Borders NHS Board



STATUTORY AND OTHER COMMITTEE MINUTES

Aim

To raise awareness of the Board on the range of matters being discussed by various statutory and other committees.

Background

The Board receives the approved minutes from a range of governance and partnership committees.

Summary

Committee minutes attached are:-

Strategy & Performance Committee: 01.05.14

• Audit Committee: 16.06.14

• AH&SC Integration Shadow Board: 30.06.14

Recommendation

The Board is asked to **note** the various committee minutes.

Policy/Strategy Implications	As detailed within the individual minutes.
Consultation	Not applicable
Consultation with Professional	Not applicable
Committees	
Risk Assessment	As detailed within the individual minutes.
Compliance with Board Policy	As detailed within the individual minutes.
requirements on Equality and Diversity	
Resource/Staffing Implications	As detailed within the individual minutes.

Approved by

Name	Designation	Name	Designation
Calum Campbell	Chief Executive		

Author(s)

Name	Designation	Name	Designation
Iris Bishop	Board Secretary		

Borders NHS Board

Present:



Minutes of a meeting of the Strategy & Performance Committee held on Thursday 1 May 2014 at 12.30 in the Board Room, Newstead

Mr C Campbell

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	Mrs K Hamilton	Mrs E Fleck
	Mr D Davidson	Mrs J Davidson
	Cllr C Bhatia	Mrs J Smyth
	Mrs I McLaren	Dr S MacDonald

Mr I Raine

Mrs J McLaren Dr S MacDonald Dr D Steele Mrs C Gillie Mrs K McNicoll Mr D McLuckie Mrs P Alexander Dr E Baijal Mrs E Cameron

Dr S Mather

In Attendance: Miss I Bishop

> Mr P Lunts Mrs J Stephen Mrs P Walls Mrs H Irwin Mrs A Wilson Mrs C Oliver SCN M Douglas Mrs K Smith

1. **Apologies and Announcements**

Apologies had been received from Dr Hamish McRitchie, Mr Alasdair Pattinson and Dr Cliff Sharp.

2. **Declarations of Interest**

The Chair sought any verbal declarations of interest pertaining to items on the agenda.

Mr John McLaren advised that as a member of the Galashiels Community Council he had a non pecuniary interest in the Pharmaceutical Plan item on the agenda.

The STRATEGY & PERFORMANCE COMMITTEE noted the interest.

3. **Minutes of Previous Meeting**

The minutes of the previous meeting of the Strategy & Performance Committee held on 6 March 2014 were amended at page 3, paragraph 11, line 2 delete "winder" and replace with "winter" and page 4, last paragraph, line 1 delete "currently" and with those amendments the minutes were approved.

4. **Matters Arising**

The STRATEGY & PERFORMANCE COMMITTEE agreed that patients/carers attending meetings of the Committee would in future not be personally identified.

The STRATEGY & PERFORMANCE COMMITTEE noted the action tracker.

5. Patient and Carer Stories

Mrs Evelyn Fleck reminded members that they frequently enquired about improving attitudes and behaviours of staff in response to complaints. Mrs Fleck had previously advised the Board about Care Behaviours Assurance System (CBAS) and the presentation before the Board was an opportunity to understand the use of a key tool sponsored by the Scottish Government. Senior Charge Nurse (SCN) Mrs Muriel Douglas, Kelso Community Hospital spoke of the implementation of CBAS and how it had been received by patients and staff. She highlighted the benefits to patients, staff and herself as an SNC of 40 years registered nurse experience. Discussion focused on patient feedback and learning and training for staff.

Mrs Fleck advised that 13 wards had received CBAS training and data on the improvements made had been collected. Mrs Kim Smith confirmed that the achievements of the programme would be reviewed in support of the next roll out across the wider system.

To clarify Mrs Fleck confirmed that all 4 Community Hospitals, 7 wards within the Borders General Hospital and 2 wards within the Mental Health Service had received training in the application of CBAS.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the patient stories and the application of CBAS in Kelso Community Hospital.

6. NHS Borders Pharmaceutical Care Services Plan 2014

Dr Sheena MacDonald introduced and latest version of the pharmaceutical care services plan and Mrs Alison Wilson gave an overview of the revisions to the plan since the previous version including oxygen provision and national services.

Discussion focused on the interpretation of "high deprivation" and the definition of "good public transport" given some areas of Borders remained remote, as well as rota provision in parts of Borders, clinical qualifications and registration, the quality of premises and their suitability for planned future services and national influences on pharmacy practice. Other issues highlighted included accessibility, equity and Nalaxone provision.

Dr Sheena MacDonald assured the Committee that the Borders Emergency Care Service (BECS) functioned out of one site at weekends and had peripatetic services that were fully staffed for the out of hours periods.

Dr Stephen Mather enquired if the needle exchange was solely for the provision of clean needles or also provided a disposal service. Mrs Wilson confirmed disposal was part of the service.

Mrs Pat Alexander enquired about the measures undertaken to ensure a service was adequate. Dr Doreen Steele advised that that requirement was determined by the Pharmacy Practices Committee rules and she outlined the process that was followed.

Cllr Catriona Bhatia enquired about cross border services and their impact on pharmacy services provision in Scottish Borders. Mrs Wilson commented that there would be some cross border provision however it was not reflected within the pharmaceutical care services plan.

