

# NHS Borders Enabling Strategies 2025 - 2030



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### **Enabling Strategies**

Our Clinical Strategy sets out how we will transform care across life stages, improve outcomes, and deliver services closer to home. Achieving this vision requires more than clinical redesign—it depends on the foundations that enable change. These are our Enabling Strategies, which provide the tools, capabilities, and culture to make our ambitions real.

Our enabling strategies remain under development as we continue to assess the priorities set out in the Clinical Strategy to ensure full alignment. While some enablers are incorporated within the current strategic framework, the final and complete set of enabling strategies will be brought forward for Board consideration in April 2026. This phased approach ensures that supporting strategies are robust, integrated, and responsive to the organisation's long-term objectives.







# NHS Borders Partnerships Enabling Strategy



## **Purpose**

Partnership working is when two or more organisations or groups collaborate to achieve a common goal more effectively than they could alone. It involves sharing resources, responsibilities, and expertise, often creating new structures or processes to achieve mutually beneficial outcomes for both the partners and the communities they serve.



#### **Our True North Statement**

Our mission is to enable our communities to keep themselves well, and work towards long-term health equity for our communities. When our communities need us, we are easily accessible, delivering compassionate, efficient, high-quality, person-centred care at the right time and place.

This strategy has been developed to enable NHS Borders Organisational and Clinical Strategies, and sits as one of a suite of enabling strategies to deliver our mission, as defined in NHS Borders True North Statement.

At the most simple level, care is delivered in partnership. Our approach is rooted in listening, understanding, and valuing the perspectives of others, ensuring that collaboration is built on mutual respect and shared insight. The breadth of Partners that we work with became apparent when engaging with colleagues and Partners to write this strategy. For the purposes of our strategy the terms 'Partner' and 'Partnerships' include, but are not limited to; NHS Boards, Scottish Borders Council, Scottish Borders Integrated Joint Board, universities, colleges, third sector organisations, Police Scotland, independent care providers (residential care, home care and specialist support), local communities and service users, healthcare staff and professional bodies.

Partnerships span strategic, operational, educational and improvement spaces.

NHS Borders Partnerships Strategy sets our intention to;

- Foster a collaborative and inclusive culture across all partner organisations
- Maximise the impact of shared resources through coordinated planning and transparent governance
- Ensure work with partners effectively addresses key priorities for our population
- Strengthen integrated locality working through structured collaboration and system alignment



# **Context and Background**

#### **Anchor Institution**

As a major employer and Anchor Institution in the Scottish Borders, NHS Borders takes our responsibilities seriously. We aim to be a great employer, support the local economy and offer services that are efficient and convenient for patients. NHS Borders also plays a key role in helping staff, partners and the public achieve better health outcomes, while promoting inclusion and raising aspirations in our region.

#### **Strategic Context**

The Partnerships Strategy is one of nine enabling strategies to support the implementation of our Organisational and Clinical Strategies. It explains how NHS Borders will work with others to deliver high-quality care. Partnerships are part of everyday work for staff, and this strategy shows why they matter: helping improve services, strengthen community impact and support financial sustainability. It also encourages shared working, resources and ideas to achieve common goals.

#### **Local Context**

Effective engagement and the active participation of people is essential to ensure that health and social care services are fit for purpose and lead to better outcomes for people. In January 2025 NHS Borders undertook an extensive engagement exercise with our staff and communities to inform our Organisational Strategy 2025-2030. What we heard informed the development of our True North Statement and our Partner Organisations Strategic Goal, to which this Partnerships Strategy is aligned. Local context is also set out in our NHS Borders 2024 - 2030 health inequalities strategy.

#### **National Context**

NHS Borders Partnerships Strategy is written within the context of the Scottish Government's **Public Service Reform Strategy**.

The aim is to work together more effectively, focus resources on frontline services, and make services more efficient, joined up and preventative.



# **Informing Our Strategy**

Partners and staff agree that strong relationships and shared goals are the foundation of effective partnership working; valuing trust, respect and regular communication.

#### **Key Priorities and Strengths**

- · Address service gaps and improve communication
- · Deliver more community-based care
- Maintain strong partnerships and staff development
- · Build on trust, shared goals, and flexible engagement

#### **Opportunities and Actions**

- Unified communications and clear points of contact
- Secondments and shared resources
- Formal agreements and funding alignment
- Greater inclusion
- Better measurement of success and celebration of achievements

#### **Areas for Improvement**

- Break down organisational silos and align strategies
- Improve clarity and consistency in communication
- Formalise structures and governance
- Create more opportunities for joint sessions and cross-partner training
- · Strengthen links with community, third sector, and neighbouring health boards

#### **Desired Outcomes**

- · Reduce health inequalities
- Achieve population-level improvements
- Improve workforce recruitment and retention
- · Make better use of resources through shared services and coordination



#### **Objective 1: Culture and Ways of Working**

Foster a collaborative and inclusive culture across all partner organisations.

#### What we will do:

Promote trust, respect, and shared goals through regular joint sessions and co-productive initiatives across our range of partners

Encourage flexible engagement formats and digital platforms to support diverse participation and joint service delivery

Create development opportunities for staff to train together and expand networks

Recognise and celebrate partnership successes to boost morale and reinforce positive behaviours

Enhance relationships with academic partners to support workforce sustainability

#### How we will do it:

Engage Partners on our Values and Behaviours Framework and agree ways of working

Explore best practice in engagement formats and methods and agree a standard process of engagement across Partnerships

Expand our emerging 'celebrating success' approach across Partnerships

Audit current joint development and training opportunities and identify gaps to pursue

# How success and impact will be measured:

Issue quarterly updates on Partnerships successes

Number of new joint development and training opportunities identified



#### **Objective 2: Involving Patients and Public**

Deliver person-centred decision making and care by working with and embedding the voices of people who have experienced our services, the wider public and partners.

