

NHS BORDERS ANNUAL REVIEW, CONDUCTED BY MINISTER FOR PUBLIC HEALTH, SHONA ROBISON, ON 15 SEPTEMBER 2009 AT BERWICKSHIRE HIGH SCHOOL, DUNS

Questions submitted prior to the Annual Review from members of the public – and the responses provided to these questions:-

Question 1

The discharge process isn't working for carers. Whilst there is a commitment at a planning level to recognising carers as partners in care, this isn't reflected at ground level by front line staff. What is going to be done to address this? Issues for carers, including young carers, are:-

- Not being consulted
- Not getting information
- Front line staff making assumptions
- Discharge at short notice
- Services not in place at home before discharge, leaving the carers vulnerable, especially if the discharge is coming up to a weekend

Response

NHS Borders is committed to involving carers and patients in the discharge process. We recognise that improvements can be made and would be happy to work with organisations such as the Princess Royal Trust Carers Centre to improve this aspect of the discharge process. We have a clear discharge policy which recognises the requirement for a multi-disciplinary approach to discharge and the importance of involving patients and carers in this process. NHS Borders is represented at and supports the Borders Carers Users Group where we can learn first hand from carers about their experiences of being involved in the discharge process and feed their experiences back to front line staff.

We have commissioned the Borders Voluntary Community Care Forum to undertake a survey of carers in relation to the discharge process. Once concluded we will circulate our findings to clinical services and front line staff to help ensure their experiences continue to inform our service delivery. We will continue to gather the views of carers and patients to help ensure discharge practice is monitored and where appropriate improved.

Question 2

Are there any intentions of either Scottish Government or NHS Borders to ring-fence money specifically for autism related services, i.e. specific training for NHS staff in autism and coping/recognising patients needs?

Response

NHS Borders is committed to providing the best possible care and support to members of the community who experience Autistic Spectrum Disorder (ASD). We deliver this in partnership with the Scottish Borders Council and voluntary organisations. NHS Borders do not have a ring fenced budget specifically for people experiencing ASD and we are not aware of any central government ring fenced budget. NHS Borders supports a range of services to people experiencing ASD through our mental health and learning disability teams. We work with our partners on an Autism Working Group to help ensure that our services are joined up and we are providing appropriate support to our clients.

NHS staff working in the learning disability and mental health services have specific training in autism and we support a two-day annual training event for staff. We also provide client specific training when required. The Andrew Lang Unit provides child and adolescent mental health services in the Borders including those experiencing ASD. The unit has paediatric staff that have undergone specialist training in ASD. NHS Borders is a small health board but we can access specialist ASD services and advice from NHS Lothian when required.

Question 3

At present Autism comes under the heading of Mental Health or Learning Disabilities, but neither one of those has specific funding for Autism, or a strategy to abide by. Could it be considered a priority for there to be an Autism Strategy for the Borders, if not Scotland?

Response

Currently there is not a Borders strategy on autism, however, the Borders Autism Working Group is developing an action plan that details all the work areas associated with ASD in the Borders. In February 2009, the House of Commons passed the Autism Bill which makes provision for a national strategy in England. We will monitor the development of this strategy to see if there is an opportunity to learn from this process. We would welcome a national strategy on autism and would be happy to contribute towards its development.

Question 4

How is NHS Borders Board progressing towards Investing in Volunteers (IiV) accreditation for 2011 and what budget has been allocated to support this?

Response

In February 2008, the Scottish Government issued a Refreshed Strategy for Volunteering in NHS Scotland. The strategy requires all health boards work with Volunteer Development Scotland (VDS) to:

- Identify a lead person
- Provide contact details of all Volunteer Service Managers
- Equality Impact the volunteering policy
- Develop a local action plan with key stakeholders
- Achieves Investing in Volunteers (liV) by March 2011

In July 2008, NHS Borders signed an agreement with Volunteer Development Scotland (VDS) to complete the accreditation process of the liV award. The award covers four key areas of volunteering: planning for volunteer involvement, recruiting volunteers, selecting and matching volunteers and supporting and retaining volunteers.

Although there is no discrete budget for volunteering within NHS Borders, volunteer's expenses are remunerated through the operational budgets for each of the services who are utilising the volunteers in their areas. The new Public Involvement and Communications function has been created within the last 12 months, and become fully operational within the last 3 months, and has an identified manager to lead on volunteering. NHS Borders is committed to working to the NHS Scotland Refreshed Strategy for Volunteering through progressing the current draft NHS Borders volunteering strategy and project management towards NHS Borders achievement of the liV Standard in 2011.

NHS Borders has a service level agreement with the Volunteer Centre Borders running until December 2009. As part of this agreement they are currently undertaking a full audit of all the volunteers within NHS Borders to be completed by the end of the calendar year.

NHS Borders have identified members of a steering group who will inform and agree the development of a strategy and work plan. We have met with our designated VDS Advisor who will be working closely with us to ensure we meet the standards required in the liV by March 2011.

Question 5

Better Health, Better Care refers to building the capacity of the third sector as important partners in health service delivery - can NHS Borders evidence this through increased opportunities for the voluntary sector to work in partnership and an increase in investment in the sector over the past 2 years?

Response

We are committed to and supportive of our Third Sector partners in Scottish Borders. Our population benefit from a committed, energetic and extensive range of provision from this Sector. Our Third Sector partners are key members of our local Public Partnership Forum and we are fortunate in the cohesion and wide representation brought to this and the CHCP Committees through the Borders Voluntary Community Care Forum amongst many other organisations and groups. We have an agreed set of performance monitoring priorities and a Development Action Plan for our PPF and its members for this year. We are hoping to broaden the membership of the PPF in the coming year and are reviewing the PPF Working Agreement.

We have increased our uplift of grants to Voluntary Sector Organisations to 2.5% in 2009/10 (an increase of 1%). We are mindful of the Key Issues highlighted to us by BVCCF for the coming year and these have been discussed by our Executive Directors and with partners in SBC Social Work services with whom we are taking joint actions and response. We are particularly pleased that we have been able to facilitate and support our Third Sector partners through membership and contribution to the key committees of the CHCP, our local Community Planning Partnership Strategic Board and in welcoming their contribution to the Single Outcome Agreement.

We have a range of regular liaison meetings throughout the year with Third Sector Partner organisations and key workers and are supportive of their governance and work groups wherever possible.

We have been key partners in reviewing and developing a commissioning framework for Children & Young Peoples Services in producing a clearer and more robust process for Third Sector partners to align their services to strategic priorities and improved outcomes. NHS Borders are currently similarly reviewing their commissioning processes to improve clarity and access of the Third Sector to work in partnership with us to improve outcomes, health and independence of people in Borders.

We are committed to the shared principles in the Scottish Borders Compact which sets out a consistent way in which public and voluntary sector bodies work together. We believe that an independent and diverse voluntary sector is fundamental to the well being of the people and communities of the Scottish borders.

Question 6

Within Mental Health Services - service users and carers continue to be concerned about access to out of hours services and support - is the current joint crisis service working as well as it should and making the best use of resources both within the NHS and the voluntary sector?

Response

The Crisis Team undertook a review of service provision prior to, and during, the integration process. Part of this process involved benchmarking the new Service against the National Standards for Crisis Services and the Service Specification between Scottish Association for Mental Health (SAMH) Crisis Service and Scottish Borders Council. This has enabled the Service to be more responsive to those who are experiencing a mental health crisis. Work is currently under way to look at the function, role and remit of the team as well as capacity to respond to local need. This process is being supported by the Improvement Support Team.