

Minutes of a meeting of the **Borders NHS Board** held on Thursday 29 June 2017 at 10.00am in the Board Room, Newstead.

**Present:**

Mr J Raine	Mr C Gillie
Mr D Davidson	Mrs C Pearce
Dr S Mather	Mrs J Smyth
Mr J McLaren	Dr C Sharp
Cllr P Parker	Dr T Patterson
Mrs A Wilson	Mr J Cowie
	Mr W Shaw

**In Attendance:**

Miss I Bishop	Mrs V Buchan
Dr A Cotton	Mrs R Gray
Ms S Lawrie	Mr S Whiting
Mr P Lunts	Mrs J Stephen
Ms E Ducklin	Mr L Whitehead
Mrs G Woolman	

## **1. Apologies and Announcements**

Apologies had been received from Mrs Karen Hamilton, Mrs Jane Davidson and Mrs Elaine Torrance.

The Chair confirmed the meeting was quorate.

The Chair welcomed Cllr David Parker, who had been formally approved by the Cabinet Secretary as the NHS Borders Local Authority Stakeholder Non Executive on the Board.

The Chair welcomed Mr John Cowie, Interim Director of Workforce, who had been appointed to allow Mrs June Smyth to focus on the regional transformation and clinical strategy work.

The Chair welcomed Mrs Gillian Woolman from Audit Scotland.

The Chair welcomed Ms Emma Ducklin, Clinical Psychologist who was shadowing Dr Cliff Sharp, Medical Director.

The Chair welcomed Mr Lewis Whitehead, Public Health Intern.

The Chair also welcomed Mrs Jackie Stephen, Mrs Ros Gray, Mr Sam Whiting and Mr Philip Lunts to the meeting.

The Chair welcomed members of the public to the meeting.

The Chair announced that Mr David Davidson had been formally appointed by the Cabinet Secretary as the Vice Chair of the Board with effect from 1 May 2017.

The Chair offered the congratulations of the Board to Mrs Jane Davidson on her appointment as a Non Executive Director of the Board of NHS National Services Scotland (NSS). He advised that NSS had specifically wished to appoint a Board Chief Executive to their Non Executive vacancy and he was delighted that Jane had been appointed.

The Chair recorded the congratulations of the Board to Lieutenant Colonel Cath Livingstone, Consultant Anaesthetist, who was honoured in the Queen's Birthday Honours list with an MBE (Member of the British Empire) for innovation and sustained effort in medical training and for her long service to the Army Reserve.

## **2. Declarations of Interest**

The Chair sought any verbal declarations of interest pertaining to items on the agenda. A revised declaration of interest for Mrs Alison Wilson was table.

The **BOARD** noted the Declarations of Interest for Mrs Claire Pearce, Cllr David Parker, Mr John Cowie, Mrs Jane Davidson and Mrs Alison Wilson.

## **3. Minutes of Previous Meeting**

The minutes of the previous meeting of the Borders NHS Board held on 6 April 2017 were approved.

## **4. Matters Arising**

4.1 **Minute 19:** The Chairman advised that there had been over 60 applications for the 3 Non Executive Director vacancies and interviews were due to take place the following week.

4.2 **Action 12:** Mrs Ros Gray confirmed that following review by the Clinical Governance Committee an annual report would be submitted to the Board on GP complaints.

The **BOARD** noted the action tracker.

## **5. Board Clinical Governance & Quality Update**

Dr Cliff Sharp gave an overview of the content of the report and highlighted several key elements including: reporting to Health Improvement Scotland (HIS) on the Scottish Patient Safety Programme (SPSP) activities; reconfiguration of leadership walkrounds; focused on daily ward measures; pressure ulcers; neonatal deaths; smoking during pregnancy; effectiveness of systems and processes; diabetes; research and research governance; expiration of clinical documents; complaints and compliments; Ombudsman report; Care Opinion; patient flow; and volunteering.

Dr Sharp further spoke of GP complaints and advised that there had been 94 complaints for the period 2016/17 and 84 had been responded to within appropriate timescales. In regard to Dentists there had been 6 complaints received with 5 responded to within appropriate timescales. In regard to themes over half of GP complaints were in relation to staff comments and attitude and the quality of advice and

treatment. Dr Sharp was keen that the Cluster Quality Leads would take interest in GP complaints and ensure the provision of high quality responses.

