

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

Independent Contractors: The Chief Executive together with Council colleagues continues to visit various GP practices throughout the region (recently in Earlston and Newcastleton) to engage with the GP community about the integration of health and social care.

NHS Borders Care of Older People After Action Review (23 August): A session between NHS Borders and Health Improvement Scotland took place on 23 August. Two facilitators joined the meeting and pulled together a questionnaire which everyone involved in the review was encouraged to complete.

Visit to St Columba's Hospice, Edinburgh (31 August): The Chief Executive was accompanied by Dr Annabel Howell and Mrs Clare Oliver on a visit to St Columba's Hospice. As well as a tour of the facilities discussions focused on Hospice services and strategic developments and NHS Borders palliative care and future plans.

Borders Voluntary Care Voice (BVCV) (7 September): The Chief Executive gave a presentation to the BVCV User and Carer Working Group, continuing the theme of trying to have our values of - Care and Compassion, Dignity and Respect, Quality and Teamwork and Openness Honest and Responsibility - off the wall and into the day to day lives of the people who work for NHS Borders and the people who use our services.

Quality Improvement for NHS Board Members: National Masterclass (20 September): The Chief Executive attended the QI session for NHS Board members. The objectives of the session were to support Board members to:-

- Explore how success really happens – and the relationship between creative breakthroughs and learning from failure
 - *so that, you can take away practical ideas to support higher performance which are grounded in your existing governance systems*
- Develop a greater understanding of the quality improvement landscape in Scotland
 - *so that you can enhance the role your Board plays in formulating strategy, ensuring accountability and shaping culture*

- Have the opportunity to meet other Board members, share experiences and build networks
 - *so that, you can identify and connect with more peers to help meet current and future challenges*
- Identify, access and use relevant improvement resources
 - *so that, you know how and where to access relevant information to support your work*

Buurtzorg in the Borders (29 September): The Chief Executive contributed to the Buurtzorg event held in Coldstream. The aims of the event were:-

- To explore what we, as the Borders community, can do together to keep our communities safe and well.
- How would 'neighbourhood care' work for people using services across health, social care and the wider community?
- To share a nurse led model of neighbourhood care from the Netherlands.
- Could something like this work for our community?

Disrupt or decline: – Public service leadership in a Digital World (5 October): The Chief Executive supported the Scottish Leaders Forum Digital event.

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

Date Received	Circular Number	Title
01.08.16	PCA (P) (2016) 13	Additional Pharmaceutical Services Amendment to Drug Tariff in Respect of Gluten Free Food Service Remuneration
01.08.16	PCA (M) (2016) 8	General Medical Services Statement of Financial Entitlements for 2016/17
01.08.16	CMO (2016) 12	Metal on Metal Hip Replacements – Update on Monitoring Arrangements
22.08.16	DL (2016) 17	Policy on Reimbursement of Living Solid Organ Donor Expenses by NHS Boards in Scotland
12.08.16	DL (2016) 18	Preparing for Winter 2016-17
24.08.16	PCS (AFC) (2016) 6	Textual Changes to Agenda for Change Handbook
26.08.16	PCA (D) (2016) 8	Analysis of the Accounts of Scottish Dental Practices Providing NHS General Dental Services (GDS)
30.08.16	PCA (P) (2016) 14	Community Pharmacist Supplementary and Independent Prescribing Clinics: Update on Funding Arrangements for 2016-17
30.08.16	PCA (M)(2016) 10	Meningitis B (Men B) Infant Vaccination Programme
30.08.16	CMO (2016) 13	Details of the 2016-17 Shingles (Herpes Zoster) Vaccination Programme
01.09.16	PCA (M) (2016) 11	Shingles (Herpes Zoster) Immunisation Scheme

