

Minutes of a meeting of the **Borders NHS Board** held on Thursday 2 July 2020 at 9.00am via MS Teams.

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
- Mr J McLaren, Non Executive
- Mrs A Wilson, Non Executive
- Cllr D Parker, Non Executive
- Mr R Roberts, Chief Executive
- Mr A Bone, Director of Finance
- Mrs N Berry, Director of Nursing, Midwifery & Acute Services
- Dr C Sharp, Medical Director
- 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 A Carter, Director of Workforce
- Dr A Cotton, Associate Medical Director
- Dr J Bennison, Associate Medical Director
- Mrs L Jones, Head of Clinical Governance & Quality
- Mrs C Oliver, Communications Manager
- Mr B Brackenridge, Non Executive elect
- Mr G Clinkscale, Associate Director of Acute Services
- Mrs S Errington, Head of Planning and Performance

1. Apologies and Announcements

Apologies had been received from Mrs Annabel Howell, Associate Medical Director and Mr Sam Whiting, Infection Control Manager.

The Chair confirmed the meeting was quorate.

The Chair welcomed a range of attendees to the meeting.

The Chair welcomed Mr Bill Brackenridge to the meeting. Mr Brackenridge would be co-opted to the Board to fill the vacant Non Executive Director post whilst the interview process remained postponed.

The Chair reminded the Board that a series of questions and answers on the Board papers had been provided (Board Q&A) and their acceptance would be sought at each item on the agenda along with any further questions.

2. Declarations of Interest

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.

Mrs Sonya Lam declared that her partner had been appointed as a temporary specialist adviser to the Scottish Government.

The **BOARD** noted the verbal and the written declaration made by Mrs Sonya Lam contained within the Board Q&A document.

The **BOARD** noted the verbal declaration by Mr Malcolm Dickson.

3. Minutes of Previous Meeting

The minutes of the previous meeting of the Borders NHS Board held on 4 June 2020 were approved with the inclusion of the amendment in the Board Q&A document.

4. Matters Arising

4.1 Minute 8 COVID-19 Test and Protect: The Chair drew the attention of the Board to the update within the Board Q&A document.

4.2 Board Q&A Day of Care Audit: Mrs Sonya Lam enquired if there was a timescale to repeat the Day of Care Audit (DoCA). Mr Rob McCulloch-Graham commented that given COVID-19 it was likely that a table top exercise would be undertaken before the end of December 2020.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the action tracker.

5. COVID-19 Re-Mobilisation Plan (Recovery) Update

Mr Ralph Roberts introduced the Re-mobilisation plan and reminded the Board that it had seen earlier versions of the document.

Mrs June Smyth provided a brief overview of the content and commented that further guidance was expected from the Scottish Government. The framework had been shared with the Board members the previous day and had been developed based on the requirements set out by the Scottish Government as well as what the individual business units had said they wished to do in terms of timings for their recovery and remobilisation of services. She highlighted that: staff were being encouraged to take annual leave; mutual aid discussions were progressing regionally; dialogue remained on-going with Scottish Borders Council colleagues in regard to a desk top exercise for education services; and the potential to do desk top exercises for NHS Borders services.

Mrs Fiona Sandford commented that it had been ambitious in the first draft to surmise that all routine activity would be back to normal in July. Mr Gareth Clinkscale agreed that it had been ambitious.

Mrs Sandford enquired about the difference in a Green and Amber RAG status from the patient point of view and how that was communicated. Mr Clinkscale commented that in terms of the Green and Amber RAG status that had been taken from the Scottish Government Cancer Framework document. The interpretation was that a Green status was the achievement of delivering all cancer elective care on a separate site to any COVID-19 activity. As NHS Borders had one main acute hospital that was unachievable and an Amber RAG status was provide as the service was delivered through separate pathways on the same site.

Further discussion focused on: additional resource requirements in terms of staffing and space; development of a clinical prioritization model; and separate pathways involved separate ward areas to ensure elective patients were not mixed with non elective patients.

Mr Malcolm Dickson enquired if the Community Hubs were the same as the Locality Hubs. Mr Rob McCulloch-Graham confirmed that they were the same Hubs with a wider remit of services included.

