

Minutes of a meeting of the **Strategy & Performance Committee** held on Thursday 2 November 2017 at 10.00am in the Board Room, Newstead

Present:

Mr J Raine	Mrs C Gillie
Mrs K Hamilton	Mrs C Pearce
Mr D Davidson	Mrs J Smyth
Mr T Taylor	Dr C Sharp
Mr M Dickson	Dr T Patterson
Dr S Mather	Mr R McCulloch-Graham
	Mr W Shaw

In Attendance:

Miss I Bishop	K
Ms C Philip	Miss A Blackaby
Mrs R Gray	Mrs L Jones

1. Apologies and Announcements

Apologies had been received from Mrs Jane Davidson, Cllr David Parker, Mr John McLaren, Mrs Alison Wilson, Dr Janet Bennison, Mr John Cowie, and Dr Amanda Cotton.

The Chair welcomed Mr Robert McCulloch-Graham to his first meeting of the Strategy & Performance Committee.

The Chair welcomed a range of attendees to the meeting.

2. Patient and Carer Stories

K spoke about her own experience of being a patient within the mental health service and also her experience of volunteering within the organisation. She gave a very emotional account and commended several staff for their care and compassion during her in-patient periods.

The Chair thanked K for her time and eloquence in orating her story. He commented that it was helpful to the Board to receive stories that allowed them to reflect on the type of care provided, interactions between staff and patients and areas of good practice as well as those for further learning.

Dr Cliff Sharp commented that it was really moving to hear the narrative of what did and didn't help and the intangible things which made a huge contribution to peoples lives, like music, instruments, tea, work and continuity of care. Dr Sharp saw value in publicising K's story nationally if she were content to do that to allow for further learning for a range of health professional disciplines.

Mr Malcolm Dickson applauded K for her strength in speaking to a room full of strangers about her very personal story and how self aware she was. He suggested if everyone understood their strengths and weaknesses as well as she did they might be better people for it.

Mr Robert McCulloch-Graham commented that K had beautifully written and narrated her story and he would be grateful if she would consider sharing her story with others.

Mrs Laura Jones commented that on behalf of the patients, she had had the privilege of listening to K play the piano to patients and the joy that it had brought to many was quite amazing to see.

The Chair thanked K for having the courage to come and speak to the Board and for her dedication to her work as a volunteer.

The **STRATEGY AND PERFORMANCE COMMITTEE** noted the patient's story and considered the opportunities and positive outcomes which could be delivered by working in partnership with service users in an innovative and creative way.

The Chair invited reflections on the story from the Committee members.

Dr Cliff Sharp advised that he would speak with K in regard to seeking her permission to publicise her story through Care Opinion, the Huntlyburn Facebook page and the British Medical Journal.

Mr David Davidson suggested her story might be shared with the Scottish Government in regard to raising awareness about eating disorders and the help required outwith the health care environment.

Mr Tris Taylor enquired how those with mental health needs who were not in the acute system were helped to express themselves. Dr Sharp advised that the Occupational Therapists assisted adults to draw out their interests and encouraged creative expression whether through singing, music, dance, etc. He advised that in child psychiatry they had the provision of a dance therapist and 2 music therapists. Dr Sharp advised he would be happy for Mr Taylor to meet with the team to learn more.

Mr Dickson enquired if there were any lessons to learn about using volunteering as part of the therapy process. Dr Sharp commented that it was quite a common thing and often brought purpose to doing something simple and giving something back.

The Chair asked that the staff mentioned by K were advised of her commendations. Dr Sharp commented that he would ensure feedback was given.

3. Declarations of Interest

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

The **STRATEGY & PERFORMANCE COMMITTEE** noted there were none.

4. Minutes of Previous Meeting

The minutes of the previous meeting of the Strategy & Performance Committee held on 7 September 2017 were approved.