#### What we will do:

Reintroduce a robust volunteering programme within NHS Borders and maximise their potential in supporting public involvement

Widen the network of equality-focused groups and strengthen relationships to ensure inclusive service design

Use shared data and feedback to continuously improve patient outcomes and experience

Undertake a review of the public involvement resource model

Ensure that local involvement activity is aligned with the new 'Scottish Approach to Change' and 'Getting it right for everyone' (GIRFE) principles

Plan for the upcoming review of the 'Involving People Framework' ensuring relevant stakeholders (internal and external) are involved

#### How we will do it:

Undertake the second round of 'continued two-way conversations with our staff, communities and partners' (strategic objective from Organisational Strategy) in spring 2026

Maximise volunteer / public member involvement

Work with the Scottish Borders Integrated Joint Board to support public engagement in the setting of directions

# How success and impact will be measured:

Publish the 'Equal Experts' charter as an addendum to the Involving People Framework by April 2026

Publish 'Feedback from staff and communities' and associated actions in Summer 2026 following two-way conversations



#### **Objective 3: Resources and Value**

Maximise the impact of shared resources through coordinated planning and transparent governance.

#### What we will do:

Develop shared service models and joint funding strategies to reduce duplication and increase resilience

Create and maintain resource directory to improve visibility and access

Formalise relationships with Service Level Agreements and shared metrics to track value and outcomes, including commissioned services

Seek out new relationships with business partners to identify shared priorities and joint development opportunities

#### How we will do it:

Identify key opportunities for shared service models and develop shared plans to delivery

Increase Board oversight of work to develop shared service models and delivery

Agree and issue staff guidance on Service Level Agreements Develop a resource directory

# How success and impact will be measured:

Number of shared service models and joint funding strategies in place

Reduction in cost base of shared services

Data on resource directory usage



#### **Objective 4: Population Based Planning**

Develop explicit partnership approaches and strategies to address shared 'wicked issues'

#### What we will do:

Using the 'life stage' approach, work with partners to identify shared wicked issues and develop joint delivery plans (e.g. obesity and poverty)

Develop a single truth understanding of population need through a shared data approach with key partners

Improve organisational oversight and support for shared governance arrangements

Engage with equality-focused groups to ensure inclusive service design

Use shared data and feedback to continuously improve patient outcomes and experience

#### How we will do it:

Develop joint delivery plans with partners, with clear agreed goals, across each of the life stages

Develop shared datasets and needs assessments with Partners that describe delivery across life stages

Assign an executive lead for Children and Young Person's strategy and partnership working

# How success and impact will be measured:

Improvement in performance metrics aligned to key wicked issues (for example health inequalities or patient flow)

Delivery plans developed in partnership across each of the life stages



#### **Objective 5: Locality Based Care**

Strengthen integrated locality working through structured collaboration and system alignment.

#### What we will do:

Strengthen community-based care through partnerships with local organisations

Develop co-terminus environments and shared working spaces for cross-organisational teams working with the same populations

Improve engagement with delivery partners

Establish service-level named contacts and joint operational plans to support seamless service delivery

#### How we will do it:

Develop locality working and engagement into locality huddles

Increase Home First and Hospital @ Home engagement at a locality level

Engage with locality staff and partners to identify priority areas for shared working and match them with available space

Create spaces for secondary care clinicians in the community to support joint working

Re-establish the integrated workforce planning group

(People Strategy co-dependency)

Work with the Scottish Borders Integrated Joint Board to support commissioning of integrated services

# How success and impact will be measured:

Admissions avoided

Increase in number of shared working environments

Satisfaction survey of staff working in shared working environments





# NHS Borders Quality Enabling Strategy



## Introduction

#### **Purpose**

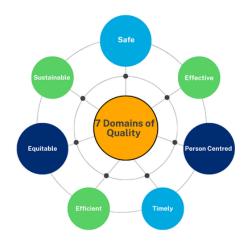
The purpose of the Quality Strategy is to support our staff and teams to do the very best for their patients and colleagues everyday. To do this we need to create an environment where improvement is part of day to day practice, fostering autonomy, accountability, and confidence within teams. By aligning improvement efforts with organisational priorities, we will strengthen our ability to meet the needs of our communities efficiently and effectively across the seven dimensions of quality.

#### **Context and Background**

The organisation operates in a complex and evolving healthcare environment, facing increasing challenges, rising costs and growing demands on services. To respond effectively, we must embrace improvement as a core part of our organisational culture and focus on:

- Designing reliable systems and processes to support delivery of care across the seven domains of quality.
- Enhancing capability through the development of leadership skills as well as the technical skills of quality improvement.
- Establishing governance and delivery structures to review progress, maintain consistency and bring openness and transparency to our improvement work.
- Understanding human behaviour to reduce waste and variation creating safe, efficient and sustainable practices.

Our staff are our greatest asset, and we are committed to creating conditions where they can excel and maintain high standards. Through our Social Compact, we acknowledge the need for improvement and commit to creating space and capability for staff to innovate and act on opportunities for better care.







#### Introduction

#### **Our Improvement Approach**

Our improvement approach, set out in the NHS Borders Organisational Strategy, is designed to create the conditions for every member of staff to deliver the best possible outcomes for patients and experience fulfilment in their work. It is underpinned by a clear understanding of human behaviour and built on three essential elements; everyone at NHS Borders should know what's expected of them, receive feedback on their performance and importantly know how to access the tools to improve the gap.