Mr David Davidson recalled that the Chief Pharmaceutical Officer for the Scottish Government was to be invited to a Board session to discuss "Prescription for Excellence". Dr MacDonald confirmed that the session had been deferred whilst work continued on prescription for excellence locally.

The **STRATEGY & PERFORMANCE COMMITTEE** approved the plan.

The **STRATEGY & PERFORMANCE COMMITTEE** agreed to receive a presentation at a future Board Development and Strategy session on the next review of the Pharmaceutical Care Services Plan with input from Dr Steele on the role of the Pharmacy Practices Committee and the mapping of deprivation, accessibility and the impact of cross border provision on local services.

7. Unscheduled Care

Dr Sheena MacDonald gave an informative presentation on unscheduled care and highlighted the issues surrounding the GP out of hours (OOH) service, Hospital at Night and the vulnerability of rotas. Key elements of the unscheduled care programme included community hospitals medical cover, trainee dependency of the OOH rota, opportunities to redesign unscheduled care in a person centred, safe and effective way. In regard to next steps Dr MacDonald confirmed that six projects had been commenced. She further advised that there were difficulties with the provision of unscheduled care across Scotland.

The **STRATEGY & PERFORMANCE COMMITTEE** agreed that a presentation on Unscheduled Care be provided to the Shadow Integration Board ahead of April 2015.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the presentation.

8. Health Promoting Health Service

Mrs Pippa Walls briefed the Committee on a marketing plan to support the national initiative "Health Promoting Health Service". Mrs Walls spoke of the strategy, marketing campaign, strapline, utilisation of social media, various marketing tools for patients and visitors, media and the wider community as well as role models.

The Committee discussed the provision of an exit strategy or continual renewal of materials to keep the programme fresh and at the forefront of public interest, as well as the involvement of staff and the need for good role models.

Mrs Edwina Cameron suggested exploring developing partnerships nationally. Mrs Jane Davidson suggested it would be an opportunity to source additional support and funding. She further commented on raising awareness and engaging with the forthcoming national Patient Safety campaign.

Dr Doreen Steele commented that Border Sport and Leisure Trust would be a natural partnership to formulate in the programme.

Mrs Karen McNicoll advised that the Area Clinical Forum had taken a special interest in the programme and how to sponsor the work. With regard to the Allied Health Professionals Advisory Committee she advised that they were focused on the theme of physical activity.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the update and the national initiative and marketing plan.

9. Twelve Month Report on Efficiency Savings Programme to end of March 2014

Mrs Carol Gillie gave an overview of the 2013/14 efficiency savings report advising that the target of £4.8m had been achieved. In addition to the cash releasing programme non cash releasing schemes were progressed resulting in overall increased efficiency and productivity of 3%. Mrs Gillie detailed the programmes and projects that had contributed to the efficiency savings target being met, highlighting the falls project work.

Mr David Davidson enquired about any particular areas of challenge for the forthcoming six month period. The prescribing budget was highlighted as a particular area of challenge for financial efficiencies.

In regard to the integration agenda it was noted that during the shadow year aligned budgets were being established in preparation for full integration in 2015. There would also be opportunities for further efficiency improvements in areas of joint work such as delayed discharges as well as continuing to raise performance in all services. Mrs Gillie confirmed that when the integration Chief Officer was in post they would have the ability to look across all systems which would assist with performance measures and outcomes and the move from aligned budgets to a single budget.

Mrs Pat Alexander suggested being more proactive in raising public awareness of quantifying the cost of missing appointments, etc to NHS services.

The Chair recorded the thanks of the Committee to the staff who had delivered an increasingly difficult efficiency savings target.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the Efficiency report and progress to 31 March 2014.

10. Key Performance Indicator Scorecard

Mrs June Smyth gave an overview of the report highlighting both areas of strong performance and underperformance.

Dr Stephen Mather challenged several elements of the report including Length of Stay, Theatre Utilisation, Hand Hygiene performance figures, occupancy levels, increases in A&E and Minor Injury Units attendances.

Mr Calum Campbell noted that whilst the targets within the report were local targets they all contributed towards the performance of the organisation and its ability to meet or increase its efficiency requirements. He commented that various elements of the report had been raised at the recent Borders General Hospital Clinical Board Performance review and were being progressed.

Dr Doreen Steele challenged the level of theatre sessions that had been cancelled and Mrs Holly Irwin advised that most of the cancellations related to Norovirus and cancellations had been minimised as far as possible.

Cllr Catriona Bhatia enquired about the effectiveness of setting targets that appeared to be unachievable. Mrs Smyth reminded the Committee that some of the targets had been set some four years previously and for the majority of the targets the benefit of improved performance could be seen over the longer term period. Performance had increased considerably in all areas since the introduction of the stretching local targets for services.

Mrs Pat Alexander challenged the poor performance in the Physiotherapy service. Mrs Jane Davidson commented that the physiotherapy service had been challenged at a recent Productivity and Benchmarking meeting to address its performance. The service continued to have significant vacancies and some of the improvement measures that had been put in place previously required to be re-established.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the March 2014 Key Performance Indicator Scorecard.

11. NHS Borders Mid Year Review with Scottish Government

Mr Calum Campbell introduced the paper.

The **STRATEGY AND PERFORMANCE COMMITTEE** noted the summary of the discussions detailed in the 2013/14 Mid Year Review held in March 2014.

