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

National Commitments: The Chief Executive provided input to the East Region Groups, Public Health Reform Oversight Board and NHS National Services Scotland meetings that were held in September and October.

Appointment: The Chief Executive was part of the interview panel for the Interim Director of Nursing, Midwifery & Acute Services appointment on 24 September. Mrs Nicky Berry was appointed to the interim role for an initial 6 months period and takes over from Mrs Claire Pearce who will take up the role of Director of Care, Quality and Strategic Development at the Scottish Ambulance Service.

MPs and MSPs: The Chief Executive continues to meet with our local politicians on a regular basis to brief them on local health matters.

Scottish Government: The Chief Executive and Director of Finance have been in dialogue with Scottish Government colleagues in regard to the financial position and our recovery arrangements.

Listening Clinic: A third listening clinic for general services staff was held on 30 October and hosted by the Chairman and Chief Executive. It provided staff with the opportunity to directly speak to members of the Board.

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

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Circular Number</th>
<th>Title</th>
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<tbody>
<tr>
<td>17.08.18</td>
<td>CMO(2018) 8</td>
<td>Improving Services for People with Continence Issues</td>
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<tr>
<td>30.08.18</td>
<td>PCA(M)(2018) 8</td>
<td>National Code of Practice for GP Premises</td>
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<td>05.09.18</td>
<td>PCS(DD)(2018) 2</td>
<td>Circular Medical and Dental pay 2018-19</td>
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<td>12.09.18</td>
<td>PCA(O)(2018) 2</td>
<td>General Ophthalmic Services</td>
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<tr>
<td>21.09.18</td>
<td>CMO(2018) 11</td>
<td>Guidance for Doctors Completing Medical Certificates of the Cause of Death (MCCD) and its Quality Assurance</td>
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<tr>
<td>25.09.18</td>
<td>PCA(P)(2018) 13</td>
<td>Public Health Service (PHS) Poster Campaigns</td>
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### Director of Nursing, Midwifery & Acute Services

**Board QI (03.09.18):** On Monday 3rd September Claire Pearce attended the Quality Improvement for NHS Board Members Masterclass at Murrayfield, Edinburgh along with other NHS Borders Board members. The aim of the participative national masterclass was to support NHS Board members (executive and non-executive) by enhancing their individual and collective abilities to create an environment where quality improvement can flourish.

**Meeting with Queen Margaret University (07.09.18):** On Friday 7th September, Claire met with nursing staff from QMU to discuss education and partnership working.

**Courageous Conversations Workshop (10.09.18):** Claire arranged for her managers to attend a courageous conversations workshop hosted by Sue Sloan and Gerry Cavanagh from NHS Lothian.

**Health Improvement Scotland visit (11.09.18):** Colleagues from HIS visited the BGH to discuss the Back to Basics programme, data, leadership development, SPSP self-assessment and future plans.

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<tr>
<td>26.09.18</td>
<td>DL(2018) 13</td>
<td>Sustaining the Medical Workforce in Scotland – Call for Proposals for International Medical Training Fellowship Posts</td>
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<td>26.09.18</td>
<td>PCS(DD)(2018) 2 Addendum</td>
<td>Circular Medical and Dental pay 2018-19</td>
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<td>26.09.18</td>
<td>CMO(2018) 12</td>
<td>Restricted Use Protocol for Interventions to Treat Stress Urinary Incontinence and Pelvic Organ Prolapse</td>
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<td>Family Law (2018) 1</td>
<td>EU Regulation 2016/1191 on simplifying the requirements for presenting public documents</td>
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<tr>
<td>26.09.18</td>
<td>PCS(AFC)(2018) 2</td>
<td>Pay and Conditions for NHS staff covered by the Agenda for Change Agreement</td>
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<td>04.10.18</td>
<td>PCA(M)(2018) 10</td>
<td>Patient Registration</td>
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<td>05.10.18</td>
<td>DL(2018) 17</td>
<td>Local Child poverty Action Reports and Income Maximisation Measures</td>
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<tr>
<td>09.10.18</td>
<td>DL(2018) 18</td>
<td>Remuneration Increase 2018-19: Chairs and Non-Executive Members</td>
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<td>09.10.18</td>
<td>PCA(D)(2018) 11</td>
<td>Defer of electronic submission of orthodontic payment claim forms and prior approval</td>
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<td>12.10.18</td>
<td>CMO(20018) 13</td>
<td>Child Tax/Universal Credit-Two child cap exemption. Statement for health and social Work professionals in Scotland</td>
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<tr>
<td>15.10.18</td>
<td>PCA(D)(2018) 12</td>
<td>Amendment No 139 to the Statement of Dental Remuneration and Maximum Patient Charge</td>
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<td>15.10.18</td>
<td>STAC(TCS03) 2018</td>
<td>Two Tier Agreement</td>
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<tr>
<td>18.10.18</td>
<td>CMO(2018) 14</td>
<td>Adrenaline for anaphylaxis kits – a reminder to Healthcare Professionals</td>
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Human Factors Event (12.09.18): 'Human Factors in Operating Theatres: How can we improve Patient and Staff Experience' event hosted by David Love and Claire Pearce was held at Tweed Horizons and attended by Theatre and Nursing staff and Consultants. Dr Shelly Jeffcott connected in remotely from Glasgow and gave a presentation on 'An External Perspective' which was well received. The afternoon finished with a round table discussion with actions taken away to work on to improve the patient and staff experience in theatres.

