Borders NHS Board

BOARD EXECUTIVE TEAM REPORT

Aim

The aim of this report is to update the Board on areas of activity within the Board Executive Team's Directors portfolios.

Chief Executive

Interim post: Jane Davidson has taken up the appointment of Interim Chief Executive until such time as a substantive appointment is made.

Scottish Borders Council Meeting: Jane Davidson along with the Chairman and Dr Sheena MacDonald attended Full Council on the 18th December. The purpose of their attendance was to provide the Council with a presentation on the various challenges and opportunities of our demography linked to our clinical strategy and consequent review of clinical services as presented at the Annual Review on 5 November.

Leadership Discussion: On 7 January as part of our continued actions following the Board 360-degree feedback exercise, an informal discussion was held with those who had been through the Delivering The Future and Leading for the Future development programmes to help lead the organisation through the challenges and opportunities that it faces. In particular, the discussion promoted actively our organisational objectives and in particular collective leadership.

Scottish Borders Council: Jane Davidson met with Tracey Logan, Chief Executive, Scottish Borders Council on 15 January as part of her induction.

National Unscheduled Care: Jane Davidson has been invited to join the national unscheduled care group whose 6 Essential Actions are to Improve Patient Safety, Flow and Sustainable Performance in Unscheduled Care. She attended her first meeting of the group on 29 January.

MPs & MSPs: Jane Davidson met with the Chairman and Michael Moore MP on 9 January as part of the regular quarterly cycle of meetings with MPs and MSPs.

Jane Davidson also met with Paul Wheelhouse MSP on 23 January to discuss Community Hospitals and had an introductory meeting with Christine Grahame MSP on 30 January.

Hub South East Scotland: A meeting was held on 6 February with the Chief Executive, Paul McGirk and Territory Partnership Director, Alastair Young for Hub South East Scotland – NHS Borders' development partner (Lauder Health Centre). The meeting was held as part of Hubs ongoing efforts to ensure they maintain communications with their
participant organisations and continue to deliver initiatives which help meet participants strategic aims.

**Burnfoot Community Futures AGM:** Jane Davidson attended the Burnfoot Community Futures Annual General Meeting for 2015 on 7 February.

**Circulars:** The following Scottish Government circulars have been received by the organisation. Copies are available from the Chief Executive’s Office.

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Circular Number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.11.14</td>
<td>PCA (P) 2014 18</td>
<td>Pharmaceutical Services: Amendment To Drug Tariff In Respect Of Claim Arrangements For Public Health Service (PHS) Emergency Hormonal Contraception (EHS)</td>
</tr>
<tr>
<td>17.12.14</td>
<td>PCA (P) 2014 27</td>
<td>Pharmaceutical Services Amendments To Drug Tariff In Respect Of Remuneration Arrangements From 1 January 2015</td>
</tr>
<tr>
<td>18.12.14</td>
<td>PCA (P) 2014 30</td>
<td>Pharmaceutical Service Trial Extension</td>
</tr>
<tr>
<td>18.12.14</td>
<td>PCA (P) 2014 28</td>
<td>Seasonal Influenza Immunisation 2015-16: Vaccine Supply Arrangements</td>
</tr>
<tr>
<td>18.12.14</td>
<td>PCA (M) 2014 13</td>
<td>Seasonal Influenza Immunisation 2015-16: Vaccine Supply Arrangements</td>
</tr>
<tr>
<td>05.01.15</td>
<td>CMO (2014) 29</td>
<td>Seasonal Influenza: Use Of Antivirals 2014-15</td>
</tr>
<tr>
<td>08.01.15</td>
<td>PCA (P) (2015) 01</td>
<td>Pharmaceutical Services: Amendment To Pt 11: Discount Clawback Scale For Proprietary Drugs.</td>
</tr>
<tr>
<td>13.01.15</td>
<td>2015/01</td>
<td>National Health Service Superannuation Scheme (Scotland) 01/2015</td>
</tr>
<tr>
<td>28.01.15</td>
<td>PCA (M) (2015) 01</td>
<td>General Medical Services Statement Of Financial Entitlements For 2014/15</td>
</tr>
<tr>
<td>03.02.15</td>
<td>CMO (2015) 01</td>
<td>His Self Assessment</td>
</tr>
<tr>
<td>06.02.15</td>
<td>PCA (P) (2015) 2</td>
<td>Public Health Service: Emergency Hormonal Contraception Patient Group Directions</td>
</tr>
</tbody>
</table>

**Director of Nursing & Acute Services**
Interim post: Evelyn Rodger will continue as Director of Nursing and Midwifery, while stepping forward to support the Board’s interim management arrangements as Interim Director of Acute Services.

