

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

Board Executive Team (BET) Development session: The BET took part in a development session on 18 April to assist them further to get to know each other better as a new Team, provide some protected time together to think and share personal reflections and insights from their 1:1 feedback sessions and to look at differences in preferences and styles across the Team, understand that and consider how to work effectively with it. The intended outcome was that the event would further build the Team's effectiveness by building an awareness of the strengths and potential 'blind spots' or areas for development.

Celebrating Excellence Staff Awards: The Chief Executive presented the NHS Borders Values Award at the staff awards event held on 28 April 2018. It was an inspirational evening full of absolutely wonderful people.

Non-Executive Directors National Event: The Chief Executive took part in the Board members national event on 14 May 2018 which was the first 'national event for all Board Members' with a focus on 'the role of Board members in ensuring effective governance across NHS Scotland as we continue to transform health and social care services'.

Project Lift – Transforming Care - Starting with you - Compassionate Leadership: The Chief Executive took part in the Project Lift event on 30 May which provided an update on the new approach to leadership development and talent management in NHS Scotland. The session focused on senior executives and exploring the human, economic and performance benefits of compassionate leadership and how the new approach would be underpinned by that.

National Commitments: The Chief Executive has continued to input to various national and regional Boards over the past 3 months including: the Public Health Reform Oversight Board; the NHS NSS Board; the Regional Business Support Services Group; the Implementation of the Health & Social Care Delivery Plan in the East Region; and the NHS Global Citizenship Programme Board.

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
29.03.18	DL(2018) 3	Scotland's New The Health and Social Care

		Standards
04.04.18	PCA(P)(2018) 3	Pharmaceutical Services Amendments To The Drug Tariff Part 11 Discount Clawback Scale And Remuneration And Reimbursement Arrangements From 1 April 2018
05.04.18	CCD 1-2018	The Community Care (Personal Care and Nursing Care) (Scotland) Amendment Regulations 2018
05.04.18	CCD 2-2018	Revised Guidance on Charging for Residential Accommodation
05.04.18	PCA(D)(2018) 6	Pay Award: Annual Expenses Programme
05.04.18	CMO(2018) 3	Health Promoting Health Service
10.04.18	PCA(P)(2018) 4	Pharmaceutical Services Drug Tariff Part 7 Dispensing Pool Payment
24.04.18	PCA(P)(2018) 5	Additional Pharmaceutical Services Minor Ailment Service Amendment Directions
27.04.18	DL(2018) 5	Additional Funding for Continuous Glucose Monitors (all ages) and Adult Insulin Pumps 2018-19
27.04.18	CMO(2018) 4	Valproate contraindicated in women of childbearing potential unless there is a Pregnancy Prevention Programme
30.04.18	PCA(M)(2018) 2	GP Premises Sustainability Loan Scheme 2018-19 Notes of Interest, Amount of Loan and Priority Categories
30.04.18	PCA(M)(2018) 4	Primary Medical Services (Directed Enhanced Services) (Scotland) Directions 2018
30.04.18	PCA(M)(2018) 3	General Medical Services Statement of Financial Entitlements for 2017/18
11.05.18	PCA(P)(2018) 6	Community Pharmacist Supplementary and Independent Prescribing Clinics - Funding 2018-19
21.05.18	DL(2018) 6	Medical Specialty Training Intake Numbers for 2019
23.05.18	DL(2018) 2	NHSScotland support for Armed Forces and Veterans
23.05.18	PCA(D)(2018) 7	Occupational Health Service for General Dental Practitioners, Members of the Dental Team and Practice Staff - 23 May 2018
29.05.18	DL(2018) 7	Consultant Retention
06.06.18	DL(2018) 11	Distinction Awards and Discretionary Points' schemes for Consultants 2018-19
11.06.18	PCS(AFC)(2018) 1	Pay for Agenda for Change Staff
15.06.18	PCA(P)(2018) 7	Drug Tariff Amendments in respect of Remuneration Arrangements from 1 April 2018

Medical Director

Responded on behalf of NHS Borders to the consultation on the Scottish Fire and Rescue service, which is proposing to expand the role of firefighters to reduce the burden on other public services.

He was also part of the national Management Support Group negotiating with the BMA on how to improve the working lives of SAS doctors on the 16th April.

Further work is taking place to raise the profile of dental services in NHS Borders which are working fairly well at present but like other services are always at risk of unexpected and swift deterioration due to difficulties in recruitment and retention of dentists.

Along with the rest of the BET, a development session took place on 18th April, facilitated by Hazel McKenzie, to forge and strengthen good working relationships across health and the IJB, with further work planned.