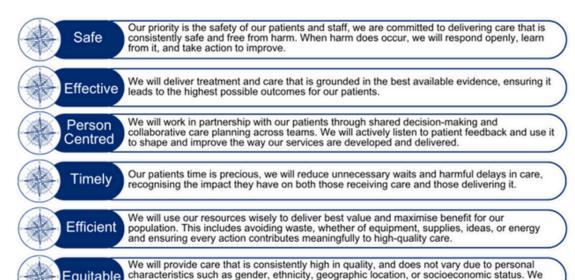
We will use a structured framework under the NHS Borders Quality Management System (QMS) to bring together the processes, standards, and behaviours needed to ensure that the organisation consistently delivers high-quality services and outcomes. This will provide a systematic approach to planning, implementing, monitoring, and improving quality across all areas.



#### **Strategic Principles**

A True North statement defines our core purpose and provides a consistent direction for all decision-making. They serve as enduring principles that align stakeholders with our organisational goals and guide us toward achieving our strategic ambitions. These statements, spanning the 7 dimensions of quality, form the foundation from which we will develop an annual action plan focused on continuous improvement:

To bring our Quality Strategy to life, we have identified five key objectives that translate our vision into practical actions. Each objective reflects a core element of our commitment to delivering our true north principles across the 7 dimensions of quality.



are committed to equity in access, experience, and outcomes for all.

and the role we play in our local community as an anchor institution.

We will develop our services with a focus on safeguarding resources for future generations, taking responsible decisions on the allocation of resources, our impact on the environment



#### **Objective 1 - Agency**

Empower and equip everyone working for NHS Borders to make small changes which improve the work environment and the care delivered to patients, building ownership and participation. This will be enabled by ensuring there are effective systems and processes in place to support the delivery of care across the 7 domains of quality, underpinned by effective clinical education and professional development with a focus on human factors

- Design a strategy deployment approach as part of quality planning which connects strategy to frontline Quality Improvement (QI) plans.
- Establish a QI Academy offering a range of technical skills training to all staff.
- Provide a consistent suite of documentation and tools for staff to use in day to day QI and quality planning.
- Embed a data standard and provide support to access, understand and use data to drive improvement.
- Provide quality coaching to consolidate technical skills training and embed QI practice.
- Design and test a consistent visual management approach and way of working to support its use.
- Test approaches to protecting time in people's roles to deliver QI.
- Build an approach to visible leadership which seeks to enquire, understand and enable frontline improvement.
- Establish an innovation and improvement project pipeline and fund to enable the design, testing, assessment and spread.
- Refresh the NHS Borders Quality Management System to provide a systematic approach to planning, implementing, monitoring, and improving
  quality across all areas.
- Embed the Scottish Approach to Service Change in our improvement and transformation work.
- Refocus the governance structure for key programmes of work ensuring alignment with the quality management approach.
- Enhance clinical and non-clinical leadership to each workstream of key programmes ensuring effective systems and processes are in place with professional and technical advice and oversight.
- Continue to strengthen the range of clinical and non-clinical education offered across NHS Borders.
- Build a human factors approach across the organisation ensuring that systems, processes, and environments are designed with a deep understanding of how people interact with them and recognition of human error.



#### **Objective 2 - Curiosity**

Using our intelligence effectively build a culture of enquiry which seeks to understand how care is being delivered, celebrate success and identify areas for continual improvement.

- Embed a robust care assurance process through implementation of NHS Borders Care Assurance and Delivery Programme within inpatient wards, emergency department, theatres, outpatient and day case procedure areas.
- Design an NHS Borders care assurance system appropriate for community teams, beginning with the development of data for their improvement and defining clinical standards.
- Maintain a strong focus on how we practice Infection Prevention and Control and Health and Safety and consider the healthcare built environment.
- Scope out an accreditation and recognition system.
- Introduce a system for sharing learning and celebrating success where peers can come together to provide mutual support and encouragement, enabling lessons learned and success to be shared across the organisation.
- Embed the care assurance system as a core element of professional roles, ensuring a strong voice patients and staff which is integrated into the clinical governance system.
- Ensure all areas have access to quality data to support them in delivering effective care and continual improvement.
- Build digital dashboards with real-time data feeds for key quality indicators, accessible to teams and Board committees.
- Ensure data is effectively embedded in operational, decision making and assurance groups.
- Provide training on interpreting data and using SPC (Statistical Process Control) for continual improvement, decision-making and assurance.
- Embed robust demand, capacity, activity and queue data to facilitate effective use of resources.
- Bring a focus to understanding inequalities through our data.



#### **Objective 3 - Insight**

Protect time to learn and reflect, engaging colleagues, patients, families and carers to gain a deeper understanding of patient safety and care experience, informing the ongoing delivery of care and treatment.

- When care does not go as planned, we will ensure that patients, families and carers are compassionately supported through timely, honest communication, access to appropriate emotional and practical support, and opportunities for involvement in learning and improvement. This approach reflects our commitment to transparency, trust, and healing placing people at the heart of our response. We will use Duty of Candour Scotland Regulations 2018 to guide our work in this area.
- When care does not go as intended, we will ensure staff are immediately supported through structured debriefing and timely access to appropriate emotional, psychological, and professional support. This approach reinforces a culture of compassion, learning, and resilience, enabling teams to recover, reflect, and improve together.
- When care does not go as intended, we will apply a human factors approach to the review of Significant Adverse Events. This will ensure a balanced understanding of both how work is normally carried out and the contextual factors that may influence individual and team performance. By focusing on everyday practice and system conditions, we aim to generate meaningful learning and drive improvements that are both practical and sustainable.
- Strengthen learning and improvement from Adverse Event Review (including reviews covering Child Death, Drug Death and Suicide), Mortality and Morbidity Review and for Patient Feedback by introducing more effective ways to share information and by embedding thematic learning in core educational programmes and our proactive Quality and Safety programme.
- Introduce a Team Based Quality Review approach to the review of Mortality and Morbidity by clinical teams bringing a human factors approach to reflect on the delivery of patient care and treatment
- We will strengthen our care experience feedback mechanisms by ensuring that all feedback is systematically triaged, acted upon promptly, and that learning from complaints is embedded into service improvement processes. This approach will support a responsive, person-centred culture that values the voices of patients, families, and carers as key drivers of quality improvement. We will use the Patients Rights Act 2011 to guide our work in this area.



