

Borders NHS Board**NHS BORDERS ANNUAL REVIEW LETTER****Aim**

This paper is to provide members with feedback and action points contained within the letter from the Cabinet Secretary for Health, Wellbeing and Sport following the Board's Annual Review on the 5th November 2014.

Background

The NHS Borders Annual Review for 2013/14 was held on the 5th November with John Raine, Chair of Borders Health Board presiding.

The Annual Review process is intended to ensure the rigorous scrutiny of NHS Boards' performance whilst encouraging as much dialogue and accountability between local communities and their Health Boards as possible.

The Annex attached to the Feedback Letter details action points that the Board must further develop during the year. These points will be reviewed at the next Annual Review in the Summer/Autumn of 2015.

Summary

A Feedback Letter has been received from the Cabinet Secretary for Health, Wellbeing and Sport on the performance highlighted at the NHS Borders Annual Review held on the 5th November 2014.

The feedback received is largely positive and acknowledges that NHS Borders is working hard to achieve targets set and is well placed to deal with the challenges ahead.

Recommendation

The Board is asked to **note** the Annual Review Feedback Letter for 2013/14 and the key action points.

Policy/Strategy Implications	Actions resulting from the Annual Review may impact on a number of strategies / plans.
Consultation	The self assessment document was subject to consultation with key managers, the Clinical Executive, Board Executive Team, Scottish Health Council local representatives and members of the Public Partnership Forum.

Consultation with Professional Committees	See above
Risk Assessment	Each narrative within the LDP HEAT targets highlights any particular risks to achievement of the targets, and the plans in place to minimise any such risks. These have also been identified through the Self Assessment.
Compliance with Board Policy requirements on Equality and Diversity	NHS Borders Annual Review 2014 complies with the Board's requirements on Equality and Diversity.
Resource/Staffing Implications	None identified

Approved by

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Author(s)

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Mr John Raine
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In 2014 Scotland Welcomes the World



15 January 2015

Dear John

NHS BORDERS: 2014 ANNUAL REVIEW

1. This letter summarises the main points discussed and actions from the Annual Review and associated meetings held at Borders General Hospital on 5 November 2014.
2. The Annual Review process is intended to ensure the rigorous scrutiny of NHS Boards' performance whilst encouraging as much direct dialogue and accountability between local communities and their Health Boards as possible. That is why Ministerial attendance at Board Annual Reviews happens at least once every Parliamentary cycle. As one of the Boards that did not have a Review chaired by a Scottish Minister this year, you conducted the Review meeting in public on 5 November. I asked a Government official to attend the Annual Review in an observing role. Throughout the day, you and your Executive Team clearly outlined progress and challenges in key areas and gave both NHS staff and local people the opportunity to question yourself and your team. This letter summarises the main points and actions in terms of NHS Borders' performance in 2013/14, as organised under the 6 Health Quality Outcomes.
3. As in previous years, all Boards are expected to submit a written report to Ministers on their performance over the previous year, together with plans for the forthcoming year. This self-assessment paper gives a detailed account of the specific progress the Board has made in a number of areas and should be made available to members of the public via the NHS Board's website, alongside this letter.

Ask the Board Live

4. You began the programme for the day by holding an open meeting for all NHS Borders staff to raise questions directly with the Executive and Non- Executive Directors of the

Board. This was an innovative and highly interactive session which offered an opportunity to discuss matters of broad interest to staff; covering everything from car parking, smoking policies and IT systems to the implementation of iMatters, the successes of partnership working and the potential impact of the Borders Rail Link on recruitment. The discussions were carried out in an open and positive atmosphere and I congratulate NHS Borders on this transparent and responsive approach to staff engagement.

5. This productive relationship is further evidenced by the written reports produced for us by the Public Partnership Forum, Area Clinical Forum and Area Partnership Forum who all provided focussed and helpful written summaries of their activities and challenges during the past year indicating their involvement in the key issues and decisions facing the Board.

Meeting with Patient, Public and Carer Representatives

6. You and your Chief Executive went on to have a constructive and supportive discussion with Patient, Public and Carer representatives. You specifically sought views and input from attendees on some high profile issues of concern to the Board, including the impact of non-attendance at appointments (DNAs) and drug wastage. This was followed by a discussion on how technology might be used to improve service models within NHS Borders and how to improve focus locally on Health Improvement and Prevention. I am grateful to the representatives for taking time to share their views and experiences.

Annual Review- Public Session

7. I understand you opened the public session of the Review by presenting a helpful summary of the Board's achievements and the progress NHS Borders has made in a number of areas over the last year. You then handed over to Dr Sheena MacDonald, the Board's Medical Director, who reiterated the Board's clear focus on patient safety, effective governance and performance management; and outlined some of the Board's work to deliver improvements in local health outcomes, alongside the provision of high quality, safe and sustainable healthcare services.