Executive Walkround/Inspections: Evelyn Rodger conducted the following Walkrounds/inspections:

- 31st December 2014: Walkround Melburn Lodge with Christine Proudfoot, Senior Charge Nurse;
- 13th January 2015: Inspection of ITU.
- 27th January 2015: Walkround Renal Unit with SCN Liz Coutts
- 05th January 2015 to date: Daily presence in BGH and a minimum of twice weekly in ED.

Health Foundation: Evelyn and Laura Jones, Head of Clinical Governance and Quality, were in London on 16th December for the Induction to the Health Foundation. NHS Borders is part of an NHS Scotland consortium with NHS Tayside and Healthcare Improvement Scotland who have been awarded a grant by The Health Foundation to improve the quality of healthcare for frail elderly (Borders) and mental health patients (Tayside).

Royal College of Nursing (RCN) Future Conversations: On 16th January the RCN/Chief Nursing Officer (CNO) and Scottish Executive Nurse Directors (SEND) had a launch event of the Future Conversations to determine the strategic direction for nursing across Scotland. This was held in Edinburgh, with satellite launch events in 4 other Health Board areas including in the Scottish Borders. The four main questions were: 1. What does nursing in Scotland feel like now? 2. What are the challenges for nursing in Scotland? 3. What are the opportunities for nursing in Scotland? 4. What is your vision for nursing in Scotland? NHS Borders was extremely well represented and comments have been sent to the RCN for collation. Further local conversations have been planned as follows:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Venue</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td>10th February</td>
<td>3.30pm – 5pm</td>
<td>Kelso Day Hospital</td>
<td>Charlie Sinclair, Associate Director of Nursing</td>
</tr>
<tr>
<td>11th February</td>
<td>9am – 10.30am</td>
<td>Hawick Community Hospital</td>
<td>David Thomson, Associate Director of Nursing</td>
</tr>
<tr>
<td>12th February</td>
<td>2.30pm – 4pm</td>
<td>Knoll Hospital, Duns</td>
<td>Nicky Berry, Interim Head of Midwifery</td>
</tr>
<tr>
<td>13th February</td>
<td>9am – 10.30am</td>
<td>Haylodge Seminar Room, Peebles</td>
<td>Helen Clinkscale Head of Training &amp; Professional Development</td>
</tr>
<tr>
<td>16th March</td>
<td>3.30pm – 5pm</td>
<td>Tryst, Borders General Hospital</td>
<td>Charlie Sinclair, Associate Director of Nursing</td>
</tr>
</tbody>
</table>

MBE: Judith Smith, Nurse Consultant Cancer/Palliative Care, has been awarded an MBE in the New Year Honours List for her outstanding contribution to Palliative/Cancer care within the Borders.
**Vale of Leven:** NHS Borders has completed a self assessment against the 65 recommendations in the Vale of Leven report for Health Boards. NHS Borders is fully compliant with 31 of the recommendations and has developed an action plan which is being progressed to ensure compliance against the remaining recommendations. The action plan has been added to the Board Infection Control Work Plan with progress monitored through existing governance processes.

**Treatment Room Review:** Since 2011, NHS Borders has had a treatment room review. This led to an option appraisal event in Sept 2013, which led to a separate review of Community Nursing (District Nursing and Evening Service) provision. The tasks and care that treatment room nursing delivers was reviewed in June 2014, The Treatment Room Steering Group considered the outcomes of the Time Task Analysis along with the variations in staffing across all localities. The review has been concluded with ongoing actions in relation to providing a consensus document outlining the principles of Treatment Room service delivery and ongoing skill mix review as part of ongoing / daily business. Recommendations will be tabled at the Clinical Executive Strategy Group in March 2015.

**Community Nursing Review (District Nursing and Evening Service):** In 2011 a Community Nursing Review was commenced. Following concerns being raised early last year the process was paused because key governance processes had not been fully followed. The review was recommenced late summer.