12. Medical Workforce Cost Pressures

Dr Sheena MacDonald updated the Committee on the current position regarding medical workforce cost pressures. She advised that the overspend had been reduced, however there remained significant risks around medical workforce vacancies and trainees. She further highlighted the national difficulties in recruiting to certain specialties.

The Committee discussed several key elements including how to promote NHS Borders as an exemplar employer and the Scottish Borders as an attractive place to live; joint appointments with neighbouring Boards; linking to regional services; sub specialty and generalist issues. Work had been taken forward across SEAT to look at medical risk assessments to inform indentifying specialty areas to focus on and develop plans for.

Cllr Catriona Bhatia enquired about any risks to patients as a consequence of medical workforce issues. Mr Calum Campbell commented that there would potentially be times when patients would be sent to other providers in the region or services may be commissioned outwith the NHS or local area.

Mr Philip Lunts advised the Committee that work was being taken forward locally on demand and capacity to ensure efficient services.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the outcome at the end of the financial year for the BGH Medical Workforce Budgets.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the corrective action taken the previous year and planned in the Medical Workforce Efficiency Programme to recover the budgetary position.

13. Any Other Business

13.1 Integration Shadow Board

Mr David Davidson commented on the positive first meeting of the Shadow Integration Board held on 28 April and the constructive contribution to its remit from the clinical members on that Board.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the update.

IB/01/05/2014

14. Date and Time of next meeting

The Chair confirmed that the next meeting of Strategy & Performance Committee would take place on Thursday 4 September 2014 at 12.30 in the Board Room, Newstead.

The meeting concluded at 3.00pm.



Minutes of a Meeting of **Borders NHS Board Audit Committee** held on Monday, 16th June 2014 at 2 p.m. in the Board Room, Newstead.

Present: Mr D Davidson (Chair)

Dr S Mather Dr D Steele

In Attendance: Mrs V Buchan, Senior Finance Manager

Mr D Eardley, Senior Manager, Scott Moncrieff

Mrs B Everitt, Personal Assistant to Director of Finance

Mrs C Gillie, Director of Finance

Mrs K Hamilton, Non Executive Director

Mr P Lunts, Head of Service Improvement (Item 4) Mr A McLean, Senior Finance Manager (Item 9.2)

Mrs O Notman, Auditor, Scott Moncrieff Mr J Scully, Senior IT Services Manager Ms S Swan, Deputy Director of Finance

Mr M Swann, Manager, PricewaterhouseCoopers Mr M White, Director, PricewaterhouseCoopers

Mr D Woods, Chief Internal Auditor

1. <u>Introduction, Apologies and Welcome</u>

David Davidson welcomed those present to the meeting. Apologies had been received from Evelyn Fleck, Calum Campbell, Jackie Stephen and John Raine.

2. <u>Declaration of Interest</u>

There were no declarations of interest.

3. <u>Minutes of Previous Meeting: 29th May 2014</u>

Item 7.2 – Internal Audit Report – Risk Management & Adverse Events

David Davidson asked for an addition to be added to this item stating that the list detailing the top 12 risks had gone to the Clinical Governance Committee and would come to the Audit Committee at the September meeting.

The minutes were noted as an accurate record with this addition.

4. <u>Matters Arising</u>

Action Tracker

The following updates were noted:

Audit Scotland Report: Management of Patients on NHS Waiting Lists incl Self Assessment
Stephen Mather confirmed that the letter to patients had been seen by the Clinical Governance
Committee and confirmed that it did meet the criteria. Doreen Steele advised that a sample of the

leaflet that would be issued to patients was going to the Public Governance Committee later in the week.

The Committee noted the action tracker.

Orthopaedic Waiting Times – Use of Medinet - Update

Phillip Lunts spoke to this item. Phillip reminded the Committee that Medinet had been contracted in to support delivery of waiting times. Phillip reported that feedback from patients on the service provided by Medinet was very good and most had received a relatively positive experience. Phillip highlighted that the level of activity was detailed within the update paper. David Davidson asked how we were now placed over the year for managing waiting lists. Phillip advised that with the exception of orthopaedics this had brought the other specialties down to within 12 weeks. It was noted that there had been an impact on the orthopaedics waiting list initially but this has since risen. Susan Swan advised that they are agreeing an outline tender to put arrangements in place for managing excess capacity going forward. Stephen Mather referred to ENT as he felt that 9 procedures over a weekend seemed rather low. Phillip advised that there had been two cancellations on the day which was outwith their control. Stephen enquired about the follow-up arrangements. Phillip explained that he had expected Medinet to recommend the level of follow-up required but unfortunately this was not within their remit so NHS Borders would be doing this themselves. Phillip confirmed that this is now included within the tender specification to ensure it is picked up going forward. David felt that it would be helpful for the Audit Committee to see the tender specification to get assurance that everything is captured within this. Carol Gillie asked what level of detail the Committee would wish to see. David felt a summary report highlighting any changes from the previous tender would be adequate. Phillip Lunts and Susan Swan agreed to bring a summary report to the September meeting. Doreen Steele enquired if AHP's would be included going forward. Phillip confirmed that exercise is, particularly for the orthopaedic procedures.

The Committee noted the update.

Audit Scotland Report – Management of Patients on NHS Waiting Lists - Update
Phillip Lunts spoke to this item. Phillip explained that the previous paper seen by the Audit
Committee had been updated in preparation for the national return due to be submitted in June 2014.
It was noted that the report gave an update position as at 31 May 2014. No issues were raised.