The Chair noted that the organisation was back on track to exceed the Emergency Access 4 hour standard that month.

Further discussion concentrated on: documentation completion rates; redesign and simplification of documentation to enable completion; compliments and commendations; raising awareness of Care Opinion; Dr Lynn McCallam, Acute Physician championing Care Opinion in NHS Borders; and responders to care opinion are those staff at the point of service delivery, responding in a real time and personalised way.

The **BOARD** noted the report.

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

Mr Sam Whiting gave an overview of the content of the report and highlighted several key elements including: the national point prevalence survey and the further local analysis that had been undertaken; context to the survey and drill down into the data; on-going process for monitoring systems and processes were maintained and monthly spot checks were being undertaken.

Discussion focused on: community infections which were outwith the control of the organisation; Scottish Government potentially looking to change the HEAT target for infection control from next year to make the target more relevant on what Health Boards can have an impact on; improvement in medical staff hand hygiene rates; cleaning compliance; training in moving from one product to another; competency assessments; and infection control spot checks and audits.

The **BOARD** noted the report.

## **7. Older People in Acute Hospitals (OPAH) Unannounced Inspection**

Mrs Claire Pearce advised the Board of the unannounced inspection that had been carried out by Healthcare Improvement Scotland Inspectors at the Borders General Hospital from 12-14 June. The inspection had focused on Food, Fluid and Nutritional Care. The Inspectors had reviewed case notes and visited staff. Feedback had been relatively positive on interaction with patients and work was being undertaken with Charge Nurses and Nurse Managers on the documentation issues that had been raised. The draft report was expected to be received on 26 July for factual accuracy checking with the final report being published on 23 August.

The **BOARD** noted the update.

## **8. NHS Borders/Scottish Borders Council Joint Winter Plan 2017/18 Update**

Mr Philip Lunts provided an overview of the report and reassured the Board that progress had been made against the actions identified. He highlighted: learning from the lessons of the previous year; working in an integrated way; close working between NHS Borders and Scottish Borders Council to enable a joint alignment of the work being undertaken.

He further advised that the Board would receive the first Draft Winter Plan for 2017/18 at its August meeting with status updates being provided to each Strategy & Performance Committee meeting.

The **BOARD** noted the update on NHS Borders/Scottish Borders Council 2017/18 Joint Winter Plan.

## **9. NHS Borders Clinical Strategy**

Mrs June Smyth provided an overview of the content of the clinical strategy and the work that had been undertaken to date.

Dr Tim Patterson commented that the clinical strategy responded to several national drivers connected to change within the health system. He thanked Hannah Fairburn and Susie Thomson along with their teams for co-ordinating the work involved and in producing the final document.

Mr David Davidson enquired about an “easy read” version of the document for the public. Mrs Smyth confirmed that one was being developed and would be available for the engagement exercises that were due to commence in August.

The Chair commented that the Board had been well sighted on the clinical strategy and various points along its formation. He suggested an annual refresh be undertaken to enable the document to remain flexible.

Mr Davidson enquired if the Health & Social Care Integration Joint Board would be given the opportunity to be taken through the clinical strategy. Dr Patterson commented that Scottish Borders Council had been heavily involved in the Older Peoples section of the strategy and he anticipated the Integration Joint Board being included in the engagement exercise. He was confident that the clinical strategy was coherent with the Integration Joint Board Strategic Plan.

The **BOARD** approved the NHS Borders Clinical Strategy.

## **10. Cyber Attack May 2017**

Mrs Jackie Stephen provided an overview of the content of the report and highlighted: the sites affected; impact on the main file server for the wider organisation; assistance from NHS Fife, NHS Lothian and Scottish Borders Council; and the commitment of the in house IT Team who worked all weekend and well into the evenings to minimise the impact of the attack on the organisation. Mrs Stephen commented that the incident had been unprecedented in its scale and she thanked all the staff affected for their co-operation.