The review and subsequent options appraisal exercise for Community Nursing Services has considered solutions for:

- Removing variation in the service delivery across localities;
- Closing the service gap between day district nursing (that finishes at 16.30) and evening nursing starting at 18.00 and the BECS cover (that finishes at 08.00) and the daytime District Nursing service that starts from 08.30;
- Ensuring effective communication and workload transfer across from District Nursing to Evening Nursing; and
- The preparation for integration of health and social care.

The first stage of the options appraisal event was held with Stakeholder, Partnership and Public representation on Tuesday 21 October 2014 followed by Financial Options Appraisal (Revenue and Capital) was completed in January 2015 with final recommendations agreed by the Steering Group.

Recommendations will be tabled at the Clinical Executive Strategy Group in February 2015.

**Dementia Nurse Consultant:** We are delighted to announce that the position of Dementia Nurse Consultant (DNC) has been approved by the Clinical Strategy Group and is currently being advertised nationally. The closing date for this post is 11th February with interviews scheduled for 6th March 2015. Funding of the DNC is supported by the Scottish Government and Alzheimer’s Scotland, both expressing their delight of this progression. This will be a challenging, exciting and valuable position with the primary function of supporting those with Dementia and their families being cared for in an acute setting. The DNC will support acute colleagues to learn, adapt and ensure the highest quality of care is delivered. In addition the DNC, will support our Mental Health Older Peoples Services, forge links with Higher Education Institutes and influence the strategic direction of
Dementia care. We are seeking an individual with expert knowledge, vision and strong leadership qualities who will enhance our services locally and contribute as our voice nationally.

**Director of Finance**

**2014/15: Revenue:** The finance team continue to work closely with Clinical Boards and services to monitor revised year end forecasts. Due to the financial pressures across the organisation this work is crucial to ensure the Board meets its financial targets. Additional control measures have also been put in place and current controls reinforced to ensure that NHS Borders has the resources to deal with the challenges of winter.

Key to the financial plan for 2014/15 is the Efficiency Programme. Good progress has been made although a number of proposed schemes have not fully delivered as planned. Support is being given where required or sponsors have been asked to identify alternative schemes. The monitoring of the programme is being undertaken through the Aspyre project management system.

**Capital:** NHS Borders has been working closely with Scottish Government on the impact of slippage on two schemes and funding allocations have been adjusted to reflect revised spending plans. The revised capital allocation for 2014/15 has been fully committed. Work is continuing to generate further capital resource through the sale of excess properties. Work is progressing on the Roxburgh Street Health Centre with detailed discussions with Hubco and the practice taking place. An update will be presented at the meeting in February.

**External Audit:** As detailed in the audit plan for 2014/15 the External Auditors completed their interim visit during January/February. Feedback on the visit will be presented to the Audit Committee in March. As in previous years the 2014/15 audit plan will include the completion of an Audit Scotland best value toolkit. Following discussion, BET is recommending to the Audit Committee that the Community Engagement toolkit should for part of this year’s plan.

**2015/16:** The budget was agreed in Scottish Parliament on the 9th October 2014 which set the financial settlement for 2015/16 and outlined indicative figures for 2016/17. Based on this agreement allocation letters for both capital and revenue for financial year 2015/16 were issued to Boards on the 9th October 2014.

Following the Board Development session on the 5th February 2015 and wider engagement across the organisation the draft LDP and financial templates will be submitted to Scottish Government on the 13th February 2015. Comments on the draft submission are expected in early March and these will be taken into account before the final, subject to Board approval, financial templates are submitted on the 13th March 2015.

Following the annual recalculation of individual budgets during February and March budget managers will be requested to sign off their budgets for 2015/16.

A key area of focus in recent weeks has been drafting the 2015/16 Efficiency Programme. This work will be continuing over the coming weeks.

In the case of the capital programme a prioritisation process for capital schemes has been undertaken. NHS Borders continues to engage with Scottish Government about the
phasing of capital funding over the next two financial years and to identify opportunities to secure additional capital resources.

**Internal Audit:** A session with Non Executive members of the Board and regular attendees of the Audit Committee took place during January with a view to pulling together a draft Internal Audit plan for 2015/16 and outline audits for future years. BET will be asked to comment on this before the plan is presented to the Audit Committee in March for approval. NHS Borders’ Chief Internal Auditor will be leaving PWC to take up the post of Director of Finance, NHS Greater Glasgow & Clyde. PWC are currently considering the replacement arrangements that will be put in place.