Continuing work has taken place in the early development of proposals for a new Borders Health Campus on the one hand, and the future of the Eildon practice premises in Newtown St Boswells, with an option appraisal process now underway and hopefully concluded by the end of the summer.

On the 23rd April, he attended a Finance Event for Directors of Public Bodies, presented by the Public Bodies & Public Services Reform Division of the SG in Glasgow where the challenges facing all public bodies was described and the associated governance responsibilities reiterated.

With Dr Annabel Howell, further discussions have taken place with regard to improvements in community palliative care provision, engaging with GPs and community nursing staff to utilise their expertise and available funding to best effect.

He shadowed Dr Lynn McCallum, Acute Medicine Physician on a ward round to explore the systems and processes which currently pertain in a busy acute receiving hospital environment, to better understand the pressures and obstacles faced by the service.

With the Director of Pharmacy and Chair of the GP Subcommittee, further work has taken place on the proposals to better control prescribing costs in NHS Borders, in keeping with national work and similar proposals in other Health Boards.

With other members of BET, he also attended the national event for Health Board members at the Golden Jubilee Hospital in Glasgow, introduced by the Cabinet Secretary for Health and Sport, with a focus on governance in the wake of events at Tayside Health Board, and presentations on various topics, including the governance issues emerging within IJBs.

He visited Orkney Health Board on 21-23 May as part of a HIS pilot inspection to undertake a Quality of Care Review with an emphasis on how organisations use data productively to bring about change and with a focus on visible leadership and improvement activity rather than an acceptance of the status quo.

The Learning Disability Clinical Board Performance review on 25th May was undertaken and highlighted the excellent quality of service provided by the integrated LD service and some of the ongoing frustrations in terms of “double-doing” with respect to NHS and SBC systems which were still to be resolved.

Final figures for 2017/18 also confirmed significant improvements in the use of agency locums and associated costs for locum doctors, reducing from over £3.27m in 2016/17 to around £960k in 2017/18, a reduction of around 70%. More importantly, it means our vacancy rate is currently around 2.8%, which is very good compared with other Boards.

Peer Approved Clinical System (PACS) Tier 2 System: Improvements have been set out which will allow patients better access to those medicines that are prescribed on an individual and case-by-case basis. The new Peer Approved Clinical System (PACS) Tier 2 System replaces the previous Individual Patient Treatment Request (IPTR) system. Under PACS Tier Two, clinicians may request to use a medicine (other than ultra-orphan) on a case-by case basis for individual patients. The medicine would be for an indication that has been considered but not recommended for use in NHS Scotland by the Scottish Medicines Consortium (SMC); or accepted for restricted use by SMC but intended use is outside SMC restrictions; or has been submitted to and is awaiting/undergoing evaluation by the SMC. The new Peer Approved Clinical System (PACS) Tier 2 will replace and build upon existing systems for non-routine access to medicines. While each health board will operate PACS Tier 2 for their own area, a new National Appeal Panel will be introduced, for individual requests for access to medicines not approved by the Scottish Medicines Consortium. This will see revised national standards in decision making, which includes making it clear that a decision for non-routine access must not include cost-effectiveness as part of the consideration. The aim is to enhance consistency across the country and remove any potential 'postcode lottery'.

A nationally approved policy, decision checklist along with paperwork used for application and to record the decision has been prepared for NHS Borders. A patient information leaflet has been prepared nationally and updated with Borders logo and contact details. A policy is in development detailing the administration and reporting aspect of PACS Tier Two and a report on applications will be sent quarterly to Scottish Government (as they were with previous IPTR system). Requests for haematology and solid tumour cancer treatments were previously submitted to the Medicines Management Committee (MMC) within the South East of Scotland Cancer Network (SCAN). Most Consultants are based at NHS Lothian and this was the reason for the decisions to be made at MMC. We are currently awaiting a decision from NHS Lothian on a regional approach to PACS Tier 2 treatment requests.

Chief Officer Health & Social Care

Finance: The Chief Financial Officer post remains vacant and therefore assistance is being sought from a recruitment agency to support a more thorough search for the position. We have also requested support from Scottish Government and NHS Lothian.

Parliament Health and Sport Committee: Five IJB Chief Officers attended the Committee on 22nd May to give pre-budget scrutiny evidence. The questioning mainly focused on shifting the balance of care from Acute to Partnership, and in particular how the Set Aside arrangements are supporting this or otherwise.