#### **Objective 4 - Safeguard**

Those who are the most vulnerable or in the greatest need by ensuring their voice is heard and used to influence the design and delivery of services, bringing a focus to making the best use of resources for future generations.

- Collaborate across agencies to ensure effective information sharing, learning and review of cases where there is a concern relating to a child or adult. Our work in this area will be guided by the Adult Support and Protection Act 2007 and National Guidance for Child Protection in Scotland 2021.
- Act in the best interests of people who lack capacity, guided by the Adults with Incapacity (Scotland) Act 2000 and National Guidance for Child Protection in Scotland 2021 ensuring any review focuses on the rights, needs and wellbeing of individuals.
- Strengthen multiagency working across the Scottish Borders Health and Care Partnership to improve our work on prevention and access for underrepresented groups including children and young people.
- Use population health data to identify priority areas and mitigate health inequalities that disproportionately affect vulnerable children, adults and families.
- Through our partnership strategy ensure that the voice of people with lived experience is central to the planning, design and evaluation of services.
- Embed Equality Impact Assessments (EQIA) and equity into the development of services guided by the Equality Act 2010.
- Collaborate across partners to deliver our responsibilities around the provision of health and social care support under the Scottish Government Getting it Right for Every Child (GIRFEC) and Getting It Right For Everyone (GIRFE) approach.
- Linked to our Environmental and Sustainability Strategy bring a focus to the best use of resources to ensure we safeguard the needs of future generations.



#### **Objective 5 - Compassion**

Encourage shared decision making between healthcare professionals, patients, carers and families building a person-centred, values-based approach.

- Embed routine shared decision-making (SDM) and "What matters to you?" prompts into all relevant care pathways.
- Through our work on Treatment Escalation and Care Planning build an inclusive approach to involving patients, carers and families in care planning and decision-making.
- Deliver a compassionate leadership programme based on the principles of attending, understanding, empathising, and helping, aiming to support staff working across the organisation to understand themself as a leader, how they lead in a team and within our system.
- Provide targeted leadership development for clinical leaders.
- Bring a focus to team health and wellbeing testing approaches to working with teams to build psychological safety and a culture of learning and improvement.
- Working with leaders to develop a quality coaching approach supporting our objective to give agency to all staff to make continual improvements.





# NHS Borders Risk Management Enabling Strategy



#### Introduction

#### **Purpose**

The risk strategy sets out how risk becomes a key part of our operating model across all parts of NHS Borders. Good risk management is critical to the successful running of a healthcare organisation because it preserves patient and staff safety, ensures continuity of care, and supports informed decision-making.

#### **Context and Background**

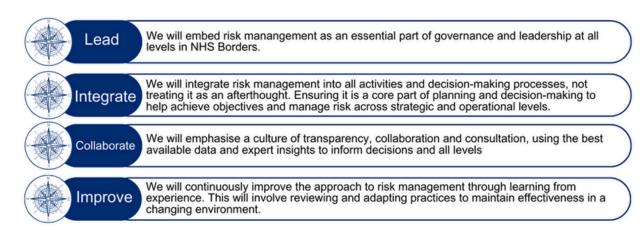
In a complex and high-pressure environment like healthcare, unmanaged risks can lead to clinical errors, financial losses, reputational damage, and regulatory breaches. By embedding risk management into everyone's daily practice, we move from a reactive approach to a proactive culture where risks are identified early, mitigated effectively, and opportunities for improvement are embraced. Effective risk management is an integral part of the NHS Borders Improvement Approach detailed in our Quality Strategy.

# Planning (Including strategic, operational, financial, clinical, project and emergency) Predictive Proactive Proactive Programme (SPSP) Claims Clinical Quality Audit Improvement Crisis Management Crisis Management Crisis Management Crisis Management

#### **Strategic Principles**

A True North statement defines our core purpose and provides a consistent direction for all decision-making. They serve as enduring principles that align stakeholders with our organisational goals and guide us toward achieving our strategic ambitions. Our approach to managing risk at NHS Borders is set out in these statements:

To bring our Risk Strategy to life, we have identified four key strategic objectives that translate our vision into practical actions. Each objective reflects a core element of our commitment to delivering our true north principles.





#### **Objective 1 - Lead**

Lead by example bringing a strong focus and commitment to risk management throughout the organisation

Effective leadership and a strong commitment to risk management throughout NHS Borders can be achieved through the board's oversight and guidance. The board plays a crucial role in setting the tone and culture for risk management, ensuring it's integrated into strategic decision-making and daily operations.

#### To achieve this objective we will:

- Set the tone at Board level to enhance the risk management culture through an annual review of the organisational risk appetite
- Ensure effective risk management practices are in place by providing risk oversight and governance, ensuring that significant risks are identified and managed effectively
- Promote a positive risk culture by encouraging open communication about risks, fostering a culture where employees feel comfortable raising concerns
- Ensure mindful leadership to ensure risk is considered in all decision making through using lessons learned from both successes and failures in risk management are shared and incorporated into future practices

#### **Objective 2 - Integrate**

Integrate risk into the way we work having a clear understanding of our risk culture and what we need to do to continual improve and mature

A strong risk culture is crucial for the success of NHS Borders because it shapes how individuals perceive and respond to risk, influencing decision-making and ultimately impacting the ability to achieve objectives. It's more than just policies and procedures; it's the shared values, beliefs and behaviours related to risk awareness, management and communication by all staff.