5. Matters Arising

5.1 Minute 7: Scottish Borders Health & Social Care Partnership Draft Winter Plan 2017/18:

The meeting noted that Mr John Cowie was to provide an update on contractual arrangements in regard to vaccination uptake.

5.2 Action 1: Dr Cliff Sharp advised that the Branching Out project was a reincarnation of the Wilderness project and he had asked Mr Mike Cant Pinnons to provide an SBAR update on it. He confirmed that the spirit and practice continued in a different format.

5.3 Action 20: Dr Tim Patterson advised that the action was now complete and would form part of the Diabetes Strategy.

5.4 Action 24: Mrs Karen Hamilton advised that the Charter for Involvement was an item on the next Public Governance Committee meeting agenda and was also featured on their Action Tracker.

5.5 Action 25: Dr Cliff Sharp commented that whilst the action was complete in regard to simulation training space the next step would be to have a simulated ward area identified.

5.6 Action 29: Mr Robert McCulloch-Graham advised that the unit was off the road. Dr Stephen Mather recalled that the matter had been remitted to the Health & Social Care Integration Joint Board to discuss and suggested Mr McCulloch-Graham pursue it through that route.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the action tracker.

6. Delayed Occupied Bed Days

Mr Robert McCulloch-Graham gave an overview of the content of the paper and highlighted the increase in occupied bed days. He further highlighted: the funding request to the Health & Social Care Integration Joint Board (IJB); the increase in complex cases and their length of stay; the expectation of families in regard to the discharge destination of their family members; the provision of a rapid assessment and discharge service within the Emergency Department at the Borders General Hospital; the provision of bed availability at Waverley Care Home to ensure patient flow; the provision of the Matching Unit and its impact on efficiency in the system around matching people with packages of care; and a Discharge to Assess policy proposal.

Mrs Claire Pearce gave feedback on a patient who had been in Ward 12 for 7 months waiting on a package of care in the community. The patient had not wished to remain in hospital and Mrs Pearce was able to confirm that the patient was finally being discharged to Waverley Care Home later that afternoon for assessment for a double package of care.

Mr David Davidson enquired if there was any update on the Anne Hendry review of Community Hospitals. Mrs Laura Jones advised that Mrs Hendry had spent 2 days the previous week on site to progress matters.

Mrs Karen Hamilton enquired about the discharge status of patients in the discharge lounge. Mrs Pearce advised that patients were formally recorded as discharged at the point they arrived in the discharge lounge.

Further discussion focused on: cost resources information; discharge to assess proposal; 3 areas to focus on, admission to hospital – pathways after consultation with the GP that do not involve a hospital admission – careers in care to use as an entry level to the nursing profession; commencing the patient and family discussion around discharge destination at or prior to admission; when medication is sorted discharge will be to an assessment facility; and understanding the level of additional capacity that is required.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the report.

7. Prescribing Proposals – Nicotine Replacement Therapy

Dr Tim Patterson gave an overview of the content of the paper and explained the process for those who required help with smoking cessation. He highlighted the intention to protect vulnerable groups and that Health Scotland were keen that Health Boards did not move to charging for nicotine replacement therapy (NRT).

Discussion focused on several key areas including: whilst the smoking cessation service and pharmacy colleagues might stop prescribing NRT, GPs could still prescribe and might prescribe the more expensive product; use of the minor ailments scheme; financial consequences in years to come of withdrawing the service now; the cost of cigarettes compared to the cost of NRT or electronic cigarettes; provision of a voucher scheme to commence smoking cessation with monitoring and then phased out for individuals over a 2 year period; a strategy for the rationale of withdrawing the service; inequalities; dealing with the financial challenges and providing better health care and better value; balancing the need for self reliance and personal responsibility and helping the most deprived and troubled individuals; and GPs were keen to reduce prescribing certain things and are in open dialogue with the organisation about how they can assist in reducing prescribing pressures and drug and supply costs.