**Health & Social Care Integration:** Work is continuing with colleagues in Scottish Borders Council on taking forward this agenda. A workshop was held on the 28th January 2015 for Shadow Board members and attendees titled “Knowing Your Budget”. This event confirmed the scope of the integrated, managed budget and highlighted aspects of good budgetary control. Integrated budgets for strategic planning will be returned to at a future date.

**Mountview Resource Transfer:** The Financial Position Oversight Group (FPOG) reviewed a proposal to transfer current funding for the Mountview service to SBC. This is due to the fact that the current services will be redesigned to a supported living model of care, meaning that the current residents of Mountview will move into their own home with an individual tenancy. This is a more suitable model of care and meets the future needs of the Mountview residents. It is not appropriate for NHS Borders to be responsible for providing care in this type of setting. FPOG recommended the £429,923 is transferred to SBC to support the reprovision of services that are currently provided in Mountview.

**National Procurement Review:** NHS Borders is actively participating in a national Procurement review that has been commissioned by Chief Executives. A feedback session highlighting key themes has been arranged in February before the final report is produced.

**Medical Director**

Following significant use of agency and locum doctors to support vacancies across our specialties this report will now include information on consultant and speciality doctor recruitment – as this is the first such report appointments made in the last 6 months have been included and in future the report will give a two monthly update. This current report represents a significant step forward in stabilising some of our most vulnerable services and is a result of an enormous amount of work by HR and the services in attracting suitable candidates.

**Permanent Medical Staff Appointments from 1 April 2014 (in order of start date)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Grade</th>
<th>Specialty</th>
<th>Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Jenny Buxton</td>
<td>Consultant (previously locum)</td>
<td>Haematology</td>
<td>01/06/14</td>
</tr>
<tr>
<td>Dr Rachel Williamson</td>
<td>Consultant</td>
<td>Endocrinology &amp; Diabetes</td>
<td>09/06/14</td>
</tr>
<tr>
<td>Dr Rosie Jones</td>
<td>Consultant</td>
<td>Haematology</td>
<td>18/08/14</td>
</tr>
<tr>
<td>Dr Jonathan Clowes</td>
<td>Salaried GP (Specialty Doctor)</td>
<td>Emergency Medicine</td>
<td>01/10/14</td>
</tr>
</tbody>
</table>
Mr Jerard Ross  Specialty Doctor (Acting up Consultant)  Emergency Medicine  01/10/14
Dr Andrew Mackenzie  Consultant  Dermatology  06/10/14
Dr Heather Matthews  Consultant (previously locum)  Anaesthetics  01/11/14
Dr Alicia Halmshaw  Salaried GP (Specialty Doctor)  Emergency Medicine  01/11/14

**Careers Fair:** In September a team of senior doctors and a recent Borders trainee attended the first medical training careers fair in the Glasgow Concert Hall – over 70 people attended our stand and received information packs and advice on training and career opportunities in NHS Borders – we have already made one successful appointment following this exercise. Our stand included posters of statements from current staff who trained in Borders and decided to stay. We are now working with HR to produce a mobile careers resource that can be taken to events around the country. Thank you to Drs Chris Richards, Olive Herlihy, Roddy Campbell, Craig Wheelans and for giving up their Saturday and enthusiastically promoting Borders as “THE place to train” and the Performance and planning and HR and Comms’ teams who helped prepare for the day.

**Finalist in Pharmacist of Year Awards:** Two of our pharmacists based in BGH were finalists in the above awards following their work on anticoagulants – congratulations and well done to Allison Carruthers and Liz Leitch for their on-going stewardship of these complex drugs. In addition Libby Kennedy a practice pharmacist in Newcastleton was shortlisted in the Quality Improvement category. Hilary Evans the pharmacist in Lauder won the Community Pharmacy award and George Romanes, pharmacist in Duns was recognised for services to pharmacy.

**Appraisal and Revalidation:** The Health Improvement Scotland report “External Quality Assurance Review of Medical Revalidation 2013 – 2014” was published on 31st October 2014. NHS Borders report included only 2 recommendations

1. There should be a formal agreement in place for the provision of external appraisal support to Castle Craig Hospital.
2. Continue to maintain a well functioning appraisal system and monitor appraisal rates.