Winter pressures continue into Spring: Whilst we have seen fluctuations within the delayed discharge rate over the last few months it remains a challenge. We now have however, more beds available within our Community Hospitals and the demand on Craw Wood step down facility has dropped significantly in the last four weeks. In addition the Hospital to Home Service is dealing with more people leaving hospital and providing alternative provision to hospital admissions. There remains however, a pressure of delays within the system impacting on a number of parameters within our hospitals.

Further planning is underway to determine our preparations for next winter. These include continuing our discharge to assess policy, and expanding and further developing on our hospital to home services, maintaining the Craw Wood and Waverley Care step down

provision, centralising our Matching Hub at Borders General Hospital with our START team, and commissioning additional care hours and residential care beds to better meet the demand.

We have also expanded on our offer of community hubs and more third sector partners are joining this work as we roll out a full drop in service across the five localities.

We have spot-lighted, the work of Craw Wood, Hospital to Home, the Matching Unit and the Transitional Care Facility at Waverley Care Home within our Annual Performance Plan, a draft of which is on this IJB agenda.

External Auditors and Inspection: I have recently met with the Care Inspectorate and Health Improvement Scotland regarding our progress against the recommendations made within their report of 2017. I am pleased to report they were impressed with progress especially around the governance of the partnership, the vision and the controls put in place around planning and direction.

They commented on the comprehensive action plan we have in place, but they stated it was perhaps *over* comprehensive with regards to the evidence provided showing our progress. They have requested a summary rather than providing the whole evidence base we have currently been collating.

I also met with our external auditors who also passed similar comments, and were pleased to see that the IJB had introduced the Direction on Discharge to Assess and the work we have undertaken to bring the ICF resource back on focus. However arduous this was for us, they appreciated the greater control exercised by the Board on this spend.

They remained critical however at our struggle to appoint a Section 95 Officer stating that this is essential for the future. We are in process of appointing a recruitment agency to support a more thorough search for the position.

We did discuss the signing off of the accounts for 17/18 and they would support the proposal that the accountable officer from the Council to sign off the accounts on behalf of the IJB for this year as an exception.

Adult Social Care: Michael Murphy has been appointed to the Adult Social Care role on an interim basis and we are shortly to advertise for the permanent position. Michael has extensive experience of Adult Social Care both in Scotland and in Wales. He supported East Lothian IJB through their development as a Health and Social Care partnership.

He has already made a start at going through our savings actions and the preparation for determining further commissions to meet the demand of Care.

Regional/National Work: At the last IJB I reported on the regional work on Diabetes 2, this continues and we expect to see some progress soon on the introduction of a support/leadership team to take the work forward under the governance of the steering group chaired by Tracey Logan.

I've been involved in some further national work regarding children's health and mental health in particular, with COSLA's statistical team. This work is attempting to identify trends and contributory demographic factors which lead to poor outcomes for some people, particularly in the area Mental Health.

This is particularly pertinent to local concerns here within the Borders. The COSLA team felt it important that the national direction is suitably informed by a clear understanding of the reality of local need and demand.

Primary Care: The GP Sub Committee considered an early draft of the Primary Care Improvement Plan. A working group has now been brought together with individual GPs to develop this plan to utilise the national direction to meet the needs here in the Border. We are excited by the emphasis on locality and cluster working which supports the locality planning already begun by the partnership.

The new contract for GP's provides some encouraging opportunities for a greater join up of our services both within the community but also within our hospitals.

Further iterations of the plan will be brought to the Strategic Planning Group and the IJB.

Future work: This IJB meeting will consider the drafts of our reviewed strategic plan and of our annual performance report. Together these documents show the necessity of our partnership working and the direction required to meet the on-going pressures of providing effective health and social care within the Borders. Whilst we have seen some success, the quantum of demand needs more capacity to be released through the greater management of demand.

We have only made a start; there remains a great deal to do.

Director of Nursing, Midwifery & Acute Services

Scottish Executive Nurse Directors (SEND), Claire has agreed to be one of the deputy Chairs for this group.

Fiona McQueen, Chief Nursing Officer, visited NHS Borders on 16th April and started the day by visiting a patient with Jackie Playfair, Community Nurse in Galashiels, then had a tour of the newly refurbished Melburn Lodge and finished the day with an open Q&A session with Senior Nurses and AHP's.

Meeting with Professor Brendan McCormack, Head of the Division of Nursing/ Head of QMU Graduate School, Associate Director Centre for Person-centred Practice Research (08.05.18): Claire Pearce met with Prof McCormack to discuss potential collaboration around practice development. This would support some of the culture changed required in the clinical areas. There is a further meeting in August with the Associate Nurse Directors, Brendan and Claire to explore this further.

