# Borders NHS Board



Meeting Date: 17 January 2019

Approved by:	Jane Davidson, Chief Executive	
Author: Board Executive Team members		

## BOARD EXECUTIVE TEAM REPORT

#### Purpose of Report:

The purpose of this report is to update the Board on areas of activity within the Board Executive Team's Directors portfolios.

#### **Recommendations:**

The Board is asked to note this report.

#### **Approval Pathways:**

This report has been prepared and reviewed by the Board Executive Team.

#### **Executive Summary:**

This report identifies areas of activity undertaken by the following Directors:-

- Chief Executive
- Director of Finance, Procurement, Estates & Facilities
- Medical Director

The report also identifies the Scottish Government Circulars received by the organisation since the previous report.

Impact of item/issues on:				
Strategic Context	Policy and strategy implications will be addressed in the management of any actions resulting from these events, activities and issues.			
Patient Safety/Clinical Impact	Patient safety and quality improvement implications will be addressed in the management of any actions resulting from these events, activities and issues.			
Staffing/Workforce	Staffing and workforce implications will be addressed in the management of any actions resulting from these events, activities and issues.			
Finance/Resources	Finance and resources implications will be addressed in the management of any actions resulting from these events, activities and issues.			
Risk Implications	Risk assessment will be addressed in the management			

	of any actions resulting from these events, activities and
	issues.
Equality and Diversity	Complaint with Board policy requirements.
Consultation	Board Executive Team
Glossary	SGHSCD – Scottish Government Health & Social Care
	Directorate
	HR – Human Resources
	NSS – National Services Scotland
	DoF – Director of Finance
	DoP – Director of Pharmacy
	SG – Scottish Government
	HIS – Healthcare Improvement Scotland
	IJB – Integration Joint Board
	DGRI – Dumfries & Galloway Royal Infirmary
	GMC – General Medical Council
	SMSC – Senior Medical Staff Committee

**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
26.10.18	DL(2018)19	Revised payment verification protocols – general
		dental services, primary medical services, general
		ophthalmic services, pharmaceuticalservices
01.11.18	CMO(2018)15	Cannabis based products for medicinal use
01.11.18	DL(2018)20	NHSScotland and Prince's Trust Scotland
		Employability Partnership: "Get Into Healthcare"
02.11.18	PCA (2018) 15	Pharmaceutical Services Amendments to the Drug
		Tariff Part 7 Discount Clawback Scale
08.11.18	DL(2018)21	NHSScotland/stonewall scotland national
		partnership agreement 2018-19
09.11.18	DL(2018)22	GP Sustainability Loan Scheme 2018-19
09.11.18	PCA (2018) 16	Updated and revised interim protocol on
		dispensing of adrenaline auto-injectors,
		150microgram
21.11.18	CMO(2018)16	Supplementary information on cannabis based
		products for medicinal use
21.11.18	PCA (2018) 17	Pharmaceutical Services Amendments To The
		Drug Tariff Part 11 Discount Clawback Scale And
		Remuneration And Reimbursement Arrangements
		From 1 November 2018
22.11.18	CMO(2018)17	Fraudulent Medical Registration: Ms Zholia Alemi
30.11.18	PCA (2018) 18	Pharmaceutical services: gluten free food items
05.12.18	PCA (2018) 19	Pharmaceutical services drug tariff part 7
		dispensing pool payment
05.12.18	PCA (2018) 20	Update to protocol on dispensing of adrenaline
		auto-injectors, 150microgram
05.12.18	PCS(SDIA)2018 1	Scottish Distant Islands Allowance
14.12.18	PCS(ESM)2018/1	Pay and conditions of service executive and senior
		management pay 2018-19
18.12.18	STAC(TCS04)2018	Qualified Health Visitors - Review of Qualified

		Band 6 health Visitor Post
21.12.18	CMO(2018)18	Core Mandatory Update Training for Midwives and
		Obstetricians
21.12.18	CCD 3-2018	Free Personal Care Guidance

### Chief Executive

**National Commitments:** The Chief Executive provided input to the East Region Groups and NHS National Services Scotland meetings that were held in November and December

**NHS Borders Annual Review 16 November 2018:** The Chief Executive and Chairman formally met with the Cabinet Secretary in private as part of the new format for Ministerial Annual Reviews. Ministers have now asked that they be invited to the Annual Review Public Session which will be held in February/March 2019.