There is now a formal Standard Operating Procedure in place for appraisal at Castle Craig that are undertaken by one of our experienced senior appraisers.

The full report can be accessed on the HIS website at


**Commissioning Update:** The Commissioning Team have completed service reviews for most services available at NHS Borders. The remaining service reviews (Audiology, Dermatology, Cardiology and Acute Medicine) are at various stages and all will be completed within this financial year.
The reviews ensure local services are delivered as efficiently as possible and any opportunities to repatriate patients or generate income are identified and explored.

The Commissioning Team have also worked with GPs within the Borders and surrounding areas to implement new referral processes in order to minimise referrals being made inappropriately to other service providers.

To support this work prior approval to treat agreements for GP and consultant referrals have been established with The Newcastle Upon Tyne Hospitals NHS Foundation Trust, Northumbria Healthcare NHS Foundation Trust and North Cumbria University Hospitals. Additionally NHS Lothian redirect referrals for Borders patients for services which could be provided at NHS Borders.

Working with NHS Lothian a successful pilot was run to redirect to NHS Borders appropriate consultant referrals from Obstetrics, Gynaecology and Ophthalmology services. This is now being rolled out to all services that can be provided at NHS Borders.

Local consultants have also been reminded of the criteria to refer patients to out of area service providers.

**National Work:** The Medical Director continues to attend the Scottish Government short life working group in Unscheduled Care looking at workforce issues and has now been asked to join the Scottish Government Unscheduled Care Steering Group. This group is focusing on the whole system issues that impact on flow through emergency departments as measured by the four hour standard. In addition the medical director continues to be part of the National Delayed Discharge Task force focusing on supporting NHS Boards to work towards minimal delays as a result of waiting for transfer or discharge.

The medical director also chaired the second national Health Protection Oversight Group that received a number of updates including preparedness for Ebola – ebola testing will now be carried out in Scotland significantly reducing any delay in establishing a diagnosis.

**Director of Public Health**

**New Year, New Public Health Project - Borders Baby Massage:** Healthy Living Network submitted a partnership bid to the Big Lottery fund in November 2014 and received confirmation of a successful application for £9,978 from the Community and Families Fund to deliver a Borders Baby Massage project.

This project is based ongoing consultation with parents living in the Scottish Borders over the last year, in addition to consultation with key health professionals at a maternal mental health workshop in May 2014. There is general agreement between health professionals and parents around the benefits of baby massage and there has been a long-term gap in availability of sessions. The Healthy Living Network are planning to address this in partnership with Outside the Box, a national, third sector, community development organisation who they have been working with over the last year to develop a peer support project called Mums Supporting Mums.

The project will benefit parents living in more remote and rural areas in addition to Langlee, Burnfoot and Eyemouth. Parents living in these areas are less likely to benefit from the range of social opportunities and statutory services available and more likely to experience greater levels of isolation due to transport issues and poorer social networks,
impacting on mental health and well-being. Parents have already been developing their own low cost peer support networks, self-help resources/toolkits and used technology safely for ongoing support.

Baby massage sessions will respond to identified need and help mums play and bond with their babies. Baby massage has been cited regularly by parents as an informal and enjoyable opportunity that creates a 'level playing field' to engage their babies. Evidence suggests this can be as beneficial and relaxing for parents as it is for babies, particularly relevant in today's climate of recession and welfare reform. Baby massage is not provided through universal services such as Health Visiting. This project would develop the peer support programme further to include skills development work and capacity building training to increase capability and ensure sustainability.

The mums who are part of the project will continue to work alongside NHS Borders to help develop future activities that are based on what mums in these communities need and what will work for them. These activities will be complimentary to those provided by Statutory Services.

**Small Changes, Big Difference Campaign – update on progress:** One of the aims of the Small Changes, Big Difference campaign is to engage people, community groups and local businesses to pledge small changes that will make a big difference to their health and wellbeing.

We have already seen a number of staff at NHS Borders publicly pledging their support. A 'lifestyle challenge' made up of 12 members of staff who need a bit of support to help them achieve their goals is underway. We will be following their progress and featuring their stories on our social media pages and website.

As we went into January we extended the reach of the campaign to community groups inviting them to pledge small changes.

