

Borders NHS Board**STATUTORY AND OTHER COMMITTEE MINUTES****Aim**

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

Background

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

Summary

Committee minutes attached are:-

- Public Governance Committee: 08.05.18
- Staff Governance Committee: 09.03.18
- ACF: 03.04.18

Recommendation

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

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

Approved by

Name	Designation	Name	Designation
Jane Davidson	Chief Executive		

Author(s)

Name	Designation	Name	Designation
Iris Bishop	Board Secretary		

PUBLIC GOVERNANCE COMMITTEE



Minutes of Public Governance Committee (PGC) Meeting held on Tuesday, 8th May 2018 from 2.00 – 4.00 p.m. in the BGH Committee Room

Present: Karen Hamilton (Chair), John McLaren, Tris Taylor, Allyson McCollam, Shelagh Martin, Margaret Lawson, Karen Maitland & Heather Fullbrook.

In Attendance: Susan Hogg & Hannah Fairburn

1. Welcome & Introductions

Karen welcomed everyone to the meeting.

2. Apologies & Announcements

Apologies were received from: Nicky Hall, Clare Malster, Cliff Sharp, Claire Pearce, Annabel Howell, Elaine Cockburn & David Parker

3. Minutes of Previous Meeting:

These were approved as a true record.

4. Matters Arising from Minutes & Action Tracker:

- 4.1 Action No. 27 – Availability of Adult Changing Facility – Proposal for funding and location was to be included in a report to the Endowment Fund Board of Trustees meeting in May 2018. However, this has since been deferred to June. Susan Swan will report to the PGC after the meeting on the decision made by the Endowment committee.

Action No. 31 – In Ros Gray's absence an update to be sought from Diane Keddie.

Action No. 32 – Update on Quality Improvement Approach to be fed back from Elaine Cockburn in Ros Gray's absence.

Action No. 33 - Quality Improvement Approach, communication with patients and families. Peter Lerpiniere to attend our November meeting to talk to the group about this work.

5. Topic Agenda Items:

5.1 Feedback & Complaints Annual Report:

Karen Maitland, Quality Improvement Facilitator – Person Centred Care, talked to the group on the various ways in which the organisation gathers feedback. This includes our patient feedback volunteers who collect feedback in a real time way. Karen

highlighted that complaint numbers so far for this year, in comparison to last year have increased and commendation figures have gone down. John asked as a Board are we concerned that the number of complaints have gone up. No replied Karen as we do encourage and support our patients, carers and relatives to let us know if they have a complaint. Karen went on to explain the process of a stage one complaint and a stage two. John asked the group to not under estimate the improvements we make from complaints but also to share the learning with our colleagues when we get it right.

Heather remarked that there are wards within the hospital that engage well with carers and there is some positive learning that other staff could take from them. Carers also support people to give feedback whether it be a complaint or a commendation.

Karen informed the group that regular reports from feedback and complaints would be brought to this group.

5.2 Child Health Annual Report:

Allyson presented to the group the Child Health Annual Report. Karen (H) asked what resources do you have for example is there national work that we can draw on? There is a lot of national work and we can access elearning and share information from other child health areas and groups.

Tris asked with regard to scrutinising what aspect is the PGC tasked with? Karen (H) explained under the banner of development and understanding the procedures with the report inform the PGC of what is going on.

Children's services can often feel like the poor relatives commented John we talk more about adult services. As a Board we need to try and get the balance and this may mean having more conversations with the Integrated Joint Board. Allyson explained that things have progressed and the responsibility of child health services was not always clear in the past.

5.3 MacMillan Cancer Centre Project:

Hannah Fairburn, Head of Capital Planning gave a presentation to the members on the extension and refurbishment of the centre. Karen (H) asked Hannah how would the building work impact on the patients who use the centre. Patients shall move to different parts of the unit when receiving their treatment during the building work and this will be monitored by staff on a daily basis.