Mrs Stephen reminded the Board of the session held in May which had focused on resilience and investment plans. She also commented that there had been another cyber attack launched which had not reached the NHS in the UK, but had reached some commercial organisations. The in house IT Team had been reviewing the intelligence of that cyber attack and staff had been alerted to additional measures that had been put in place. She assured the Board that there were no signs of that infection in NHS Borders at that time.

The Chair enquired if it was a fact that one of the in house IT Team had been the first to alert the Scottish Government to the cyber attack. Mrs Stephen confirmed that was the case, and commented that our network technician, Mr Phil Clark, had provided the intelligence to the Scottish Government,

which in turn had enabled the national network leads across Scotland to address the situation in their own Boards.

Dr Stephen Mather recorded the thanks of the Board to all the staff involved in restricting the problem.

Further discussion focused on: progressing the investment plan; looking at the storage of data; archiving data; service continuity planning; and a full review being undertaken.

The **BOARD** noted the report.

#### **11. Provision of resources to the Integration Joint Board during 2016/17**

Mrs Carol Gillie advised that the paper was a follow up to the paper that had been presented to the Board at its December meeting on the provision of resources to the Health & Social Care Integration Joint Board (IJB). The current paper was the position in relation to the resources to 31 March 2017 and completed the position for the financial year 2016/17. The appendix gave the revised figures which related to pressures in the IJB delegated functions and additional funding received by the Board that related to IJB functions. Those figures were in line with the Annual Accounts.

The **BOARD** approved the delegated resource of £123,398m, as detailed in Appendix 1, for the IJB.

The **BOARD** noted the provision of an additional £5.140m for functions delegated or set aside as per the scheme of delegation.

The **BOARD** noted that it was not the intention of the Board to seek to recover resources made available to the IJB in respect of operational overspends incurred during 2016/17.

The **BOARD** noted the requirement for revised directions from the IJB in relation to additional resources and developments noted above.

#### **12. Audit Committee**

Mr David Davidson advised that the Audit Committee had reviewed the Annual Accounts documentation for the Board to approve and recorded his thanks to Mrs Susan Swan.

The **BOARD** noted the update.

#### **13. Clinical Governance Committee**

Dr Stephen Mather advised that the previous meeting had been held on 14 June and as the Committee had evolved and the amount of business it dealt with had increased over time.

The **BOARD** noted the update.

#### **14. Public Governance Committee**

The **BOARD** noted there was no report.

## **15. Staff Governance Committee**

Mr John McLaren advised that the last meeting of the Committee had signed off the framework for the Scottish Government and he recorded his thanks to Mrs Edwina Cameron for turning that piece of work around so quickly and ensuring the timeline was met. The Staff Governance Action Plan had been agreed in its draft form. He further advised that Mrs Karen Hamilton had been appointed as co Chair of the Committee and there were 2 Non Executive member vacancies on the Committee to be filled.

The **BOARD** noted the update.

## **16. Area Clinical Forum**

Mrs Alison Wilson advised that the last meeting of the Area Clinical Forum had focused on the clinical strategy. She commented that there were challenges around professional sub groups and changes in the chairs of the groups. She highlighted that the Allied Health Professionals (AHPs) Advisory Group was currently without a lead, the Area Medical Committee was being relaunched and the Borders Area Nursing & Midwifery Advisory Committee (BANMAC) had appointed a new chair.

The **BOARD** noted the update.

## **17. Consultant Appointments**

Dr Cliff Sharp commented that the Child & Adolescent Mental Health Service had been operating over the past 18 months through the provision of locums and both he and Dr Amanda Cotton welcomed the appointments that had been made to the Mental Health service.

The Chair sought clarification that the consultant vacancy rate in NHS Borders was now below 5%. Mrs June Smyth confirmed that it was.

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

## **18. Board Committees**

The Chair advised that he had looked at the commitments of the Non Executive members of the Board in conjunction with Mr David Davidson and Miss Iris Bishop. The paper before the Board remained a work in progress as he was keen to glean the views of the Executive Team, especially in regard to membership of the Clinical Boards and the demonstrable value of inviting a Non Executive to join a meeting group or committee.

The Chair advised that the overall aim was to not overload Non Executives and to ensure only relevant meetings were accommodated by Non Executive membership. He advised that if there were any managers who wished to have a Non Executive involved in their group or committee they must submit a request through the Board Secretary, to the Chairman for final decision, and Non Executives were not to be approached individually as had occurred in the past.