The Committee noted the update.

5. Fraud & Payment Verification

5.1 *National Fraud Initiative - Update*Susan Swan advised that she had no further update to give as she was still awaiting information on the timetable.

The Committee noted the update.

5.2 Patient Exemption Checking – Annual Reporting Package 2013/14

Susan Swan spoke to this item. Susan reported that CFS have extensively reviewed the level of old debt. It was noted that they have increased the level of write off and that by doing this it ensures a more consistent level of unsecured write off. Susan highlighted that NHS Borders has a very low level of exemption recovery. Susan gave assurance that she receives a very detailed back-up report and can pick up any issues with CFS should it be required.

The Committee noted the annual reporting package for 2013/14.

5.3 CFS Intelligence Alerts

• 2014/3, 2014/4, 2014/5 & 2014/6

Susan Swan gave assurance that the relevant heads of departments and teams across the organisation are made aware of any alerts relevant to them. Susan went on to give an update on the four alerts recently received.

The Committee noted the alerts.

6. Governance & Assurance

6.1 Audit Follow-Up Report

Susan Swan spoke to this report which was to the end of June 2014. Susan advised that there were no outstanding External Audit recommendations when the report was produced. Susan highlighted that the report had assumed that the Risk Management Strategy would go to the Board meeting on 26th June 2014 for approval. Susan highlighted that there were two recommendations not yet due for implementation and that she had received an update from both leads and these were included in the narrative. Susan referred to the update provided at the previous meeting from Elaine Torrance on the governance arrangements for Health & Social Care Integration and confirmed that Elaine would attend the meeting in December to update on outstanding elements of work prior to full implementation. Susan then took the Committee through the Internal Audit recommendations which were noted as a total of 9 due to be implemented, 3 of which are currently in progress and are being regularly reported to the Committee, namely Property Portfolio and Management, IT Disaster Recovery and Community and Public Health Nursing. Susan went on to explain that one of the outstanding recommendations within Community and Public Health Nursing had been progressed with the creation of two new separate projects and gave assurance that these would both be monitored through the follow-up process. David Davidson referred to the deadline for implementation of recommendations within the Pharmacy Medicines Management audit being extended to September 2014 and asked if these were on track to be completed. Carol Gillie advised that she had received assurance from Alison Wilson that these are progressing on target and that Alison would attend the September Audit Committee meeting to provide an update. Carol added that she felt this was a very positive report overall and that things were improving.

The Committee noted the audit follow-up report.

6.2 *Debtors Write-Off Schedule*

Vivienne Buchan spoke to this item. Vivienne reported that for the quarter to 30th June 2014 a total of £1,613 had been written off. This was for 28 debts giving an average of £57 each. It was noted that these related mainly to dental. Vivienne advised that Finance was working with the Dental service to try and recover all monies due. Carol Gillie went on to give feedback from a recent meeting she had attended with Morag McQuade and Marion Wood on how to take this forward. Carol explained that they have tried a number of measures to improve debt collection, however these have had limited success and they are now proposing to ask for payment prior to treatment by way of requesting credit card details. Patients would also be expected to pay immediately after each treatment. It was noted that an action plan is being put in place. Carol agreed to provide a verbal update at the September meeting and would ask the Dental service to attend in December.

The Committee noted the debtors write off schedule.

6.3 Audit Committee Self Assessment Checklist

David Davidson spoke to this item. David highlighted the comments within the checklist which were self explanatory. Carol Gillie felt that this was a good exercise to undertake on an annual basis and advised that the comments raised would be picked up through the work plan.

David Woods referred to item 4.3 regarding the Internal Audit service's compliance with the mandatory audit standarnds. David confirmed that it was compliant and reminded that assurance had previously been given following a full mapping exercise undertaken in 2013.

The Committee noted the Audit Committee self assessment.

6.4 Minutes of Healthcare Governance Steering Group – 28th February 2014 & Summary Report Carol Gillie spoke to this item. Carol referred to discussion at previous meetings around managing risk and advised that the summary paper had been prepared by Evelyn Fleck to provide assurance on the risk management process in place. It was noted that Evelyn had also committed to attend meetings in the future.

Stephen Mather referred to the minutes of the Healthcare Governance Steering Group and noted lack of attendance from senior medical staff. Doreen Steele referred to the summary paper and commented that there was no reference to strategic or corporate risk within this and would have felt more reassured if these had been addressed. Doreen also felt that there was lack of substance within the minutes and therefore did not provide any assurance. Carol agreed to feed these comments back to Evelyn. David Davidson referred to page 5 of the minutes and in particular Susan Henderson's concerns around Health & Social Care Integration and not being able to record on Datix as he would have expected these issues to have been resolved. Carol advised that these issues were being picked up as part of the health and social care integration agenda and agreed to ask Evelyn to email around the Audit Committee an update on clinical governance. David Davidson referred to the new Chief Officer who would be coming into post and asked if communication was rigorous enough between both NHS and SBC. Carol confirmed that there are a number of workstreams who meet on a regular basis as well as involvement from NSS. It was also noted that there is input from SBC's Internal Audit.

The Committee noted the minutes of the Healthcare Governance Steering Group and the summary report.