Mr Dickson enquired about GP services and the potential for an increase in transmission once services were fully operational with more face to face consultations taking place. Mr McCulloch-Graham commented that the main issue for GPs was that every procedure took twice as long given the need to don and doff PPE and an interface group had been set up between acute and GPs to work through the demands from acute to primary care and how they could be minimised. It was also hoped that the COVID-19 Assessment Centre would be continued and used as a triage centre.

Dr Cliff Sharp commented that Near Me and Telephone triage remained as the first line of approach to GP Practices and Health Centres. He further commented that in regard to social distancing, it remained a challenge for several practices and health centres given some premises were less modern and spacious than others.

Mr McCulloch-Graham advised the Board that a working group had been set up to look at how the winter flu vaccination would be delivered, given the constraints on GPs and an anticipated increase in demand.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the update on the COVID-19 Re-mobilisation (Recovery) Plan, including the underpinning programme plan and progress to date.

6. COVID-19 Board Update Report

Mrs Nicky Berry introduced the COVID-19 data focused report.

Mrs Berry provided an update in regard to Care Homes and advised that an analysis of patients discharged from the Borders General Hospital and Community Hospitals to Care Homes had been undertaken. She assured the Board that no patients had been transferred into Care Homes with COVID-19. She further advised that she had undertaken 21 actual visits to Care Homes and there were 3 virtual visits planned. Feedback to date from those visits indicated good delivery of care, no issues

with PPE, good communication between residents and families and the input of Mark Clark and the Control of Infection in the Community Service. Some recurring themes were in regard to building the GP and District Nurse relationship with Care Homes and those themes would be discussed at the newly formed monthly improvement forum with SBCares, Care Homes and the Community Liaison Team across social care. Mr Rob McCulloch-Graham commented that there were regular weekly meetings held with all 17 Care Homes in the Borders which had much improved relationships across the whole sector.

Mrs Berry further commented that there had been one unannounced inspection of a Care Home which had not been in regard to nursing concerns, but had been about management. She confirmed that there were no concerns raised following the visit.

Mr Ralph Roberts advised the Board that Health Improvement Scotland would begin to reinstate their unannounced visiting programme of Community Hospitals from the following week. Mrs Berry assured the Board that she and colleagues had already undertaken informal visits to the four community hospitals and action plans remained in place for any unannounced inspections. She further commented that an announced inspection had taken place the previous year with excellent feedback having been received.

Mr John McLaren sought clarification on whether the criteria for the unannounced inspections had been revised as a consequence of COVID-19. Mrs Berry advised that the methodology remained the same.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the report.

7. Organisational Objectives 2020-2023

Mr Ralph Roberts provided an overview of the background to the refresh of the Organisational Objectives and the opportunity to further review them in the light of COVID-19. He highlighted that under the culture section some additional bullet points had been added in regard to ethnicity and beliefs.

Mrs Clare Oliver then set out the process undertaken and feedback received to achieve the revised Organisational Objectives. She highlighted that Mr Andy Carter was testing the ethnicity and beliefs bullet points with relevant staff to ensure they were meaningful and appropriate.

In regard to Question 25 on the Board Q&A document, Mrs Oliver sought further views from Board members. Comments made included: support; well articulated message; what was measured in terms of how well the organisation performed given the challenges around flow; potentially increased options around individual patient care should enable a change in the balance of whether an individual needed to come into hospital and how long they stayed; any objective should have a measurement against which progress could be monitored; patient flow was measured through the length of stay data; to enable an alignment of strategic plans for health and the local authority there will be the potential to revisit the objectives over the coming 12-18 months; and early discussions had already commenced on the potential for a joint capital strategy in the future.

In regard to Question 26 on the Board Q&A document, Mrs Oliver sought further views from Board members. Comments made included: and adding an additional bullet point about NHS Borders being a place of excellence for training and development; building a culture of continuous learning and improvement for all staff.

Mrs June Smyth advised that once Board approval had been granted, the objectives roll out plan would be progressed which would involve engagement with partners.

Mr Malcolm Dickson sought clarity that the bullet points in red were about equalities in general and not specifically about Black, Asian and Minority Ethnic people (BAME). Mr Roberts clarified that it was the intention to be as inclusive as possible and Mr Carter commented that he had emailed 75 colleagues who had self identified as belonging to BAME groups and of those 10 responses had been received. It was important to be ensure any wording was not discriminatory in any context ie, disability or race.