Have patients who are currently using the service been involved in the planning of the design of the unit asked Shelagh. We have a patient user group commented Hannah who have been fully informed of the plans and involved throughout.

5.4 PGC Annual Report 2017/18 – Final

No negative responses were received from the distribution of the final report and this was sent to our finance dept. As a governance group the information received and shared with the board was seen as good practice.

6. Any Other Business:

6.1 Equalities issues arising from the agenda - None

6.2 Risks identified from the agenda – The Carers Act

7. **Future Meeting Dates 2018**

31st July

6th November - All from 2.00 – 4.00 p.m. in the BGH Committee Room



STAFF GOVERNANCE COMMITTEE

Minutes of the meeting held on Friday 9th March 2018 at 10am in the Committee Room, Borders General Hospital, Melrose

Present: John McLaren, Employee Director, Co Chair
Karen Hamilton, Non Executive Director, Co Chair
Tris Taylor, Non- Executive Director

In Attendance:

John Cowie, Interim Director of Workforce.
Bob Salmond, Head of Workforce Development & Medical Staffing.
Robyn Brydon, Risk and Safety Senior Advisor.
Kim Smith, Operational Lead, Training and Professional Development.
Claire Smith, HR Manager (for items 5 and 6)
Yvonne Chapple, Staff Side Chair of BGH Partnerships Forum (Ex Officio Member)
Shirley Burrell, Staff Side Chair of Mental Health and Learning Disability Partnership Forum (Ex Officio Member)
Edwina Cameron, HR Manager

1. Welcome, Introductions and Apologies

Apologies were received from Sheila MacDougall, Irene Bonnar, Ailsa Paterson, Claire Pearce, David Parker,

2. Minutes of Previous Meeting held – Monday 11th December 2017 Agreed as an accurate record of the meeting

Matters Arising – Update on item 6. Paper taken to the Board to provide assurance against the performance against the Health and Safety Agenda. Board requested the development of an action plan which will be reported by Mr Cowie and Mrs Pearce on a regular basis to the Staff Governance Committee. Full action plan to be delivered at the next Staff Governance Committee.

Mrs Hamilton reported that she had been unable to speak to colleagues within the Board Executive Team regarding their support of iMatter. Both Ms Chappel and Ms Burrell raised the issue of the lack of corporate communication linked to the launch of the most recent survey. Mr McLaren and Mr Cowie will investigate and report to the next committee Meeting.

Action Plan – Action 41 to be removed from tracker
Action 51 complete

The Chair was asked by Mrs Cameron to allow Mrs Smith to bring her items forward. This was agreed.

5. Report on eKSF and TURAS Implementation

Mrs C Smith reported on the regional approach used successfully in relation to a communication plan. Committee members indicated their support for the implementation work undertaken to date. Non-Executive members requested assurance regarding the performance against the HEAT standards for the completion of Appraisals and Personal Development Review (PDR). Mrs C Smith assured the Committee that whilst NHS Borders did not achieve the target of 80% of PDRs recorded on the previous eKSF system, line managers continued to report completion of paper copies of the documentation.

6. Report on Nursing & Midwifery Workforce Planning and Workload Tools

Mrs C Smith reported that the tools had been run between 26 of February, 2018 and the 4th of March, 2018 in all adult in-patient wards. Data is now being collected.

Mr Taylor asked the purpose of the tools. Mrs C Smith explained that this was an annual statutory obligation which allowed us to review our nursing & midwifery staffing levels and recommend service or workforce changes. However, there is no set standard for “safe staffing”, although the Scottish Government is developing a Bill on safe staffing in the NHSiS. Mr Salmond explained that the tools were developed, under the leadership of a previous Chief Nursing Officer as a workforce planning methodology to analyse the effectiveness of our current models of staffing. It also provided grounds to evidence service redesign including workforce redesign.