7. Internal Audit

7.1 Internal Audit Report – IT Operations & Support

Matthew Swann introduced this report which had an overall medium risk rating. Matthew confirmed that this was the final report from the 2013/14 plan. Matthew went on to give an overview of this audit which noted good practice within the physical and logical security controls in place at the BGH. Matthew highlighted that three medium rated recommendations had been made, namely an IT strategy should be created, there is reliance on one key resource to monitor the firewalls which is a very manual process and there is a high number of systems that are not part of a statement of support within the disaster recovery document. It was also noted that the timelines to bring the systems back online following a catastrophic failure do not appear to be within appropriate timeframes. David Davidson referred to discussion at the Resilience Committee in 2013 to look at cross-skilling and asked for assurance of when this would be place. Jonathan Scully replied that this is a continual challenge and gave assurance that there is cross-skilling for the issue referred to within the report. Jonathan confirmed that work has been progressing on the recommendations made and they are now in a better position, however work is still required on the tool set. Susan Swan added that all Support

Services, including IM&T, are undergoing a Productivity and Benchmarking exercise to look at the level of workload within each department rather than the WTE resource available. This is then used to benchmark against other Boards. David asked for the report and the extract from the minutes on this item to be sent to the Resilience Manager to ensure the Committee is fully up-to-date. Brenda Everitt agreed to do this when the minutes were circulated. Karen Hamilton enquired if integration would increase these risks. Carol confirmed that there is an IT workstream working on these.

The Committee noted the report.

8. External Audit

8.1 ISA 260 Audit Assurance Report 2013/14

David Eardley spoke to this item and reported an unqualified audit opinion had been given on the 2013/14 annual accounts. David highlighted the scope of the audit and the significant matters detailed on page 4 where it was noted that NHS Borders had met its key financial targets. David confirmed that no adjustments had been made to the financial statements resulting in a change to the Board's revenue outturn position. David confirmed that the remuneration report had been updated following guidance received from Scottish Government on 3rd June 2014 and that they were content with what had been disclosed. understanding around the medical negligence provision discussed at the previous meeting was that this would not be settled prior to the accounts being signed. It was noted that the asset swap agreement with the Scottish Ambulance Service had been updated to show the gross movements in the final accounts. David explained that a small adjustment had been made to non-current assets and gave assurance that Borders were not an outlier. The agency staff figure had also been restated to resolve a calculation error. David then went over the action plan which recommended that NHS Borders should comply with its Financial Control Procedure to perform asset verifications and ensure the findings are reported in the asset register. David referred to the exit packages agreed during 2013/14 and confirmed that there had been sufficient evidence for audit purposes, however it was suggested to get as much evidence as possible to improve the internal control framework. David referred to the final recommendation on the consolidated accounts which now included the NHS Borders Endowment Fund accounts and highlighted although materially correct, the Board should ensure all internal transactions and balances are fully disclosed in the financial statements. Carol Gillie gave assurance that all actions arising from the report would be picked up.

The Committee noted the report.

9. Annual Accounts 2013/14

9.1 Review of Corporate Governance Statement

Susan Swan spoke to this item. Susan advised that following discussion at the previous meeting a summary sheet had been produced to detail all changes made to the Corporate Governance Statement and took the Committee through these. David Davidson enquired about the Financial Position Oversight Group. Susan advised that this would be included from 2014/15 as this had not been part of the governance framework for 2013/14.

The Committee noted the summary of changes paper and the final Governance Statement for 2013/14.

9.2 Presentation Annual Accounts 2013/14

Andy McLean spoke to this item. Andy took the Committee through the changes following the first draft of the accounts and confirmed that no material changes had been made. It was noted that the majority of queries had been dealt with at the detailed session on the annual accounts with Executive and Non Executive Directors the previous month.

David Davidson noted his thanks to all the team involved in the production of the annual accounts.

Doreen Steele referred to the membership of the Public Governance Committee on page 4 and highlighted that Pat Alexander and Karen Hamilton were omitted from this. Doreen also advised that the Pharmacy Practices Committee has three lay members and that she was Vice Chair of the Remuneration Committee and not Stephen Mather as stated. Susan Swan agreed to make these amendments.

The Committee noted the contents of the presentation Annual Accounts for 2013/14 and recommended that these be put forward to NHS Borders Board on 26th June 2014 for approval.

9.3 Final Endowment Fund Annual Accounts 2013/14

Susan Swan spoke to this item. Susan reported that these accounts had been approved at the Endowment Fund Board of Trustees meeting on 2nd June 2014 and will go to NHS Borders Board on 26th June 2014 for noting. Susan confirmed that the accounts had received a clean audit. Susan referred to the audit memorandum from the External Auditors, Geoghegans, which will be reviewed in detail and responses/recommendations would go the Board of Trustees for approval.

The Committee noted the final Endowment Fund Annual Accounts for 2013/14.

9.3 Final Patient's Private Funds Annual Accounts 2013/14

Susan Swan spoke to this item. Susan reported that the accounts had been audited by Geoghegans and although form part of the submission to Scottish Government these are audited separately Susan confirmed that the accounts had received a clean audit. Susan referred to the audit memorandum with recommendations from the External Auditors, Geoghegans, which would be reviewed in detail and progressed accordingly.

The Committee noted the final Patient's Private Funds Annual Accounts for 2013/14.

10. <u>Items for Noting</u>

10.1 Minutes of Information Governance Committee: 4th March 2014 (Draft) No issues were raised.

The Committee noted the draft minutes of the Information Governance Committee.