02.09.16	CMO (2016) 14	Scottish Childhood Flu Vaccination Programme 2016-17
02.09.16	CMO (2016) 15	Updated NHS Scotland 'Do Not Attempt Cardiopulmonary Resuscitation Policy'
07.09.16	CMO (2016) 16	Seasonal Influenza Vaccination Programme 2016-17
08.09.16	PCA (M) (2016) 12	Influenza and Pneumococcal Immunisation Directed Enhanced Service
16.09.16	PCA (P) (2016) 15	Pharmaceutical Services Supporting Continuous Improvement and Closer Partnership Working
20.09.16	CMO (2016) 17	Penrose Inquiry Recommendation - Undiagnosed Hepatitis C
23.09.16	PCA (D) (2016) 9	Scottish Government Consultation Exercise on the Future of Oral Health
23.09.16	PCA (D) (2016) 10	1. Amendment No 133 to the Statement of Dental Remuneration 2. Maximum Patient Charge
27.09.16	PCA (O) (2016) 6	General Ophthalmic Services Practice Patient Record Forms
03.10.16	DL (2016) 19	NHS Scotland Model Complaints Procedure
12.10.16	PCA (P) (2016) 16	Community Pharmacist Practitioner Champions
17.10.16	PCS (DD) (2016) 2	Doctors in Training – New Deal Monitoring Guidance

Joint Director of Public Health

Health Promoting Health Services: The Health Promoting Health Services (HPHS) Annual Report for 2015/16 has been submitted detailing progress over the last year, but also describing overall impact of implementation at local level since 2012. This period has seen a growing emphasis on inequalities with the introduction of new performance measures including those focusing on mental health, financial inclusion, and person-centred care.

Impact over this period has been considered at the different levels of engagement (of patients, staff and visitors); increased knowledge and understanding (of staff and patients); changes in behaviour (at individual and service level e.g. through revised assessments and strengthened referral pathways); and across the organisation (e.g. referral patterns over time). Key achievements were:

- Continuation of the 'Small changes, big difference' campaign and roll out to Scottish Borders Council.
- Creation of locally-produced information resources for patients and staff promoting '1 minute' health improvement conversations;
- Good uptake of tailored training inputs to fit staff needs and availability, including implementation of a staff training programme on inequalities and health literacy;
- Greater consistency and visibility to the work where dedicated capacity was available e.g. Smoking Cessation Adviser attached to hospital; Welfare Benefits Service embedded in mental health

- Health improvement in maternal and infant health has developed progressively through strong collaborative working across maternity and health improvement services focusing on smoking cessation, weight management and more consistency in use of Alcohol Brief Interventions.

The Scottish Patient Safety Programme and the Early Years Collaborative have been important drivers for us locally that have led to improvements in use of data, processes and pathways.

Factors that have proved challenging are:

- In small boards, service delivery is often single-person dependant
- Considerable variation across NHS Borders in level of engagement with HPHS as a concept
- Lack of clarity about governance and reporting of HPHS in context of organisational change, not least relating to the Integration Joint Board (IJB)
- It has been difficult to gather current examples of health improvement activity within clinical care pathways and ensure that this is being sufficiently co-ordinated as MCNs have not been meeting for approx. 2 years due to limited capacity.

International Day in Hawick: Hawick played host to its first International Day on the 28th of August 2016 at Wilton Lodge Park. Recognising the wealth of culture and heritage within Hawick and its surrounding areas, the event aimed to celebrate diversity and promote respect and understanding. Although it is known that there is a network within the Scottish Borders that supports the migrant population, their needs are not well understood. The Joint Health Improvement Team worked in partnership with the Hawick community to plan and support this International event to understand needs better, promote awareness of services and increase community health and wellbeing. The event aimed to build positive relationships, break down barriers to isolation and integration and building on social capital within the town. Working in partnership across a wide range of partners, community groups and services the event achieved great success with 9 nationalities represented, 22 volunteers and 25 services and community groups present. Well over 500 people attended in the day. The event received funding from the Community Grant Fund and welcomed Mirror of Stage, a Polish Theatre group from Edinburgh to the event. The event was supported by local councillors and Lord Provost and was promoted widely through the local paper and radio station.

Feedback from the community was extremely positive with volunteer feedback expressing interest in future activities. The migrant population will continue to grow in Hawick so it is hoped to plan future international events to continue to build community capacity and creating a more cohesive, engaged and integrated community.