Specialist Nursing Meeting (10.05.18): Claire is leading a national piece of work on behalf of Executive Nurse Directors to review special nurses. It is hoped this review will provide consistency across the country in relation to titles, roles, job description and competency assessment.

Pride in Nursing | NHS Borders Nursing and Midwifery Conferences 2018 (11.05.18 and 17.05.18): Claire Pearce hosted conferences in May which took place over two days - the first for registered nurses and midwives and the second for Healthcare Support Workers. Both days were introduced with a powerful exercise highlighting the importance of how it feels to be anonymous, not in control, confused and alone. This was a reminder we need to value and protect the identity of patients through illness and disease as much as we value and protect it ourselves. The conference programme focussed on the

opportunities that exist across health and the experiences that can be gained through nursing. There was a very positive feeling at the two events with great feedback from those who attended.

National Event Exec Directors Event (14.05.18): Claire Pearce attend the event in Glasgow which focused on the role of Board Members in ensuring effective governance across NHS Scotland.

Nursing & Midwifery Workload and workforce planning session (29.05.18): Claire opened this event where the national team had come to NHS Borders to work with senior nursing colleagues, HR and SCN to look at workforce tools and staffing levels within Board.

Back to Basics: The first learning session for Communication with patients and families was held on the 29th May. It was hosted by Peter Lerpiniere, Associate Director of Nursing (Mental Health, Learning Disabilities and Older People) with guest speakers from Clare Oliver, Communication Manager and Scott Murray, Liaison Psychiatry Nurse Specialist.

Chief Executives: Leadership Event (30.05.18): Claire Pearce attended this event in Edinburgh with Jane Davidson, Chief Executive and Amanda Cotton, Consultant Psychiatrist. The event was to launch Project Lift. Michael West, Professor of Organisational Psychology, Lancaster University talked about Compassionate and Collective Leadership.

SCN Julie Campbell from dialysis unit BGH and Dr Robert Duncan, GP have completed their Scottish Quality Safety Fellowship. Claire attended the graduation event on 31 May at the Beardmore Hotel. This is a much sought after course and it is important that both Julie and Robert are given some work within NHS Borders which will allow them to embed the skills they have learned.

SCN Leadership Development programme (04.06.18): Claire Pearce attended the third event for SCN's held at Tweed Horizons.

Leadership Walkround (04.06.18): Claire Pearce and Jamie Thomson, Clinical Nurse Manager, lead the walkround Medical Assessment Unit

Healthcare Improvement Scotland Visit (07.06.18): Robbie Pearson, Chief Executive, Ann Gow NMAP Director and Dr Brian Robson, Medical Director HIS attended NHS Borders at the request of Jane Davidson to be briefed on the concerns around some of the standards of care. Claire and Cliff Sharp attended this briefing. Claire presented her findings since the HIS unannounced visit in June 2017 and the interventions which have been put in place to improve the quality of care .

Healthcare Improvement Scotland Visit (07.06.18): Ann Gow, NMAHP Director and Simon Dunn, Head of Nursing and Midwifery visited NHS Borders to gain an insight into the work that has been underway with the Back to Basics Improvement Programme. The visit started with presentations from those involved with the programme, then Simon Dunn spent time with Clinical Nurse Managers and Nicky Berry finishing the day with a tour of the BGH.

Director of Strategic Change & Performance

IM&T: Road to Digital: The programme is now in delivery phase and current planned activities are progressing well. However the overall Programme RAG is currently RED due to the expected delays to the Resilience Facility and the impact on full VDI rollout. We can re-plan to ensure these expected delays have minimal or no impact on the overall programme delivery. Multi Function Device rollout has also been re-planned to allow meaningful user engagement to occur. “Route to Green” Action is underway in the form of detailed re-planning so that delayed activities can be pushed to later in the programme and planned future tasks be brought forward. Altering the sequence of tasks will allow the overall programme delivery to continue as planned.

IT Operations: There has been continual improvement in operational delivery due to the work undertaken as part of the clinical productivity programme. Operational workload had reduced in some areas with queues reducing due to better management of calls and communications throughout the teams. We continue to move this into other areas to try and introduce the same efficiencies although other groups have more scheduled work rather than responsive so the challenge is slightly different and maybe less conducive to this approach.

Service Desk: Phase 2 of Topdesk continues with focus around Change Management, Resource Management and Support & Maintenance Contracts. With the introduction of these modules we have been able to introduce a full change process along with communication, review and approval processes. The Service Desk will be sending out the yearly customer satisfaction survey w/c 11/6 to allow feedback around TopDesk and overall IT performance and delivery.

