

Borders NHS Board



Meeting Date: 3 October 2019

Approved by:	Ralph Roberts, Chief Executive
Author:	Iris Bishop, Board Secretary
STATUTORY AND OTHER COMMITTEE MINUTES	
Purpose of Report:	
The purpose of this report is to raise the awareness of the Board on the range of matters being discussed by various statutory and other committees.	
Recommendations:	
The Board is asked to note the various committee minutes.	
Approval Pathways:	
This report has been prepared for the Board.	
Executive Summary:	
The Board receives the approved minutes from a range of governance and partnership committees.	
Appended to this report are the following approved minutes:-	
<ul style="list-style-type: none"> • Audit Committee 17.06.19 • Endowment Committee 06.06.19 • Clinical Governance Committee: 17.07.19 • Staff Governance Committee: 23.05.19 • Finance & Resources Committee: 18.07.19 • Health & Social Care Integration Joint Board: 14.08.19 	
Impact of item/issues on:	
Strategic Context	As detailed within the individual minutes.
Patient Safety/Clinical Impact	As detailed within the individual minutes.
Staffing/Workforce	As detailed within the individual minutes.
Finance/Resources	As detailed within the individual minutes.
Risk Implications	As detailed within the individual minutes.
Equality and Diversity	Compliant with Board policy requirements.
Consultation	Not applicable.
Glossary	As detailed within the individual minutes.



Minutes of a Meeting of **Borders NHS Board Audit Committee** held on Monday, 17th June 2019 @ 2 p.m. in the Board Room, Newstead.

Present: Mr M Dickson, Non Executive Director (Chair)
 Dr S Mather, Non Executive Director
 Mr T Taylor, Non Executive Director

In Attendance: Ms K Brooks, Assistant Manager, Audit, Grant Thornton
 Miss I Bishop, Board Secretary (Item 5.2)
 Mr B Douglas, Head of Estates & Facilities (Item 6.2)
 Mrs B Everitt, Personal Assistant to Director of Finance (Minutes)
 Mrs C Gillie, Director of Finance
 Mr A Haseeb, Senior Audit Manager, Audit Scotland
 Mrs M Kerr, Director, PWC
 Mrs S MacDougall, Risk & Safety Manager
 Mr R Roberts, Chief Executive
 Mr J Steen, Senior Auditor, Audit Scotland
 Ms S Swan, Deputy Director of Finance
 Ms G Woolman, Director, Audit Scotland

1. **Introduction, Apologies and Welcome**

Malcolm Dickson welcomed those present to the meeting. Apologies had been received from Mrs F Sandford, Non Executive Director, Dr T Patterson, Joint Director of Public Health, Ms J Brown, Head of Public Sector Assurance Scotland, Grant Thornton and Mr G Bell, Manager, PWC.

2. **Declaration of Interest**

There were no declaration of interests.

3. **Minutes of Previous Meeting: 20th March 2019**

The minutes were approved as an accurate record.

4. **Matters Arising**

Action Tracker

Stephen Mather referred to the first action on the tracker regarding the Audit Committee and Finance & Resources Committee having the same Chair when the Audit Committee Terms of Reference state that these roles should not be covered by the same person. Carol Gillie confirmed that she had raised this with the Chair and highlighted that the Terms of Reference state that ordinarily it should not be the same person, however at present the Board was not in an ordinary situation. Stephen appreciated this, however felt that when the Non Executive Directors are back to full compliment this should be revisited.

The Committee noted the action tracker.

Access to Audit Committee Minutes

Carol Gillie reminded of discussion around the Audit Committee minutes being made available to the IJB Audit Committee and advised that they are published as part of the NHS Borders Board papers and are available on NHS Borders' website. Iris Bishop agreed to make members of the IJB Audit Committee aware of this.

The Audit Committee noted the update.**5. Governance & Assurance****5.1 *Code of Corporate Governance Update – Section Update***

Iris Bishop spoke to this item. Iris explained that section A (How Business is Organised) had been updated to include the Terms of Reference (ToR) for the Finance & Resources Committee, remove the ToR for the Financial Performance Group and include the revised ToR for the Strategy & Performance Committee. Sheila MacDougall highlighted that under the Audit Committee ToR it still had the Director of Nursing, Midwifery & Acute Services as the lead for Risk when in fact this had changed to the Joint Director of Public Health. Iris agreed to make this amendment. Stephen Mather felt that in future it would be helpful to have any amendments as tracked changes so they are easily seen. Tris Taylor noted that there were differing figures on pages 17 and 49 for the number of core members on the Public Governance Committee. Iris confirmed that there should be four core members and would ensure that this is corrected. Tris also commented that as far as he was aware the Public Governance Committee was not a statutory committee. Iris advised that national guidance on governance is awaited, however she would expect this committee to abide by the same rules as the other Governance Committees and agreed to take this away to investigate.

The Committee reviewed Section A of the Code of Corporate Governance and recommended, with the changes discussed being made, that it be put forward to Borders NHS Board for approval.

6. Internal Audit**6.1 *Internal Audit Plan Progress Report***

Margaret Kerr confirmed that the plan for 2018/19 was now complete with the two remaining reports being on today's agenda. Tris Taylor assumed that the date recorded for the Medicines Cost audit fieldwork was a typo and should read December 2018 rather than December 2019. Margaret confirmed that was correct.

The Committee noted the progress report.

6.2 *Internal Audit Report – Estates & Facilities Time & Attendance*

Margaret Kerr introduced this report and advised that the report had an overall medium risk rating. It was noted that there were four medium rated and one low rated findings arising from the audit. Margaret explained that this was at the higher end of medium risk due to the number of findings. Margaret took the Committee through the findings where it was noted that there was generally a lack of formality around processes and arrangements in place. Margaret felt that in the current financial climate it may be worth considering if any other areas across the organisation have these weaknesses. Carol Gillie explained that since the audit being requested a Grip and Control Workstream has been established within Financial Turnaround and they will be looking at controls across the organisation. Brian Douglas clarified that the audit undertaken was for the Estates team only and

explained that due to the nature of the workforce it was worthwhile having a closer look at the controls in place. Brian advised that there is no manager on call as they work Monday to Friday 9 a.m. – 5 p.m. so there is potential for a lack of control. Brian confirmed that an action plan has been produced on the back of the findings which should be complete by the end of the calendar year. It was noted that HR have also had input into this. Stephen Mather suggested that the report be shared across the organisation to see if there was anything that could be applied in other areas. Carol Gillie agreed to put this on the Clinical Executive Operational Group agenda.

The Committee noted the report.

6.3 *Internal Audit Report – Staff Recruitment*

Margaret Kerr introduced this report and advised that the report had an overall low risk rating. It was noted that there was one medium rated and three low rated findings arising from the audit. Margaret referred to the medium risk finding regarding recruitment KPIs where it had been found that the management information underpinning processes was not sufficient. Margaret referred to finding 2 relating to the Board Executive Team's review of unfunded positions as due to the Board's financial position she would have expected to see the Executive Team approve these in advance of job offers being made rather than after. Bob Salmond referred to the recommendation regarding KPIs and advised that following implementation of JOBTRAIN, a national e-recruitment product, this would lead to more reliable KPI information. In regard to the unfunded posts it was noted that a rapid review of processes, due to the financial turnaround, had been undertaken with a new vacancy control process being put in place and as part of this the Board Executive Team would meet monthly to review vacancies within Support Services. Carol Gillie added that the Grip and Control Workstream have oversight of this and are able to challenge. Tris Taylor appreciated that the target date of 31 March 2020 was driven by implementation of the national system but was unsure why the KPIs could not be put in place quicker. Following discussion Bob committed to producing a local report which the Grip and Control Workstream would have oversight of by the 31st July 2019.

The Committee noted the report.

6.4 *Internal Audit Annual Report 2018/19*

Margaret Kerr spoke to this report which provided an annual audit opinion. Margaret advised that overall the opinion was generally satisfactory with some improvements required. Margaret referred to the executive summary which summarised the work undertaken throughout the year and concluded that controls are generally satisfactory with some improvement required. Margaret went on to highlight areas where improvement could be made. It was noted that the table on page 8 provided year on year comparisons for the Internal Audit work conducted, however this was not a direct comparison but for information. Margaret advised that the opinion is based on what has been undertaken during the year but stressed that the Board cannot lose sight of the challenge that lies ahead. Stephen Mather asked for assurance that any areas requiring improvement are being addressed. Carol Gillie advised that this can be sought from the audit-follow up report. It was noted that Grant Thornton will be picking up the audit follow-up process as this will provide more independent scrutiny.