Director of Finance, Procurement, Estates & Facilities

Financial Year 2015/16: The Board has been advised that NHS Borders accounts were laid before Parliament on the 4th October 2016. The accounts are now in the public domain and available on the NHS Borders website. The Cost Accounts for 2015/16 were submitted for inclusion in the Scottish Health Services Cost Book, which is planned to be released on the 22nd November 2016.

Financial Year 2016/17

- **Revenue:** In light of the continuing challenging financial position a senior member of the finance staff continues to be based in the BGH putting in place new systems and processes to support increasing the efficiency of services and to allow managers to take account of the financial impact of decisions. Across the wider organisation the finance team are working closely with services to monitor budgets. As discussed with the Board at the September meeting a number of discretionary spend measures and controls have been put in place to support the financial position. Reporting arrangements linked to the new arrangements are now being set up. The Board will receive an update on the financial outlook at the development session on the 27th October 2016.
- **Capital:** The capital plan is progressing in line with the update presented to the Board at the Strategy and Performance meeting on the 1st September. A meeting to discuss capital with SGHSCD has been arranged.
- **Efficiency:** Key to the financial plan for 2016/17 is the Efficiency Programme The position on savings remains challenging. To date NHS Borders are reporting delivery of £4.8m. We will continue to work with and support identified leads to ensure delivery of the programme however it is clear that there will be a shortfall in the programme in 2016/17 and this has been built into the year end forecast. The Board will receive an update on the Efficiency Programme and at each the Strategy and Performance Committee. In addition the Board Executive Team receives monthly updates on the programme. The Financial Resources Committee which has been set up will consider in detail the financial challenge the Board is facing.

Financial Year 2017/18: The presentation of the draft budget to the Scottish Parliament is currently planned for December after the Treasury Autumn Budget on the 23rd November 2016. Work is underway to update and develop NHS Borders financial plan for 2017/18 onwards. Initial discussions with the Integration Joint Board are also being set up. Ongoing dialogue with the Board is planned to start in early December in order to ensure a financial plan is agreed by the Board at the start of the new financial year. Based on information which is currently available the financial outlook remains very challenging.

External Audit: The newly appointed External Auditors, Audit Scotland, attended their first Audit Committee meeting on 19th September 2016. Introductory meetings were held prior to this with members of the Senior Finance Team and the Chair of the Audit Committee. This appointment is for a period of 5 years.

Audit Scotland Reports: The following Audit Scotland reports were presented to the July meeting of the Clinical Executive Operational Group with the agreed action noted against each report:

- Audit Scotland Annual Report & Accounts 2015/16 (**Audit Committee for information**)
- National Fraud Initiative (**Audit Committee for information**)
- Audit Scotland Corporate Plan – 2016/17 Update (**Audit Committee for information**)
- Equalities Update 2015/16 (**Audit Committee for information**)
- Transparency & Quality Annual Report 2015/16 (**Audit Committee for information**)
- Carbon Scrutiny Board Annual Report Annual Report 2015/16 (**Audit Committee for information**)
- Climate Change Plan 2015/16 – 2019/20 (**Audit Committee for information**)

Finance Staff Development: The Finance Directorate continue to progress with the National Initiative for Finance Teams - 'Future Focused Finance'. The initiative aims to

ensure Finance staff have the skills and strengths needed to support NHS organisations now and into the future. A further session is being arranged with staff for January and will be led by Elaine Lawther, Project Lead for NHS Scotland Future Focused Finance.

Vivienne Buchan, Senior Finance Manager successfully passed her final accountancy exam and is now eligible to apply for membership of The Chartered Institute of Public Finance and Accountancy.

Shared Services: The Shared Services accelerated programme for Laundry, Catering, Procurement, Capital Planning, Transport and Energy are all being progressed to achieve the set targets. The respective services are reporting progress to the NHS Borders Shared Services Group. NHS Borders Board will receive an update at its development session on the 27th October 2016.

Estates Update:

- Test drilling will shortly commence within the car park at Hawick Health Centre as preparatory work for the new Hawick flood defence system.
- 24 wheelchairs are being replaced at the Borders General Hospital. This will be partly funded by a donation from Unison.
- NHS Borders estate is being reviewed, following the criteria stipulated by Scottish Futures Trust, to ensure all buildings have been constructed to the required standard. The review will take the form of an initial desk top exercise to identify wall construction types followed by a visual external inspection. Intrusive inspections by qualified structural engineers will be carried out if deemed necessary.