- Walkerburn community pledged to ‘continue building our healthy living network community’.
- The Langlee Residents Association and their partners pledged to ‘improve the health of Langlee Residents’.
- Our own Healthy Living Network Team has also committed to sharing the Small Changes, Big Difference message across all border communities.

Recent field events at both the Borders General Hospital and Scottish Borders Council were successful in grabbing attention and visitors. There were 101 visitors visiting the stand in the Hospital dining room, with 50 or so making pledges on the giant pledge board. It’s still there if you are passing by. The following week, over 50 visitors and 20 pledges were made in the SBC dining room.

The social media and website are also working hard.

- Over 500 fans on facebook
- Almost 100 Twitter followers
- Our best performing posts on facebook reach over 7,000 people each time, and January has been our most successful month to date.
- Our website has recorded over 1,000 browsing sessions by 700 plus users since the campaign began.
Our top stories in terms of engaging people generally involve people’s stories and video. First is the story of a staff member Dawn Moss, second the launch video, third ‘Give Dry a Try’.

The campaign, which launched in October, focussed initially on engaging staff to talk to people more often about their health and wellbeing alongside their medical care and to let people know that these conversations will happen when they attend appointments with healthcare professionals. All appropriate wards in the hospital have been visited to explain the campaign and materials have also been have been distributed as follows:

- Nursing Directors / Medical Directors
- Specialist nurses
- Macmillan centre
- General Services staff BGH
- 4 community hospitals
- All Primary care teams
- All Community nurses / midwives
- 11 mental health sites
- Borders Addictions Services
- HLN teams – re community pledges Langlee / Walkerburn and team pledges
- Learning Disabilities Services – Yvonne Chapple
- Board Executive Team / Board

Participation

- Early adopters are out-patients, pain clinic, and maternity and child health. These areas are starting to promote the campaign and materials.
- There is some interest amongst pre-operative assessment and specialist nurses and meetings are being set up to discuss opportunities.

Useful quick links

http://www.nhsborders.scot.nhs.uk/small-changes-big-difference/success-stories/
http://www.nhsborders.scot.nhs.uk/small-changes-big-difference/staff-area/play-your-part/
Public Health Review: A national review of Public Health was announced in November 2014 and an expert group established to report back in 2015. The review sits within the context of the Integration of Health and Social Care, the development of Community Planning and the Community Empowerment Bill and persistent, refractory health inequalities. An engagement paper has now been produced and disseminated to stakeholders for a response. The Public Health team are pleased to note that the Review recognises that responsibilities for addressing public health issues sit not only within the health sector but also in local and national government, the community and voluntary sector, and the private sector.

The Review recognises that the public health function, with its strong focus on prevention, equity and quality, is integral to health service values and aims in Scotland, and to public services reform. The review is to consider how to widen and deepen the influence of Public Health – both as a public service function and an important outcome for Scotland in the specific context of tackling health and social inequalities more effectively, and increasing healthy life expectancy in Scotland in a sustainable way.

The Public Health Team are taking the lead in producing a corporate response to the management exercise both for NHS Borders and Scottish Borders Council and hope to be able to submit a joint response on behalf of both organisations. Response are to be submitted by 12 March 2015.

Head of Delivery, Estates & Facilities

Car Parking: We have provided 22 additional car parks spaces over the winter and a new 38 space car park is under construction. There is however continuing pressure on car parking on the BGH site and this is resulting in more letters of complaint again. We will have to examine the impact of the additional 38 space car park once completed and will provide a more comprehensive report to the Board at that point.

Wayfinding: Members of the Board will shortly notice new signage appearing around the BGH. This is the culmination of a significant piece of work designing a wayfinding scheme for the BGH as required by the OPAH Inspection,

Director of Workforce & Planning

Primary, Acute & Community Services Management Revision Consultation: This consultation document has been developed in the context of the reasons for the original merger of the two clinical boards which remain relevant. The opportunity to design synergy and seamless transition into healthcare, while providing a clear decision making managerial structure that takes decisions close to the patient is a key driver. The purpose of the document is to set out the proposals for a revision to the management structure of PACS and its services to give clearer definition and emphasis of purpose. The intent is a simplification of the structure that supports the removal of internal barriers and opens up opportunities to move care flexibly across the system, moving with patients, carers and staff.