10.2 Financial Position Oversight Group – Terms of Reference

Carol Gillie spoke to this item. Carol confirmed that the membership had been amended following discussion at the previous meeting so it was clear who were members and who were in attendance. Following discussion it was agreed that the membership should revert back to its original format and then go to the Financial Position Oversight Group meeting on 26th June 2014 for discussion and then come back to the Audit Committee for final sign-off.

The Committee agreed that the Terms of Reference for the Financial Position Oversight Group should revert back to its original format. The Terms of Reference would go to the Financial Position Oversight Group meeting on the 26th June 2014 for discussion and then come back to the Audit Committee for final sign-off.

11. Any Other Competent Business

David Davidson, on behalf of the Audit Committee, formally thanked David Woods for his input over the last five and a half years and wished him well for the future.

12. **Date of Next Meeting**

Monday, 22nd September 2014 @ 2 p.m., Board Room, Newstead.

BE 24.06.14





Minutes of a meeting of the **Integration Shadow Board** held on Monday 30 June 2014 at 2.00pm in the Council Chamber, Scottish Borders Council

Present: Cllr C Bhatia

Cllr S Aitchison Mrs P Alexander Mr D Davidson

Dr J Kirk
Dr S Mather
Cllr J Mitchell
Cllr F Renton
Dr D Steele
Dr S Watkin

In Attendance: Mr C Campbell

Miss I Bishop Mrs J McDiarmid
Mrs C Gillie Mr D Robertson
Mrs E Rodger Mrs J Davidson
Mrs S Manion Mrs A Cronin
Mrs M Brotherstone Mrs J Wilkinson

1. Apologies and Announcements

Apologies had been received from Cllr Jim Torrance, Cllr David Parker, Mrs Tracey Logan, Mrs Elaine Torrance, Dr Sheena MacDonald, Mrs Fiona Morrison, Mrs Jenny Miller, Mr Andrew Leitch, Mr James Lamb and Mr Philip Lunts.

The Chair confirmed the meeting was quorate.

The Chair welcomed Mrs Mandy Brotherstone and Mrs Amanda Cronin to the meeting who were speaking to various items on the agenda.

2. Declarations of Interest

The Chair sought any verbal declarations of interest pertaining to items on the agenda.

The **INTEGRATION SHADOW BOARD** noted there were none.

3. Minutes of Previous Meeting

The minutes of the previous meeting of the Integration Shadow Board held on 28 April 2014 were approved.

4. Matters Arising

4.1 **Care and Clinical Governance:** Mr David Davidson enquired when the Short Life Working Group would report back to the Integration Shadow Board. Mrs Evelyn Rodger advised she would be happy to bring an outcome report to the next meeting.

The **INTEGRATION SHADOW BOARD** agreed to receive the outcome report from the Care & Clinical Governance short life working group.

The **INTEGRATION SHADOW BOARD** noted the action tracker.

5. Update on Change Fund Projects Exit Strategy

Mrs Jane Davidson gave an overview of the content of the paper highlighting that the Change Fund had been established to test new models of care and to support the acceleration of work to shift the balance of care. The Borders approach to allocation of funding had been to approve projects that demonstrated a strategic fit, effective project management and a potential return on investment that would allow the release of resources to support the service on a recurring basis. All but one project had been closed or mainstreamed.

Dr Doreen Steele enquired if the Connected Care project was continuing. Mrs Davidson confirmed that it was and that this was the 2013/14 outturn position. She further advised that she would bring an Outturn report to the Board at the end of the year 2014/15.

Cllr Catriona Bhatia noted that there had been a significant budget pressure in relation to Housing, specifically the provision of Extra Care Housing. She clarified that it was not the responsibility of the Change Fund to resolve that budget pressure as it would fall solely to Scottish Borders Council to address. Mrs Davidson confirmed that that position had been supported by the Reshaping Care Board.

The **INTEGRATION SHADOW BOARD** agreed to receive a further Change Fund report at the end of the financial year.

The **INTEGRATION SHADOW BOARD** noted the update.

6. Arms Length Organisation Business Case

Mrs Jeanette McDiarmid advised that the report before the Board detailed the key findings of the Business Case that had been developed to consider the benefits for the Council of setting up a Council wholly owned company for the direct provision of Adult Care Services. The range of services proposed for inclusion included; Care at Home, Residential Care, Extra Care Housing, Bordercare, Older People Day Services, Learning Disability Services and the

Borders Ability Equipment Store. All of those services were Council Services, apart from the Joint Equipment Service which was a joint service with NHS Borders and a proportion of that budget came from NHS Borders. A discussion was required between both parties in regard to the Joint Equipment Service. The total identified budget for those current services amounted to £16.9m.

Mrs McDiarmid advised that the business case had been presented to Scottish Borders Council at its meeting held on 26 June where it had been agreed to progress the initiative and present further information to the October meeting of Scottish Borders Council. She clarified that the financial reports for the Arms Length Organisation (ALO) would be received by the Joint Integration Board.

Cllr Francis Renton advised that she was content with the direction of travel the Council was taking in regard to the provision of Adult Care services through the Arms Length Organisation model. She clarified that it was not a privatisation of services and would be a wholly owned Scottish Borders Council company. Cllr Renton clarified that if for any reason the Arms Length Organisation did not work it would be pulled back into Scottish Borders Council.

