

Minutes of a meeting of the Borders NHS Board held on Thursday 7 March 2019 at 10.00am in the Board Room, Newstead

Present:

- Mr J Raine, Chair
- Mrs K Hamilton, Vice Chair
- Dr S Mather, Non Executive
- Mrs F Sandford, Non Executive
- Mr M Dickson, Non Executive
- Mr T Taylor, Non Executive
- Mr J McLaren, Non Executive
- Mrs A Wilson, Non Executive
- Mrs J Davidson, Chief Executive
- Dr C Sharp, Medical Director
- Mrs C Gillie, Director of Finance, Procurement, Estates & Facilities
- Mr T Patterson, Joint Director of Public Health
- Mrs N Berry, Director of Nursing, Midwifery & Acute Services

In Attendance:

- Miss I Bishop, Board Secretary
- Mrs J Smyth, Director of Strategic Change & Performance
- Mr Robert McCulloch-Graham, Chief Officer Health and Social Care
- Mr J Cowie, Director of Workforce
- Dr A Cotton, Associate Medical Director
- Mr S Whiting, Infection Control Manager
- Dr J Montgomery, Director of Medical Education

1. Apologies and Announcements

Apologies had been received from Cllr David Parker, Dr Janet Bennison, Mrs Elaine Cockburn and Dr Annabel Howell.

The Chair confirmed the meeting was quorate.

The Chair welcomed Mr Sam Whiting, Infection Control Manager and Dr Jane Montgomery, Director of Medical Education to the meeting.

The Chair confirmed that it would be his last meeting of the Board as his tenure as Chair would conclude on 31 March 2019. The Vice Chair would then take on the mantle of Chair from 1 April 2019 as there had not yet been an appointment of a successor.

The Chair announced that the new Chief Executive, Mr Ralph Roberts would commence in post at the earlier date of 22 April 2019.

The Chair announced that he, the Chief Executive and several members of the Board Executive Team would be appearing before the Scottish Parliament Health and Sport Committee on 12 March 2019 as part of the Scrutiny of NHS Boards programme of work of the Committee.

The Chair announced that the Annual Review public session would take place on Tuesday 19 March 2019 at the Transport Interchange in Galashiels and would be attended by Mr Joe Fitzpatrick, Minister for Public Health, Sport and Wellbeing.

2. Declarations of Interest

The declarations of interest for Mrs Fiona Sandford, Mr John Cowie, Mrs June Smyth and Cllr David Parker were tabled.

The Chair sought any verbal declarations of interest pertaining to items on the agenda.

The **BOARD** noted there were no verbal declarations of interest.

The **BOARD** approved the Register of Interests.

3. Minutes of Previous Meeting

The minutes of the previous meeting of the Borders NHS Board held on 17 January 2019 were amended at page 2, minute 7 line 4 to remove “nutrition” and include “adult unitary patient” and at page 7 minute 20, paragraph 4, replace “stranded patients” with “delayed discharges” and with those amendments the minutes were approved.

4. Matters Arising

Action 7: Mr Malcolm Dickson commented that the next Finance & Resources Committee would address the difficulties in matching the prioritisation of the Endowment Trust and the spread to Capital projects. Mrs Carol Gillie commented that it had been agreed to report separately between Endowment and Capital projects.

Action 4: Mr Tim Patterson advised that he had asked for the register to be reviewed and to ensure the risk was mitigated.

The **BOARD** was noted the action tracker.

5. Financial Turnaround Programme

Mrs June Smyth gave an overview of the content of the report.

Discussion focused on the discussion that had taken place at the Strategy & Performance Committee where it had been suggested that the governance structure should be revised to include mention of the Integration Joint Board so that both organisations could work together to take forward financial turnaround.

It was noted that while the paper had been recommended by the Strategy & Performance Committee without amendment, it was nonetheless for the Board to approve.

The **BOARD** ratified the Strategy & Performance Committee's approval of the recommendations as laid out in the paper.

The **BOARD** sought a revised governance framework chart to include the point that the commissioners both, Scottish Government and the Integration Joint Board, as integral to addressing the financial position, should be reflected in the chart with a short narrative of explanation.

6. Financial Turnaround Programme Update

Mrs June Smyth gave an overview of the content of the report and highlighted that the Turnaround Team had been appointed to work with NHS Borders for six months on a programme funded by Scottish Government. Early discussions had taken place with both the Turnaround Team and the Board Recovery Team in regard to required outcomes and key delivery requirements.

Mrs Alison Wilson commented that the Area Clinical Forum were keen to contribute to the Programme.

Mrs Karen Hamilton commented that she welcomed the appointment of the Turnaround Team and enquired about progress monitoring. Mrs Smyth advised that discussions were to be finalised with NHS National Services Scotland (NSS) in regard to key outcomes and monitoring mechanisms.

