

Minutes of a meeting of the **Borders NHS Board** held on Thursday 5 March 2020 at 10.00am in the Board Room, Newstead.

**Present:**

- Mrs K Hamilton, Chair
- Dr S Mather, Vice Chair
- Mrs F Sandford, Non Executive
- Mr M Dickson, Non Executive
- Ms S Lam, Non Executive
- Mrs A Wilson, Non Executive
- Cllr D Parker, Non Executive
- Mr R Roberts, Chief Executive
- Mrs C Gillie, Director of Finance, Procurement, Estates & Facilities
- Mrs N Berry, Director of Nursing, Midwifery & Acute Services
- Dr T Patterson, Joint Director of Public Health

**In Attendance:**

- Miss I Bishop, Board Secretary
- Mrs J Smyth, Director of Strategic Change & Performance
- Mr R McCulloch-Graham, Chief Officer, Health & Social Care
- Mr J Cowie, Director of Workforce
- Dr A Cotton, Associate Medical Director
- Mrs L Jones, Head of Clinical Governance & Quality
- Mr S Whiting, Deputy Hospital Manager
- Mrs I Hassing, Infant Feeding Lead
- Ms J Dalzell, Unicef BFI Lead for Scotland
- Mr A Bone, Director of Finance Designate
- Mrs S Horan, Associate Director of Nursing
- Mrs C Oliver, Communications Manager
- Mr G Clinkscale, Hospital Manager

## **1. Apologies and Announcements**

Apologies had been received from Mr Tris Taylor, Non Executive, Mr John McLaren Non Executive, Dr Cliff Sharp, Medical Director, Dr Janet Bennison, Associate Medical Director, Dr Nicola Lowdon, Associate Medical Director and Dr Annabel Howell, Associate Medical Director.

The Chair welcomed Mr Andrew Bone, Director of Finance designate, Mrs Laura Jones, Head of Clinical Governance & Quality, Mr Sam Whiting, Deputy Hospital Manager, Ms Ida Hassing, Infant Feeding Lead, Mrs Sarah Horan, Associate Director of Nursing and Mrs Clare Oliver, Communications Manager.

The Chair announced that this was the last meeting for Mrs Carol Gillie, Director of Finance and Mr John Cowie, Director of Workforce who were both leaving the Board at the end of March 2020. The

Board recorded their thanks to Mrs Gillie and Mr Cowie for their contributions to the work of the Board.

The Chair confirmed the meeting was quorate.

## **2. Maternity and Health Visiting Services: UNICEF Baby Friendly Re-Accreditation**

Mrs Sarah Horan introduced Ms Ida Hassing and Ms Janet Dalzell, Unicef BFI Lead for Scotland. Ms Hassing appraised the Board of the team work between staff and the leadership team to provide quality care. The Board also heard about the innovative team within NHS Borders who had undertaken additional work to ensure sustainability was achieved; had increased skin to skin contact within the theatre setting and had progressed with feeding initiatives. The baby friendly initiative within NHS Borders had progressed well since its inception in 2012, with a 5.4% increase in breast feeding.

Ms Dalzell provided the Board with an update on breast feeding from a national perspective and recognised the excellence in Borders, through the amount of work undertaken across NHS Borders in regard to infant feeding and the relationship building of attunement and attachment. Ms Dalzell presented the Chair with the re-accreditation award.

The **BOARD** acknowledged the current results, congratulated the team on their work and supported the progressive work initially for the maternity service to achieve the UNICEF BFI Sustainability Standards and the Gold Award by July 2020.

## **3. Register of Interests**

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

Mr Malcolm Dickson declared that his sister in law worked for the Northumbria Foundation Trust which was mentioned within the Finance Report.

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

## **4. Minutes of Previous Meeting**

The minutes of the previous meeting of the Borders NHS Board held on 5 December 2019 were approved.

## **5. Matters Arising**

**5.1 Action 13:** Mr McCulloch-Graham advised that the intended timeline was for business cases to be submitted to the IJB in March and then where appropriate directions would be submitted to the Board for formal approval.

The **BOARD** noted the action tracker.

## **6. Strategy & Performance Committee Minutes: 07.11.2019**

The **BOARD** noted the minutes.