The Committee noted the update

6.5 *Draft Internal Audit Plan 2019/20*

Kate Brooks spoke to this item which provided the Committee with the draft Internal Audit Plan for 2019/20 for comment and approval. It was noted that this had been discussed with the Interim Chair, Chair of the Audit Committee, Director of Finance and Deputy Director of Finance. Kate explained that the process to produce the draft plan had included reviewing the strategic risk register and previous audit plans to avoid duplication. It was noted that the plan reflects the transformation work that is being undertaken. Kate referred to appendix one which detailed the proposed audits and number of days. A total of 150 days was recorded to undertake the audits and follow-up process. Malcolm Dickson felt that in future it might be useful for the Audit Committee to review the strategic risk register along with proposals from management to input into the plan in advance of the financial year. Stephen Mather felt that the topics selected appeared to concentrate on corporate issues at the expense of operational matters and therefore didn't give a real flavour of what is going on in the organisation's core business. Stephen went on to provide some examples of where he thought savings could be made, such as community hospital beds and theatre usage. Ralph Roberts stressed the need to ensure that the correct areas are selected which will give most value for money. Carol Gillie advised that Joanne Brown, in preparing the plan, had attended a Board Executive Team meeting to ask members for their opinion as well as reviewing the strategic risk register and previous audit plans to avoid duplication. Kate added that should any further audits be added they would have to replace ones already within the plan. Ralph queried whether it had to be Internal Audit who looked at the suggested areas from Stephen or if there was another way of getting this information internally. Following discussion it was agreed to commence with the audits in quarter 1. Stephen noted that there was reference throughout the document to the Audit & Risk Committee and reminded that there has been no agreement to rename the Committee should it should only be the Audit Committee. Kate agreed to amend this. Sheila MacDougall suggested that the operational risk register also be reviewed as part of the process as well as the strategic risk register. Sheila also referred to the adverse events audit as she was surprised to see this as it had recently been reviewed by Health Improvement Scotland. Kate explained that when the plan was scoped out they had not been aware of this review being undertaken, however agreed to remove this audit and bring back an updated proposal to the next meeting. Kate highlighted that this would not affect the audits in quarters 1 and 2. Tris Taylor appreciated that the plan was still draft but queried if the number of days listed for the governance audit would be sufficient particularly due to the introduction of the Governance Blueprint in April 2019. As Interim Chair of the Public Governance Committee, Tris was keen that the public involvement and engagement audit remained in the plan.

The Committee reviewed, commented and approved quarters 1 and 2 of the Internal Audit Plan for 2019/20. An updated plan would be received at the next meeting.

7. External Audit

7.1 *2018/19 Annual Audit Report (including ISA 260 Requirement)*

Gillian Woolman spoke to this item and advised that the audit had been done undertaken using the International Standards on Auditing in the UK. Gillian referred to the section on misstatements and in particular the unadjusted misstatement for £132,000 which related to the understatement of the Board's CNORIS provision. It was noted that this was due to the timing of receiving clinical negligence amendments from Scottish Government. This was an issue across NHS Scotland and did not impact on the outturn position, therefore management within Borders have made the decision not to amend the accounts. Gillian

highlighted the representations from the Accountable Officer section where it stated that written representations from the Accountable Officer will be sought on aspects of the annual report and accounts, including the judgements and estimates made. Gillian was pleased to report that an unqualified opinion was given on the financial statements as at 31st March 2019. Stephen Mather asked for clarification around CNORIS. Gillian explained that there are two provisions with the second one relating to centrally held funding which led to Boards receiving the late notification. Gillian then took the Committee through the annual audit report whilst bringing any key areas to the Committee's attention. Susan Swan referred to paragraph 49 relating to budgetary processes and in particular improving the documentation of meetings with budget holders. Susan advised that the schedule of questioning had come forward from Internal Audit recommendations which had been picked up but not fully implemented across all budget holders, however it was planned to do this. It was noted that there had been agreement with the Chief Executive and Director of Finance to undertake a more targeted approach and look at the areas requiring more input in the first instance.

The Committee noted the report.

8. **Corporate Governance Framework**

8.1 *Review of Draft Corporate Governance Framework*

Susan Swan spoke to this item which was in the same format as previous years. Susan explained that the governance report provides support to the Chief Executive in signing the accounts as it lays out what has been considered throughout the year with the key point findings. It was noted that the Governance Assurance Statements had been supplemented with statements from the Executive Directors which followed a recommendation from External Audit. Susan also highlighted the draft letter to Scottish Government Portfolio Audit Committee regarding any significant issues arising during 2018/19. Susan confirmed that there were no significant issues to draw the Committee's attention to. It was noted that the document was still draft as the Internal Audit opinion and letter from External Audit was awaited so this would now be finalised. Tris Taylor referred to the Public Governance section on page 10 and in particular the last paragraph which stated that the Public Governance Committee had fulfilled its statutory obligations. Tris was not aware that they had any statutory obligations to fulfil. Following discussion it was agreed to reword this to read that the Committee had fulfilled its performance against the statutory obligations. Tris also referred to page 87, the assurance certificate signed by the Chief Officer, and enquired if the bullet point advising that "all significant projects have followed Project Management guidelines" applied to the Strata project. Stephen Mather confirmed that he was not aware of any issues and assumed that it had followed due process. Stephen Mather highlighted that the attendance was not included for the Clinical Governance Committee. Susan agreed to add this. Sheila MacDougall noted concern with the statement within the assurance certificate from the Director of Nursing, Midwifery & Acute Services that "there are no known non-compliance with relevant legislation or guidance during the year". Susan Swan agreed to raise this with the Director of Nursing, Midwifery and Acute Services and circulate the response around the Committee for information. Ralph Roberts advised that as Accountable Officer he was expecting a letter of comfort from the previous Chief Executive to aid the signing off of the Annual Accounts.

The Committee reviewed and commented on the Corporate Governance Framework.

9. Annual Accounts 2018/19

9.1 *Final Annual Report and Accounts 2018/19*

Susan Swan spoke to this item and highlighted within the report the changes that had been made to the Annual Accounts following the session held with Non Executive and Executive Directors on the 27th May 2019.

The Committee noted the adjustments made in finalising the 2018/19 Annual Report and Accounts and recommended they be put forward to Borders NHS Board for approval.

9.2 *Final Endowment Fund Annual Accounts 2018/19*

Susan Swan spoke to this item and advised that the Endowment Fund Annual Accounts had been approved at the Endowment Fund Board of Trustees meeting on 6th June 2019. It was noted that these formed part of the consolidated accounts and arrangements were in hand to get these signed.

The Committee noted the final Endowment Fund Annual Accounts for 2018/19.

9.3 *Final Patient's Private Funds Annual Accounts 2018/19*

Susan Swan spoke to this item and explained that the Patient's Private Funds Annual Accounts also form part of the consolidated accounts. It was noted that these had been audited by Geoghegans, the External Auditor, and an unqualified opinion had been received.

The Committee noted the final Private Patient's Funds Annual Accounts and recommended they be put forward to Borders NHS Board for approval.

10. Fraud & Payment Verification

10.1 *Countering Fraud Operational Group - Update*

Susan Swan reported that the meeting held the previous month had been the annual review with Counter Fraud Services (CFS) and there had been good attendance from across the organisation. It was noted that there had been discussion around the various initiatives available from CFS with one service taking up the offer of the cyber initiative.

The Committee noted the update.

10.2 *NFI Update*

Susan Swan spoke to this report which provided an update on the NFI exercise for 2018/19. It was noted that NHS Borders had received 1,228 matches with the investigative work on matches having commenced in February 2019. Susan was pleased to report that no fraud has been identified from these investigations so far, with the majority relating to supplier duplicate payments. Susan confirmed that the same process will be used as in previous years and an update will be provided at the next meeting.

The Committee noted the update.

11. Integration Joint Board

The Committee noted the link to the IJB Audit Committee agenda and minutes.