The **BOARD** noted the report and that a final report would be brought to a future Board meeting.

## **19. NHS Borders Annual Report & Accounts 2016-17: External Annual Audit Report 2016-17**

Mrs Gillian Woolman advised that Audit Scotland had also been appointed as the external auditors for the Health & Social Care Integration Joint Board (IJB) and Scottish Borders Council. She advised that the Audit Scotland External Annual Report 2016-17 had been presented to the Audit Committee on 19 June 2017 where a detailed discussion had taken place. She drew the attention of the Board to the key messages on page 4 and reminded the Board of the context of the 2016/17 annual audit process, which was in relation to net expenditure of £240m of health services. She advised that it was an unqualified audit opinion in all regards. It had been a challenging process as it was the first time group accounts had included the IJB and the cyber attack had impacted on the documentation available and she appreciated the help and assistance that the organisation had provided during that period.

Mrs Woolman further highlighted: key messages on financial arrangements and financial sustainability; the challenges facing the Board in regard to cost pressures in 2016/17; recent workforce developments; assurances on governance arrangements and value for money; assurances on management arrangements; and the challenge of achieving a number of national key targets.

Mrs Carol Gillie commented that the Finance Team had worked extremely flexibly to overcome the obstacles created by the cyber attack to provide the information required. She further commented that a review of the audit process would be undertaken in October to see if there were any lessons to be learned to ensure a smoother process for next year.

Mr David Davidson commented that the Audit Committee had considered the content of the External Audit Report at the Audit Committee meeting held on 19 June and based on that the Audit Committee were in a position to recommend that the Board approve the annual report.

The **BOARD** noted the Annual Report for 2016/17 from Audit Scotland.

## **20. NHS Borders Annual Report & Accounts 2016-17: NHS Borders Annual Accounts**

Mrs Carol Gillie advised the Board that it had achieved its financial targets with an outturn of £64,000 underspend against the Revenue Resource Limit and a small underspend of £7,000 against the capital resource limit. This was an excellent achievement in a year which had been particularly challenging in light of the wider economic situation.

Mrs Gillie introduced Mrs Viv Buchan who had been instrumental in the production of the accounts.

Mrs Buchan highlighted some key points from within the Accounts including: the majority of the Board had attended a session on 14 June where the accounts were reviewed in detail and some minor changes made; the Performance Report provided summarised information on many aspects of the Boards performance in 2016-17; the report included a statement from the Chief Executive which highlighted the key achievements and the challenges ahead for the Board; the Governance statement made disclosure of a number of risks that the Board was currently facing, including those associated with the IM&T infrastructure, the impact of Delayed Discharges and the complexities of the Integration Joint Board on the planning and delivery of services.

Mrs Buchan further highlighted the Remuneration and Staff Report which disclosed the total remuneration and pension values for Board members and senior employees. She advised that the report

could often be the subject of scrutiny by the press. The key points to note within that report were the inclusion of the Workforce and Planning Director in the results for 2016-17 due to the level of influence exercised by the role to Board decision making. In regard to the total staff numbers and costs, Mrs Buchan commented that the costs had increased from £114m in 2015/16 to £120m in 2016/17 due to increased employers costs, the additional cost of parental leave and Agency and Bank costs had risen by £2m. Whole Time Equivalent (WTE) numbers had increased by 68WTE in the year of which 51WTE were permanent staff which was positive given previous recruitment problems. Average Sickness levels were 4.9% which was an increase from 4.4% in 2015/16.

Mrs Gillie commented that as Mrs Woolman had advised the Board audit certificate was unqualified in respect of the accounts presenting a true and fair view and in respect of their regularity compliance. She recorded her thanks to Mrs Woolman and her team for their support, patience and flexibility during the audit which in light of the recent cyber attack had been very challenging.

Mrs Gillie also recorded her thanks to the Finance Team who went beyond what should be expected of them working often 14 hour days and 7 day weeks to get the accounts completed in time, as well as supporting the Board to deliver on its financial targets.

Mrs Gillie also recorded her thanks to the Audit Committee for their support over the previous few weeks when they had much less time than usual to review papers.