Mrs Smith was asked to produce a paper for the full Health Board

3. Staff Governance Action Plan Progress Report

Mrs Cameron updated the committee on the Actions within the Plan.

Mr Taylor asked questions linked to the purpose and performance of the Staff Governance Action Plan and the Staff Governance Standard. This led to a wider discussion and agreement that this would form part of the Committee’s next development session. Mrs Hamilton and Mr Salmond updated the committee on the role of the new independent National Whistle-blowing Officer – Mrs Rosemary Agnew the Public Sector Ombudsman. Mr Salmond suggested whistle-blowing may be a subject to consider for a future staff governance development session, and as there was an emphasis on the responsibilities of Executive Directors, members of the BET could also be invited to join the session. The committee members agreed that whistle-blowing should be a topic for a future development session.

Mrs Cameron added that the Committee would consider the annual Staff Governance Monitoring return to the SGHD at its next meeting on 21 May 2018.

4. Report on Central Booking System

Mrs K Smith updated the committee on the new electronic system for study leave and training opportunities which is currently being implemented within NHS Borders. The system will offer more assurance against the Boards' performance against the Statutory and Mandatory Training within the organisation. Members of the committee thanked her for this assurance

7. Policy Development Update

Mr Salmond updated the committee in the absence of Mrs Paterson. Mr Salmond explained that the Partnership Information Network (PIN) had developed over the years from originally model employment policy recommended as good practice, more recently as a minimum standard of employment policy and in the near future "Once for Scotland" PIN would lead to NHS Boards being obliged to implement the nationally agreed employment policy. Whilst the NHS Borders can report progress on the implementation of PIN policy we have, at present, not yet adopted two PIN model policies which remain out of date. In response to a request from Mrs Hamilton, Mr Salmond identified the Redeployment policy and Secondment policy as the two NHS Borders policies that were not yet PIN compliant and the Board may be scrutinised on implementation of PIN policy at the Annual Review in the Autumn. Mr McLaren said he was concerned at the length of time it had taken to implement some of the PIN minimum standards in the recent past – parental leave policy and phased retirement policy implemented in the last 12 months for example had taken far longer than most other Health Boards. Mr Salmond responded that it was inevitable that NHS Boards would have different timescales for the implementation of the minimum standards of PIN reflecting local circumstances including funding but the future development of "Once for Scotland" PIN would ensure that the situation would not be repeated. Mr Taylor asked for reassurance that NHS Borders complied with PIN Policies and what corrective action should be taken. Mr Salmond asked Ms Chapple and Ms Burrell, as the staff side partnership chairs if they agreed with his assessment that NHS Borders was compliant with PIN Policy with the exception of the two policies that he had identified. Ms Chapple and Ms Burrell indicated that they agreed. Mr Salmond added that the two policies should feature as a priority on the work-plan of the HR Policy Sub Group. Members of the Committee requested a paper detailing the business of employment policy development in NHS Scotland.

8. Committee Development Sessions

Mrs Hamilton requested an update about the development of cover summary papers produced to a consistent quality across NHS Borders committees. Mrs Cameron assured the committee members that she would work with them to ensure that they were content with these items.

Committee members agreed the following subjects for their future development sessions;

- Staff Governance – what is it/links/ outcomes etc
- Whistle blowing
- Changing models of Health and Social Care

Mr Cowie asked the committee members to consider;

- What would a successful committee look like?

- What are we here for?
- What are the processes and protocols?
- What items come to Staff Governance and what items are delegated?
- What items do we escalate?