12. **Items for Noting**

12.1 *Information Governance Minutes: 5th March 2019*

Tris Taylor referred to item 7.4 regarding the email policy update. Tris appreciated that the focus was ensuring that patient data is kept safe but he did not feel that the current policy was explicit. These comments would be fed back.

The Committee noted the minutes of the Information Governance Committee.

13. **Any Other Competent Business**

As this would be Sheila MacDougall's last meeting, Malcolm Dickson noted his thanks on behalf of the Committee for all her advice as this had been appreciated. Malcolm also noted thanks to Margaret Kerr for the Internal Audit service provided by PricewaterhouseCoopers which has always been fair and balanced. Margaret noted thanks on behalf of herself and George Bell.

14. **Date of Next Meeting**

Monday, 16th September 2019 @ 2 p.m., Board Room, Newstead.

BE
24.6.19

Minutes of a Meeting of **Borders NHS Board Endowment Fund Board of Trustees** held on Thursday, 6th June 2019 @ 2 p.m. in the Board Room, Newstead.

Present: Mrs N Berry, Director of Nursing, Midwifery & Acute Services
Mr M Dickson, Non Executive Director
Mrs C Gillie, Director of Finance
Dr S Mather, Non Executive Director (Chair)
Cllr D Parker, Non Executive Director
Mr R Roberts, Chief Executive
Mrs F Sandford, Non Executive Director
Mr T Taylor, Non Executive Director

In Attendance: Mrs B Everitt, PA to Director of Finance (Minutes)
Mrs J Smyth, Director of Strategic Change & Performance
Mrs S Swan, Deputy Director of Finance
Mrs K Wilson, Fundraising Manager

1. **Introduction, Apologies and Welcome**

Stephen Mather welcomed those present to the meeting. Apologies had been received from Mrs K Hamilton, Chair, Cliff Sharp, Medical Director, Mr J McLaren, Employee Director, Mrs A Wilson, Non Executive Director and Dr Tim Patterson, Joint Director of Public Health.

2. **Declaration of Interests**

There were no declarations of interest.

3. **Minutes of Previous Meeting – 15th May 2019**

Stephen Mather, on behalf of Tim Patterson, asked for the reference to gambling under item 5.1 to be removed from the minutes. David Parker reiterated his concern around the 60% equity investment stakes within the portfolio as he felt there was scope to reduce this. Ralph Roberts suggested that it might be helpful if the Investment Advisor were to give assurance that this investment was still consistent with a medium risk portfolio. Susan Swan agreed to request this information and circulate the response around Trustees for information. Tris Taylor referred to item 6.1 regarding the in year deficit as he felt this required to be reworded to provide clarity.

The minutes were approved as an accurate record with the proviso that the changes discussed are made.

4. **Matters Arising**

Action Tracker

The action tracker was noted.

5. **Endowment Fund Annual Accounts 2018/19**

5.1 *Final 2018/19 Report from Trustees and Annual Accounts*

Susan Swan spoke to this item. Susan reminded that Trustees had gone through the draft accounts at the last meeting whilst the final report from External Audit was awaited. Susan was pleased to report that an unqualified audit opinion had been received. No issues were raised.

The Board of Trustees approved the Endowment Fund Annual Accounts for 2018/19 which would now be signed.

5.2 *External Audit Memorandum*

Susan Swan spoke to this item and explained that it included the list of recommendations from External Audit. Malcolm Dickson referred to page 6 where it highlighted that there were a number of funds with little or no activity in recent years and assumed that these would be picked up as part of the review that was planned. Susan explained that due to the current focus on financial turnaround it had not been possible to provide any resource within Finance to undertake this exercise of encouraging spend, however discussions have taken place with Karen Wilson, Fundraising Manager who has worked up a proposal on how this could be taken forward. Stephen Mather enquired about restrictions on the use of funds. Susan assured that OSCR guidance would be adhered to. Stephen also highlighted the reference to an overdrawn fund on page 6 and asked what efforts are taken to avoid this. Susan explained that this related to the pump primed money for the Children's Centre which is being kept in a separate fund. As the project has been paused funding to offset this cost has not been generated to date. Stephen, on behalf of Karen Hamilton, asked if the OSCR recommendations on page 8 would be taken forward. Susan advised that this would be picked up under item 7. Carol Gillie added that it would not be possible to fully progress these until the national guidance is received. Ralph Roberts referred to the first two bullet points and stressed the need to be explicit around conflict of interest until the review is completed and guidance is issued.

The Board of Trustees noted the External Audit memorandum and would consider the recommendations at the September meeting.

6. **Fundraising**

6.1 *Fundraising Plan 2019/20*

Karen Wilson spoke to this item where it was proposed to delay the production of the three year Fundraising Plan until after the three year Financial Plan is approved by NHS Borders Board.

The Board of Trustees approved the proposal to delay the production of the three year Fundraising Plan and that the Fundraising function would continue to focus on business as usual.

7. **Any Other Business**

Review of Governance of NHS Endowment Funds – Project Group Terms of Reference

Susan Swan spoke to this item linked to the national work which was progressing. Susan referred to the Terms of Reference which captured the governance arrangements, membership and how often meetings will take place. It was noted that that the Reference Group had met on the 30th May 2019 which Anita McCloy, Senior Finance Manager had attended. Susan provided feedback from the meeting where it was noted that an options appraisal exercise will be undertaken which the Reference Group will be asked to pull together a brief of the negatives and positives for each of the three options. It was noted that they were looking to work within a 12 week timescale from the date of the first meeting. Susan took Trustees through the options and advised that she would circulate the notes electronically giving an opportunity to feed back any comments.

The Board of Trustees noted the update and the Terms of Reference for the Project Group.

8. **Date and Time of Next Meeting**

Wednesday, 25th September 2019 @ 2 p.m., Board Room, Newstead.

BE
12.6.19

APPROVED



Minute of a meeting of the **Clinical Governance Committee** held on 17 July 2019 at 2pm in the Committee Room, BGH

Present

Dr S Mather, Non Executive Director (Chair)
Mrs A Wilson, Non Executive Director

In Attendance

Miss D Laing, Clinical Governance & Quality Project Officer (minute)
Mr Ralph Roberts, Chief Executive
Dr C Sharp, Medical Director
Mrs E Cockburn, Head of Clinical Governance & Quality
Mrs N Berry, Interim Director of Nursing, Midwifery & Acute Services
Dr T Patterson, Director of Public Health
Mr S Whiting, Infection Control Manager
Mrs L Milven, Infection Control Development Facilitator
Dr A Howell, Associate Medical Director (Acute Services)
Mrs E Reid, Associate Director of Nursing and AHPs/Chief Nurse Health and Social Care Partnership
Mr P Lerpiniere, Associate Director of Nursing, Mental Health & Learning Disabilities
Mrs L Pringle, Risk & Safety Coordinator
Mrs S Cowe, Quality Improvement Facilitator – Person Centred Care
Mrs D Moss, Nurse Consultant Vulnerable Children

1. Apologies and Announcements

The Chair noted that apologies had been received from:

Mrs F Sandford, Non Executive Director
Dr J Bennison, Associate Medical Director (Acute Services)
Mrs S MacDougall, Risk & Safety Manager

2. Declarations of Interest

There were no declarations of interest made.

3. Minute of the Previous Meeting

Minute of the previous meeting was checked for accuracy. Spelling and grammar was amended. The minute of the previous meeting held on the 31 May 2019 was approved.

4. Matters Arising & Action Tracker

Action Tracker was discussed and updated accordingly.

5. PATIENT SAFETY

5.1 Infection Control Report

Sam attended to talk to this report, he confirms that there has been dialogue with the Clinical Director and a meeting is arranged for them to discuss and investigate the incidence of surgical site infections.

The antimicrobial update is new to this report and will be included going forward. Sam informed the Committee that governance and reporting will be improved, he is keen to hear feedback on how useful this information is to the Committee. Stephen commented that he was unable to fully understand report and asked if it could be simplified. There was discussion about Dr Ed James being included in the meetings to go through the report but there was no conclusion to this discussion.

Stephen informed the Committee that the Scottish Government are looking in to updating and revising the HEAT targets. The possibility of separation of Community and Acute reporting has been suggested.