Planning & Performance: Celebrating Excellence Awards: The fifth annual Celebrating Excellence awards were held on Saturday 28th April 2018 at Springwood Park. The event attracted 380 members of staff, nominators, fundraisers, volunteers and invited guests. The evening was a great success showcasing some of the good work across NHS Borders. Spirits were high with 12 awards presented before the Chairman’s Award, followed by the announcement of the Platinum Award; a one off award for outstanding contribution and dedication to NHS Borders to mark the 70th Anniversary of the NHS. The evening’s entertainment was our very own Health in Harmony Choir and Oliver Harris, a singer who is no stranger to the Edinburgh Festival and performs regularly in Madeira and Mugs & Hugs Photobooth. The event was funded by generous sponsors totaling £3000, as well as the General Endowment Fund. A feedback questionnaire was sent to all attendees; responses were used to inform an impact report which was presented at the June 2018 Endowment Fund Board of Trustees meeting.

Director of Workforce

Pay Award: The Scottish Government has announced a pay award from 1 April 2018 for staff covered by the Agenda for Change agreement (effectively all staff other than senior managers, doctors and dentists). In line with the previously announced Public Sector Pay Policy for Scotland, it provides a 3% uplift for pay points up to £80,000, a flat rate increase of £1,600 on points above £80,000 and maintenance of the Scottish Living Wage of £8.75 per hour. The resultant pay matrix for NHSScotland differs from that in England following acceptance by NHS unions in England of a three year deal, although no staff in Scotland should now be receiving less than their direct counterparts in England in the current year.

Pay talks are continuing with unions in Scotland on a potential multi-year deal in which this award would be taken into account.

Brexit: Scottish Ministers are very keen for us to assess the likely impact on services of EU withdrawal and to begin operational planning for the potential risks. One of the principal risks is retention or replacement of those members of the current workforce who are EU or EEA nationals or the spouses or children of EU/EEA nationals. The major difficulties are that the future immigration, working and residential status of EU citizens in the UK is still unknown and that no Health Board in Scotland has a fully reliable means of identifying non-UK EEA staff. At the time of writing we are expecting imminent guidance on this issue including guidance for line managers of EU27 staff, which we hope will assist in communications. We also understand that a template for all public bodies in Scotland is being developed to help assess the state of readiness. A verbal update can be given to the Board if appropriate and a full paper on the issue will be brought to the August meeting of the Board.

Staff Governance: The Board Staff Governance Monitoring return for 2017/18 has been agreed by the Area Partnership Forum and Staff Governance Committee, signed off by the Chief Executive, Employee Director and the Chair of the Staff Governance Committee and submitted to the Scottish Government on Thursday 31 May 2018. It includes iMatter data, sickness absence statistics, and KSF information and the themes may feature in the Board's annual review in the autumn. The Staff Governance Working Group is now refreshing the Staff Governance Action Plan for 2018/19, progress with which is scrutinised by the Area Partnership Forum and at meetings of the Staff Governance Committee throughout the year.

Medical Training – Employment of Doctors in the Training Grades from August 2018: Hard work is continuing by HR Teams across the East Region to implement revised future employment arrangements for Doctors in Training (except GPSTs) by a single East Region employer, NHS Lothian, from 1 August 2018. NHS Borders along with NHS Fife will continue as a training provider and will act “on behalf of” the new regional employer in local employment matters. Doctors in the Training have recently been notified of the new employment arrangements; they have received details of their placement, base hospital and rota and pay banding at a much earlier stage than previous years. NHS Boards, the Scottish Government and British Medical Association worked together on these new arrangements. The new process will improve the experience for Doctors in Training by providing a consistent employer throughout their training rotations regardless of the NHS Board where they are based. As a result, Doctors in Training will benefit from more straightforward processes when dealing with their tax codes, pensions and mortgage applications. Additionally, their access to employee service based schemes will improve. There are currently 14 General Practice Specialist Trainees still working and training within NHS Borders; however they are now employed by NHS Education for Scotland (NES). NHS Borders was an early adopter of the single employer scheme for GPSTs from February 2018, and the first East Region health board, to bring in the new employment arrangements for GPSTs. This has been a successful trial run for the “big bang” of single employer status for the remaining 60 Doctors in Training from August 2018

Workforce Planning: Part 3 of the National Workforce Plan (which focuses on Workforce Planning in Primary Care) has recently been issued. The themes coming out link closely with Part 1 (which focused on health) and Part 2 (Health and Social Care Integrated workforce) and include developing integrated workforce data, national and local labour market and workforce analysis, promoting health and social care settings more widely as a positive career etc. The Board is working with Scottish Borders Council on the

development of the first Health & Social Care Integration workforce plan, which will incorporate some of the data recommendations highlighted above and will be considered by the Joint Staff Forum.