SEAT Regional Workforce Group (13.09.18): Claire attended the Regional Workforce Group held in Edinburgh.

Director of Finance, Procurement, Estates & Facilities

Financial Year 2017/18: The Board has been advised that NHS Borders’ Annual Accounts for 2017/18 were laid before Parliament on the 2nd October 2018. The accounts are now in the public domain and available on the NHS Borders website. The Cost Accounts for 2017/18 were submitted for inclusion in the Scottish Health Services Cost Book which is planned to be published later this calendar year.

Financial Year 2018/19

Revenue: As anticipated this is proving to be a significantly challenging year financially. Work is ongoing to address the operational financial pressures as well as deliver the required level of efficiency. Based on current information the Board remains on course to deliver the forecast year end position of £10.1m overspent and the requirement for brokerage. Dialogue with the SGHSCD on the year end position and the financial plan is ongoing, with SGHSCD representatives visiting the Board on the 11th October and the 19th October 2018. As part of the process NHS Borders has been asked to pilot an outline format for a recovery plan which if successful will be rolled out to other Boards.

Capital: A detailed capital report is planned for the Board meeting in January. This will provide an update on the 2018/19 plan and a draft outline of the plan for future years. To support this process the Clinical Executive Strategy Group has reviewed and refreshed the documentation and the prioritisation process for projects to support and enhance the recommendations for capital investment made to the Board.

Efficiency: The Finance Performance Group in November will consider the areas where there has been slippage on the 2018/19 programme.

In recent months there has been an increasing focus on the 2019/20 efficiency plan. Discussions with the business units and support services departments on the delivery of 1% business as usual savings over the period of the financial plan have taken place and returns with outline plans are expected to be submitted at the end of October.

Finance Department: A review meeting on the 2017/18 annual accounts process has taken place with Audit Scotland to identify any areas of learning. Planning for the 2018/19 annual accounts has also began with provisional dates for the interim and final audit agreed.

The external review of NHS Borders financial plan papers has now concluded and a final report received. This will be reviewed at the first meeting of the Finance and Resources Committee which is planned for December.
In light of the financial position and the increasing demand on the finance team a review of the department's structure is being taken forward.

**Borders Macmillan Centre Charitable Funds Scheme**: A tender exercise is currently being taken forward.

**Borders Health Campus**: Following the high level scoping workshop held in July 2018, workshops are taking place with individual services during September and October 2018. Output from these and future plans will be worked through in the coming months.

**Estates Update**: Following a recent recruitment process a new Estates Officer (Operations Building) has been appointed.

**Facilities**: General Services are hoping to complete their structure review by the end of the calendar year. This was originally planned for the end of September, however the process has taken longer than anticipated.

**Audit Scotland Reports**: The following Audit Scotland report was circulated to the Clinical Executive Operational Group for noting and the agreed action is detailed against this:

- The National Fraud Initiative in Scotland *(Audit Committee for information)*

**Joint Director of Public Health**

**Integration of early intervention and prevention services**: Work is underway to develop an integrated service which provides lifestyle and early intervention support currently provided by three different services: Doing Well; LASS and Quit Your Way.

**Doing Well**: LASS and Quit Your Way currently deliver focussed interventions supporting lifestyle changes and emotional wellbeing. This development aligns with a focus on prevention, early intervention and will redesign services to ensure a more holistic model of care. The new service will 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

The new service is anticipated to start in January 2019.

**Chief Officer Health & Social Care**

**Health Lives Week**: The first week in October was the Scottish Borders’ first Healthy Lives Week. This was launched by the Health and Social Care Partnership, which brings together SBC, NHS Borders and the voluntary sector, and has a very important role in looking after people and helping to support them to live healthy, independent lives.