Conversation took place regarding the Hand Hygiene policy and the meaning of Zero Tolerance. The policy is being reviewed by the Infection Control Committee. Sam informed the Committee that the Policy is applied but not consistently. An acknowledgement that better promotion and education around hand hygiene and NHS Borders Policy is a must and this will be explored further. Nicky is supporting taking forward a campaign to promote and raise awareness of the importance of consistent hand hygiene and adherence to policy. The Committee concluded that at present we do not have assurance around our hand hygiene compliance.

Alison asked that the report could be a little clearer and comment that it would be useful to know if there had been changes in the prescribing data and if changes were acceptable. If not what is being done regarding these changes.

Tim pointed out that there has been a lot of hard work within the Antimicrobial Team and there has been some improvement. He asked that Sam pass on the Committee's appreciation to Ed James for the Team's hard work and perseverance. Following discussion on this point there was a suggestion that a profile piece on Ed and his Team's hard work in connection with antibiotic prescribing should be conveyed to the public.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

Lynsey and Sam left the meeting
Susan joined the meeting

5.2 Quarterly HMSR Report

NHS Borders are still waiting for Information Services Division (ISD) to remove the Margaret Kerr Unit from figures which at present skews our figures and can make us appear to be outliers.

HMSR reporting is going to be changed this may have a bearing on local and national reporting.

The Committee would like to be assured that the Board understands that the inclusion of the figures of deaths within the Margaret Kerr Unit has an impact on our figures from HMSR.

Discussion took place regarding the learning from Morbidity and Mortality (MM) reviews. Annabel reports that there is marginal improvement. Unfortunately reviews are not consistent within the acute sector. Annabel will include a report regarding the MM reviews in the next HMSR report.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

ACTION: Annabel will include a report regarding learning and frequency of MM reviews with the next HMSR report.

6. PERSON CENTRED

6.1 Scottish Public Service Ombudsman (SPSO) update

Case ref 201801926: SPSO are happy with what has been put in place and have asked that we confirm when actions are complete.

The Committee can be assured that although there has been an increase in SPSO cases there has been no particular theme identified. Feedback & Complaints Team will continue to monitor this.

Stephen asked if all cases had been through internal complaints process. Susan assured the Committee that they have.

Managing expectations remains an issue, complainants are informed of what they can expect from the process at the start but there is an acknowledgement that sometimes expectations cannot be managed.

Susan was asked if she could include the referral and processed dates for SPSO cases to the report.

Ralph asked if the cases reflect on our complaints handling process, Susan agreed to look into this for him.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

ACTION Susan was asked if she could include the referral and processed dates for SPSO cases to the report.

Susan left the meeting

7. CLINICAL EFFECTIVENESS

7.1 Clinical Board Update (Acute Services)

Food Fluid and Nutrition activity has increased and there appears to be improvement. Patslide® weighing scales have been ordered, it is hoped that these scales will provide further support to aid assessment on admission.

Although sickness absence had improved it does seem to have slid back, Nicky is monitoring this. Following a successful vacancy drive there has been thirty new nurses appointed. Twenty have been appointed to acute services, seven in mental health and three in the community.

There has been a review of menu cards to highlight dietary issues, staff will be educated to ensure patients are catered for safely

The pressure ulcer data on page 2 has been validated; there is a plan to do this 6 monthly. Our Specialist Tissue Viability Nurse is on maternity leave but cover has been put in place as this is a vital role.

The shift in falls data is not obvious request was made for better annotation on the graphs. Nicky will feed this back to the data teams.

There was a discussion regarding the Person Centred Coaching tool (PCCT) and whether or not this makes any difference to practice. There has been an action plan developed to allow follow up by senior charge nurses. Testing of this is ongoing and has been well received by SCNs who are now looking for assurance on quality of returns. Improvement is being shown but not all can be attributed to completion of PCCT. Peter commented that the value should be in coaching and the tool needs to be used with this in mind. Compliance issues to be included in September's report.

Dawn joined the meeting

Ophthalmology issues will be reported on next available agenda. Retiring ophthalmologist will be available as locum. Lothian are offering cover in July. Project support is available and will, meetings have been taking place monthly and proposals on way forward are being sought jointly with Lothian. They will be revisit recruiting and look at cross board posts. Equipment will need to be addressed. Incidentally there has recently been an increase in complaints regarding Ophthalmology. Cliff reports that there has been a shift in Lothian's perception of our requirements and they have recognised the need for better more robust support. Tim reiterated that patient safety should be our priority.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

7.2 Clinical Board update (Primary & Community Services)

Erica informed the Committee that the Healthcare Environment Inspection report will be published at the end of month. Initial feedback from the inspection was very positive with only a couple of points raised relating to no compliant sinks and the fabric of the building. These have been logged on the risk register and will be addressed appropriately.

Learning sessions are to be organised in August relating to Significant Adverse Event Reviews (SAER) with a patient story being expected to be presented. The Committee are keen to see patient stories should a future agenda allow. Work is ongoing on improvement in all areas of the Back to Basics programme.

Kelso Hospital are to be nominated for Excellence in Care awards for their continued success with the 'Zero Hero' campaign with no patients having developed pressure damage since January 2018.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

7.3 Clinical Board Update (Mental Health Services)

The Mental Welfare for Scotland visited both East Brig and Cauldshiels with positive feedback being received. Recommendations for East Brig regarding person centred care planning have been noted and there is a plan for delivery to meet these recommendations and in fact one in particular recommendation has been acted on and is complete. Cauldshiels report is not yet available but verbal feedback from the Lead Inspector was that 'she was delighted with the visit' and 'the care patients receive is outstanding'. The Committee congratulated the service on these very positive reports.

Drug related deaths in Scotland report will go firstly to the Mental Health Governance meeting which in turn will be fed back to this Committee. Peter commented that numbers in NHS Borders are small but all details and any emerging themes will be investigated.

Peter asked the Committee to note that there has been a general downward trend on falls and in Cauldshiels in particular.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

7.4 Clinical Board update (Learning Disabilities Services)

The above report was discussed.

There was a further discussion regarding out of area patients. Tim asked Peter if there was a quality control review schedule in place. Peter assured the Committee that how resources are spent is being investigated.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

8. ASSURANCE

8.1 Occupational Health Annual Update

No report was submitted and no one attended to talk to this item. The report is to be deferred to a future meeting.

ACTION: Diane to add report to a subsequent agenda.

8.2 Child Protection Annual Update

Dawn Moss attended to talk to the above report which gives the Committee and update on the changes within the child protection/looked after children structure. The team are co-

located in the Child Protection/Public Protection Unit. There are no major gaps, but Dawn wanted to know if the Committee are assured and clear around role in services.

Stephen suggested that signposts to the services need to be updated and sent highlighted to ensure all staff are aware of changes and how to contact the service. Stephen commented that there appears to be a lot happening but the report did not say much about how children are being safeguarded. He asked if the next report to the Committee could highlight any reported cases incidents and if these have been dealt with, thus giving assurance that the systems in place are working. He also commented that a glossary would be useful on the action plan.

The **CLINICAL GOVERNANCE COMMITTEE** noted the report.

Dawn left the meeting

8.3 End of Life Care Update

Annabel gave a verbal update on end of life care work. Progress is ongoing on shared care planning and decision making. The intention is to put this onto a digital platform for wider community use. GPs are awaiting feedback from pilot before adopting the ReSPECT form. Work also continues with community based specialist services.

Annabel reports that there currently is on SAER ongoing.

There followed a discussion regarding realistic medicine. It was agreed that we are on the right track but more work needs to be done towards achieving realistic medicine goals.

The **CLINICAL GOVERNANCE COMMITTEE** noted the verbal report.

9.1 Back to Basics Update

Progress is being shown. In the last period there have only been two developed pressure ulcers which is major improvement. Targeted education has attributed to this, the education plan for coming year is being explored. Erica assured the Committee that pressure ulcers are being graded appropriately.

Falls figures are improving. Staff Nurse Zoe Spence is championing the falls improvement work and has just recently done a great piece of work in MAU. Falls with harm have now been reported below the mean in the last 7 months.

There seems to have been a spike in complaints in staff attitude and communication issues, although Erica reports that this has improved again.

There has been positive feedback received following a year long programme which has contributed towards an increase in the morale amongst general good feelings amongst the Senior Charge Nurses. The next stage is to work more closely with the Band 6 nurses.