- Explore use of a digital tool to monitor risk culture maturity in NHS Borders to identify outcome-based suggestions for improvement
- Regularly monitor the risk culture and feed results into NHS Borders governance structures, using insights gained to identify areas for improvement
- Clearly define NHS Borders risk appetite, identifying key risks that could hinder strategic goals, and establishing robust controls and assurance processes ensuring staff are educated in this process
- Create, implement and embed a Board Assurance process and link into associated governance structures that aligns risks, strategic objectives and strategic planning and performance



#### **Objective 3 - Collaborate**

Collaborate to ensure the proactive identification of risks enabling effective planning, decision making and action within NHS Borders and across the Scottish Borders Health and Social Care Partnership

Proactive risk identification by all staff is crucial for building organisational resilience within NHS Borders. This approach involves systematically identifying potential hazards, threats and vulnerabilities and developing improvement strategies to minimise the impact of disruptions and ensure the continued delivery of services.

#### To achieve this objective we will:

- Ensure risks are logged in the risk register before they escalate by training and empowering staff to dynamically assess risks and stop unsafe practices without fear of blame
- Proactive risk management supports the NHS Scotland Adverse Event Framework and helps prevent adverse events by identifying residual risks from lessons learned and feeding them back into the risk management process
- Adopt a joined-up approach to identify emerging threats early, in line with the Civil Contingencies Act; ensuring NHS Borders is prepared for emergencies ranging from localised incidents to major disruptions
- Build organisational resilience through proactive risk management and lessons from reactive responses to reduce risks, protect patients and staff, and improve overall care quality
- Maintain, review and improve the Integrated Risk Management Strategy and Policy in partnership with Scottish Borders Council

#### **Objective 4 - Improve**

Integrate risk into the way we work having a clear understanding of our risk culture and what we need to do to continual improve and mature

To ensure a Risk Management Framework remains effective, it needs to be updated to reflect new legislation, regulations and organisational changes. This includes adapting strategies, policies and processes to address emerging risks and opportunities.

- Regularly monitor for new legislation, regulations and industry standards that affect NHS Borders, using topic specialists where appropriate and regular networking both internally and externally, at local and national levels
- Evaluate how these changes affect existing risk profiles and identify new risks or opportunities, ensuring any changes that cause additional threats or opportunities are captured through existing risks or entered as new risks into the organisational risk register
- Modify risk management strategy, policy and framework to incorporate necessary changes, ensuring compliance with best practices
- · Communicate changes to staff where applicable













# NHS Borders Research and Innovation Enabling Strategy



### Introduction

#### **Purpose**

The strategy plays an important role in underpinning the NHS Borders Organisational and Clinical Strategies setting out our strategic principles and objectives for research and innovation in the next 5 years. The Research and Innovation Strategy focuses on creating the knowledge for the NHS to continue to advance in the long term, looking at best value solutions to the challenges faced in the delivery of health and care. By expanding our research and innovation portfolio, we aim to deliver on the ambitions outlined in the People and Partnership strategies, positioning NHS Borders as an attractive place to work and a thriving hub for collaboration.

#### **Context and Background**

We aim to make research practical and useful for improving care and how we work. Research and innovation should build on our quality improvement approach to help healthcare evolve. Our vision is to create a strong research and innovation culture within NHS Borders, with a broad portfolio that gives patients and staff opportunities to take part in studies across all life stages in our Clinical Strategy. We will work with partners to explore how healthcare can be environmentally, economically and socially sustainable, and how digital, technology and artificial intelligence can shape future services.

We will enable staff to explore new ideas and innovative solutions to overcome challenges in delivering day-to-day services, creating opportunities to systematically test, validate and refine concepts that enhance patient care and treatment, ensuring improvements are evidence-based and sustainable.



The strategy will seek to maximise our unique characteristics as a remote and rural NHS Board to understand how we can evolve and develop local services to meet population need in the long term. Our collaborations with the public, academia, industry and partners operating within the Scottish Borders Health and Social Care partnership will be critical in delivering our strategy enabling the Scottish Borders to actively participate and inform the research and innovation agenda across Scotland, the United Kingdom and internationally.



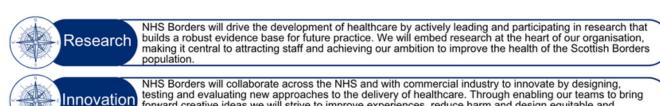
### Introduction

NHS Borders is part of NHS Research Scotland and the Health Innovation South East Scotland Hub forming part of the strategic partnership between the NHS Boards and the Chief Scientist Office to deliver clinical research and innovation projects. Patient and Public engagement is vital in designing research and innovation projects and identifying key priorities for improving service delivery. Feedback has been gathered from our patients and staff in the Scottish Borders as to why research and innovation matters to us:



#### **Strategic Principles**

A True North statement defines our core purpose and provides a consistent direction for all decision-making. They serve as enduring principles that align stakeholders with our organisational goals and guide us toward strategic ambitions: following achieving statements form the foundation from which we will develop our research and innovation approach:



forward creative ideas we will strive to improve experiences, reduce harm and design equitable and

To bring our Research and Innovation Strategy to life, we have identified four key objectives that translate our vision into practical actions. Each objective reflects a core element of our commitment to delivering our true north principles.

efficient services.



#### **Objective 1 - Inform**

Inform the future delivery of healthcare by becoming an organisation that actively contributes to research and innovation.

#### To achieve this objective we will:

- Undertake a scoping survey to establish baseline and identify gaps in skills and training.
- Embed Research and Innovation into organisational culture providing protected time for research and innovation to inform evidence-based practice.
- Deliver more training opportunities including bite size talks on key topics identified in scoping survey.
- Build a research infrastructure to support clinical staff to ensure recruitment can be delivered to time and target.