Healthy Lives Week also marked the launch of the Partnership’s refreshed Strategic Plan and use of the #yourpart campaign. This focuses on three key aims: improving the health of the population; helping patient flow through the hospital; and increasing the capacity within communities to care for our population.
Establishing Healthy Lives Week was a fantastic opportunity to work with a range of partners to get the word out to people about these three objectives, and the opportunities for the public to play their part in alleviating some of the pressure on health and social care services.

**Hospital to Home (H2H):** As part of the expansion of the H2H programme, interviews were held on 24 September for band 2 Health Care Support Workers. We were successful in appointing 18 people who we hope to commence work in late November. An induction plan is currently being prepared for these posts. A Physiotherapist and an Occupational Therapist also started on 1 October as part of this programme.

**Winter Plan/Craw Wood:** As part of the Winter Plan, we have identified a need to fund an extra 8 beds at Craw Wood however at this moment in time; the financials remain incomplete due to the partial calculation of expenditure on Craw Wood and current expenditure/commitments on the Integrated Care Fund. A formal proposal will be brought to the IJB in November for consideration, prior to the development session.

**Care Inspectorate:** We received confirmation from the Care Inspectorate of our change of link inspector to Geoff Mark, Strategic Inspector, as of 20 September. We are currently setting up various introductory meetings as part of the handover to ensure a clear understanding of our priorities, approaches, aspirations and challenges. Stuart Easingwood, the newly appointed Chief Social Work & Public Protection Officer/Interim Service Director for Children & Young People, is also involved in this handover process.

**Regional Work:** I attended the Housing Sector/Health and Social Care Partnership Chief Officers Roundtable Discussion on 28 September, where IJBs were asked to refresh their Housing Statements in Spring 2019.

**Director of Strategic Change & Performance**

**Planning & Performance: Ministerial Annual Review:** The Ministerial Annual Review scheduled for 16th November 2018 will take place on two sites. The morning sessions which consist of meetings with the Area Partnership Forum and ACF will take place at Newstead. The Minister and his associate will then progress to the Hive Community Hub in Galashiels for the service visit aspect of the review. They will do a quick tour of the facility (time permitting), and then meet with 6-8 service users who engage with a variety of services operating out of the Hive including Veterans 1st Point, the Wellbeing College and others. The paperwork for the Review has been submitted to Scottish Government. This includes the ‘At A Glance’ summary of outcomes and performance against targets in 2017/18; Self Assessment document, and the ‘Hot Topics’ briefing that Scottish Government have requested this year.

**Transformational Change – NHS Borders in a Changing World:** Over the next couple of months a presentation will be cascaded to all staff, ‘NHS Borders in a Changing World’, to engage with the organisation on why NHS Borders needs to change. This is in light of the challenges we currently face such as demographics, workforce and our overall financial situation. The ‘triumvirates’ of Associate Medical Directors, Associate Directors of Nursing and the General Managers are sharing responsibility for ensuring the presentation is delivered to staff within their areas, as well as the BET Directors sharing responsibility for Support Service departments. In addition to the cascade of the presentation, a series of staff ‘drop-in’ in sessions will be held during November in the BGH dining room and our Community Hospitals to engage with staff and explore the solutions available to us. This engagement exercise is also providing staff with the opportunity to contribute their ideas
around how to work in a more cost effective and efficient way and how to avoid waste in
the system.

Staff Awards: Options are currently being developed for the 2019 event and will be
presented to the Endowment Fund Board of Trustees for a decision in November 2018.

IM&T: Road to Digital: The programme continues to deliver with current activities
including Multi-Function Device Roll-Out and Proof of Concept for the VDI solution for
Windows 7. There have been some challenges around operational workflow in the hospital
in regards to printing and we are engaging with the impacted groups to discuss proper
workflow and workable solutions to any issues raised. Work is also being carried out
around the future plans in the application and infrastructure space, transition of support of
the new technologies to operation and a new Target Operating Model to best utilise the
resource and manage the support and development of the new technology delivered by
the programme.

IT Operations: There has been continual improvement in operational delivery due to the
productivity work undertaken as part of the Road to Digital 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 of the teams. More proactive and preventative maintenance is being carried out due
to the ability to create capacity due to the reduction in incident calls.

Service Desk: The results of the recent Customer satisfaction survey has been reviewed
by the management team and workshops have been carried out to assess feedback and
look at a plan to introduce changes and map out a Continual Service Improvement
strategy.