In general signs of progress are continuing.

The **CLINICAL GOVERNANCE COMMITTEE** noted the verbal report.

10 ITEMS FOR NOTING

The following minutes were presented for noting:

Learning Disabilities Clinical Governance Minute
Adult Protection Minute
Child Protection Minute

The **CLINICAL GOVERNANCE COMMITTEE** noted the minutes.

11. Any Other Business

The Research Governance Facilitator post which has been vacant since March has been advertised and candidates have been shortlisted for interview. Alison is leading interviews as chair of the Research Governance Group.

Duty of candour annual report is available now. Ralph asked if the report should come through the Clinical Governance Committee for scrutiny and assurance. Report to be given a 20 minute slot on the next available agenda.

Discussion took place regarding Lanquip system availability. Lanquip is used for reporting patient safety data but the system appears to be broken and we no longer have a licence for use of the software. In the past we were supported by NHS Lanarkshire for the maintenance of this system and they will continue to do so to enable us to fix the problem.

ACTION: Diane will add Duty of Candour report to subsequent agenda

12. Date and Time of next Meeting

The Chair confirmed that the next meeting of the Clinical Governance Committee will be on Wednesday 4 September 2019 in the BGH Committee Room

The meeting concluded at 16:08



STAFF GOVERNANCE COMMITTEE

Minutes of the meeting held on Monday 23rd May 2019, 10am in the Committee Room, Borders General Hospital, Melrose.

Present: Cllr D Parker, Chair
Mrs A Wilson, non-Executive Director
Mr J McLaren, non-Executive Director
Mr T Taylor, non-Executive Director

In attendance: Mrs K Hamilton, Chairperson NHS Board
Mr J Cowie, Director of Workforce and Planning
Mr R Roberts, Chief Executive
Mr B Salmond, Associate Director of Workforce
Miss V MacPherson, Partnership Lead Staff Side (Ex Officio Member)
Mrs V Hubner, Head of Work and Well Being
Mrs J Smyth, Director of Planning and Performance
Mrs C Oliver, Communications Officer
Mr D Thomas, BOLD
Mrs H Hunter, HR Officer (Minutes) shadowed by Mr D Riddell, HR Officer

1. Welcome, Introductions and Apologies

Cllr Parker welcomed everyone to the meeting.

There were no apologies to note.

2. Development Session – Workforce Implications of Financial Turnaround

Mr Thomas provided a verbal update advising they are on week 11 of the Financial Improvement programme. He said Turnaround examines structures, rules and guidelines to secure savings and there are 12 work streams tailored to Borders. After the 12th week there will be a review to look at successes, required corrective action and set targets for the next period.

Mr Thomas advised that there is a challenge in that staff have conflicting demands on their time but in the main people are responding well; the commitment will result in delivery of savings. He acknowledged staff are being pushed to work to tight deadlines and they may not be used to this – some of the language he had encountered was that some staff felt victimised or bullied and found the process chaotic and disorganised. The overriding priority was to achieve savings quickly.

Mr McLaren commented that it is important to understand our potential challenges around the Staff Governance Standards, how this process affects staff and how we manage engagement. Mrs Smyth added that part of the challenge as an organisation is this work has

to be absorbed on top of the day to day job. Mr Roberts commented that there is nothing in the Turnaround process to compromise Staff Governance, it is about how we do achieve Turnaround at pace. Mr Cowie added that if the principles of Staff Governance are undermined then it is the duty of Staff Governance Committee to scrutinise the impact.

Mr Taylor commented that engagement takes constant communication, and not just top down communication, we must talk and listen to staff to meet our standards. Mr Thomas responded that there is a communication plan in place.

Mrs Smyth and Mrs Oliver gave power point presentations. Mrs Smyth advised that the savings mandate process seems to be causing the most confusion for Managers and Mrs Oliver commented that communications and engagement are coming together and they are trying hard to ensure a consistent message.

Mr Taylor asked if there were strategies in place to incentivise savings, a motivation may be to reinvest a proportion of savings. Mrs Oliver replied this has been discussed and Mr Roberts added it does seem to be a motivator in some areas. Mrs Hamilton questioned whether rewards could be linked to the Staff Awards Event. Mr McLaren advised a sub group of the APF are re-looking at staff benefits.

Cllr Parker asked, as this is still in process, when do we make an announcement of savings and how these are to be made. Mrs Smyth advised these details will be reported to the Board and Finance Committee in mid-June.

The Committee agreed that Financial Turnaround would be a standing item on the agenda.

3. Future Agenda Items/Priorities for Committee

Cllr Parker asked Committee Members for views on the content of a work-plan going forward.

Mr Taylor commented that he would benefit from a complete scope of legislative landscape so that risks are clear. Mrs Hamilton added the Terms of Reference should be reviewed. Mr Roberts responded that the Terms of Reference for Board Committees will be a national standard based on best practice. The specific responsibilities of the Committee are set out in the 4th edition of the Staff Governance Standard.

There was discussion on workforce data to support the Committee's role. Mr McLaren asked that this includes information on Grievances as this is a measure of staff satisfaction in more challenging times. Mr Cowie confirmed detail around the number of grievances and whether or not they were upheld can be provided, Mr Salmond noted the detailed workforce presentation had previously been provided to the Committee, going forward a regular core workforce data set on each standard could be provided.

It was agreed that Mr Salmond would bring forward a core workforce data report supporting each standard on a quarterly basis. It was further agreed that Cllr Parker and Mr Cowie would discuss a proposed annual workplan prior to the next meeting.

4. Minutes of Previous Meeting held – Monday, 17th April 2019

Agreed as an accurate record of the meeting.

Matters arising

None

5. Annual National Staff Governance Monitoring Return to the Scottish Government

Mr Salmond advised that the Monitoring Return requires sign-off from the Chair of Staff Governance Committee, the Employee Director and Chief Executive prior to the deadline of 31st May 2019. The return is to inform the Scottish Government on our Staff Governance performance, responds to their questions and forms part of their scrutiny at the Health Board annual review in the Autumn.

Mr Roberts asked if the questions were Board specific. Mr Salmond responded that the content of the questions is similar for all territorial Health Boards, however some questions tailored to specific circumstances that the Scottish Government wished to probe.

The Committee noted the modifications made to the report and Ms Hubner described some the staff well being initiatives that had been referenced.

The Committee noted the progress with IMatter and that the response rate of less than 60% meant that there would be no Board report. Mr Roberts suggested that it is unhelpful to progressing Staff Governance if there is no Board Report, even when more than 50% of staff participated in the IMatter questionnaire. Mr McLaren commented that the fidelity of the system may prevent any flexibility in generating a Board report. Mr Salmond suggested this is fed-back through the IMatter Leads.

The Committee approved the Monitoring Return and agreed it should be submitted to the Scottish Government.

6. Any other competent business

Mr McLaren advised there will be a report submitted to the next Staff Governance Committee regarding statutory and mandatory training, and added that it was important that the Committee were aware of the risks.

Mrs Hamilton referred to the publication of the Sturrock Report (Cultural Issues related to allegations of Bullying and Harassment in NHS Highland). Mr Roberts confirmed that and Chairs and Chief Executives of all Health Boards were to provide a response to the recommendations by the end of June. A draft would be considered by the Board Executive Team and the final version shared with the Staff governance Committee.

Mrs Hamilton advised that Health Board Chairs were awaiting confirmation from the Cabinet Secretary on the appointment process to be undertaken by the Public Appointments Directorate of a designated Non Executive Director as a Whistleblowing Champion.

Date of next meeting:

Thursday 4th July 2019, 10am – 12noon, BGH Committee Room.

Cllr Parker thanked everyone for their attendance and closed the meeting.

Finance & Resources Committee



Minutes of a meeting of the **Finance and Resources Committee** held on Thursday 18 July 2019 at 3pm in the Board Room, Newstead.

Present: Mr M Dickson, Non Executive

In Attendance: Miss I Bishop, Board Secretary
Mrs K Hamilton, Chair
Mr R Roberts, Chief Executive
Mrs C Gillie, Director of Finance
Mrs N Berry, Director of Nursing, Midwifery & Acute Services
Mrs J Smyth, Director of Strategic Change & Performance
Dr Cliff Sharp, Medical Director
Mrs A Wilson, Director of Pharmacy
Mrs C Smith, HR Team Manager
Mr M Porteous, Chief Financial Officer, IJB

1. Apologies and Announcements

Apologies had been received from Mrs Fiona Sandford, Non Executive, Cllr David Parker, Non Executive, Mr Robert McCulloch-Graham, Chief Officer and Mrs Susan Swan, Deputy Director of Finance.