#### **Objective 2 - Collaborate**

Collaborate to strengthen our reach and capability in research and innovation.

- Co-design with Academic, Industry, public and patient partners to build a pipeline of local research and innovation projects that add value to service provision and meet local strategic health priorities.
- Work closely NHS Lothian and NHS Fife as part of Health Innovation South East Scotland (HISES) innovation hub to increase the number of innovation projects supported in the region.
- Support the Scottish Economy by collaborating with Small and Medium-sized enterprises to test new health care solutions that meet the priorities of the NHS.
- Strengthen links with the Accelerated National Innovation Adoption (ANIA) pathway to ensure values cases are fit for purpose in a remote and rural NHS Board and to ensure that local adoption can be managed effectively.



#### **Objective 3 - Advocate**

Advocate to ensure equity of access to commercial trials for people of the Scottish Borders.

#### To achieve this objective we will:

- Work with the Chief Scientist Office and our nodal partners NHS Lothian to increase access to research in response to Lord O'Shaughnessy's report on commercial clinical trial delivery
- Work with NHS Lothian to establish a hub and spoke model to support commercial research delivery
- Identify areas of priority such as cancer services where our clinical pathways are delivered jointly to enable research to be carried out closer to home where possible

#### **Objective 4 - Enable**

Enable innovation and research by proactively pursuing external opportunities for funding, recognising the need for additionality to do this successfully alongside core service delivery.

- Scope out the potential avenues for external collaboration and funding
- Proactively seek opportunities for external funding to pump prime research and innovation initiatives to enable involvement of core services
- Work with NHS Borders Health Charity to explore a process for funding small pilot projects which can demonstrate impact
- Build a robust benefits analysis approach into innovation projects to assess impact, cost and value informing long term decision making





# NHS Borders Digital Enabling Strategy



# **Purpose**

#### **Why Digital Enablement Matters**

NHS Borders stands at a crossroads. Our investment in digital has not kept pace with the ongoing need for development, maintenance, and upgrades, leaving systems outdated and limiting their ability to support modern care delivery, resulting in a digital infrastructure unable to fully support healthcare technology advancements, that are required to underpin efficient and value-based care. As clinical priorities evolve and models of care change, digital must be the enabler, making it possible to deliver safer, effective and person-centred services for our population.

Our purpose is to enable NHS Borders to deliver its clinical and organisational ambitions through robust, future proofed, and fit-for-purpose digital infrastructure and services.

This strategy sets out a clear case for urgent investment to strengthen our digital foundations to be able to support transformation that underpins the clinical strategy and ensure NHS Borders, complies with regulatory requirements and remains aligned with national policy and strategy.

#### **Delivery Context**

- Technology advancements: We will remain sighted on advancements in technology and adopt an agile approach to ensure we can adapt as models of care change, ensuring digital infrastructure, systems and skills keep pace within constraints of existing contracts and system dependencies.
- National Strategy: We will align with national digital health and care and data strategic deliverables.
- National Policy: We will adopt the 'Once for Scotland' by default approach to digital.
- Delivery Partners: We aim to work collaboratively with other health boards and agencies, recognising historic challenges in gaining traction but committed to shared solutions for resilience and sustainability.
- Regulatory Compliance: We must meet regulatory requirements for data protection, cybersecurity, and medical device safety.
- Evolving national delivery landscape: We will seek clarity on the role of NHS Delivery in local digital delivery and flexibility to make our own choices.



# **Digital Enabling**

#### **Enabling Clinical Transformation**

#### Digital will enable the delivery of our Clinical Strategy by:



Supporting care closer to home through remote consultations and remote monitoring technologies.



Facilitating seamless clinical information sharing and care planning across teams, settings, and health boards.



Standardising workflows and pathways to reduce unwarranted variation in care.



Reducing prescribing errors to improve patient safety.



Prompting people to follow evidence based guidelines.



Reducing time spend on administrative tasks, freeing up time to care.



Empowering patients to digitally transact with healthcare services and use digital tools for self-management.



#### **Objective 1 - Strengthen**

#### We will build safe and resilient digital foundations by:

- Modernising networks, data centres, and hardware for resilience and performance
- Implementing strong cyber security controls
- Enhancing governance processes to ensure value-based investment, effective change control and delivery of projects aligned with best practice standards
- Strengthening supplier, contract and asset management
- Consolidating legacy systems
- · Providing robust, tested business continuity plans
- Complying with regulatory requirements for information governance and medical devices and national standards for clinical safety
- Implementing national data and interoperability standards
- Providing training and clear career pathways for all digital staff to ensure there is a sustainable digital service
- Establishing a multidisciplinary clinical digital leadership team and upskilling with the necessary competences
- Using digital business facilitators to engage with service teams

#### **Objective 2 - Connect**

We will enable multidisciplinary teams to connect, share information and interact with each other across care settings and health boards by:

- Using M365 collaboration tools
- Facilitating access to standardised referral guidelines
- Delivering a person-centred digital health and care record, include tools for creating and sharing care plans and endof-life preferences
- Exploring digital pathway platforms which support triage, monitoring and optimised care at every stage of a patient journey, complementing existing electronic patient records



#### **Objective 3 - Digitise**

We will ensure ongoing and rapid adoption of digital technologies to improve patient care and operational efficiency, by:

- Digitising paper records to reduce administrative burden and costs
- Delivering the Vision electronic health record into all GP practices by 2027 and upgrading the Docman electronic document management system by 2028
- Evaluate the current Community and Mental Health system to ensure it continues to meet organisational needs effectively and delivers value for money
- Enhancing the capabilities offered in TrakCare to develop digital patient records and support data capture on mobile devices
- Optimising management of Ophthalmology patient pathways through use of the Open Eyes clinical system
- Procuring and implementing a Hospital Electronic Prescribing and Medicines Administration system to enhance patient safety
- Implementing the national My Care app to enable patients to digitally transact with healthcare services and access their health and care record
- Standardising and improving the quality of data captured in clinical systems