Mr Malcolm Dickson welcomed the news that the Grip and Control Group were progressing and he enquired if experienced HR and Finance professionals were involved in the Group. Mrs Nicky Berry confirmed that they were.

Mrs Jane Davidson commented that in terms of governance structure, early thoughts were that the performance around it would be reported to the Finance & Resources Committee.

Mrs Hamilton commented that the Non Executive Group had discussed earlier if they should meet with the Turnaround Team to understand their role and remit and how as a Group they could be supportive of the Board Executive Team.

Mrs Davidson welcomed the Non Executives positivity and intent on being fully involved. She suggested that the Non Executives be involved through the governance structure that they had agreed earlier.

Further discussion focused on: changes and revisions made to schemes on a daily basis; revisiting of all benchmarking opportunities; and the over all prescribing savings target.

The **BOARD** adopted the position that the Non Executives be involved through the governance structure that had been agreed.

The **BOARD** acknowledged the decision that engagement through the approved governance process was important and that it was important for the Non Executives to be a consistent part of the whole issue.

The **BOARD** formally welcomed and endorsed the Turnaround Team and the provision of turnaround support.

The **BOARD** noted the progress to date and next steps.

Financial Plan update

Mrs Carol Gillie gave a presentation which highlighted several key components including: minimal level of uplift; increased level of savings; non recurring savings and complexity of financial planning had increased since 2016; assumptions; NRAC and Barnett consequentials; workforce challenges; drugs savings; and the Integrated Care Fund and Commissioning Plan.

The Chair enquired about the Commissioning Plan. Mr Rob McCulloch-Graham advised that the Strategic Plan was the Commissioning Plan with the detail of how the funding was spent appearing in the regular financial monitoring paper to the Integration Joint Board (IJB).

Mr Tris Taylor enquired if the current direction from the IJB to do business as usual allowed the Health Board to reprovide services as long as the IJB was content it was for those services delegated to it. Mr McCulloch-Graham suggested that the Health Board would be waiting for the IJB to issue directions to change services in line with its strategic commissioning plan. However work on a series of elements including bed provision had to be completed before major change could be commissioned which would support the shift in balance of care from the acute sector to the primary care sector. It was important that the IJB play its part in the Programme Management Office so that the Health Board would not be surprised by any future directions being issued from the IJB.

Mr John McLaren enquired if Children and Young Peoples services where waiting times were very long were reflected in conversations at a national level. Mrs Jane Davidson advised that she had met with Scottish Government colleagues the previous day where the matter of performance in the Child and Adolescent Mental Health Service (CAMHS) had been raised. She advised that separate funding was being made available to CAMHS for waiting times.

Mr Taylor sought clarification on the level of delivery of savings by the Turnaround Team. Mrs Gillie advised that it would be 4% in the first year, and 5% in the following years.

Mr Taylor sought clarity on the assumption that brokerage would be required the following year. Mrs Gillie confirmed that it would be.

Mrs Fiona Sandford noted that it seemed unachievable and enquired if the expectation of the Turnaround Team was to deliver £5m of savings in the first year. Mrs Davidson advised that the Head of Board Recovery had set the contract and agreed that it would be savings of 4% in year 1 (2019/20), 5% in year 2 (2020/21) and 5% in year 3 (2021/22), and his judgement had been that it would be realistic to achieve.

The **BOARD** noted the presentation.

7. Healthcare Associated Infection – Prevention & Control Report

Mr Sam Whiting gave an overview of the content of the report and highlighted that there were zero current outbreaks. In regard to water contamination he assured the Board that NHS Borders had an

active water quality group and Estates colleagues had completed a number of actions to ensure zero issues with water contamination were maintained.

Mrs Karen Hamilton enquired about the new process in place for the early detection of norovirus. Mr Whiting commented that on site testing for norovirus had commenced which provided results within a couple of hours and was available 7 days a week.

Mr Whiting drew the attention of the Board to an ongoing high risk in relation to the fabric of the building. He advised that he had raised the matter with the Facilities Manager in regard to inconsistencies in self reporting.

The **BOARD** noted the report.

8. Medical Education Annual Report to Borders Health Board 2018

Dr Jane Montgomery introduced the report and highlighted: the need to be seen as good educators in order to encourage people to take up appointments with the Board; requirement of the General Medical Council (GMC) to produce good medical education; issues with rotas if all training posts were not filled; difficulties with IT and availability of computers; junior doctors concerns in regard to learning from near miss situations; accommodation for Foundation Year 1 Doctors; improvement to the first phase of simulation to take place in the first quarter of the next financial year; and a renewed focus on the wellbeing of trainees.