The Chair welcomed Mr Mike Porteous, Chief Financial Officer IJB who was deputising for Mr Robert McCulloch-Graham.

The Chair welcomed Mrs Claire Smith, HR Team Manager and Mrs Alison Wilson, Director of Pharmacy to the meeting.

The Chair confirmed that although the meeting was not quorate it would proceed given the importance of the items scheduled on the agenda.

2. Declarations of Interest

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

The **FINANCE & RESOURCES COMMITTEE** noted there were none.

3. Minutes of Previous Meeting

The minutes of the previous meeting of the Finance & Resources Committee held on 19 June 2019 were approved.

4. Matters Arising

- 4.1 Action 5:** Mr Mike Porteous advised that SB Cares were charged with a target of £1.5m savings over 5 years and had a target for 2019/20 of £480k. They were on track to deliver those savings which would refer back to Scottish Borders Council when delivered. He emphasised that over and under spends were treated the same as in any other service that was a delegated function to the IJB which those spends offset against the relevant Scottish Borders Council or NHS Borders budgets. Mrs Carol Gillie challenged if the Integration Joint Board (IJB) were aware of the situation in regard to SB Cares savings, as she recalled it may have been an arrangement applied when the IJB was in shadow form. The Chair suggested the matter be referred to the IJB itself as it was the principles that would need to be clarified and agreed so that they could be applied moving forward. Mr Porteous agreed to take the matter forward and report back to the Committee.
- 4.2 Action 6:** It was noted that the update was technically correct, however those present suggested the Action be reopened and a view taken in 6 months time as to whether a voluntary severance programme should be pursued. That would be as part of the concept of an integrated financial framework for the future funding of the IJB, NHS Borders and Scottish Borders Council.

The **FINANCE & RESOURCES COMMITTEE** noted the action tracker.

5. Review of Finance & Resources Terms of Reference

The Chair sought any suggested amendments to the Terms of Reference. He advised that both Mrs Karen Hamilton and Mr Ralph Roberts were undertaking a review of the Strategy & Performance Committee (S&PC) Terms of Reference which may affect the Finance & Resources Committee's terms of reference further. He suggested they be reviewed again after the S&PC terms of reference discussions had concluded.

The **FINANCE & RESOURCES COMMITTEE** reviewed the Terms of Reference and made amendments for recommendation to the Board for ratification.

6. Financial Turnaround Programme Progress Reports

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

The Chair commented that he welcomed the programme tracker reports that were circulated on a weekly basis and he suggested that in regard to slippage with the Primary Care Improvement Plan it should be highlighted on the risk register. Mrs Smyth advised that it was captured at risk 8 on the register which referred to primary care engagement.

The **FINANCE & RESOURCES COMMITTEE** noted the report.

7. Financial Turnaround Programme – Mid Programme Review

Mr Ralph Roberts provided an overview of the content of the report. He advised that although progress had been made it was inconsistent across the organisation. He suggested the programme be embedded as a change programme across the organisation to ensure delivery and momentum was sustained from when Bold left the organisation at the end of August and beyond.

Mrs Karen Hamilton commented that her main concerns were in regard to engagement in the process across the organisation and challenging areas of resistance. She advised that Mr Tris Taylor

had also emailed her and raised interesting points about engagement as well as in regard to rewards to encourage better performance and if the workload was equitably shared.

The Chair suggested that there was almost a law of diminishing returns and some actions that were planned would be addressed, however he enquired if executives were sighted on the resistance areas. Mr Roberts commented that sometimes it was staffing groups and sometimes it was service issues, historically medical staff were the most difficult staff group to engage with and he assured the Committee that he was aware of areas where progress was and was not being made.

Further discussion focused on: clinical engagement slow to develop; service improvement ideas; less cash releasing ideas; clinical alliance input; the bigger picture; hard decisions to be made on big ticket savings plans; expectations from the Board; briefing politicians; and regular high level messages to the organisation.

Mrs Karen Hamilton suggested members of the Committee might visit the Project Management Office to see at first hand what activity was occurring.

The **FINANCE & RESOURCES COMMITTEE** noted and provided feedback on the report.

8. 3 Year Financial Plan Assumptions

Mrs Carol Gillie took the Committee through the 3 year financial plan assumptions and highlighted several elements including: 2019/20 outturn position; national, regional and local drivers for 2020-2022; ability to close surge beds; assume £9m-£13.3m gap at the close of this financial year; gap in each of the next 2 financial years anticipated to be £3m-£4m; and risks and mitigating actions.

The **FINANCE & RESOURCES COMMITTEE** noted the presentation.

9. 3 Year Savings Forecast

Mrs Carol Gillie and Mrs June Smyth took the Committee through the 3 year savings forecast and highlighted several elements including: 2020-2022 savings outlook; cannot continue to use capital to revenue; target alternative sources of recurrent funding; ideas pipeline; clinical alliance link to clinical engagement strategy; think different branding; big ticket ideas; deconstruction sessions; key risks; next steps; and setting specific and increasing targets for identified and for mandated savings for each known date of a Finance and Resources Committee, culminating in full year targets in line with the Financial Plan.

Dr Cliff Sharp enquired of the consequences of submitting a 3 year financial plan to Scottish Government in October where the numbers did not add up. Mrs Gillie advised that it would be down to her and Mr Ralph Roberts to have the conversation with Scottish Government around that scenario and she assured the committee that she was working hard to ensure such as scenario did not occur.

Mr Roberts advised that he had spoken to Scottish Government colleagues about financial balance in 3 years and whether it might mean brokerage to get to year 3. He was keen that brokerage would not be the case however if the recurring deficit did not move substantially downwards progressively, a difficult conversation with Scottish Government would again have to take place.

The **FINANCE & RESOURCES COMMITTEE** noted the presentation.

Mrs June Smyth left the meeting.

10. Prescribing Decisions

Mrs Alison Wilson provided the Committee with an overview of prescribing and decision making. She highlighted: some of the areas for potential savings without compromising patient care outside of using licensed products; the risks associated with not using licensed products; reuse of medicines; clinical decision making; and homecare and VAT implications.

The Chair enquired if there was enough detail in the paper to take it to the Board. He appreciated it was a technical issue that would be difficult for the Board to be well sighted on. Mrs Wilson advised that in terms of clinical assurance she was taking the paper to clinical directors the following week for comments.

The Chair suggested the inclusion of a light touch risk assessment for each of the issues to enable the Board's understanding. He further suggested producing options for a set of principles in each of the question areas to enable informed decision making by the Board, given clinicians would make informed decisions based on patients or the efficacy of the drugs involved.

Mrs Carol Gillie commented that work had commenced on pricing up things on the wards such as the cost of an MRI scan, etc. Dr Cliff Sharp welcomed the initiative to bring a budgeting focus down to the front line for staff to understand.

The **FINANCE & RESOURCES COMMITTEE** noted the presentation.

Mrs Nicky Berry left the meeting.

11. Draft workforce plan and projection

Mrs Claire Smith took the Committee through the draft local workforce plan and local 3 year workforce projections. During the presentation she highlighted: projected population change by age group; NHS Borders staff by age profile; methodologies; recruitment and retention strategy; turnover rates and trends; impact of imatter; and workforce analytics.

The Chair enquired if some of the context of the presentation had arisen from the Audit Scotland report on workforce planning. Mrs Smith confirmed that it had and some of the indicators locally had come from that as well in order to ensure there was a structured workforce planning group.

The Chair enquired if the NHS Borders data was used on a standardised national system to allow benchmarking. Mrs Smith advised that there was a national HR system which enabled comparisons against other Health Boards to be made as well as using the ISD comparison data.

The Chair commented on the number of healthcare support workers (HCSWs) being 10 per year and enquired if that was over a certain number of years. Mrs Smith advised that it was over 3 years as there were difficulties in recruiting registered nurses and HCSWs could be appointed and trained up to fill the skills gap. She commented that several other Boards had taken the same approach and it was helpful to HCSWs to provide them with a career pathway.