#### **Objective 4 - Transform**

We will support equitable care closer to home and facilitate new models of care by:

- Standardising digital workflows and pathways to reduce unwarranted variation
- Expanding virtual consultations
- Deploying remote monitoring and wearable technologies to facilitate virtual care and re-design of some diagnostic pathways
- Using automation and artificial intelligence to reduce administrative burden, enhance diagnostics and free up clinical time to care
- Enabling data-driven insights



#### **Objective 5 - Empower**

We will encourage a 'digital first' culture within the organisation, by:

- Establishing a digital champion clinical network and encouraging clinical representation in digital projects
- Training and upskilling staff so they can use digital systems effectively
- Co-designing digital services with staff and patients
- Empowering digital experts to identify and implement innovations that will support transformation
- Implementing digital tools that support patients to selfmanage
- Addressing barriers to digital inclusion within the local population so they can use new digital systems to interact with healthcare services

#### **Objective 6 - Collaborate**

We will work collaboratively with others who can support us to achieve our ambitions by:

- Exploring options for shared digital services and system deployments with other health boards to support local resilience, sustainability and optimise use of local digital resources
- Maximising use of resources and expertise available within national boards to address specialist gaps
- Working with Scottish Borders Council and third sector organisations to improve digital literacy for our population and promote use of self-management tools
- Fostering collaboration with academic and commercial partners to enhance research and innovation opportunities and secure inward investment

## **Next Steps**

#### The Case for Enabling Investment

NHS Borders requires urgent and sustained investment in digital enablement - not just to keep pace, but to leapfrog into a position where we can deliver safe, efficient, and transformative care. Our unique challenges and history of underinvestment in healthcare technology advancements make us a special case for Board and Scottish Government support.

Investment will enable:

- Safe, resilient systems to support patient care
- Transformation of care delivery
- Empowerment of staff and patients
- Delivery of regional and national ambitions







# NHS Borders People Enabling Strategy



### Introduction

#### **Purpose**

Our greatest asset at NHS Borders is our workforce. We value them and we want to be sure they see this on a daily basis in how we listen, and in our values, decisions and actions. Without great people, we cannot support our communities when they need us. It is that simple.

We are completely committed to supporting our workforce to be the best that they can be as often as possible, and in doing this we want NHS Borders to be a great place to work. This means making sure NHS Borders is or becomes a place where every member of staff feels valued, supported, and empowered to deliver safe, effective, and person-centred care.

Our people strategy is designed to enable our workforce to thrive, ensuring sustainability, reducing waste, and maximising value-added time with patients.

It is built around our Social Compact and sits as part of our suite of integrated strategies specifically our Clinical, Quality and Research and Innovation strategies. Through this we aim to foster a culture of compassion, learning, and continuous improvement.

#### **Social Compact**

Our Social Compact is a unique agreement developed with our Partnership Forum and staff groups that calls on all staff to recognise where we can improve for the benefit of our patients and our staff. Then to commit to continuous improvement, which is fundamental to our ethos and the agency we promote. By fostering a culture of excellence, we aim to achieve better outcomes for patients and a more fulfilling work environment.





## **Social Compact**

#### **Social Compact**

#### There are four elements to the social compact:

Firstly, a recognition of the need to improve, reducing the time it takes to meet our communities needs and working more effectively and efficiently.

Secondly, to support this performance improvement we are investing in the improvement capability of our workforce. The people who see the issues and opportunities on a day to day basis are those best placed to make improvements, so we will train our workforce in improvement methodology.

Thirdly, we recognise that this takes time, and we cannot be successful if we just ask teams to add this into their already busy days. In a structured way, we will create time for teams to spend 1 hour a fortnight on improvement activities.

Finally, we heard about the challenges our workforce face with rising costs and living expenditure. To support this we aim to maximise the benefits available to our staff by enhancing the visibility of existing benefits and exploring new options, staff benefit schemes, such as salary sacrifice schemes for purchasing cars and household goods, which offer savings on tax, National Insurance, and pension contributions.

#### **Underpinning Principles**

Underpinning this Social Compact are a set of key principles;



**Great Place to Work:** Foster a culture of respect, inclusion and celebration.



**Quality at the Core:** Embed the seven domains of quality - Safe, Effective, Person-Centred, Timely, Efficient, Equitable, Sustainable - in all people practices.



**Sustainable Workforce: Plan** and develop our workforce to meet current and future needs.



**Value-Added Care:** Reduce waste and free up staff time for direct patient care.



**Staff Celebration:** Recognise and celebrate achievements and contributions.



#### **Objective 1 - Attract:**

#### Making NHS Borders a great place to work

#### We will:

- Promote NHS Borders as a great place to work, highlighting our commitment to staff wellbeing, development, and diversity.
- Executive reverse mentoring programme for all protected characteristics
- Embed Equality Impact assessments are in all of our decision making processes
- Create a psychologically safe workplace where diversity is celebrated
- Provide access to health and wellbeing resources, including peer support, mindfulness, and occupational health services.
- Build resilience through coaching, peer support, and leadership development
- Work in partnership with staff, trade unions, and local organisations to deliver on our commitments.
- Maximise employability opportunities through apprenticeships, placements, and partnerships with local education providers.
- Ensure our workforce reflects the diversity of our communities and provides opportunities for all

#### **Objective 2 - Improve**

#### **Support our People to Drive Improvement**

#### We will:

- Embed the dimensions of Quality in our workforce; Safe, Effective, Person Centred, Timely, Efficient, Effective and Sustainable
- Foster a caring and learning culture, embedding psychological safety and reflective practice
- Engage staff in decision-making, ensuring their voices shape service reform and quality improvement



#### **Objective 3 - Sustain**

#### **Growing Skills and Potential**

#### We will:

- Ensure all staff have regular Personal Development Reviews (PDR) to identify learning and development needs.
- Develop modern, values-based recruitment processes that ensure every candidate has a positive experience.
- Strengthen workforce planning to ensure we recruit the right people with the right skills for evolving models of care.
- Support longer, healthier working lives through innovative job design and wellbeing initiatives.
- Implement work-life balance policies and flexible working arrangements.
- Provide high-quality training, leadership development, and mentorship opportunities.
- Support succession planning and talent management to build future leaders.
- Encourage continuous learning and reflective practice to maximise staff potential.
- Promote digital literacy and new ways of working to support service transformation and quality improvement.