Mrs Hamilton and Mrs Cameron to meet to discuss how this will be built into future meetings

9. Items for Noting: -

- a) Risk & Safety Quarterly Report – Noted. Mr Brydon reported that the Health and Safety Executive may make a visit to the board following a RIDDOR reporting episode. Mrs Hamilton asked him to update at the next meeting
- b) Occupational Health Quarterly Report – Noted in Mrs Bonnar absence
- c) National Confidential Alert Line Report – this report was noted. Mr Salmond reported on the whistle-blowing concerns raised with the national service and updated that there had recently been an advertising campaign within NHS Borders for the replacement Advice and Alert Line (AAL) run by the Whistle-blowing Charity – Public Concern at Work (PCAW).
- d) Area Partnership Working Review – Noted. Mr McLaren and Mr Cowie reported and will produce a fuller update to a later Staff Governance Committee
- e) Appropriate Access to other Committee Minutes

Area Partnership Forum Minutes – Noted by Committee Members.

Mandatory & Statutory Training Working Group Minutes – Noted by Committee Members.

10 Future Items

Removed from subsequent agendas

11. Any Other Competent Business

Mrs McLaren noted that the Partnership Workforce Conference is currently being planned for the April 2018.

Mrs Cameron reported that the national results for iMatter were now published on the Scottish Government Website, the Committee would return to this topic and the local NHS Borders reports later in the year.

12. **Date of Next Meeting** – Monday 21st May 2018 at 10am in the Committee Room, BGH

NHS Borders - Area Clinical Forum



MINUTE of meeting held on

Tuesday 3rd April 2018 – 17:00-18:30

BGH Committee Room, Borders General Hospital

Present: Alison Wilson (Chair; Area Pharmaceutical Committee) (AW)
Nicky Hall (Area Ophthalmic Committee) (NH)
April Quigley (Consultant Clinical Psychologist) (AQ)
Peter Lerpiniere (Mental Health & Learning Disability; BANMAC) (PL)
Dr Cliff Sharp (Medical Director) (CS)
John McLaren (Employee Director) (JMCL)

In Attendance: Kate Warner, Minute Secretary (KW)

Not Present: Chairperson (Area Dental Advisory Committee) (JT)
Austin Ramage (Medical Scientists) (AR)
Dr Tim Young (GP) (TY)
Pamela Gordon (Allied Health Professionals) (PG)

1 WELCOME AND APOLOGIES

AW welcomed those present to the meeting. Apologies were received from Dr Nicola Lowdon (Area Medical Committee) (NL); Alice Millar (Principal Dentist, Duns Dental Practice) (AM).

1.1 DECLARATIONS OF INTEREST

There were no declarations of interest expressed.

2 DRAFT MINUTE OF PREVIOUS MEETING 16.01.2018 (27.02.2018 cancelled)

The Minute of the previous meeting, held on 16th January 2018, was read and approved as an accurate representation of the meeting - with the following changes:- P2 – in winter plan presentation “as much emphasis on Christmas as New Year” change; P3 - spelling of Optometrist.

3 MATTERS ARISING/ACTION TRACKER

Action Tracker updates:-

#28 AW to attend Professional Advisory group meetings - On-going (AW)

#57 Add an action to follow up with other groups to find attendees/meeting dates (KW)

#58 Disseminate Duty of Candour email/link from CS (KW)

#59 Forward NHS Fife realistic medicine information to Dr A Howell (AW)

#60 Request Annual Operational Plan emailed to ACF members (AW/KW)

4. UPDATE – PHARMACEUTICAL CARE SERVICES PLAN

Alison Wilson reported that this annual Plan has been updated this year with Infographics and information from the Scottish Borders Council Localities reports. The plan aims to identify gaps in the service and this area is still a work in progress to identify opportunities, such as identifying which Community Pharmacy patients attend – currently a national project – and other areas who

may benefit from working with Community Pharmacies. Kyna Platts, Mental Health Pharmacist, is working with Mental Health to support patients with mental health issues and aims to provide Community Pharmacists with the appropriate knowledge and training to support. The Plan is included in the Board meeting papers – 5th April 2018.

Amendments to the PCSP – page 20 repeated text in commitment number 2 to be removed. Any additional comments can be sent to kate.warner@borders.scot.nhs.uk.