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

### Director of Finance, Procurement, Estates & Facilities

**Financial Year 2017/18:** The Scottish Health Services Cost Book for 2017/18 was published on 20<sup>th</sup> November 2018.

**Financial Year 2018/19: Revenue:** As anticipated this is proving to be a significantly challenging year financially. Based on current information the Board remains on course to deliver the forecast year end position of a £10.1m requirement for brokerage. On the 23<sup>rd</sup> November 2018 the Board was advised that it had been moved to Level 4 on the Ladder of Escalation. As a result there has been an increasing level of dialogue with SGHSCD on the year end position and the financial plan. Members of NHS Scotland Board recovery team are working with the organisation to provide support, scrutiny and assist the delivery and achievement of a balanced financial plan.

**Capital:** The Board will receive a detailed capital report at its meeting in January. A national Infrastructure Board has been created which will provide strategic leadership in driving forward a national strategy for infrastructure change. It will develop a Capital Investment Strategy and nationally prioritised programme of infrastructure change. This will also provide oversight, influence and challenge on how this is implemented across Regional Boards, NHS Boards and Integration Joint Boards through their strategic service plans, Local Delivery Plans, Property and Asset Management Strategies and individual case submissions.

**Financial Year 2019/20**: A revised draft financial plan was submitted to SGHSCD on the 5<sup>th</sup> December 2018 for discussion and feedback is awaited. The financial plan is also being updated in light of the draft budget which was presented to the Scottish Parliament on the 12<sup>th</sup> December 2018. The budget detailed the public sector settlement and the Scottish Government's policy on pay for 2019/20. Work is underway to update and develop NHS Borders' financial plan for 2019/20 onwards based on the announcement and the draft allocation letter which has now been issued. On-going dialogue with the Board is planned over the next few months. Based on information which is currently available the financial outlook remains very challenging. Preparatory work for calculating the budgets for next year is underway. A principles paper will be presented to the Strategy

Group in January for approval. As part of the financial plan process cost pressures across the organisation are being reviewed. A sub group meeting of the Clinical Executive Strategy Group has taken place to assess the identified pressures collated by Financial Management together with Clinical Boards and Support Services budget holders. A follow up meeting took place early January to take forward to the next stage of agreeing the final list of cost pressures for submission to the Strategy Group. Business as Usual 1% savings plans for 2019/20 identified at the end of November 2018 have been reported to the Finance and Resources Committee. Good progress has been made although more work is required in order to meet the £1.9m target in full. The details of the updated recovery plan will be presented to the Finance and Resources Committee in February.

**Finance Department:** Due to the increasing demand on the finance team a review of the department's structure is being taken forward. A Steering Group is being set up to meet on a fortnightly basis. This will includes staff reps, HR rep and Partnership rep.

**External Audit:** Audit Scotland, the Board's External Auditors will be on site for their Interim Audit commencing on 11<sup>th</sup> February 2018. The Audit Committee will receive a report detailing their findings at the next meeting on 20<sup>th</sup> March 2019.

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

**Borders Health Campus:** Conversations have been taking place between Capital Planning and Performance and Planning regarding the best way to take forward the two strategic programmes which the departments are working on, namely "*Borders Health Campus Development*" and the "*Building the Future - developing our future model of care programme*". Both require similar visioning therefore it has been proposed to merge the programmes and discussions are on-going about the best way to take this forward.