Everyone has the best start in life and are able to live longer healthier lives

8. The Board is to be commended for its sustained achievement against the 31 day cancer access standard where performance has been above 95% in the last five published quarters. In relation to the 62 day standard, I was pleased to note that performance has returned to above 95% and recognise that the small numbers involved can impact disproportionately on performance. NHS Boards have been set a Detect Cancer Early HEAT target to increase the proportion of patients diagnosed at the earliest stage for breast, lung and colorectal cancers by 25 % by 2015. As part of the work to deliver this target, NHS Borders should ensure that local implementation plans are in place to increase the proportion of people accessing the national bowel and breast screening programmes.
9. I also want to recognise NHS Borders strong performance in relation to health improvement, including the delivery of over 11,974 Alcohol Brief Interventions (ABIs) between 2008 and 2014; this represents a 172% achievement against the target of 6,951. NHS Borders, in partnership with the local Alcohol and Drugs Partnership (ADP), is making strong progress with embedding ABIs as a key activity in challenging alcohol

related harm, including established delivery in the priority setting as well as working to extend this into a wider range of settings, such as mental health and criminal justice settings, particularly custody suites.

10. NHS Borders also achieved its smoking cessation target, reporting 2,140 one month quits against a planned target of 1,525.

Health care is safe for every person, every time

11. Rigorous clinical governance and robust risk management are fundamental activities for any NHS Board, whilst the quality of care and patient safety are of paramount concern. Considerable work has been undertaken at all levels in recent years to ensure that Boards effectively respond to the findings and lessons to emerge from numerous high profile reviews such as the Francis Inquiry and previous reports in relation to events at Mid-Staffordshire NHS Trust.
12. I am aware that there has been a lot of time and effort invested locally in tackling infection control, with NHS Borders currently on track to deliver the 2015 target for cases of *Clostridium difficile*. However, despite the work to reduce instances of *Staphylococcus aureus* *Bacteraemia* (SABs), the Board remains some way from the trajectory required to deliver the SAB HEAT target by March 2015, with the latest published figure of 0.40 per 1000 occupied bed days some way above the Scottish figure of 0.31.
13. The Healthcare Environment Inspectorate (HEI) was set up by the now First Minister, when she was Cabinet Secretary for Health and Wellbeing, with a remit to undertake a rigorous programme of inspection in acute hospitals. There was an unannounced inspection of Borders General Hospital by the Healthcare Environment Inspectorate (HEI) on 22 October and 1 November 2013, resulting in six requirements and one recommendation. A follow-up inspection was carried out on 10 and 11 June 2014, which found that four of the six requirements were fully met and another had been partially met. You have provided assurance that work is continuing to ensure all the remaining points raised by the inspections are properly addressed.
14. Healthcare Improvement Scotland (HIS) also carried out an inspection at Borders General Hospital in July 2012 as part of the Older People in Acute Hospitals (OPAH) inspection programme. As above, work is underway to address the resulting areas for improvement and I was pleased to note that the Board is also working with HIS this year to test their revised inspection methodology. It will also be important for the Board to keep up the efforts made against the wider dementia agenda and the 10 Dementia Care Actions in Hospitals.

Everyone has a positive experience of health care

15. NHS Borders has performed well in delivering the suite of elective access targets during the year. A total of 5603 patients were treated within the Treatment Time Guarantee (TTG) with 130 patients being treated out-with the guarantee during 2013/14. NHS Borders has experienced some pressures throughout 2013/14, mainly in the specialties of Orthopaedics, General Surgery and ENT, due to a combination of bed pressures arising from Norovirus and trauma cases and a shortage of theatre capacity and theatre staff. The Board has consistently maintained performance at, or above, 90% for the 18 weeks Referral to Treatment (RTT) standard.

16. NHS Borders also sustained an excellent level of performance over the summer period against the 4 hour Emergency Care target. The Board has submitted a comprehensive and informative LUCAP summarising a whole system approach whilst recognising the complexity of the unscheduled care pathway. It includes planned actions to maintain performance in line with the interim target and standard requirements. I commend NHS Borders in working to continually improve the service provided to patients through the implementation of good practice, both in acute care and in the community. I recognise that NHS Borders has excellent leadership which has helped to drive the changes which have supported this level of performance. I am assured that NHS Borders expects to sustain performance for the remainder of the winter and is working closely with its local authority partners to deliver the target of 98% for the end of the year.

17. I was encouraged to learn that NHS Borders is signed up to Patient Opinion, which the Board promotes through its website and onsite posters as one of the methods by which it can obtain feedback on the experiences of people using its services.