Director of Nursing, Midwifery & Acute Services

Quality Improvement Award 2016: NHS Borders has been successfully announced as a finalist in the Merit Award for Quality Improvement in Maternity, Neonatal and Paediatric Services Category for its SAFER antenatal risk assessment tool. The award ceremony is in Glasgow on the 15th November.

Walkround: Evelyn completed an Inspection Walkround of Ward 4 on the 19th October.

Director of Workforce & Planning

Human Resources: RCNBULLETIN Jobs Fair Glasgow, 6-7 October 2016 – SECC, Glasgow: NHS Borders attended the RCNBULLETIN Jobs Fair at the SECC in Glasgow on the 6th & 7th October 2016. The event was well planned and attended over the two days with stands from all over the UK in attendance from both the Public/Private & Voluntary Sector. We had the chance to meet student nurses in varying stages of their training; qualified staff nurses with a wealth of experience in hospital/community settings or care home settings who had a genuine interest in what NHS Borders had to offer. Over the two days we were able to interview 5 staff nurses with 4 potential appointments.

Retirement Event: The third NHS Borders Retirement Celebration Event was held on 23 September. The event format was an afternoon tea with a speech from the Chairman. The Peel Hospital Exhibition team brought albums of old photos for guests to peruse and NHS Borders Catering Team provided teas, coffees, sandwiches and cakes. Twelve retirees attended with a partner.

Information Management & Technology: General Practices: The refresh of 138 critical desktops in General Practice is now complete. Every practice received some new desktop PCs. The remote access solution is being well received – there are now over 55 users and around 15 connections each being made day.

IM&T Root & Branch Review: the findings presented to the board at the September development session have also been presented to the full IM&T staff group. Staff welcomed that the Board are sighted on the current position across the IT landscape. The Head of IM&T will also share the findings with the GP Sub Committee and with the Senior Medical Staffing Committee as part of her regular engagement with these groups.

Public & patient access to Wi-Fi: Public access is now live in the Macmillan Centre and the BGH Dining room for staff, patients & visitors. Anyone can access the Wi-Fi by logging in to the public splash screen. A longer term NHS Borders wide solution is currently being worked on.

Wardview: We hosted NHS Coventry who came to see Wardview in action prior to implementing it themselves. They found the visit extremely useful with synergies in the way that they work and how we work. They attended a patient flow meeting to see and hear the discussion and also saw a demonstration of Systemview

Performance & Planning: NHS Borders Annual Review for 2015/16: took place on Tuesday 6th September with over 60 in attendance. Welcoming the attendees, Chair of NHS Borders, John Raine spoke about the importance of NHS Borders Values. John went on to highlight some of the achievements that have taken place over the past twelve months including cancer treatment times, Stroke admissions and smoking cessation targets. Whilst recognizing achievements John also touched on the challenges that NHS Borders face including reducing staff sickness absence and treatment time guarantee targets.

Following John's presentation Evelyn Rodger gave an in depth presentation on Quality of Care, touching on NHS Borders new valued based recruitment methods, Theatre Improvement actions and continuity of care through the use of Older People in Acute Hospital (OPAH) Daily Monitoring.

Dr Tim Patterson, Interim Joint Director of Public Health informed the audience of the health inequalities that the Borders area face. Dr Andrew Murray explained the concept and aims of Realistic Medicine. A representative from the Scottish Government was in attendance.

Training & Professional Development: The Borders Developing the Young Workforce Industry Group (DYWIG) Board: was formally launched on Wednesday 12th October by James Hepburn, Minister for Employability and Training.

A collaboration in the Borders region between private and public sector employers, Federation of Small Business, Chamber of Commerce, Skills Development Scotland, Borders College, Scottish Qualification Authority, NHS Borders and Local Authority Education Services, has resulted in a successful Scottish Government funding bid to the national DYWIG. This has enabled the setting up of a Borders DYWIG Board, with a membership of twenty two, which has been created to direct a programme of work that will be carried out to achieve the DYW initiative's Key Performance Indicators. The Programme Team, which will be employed to deliver the programme through host Borders

College, will be based in local businesses, to enhance the industry-led approach taken by Borders DYWIG.