The **FINANCE & RESOURCES COMMITTEE** noted the presentation.

12. Any Other Business

12.1 Business Cycle 2020

The **FINANCE & RESOURCES COMMITTEE** agreed the Business Cycle for 2020.

12.2 Allocation of Brokerage and Non Recurring Savings to the Business Units.

Mrs Carol Gillie tabled a spreadsheet regarding a proposal on the allocation of brokerage. She reported on the month 3 financial position and financial gap for 2019/20 of £21.7m with £12.7 allocated to business units. The spreadsheet proposed to allocate out the rest of the unmet recurring balance and then provide business users with a share of the brokerage. A share of the non recurring savings targets were then applied to each business unit with a minimum remaining financial target to be achieved at the end of the financial year.

The Chair enquired how the figures for each business unit were allocated. Mrs Gillie commented that £12.7m had already been decided and the balance left was then allocated on the same basis, then brokerage and non recurring savings were applied to off set it.

Mr Mike Porteous commented that he had been through the formula with Mrs Susan Swan and he had expected to see a range of options or 1 or 2 on how the corporate and brokerage elements would be assigned. The issue he had was the way in which the savings were approached, in terms of Primary and Community services and their budgets as they had 28% ring fenced and therefore their ability to deliver savings was reduced by that 28% and it made it harder for business units to identify and deliver savings and he was not sure that had been taken into account and was not in the way turnaround targets were set. Mrs Gillie advised that she had made the same point with non pay and for them to be excluded and they were excluded from the non pay workstream as she had asked for it to be taken out for the exact reasons Mr Porteous had just outlined.

Mr Ralph Roberts commented that he expected in some workstreams certain budgets such as GMS, were excluded but in others they were not. He understood the point Mr Porteous was making and the challenge was that this issue was raised in Primary and Community Services, however it could also be described for other workstreams The Chair commented that the original question had been about ring fenced funding and whether that had been taken into account. Mrs Gillie advised that she would need to check that point.

Mrs Gillie further advised that the figures had been locked down for the year. Mr Porteous commented that he would like to see a few options, such as 1 on the basis of budget and 1 on the basis of turnaround targets so that they would clearly show the different ways in which those savings and brokerage could be distributed.

Mr Roberts reminded the Committee that it was an NHS Borders Board decision in regard to the allocation of funding and agreeing any application of brokerage and non recurring savings across the business units. It would mean that the Integration Joint Board would be set a savings target of £6.4m and then after brokerage and non recurring savings were applied it would be measured again with a final £2.8m target to be achieved at the end of the financial year 2019/20 which was an improvement on the original situation.

The **FINANCE & RESOURCES COMMITTEE** noted the allocation of brokerage.

13. Date and Time of next meeting

The Chair confirmed that the next meeting of Finance & Resources Committee would take place on Monday 23 September 2019 at 12noon in the Board Room, NHS Borders, Newstead.

The meeting concluded at 5.25pm.

Signature:
Chair



Minutes of a meeting of the Health & Social Care **Integration Joint Board** held on Wednesday 14 August 2019 at 10.00am in the Council Chamber, Scottish Borders Council.

Present:

(v) Dr S Mather (Chair)	(v) Cllr D Parker
(v) Cllr J Greenwell	(v) Mr M Dickson
(v) Cllr S Haslam	(v) Mr J McLaren
(v) Cllr T Weatherston	(v) Mr T Taylor
(v) Cllr E Thornton-Nicol	Mr R McCulloch-Graham
Dr C Sharp	Mr M Porteous
Mrs N Berry	Mrs S Aspin
Mr S Easingwood	Mr D Bell
Mrs J Smith	

In Attendance:

Mr R Roberts	Mrs T Logan
Mrs C Gillie	Mr D Robertson
Mr G McMurdo	Miss L Ramage
Miss S Laurie	Mrs S Bell
Ms S Holmes	Mr G Samson

1. Apologies and Announcements

Apologies had been received from Ms I Bishop, Ms L Gallacher, Dr A McVean, Mrs J Stacey and Mrs K Hamilton.

The Chair confirmed the meeting was quorate.

The Chair welcomed Graeme McMurdo to the meeting.

The Chair welcomed members of the public to the meeting.

2. Register of Interests

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

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the Register of Interests.

3. Minutes of Previous Meeting

The minutes of the previous meeting of the Health & Social Care Integration Joint Board held on 19 June 2019 were approved.

4. Matters Arising

4.1 Action 12: The Chair reiterated the action to be taken following the deputation to the IJB in June 2019; the Executive Management Team (EMT) would add to the September 2019 agenda for discussion and agree a mechanism to employ an IJB Service User representative.

Mr Tris Taylor enquired as to why a determination had not been made in time for the August IJB. Mr Rob McCulloch-Graham advised that, due to annual leave, a full discussion with EMT was not possible until September 2019 and provided assurance that the IJB would have a Service User representative by the end of November 2019.

Mr Rob McCulloch-Graham advised that a further summit was in the process of being planned for the Locality Working Groups by the end of September 2019.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the action tracker.

5. Integration Joint Board 2019/20 Financial Plan Addendum

Mr Mike Porteous provided a detailed account of the content of the addendum paper and presented the budget allocations from partner organisations. Evidence was given on the financial and resource implications for the IJB operating in a financially challenging environment.

Both NHS Borders and Scottish Borders Council are forecasting a breakeven position at the end of this financial year.

The process of Joint Financial Planning would be explored to try to establish a 3 to 5 year financial plan. Mr Mike Porteous informed members that a Joint Financial Plan timetable would be presented to EMT in September 2019 and the finalised version would be presented to the IJB later in the year.

Members were advised that actions were underway to address the budget gap across the whole partnership, with good progress made against some workstreams which would be referenced in the next monitoring report. However it was acknowledged the current delivery method of services was unsustainable.

The Chair sought comments from Director's of Finance from partner organisations. Mrs Carol Gillie and Mr David Robertson assured they had no further observations.

Mr Malcolm Dickson commented there would be no guarantee of future Scottish Government brokerage for NHS Borders, therefore a focus should be placed on projecting ahead and not only on the revised savings target of £3.3million in the current financial year. Mr Mike Porteous agreed that a focus on recurring savings across the whole partnership was required to maintain momentum in reaching financial balance. Mr Ralph Roberts confirmed the level of brokerage available for NHS Borders and assured the allocation was a fair share of the NHS Borders resource, reflective of the services.

Cllr Shona Haslam was assured the IJB were on target to deliver the quarter 1 committed savings and reminded there remained a gap in the overall year budget which was yet to be closed. Mr Ralph Roberts commented that both partner organisations would make all endeavours to work within the set budget and, only after such actions would either partner fund the gap.

Mr Tris Taylor advised he was uneasy about the financial position and asked to be assured of strict governance around reporting on recurring savings reports to the IJB. Mr Tris Taylor also asked for clarity on the delay of reaching an agreed budget. Members were reminded the IJB were uncomfortable with accepting the budget earlier in the year due to the level of financial uncertainty. Joint Financial Planning would be a key mechanism going forward, linked to the NHS Borders 3 year recovery plan and Scottish Borders Council 5 year financial plan.

Cllr Shona Haslam commented the budget should be set on what savings would be realistically achievable whilst improving patient outcomes, then a remaining request for brokerage can be made. Mr Ralph Roberts agreed and advised NHS Borders would continue to provide Scottish Government with confidence on the level progress to reduce brokerage, therefore reducing the requirement of paying back.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the budget allocations from Scottish Borders Council (£49.078m) and NHS Borders (£134.016m) for the delegated functions.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** acknowledged the revised savings targets which NHS Borders has calculated for their delegated functions.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted that any expenditure in excess of these delegated budgets in 2019/20 will require to be funded by additional contributions from the partners in line with the approved scheme of integration.

6. 2018/19 H&SC IJB Annual Performance Report

A legislative requirement stands for every Health & Social Care Partnership to publish an Annual Performance Report (APR) by 31 July each year, with a set reporting structure to look at past and future local performance. Mr Graeme McMurdo provided an overview of the local Annual Performance Report and gave assurance the report was published on time, but would require IJB retrospective approval. There is an opportunity to amend as necessary and re-publish.