Dr Cliff Sharp commented that smoking was bad for individuals health and those with limited resources often managed their resources in such a way to be able to continue smoking. He suggested that the most deprived segment of the population needed to be protected, however individuals had to take responsibility for their health and people often gave up smoking after a few attempts and only if they really wanted to. He put into context the proposed saving of £15k to the cost of a Healthcare Support Workers who might assist up to 300 people each per year.

Mrs Karen Hamilton commented that she was unsure if those who received NRT for free would be motivated enough to cease smoking, as they would have no financial investment in it.

The Chair enquired if any savings had been realised as a result of the Board having changed the criteria for the prescription of statins bearing in mind that GPs would prescribe as they considered appropriate. Dr Sharp advised that he would seek an update from Mrs Alison Wilson.

Mrs June Smyth reminded the Board that the Discovery facility was being utilised to look at several areas for savings in conjunction with GPs and Quality Cluster Leads.

The Chair concluded that further work was required on the paper in order for the Committee to make an informed decision. He suggested the paper should include detail on the wider health economics, the outcome of any change in GP prescribing practice as a result of the statins criteria change, further

consideration of inequalities issues and the impact on areas of deprivation, and the rationale and implications should the Board depart from national government policy.

The **STRATEGY & PERFORMANCE COMMITTEE** discussed nicotine replacement therapy provided as part of a smoking cessation programme within NHS Borders as an area for prescribing policy change.

The **STRATEGY & PERFORMANCE COMMITTEE** asked for further work to be undertaken on the paper and for it to be resubmitted to the next meeting of the Committee in February.

The **STRATEGY & PERFORMANCE COMMITTEE** also requested an overarching framework be produced to enable the Committee to make informed decisions and recommendations to the Board.

8. Efficiency Update as at 30 September 2017

Mrs Carol Gillie provided the Committee with an update on the delivery of the 2017/18 efficiency programme against the target as at 30 September 2017. She highlighted several key elements within the report including: £3.4m of savings had been delivered; she was forecasting that £8.7m of savings would be delivered this year; the report gave a lot of detail about targets and delivery by Clinical Board area; and there had been an increase in the level of savings due to be delivered within the set aside budget and there had been a decrease in the forecast delivery of drugs savings.

Mrs Gillie further clarified that only £4.1m was forecast to be delivered recurrently leaving a shortfall of £8.8m which would be carried forward into 2018/19 which was a further increase from the recurring deficit of £4.9m at the start of the financial year.

Mr Tris Taylor noted that the recurring savings position was the most worrying element and enquired about investing to produce recurring savings. Mrs Gillie clarified that focus had been given to the current financial year, and with the assistance of the Health & Social Care Integration Joint Board direction to provide £1m to assist with delayed discharge costs, she was forecasting a break even position based on a number of assumptions and risks however, she remained concerned about the recurring savings position for the future and was keen to delve into the financial position for 2018/19 at the afternoon Board Development session.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the updated to end of September.

9. Performance Scorecard

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

Mr Tris Taylor enquired what information was supplied to patients about waiting times within their appointment letters. Mrs Laura Jones advised that there was guidance on what was required to be included in a referral letter and that the letter should state when the patient was added to the waiting list and when their appointment was anticipated. In some specialities where there were difficulties there should be included in the letter a section confirming if the speciality was operating outwith the 12 or 18 weeks standard and what the anticipated waiting time would be. Mrs Jones agreed to pick up the matter with Mr Taylor outwith the meeting.

The **STRATEGY & PERFORMANCE COMMITTEE** noted the Performance Report as at end of August 2017.

10. Any Other Business

10.1 Financial Performance Group

The **STRATEGY & PERFORMANCE COMMITTEE** noted the Financial Performance Group minutes.

11. Date and Time of next meeting

The Chair confirmed that the next meeting of Strategy & Performance Committee would take place on Thursday 1 February 2018 at 10.00am in the Board Room, Newstead.

The meeting concluded at 12.30.



Signature:
Chair