A regional workforce plan highlighting key workforce themes, challenges and risks for each NHS Board in the East Region, as well as some of the joint ongoing initiatives has recently been published. The Workforce Planning Team is now working on preparation of the annual Workforce Projections for submission to the Scottish Government and also an annual update to our 3-year Local Workforce Plan. Planning is underway to assess with service and clinical managers anticipated transformation of their services and consequently their workforce over the next three years. The draft submission will be considered by the Area Partnership Forum at its June meeting prior to submission of the workforce projections to the Scottish Government.

Partnership Workforce Conference: The annual Local Partnership Workforce Conference was held on Friday 27th April. It has been a feature of our workforce, Staff Governance and Partnership planning since 2006. The conference was aimed at all staff across NHS Borders regardless of role, and partners attended from Social Care and NHS Lothian. The focus of this event was staff engagement and involvement as well as a chance to celebrate the 70th birthday of the NHS. In the interactive workshops delegates focussed on several themes including; positive staff stories, iMatter', implications for staff of integrated health and social care services, regional planning and the Staff Governance Action Plan (possible plain English version). The success of the conference will be assessed by the Area Partnership Forum.

Project LIFT: Project Lift is collaboration between Scottish Government, NHS Education for Scotland, the Golden Jubilee Hospital and National Services Scotland. It aims to develop leadership capability and capacity creating formal and informal partnerships within local health and care systems in Scotland. It will co-ordinate and oversee four key elements of activity, Values Based Recruitment, Talent Management, Leadership Development and Performance Management and Appraisal.

Agency Locum Doctors Costs: Recent figures released by the NHS in Scotland Information and Statistics Division (ISD) shows that NHS Borders has successfully reduced agency costs on temporary doctors by 70% in the financial year 2017/18, which well exceeds the Scottish Government target of a 25% reduction. The agency spending plummeted from £3.27 million last year to just £0.968 million this year (a saving of £2.302 million). The ISD release highlighted that NHS Borders had achieved the highest reduction in agency medical spend and also the lowest overall costs for agency doctors in Scotland last year. This good performance in controlling costs has been credited to successful recruitment to several highly specialist consultant posts over the year and also the introduction of innovative Clinical Development Fellow (CDF) posts which have proved to be an attractive, clinically safer and more cost effective alternative to agency junior doctors.

Consultant Discretionary Points: The Scottish Government has announced that the current arrangements for consultant discretionary points will continue this year and will be paid from 1 April 2018 in reward for exceptional work and above average contribution undertaken during 2017/18. Local arrangements for considering applications are being finalised with the Local Negotiating Committee (LNC)

T&PD: Regional Education & Workforce Development The original plan for this project was to draft an equivalency agreement for mandatory education and develop single

shared learning resources where opportunity exists based on an agreed set of learning outcomes either from the NES Framework or the UK Core Skills Framework. As national agreements about frameworks is jeopardising the progress of the regional mandatory work stream it was agreed to take an alternative bolder approach. We aim to implement a single shared learning resource approach across the 9 mandatory subjects. This means that we are being driven by standardising existing practice and reducing unnecessary duplication rather than relying on external frameworks to steer the work. If we were to move to a 'Once for Scotland' approach for Mandatory in the future we would then be coming from a robust regional position. Board L&D leads will now scope all modules to assess the degree of variance reporting.

HCSW Career Pathway: Following a successful Endowment Committee Bid, NHS Borders is implementing a new Band 4 nursing role which aims to meet current and future service, financial and workforce challenges. The career framework will be actively managed, and offer clear and genuine development opportunities for the Healthcare Support Worker workforce.

Advanced Nurse Practitioner (ANP) Strategy out for Consultation: The Advanced Nurse Practitioner role is a unique integration of nursing and medical knowledge and skills, which has facilitated new ways of working and fostered greater collaborative working. ANPs are a sustainable solution to help meet the changing demands on the health service. The vision over the next five years is to build on the existing cohort of ANPs and to continue to develop ANP roles where there is a service need and the role can benefit patients; and to enhance the support and governance around the roles.