The APR was received well by all members.

Cllr Shona Haslam was assured the table on page 34 of the report, setting out the proportion of spend, would be completed following the confirmation of the budget.

Mr Malcolm Dickson asked for the IJB Audit Committee to be represented in the governance structure on page 12 of the report.

Mr Malcolm Dickson commented that, despite good performance, there was little evidence to date of a shift of the balance of care or resource between organisations. Mr Rob McCulloch-Graham advised the balance of care would show more of a definitive shift over the coming year. The redesign of Dementia services would be the first opportunity to start the shift.

Mr Tris Taylor thanked Graeme McMurdo and the Communication & Graphics team for their contribution to producing the APR, which brought clarity to the information through well thought out design.

Mrs Jenny Smith commended the APR and thanked contributors, however asked if the potential of producing an easy read version could be considered next year for those with learning disabilities.

Mr John McLaren asked for clarification on the governance for the APR, prior to presentation to the IJB. Mr Rob McCulloch-Graham advised approval was gained through the Health & Social Care Partnership Leadership Team and EMT, and would be presented to the next Joint Staff Forum. Mr John McLaren and Mr Rob McCulloch-Graham agreed that input from locality groups would be sought and reflected in the future APR.

The Chair thanked members for their comments and agreed the amendments would be made to the report.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the 2018/19 Annual Performance Report, with the incorporation of the agreed amendments.

7. Redesign of Dementia Services

Mr Rob McCulloch-Graham provided an introduction to the report, providing assurance the senior management steering group had fully engaged with all partners. Members were advised of the current bed state; Cauldshiels assessment ward with 14 beds and Melburn Lodge long stay ward with 12 beds.

The reduction in the current overprovision of acute mental health inpatient beds would be in line with local and national reports to shift the balance of care. The resource from the disinvestment in acute inpatient beds would require a shift to appropriate community services, via programmes like the Care Home and Community Assessment Team to support care homes and nursing homes staff with challenging patient behaviours.

The Chair asked for Dr Cliff Sharp's professional view on the proposed changes in respect on what is best for patients. Dr Cliff Sharp gave an overview of the positive steps made in the transformation to develop better community mental health services, keeping people safe and supported at home. Dr Cliff Sharp commented the proposal was a much needed step and was very supportive of the approach, as long as community support is provided and trigger points of system pressure are made clear.

Tracey Logan commented she was very supportive of the proposed redesign and had gained an idea of the pressures community staff are facing in terms of dealing with the level of patient complexity; therefore a longer term investment of training support would be required.

Cllr Elaine Thornton-Nicol agreed with the requirement for additional staff training and the associated costs should be factored into the proposal.

Cllr John Greenwell was assured that the £338k funds would be ring fenced on an annual basis for the sole use of specialist care bed investment, until the evaluation has been carried out and a final decision has been made on appropriate reinvestment options. Mr Rob McCulloch-Graham commented that analysis of the community resource impact would be an essential step prior to confirming spend.

Mrs Shirley Aspin commented the mental health transformation programme had been ongoing for some time; however the Care Home and Community Assessment Team remained a small team and would require sufficient support.

Mr John McLaren raised concerns over the recent day centres closures and their potential impact on the patients with Dementia who would usually access such community resource. Mr Rob McCulloch-Graham advised that the clientele who are in Cauldshiels are high end specialist care, different to those who would utilise the day services. Cllr Elaine Thornton-Nicol advised the day centres closures are not part of this transformation. Mrs Jenny Smith was able to provide a user perspective from attending a recent meeting with carers, who still have concerns that effective alternatives are not in place to support the individuals who were previously cared for in the day centres. Mrs Tracey Logan advised the process of day centre closure was being revisited and assessments of all users will be completed before taking the next step of re-provisioning as part of an integrated approach. Members were reassured by this addition in the plan.

Mr John McLaren also asked that a further effort to engage actively with carers be made.

Cllr Tom Weatherston commented the proposal was a huge step in the right direction. Mr Malcolm Dickson echoed Cllr Tom Weatherston's view.

The Chair concluded that it was not a seismic change, instead part of the continuum of mental health re-provision which would be a positive step forward.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the reduction of the number of Dementia inpatient beds from 26 to 12.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved reinvestment in appropriate community resources.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to establish an IJB reserve of £338,000 of recurrent funding. This reserve will be earmarked for the purchase of additional Dementia care home beds, as required. Should the beds not be required the balance of the reserve would be used by the IJB to contribute to the delivery of efficiencies within the health arm of the IJB budget.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to review the impact of the new model by no later than March 2021, including the effectiveness of the Care Home and Community Assessment team, the need for NHS Inpatient beds and the ongoing requirement for the earmarked reserve.

8. Bi-Annual Review of Risk Register

Mr Rob McCulloch-Graham provided an overview of the risk register in Mrs Jill Stacey's absence.

Mr John McLaren asked if it would be appropriate for members to have more sight on the risks and the active steps taken to manage them. Cllr Tom Weatherston advised the management of the risks sat with the IJB Audit Committee who asked for additional information on outstanding risks at the last board meeting. Members were content with the

oversight assurance from the IJB Audit Committee; risks will continue to be reviewed on a 6 monthly basis and reported back to the IJB.

Mr Tris Taylor commented that information should be included in the report to clarify a benchmarked position and what would be considered an acceptable risk level.

Mr Rob McCulloch-Graham advised the format of the appendix would be reviewed.

Mrs Tracey Logan asked for the item to be postponed to the September IJB and ensure Mrs Jill Stacey is available to attend.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** agreed to defer this item to the September 2019 IJB.

9. 2018/19 Integration Joint Board Annual Audit Report

Mr Mike Porteous gave an overview of the report and advised that Audit Scotland had given an unqualified report on the 2018/19 Annual Accounts.

Mr Rob McCulloch-Graham highlighted the reference to the Code of Corporate Governance which was discussed at the IJB Audit Committee earlier in the month to improve the methodology of performance scrutiny.

Cllr Shona Haslam commented the achievement section within the report should be strengthened. Mr Rob McCulloch-Graham advised this will be acknowledge with the auditors and built into the 2019/20 report.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** approved the independent auditor's 2018/19 Annual Report.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** acknowledged the key messages and actions within the report.

10. Financial Outlook Update

NHS Borders

Mrs Carol Gillie gave a presentation on NHS Borders financial plan position, where a total of £6million of recurring savings had been identified from a robust mandate process. Mr Ralph Roberts commented NHS Borders was confident in delivering the identified savings for the in year benefit and but would not reduce the underlying targets. Any deficit from current year would add further pressure on the targets for the next 2 years.

Mr Tris Taylor asked for clarification on the average amount of time taken to process an idea to a project plan. Mrs Carol Gillie advised she did not have the information to hand but would discuss with colleagues and confirm the timescales virtually.

Scottish Borders Council

Mr David Robertson advised Scottish Borders Council are on track to deliver £1.4million of the £1.6million savings target, with the variance due to the delays in the day centre redesign approach which the Executive Committee are aware of. The risks areas of interest to the IJB included the review and billing processes of care packages, which would be managed with appropriate social work engagement.

Mrs Nicky Berry commented on the beneficial financial overviews and advised that updates should be routinely presented to the IJB to monitor the interdependent risks, such as the packages of care.

IJB

Mr Mike Porteous agreed with finance colleagues from the partner organisations and advised the information would be incorporated into the next monitoring report for the IJB.

The Chair stated he had confidence that the IJB will start with an agreed budget in 2020 and asked for a joint presentation from the Director's of Finance at the start of the new financial year.

The **HEALTH & SOCIAL CARE INTEGRATION JOINT BOARD** noted the presentation and verbal updates.

11. Any Other Business

11.1 Equality Impact Assessment: Cllr John Greenwell enquired as to where the Equality Impact Assessments (EIA) were published for IJB projects which state the assessment was carried out. Jenny Smith agreed the EIA should be available in a central location for information. Graeme McMurdo agreed to follow up with Cllr John Greenwell query.

12. Date and Time of next meeting

The Chair confirmed that the next meeting of Health & Social Care Integration Joint Board would take place on Wednesday 18 September 2019 at 10am in Council Chamber, Scottish Borders Council.

The meeting concluded at 11.55am.

Signature:
Chair