## 7. Organisational Objectives 2020-2023

Mrs Clare Oliver highlighted the approach that had been taken in order to encourage staff to have ownership of the objectives. The intention was to link the objectives to the organisation's performance objectives and staff members personal objectives through their Personal Development Plans to embed them in the culture of the organisation.

The Chair urged that all cover papers for reports clearly state the approval pathways and dates at which other Committees and groups had received and reviewed the reports.

Mrs Nicky Berry commented that it was helpful to acknowledge that there had been over 400 responses to the engagement exercise and Mrs Oliver advised that the approach undertaken had been at the suggestion of Mr Tris Taylor, and it had worked well with much positive feedback received on the process undertaken.

Ms Sonya Lam enquired about the process to be undertaken to feedback to staff on the suggestions that had not been taken forward. Mrs Oliver advised that an electronic newsletter was used to provide feedback to staff at each stage in the process.

Dr Stephen Mather reminded the Board that much work was now undertaken in partnership and provided the example of joint financial planning. He requested that a link to the Integration Joint Board (IJB) be considered to show where it fitted in and to give a sense of co-ownership and responsibility by all staff across the partnership.

Mr Malcolm Dickson advised that he welcomed the content of the objectives and that they would become part of the development of the joint strategy within the partnership. He was however slightly disappointed that the Board had not had earlier sight of the objectives in order to feed in their comments and thoughts before submission to the Board for approval. He was keen that the Board be given the opportunity to feed in comments ahead of a further final draft being submitted for final approval either at the next Board meeting or via electronic means. He further suggested that there could be some public engagement undertaken on the draft objectives.

Mrs Oliver advised that a public engagement strategy was being drawn together where the public would have an opportunity understand their content. Mrs June Smyth reminded the Board of the extensive work that had been undertaken in regard to engagement with the public about the "Statements of Intent" and agreed that the objectives could be brought back to the Board for approval once the Board had had the opportunity to consider and comment on them further.

The **BOARD** deferred approval to the next meeting to have opportunity to make comment and provide feedback on the renaming of the objectives as "Organisational Objectives".

The **BOARD** noted the current next steps outlined in the report and that they would be expanded accordingly.

## 8. Finance & Resources Committee Update: 23.01.20, 27.02.20

The **BOARD** noted the update from the Finance & Resources Committee.

## **9. Finance & Resources Committee Minutes: 23.09.19, 29.11.19, 23.01.20**

The **BOARD** noted the minutes.

## **10. Audit Committee Update: 12.12.19**

Mr Malcolm Dickson commented that Audit Scotland had invited Audit Committee members to meet with them to discuss that organisation's approach to its next annual audit of the NHS across Scotland. He advised that both he and Mrs Fiona Sandford had attended the session and had welcomed the knowledge that they had a clear understanding of the difficulties being faced by Health Boards in special measures. Mrs Sandford commented that it had been a robust discussion.

The **BOARD** noted the update from the Audit Committee.

## **11. Audit Committee Minutes: 16.09.19**

The **BOARD** noted the minutes.

## **12. Approval of a Tender Waiver for the Procurement of Boiler Refurbishment Works**

Dr Stephen Mather advised the Board that he had robustly scrutinised the matter and had been content that it would not set a precedent. He had been content with the process followed.

The Chair commented that she fully supported the action undertaken by Dr Mather. She had been concerned that it may become too easy to approve such matters outwith the normal Board meeting cycle, however she had been assured that there had been a robust reason for undertaking the matter in this way at that time.

The **BOARD** noted the contents of the report.

The **BOARD** ratified the approval given by the Board Vice Chair, Chief Executive and Director of Finance to waive the tender process as stated in the Code of Corporate Governance for the appointment of a contractor for a package of works at the main boilerhouse at Borders General Hospital.

## **13. Finance Report for the Ten Month Period to 31 January 2020**

Mrs Carol Gillie provided an overview of the content of the report and highlighted that the Board was reporting an underspend position of £0.07m (£0.3m overspend at the end of December) on revenue and break even on capital budgets. A number of unplanned underspends in service budgets were reported due to additional scrutiny resulting in a slowdown of spend, for example through vacancy controls. As a result the Board had advised the Scottish Government of a revised brokerage funding requirement for 2019/20 of £8.3m (£9.3m previously). At the time of writing the report, £5.1m in year (£7.1m in a full year) recurring savings had been mandated against the £12.7m recurring savings target in line with the forecast year end position. Of those savings £4.2m in year and £5.1m in a full year had been retracted from budgets. Mrs Gillie continued to forecast a year end position of breakeven on revenue with the support of £8.3m additional funding in the form of brokerage and delivery of the Capital Resource Limit target.

