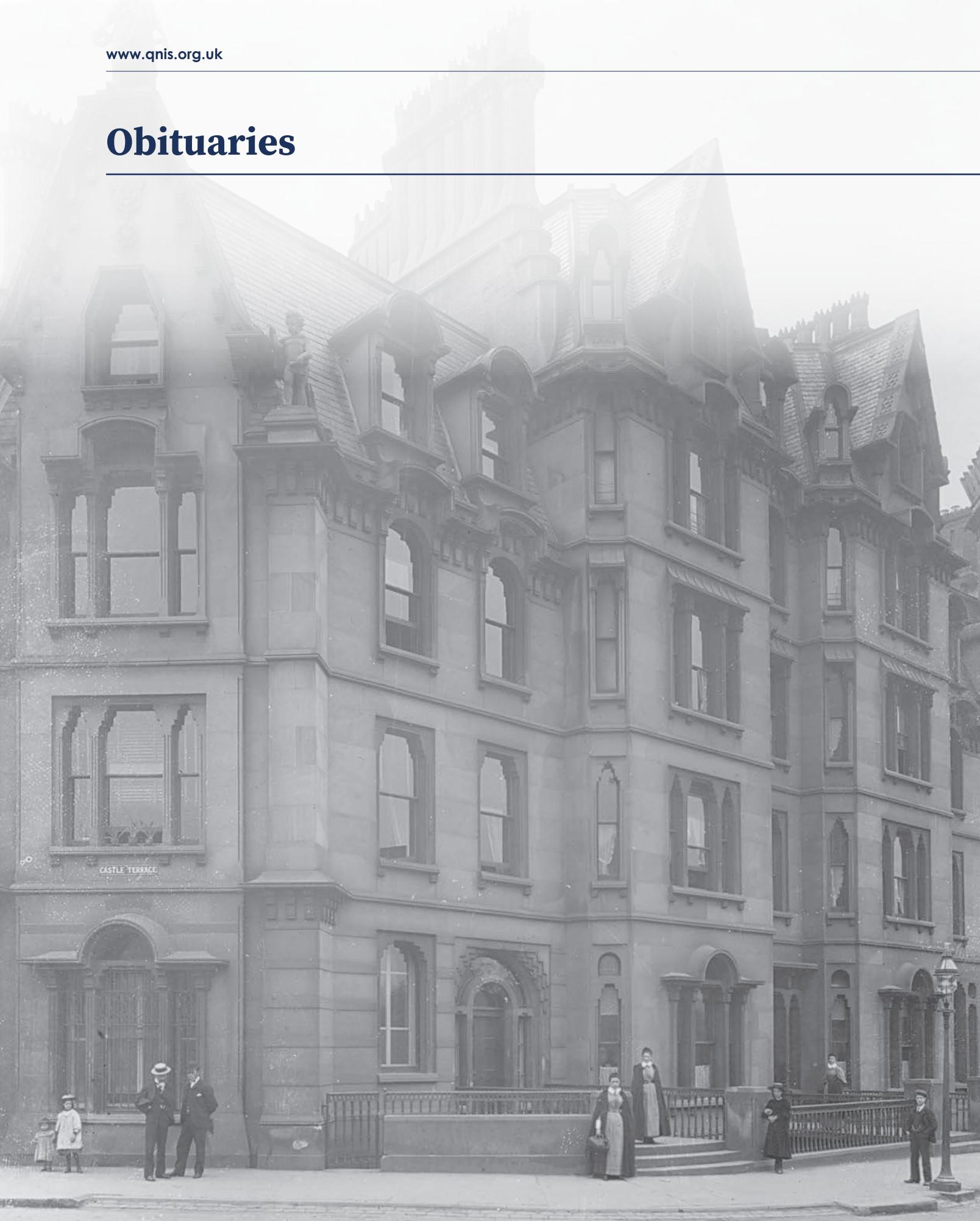


## Happy Birthday Mary

This lovely picture shows retired Queen's Nurse Mary Mutch who celebrated her 102nd birthday and we hear that she thoroughly enjoyed her day.



# Obituaries



# Obituaries

Please take a moment to remember our friends and colleagues from days gone by. We have been notified of the passing of -

## Margaret Burnett

Rumbling Bridge

23rd May 1934 - 20th December 2024

Margaret did her training at West Fife Hospital in the early 1950s. She worked in Canada, and Australia also around Britain gaining experience from all the hospitals she had been working in. She eventually came home to Dunfermline in the late 1960s, applied to train as a District Nurse at Castle Terrace and loved the job. She obtained a position in Arbroath and for the next 50 years lived and worked there. Margaret was a very determined lady who knew what she wanted from life and although nursing happened almost by accident it could not have been a better outcome for her.

awarded the gold medal for excellence in nursing and midwifery at that hospital.