**Clinical Waste:** The current national contract for clinical waste disposal is due to expire on 31<sup>st</sup> March 2019. In line with contract requirements an extensive procurement process has been undertaken and the current contractor Healthcare Environmental Services has not been identified as the preferred provider going forward. As a result clinical waste services for NHS Borders have ceased with immediate effect. Contingency plans were put in place for the collection, transportation and disposal of clinical waste. NHS Borders continue to work closely with NSS to monitor current arrangements and to ensure any required action is undertaken in a timely manner.

**Laundry:** The Associate Director of Operations Facilities at NHS Lothian is engaging with the national programme on behalf of NHS Borders & Lothian as a limited number of options on the future of laundry services across NHS Scotland are being progressed. Depending on the final outcome this may have a significant impact on NHS Borders laundry.

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

- NHS in Scotland 2018 (Audit Committee for information)
- Community Planning Update Impact Report (Joint Director of Public Health to take forward action as appropriate)

• Children and Young People's Mental Health (Chief Officer to take forward action as appropriate)

### Medical Director

Further meetings have been chaired by the Medical Director regarding Eildon Medical Practice, following the partners' intention to dispose of the Newtown St Boswells building in October 2019. The non-financial benefits option appraisal has narrowed the preferred options down to three and further detailed work will take place over the next 6 months to obtain accurate and detailed costings for each, which will depend on the nature and volume of services to be provided from any new building, and the availability (and potential costs) of land and buildings.

On 5<sup>th</sup> November Dr Sharp participated in the first Regional Realistic Medicine leadership group, with Lothian and Fife Medical Directors, to outline a programme of meaningful work in relation to frail elderly people care pathways, prescribing, and cancer care.

On 7<sup>th</sup> November he participated in the Discretionary Points Committee to recognise and reward exceptional performance amongst the senior medical staff in NHS Borders; it is clear that many consultants work above and beyond their core responsibilities to deliver (with their teams) major additional benefits to services and individual patients locally and nationally.

During November he also engaged in further detailed discussions with Scottish Government Pharmacy adviser, alongside the DoF and DoP to identify and support current plans for improved prescribing efficiency and seek further support for future initiatives, should additional capacity be made available.

On 12<sup>th</sup> November he attended a Whistleblowing Training Awareness session and facilitated a Leadership Development Session for NHS Borders' Clinical Directors and Associate Medical Directors as part of the ongoing programme of professional and managerial skills development.

On 20<sup>th</sup> November he attended the SG session to finalise the national HIS Indicators for Sexual violence services, where it was made clear that all Boards are expected to move at pace to develop appropriate local services, include forensic examination facilities.

On 21<sup>st</sup> November, with others from NHS Borders, he undertook a government visit to the new Dumfries and Galloway Infirmary to inspect unscheduled care flow pathways and observed the unforeseen consequences of single-ensuite-rooms for patients, and the advantages of the acute hospital being included in the IJB remit, with a single person as both Chief Officer (IJB) and Chief Operating Officer (for DGRI) in terms of single-system working.

The Perinatal Mental Health Workshop on 29<sup>th</sup> November highlighted the relative lack of such care in NHS Borders (which is an SG priority), despite the good work undertaken by Claire Grieve and Amanda Cotton in developing the nucleus of a future service, which now needs to identify ring-fenced nursing time to progress.

The Scottish Association of Medical Directors held two meetings, with one focussed on the transformational changes which will need to be made by all Boards in the next few years; similar issues to those facing NHS Borders are apparent all over Scotland.

On 13<sup>th</sup> December the quarterly meeting with the GMC Scottish Liaison Advisor to discuss the latest issues in relation to relicensing, NHS Borders Doctors currently involved in GMC processes and the concerns regarding Ms Zholia Alemi, who was not a qualified doctor but still

managed to obtain employment as a locum consultant psychiatrist in several Scottish Health Boards. He also made a helpful presentation to the SMSC regarding GMC roles responsibilities and processes, which was well received.