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

#### **14. Indicative Baseline Provision of 2020/21 Resource to the Health and Social Care Integration Joint Board**

Mrs Carol Gillie provided an overview of the content of the paper. She highlighted that all parts of the organisation were treated equitably in order to get as close to balance as possible within the 3 year timeframe. In treating the IJB in the same way she hoped they would accept the settlement and work with the Board across the 3 year plan. If the IJB decided to move away from the settlement offered it would have a detrimental effect on both the Health Board and the IJB and make it difficult to plan from year 2 onwards.

Mr Ralph Roberts commented that if the Board agreed the offer, a letter would be written to the IJB with the offer. It would also make it clear that it was contingent on the IJB working with the Health Board over the 3 year plan period to bring both organisations back into financial balance.

Mr Rob McCulloch-Grahan commented that the IJB would also develop its own 3 year plan and would take into account the NHS 3 year plan. He further commented that corporate services matters such as Office 365, would be funded on an equitable basis. Mrs Gillie welcomed the clarification and agreed that was the intention moving forward.

The Chair welcomed the general discussion on evenhandedness in regard to the financial situation.

The **BOARD** noted the provision of resource to the IJB for delegated functions and budgets set aside for the large hospitals element had been set on a pragmatic roll forward of 2019/20 resources, rather than established on the basis as outlined in the Integration Scheme.

The **BOARD** approved the 2020/21 indicative provision of resource to the IJB at £135.42m, including £24.48m of resource set aside for the large hospitals element, for it to undertake the functions delegated to it. That included £7.62m for the recurring social care fund and £2.19m for the ring fenced fund (Integrated Care/Transformation Fund). The IJB was required to deliver £4.75m (delegated services) and £1.08m (set aside) of recurring savings in year to support the level of resources provided. The final amount of resources provided for 2020/21 would be agreed by the NHS Borders Board on the 2<sup>nd</sup> April 2020.

The **BOARD** noted the amount to be provided was equitable with the resources to other NHS Borders business units. It reflected a 4.1% increase in the recurring level of resources provided in 2019/20 which was above the 3% requirement stated in the Scottish Government Budget 2020/21 Indicative Allocation letter.

The **BOARD** noted that further resources would be provided to the IJB when additional relevant allocations were received that related to delegated services.

The **BOARD** noted that when the NHS Borders Annual Operational Plan was agreed with Scottish Government, brokerage levels for 2020/21 would also be agreed. It was envisaged at that time the IJB would receive a non recurring provision of resources based on an appropriate share of brokerage funding.

**15. Clinical Governance Committee Update: 22.01.20**

Dr Stephen Mather drew the attention of the Board to the assurance statement, and explained that whilst the governance committees were set up to provide assurance to the Board they did not actually state in their meetings that they were assured on matters. The Committee had therefore adjusted its approval processes to be either, assured, partly assured or not assured on matters. He suggested the other governance committees may wish to follow the same format.

Mr Malcolm Dickson welcomed the reduction in falls as detailed on page 1 of the report.

The **BOARD** noted the update from Clinical Governance

**16. Clinical Governance Committee Minutes: 04.09.19, 29.11.19**

The **BOARD** noted the minutes.

**17. Area Clinical Forum Update: 03.12.19**

Mrs Alison Wilson advised that the Forum had met earlier that week and had been keen to highlight to the Board several matters including: the requirement for safe staffing; engagement with the GPs through the GP Executive; the Primary Care Improvement Plan; communication with the public in regard to the financial situation; and difficulties experienced by pharmaceutical contractors in chasing medicine supplies with real time orders to manufacturers not allowing the delivery of enough stock for patients.

Mr Malcolm Dickson enquired if breaches in safe staffing levels were recorded. Mrs Nicky Berry advised that they would be in respect of nursing and midwifery staff as per the Safe Staffing legislation requirements. She understood that the recording system would be rolled out to other staffing groups at some point in the future and confirmed that the organisation was on course to provide its first report on safe staffing at the end of 2021, as per the legislation.