The **BOARD** noted the questions and answers provided.

The **BOARD** agreed the organisational objectives, priorities and statements of intent subject to final wording of the two identified bullet points

The **BOARD** noted the next steps outlined in the report

8. Financial Turnaround Programme Update

Mrs June Smyth provided an overview of the content of the report and she advised that the turnaround programme had been suspended as a consequence of COVID-19. Mrs Smyth advised that the report portrayed what had been achieved, what had been put on hold and that an assessment would be undertaken over the summer with a view to the Resources & Performance Committee receiving a report in September on next steps.

Mrs Fiona Sandford enquired if there was the possibility of adding in the aspirations for any savings through innovations that had been brought about by COVID-19. Mrs Smyth confirmed that the assessment would look at that, and she was already aware of some items that had not progressed to a mandate stage, with the onset of COVID-19, had actually been put in place and would have created savings.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the report.

9. Finance Report for the period to the end of May 2020

Mr Andrew Bone reported a £2.44m overspend position at the end of May and advised of the distinction between core and COVID-19 overspends. He suggested some funding would be received from the Scottish Government against the COVID-19 spend however that had not yet been clarified.

Mr Bone drew the attention of the Board to the underspend of business unit operational performance as a consequence of COVID-19 and the potential for new ways of working and savings to be realised. He assured the Board that the Scottish Government acknowledged that the financial performance of NHS

Borders had been impacted by COVID-19 and an allocation would be forthcoming, however there were two separate processes being undertaken to review COVID-19 expenditure prior to allocations being released.

Mr Malcolm Dickson commented that he would welcome a look at the COVID-19 expenditure profile at some point. Mr Bone confirmed that a report was being prepared on the first quarter for the Resources & Performance Committee meeting in September.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the 2020/21 Finance Performance Report for the period to 31st May 2020.

The **BOARD** took moderate assurance that the board's financial performance, net of COVID-19 related costs, does not present any additional financial risk beyond that described in the financial plan.

The **BOARD** noted the planned timeline for report out of the Quarterly review and year end outturn from the 30th June 2020 financial position.

10. Managing Our Performance End of Year Report 2019/20

Mrs June Smyth presented the abridged report. She advised that it contained a collation of performance against the key standards that the organisation was required to report on for the financial year 2019/20. Mrs Smyth drew the attention of the Board to page 19 which included information against the Scottish average and she commented that despite being in financial turnaround, performance had remained good with the organisation being above average for 10 standards and aligned for 2 standards.

The Chair enquired if the Board could receive an overview of the impact of COVID-19 on the March to May performance against all standards reported on. Mrs Smyth advised that she would ensure that analysis was included in the next monthly performance report.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the 2019/20 End of Year Managing Our Performance Report.

11. Performance Briefing

Mrs June Smyth provided an overview of the content of the report. She advised that as of 2 July the Delayed Discharge position was 25. It equated to 1 in acute, 5 in mental health, 19 in community hospitals and of those 25, 5 were complex cases. Mrs Nicky Berry confirmed that the single delayed discharge in the Borders General Hospital (BGH) would be discharged later that day. She also confirmed that the Integrated Huddle that had been embedded in the BGH was being adapted and rolled out across the community hospitals and mental health.

Dr Amanda Cotton advised that the delayed discharges in mental health had risen to 7 with 2 available beds within the service.

Further discussion focused on: replication of the integrated huddle from acute to the community hospitals; guardianship orders and the positive relationship with the Sheriffs locally; provision of

resource at Upper Deanfield was not successful; high end DME capacity is required; looking to extend care provision with expertise around dementia; lessons learning from provision of Upper Deanfield; reduction in the mental health service footprint has lead to an over occupancy of Melburn Lodge; and nationally there was discussion about significant changes to how Adults with Incapacity (Scotland) Act 2000, Section 13ZA would operate in emergency measures.

The Chair asked that the Board be given a summarised picture of delayed discharges across the system and Mr Ralph Roberts suggested the Integration Joint Board might wish to pull that together and present it to the Health Board. Cllr David Parker echoed Mr Roberts' suggestion and commented that the Integration Joint Board would pick up the work on delayed discharges and present it to the Health Board in due course.

The **BOARD** noted the questions and answers provided.