On 14<sup>th</sup> December he attended the annual Mental Welfare Commission visit to local mental health services where areas of good practice and other issues were discussed; they were pleased to hear of progress to improve inpatient facilities in Cauldshiels ward.

On 17<sup>th</sup> December, with others, he attended the 2018 Scottish Improvement Leaders Networking Day, where inspirational stories were presented regarding the importance of quality improvement work in both patient safety, quality of care and financial efficiency.

#### Director of Workforce

NHS Borders receives award for our Employability Programmes, aimed at young people in the Scottish Borders: NHS Borders was one of fourteen employers from across the Scottish Borders to be recognised by Borders College for their positive contribution to the upskilling and education of the local workforce. In the image below *Claire Smith, Workforce Planning Lead from HR is pictured accepting NHS Borders' award from the Borders College Principal, Angela Cox.* 



Some of the initiatives to promote employability are:

- **Project Search** a 1 year programme that supports young people with a learning disability or autism in the workplace with employability skills mentoring and supported work placements.
- **Princes Trust** a 6 week programme, preparing younger people for employment as a health care support worker. 14 young people recently participated and carried out induction, mandatory training and placements in specified wards. A priority interview for a substantive post is offered on successful completion of the programme.
- Train to Care / Train to Gain aimed at people who have been unemployed for a period The programme is regarded as a Sector Based Work Academy and includes an interview guarantee at the end of the course.
- Young Persons Project Support Looked-after children through a Modern Apprenticeship Programme in partnership with SBC who provide the employability training and extensive support. NHS Borders provides various work placements.

**iMatter:** We are gearing up the preparation for the next round of iMatter – the NHSiS *staff experience continuous improvement tool* designed in partnership for NHS Scotland to help support better patient experience through better staff engagement.

The iMatter survey will go live on 18 February 2019 and all NHS Borders and HSCP staff will have the opportunity to take part. We hope to improve the response rate from last year when 58% of our staff responded to the survey, all leaders (BET members and senior staff) are committed to working with teams to improve engagement and preparing resulting action plans. A particular focus this year will be to upload team and staff stories to the national iMatter website to highlight good examples of staff experience.

From 16 January 2019 a dedicated iMatter Administrator has been identified which will enhance the capacity and support available.

**Once for Scotland Workforce Policy Work:** Over the next 18 months or so, all existing PIN Employment Polices will be reviewed nationally as part of the Once for Scotland agenda with a view to every Board implementing the same nationally agreed policy. 'Once for Scotland' Workforce policies will promote NHSScotland as a modern, exemplar employer; showcasing core values, and promoting consistent employment policy and practice. Workshops have been arranged in early January 2019 to engage with key stakeholders (Staff Governance Committee members, Line Managers, Staff Side Partnership Leads, HR & OD staff etc) giving an opportunity for the Service to influence the review. NHS Borders will be represented at the event.

In December 2018, the Scottish Government issued the Interim National Arrangements for Adverse Weather with the instruction that this should be adopted by all Health Boards with immediate effect. NHS Borders Policy has therefore been replaced with the national arrangements document. The document was designed to ensure that in periods of adverse weather NHS Scotland adopts an approach that is consistent at a national level, ensuring that fair and equitable treatment is prioritised and that we remain able to effectively deliver essential services.

**Regional and National Recruitment Service Transformation:** An East Region recruitment transformation board has been established to oversee the various projects associated with delivering the national shared recruitment service and system. A programme director from NHS Lothian has been appointed and the board has membership from all East Region Boards including the special health boards attached to the East Region.

The overall objective of the programme is to meet the national Recruitment Strategic proposal agreed by Chief Executives for "Once for Scotland" standard processes, policies and documentation for all NHS Scotland recruitment and selection.