The Chair commented that he was surprised that there were still issues with creating proper simulation suite and enquired about the works to be taken forward in the first quarter of the next financial year. Dr Montgomery advised that good progress had been made and Classroom 2 would become a simulation room and ultimately phase 2 would involve a simulation ward.

Dr Stephen Mather enquired about the poor GPST engagement with teaching. Dr Montgomery advised that it had been a point in time and it was expected that those trainees who were not GPST would take the pagers and cover the wards for an hour to enable other trainees to attend teaching sessions.

Mr Tris Taylor enquired about the risk exposure. Dr Montgomery advised that a national training survey was completed and if a trainee had a bad experience, considering the low numbers of trainees at NHS Borders, it could affect the final results and ultimately the Deanery could reduce or withdraw trainees from NHS Borders.

Mr Taylor enquired if in order for the Board to be assured on training, if an action plan was required. Dr Cliff Sharp advised that the risks in terms of medical training had decreased as medical training had improved and other areas continued to be top rated on a regular basis.

Dr Sharp suggested adding the national statistics as appendices to future reports.

Dr Mather assured the Board that Medical Education was dealt with through the Clinical Governance Committee and as the assuring Committee for the Board he assured the Board that things were far better than they used to be.

The Chair thanked Dr Montgomery for the report and noted that matters had clearly moved on over the past 4 years. He noted that the Clinical Governance Committee was the route for developing any

required action plan and prioritising matters. He further suggested Endowment funds might be used to enhance accommodation issues.

Dr Sharp recorded his thanks and that of the Board to Dr Montgomery for all her support in taking medical education forward for the organisation.

The **BOARD** noted the responsibility to ensure that good medical education was offered in NHS Borders, with a requirement for appropriate investment in training facilities, suitable accommodation, equipment and job planned time for staff to deliver teaching.

9. Finance Report for the 10 month period to 31 January 2019

Mrs Carol Gillie gave an overview of the content of the report and highlighted that as at 31 January 2019 the Board was reporting an £8.4m overspend on revenue and break even on capital. The position was in line with the forecast year end position of delivery of financial targets with a requirement of £10.1m brokerage to support the revenue position.

Dr Stephen Mather clarified that the £2.1m of ICF monies were not linked to the delivery of savings. He advised that ICF monies were used for the facilitation of other things such as Hospital to Home and Craw Wood. Mrs Jane Davidson fully accepted the comment, agreed with it and agreed that it should be recorded as such.

Mr Rob McCulloch-Graham commented that on page 7 the last paragraph referred to the set aside budget, which meant pressures in the Borders General Hospital and surge beds, however it referred to Delayed Discharges and he clarified that out of 230 beds there were 20 delayed discharges. Mrs Nicky Berry agreed that a discussion needed to take place to clarify how beds were spoken about as there were pressures with unscheduled care and women and childrens services and it did read as if it was all about delayed discharges only.

Mrs Davidson reiterated that it was Occupied Bed Days that was the relevant measure when considering Delayed Discharges and it was important to remember that when discussing performance in the future.

The **BOARD** noted the report and considered the current financial position.

10. Baseline Provision of 2019/20 Resource to the Health & Social Care Integration Joint Board

Mrs Carol Gillie gave an overview of the content of the paper and highlighted that the Board was being asked to approve the provision of £136.5m of resource to the Integration Joint Board (IJB) linked to the functions that were delegated to the IJB as per the Scheme of Integration.

She further highlighted that the calculation of the figure was not in line with the year 4 recommended methodology as detailed in the Scheme of Integration but in conjunction with the IJB a pragmatic approach had been adopted. She further confirmed that it was not planned at this time to retrieve any of the 2018/19 overspend in the functions delegated to the IJB. The level of resource was in line with Scottish Government guidance and included a pro rata share of the 2.6% increase in resources the Board had received as an allocation uplift; the full recurring level of the social care fund at £7.4m; as well as £2.1m of the ring fenced fund formerly known as the integrated care fund; as further allocations

became available during the financial year if appropriate they would be provided to the IJB; the level of funding would not be sufficient to fund pressures in the delegated budget and set aside budgets and would mean service or activity changes in line with the strategic commissioning plan.

She further confirmed that it was assumed that the level of resources provided to the IJB excluding the social care fund and the ring fenced fund, would be directed to the Board therefore the level of efficiency stated would also sit with NHS Borders services.

Mr Rob McCulloch-Graham requested to clarify some aspects of the offer to the IJB outwith the meeting before the formal offer was made to the IJB. Mrs Gillie agreed to meet with Mr McCulloch-Graham around the finer detail.

The **BOARD** noted the report.

11. Board Clinical Governance & Quality Update

Dr Cliff Sharp presented the report.

The **BOARD** noted the report.