Mr David Davidson confirmed that the Audit Committee had considered the accounts on a number of occasions during the last few weeks which concluded at the Audit Committee meeting held on 19 June. Following that review the Audit Committee was recommending that the Board approve the accounts for 2016/17.

As well as reviewing the content of the accounts the Audit Committee had received reports from all the governance committees detailing their work during the course of the year. They were included in the governance statement which was discussed and reviewed by the Audit Committee. Based on that and the process that had been followed he, as the Chair of the Audit Committee, had been content to approve the annual assurance statement, which gave the Board assurance around the current governance framework in place across the organisation and which in turn gave the Board assurance about the content of the accounts.

Mrs Gillie commented that as Mrs Jane Davidson had not been present for the meeting, she had signed the annual accounts in advance. Mrs Gillie undertook to brief Mrs Davidson on the discussion to ensure she was content for her signature to remain on the documents.

The **BOARD** adopted and approved for submission to the Scottish Government, the Annual Report and Accounts 2016/17 for the financial year ended 31 March 2017.

The **BOARD** authorised the Chief Executive to sign the Performance Report.

The **BOARD** authorised the Chief Executive to sign the Statement of Accountable Officer's responsibilities in respect of the Accounts.

The **BOARD** authorised the Chair and Director of Finance to sign the Statement of Health Board Members' responsibilities in respect of the Accounts.



The **BOARD** authorised the Chief Executive to sign the Governance Statement in respect of the Accounts.

The **BOARD** authorised the Chief Executive and Director of Finance to sign the Balance Sheet.

#### **21. NHS Borders Patient's Private Funds Annual Accounts 2016-17**

Mrs Carol Gillie introduced the Patient's Private Funds Statement for 2016/17. She advised the Board to note that the statement had been given an unqualified audit certificate by the external auditors Geoghans and the Audit Committee reviewed the statement at its meeting on 19 June and recommended the NHS Borders Board approve the statement.

The **BOARD** adopted and approved the Patient's Private Funds Statement for the financial year ended 31 March 2017.

The **BOARD** authorised the Director of Finance to sign the Patient's Private Funds Statement to certify its accuracy.

The **BOARD** authorised the Chief Executive to sign the Patient's Private Funds Statement to confirm its approval by the Board.

#### **22. NHS Borders Endowment Fund Annual Accounts 2016-17**

Mrs Carol Gillie advised the Board to note that the accounts had been given an unqualified audit certificate by the external auditors Geoghans and the Endowment Board of Trustees had approved the accounts at their meeting on the 6<sup>th</sup> June. As a corporate parent for Borders Health Board endowment funds, the International Accounting Standards 27 required the corporate parent body to produce consolidated accounts. Therefore the endowment accounts were consolidated within NHS Borders accounts.

The **BOARD** noted the Endowment Fund Annual Accounts for 216/17.

#### **23. Financial Monitoring Report for the 2 month period to 31 May 2017**

Mrs Carol Gillie reported that at the end of May, NHS Borders was reporting an overspend of £2m on revenue and break even in terms of capital. She highlighted the key reasons for the overspend which were: pressures on operational budgets: Medical staff additional costs to cover gaps; Nursing staff additional costs due to surge beds, patient acuity, vacancies and sickness; Drugs costs; Primary care prescribing costs based on estimates; and out of area treatments.

Mrs Gillie further explained that although £6.5m of efficiency targets had been delegated to operational services only £200k of confirmed schemes had been actioned against specific operational budgets in the first two months of the financial year, which was creating an operational pressure.

The Chair sought assurance that corrective action was being taken to address the financial pressures and ensure efficiency schemes delivered. Mrs Gillie advised that corrective action was being taken and dialogue would continue with the Board to provide that assurance.

Mr David Davidson enquired about staffing levels within the Finance Department. Mrs Gillie advised that like other support services some 28% of admin staff had been removed from the department and the small senior team were focused on assisting clinical services to deliver on the financial position. She did intend to review the Finance Department structure.

