

Borders NHS Board**CHAIR AND NON EXECUTIVE DIRECTORS REPORT****Aim**

To update the Board on the recent activities undertaken by the Non Executive Directors.

Committee Meetings and Events: The following committee meetings and events have taken place.

4 September	Area Clinical Forum
6 September	Borders NHS Board
6 September	Board Development Session
12 September	Clinical Governance Committee
17 September	Audit Committee
17 September	Staff Governance Committee
24 September	Endowment Committee
25 September	Board Development Session
26 September	Remuneration Committee
4 October	Strategy & Performance Committee
22 October	Health & Social Care Integration Joint Board
30 October	Area Clinical Forum

John Raine: The Chairman has attended the following events since the last meeting:

- National QI Masterclass for Board members at Murrayfield on 3 September.
- Meeting with Finance Director, Scottish Government Health Department on 13 September.
- National Chairs meeting with the Cabinet Secretary on 24 September.
- Consultant Physician Interviews on 25 September.
- National Chairs meeting with the Cabinet Secretary on 29 October.
- Listening Clinic with General Services staff on 30 October.

The Cabinet Secretary Jeane Freeman set out her key priorities at the meeting with Health Board chairs on 24th September.

Chairs were reminded of their role in delivering Scottish Government priorities and that Chairs were accountable for the performance of their Boards. Her three key priorities were:

- Performance – with a focus on improving waiting times. The current position on waiting times was “deeply unsatisfactory” and there had to be an absolute focus on performance including waiting times for diagnostics; accident and emergency and cancer treatment.
- Health and Social Care Integration where the pace of change was still slow

- Mental Health, with Government looking for improved delivery for its investment in Child and Adolescent Mental Health.

The Cabinet Secretary expected Chairs to provide assurance on the actions taken by Boards to address these priorities. All Chairs were expected to lead on the delivery of priorities and would be held accountable for their delivery. Describing Boards as the “delivery arm of government”, the Cabinet Secretary said that the Chairs role was to ensure their boards genuinely understood that and that Chairs understood what obstacles there might be to delivering on priorities.

The good practice of `Once for Scotland`, invented by Chairs, needed to be scaled up.

Paul Gray, Director General and Chief Executive of NHS Scotland, referring to the proposed changes to the Patient Rights Treatment Time Guarantee Directions, said Boards would be required to inform patients if their wait was to exceed the 12 week guarantee and to provide patients in writing with an estimate of how long their wait was likely to be. The changes were legislative; a group had been established to ensure consistency across Boards and Chairs should assure themselves that the changes were implemented with pace. Chairs were asked to seek assurance from Chief Executives that all staff understood how to count waiting times.

Recommendation

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

Policy/Strategy Implications	Not Applicable.
Consultation	Not Applicable.
Consultation with Professional Committees	Not Applicable.
Risk Assessment	Not Applicable.
Compliance with Board Policy requirements on Equality and Diversity	Compliant
Resource/Staffing Implications	Not Applicable.

Approved by

Name	Designation	Name	Designation
John Raine	Chair		

Author(s)

Name	Designation	Name	Designation
Non Executive Directors			