This will follow the NHS Borders Organisation Change Policy and from 16th January 2015, we entered into a formal 4 week consultation with staff. A communication and engagement program is currently underway, which includes presentations to groups throughout the organisation. All staff have the opportunity to contribute.
Whistleblowing Training for Health Boards: Training, facilitated by Public Concern at Work who operates the national confidential helpline, was attended together with the Employee Director and Head of Occupational Health and Wellbeing. These focussed training sessions provide valuable insight and support to managers who deal directly with whistle blowing and give a comprehensive overview of whistleblowing and the surrounding complexities. The event will also help to inform the work that is already underway within the Organisation to develop a toolkit for managers and staff on what whistleblowing is and how it should be used.

Staff Survey: Interview given to the Nursing Standard together with Shirley Burrell, Chair of Mental Health Partnership Forum to discuss our success in response rate. The magazine was particularly interested in the results linked to training and developments. We reported that we are pleased but far from complacent after achieving the highest response rate of all the Mainland Health Boards for the second year running.

Work and Well-being Strategic Framework Consultation: NHS Borders is committed to the physical and mental health well-being of its employees. Promoting the wellbeing of staff is essential to the delivery of corporate priorities and ensuring a high performing workforce and quality service for patients. We provide a comprehensive Occupational Health Service (OHS) to support and improve staff health and well-being. As a pro-active discipline the key focus of OH is prevention and there is increasing evidence on the impact of staff well-being on clinical outcomes. The framework provides structure to how services will be delivered over the next 5 years with a focus on well-being rather than treatment as well as outlining NHS Borders commitment to staff well-being. It also serves as a strategy required as part of the core criteria for achievement of the Healthy Working Lives gold award.

Staff Awards: Nominations for the staff awards have now closed. We have received a fantastic response with over 100 nominations. The judging panel has convened and is working through all applications. The working group will continue the planning around the event which will take place on the 2nd May 2015. The finalist for each category will be announced in due course.

South East Scotland Virtual Induction Passport (SES VIP): Dr Herlihy, Foundation Programme Director, collaborated with Medical Education leads in NHS Lothian and NHS Fife to produce a standardised Foundation induction programme including

1. eLearning for core clinical and corporate topics (much of which was based on e-Learning already provided to foundation Drs in NHS Borders and developed by Kath Liddington, Knowledge Management Coordinator prior to the program)
2. face to face workshops
3. additional information in dedicated medical education websites

In August 2014 Medical Education (part of Training & Professional Development Administration) rolled out this programme for Foundation Year 1 doctors in the form of the South East Scotland (SES) Virtual Induction Passport (VIP). NHS Borders HR, Occupational Health and Medical Education Administration have provided essential support to streamline the processing of paperwork, occupational health clearance and introductions to wards early on day 1 of induction.

Once the VIP is completed during the first placement, it does not need to be repeated in any of the other South East Boards and so doctors are released to the wards earlier on
their first day to undergo ward induction, meet their colleagues, join ward rounds and complete ward work safely.

**Archie Cochrane Medical Education Room:** Training & Professional Development has worked with Dr Roddy Campbell to oversee the creation of the only dedicated medical education facility in NHS Borders – the Archie Cochrane Medical Education Room in the Library. Funded through Associated Costs of Teaching (ACT) specifically for medical students, it is equipped with an interactive whiteboard with integrated projector and speakers as well as modern study furniture. It is designed to be flexible and to facilitate collaborative study and is available for tutorials, as well as for ad hoc noisy / group study. The sound attenuated glass wall contributes to a bright open space which is nevertheless private and ideal for discussion and study. The room will be officially opened with the support of the Cochrane family in summer 2015.

**Susan Manion**

**Recommendation**

The Board is asked to **note** the report.

| Policy/Strategy Implications | Policy/strategy implications will be addressed in the management of any actions resulting from these events, activities and issues. |
| Consultation | Board Executive Team |
| Consultation with Professional Committees | None |
| Risk Assessment | Risk assessment will be addressed in the management of any actions resulting from these events, activities and issues. |
| Compliance with Board Policy requirements on Equality and Diversity | Compliant |
| Resource/Staffing Implications | Resource/staffing implications will be addressed in the management of any actions resulting from these events, activities and issues. |

**Approved by**

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
<th>Name</th>
<th>Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jane Davidson</td>
<td>Chief Executive (Interim)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Author(s)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
<th>Name</th>
<th>Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board Executive Team</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>