Dr Doreen Steele commented that she was concerned about the Limited Liability Partnership (LLP) model especially in relation to set up costs and profits. She suggested that Local Authorities could establish LLPs but only with another partner as 2 members were required for an LLP. She enquired if any profits would be reinvested into the LLP, Joint Integration body or Scottish Borders Council services.

Mr David Robertson advised that the LLP model followed the Glasgow model which was the cordia model of a 2 company structure. He confirmed that the structure was acceptable to Her Majesty's Revenue and Customs (HMRC) in avoiding corporate tax issues and remained in line with VAT legislation.

Mrs McDiarmid advised that the consultants that had been commissioned to progress the LLP had previously been involved in LLPs in England and Scotland. She further confirmed that the £5.6m net financial benefit to the Council took into consideration the set up costs and running costs on an annual basis.

Cllr Catriona Bhatia explained that profits or losses from the LLP would flow to Scottish Borders Council and whilst she might expect them to be reinvested in the Social Work budget it was possible that Scottish Borders Council might invest them into other services.

Dr Steele was assured by Cllr Bhatia that the set up costs, running costs, profits, losses and any consequential losses of the ALO would be borne solely by Scottish Borders Council and would not impact on NHS Borders finances or on the new Adult Health & Social Care partnership.

Cllr John Mitchell commented that from a political perspective all parties had been supportive in principle of the ALO.

Mr David Davidson sought assurance with regard to sustainability of services to users in terms of business continuity should the ALO fail. Cllr Renton commented that the ALO

paperwork was only being shared with the Board for noting and with all due respect was not for the Shadow Integration Board to comment on or question.

Cllr Bhatia confirmed that Scottish Borders Council had business continuity plans for all of its services. In relation to cost she advised there was a 60:40 mix of private providers and council services.

Mrs Pat Alexander explained that as a member of NHS Borders Board she was duty bound to look for assurance about the impact of any proposals on NHS services and she sought assurance that there would be no detrimental effect on joint services and delayed discharges. Cllr Bhatia gave assurance and advised that one of the outcomes of the ALO was to improve performance for delayed discharges.

Mrs McDiarmid advised that due diligence was still being worked through at present and would be detailed in the report to Council in October.

Mr Robertson highlighted that Self Directed Support (SDS) would potentially impact on social work and council services and by association the partnership.

The **INTEGRATION SHADOW BOARD** agreed to receive the finer detail of the LLP and specifically confirmation of the partners in the LLP.

The **INTEGRATION SHADOW BOARD** agreed to receive a seminar on the current mix of home care provision and the impact of self directed support on current and future services.

The **INTEGRATION SHADOW BOARD** noted the report.

7. Early Years Collaborative Progress Report

Mrs Mandy Brotherstone gave an overview of the progress report and highlighted several key areas including: the 3 work streams looking at the first 5 years of life; 2 additional work streams to include children aged 5-8 years and 8-18 years; Early Years Collaborative (EYC) members established in multi agency working groups; pioneer sites and the Improvement Advisory role.

Mrs Amanda Cronin tabled and spoke to the EYC performance scorecard for May 2014 and a jargon buster leaflet. She advised that data was being gathered on individual tests of change. Mrs Cronin also spoke of the website.

Dr Stephen Mather enquired if the website was for professionals and the public. Mrs Cronin confirmed that it was for professionals in the first instance with the intention to make it public facing.

Dr Simon Watkin sought clarification on whether the objectives of workstreams 1 and 2 had been achieved. Mrs Cronin confirm that workstream 1 had been achieved and the challenges of achieving workstream 2 were being addressed.

Dr Watkin enquired in regard to the PDSA methodology if they were exceptional variations. Mrs Cronin confirmed they were and added that the improvement aims and methods were nationally selected, however it was for local collaboratives to select the areas they would progress.

Mr Calum Campbell requested the run charts be updated to reflect the current position.

Mrs Jane Davidson commented that whilst progress had been made it was important to clarify that there was still work to do in regard to drilling down further especially in terms of inequalities. She also corrected Mrs Cronin's statement and affirmed that the objectives of workstreams 1 and 2 had not been achieved although on the surface there appeared to be an improving trend.

Dr Jonathan Kirk enquired in regard to data collection if any further support was required. Mrs Brotherstone commented that NHS Borders Planning and Performance team were currently collecting and analysing the data.

Cllr Sandy Aitchison queried the presentation of the data on the performance scorecard. Mrs Cronin advised that it related to yearly figures for children requiring support. She noted the presentation of the information on the scorecard was incorrect and commented she would address it moving forward.

The **INTEGRATION SHADOW BOARD** agreed to receive a further update report on progress in six months.

The **INTEGRATION SHADOW BOARD** requested the link to the website be circulated to them.

The **INTEGRATION SHADOW BOARD** agreed to receive the revised performance scorecard report.

The **INTEGRATION SHADOW BOARD** noted the report.

8. Programme Highlight Report

Miss Iris Bishop gave an overview of the programme highlight report advising that it summarised the main progress made during May and June, the risks and issues that might affect the programme and the work and activity planned for the next reporting period.

Miss Bishop commented that at Scottish Borders Council's Full Council meeting held the previous week members had agreed to delegate authority to the Integration Shadow Board to provide a response to the regulations for Adult Health & Social Care Integration. The consultation had been released to both SBC and NHS Borders and the third sector and a joint response would be developed during the week of 21 July for approval by the Integration Shadow Board on 4 August.