NHS Lothian has been confirmed as a pilot board for implementing JOBTRAIN the new national e-recruitment system. The pilot commences in February 2019 for an initial 3 month period with implementation phased for the other boards in the East Region over a period until December 2019. We are working closely with NHS Lothian in progressing the preparatory work for the pilot including the review of standard processes, metrics and key performance indicators.

**Staff Governance & Ministerial Visit to the Area Partnership Forum:** The SGHD had provided feedback on our Staff Governance performance for 2017-18 and this was discussed by the Area Partnership Forum (APF) and Staff Governance Committee (SGC). The Scottish Government acknowledged a number of positive elements in our Staff Governance achievements and requested further information in others. The Parliamentary Health and Sport Committee Report has asked for all Boards to detail what steps they are

taking to eradicate workplace bullying and implement effective whistleblowing procedures. A special APF meeting was held as part of the ministerial annual review on 16 November 2018 and staff representatives had the opportunity to discuss these matters with the Minister for Public Health, Sport and Wellbeing, Mr Joe Fitzpatrick MSP. The Employee Director gave a presentation on the progress with partnership working and the discussions flowed from that. All present had the opportunity to contribute and the theme from the Minister was very clear that it should be safe for NHS staff to speak up about concerns.

**Staff Governance Monitoring Framework Future Proposal:** The SGHD Workforce Practice Unit recently submitted a revised Staff Governance monitoring framework proposal to SWAG, which includes measures for peer review, a standard Staff Governance data dashboard and scoring matrix. Following discussion at APF and SGC, NHS Borders prepared a formal response to the consultation. Thereafter a national short life working group with service representation was re-established to oversee future proposals from 2019 – 2020 and a region will be sought to pilot a peer review model during 2019. In the meantime an updated Staff Governance Monitoring template for 2018-2019 has been proposed for completion by May 2019 and work has already started by the Staff Governance Working Group on its completion and a cycle of updates to the Staff Governance Committee.

**Clinical Director(s) for Transformational Change:** All career grade doctors in the area (Consultants SDAS and GPs) have been invited to apply for exciting opportunities to build on their medical management and leadership experience. These are leadership posts to lead, influence and support implementation of the transformational change agenda, further evolving the strategic direction described in the NHS Borders Clinical Strategy. It is planned to make appointments in late January 2019.

**Workforce Planning:** A revised National Health and Social Care Integrated Workforce Plan to accurately reflect workforce development activity and risks across all sectors will be published in early 2019. On publication this will be assessed for any required changes to workforce planning activity within NHS Borders and with our partners in the local integrated services and within the East Region. In the meantime, the existing partnership workforce planning group has agreed a revised remit to address workforce development to support the clinical strategy and Better Borders initiatives. As there are at least three different Workforce Plans (representing integrated services, primary care and secondary care as well as an East Region Workforce Plan), APF will receive a presentation at their January meeting to pull the related threads together.

**EU Withdrawal (BREXIT):** In common with all Health Boards, during November and December 2018 we participated in a staff nationality survey to more accurately identify the EU Nationals within our workforce. We were keenly aware of sensitivities surrounding seeking such personal information. Limited information on nationality has been requested and the purpose of the survey is to support workforce planning but also signpost EU staff to resources and support when that is available for them. In the event there have been approximately 50 responses to the survey.

A recent pilot of the Home Office settlement scheme for staff in the health and social care sector was applicable from 29 November 2018 - 21 December 2018 to test the application process before it launches to the general public. NHS Borders had agreed to reimburse the £65 fee to our employees who were participants in the pilot. There were four NHS Borders employees who participated in the pilot and all of them successfully obtained unlimited leave to remain and work in the United Kingdom.

An NHS Borders EU Withdrawal (Brexit) working group has continued to meet and colleagues from SBC have been recently joined the group and there will be continuing opportunities for joint working.