Further discussion focused on: sickness absence impact on low nurse staffing levels at night; reviewing rotas; opening surge beds; anticipating gaps and planning accordingly; reviewing action plans, milestones and financial plans in nursing; medical staffing and the use of locums; middle grade rotas and locum costs; drug budgets; realistic medicine and polypharmacy; overspend linked to unplanned activity (UNPACs); overspend linked to extra contractual referrals (ECRs) particularly those with challenging learning disabilities behaviours and those that had come through the criminal justice system; ensuring the spectrum of care is right for orthopaedic patients by utilising allied health professionals (AHPs) earlier in the patient journey; clinical productivity projects; and engagement with staff and the Area Partnership Forum.

Dr Stephen Mather enquired if the point had been reached were there were no more efficiencies to be made? Mrs Gillie advised that she believed there was still more that could be achieved through the redesign of services however it would take time to bring to fruition.

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

#### **24. Capital Plan Update**

Mrs Carol Gillie provided the Board with the first of the two detailed capital reports that the Board received twice per year. She reminded the Board that it had already agreed a draft capital plan as part of the Local Delivery Plan at its meeting in April and there had been a number of changes to the capital plan since then. Under the capital resources section of the report she highlighted that discussions were on-going with the Scottish Government on the identification of an additional £2m of resources to support some of the challenges faced in IM&T. If agreed that would increase the level of capital resources to £7.7m for 2017/18.

Mrs Gillie commented that the paper summarised: the spend to the end of May which had been limited to date; the forecast year end spend; the key activities linked to capital in the first quarter of the new financial year; and what was planned for the second quarter of the year. She highlighted that a key point for the Board to note was the £2m of resources which were earmarked for theatre ventilation and remained uncommitted. She recommended that the Board await the outcome of the discussion with the Scottish Government on IM&T and how the capital and revenue plans would progress before making a final decision on how that funding should be utilised.

The **BOARD** noted the update provided on the current year capital plan.

The **BOARD** noted the indicative capital resources and commitments for 2018/19-2021/22.

#### **25. NHS Borders Performance Scorecard**

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

Dr Stephen Mather suggested it was important that the Board acknowledge the good performance within the report and he congratulated the Executive Team on the continued good performance in regard to the treatment of cancer within 31 days.

Dr Mather then highlighted the waiting times for outpatients and suggested many people could cope with a delay in treatment provided they had an early diagnosis. Mrs Smyth commented that services were taking forward operational actions looking at the whole patient pathway which was not just limited to the acute hospital, and she anticipated those waiting times would reduce following that redesign.

Further discussion focused on: Allied Health Professionals (AHPs) waiting times and their engagement with the clinical productivity programme; a new musculoskeletal hub being set up in September; stranded patients in the acute hospital; the transformational programme and spectrum of care; supporting the clinical strategy and more out of hospital care; moving resource into the community; redesigning pathways and a fundamental rethink over the medium to longer term; and introducing programme of transparency across the acute hospital to show how many patients seen and reviewed across the past year; and changing models of resource.

The **BOARD** noted the March 2017 Performance Scorecard.

## **26. Managing Our Performance End of Year Report 2016/17**

Mrs June Smyth gave an overview of the content of the report. She highlighted the inclusion of a comparison table for NHS Borders to be benchmarked to the wider NHS Boards in Scotland.

The **BOARD** noted the 2016/17 End of Year Managing Our Performance Report.

## **27. Chair and Non Executive Directors Report**

The Chair referred to the launch of Global Citizenship at the Royal College of Physicians and Surgeons of Glasgow (RCPSG) which he had participated in and the Executive Summary document was tabled for Board members information. He advised that NHS Borders had been highlighted at the launch due to its twinning arrangements with St Francis Hospital, Zambia.

The **BOARD** noted the report.

## **28. Board Executive Team Report**

Dr Tim Patterson highlighted that a patch was being developed for the flu vaccination.

Dr Cliff Sharp highlighted that the Area Medical Committee was being relaunched.

The **BOARD** noted the report.

## **29. Statutory and Other Committee Minutes**

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

**30. Any Other Business**

There was none.

**31. Date and Time of next meeting**

The Chair confirmed that the next meeting of Borders NHS Board would take place on Thursday 3 August 2017 at 10.00am in the Board Room, Newstead.

*The meeting concluded at 12.35.*



*Signature* .....

*Chair*