Ms Sonya Lam enquired if staffing breaches were picked up through the datix system. Mrs Berry confirmed that an extra element had been added to datix for breaches to be recorded. She further assured the Board that staffing was raised at each safety briefing at the start of each working day to ensure any issues could be addressed swiftly.

Mrs Wilson reiterated to the Board that much work was progressed by pharmacy staff in sourcing medicines and where appropriate alternative medicines. She was also awaiting information in regard to any potential alternative supply chain for those medicines currently supplied by China and India, given the fast moving coronavirus matter.

The **BOARD** noted the update from the ACF.

**18. Area Clinical Forum Minutes: 01.10.19**

The **BOARD** noted the minutes.

## **19. Food, Fluid & Nutrition Annual Report**

Mrs Sarah Horan provided an overview of the content of the report and highlighted the areas of progress that had been made, specifically in regard to: harm reduction; nutrition; hydration; staff training; clinical coaching; involving family members; and the simple tool of using different coloured lids on jugs to show the hydration levels required for each patient.

Discussion focused on the use of national documentation templates and enabling them to be more simplistic for completion by staff; and identifying the barriers to weighing patients on admission.

The **BOARD** noted the report.

## **20. Quality & Clinical Governance Report**

Mrs Laura Jones provided the Quality and Clinical Governance exception report and highlighted the annual position in respect of maternity care and that there had been 356 births and 367 days since the last still birth. She further advised of the positive feedback received from both the Adult Health and Social Care Older Peoples Inspection and the Ionising and Radiation Inspection.

The **BOARD** noted the report.

## **21. Healthcare Associated Infection – Prevention & Control Report**

Mr Sam Whiting provided an update to the Board in regard to coronavirus. He advised that it was a fast moving situation in terms of the Scottish Borders area with 33 patients swabbed, the results of which were all negative. Mr Whiting further articulated to the Board the detailed scenario planning for a pandemic what was being progressed. He advised that it included predicted admissions with coronavirus, predicted staff absences, ventilator requirements, personal protective equipment needs, the potential requirement to stand down elective admissions and the ability to surge into various areas of the hospital.

Dr Stephen Mather advised that the Clinical Governance Committee received an infection control report at each meeting and had received a large amount of data in regard to hygiene audits across the organisation. Given the differences in compliance the Committee had not felt fully assured in respect of infection control at that time. Mrs Nicky Berry advised that she had been unable to provide assurance, however she was keen to assured the Board that the matter was being addressed in terms of a more robust audit process for hand hygiene compliance, as well as ongoing staff training. She further advised that there was a process in place to manage those staff who were not following infection control processes.

Dr Tim Patterson provided a further update in regard to COVID 19. He commented that infection control would be a top priority, as well as staff wellbeing. He assured the Board that he was reviewing the organisations' pandemic flu plan; the Clinical Boards were reviewing their business continuity plans; and primary care services were reviewing their ability to deal with the emerging situation and anticipated increase in activity. Governance arrangements were being strengthened and plans worked up for a surge scenario. He advised that within England there appeared to be a sustained community spread and Germany had declared that it was in a pandemic phase.

The Chair enquired if the UK was in an epidemic or pandemic phase. Dr Patterson advised that the current classification was epidemic with both South Korea, Iran and Italy being declared as being in the epidemic stage. He commented that the World Health Organisation were reluctant to declare a pandemic at that point in time as they were hopeful that it could still be contained.

Mr John Cowie commented that within the planning model scenario there was likely to be high staff sickness absence. The Scottish Government had produce guidance for staff in regard to self isolation and sick pay that could be subject to misinterpretation by staff. His department were therefore reviewing the guidance to make it clearer for staff to understand.

Mrs Berry assured the Board that sessions had been held with the Borders General Hospital, GPs and Mental Health colleagues for face fit testing with further sessions to be organised.

The **BOARD** noted the report.

**22. Public Governance Committee Update: 04.02.20**

The **BOARD** noted the update from the Public Governance Committee.

**23. Public Governance Committee Minutes: 05.11.19**

The **BOARD** noted the minutes.