**Nursing Recruitment – Return to Practice:** A regional approach by NHS Borders, NHS Lothian and NHS Fife to Return to Practice for former registered nurses in the local area has been launched in collaboration with Robert Gordon University. Six new recruits, returners to nursing from the Scottish Borders, will commence the programme in February 2019. Academic course work will be undertaken in Edinburgh alongside the recruits from NHS Lothian and NHS Fife, and the Borders returnees will undertake their clinical placements at BGH and in community settings.

**Nursing Recruitment – Assistant Practitioner Training:** We have recently recruited 12 Health Care Support Workers to a new developmental role within the nursing workforce. The successful candidates will undertake classroom based training at Borders College; with clinical placements within existing ward, community and mental health service areas. When trainees have completed the programme with the qualification of SCQF Professional Development Award level 8 (a duration of around 12 - 18 months depending on circumstances), they will be appointed as Assistant Practitioners in Nursing to support the wider nursing team.

**Nursing and Midwifery Workload and Workforce Planning Tools:** Lynn Boyle, Senior Charge Nurse, has been seconded temporarily to the HR workforce planning team to provide expertise on Nursing & Midwifery Workload & Workforce Planning Tools. This is a new and influential role involving a lot of interaction with the service; working directly with charge nurses on the wards and community. The next service area to undertake the planning tools will be health visiting and school nursing in late January and early February 2019. The National team will advise of future priorities for service areas in due course and this will be consolidated in the annual workplan.

**Internal Coaching and Facilitation Services:** In March 2019 NHS Borders will be hosting a facilitated workshop for employees wishing to develop coaching skills in their teams, and a master class briefing for experienced coaches.

Coaching forms part of essential leadership and management skills in the 21<sup>st</sup> Century NHS and public sector and we are seeking to develop our own internal resources in this function. The events hosted by a professional executive coach will explore the latest thinking in coaching, best practice across the UK and globally. Amongst other skills, delegates will explore Cognitive Behavioural Therapy models of coaching; and how to use CBT to enable long lasting change. This will represent the most cost effective method to ensure developmental infrastructure for Project Lift

### Director of Strategic Change & Performance

**Planning & Performance:** On Friday the 16<sup>th</sup> November NHS Borders welcomed Joe FitzPatrick, Minister for Public Health, Sport and Wellbeing, along with Chief Nursing Officer (CNO) Fiona McQueen for our 2017/18 Annual Review visit.

The morning session took place at Newstead, where the Minister and CNO met with the Area Clinical Forum to discuss patient safety, clinical governance, workforce, efficiency and productivity.

This was followed by a meeting of the Area Partnership Forum where Joe and Fiona received a presentation about Partnership Working in NHS Borders before going on to discuss agenda items including how we are implementing the 2020 workforce vision 'Everyone Matters', local staff governance, workforce planning and risks, dignity at work and our progress in implementing the national Partnership Information (PIN) Policies.

The afternoon session took place at the Hive in Galashiels. The Hive is a hub where a number of joint mental health commissioned services are co-located. These include the Wellbeing College, Veterans 1st Point (V1P), Distress Brief Intervention (DBI) and the Quarriers service.

On arrival at the Hive the Minister and CNO met with staff from the four services to hear about their work, successes and challenges; after which a number of service users, carers and Wellbeing College students came along to describe their experiences of care from services provided across NHS Borders.

The day concluded with a private meeting between our Chairman, Chief Executive, the Minister and CNO to discuss key local achievements, challenges and performance against national standards.

The day provided us with an opportunity to showcase just a snapshot of the fabulous work that goes on across NHS Borders and our Health and Social Care Partnership day in day out, and the difference that it makes to people's lives.

The public session of the annual review will take place before the end of March on a date to be announced in due course. Planning is underway in line with new guidance issued during December confirming the Minister will also be present at this session.

**IM&T:** Emis Web: Work is continuing to close down the EMIS Community Web Project. The team are currently working with service leads to consider Data Quality & reporting measures to enable Business As Usual transition. The team are also providing facilitation to assist Lifestyle Advisors, Smoking Cessation & Doing Well services to transition into one service named Wellbeing. This new service will use Emis Web from Jan 19, as will the Hospital to Home staff.