The aims of the Borders DYWIG are to increase employer engagement with education providers, namely the College, secondary and primary schools in the region; to provide support, encouragement and practical assistance to employers to recruit more young people; and take action to promote equality relating to the career aspirations of young people and parity of esteem between learning routes. These aims will be achieved through the completion of ten identified objectives, which are designed to create a sustainable system of tri-component collaboration between business, education providers and young people, in the Borders.

Occupational Health & Safety: 2016/17 Staff Flu Programme: The staff flu vaccination programme commenced on 1 October with the focus this year on getting your vaccination early. As in previous years the target is 50% uptake in a high-risk areas. To assist in achieving this, our communications campaign will emphasise the link between taking flu vaccination and our corporate values. In addition to drop-in clinics and on-site sessions in departments, a wide network of peer vaccinators has been identified to ensure easy access to the vaccine.

Early indication is that uptake is brisk and Board members are urged to take up the offer vaccine at the session today (27 October) if they have not already been vaccinated.

iMatter Cohort 2 – Run 2: Questionnaires go live on 17 October for the second run of Cohort 2 (the Chief Officer's directorate). For the first time we have the ability to include staff in integrated teams in this process. Relevant teams have been briefed and are enthusiastic about being included.

The overall NHS Borders response rate remains high at 68% with an Employee Engagement Index of 75%. There is however more work to be done on action planning across the directorates to allow the organisation to reap the potential benefit of this tool.

Chief Officer Health & Social Care Integration

Murray Leys has been appointed to a permanent post as Chief Officer Adult Social Work with the responsibility for the commissioning and delivery of adult social work services.

Attended a meeting of the Executive Group of the Chief Officers network and a formal meeting of the Group, to discuss social care funding and its implementation across Scotland, the draft review of Strategic Plans, and the new GP Contract.

The Scottish Borders submission to the Health and Sport Committee was submitted and published. It was a survey seeking detail on information relating to budget setting, delayed discharges and the social and community care workforce. We were written to by the Chair of the Committee and thanked for our contribution. A small number of IJBs had been invited as a witness to discuss their submission, including the Scottish Borders. The IJB Chair agreed to attend as a witness on Tuesday 4th October.

In August Professor John Bolton led a session with key managers highlighting innovative work across the country to address the issue of delayed discharges and whole system working. Key elements will be included in the local action plan.

At its meeting on 17 October 2016 the IJB discussed how best to work with the Health Board and Local Authority to achieve financial balance. Specifically in relation to this, there will be a formal meeting of the IJB set up as part of the development session scheduled for 21 November 2016.

Medical Director

Knoll Update: The Knoll Community Hospital local GP practice covers ceases on 1st November. We have interim arrangements in place, with a one year salaried GP who will deliver enhanced input into the Knoll and will also allow us to test some models of care that may be applicable to the other community hospitals and will underpin the medium change model. The group overseeing this are also commissioning input from a national specialist to help refine our whole system pathways and models of care and this work will inform the Clinical Strategy work stream, reporting into the Clinical Executive Strategy Group, and ultimately the Health Board and IJB.

Medical Education: We now have three Chief Residents appointed from within our current cohort of trainees. Their main objective is to improve trainee engagement and allow us to evaluate the issues within our trainees are an early point, in light of previous Deanery visits. We are also developing our Medical Education Governance process which will come for ratification by the Board in the near future.

Procedure of Limited Clinical Value: The lists of these surgical procedures have been re-evaluated with the protocol refreshed in conjunction with the surgical teams. I personally audited a year's theatre activity to ensure we are not performing any procedures of limited clinical value without appropriate scrutiny. We can reduce a very small number of procedures in Orthopaedics but in other specialities, no further reduction or efficiency will be possible.

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

Name	Designation	Name	Designation
Jane Davidson	Chief Executive		

Author(s)

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