**24. Staff Governance Committee Update: 19.12.19**

Mr John Cowie commented that the Committee had been keen to escalate to the Board the release of the imatter questionnaire for completion by the organisation. A response rate of 60% was required to enable a meaningful report to be formulated for the organisation. The previous year the response rate for NHS Borders had been 53%, which had been the lowest return rate of all the Health Boards in Scotland.

The Chair enquired if there was any learning from the corporate objectives exercise that could be used to encourage staff to complete the imatter survey.

Ms Sonya Lam enquired if there was a route cause as to the low response rate. Mr Cowie commented that the Staff Governance Committee had received a detailed report on the previous years' response rate and it had highlighted nursing and estates and facilities as the 2 main areas that had failed to reach the response rate threshold.

The Chair commented that she was keen to show leadership to the imatter request and advised that the Non Executives would take part in the process and she asked that Miss Iris Bishop set up the relevant imatter team accordingly.

The **BOARD** noted the update from the Staff Governance Committee which met on 19<sup>th</sup> December 2019.

**25. Staff Governance Committee Minutes: 19.09.19**

The **BOARD** noted the minutes.

## **26. Consultant Appointments**

Mr John Cowie commented that the appointment enabled there to be a full complement of anaesthetists in the Borders General Hospital.

The **BOARD** noted the new consultant appointment.

## **27. NHS Borders Performance Scorecard**

Mrs June Smyth provided a brief overview on the content of the report. She advised that the Access Board had met the previous week and had focused its attention on colonoscopy.

Mr Gareth Clinkscale provided the Board with an update on the performance of the colonoscopy service and advised that it had been operating at 12-14 weeks for a routine colonoscopy appointment and 6-8 weeks for an urgent appointment. As a result of changes to the screening protocol, the development of new nurse lead clinics and a demand and capacity assessment, its performance had increased to 6-8 weeks for a routine appointment and 4-6 weeks for an urgent appointment. He advised that the team were working towards a 2 week wait for urgent appointments in order to deliver the 62 day cancer target.

Dr Stephen Mather enquired about diagnostics performance. Mr Clinkscale commented that there were difficulties with ultrasound as a consequence of an inability to recruit and in regard to MRI and CT scans the equipment had been down due to its age which had impacted on capacity.

Dr Mather enquired when the new MRI would be installed. Mrs Carol Gillie advised that it was intended to be installed over the summer period when there tended to be slightly less activity.

Ms Sonya Lam commented that the sickness absence trend appeared to be increasing and she enquired if there was a breakdown available. Mr John Cowie commented that the top 3 reasons for sickness absence were unknown as data was collected at a departmental level. Mrs Nicky Berry advised that in regard to nursing staff the top reasons were stress and musculoskeletal issues. Occupational Health continued to support staff and attended the daily safety huddle to pick up on the stress issues that were often related to anxiety and overnight assaults on staff.

The Chair commented that she had been reviewing past reports as part of the exercise for the appointment of new Non Executives to the Board. She had found that the actions from the October report and the current report around ultrasound appeared to be the same and she was keen that these were reviewed and updated. Mrs Smyth advised that the narratives provided by the services were not challenged, however she would ask that if there was not change they were challenged in future.

Further discussion focused on challenges in the movement of delayed discharges into step down facilities and ensuring delayed discharges were defined by each Clinical Board area.

The **BOARD** noted the December 2019 Performance Scorecard.

**28. Vice Chair**

The **BOARD** endorsed the appointment of Mrs Fiona Sandford as Vice Chair, subject to formal approval by the Cabinet Secretary.

**29. Board Committee memberships**

The Chair provided an overview of the content of the proposed changes.

The Chair advised that Mr Tris Taylor would be undertaking a leave of absence for 6 months due to personal circumstances.

The **BOARD** approved the membership and attendance of Non Executive members on its Board and other Committees as recommended by the Chair.

**30. Scottish Borders Health & Social Care Integration Joint Board minutes: 30.10.19**

The **BOARD** noted the minutes.

**31. Endowment Fund Board of Trustees minutes: 25.09.19**

The **BOARD** noted the minutes.

**32. Any Other Business**

The **BOARD** noted there was none.

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

The Chair confirmed that the next meeting of the Borders NHS Board would take place on Thursday 2 April 2020 at 10am in the Board Room, Newstead.

*The meeting concluded at 12.11.*



Signature: .....  
Chair