Resuscitation Quality Improvement (RQI) Programme: Following NHS Borders ground breaking success working with local charities to implement the Out of Hospital Cardiac Arrest Strategy, survival outcomes improved from 4% to 29% . As top performer in the UK, the British Heart Foundation invited us to join a consortium of 5 organisations in an evaluation study aiming to improve inpatient CPR skills decay. A further successful Endowment bid will purchase the licenses for use of a portable training solution which will be based in BGH from August. This training tool gives staff automated feedback on the quality of ventilation and chest compression performance. Hospitals testing RQI in the USA have seen improvements in inpatient CPR survival rates of up to 21%.

From a quality improvement perspective, Borders data will be quantified and aligned to CPR survival outcomes.

Work & Well-being: Irene Bonnar retires from her post as Head of Work & Well-Being as of 30 June 2018. In the first instance Vikki Hubner will act up supported by April Lindsay in her PA role with John Cowie continuing to provide Executive support. These arrangements will remain in place until there are further discussions on the structure of the service going forward.

Fit for Work Services: The Scottish Government and the UK Government agreed to bring the provision of the Fit for Work Scotland assessment service to an end from 31 May 2018. In light of this, this aspect of work and well-being services has now ceased. The national advice line remains available to employers looking for advice about health in relation to work.

Joint Director of Public Health

Implementation of the See Me Programme - Scottish Borders 2018

Background: The World Health Organisation evidence that mental health problems represent one of the biggest challenges to population health across the globe, with depression set to be the second largest cause of morbidity by 2020. Furthermore, the ongoing challenge of stigma and discrimination means that people with mental health problems often face major barriers to full participation in society.

Recent research suggests that:

- 40% of young people struggle with their mental health
- 20% of adolescents may experience a mental health problem in any given year.
- 50% of mental health problems are established by age 14 and 75% by age 24.
- 4% of young carers experienced mental health problem; this compares with 1% of non-carers.
- Children living in poverty are 4 times more likely as those from the wealthiest homes to have mental health problems by the age of 11

Local Scottish Borders data from the Pupil Wellbeing Survey 2017/2018 found that, of 965 S2 pupils:

- 30% felt regularly stress and overwhelmed in school
- 30% felt older pupils were a positive role model to younger pupils
- 20% felt that all young people in the school are kind and respectful of each other.

Approach: NHS Borders (Joint Health Improvement Team) in partnership with Scottish Borders Council (Education) are leading the way in implementing the See Me's authority wide approach to reducing stigma and discrimination around mental health in high schools.

The See Me schools programme (funded by Scottish Government & Comic Relief) aims to help young people understand the importance of good mental health, recognise how it affects young people, and builds confidence to talk openly about mental health. This will be achieved by implementing a two pronged approach:

1. Empowering young people to advocate for their own mental health and the mental health of their peers.
2. Provides support to the staff within schools and youth settings to develop mentally flourishing communities where individuals can learn and work within an environment free from mental health stigma and discrimination.

Actions:

1. Scottish Mental Health First Aid Peer Support Training: approximately 800, S6 pupils attending across the 6 partnership areas
2. Scottish Mental Health First Aid Training 50 teachers & partners attended
3. Evaluation: pre & post training questionnaires
4. Implement the See Me's 'It's Okay' campaign and 'What's on your mind?' pack across all Scottish Borders High

Outcomes:

This is a whole school approach works toward achieving the following outcomes:

- Staff members and young people will develop increased levels of mental health literacy and feel confident and safe in talking about their mental health in school

- Staff members and young people will know where to go to seek help if they or someone they know experiences a concern with their mental health;
- Schools and youth settings report greater openness to talk about mental health and lower levels of stigma and discrimination
- Ensure young people's voices are heard
- Further information can be found: <https://www.seemescotland.org/young-people/young-peoples-mental-health/>

Party in the park: Public Health and the Joint health Improvement Team were invited to participate in the recent SBC Led Party in the Park event to celebrate the opening of the new Galashiels public play park, on the 26th of May.

The invite was prompted by health improvement presence at previous events which have been well received by the public.

Our event aims:

- Offer healthier snack options for children and families attending the event
- Raise the profile of and promote community based health improvement activities available locally

To demonstrate if we met our aims we collected data on:

- Attendance at stands
- Key information re: conversation items and follow up activities
- Number and type of information resources distributed

HLN volunteers were keen to support this event, seeing this as an opportunity to share information about local opportunities and simple snack ideas for families.

We worked in partnership with local suppliers who provided fruit and equipment for the day.

Four volunteers set up, prepared and distributed fruit and yoghurt pots and a wide selection of fruit to families who attended the event.