Staff feels supported and engaged

18. Effective attendance management is critical - not only in terms of efficiency but also to ensure good support mechanisms are in place for staff. NHS Borders' sickness absence rate for the year ending 31 March 2014 was reported as 4.36%, compared with the average across NHSScotland of 4.76% and a national standard of 4%.

19. The Board is to be congratulated for achieving the highest response rate of all 14 territorial Boards in the 2013 NHS Scotland Staff Survey. You have assured me that you will be using the results of the survey over the coming year to focus on how to improve staff experience. I was also pleased to hear of the structures which have been put in place in NHS Borders to promote effective staff governance and engagement including the identification of 'staff governance champions' who work with the Local Partnership Forum Chairs in each Clinical Board to deliver staff governance objectives.

Patients are able to live well at home or in the community

20. I understand that both you and your Chief Executive made reference, during the Annual Review, to the progress the Board is making with its partners, including the local council, in addressing the critical health and social care integration agenda. You have agreed on a Body Corporate Model with a Joint Chief Officer now appointed and a number of workshops being held for staff to discuss how the process of implementation will move forward.

21. NHS Borders has an excellent track record in tackling delayed discharges and has recorded very few delays over 4 weeks over the last year. Performance has also been very strong in relation to the reduction in emergency bed days for patients over 75.

22. The latest waiting times figures confirm that the Board is continuing to meet the 18 week referral to treatment target for young people seen by the Child and Adolescent Mental Health Services (CAMHS), with a performance of 100% during the first quarter of 2014/15. Conversely, only 44.9% of NHS Borders patients attending a first Psychological Therapies appointment waited less than 18 weeks, compared to 81.9% of people seen within 18 weeks nationally. The Minister for Public Health wrote to your Chief Executive,

asking for a report on measures being taken to meet the target. The Chief Executive has responded to confirm that recent recruitment and staff returning to work mean that Adult Mental Health Psychology is now fully staffed, with rapid improvement in performance expected. Recent improvements in data reporting will also facilitate effective monitoring of the situation.

Best use is made of available resources

23. It is vital that NHS Boards achieve both financial stability and best value for the considerable taxpayer investment made in the NHS. I am very pleased to note that, despite the challenges facing NHS Borders, it has achieved all 3 of its financial targets i.e. to operate within its Revenue Resource Limit, Capital Resource Limit and to meet its Cash Requirement. The Board also delivered its efficiency savings target, with 48% of savings delivered recurrently, as agreed in their Financial Plan for the year.
24. Activity for the Board's capital programme centred on enhancements to the Outpatients Department at Borders General Hospital, on providing additional surge capacity to enable it to respond to variations in demand and on reconfiguration works at the Huntleyburn Mental Health and Learning Disability service. Clearly, overall economic conditions mean that the public sector budgets will continue to be tight whilst demand for health services will continue to grow. Nonetheless, you confirmed that the Board continues to actively monitor the achievement of all local efficiency programmes and, whilst the position is challenging, NHS Borders remains fully committed to meeting its financial responsibilities in 2014/15 and beyond.

Question and Answer Session

25. In the latter part of the Review, questions were taken from members of the audience on a variety of topics including the integration of health and social care; readmission rates and the incidence of pressure sores in the hospital; services to maintain and care for people in their own homes and the Board's contingency planning for a potential Ebola outbreak. I am grateful to you and your team for your efforts in responding to the issues raised, and to the audience members for their attendance, enthusiasm and considered questions.

Conclusion

26. I would like to thank you and your team for organising and hosting the Review and for responding so positively to the issues raised. It is clear that the Board is making significant progress in taking forward a challenging agenda on a number of fronts. However, the feedback from your discussions has assured me that you are not complacent and you recognise that there remains much to do. I have included a list of the main action points from the Review in the attached annex.

Best wishes,
Shona

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NHS BORDERS ANNUAL REVIEW 2014

MAIN ACTION POINTS

The Board must:

- Continue to review, update and maintain robust arrangements for controlling Healthcare Associated Infection.
- Continue to deliver on its key responsibilities in terms of clinical governance, risk management, quality of care and patient safety, including an effective response to the findings of Healthcare Environment Inspectorate and Older People in Acute Hospitals inspections.
- Keep the Health and Social Care Directorates informed on progress towards achieving all access targets and standards, in particular the 4-hour A&E standard, Treatment Time Guarantee and Access to Psychological Therapies.
- Make sustained progress against the staff sickness absence standard.
- Continue to work with planning partners on the integration agenda, and to deliver against the delayed discharge target.
- Continue to achieve financial in-year and recurring financial balance, and keep the Health and Social Care Directorates informed of progress in implementing the local efficiency savings programme.