ACF noted this update.

ACTION: Make amendment on page 20 (KW)

5 CLINICAL GOVERNANCE COMMITTEE: FEEDBACK

AW provided feedback from the Clinical Governance Committee meeting held on 29th March 2018. Blood Transfusion committee has a new Chair, Dr J Bonnar; nursing training increased to 77%; and there is a new blood ordering system which will be much safer. Medical information update reports issues around funding. CS commented on the new approach to GP training which hopes to change medical training provide more positive exposure to general practice and the community. There will be a new Tissue Viability nurse in post at end of April. SPSO reports changes to complaints and updates to Datix reporting. Clinical Board reports a new style of reporting, around complaints and adverse events, which was very welcome and will provide the committee with a better view of these events. Mental Health to trial a management review on drug related deaths; also a new policy to ensure patients have risk assessment for transportation. Issues have been raised and resolved around Streets Ahead. Maternity services have had an increase in the number of still births in 2017 which was investigated, new Infant Feeding Lead in post and success with new maternity electronic record giving access to relevant data: for example, midwives can use to support smoking cessation.

6 PUBLIC GOVERNANCE COMMITTEE: FEEDBACK

NH was not able to attend the recent Public Governance Committee meeting; an updated Terms of Reference has been reviewed for the Committee.

7 NATIONAL ACF: FEEDBACK (7th March 2018)

AW provided feedback from the National ACF Chairs meeting held on 7th March 2018. Minute of this meeting had been circulated by email. New chair has been appointed – Stephen Johnston, NHS Orkney. There are plans to re-engage with the Cabinet Secretary as bi-annual meetings with ACF Chair have not happened in recent months and are important to provide input from Boards' ACFs. Nationally there is a drive to encourage Boards to support and raise the profile of ACFs.

8 NHS BOARD PAPERS: DISCUSSION

Duty of Candour – guidance has recently been issued and there is a CPD LearnPro module available which ACF are encouraged to review and to disseminate to professional advisory committees and include on meeting agendas to raise awareness. This is relevant to all healthcare organisations. Regional work on Realistic Medicine is being led by Dr Cliff Sharp as Medical Director with Dr Annabel Howell using funding for one day per week. Integrated Joint Board minutes discusses a hospital to home pilot working with central and Hawick areas; additional support for patients to be discharged from hospital without a care package in place; this will be discussed at JOPs. CS summarised the draft Annual Operational Plan and the requirement for

additional resources requested in order to reduce waiting times. AQ commented that targets are not backed up by resources available. JMacl offered an invitation to all ACF members to attend the Area Partnership Forum meeting (4th April 2018) as this was being presented at the meeting. It was commented that capital projects which are part of patient safety may be impacted by the plan.

ACF noted this update.

ACTION: Disseminate the Duty of Candour email/link from CS (KW); forward NHS Fife Realistic Medicine information to Dr Howell (AW); request that the Annual Operational Plan be emailed to Area Clinical Forum members and comments to AW (AW)

9 PROFESSIONAL ADVISORY COMMITTEES

11(a) Allied Health Professionals Advisory Committee (PG) – no update available.

11(b) Area Dental Advisory Committee (AM) – no update available.

11(c) Area Medical Committee (NL) – Looking for Chair, Dr A McVean has been nominated.

11(d) Area Ophthalmic Committee (NH) – reporting from the February meeting, noted that Optometry Scotland is reviewing change nationally. For example, there is a new University course at Highlands & Islands University (currently only Glasgow University). Shared care ideas are being investigated, for example Cataracts. The changes will be discussed locally and, whilst they may not make a difference to practices, they may flag up patients in the early stages of glaucoma, specialist contact lens supply and so on. Regional discussions are being represented nationally, for example nurse led services, Lothian covering on call. Conversations are beginning between the committee and the Eye Centre looking at pathways of responsibility, IT links and working through areas easier to change to begin with.