**Emis Mobile:** Work is in progress to rollout mobile devices to all mobile users using Emis Web.

**Casenote scanning business case:** Options with regards to casenote scanning are currently being explored and will be brought forward via the Clinical Executive Strategy Group in due course.

**Business Objects Universe Upgrade:** This work has now been completed. It is now on the latest version of the software and will now allow improved reporting capability. This will assist with implementation of our Information and Business Intelligence Strategy.

### Joint Director of Public Health

**Give Dry a Try:** Borders ADP is asking people to consider giving up alcohol for a month. Low risk guidelines for alcohol consumption are that men and women should not drink more than 14 units per week, if you do drink as much as 14 units per week, it is best

to spread this out evenly over three days of more. Making a small change to lifestyle can make a big difference to your help. Giving up alcohol for the month of January can lead to benefits such as: feeling better, losing weight, sleeping better and saving money.

Update on byelaws to prohibit the consumption of alcohol in designated public places: On 20 December 2018 Scottish Borders Council discussed a report by the Service Director Regulatory Services which updated the Council on the position regarding Alcohol Byelaws. Following an engagement process engagement a report on "Byelaws to Prohibit the Consumption of Alcohol in Designated in Public Places" was considered by Council in March 2014. The Service Director Regulatory Services was instructed to take matters forward under the statutory process, however, this work had not been completed and given the timescales the Council was requested to confirm next steps. Council voted in favour of the option to 'start a new consultation process to consider the need for Byelaws in the Scottish Borders'. This work will be led by Regulatory Services in SBC, the ADP Support Team will be involved in this process.

**New Self-harm Guidance:** New guidance has recently been produced on self harm and suicide prevention for those in Scottish Borders working with young people. The guidance aims to provide a shared multiagency understanding of self harm and suicide in order to facilitate a consistent approach to support young people at risk. The focus is on prevention and harm reduction, based on an understanding of children and young people's rights, confidentiality, consent, child protection and information sharing in relation to self harm and suicide . The guidance recommends a pathway based on best practice to support young people, as well as tools and resources for staff and for young people and significant others.

Multi agency training is being offered through Health Improvement for staff to accompany the guidance, following the development of a cohort of local trainers with the skills and competencies to deliver the training sustainably.

Although the initial focus is on young people, the guidance and training are also applicable to adults and the training will be available for staff working with adult populations.

Scottish Governments Consultation on Reducing Health Harms of Foods High in Fat, Sugar or Salt Consultation: Scottish Government has put forward a consultation document looking at proposals to limit the promotion and marketing of foods high in fat, sugar or salt, so called discretionary foods within retail premises. The driver for this work is to reduce the health harms experienced by people in Scotland associated with consumption of these junk foods. This approach is one aspect of the approach to address over consumption of unhealthy foods in Scotland and builds upon the previously published Scottish Government 'Programme for Government' that stated:

"We will consult this year on a range of actions to deliver a new approach to diet and healthy weight management – including on support to lose weight for people with, or at risk of, type-2 diabetes. To support this, we will also progress measures to limit the marketing of products high in fat, sugar and salt which disproportionately contribute to ill health and obesity."

Furthermore this policy consultation flows directly from "A Healthier Future: Scotland's Diet & Healthy Weight Delivery Plan", published on the 2<sup>nd</sup> of July 2018, in which the Scottish Government set out how it will improve our nation's health by improving our diet and weight. The policy sets out that the categories of foods to be targeted are:

- confectionery
- sweet biscuits
- crisps
- savoury snacks
- cakes
- pastries
- puddings
- soft drinks with added sugar

The consultation also asks if ice-cream and dairy desserts should also be included as a category of discretionary food. Public Health has led the development of a NHS Borders response to this consultation which was submitted by the 15<sup>th</sup> January 2019 deadline.