After Glasgow, Mary Kate moved to Cumnock to be the local District Nurse and Midwife. She first lived in the Nurses House in Netherthird and quickly made friends that would last a lifetime.



## Catriona Isitt

Inverness

30th January 1940 - 1st January 2025

Friends who knew and worked with Catriona reflected on their memories of her.

Catriona worked as midwife and District Nurse on Skye for many years. She always enjoyed her work. Catriona was originally from the Isle of Lewis and understood island life well and the challenges it had. One of our visitors remembers Catriona and said that when she worked in the hospital, she recalls Catriona coming to see new mums, and that she was always good fun.

Mary Kate got married on 26th March 1964 to Hector Marr in St Andrew's Church, Cumnock. They moved to Craigens early in 1965 where Mary Kate remained in the same house for the remainder of her life.

Hector and Mary Kate had their only son, Alistair, in April 1965, following which Mary Kate had a break from nursing. She returned to the same role a number of years later.

Mary Kate loved being a nurse and caring for others. She did it without expectation of reward or favour. She was very humble and extremely well-respected. She made countless home deliveries both in Glasgow and Cumnock and Muirkirk district in Ayrshire. Several of those babies may not be alive today without her timely intervention.

Following an early retirement due to a back injury, Mary Kate turned her time to her other passion in life, her garden - which was always beautifully tended.

Mary Kate left the world a much better place for having been in it. Not just for the loving family and friends she leaves behind but for the community she served and nursed quite literally from the cradle to grave. She was an outstanding nurse, friend, sister, mother, grandmother and great grandmother.

Mary Kate passed away on 27th April 2025 in Cumnock Community Hospital following a brief illness and was laid to rest back on the Isle of Harris as per her wishes.

## Mary Kate Marr (nee MacSween)

Cumnock

29th January 1933 - 27th April 2025

Mary Kate was born on Scarista, Isle of Harris in the Western Isles to Alistair and Johan MacSween. Mary Kate was one of eight children, survived now only by her brother Donald John.

In 1951, Mary Kate left the island at 18 to study nursing in Glasgow. This move shaped the next several decades.

Mary Kate trained at Oakbank hospital (Western District Hospital) as a nurse and midwife and this was where she became a Queen's Nurse. She was

# Obituaries

## Myra Mercer

Larkhall

17th December 1932 - 1st June 2022

Myra Smith Mercer started her nurse training at Falkirk Infirmary on 6th February 1952. From a young age she always wanted to be a nurse. As a teenager she started to volunteer with the Red Cross, which she continued to do throughout her life. She worked at Falkirk Infirmary until she married in 1962 and moved to Bellshill. She qualified as a Queen's Nurse, and she was always honoured to say she was a Queen's Nurse.

When she moved to Bellshill she became the District Midwife with Bellshill Maternity Hospital. She loved this role until she left in 1967 to start her family. In 1980 she returned to Nursing in the role of

District Nursing Sister and Practical Work Teacher in the south side of Glasgow. This role was so important to her as she was teaching the next generation of nurses and sharing her wealth of experience with them.

Myra retired in 1997 and missed nursing every day; she loved talking about her nursing career when she attended any hospital appointments and where she could, she would help with her wealth of knowledge.

She was diagnosed with Alzheimer's Disease in 2013 and remained at home until her passing.

Myra's husband passed away five years prior to her. They leave behind two children, a son-in-law and two granddaughters.

We have also received notification that the following Queen's Nurses passed away.  
Please join us in remembering:

## Cathy (Catherine) Anderson

Glasgow

20th July 1938 - November 2024

## Anne Culley

Loans

15th April 1938 - 15th October 2025



## Fiona Hogg

Truro

27th September 1932 - 30th November 2024

## Mary K Keith

Inverurie

24th February 2024

## Marion (Morag) Cunningham

Scalpay

30th June 1929 - 28th January 2025

## Flora Kelsey

Edinburgh

5th April 1926 - 6th May 2025



## Mary Dalgleish

Lockerbie

17th June 1927 - 29th October 2025

## Catherine MacKenzie

Edinburgh

1st November 1932 - 27th October 2025

## Margaret Gisbey

Balloch

1st September 1932 - 2nd April 2025

## Elsie (Elizabeth) MacKenzie

Wick

27th February 1932 - 7th August 2025

## Sarah Gordon

Glasgow

13th May 1930 - May 2025

## Kate Mackay

Lochcarron

20th July 1930 - 25th November 2025

## Marna (Janet) Higgins

Glasgow

16th September 1943 - 1st August 2025

## Christine McNeil

Cumbernauld

12th June 1941 - 13th July 2025





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