We provided a range of information on activities in Langlee as well as information on healthy eating, physical activity opportunities, looking after your mental health and information on locally led Diabetes support work.

What did we achieve?

- 350 people engaged with the stand
- 480 portions of fruit were distributed
- 34 assorted information leaflets were taken

Volunteers and staff engaged in conversations around healthy eating, walking football, diabetes and local physical activity opportunities with families throughout the day.

NHS volunteers contributed 28 hours of time to support this event and also contributed to the final report.

Positive feedback on the contribution made to this event has been received from event organisers & SBC partners.

Informal feedback on the day from all involved suggests that this was a worthwhile contribution to a very positive event.

Integration of early intervention services: Work is underway to develop a proposal for developing an integrated service which provides lifestyle and early intervention support currently provided by three different services: Quit your way (QYW), Doing Well (DW) and LASS. QYW, LASS and DW deliver focussed interventions supporting lifestyle changes and emotional wellbeing. This development aligns with a focus on prevention, early intervention and aims to redesign services to ensure a more holistic model of care. The proposal to integrate services is being developed to deliver the following advantages:

- Improved patient journey (no need to transfer between services)
- Increased accessibility (advisors will be able to provide holistic support therefore increasing opportunities in terms of availability)
- Equity of delivery across Borders region

A Steering Group has been established which will support the production of a proposal and service outline by end August 2018.

Director of Finance, Procurement, Estates & Facilities

Financial Year 2017/18

The External Audit Team concluded work on the 2017/18. Annual Accounts and the final clearance session was held on the 4th June 2018 and confirmed the Board had achieved its financial targets and would receive an unqualified audit opinion. In preparation for the Board meeting a detailed session to go through the Annual Accounts with Executive/Non Executive Directors took place on the 28th May 2018 with good attendance from Executive and Non Executive Directors.

The External Audit Annual Report to Members was presented to the Audit Committee at its meeting on the 14th June 2018. The Audit Committee will recommend to the Board to formally approve the 2017/18 Annual Accounts at its meeting on the 28th June 2017.

Focus has now moved to the production of the Cost Accounts which are due for submission in August 2018.

Financial Year 2018/19

Led by the Director of Finance, the Senior Management team have been working to identify opportunities to bridge the shortfall in the financial plan. Development sessions were held with the Board in April and May at which benchmarking information was presented on activity, demand and cost. This was done to appraise the Board on where NHS Borders may seek to go in terms of Service Transformation to support long term financial sustainability.

This will culminate in an outline proposal on options being presented to the Board at its meeting on the 28th June 2018. This is likely to involved planning for the Board to return to financial balance over a number of years. The Chief Executive and Director of Finance have had an initial discussion with Scottish Government on the level of support that may be required by the Board in implementing a plan for financial balance which runs for more than a single year.

The Director of Finance has formally written to the CO of the Integration Joint Board outlining the Provision of Resource to be made available during 2018/19 and awaits formal Direction from the IJB in terms of meeting the financial challenge outlined.

NHS Borders submitted its first Financial Performance Report (FPR) return to Scottish Government on the 19th June 2018. This covered the financial performance of the Board over the first 2 months of the year. The format of the reports have been amended slightly in anticipation of the commitment given to Parliament by the Scottish Government to provide a monthly report on the state of NHS Scotland's finances.

Borders MacMillan Centre Charitable Funds Scheme: The project to extend and refurbish the Borders MacMillan Centre (BMC) is currently on hold due to contractual and supply issues. We are working with our professional advisors to agree the best way to continue with the project as quickly as practical.

Audit Scotland Reports: The following Audit Scotland reports were circulated to the Clinical Executive Operational Group for noting and have the agreed action noted against each report:

- Short Guide to Integration of Health & Social Care Services in Scotland (**Audit Committee for information**)

Estates Update: The Fire Officer took up post on 11th June 2018 and will be familiarising himself with NHS Borders' premises over the coming weeks.

Property and Asset Management Strategy (PAMS) 2018: The proformas and PAMS light document was submitted to Scottish Government in June. Feedback is awaited.

Facilities: A review of the structure of the General Services Department is currently underway with the anticipated outcome being improved service delivery and better career progression for staff. This exercise is due to be completed by the end of September 2018.

Catering: The Deputy Catering Manager has recently passed her registration to be a Royal Environmental Health Institute of Scotland (RHIS) Food Hygiene Presenter. This represents a significant step forward in terms of managing risk within our Catering Service.

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)

Name	Designation	Name	Designation
Board Executive Team			