11(e) Area Pharmaceutical Committee (AW) – the new Pharmacy First service has been extended to Impetigo treatment along with UTI treatment with NES training for Pharmacists. NH asked (in AOCB) if this was same as minor ailments and patients exempt from paying as this would mean they can access without a doctor's appointment. Yes this is similar and will reduce appointments with practices and BECS giving much wider access to patients. Pharmacists can prescribe Trimethoprine/antibiotics with appropriate screening in place. One presentation in six months or patient referred. It was agreed that the wider message needs to be delivered. Most Pharmacies are covered but if there is a locum unable to deliver then the patient will be sent to an alternative Pharmacy. Other items of discussion were recent Pregabalin switch; the Pharmaceutical Care Services Plan; expression of interest in opening a Pharmacy in Tweedbank; change to application process to ensure a cut off to application after 16 weeks, with an 8 week reminder; new staff in Pharmacy BGH including Band 8 Cancer Senior Pharmacist and technicians; Pharmacy Care is on Trak for DME patients. The Integrated Care Fund Project has started looking at the pharmaceutical needs of patients with care packages, identifying pressures and supporting patients who require input around medicines; MAR charts replacing compliance aids; reviews of packages of care with medicines no longer required being removed. This will be run for at least a year, possibly longer with funding available.

11(f) BANMAC (PL) – meeting was cancelled due to weather – no update.

11(g) Medical Scientists (AR) – no update available.

11 (h) Psychology (AQ) – reports a new Head of Adult Psychology has been appointed, Timothy Spole. He will cover the Borders, including the three community Mental Health teams, and will also work clinically. Psychology recently presented a paper at CE Operational Group meeting to update on work of triaging the waiting list by employing locum Psychologists with funding available. The next phase of this work will be to deliver group therapy across the Borders allowing more patients to access the service quicker and reduce the waiting list. This is well established practice in other parts of Scotland. It was commended as a good step forward; there are 5 different therapies which will meet the needs of patients through group work. Anonymity was mentioned as a concern for some but that group therapy can be more valuable for some individuals with mutual support in place. This is currently in the planning stage.

ACF noted the updates and thanked the committee representatives present for their input.

ACTION:

10 NHS BORDERS BOARD: FEEDBACK TO THE BOARD

ACF agreed to take the following items to the Board as feedback:-

1. ACF welcomes the news of the appointment of Head of Adult Psychology.
2. ACF shares the Board's concern about the Operational Plan, waiting times and the challenge of having enough capacity and funding.
3. ACF remains concerned at the financial position, mountainous savings target and the impact on clinical services unless redesign is handled carefully. ACF wish to highlight that patient care should not be compromised to make financial savings and ACF would be looking for evidence going forward to be reassured of this.
4. ACF commented on the positive outcome of the Duty of Candour link and leaflets.

ACTION: Take feedback to NHS Borders Board meeting 05.04.2018 (AW) Forward ACF Minute to NHS Borders Board meeting (KW)

11 ANY OTHER BUSINESS

1. JMcl updated ACF on the discussion being had nationally around staff pay rises and that these would not be any less than those agreed by NHS England.
2. JMcl requested that all ACF members encourage groups, staff and teams to send representatives to the Workforce Conference being held on Friday 27th April 2018. The Conference will be marking 70 years of NHS and will be relevant to all staff members at all band levels. Chairman will open the Conference; there is a guest motivational speaker from The Art of Being Brilliant, regional integration work and a wider session on staff engagement. Genealogy experts from Galashiels will have a display of NHS Borders history highlighting Peel Hospital to achievements to-date. Registration through Elizabeth.mackay@borders.scot.nhs.uk

DATE OF NEXT MEETING

The next Area Clinical Forum meeting is scheduled for Tuesday 26th June 2018 at 17:00 in the BGH Committee Room. AW will be on annual leave – request to CS to chair June meeting (KW).