Projects & Development: Work is continuing to close down the EMIS Community Web
Project. Lifestyle services are the last to be migrated onto the service before close down.
Any future services wishing to use EMIS Web will be controlled through the Portfolio
Process as part of Business As Usual

The Trak Upgrade and Casenote scanning business cases are in their final stages and
both will be presented to the Clinical Executive Strategy Meeting for decisions.

A Business Objects Universe Upgrade is scheduled for late October. This will ensure the
latest versions of the software and allow improved reporting capability.

The Projects team are work closely with RTD team in to plan and schedule moving clinical
applications off 2003 servers including Theatres, Viewpoint, Trium, Netcall & Lanquip.

Docman upgrade for GPs continues to move forward and will be completed by the 7th Dec.
This will allow us to move to the new GP2GP records transfer system developed
nationally. There have been some issues with the upgrade for practices with a particular
configuration. We are working with practices and the supplier to resolve this issue.

Regional eHealth: The regional Labs workstream has agreed a regional once for the
region approach to replacing the Laboratory Information Management Systems (LIMS) in
each of the boards. It has also agreed that a consortium approach to procurement of the
new system will be adopted. The region is partnering with the West (led by GGC) to set up
the governance and process to procure a new LIMS. Our eHealth Lead is SRO for this
phase of the LISM project for the East region.
Medical Director

**Action Learning:** On 10\textsuperscript{th} September Dr Sharp facilitated and Action Learning set for senior medical managerial colleagues in the BGH to further develop and enhance their leadership skills.

**Prescribing Quality:** On 13\textsuperscript{th} September he met with Scottish Government colleagues, accompanied by the Director of Finance and the Director of Pharmacy to discuss and agree how we might improve prescribing quality in NHS Borders and to explore support which might be forthcoming in order to take the current good work further more quickly and to explore further opportunities within the context of government policy, rational prescribing, realistic medicine and the need to contain the annual increase in prescribing costs in both primary care and the acute hospital.

**Forensic Examination:** On 17\textsuperscript{th} September and again on 24\textsuperscript{th} October, Dr Sharp met with SBC and SG colleagues to further develop proposals for a Forensic Examination suite and trauma-informed care pathway with partners in the third sector, for both adult and child victims of sexual assault and rape.

**Leadership Walkrounds:** He undertook a leadership walkround with CNM Jamie Thomsonon wards 12 and 14 on 20\textsuperscript{th} September and observed much good practice amidst the staffing and clinical pressures they face. A desire to set up proper dining table and facilities in each ward so that patients can take their meals at a table rather than in their beds was facilitated and is now in place. A further Leadership Walkround was completed in October with CNM Caroline Burgess on Ward 7 BGH, where high-quality and responsive care was described by several patients. Some issues were identified with regard to timely completion of discharge letters by Foundation doctors which have been discussed with the clinical director.

**Chief Medical Officer:** On 27\textsuperscript{th} September he attended the CMO’s Specialty Advisers meeting in Edinburgh where updates were heard on the impact of Brexit, the progress of Realistic Medicine and developments in clinical data gathering for cancer research.

**Appointments:** On 2\textsuperscript{nd} October he chaired the appointment committee for an Associate Medical Director for Clinical Governance, and two excellent candidates were interviewed. The successful candidate was Dr Annabel Howell, who is also currently AMD (job share) in the Borders General Hospital, and she will contribute significantly to the senior medical support for the Clinical Governance Department to promote and develop service improvements and high quality, safe patient care across NHS Borders.

**National Commitments:** On 3\textsuperscript{rd} October he attended the Scottish Association of Medical Directors’ monthly meeting in Edinburgh, followed by the regional Responsible Officers Network Meeting, where regional issues were discussed and recent service pressures in ENT and bariatric surgery were discussed.

**GP Practice:** Further support has been discussed with and offered to the Ellwyn Practice in Galashiels due to current medical staffing pressures and GP availability.

**Recommendation**

The Board is asked to note the report.
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<tr>
<th><strong>Policy/Strategy Implications</strong></th>
<th>Policy/strategy implications will be addressed in the management of any actions resulting from these events, activities and issues.</th>
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<tr>
<td><strong>Consultation</strong></td>
<td>Board Executive Team</td>
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<tr>
<td><strong>Consultation with Professional Committees</strong></td>
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<td><strong>Risk Assessment</strong></td>
<td>Risk assessment will be addressed in the management of any actions resulting from these events, activities and issues.</td>
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<td><strong>Compliance with Board Policy requirements on Equality and Diversity</strong></td>
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<td><strong>Resource/Staffing Implications</strong></td>
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**Approved by**

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<tbody>
<tr>
<td>Jane Davidson</td>
<td>Chief Executive</td>
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**Author(s)**

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