12. Clinical Governance Committee

Dr Stephen Mather advised that the Committee had discussed and continued to discuss how clinical teams should undertake mortality reviews to make them more meaningful to the teams and to ensure those deaths that were inevitable would not be subject to review. He further commented that the new on site norovirus testing had an impact on how isolation beds were utilised to best effect and he also highlighted that adverse events were decreasing and an internal audit on the complaints handling process had found only one area where improvement was required.

Dr Mather enquired if the Board would welcome a development session on SAERs and what the organisation did about them in terms of education and risk management and what assurance the Board could take from the process.

The **BOARD** noted the update.

13. Public Governance Committee

Mrs Karen Hamilton gave an overview of the report.

The **BOARD** noted the report.

14. Area Clinical Forum

Mrs Alison Wilson advised that the Area Clinical Forum were keen to provide support and oversight to the Turnaround Programme.

The **BOARD** noted the update.

Strategy & Performance Committee Terms of Reference

The **BOARD** amended the Terms of Reference at page 3, paragraph 3 to remove “of” and insert “about” and with that amendment the Terms of Reference of the Strategy and Performance Committee were approved.

15. Finance & Resources Committee

Mr Malcolm Dickson advised that the Finance & Resources Committee had met the previous Friday and had revisited the financial planning principles following the discussion at the previous Board meeting. Also discussed had been the external report into NHS Borders financial position and progress against the action plan as well as the Scottish Government new financial powers paper.

The **BOARD** noted the update.

16. NHS Borders Performance Scorecard

Mrs June Smyth provided an overview of the content of the report and highlighted the guidance for next years Annual Operational Plan.

Mrs Nicky Berry provided an update on waiting times advising that there were 43 out patients and 9 in patients to be seen by the end of March within the 12 weeks waiting times target and she was confident that they were all on track to be seen.

The Chair commented on the intention reduce to zero diagnostics waits over 6 weeks and enquired if that had been achieved. Mrs Berry commented that current estimates forecast achievement apart from MRI.

Dr Stephen Mather enquired about the increase in waiting times for Dental surgery. Mrs Smyth advised that the service had experienced an increase in referrals as well as staffing challenges earlier in the year. The service was currently remodeling their demand and capacity and would be exploring any issues with referrals as part of that.

Dr Mather noted that the finance report had mentioned a £1m funding for an MRI replacement. Mrs Gillie advised that she was working up a business case in regard to replacing the original MRI or making room for an additional MRI.

Dr Mather enquired about the choices policy in regard to delayed discharges. Mr Rob McCulloch-Graham commented that the policy had been hard to follow and had now been refreshed to make the difficult conversation easier for staff to have with families and carers.

Mr Tris Taylor advised that he would be keen to spend some time on the assurance information options.

Mr Taylor asked that the number format for sickness absence be amended so that a comparison could be easily identified. Mrs Smyth confirmed she would look to amend that for reports from 2019/20.

Mr Taylor enquired what percentage of ABIs were expected from GPs. Dr Tim Patterson advised that the majority of ABIs were referrals from GPs.

Mr John McLaren again raised the matter of performance in the Child and Adolescent Mental Health Service (CAMHS). Mrs Jane Davidson advised that a plan had been formulated and was being revised in light of the recruitment issues that the service had faced. Mrs Amanda Cotton advised that the service had been very creative in regard to the recruitment to development posts.

In addition Mr McLaren acknowledged the efforts of the staff in CAMHS and suggested the service be invited to attend a future Board Development session to enable the Board to understand what the issues were and provide assurance around the actions being taken. Dr Cliff Sharp supported Mr McLaren's suggestion of a future Board Development session and reiterated that it could focus on the wider issues in CAMHS including; action plan progress; recruitment; building fabrication; and number of referrals and rejections.

The **BOARD** noted the December 2018 Performance Scorecard and agreed to hold a session on CAMHS at a future Board Development session.

17. Chair & Non Executive Directors Report

The **BOARD** noted the report.

18. Board Executive Team Report

Mrs Jane Davidson highlighted that Mr George Romanes, Community Pharmacist in Duns had won the national Outstanding Contribution to Pharmacy Award 2019 and Ms Karen Shields, General Services had won the national Everyday Hero (Ancillary) category at the Unsung Hero Awards.

The **BOARD** noted the report.

19. Statutory and Other Committee Minutes

The **BOARD** noted the various committee minutes.

21. Any Other Business

The Board noted.

22. Date and Time of next meeting

The Chair confirmed that the next meeting of Borders NHS Board would take place on Thursday 4 April 2019 at 10.00am in the Board Room, Newstead.

Mrs Karen Hamilton formally recorded the thanks of the Board to the Chair for chairing the Board for the past 8 years.

The meeting concluded at 1.10pm.

Signature:

Chair