The **BOARD** noted the Performance Briefing for May 2020.

The **BOARD** agreed that the Integration Joint Board would look into the position of delayed discharges across the system and present to the Health Board in due course.

12. Temporary Governance Arrangements

The Chair welcomed the move to more normal governance arrangements.

Mr Malcolm Dickson enquired about the ability of the public to access the meetings. Miss Iris Bishop advised that work was underway to look at various different models of involving the public in the meetings, either via MS Teams, Teams Live event, recording and webcasting the meetings. She had however been advised to wait until the full Office365 package was available.

Cllr David Parker advised that Scottish Borders Council had now held a number of meetings through MS Teams broadcast to the public without them being able to contribute to the meeting and he confirmed the need to wait for the full roll out of Office365 before moving to that position.

The Chair enquired of the timeline for the full roll out of Office365 to the organisation and Mrs June Smyth commented that it had been pushed back to the autumn given COVID-19.

The **BOARD** noted the questions and answers provided.

The **BOARD** approved a move back to normal governance arrangements as far as is practicable with effect from 1 August 2020.

The **BOARD** approved a return to the substantive arrangements at Section A, Sub Section 2, Section 1.3 Calling and Notice of Meetings, of the Code of Corporate Governance.

The **BOARD** noted the next cycle of meetings of Borders NHS Board would be held on 1 October 2020 and 3 December 2020 as agreed on 7 November 2019 at the Board Development session.

The **BOARD** agreed to cancel the Board meeting scheduled for 1 October 2020 and bring it forward to 24 September 2020 in order to formally approve the NHS Borders Annual Report and Accounts by the Scottish Government timeline of 30 September 2020.

The **BOARD** noted the inaugural meeting of the Resources & Performance Committee will be held on 3 September 2020 with its next meeting held on 5 November 2020 as agreed on 7 November 2019 at the Board Development session.

The **BOARD** approved a return to the substantive arrangements at Section A, Sub Section 2, Section 16.6 Minutes, Agendas and papers and Section 10.4 Submission of Reports, of the Code of Corporate Governance.

The **BOARD** agreed to continue to specifically suspend Section A, Sub Section 2, Section 14.1 Admission of public and press of the Code of Corporate Governance.

The **BOARD** formally approved the publication of the agenda and papers pack 3 days in advance of the meeting on its website.

The **BOARD** agreed to continue to specifically suspend Section A, Sub Section 2, Section 5.1 Quorum of the Code of Corporate Governance.

The **BOARD** noted that the Code of Corporate Governance Steering Group will meet in July to consider whether any of the temporary revisions made to the Code of Corporate Governance should be adopted as substantive changes for the next refresh of the Code of Corporate Governance.

13. Audit Committee Update

The **BOARD** noted the update.

14. Audit Committee Minutes: 23.03.20

The **BOARD** noted the minutes.

15. Area Clinical Forum Update

Mr Malcolm Dickson enquired about progress in addressing the communications issues between GPs and acute consultants as noted in the update. Dr Cliff Sharp commented that the new leadership group in Primary Care had developed and put in place an interface group populated by members of the GP Executive and secondary care clinicians. The group discussed issues of common interest and tension between both parties.

In regard to the reference to quality of PPE, Mr Andrew Bone reminded the Board that PPE was procured through the national supply route, which was UK wide, and the only way to influence that would be to provide feedback through the supply channel contacts. Mrs Nicky Berry commented that medical staff had provided feedback on the quality of the masks and that feedback had been escalated to Mr Sam Whiting, Infection Control Manger.

The **BOARD** noted the update.

16. Area Clinical Forum Annual Report 2019/20

The **BOARD** noted the Annual Report.

17. Area Clinical Forum Minutes: 03.03.20

The **BOARD** noted the minutes.

18. Any Other Business

Dr Stephen Mather offered the thanks of the Board to Miss Iris Bishop for collating the Board Q&A and releasing it outwith normal office hours. The Chair commented that the provision of the Board Q&A worked very well and she also thanked the Executive Team for their input to it.

19. Date and Time of next meeting

The Chair confirmed that the next meeting of Borders NHS Board would take place on Thursday Thursday, 30 July 2020 at 9.00am via Microsoft Teams.

The meeting concluded at 10.45am.

Signature:
Chair

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