The **INTEGRATION SHADOW BOARD** noted the report.

9. Chief Officer Appointment Update

Mr Calum Campbell advised that Susan Manion had been appointed as Chief Officer of the Integration Adult Health & Social Care Board and would commence in post on 14 July 2014.

Mrs Susan Manion advised that she was working through her induction programme and thanked the Board for inviting her to attend the meeting ahead of her appointment.

The **INTEGRATION SHADOW BOARD** noted the update and welcomed Susan Manion's appointment.

10. Monitoring of the Shadow Integrated Budget 2014/15

Mr David Robertson advised that the report was to provide the Shadow Board a budget monitoring statement for the Partnership's Integrated Budget based on actual expenditure and income to 31 May 2014 as well as explanations of the major variances between projected outturn expenditure/income and the current approved budget.

The Partnership was projecting a balanced position for 2014/15, although at such an early stage in the financial year, there were a number of factors which would require ongoing management to ensure that position was delivered at 31 March 2015.

Mr Robertson highlighted several key points including: overspends in the Joint Learning Disability service of £60k; £14k in the Joint Mental Health service; £261k in Older People's services and £420k in the Physical Disability service. He advised of a managed underspend of £527k in generic services and reminded the Board of the volatile nature of prescribing budgets for which limited information was available to date.

Cllr Sandy Aitchison noted the £527k saving on generic services and enquired what they were. Mr Robertson explained that they were a range of budgets held centrally in relation to demographic growth that had not been allocated at present.

Cllr John Mitchell assured the Board that he met with Mr Robertson on a weekly basis and any budgetary problems would be highlighted at an early stage.

Cllr Catriona Bhatia enquired about the robustness of recouping costs for the provision of care home places. Mr Robertson advised that there were procedures in place to recoup costs from individuals, however they required reviewing and revising to ensure consistency and robustness in moving forward.

The **INTEGRATION SHADOW BOARD** noted the budget monitoring report.

The **INTEGRATION SHADOW BOARD** noted the key areas of identified pressure and proposed remedial actions be put in place to enable a balanced outturn position at 31 March 2015 to be projected at this time.

11. Health and Social Care Integration Partnership Budgets

Mrs Carol Gillie advised that the Partnership had agreed the scope of the integrated budget, however since that agreement was reached further legislative consultation documentation had been produced which recommended some services must be included in the integrated budget which were not part of the initial scope. Assessment criteria for reviewing those services were designed and a workshop was held in early June to undertake the assessment of services against those criteria.

The findings recommended that the initial scope be extended and a number of additional services be included in the integrated budget and in addition some services would be reported to the partnership on a notional/information basis and included in the strategic plan. The definition of the services within the notional/information budget was still to be finalised. Prior to April 2015 the scope of the integrated budget should be revisited by the Integration Shadow Board.

Mr Calum Campbell enquired if it was more than a notional/information budget for example activity would be included. Mrs Gillie confirmed that whilst the report was focused on the financial aspects, activity would be included as part of the strategic plan.

Mrs Pat Alexander enquired where childrens' services fitted into integration. Mrs Gillie commented that the proposal was about what was mentioned in the consultation documents linked to the legislation where the focus was on older adult services. She asked the Board to note that only where it was not possible to disaggregate children's services for the service as a whole those would be included.

Cllr Catriona Bhatia reminded the Board that it carried the remit of the Community Health & Care Partnership Board within its role at present and therefore childrens services would report to it this year.

Dr Simon Watkin spoke of the difficulties of disassociating planned care from unplanned care and asked that as much as possible be included within the scope.

Mr David Davidson enquired about the timeline for further regulations from the Government. Mrs Gillie advised that the consultations were due to close in August and it was expected that the Government would release its revised guidance in the autumn. She assured the Board that the joint financial teams were working towards the go live date of 1 April 2015 for joint financial arrangements.

The **INTEGRATION SHADOW BOARD** agreed the following services be included in the integrated budget for 2014/15 - Housing services aids and adaptions, Bordercare, Night Support, Sexual Health, Public Dental Services, Community Pharmacy, Continence Services, Immunisation, Smoking Cessation, Patient Transport, Accommodation costs and Resource Transfer.

The INTEGRATION SHADOW BOARD agreed the following services form part of the notional/information budget of the partnership and be included in the strategic plan -

Unplanned inpatients within the BGH, Adult projection and domestic abuse, A&E, GP Out of Hours, Care of Older People within the BGH, Home Dialysis, Public Health, Screening, Audiology, Community Midwifery, Welfare Services, Infection Control, Specialist Nurses, Emergency Planning, Health Living Network, Patient Safety Programme, Pharmacy, Visual Aids, Non Cash Limited Services (general dental practitioners, opticians and community pharmacists), Palliative Care, Payments to Voluntary Bodies, Equality and Diversity, Health Promotion and Public Involvement. These would be reported to the Shadow Board as relevant to the integrated service provision in scope.

The **INTEGRATION SHADOW BOARD** agreed to revisit the scope of the integrated budget significantly prior to 1st April 2015.

12. Any Other Business

There was none.

13. Date and Time of next meeting

The Chair confirmed that the next meeting of Integration Shadow Board would take place on Monday 4 August 2014 at 2.00pm at NHS Borders in the Board Room, Newstead.

The meeting concluded at 3.30pm.