#### **Objective 4 - Value**

#### **Waste Reduction and Free Up Time to Care**

#### We will:

- Streamline processes and reduce administrative burden, freeing up staff for direct care.
- Harness digital tools and automation to improve efficiency and reduce waste.
- Redesign roles and workflows to ensure staff operate at the top of their licence.
- Involve staff in identifying and implementing improvements that enhance patient care.
- Monitor and report on time spent in value-added activities, using feedback to drive further improvement.



## **Strategic Objectives & Conclusion**

#### **Objective 5 - Value**

#### Wellbeing, Inclusion and Partnership

#### We will:

- Celebrate staff achievements through recognition programmes and regular feedback.
- Recognise and celebrate achievements at individual, team, and organisational levels.
- Share success stories and good practice across NHS Borders.
- Promote a culture of appreciation, where staff feel valued for their contributions.
- Use staff feedback to continuously improve our recognition programmes.

#### **Conclusion**

#### **Our Call to Action**

NHS Borders is committed to enabling our people to deliver the best possible care. By making NHS Borders a great place to work, investing in our workforce, reducing waste, and celebrating our staff, we will build a sustainable, resilient, and high-performing organisation. Together, we will deliver value-added care for our patients and communities, fully aligned to our quality ambitions.





## NHS Borders Finance Enabling Strategy



## Introduction

#### **Purpose**

This purpose of this document is to set out a framework for the actions we will need to take to support delivery of our Clinical Strategy and to become financially sustainable. Being financially sustainable will allow us to make the decisions necessary to achieve our objectives, delivering improved health outcomes for the population of Scottish Borders.

The framework identifies the governance and decision-making structures that will be required to ensure that resources are managed effectively and risks mitigated, whilst creating the conditions for improvement and transformational change. It also outlines the information requirements underpinning this approach, and how these will be met.

Within this framework there is a fundamental shift in how we will plan and develop our services in future, using activity-based commissioning to redirect resources and support restructuring of how health and care are delivered in future within the Scottish Borders.

To successfully make these changes, we will need to consider how this can be achieved within the current economic environment, with increasing pressure on public sector budgets and a corresponding need to deliver increasing value for every public pound.

Where there is a requirement for capital investment to enable transformation, we will develop robust business cases and engage with Scottish Government to make the case for change.

The opportunities presented by digital technologies and new models of care offer a route to improved clinical outcomes and our commissioning approach will support this change through clear measurement of impact and with strong performance management at each stage.



## Introduction

#### **Context**

Our most recent financial plan identified a projected underlying deficit of £30m before taking actions to address this position. Although we have achieved improvement to our financial position, inflationary pressures and increasing demand continue to drive costs upward. NHS Borders' financial sustainability remains at risk and we continue to balance the challenges of expectation and need, safety, quality and workforce sustainability in a difficult economic climate.

We aim to achieve financial balance within five years. This will only be possible if we work collaboratively with our partners, both locally and regionally, to explore all opportunities for improvement and change.

Over the past 12 months, the Scottish Government has set out a strategic approach to service renewal and reform, both within the NHS and across the wider public sector. This approach recognises the need for the health service to address the requirements of an ageing population, and to reduce the length of waits for urgent and planned care. It is clear however that this demand will need to be made within an increasingly challenging economic environment.

The introduction of sub-national planning frameworks is a key step towards a population health-based planning approach which will drive shifts in how and where specialist and tertiary treatment is delivered and offers opportunities to share common infrastructure to best effect.

Our local approach set out in our organisational and clinical strategies identifies the changes necessary to deliver improved value, increased efficiency, and greater sustainability within the services we provide to the population of Scottish Borders. Our Financial Strategy will seek to support this vision by identifying the actions required to maximise the benefits we deliver for each £pound we spend.

Every day we spend around £1,000,000 (£1m) to deliver healthcare across the Scottish Borders. By creating the conditions by which we can rewire our organisation we will seek to reshape how this resource is deployed to improve outcomes whilst achieving financial sustainability.



## **Strategic Principles**



We will introduce a new commissioning approach which will support the implementation of strategic shifts in how and where care is delivered across primary, community, secondary and tertiary services.



We will develop a new prioritisation framework which seeks to promote prevention and early intervention and reduces 'failure demand'.



We will improve how we identify, plan and measure the impact of changes in clinical productivity.



We will continue to maximise efficiency and reduce waste across our cost base through our ongoing financial improvement programme.



We will develop the case for investment in new technologies and digital transformation.



We will identify new ways to improve value of our services by working with clinicians to align financial and non-financial information and support delivery of improved outcomes.



#### **Objective 1 - Commissioning Framework**

- Our Clinical Strategy sets the direction of travel for changes which will impact on how and where our clinical services are delivered in future.
- Changes in workforce, technology and clinical models offer opportunities to deliver care differently from traditional ways of working.
- By shifting towards a population-health based approach which prioritises prevention and early intervention we will aim to rebalance our system, providing care locally wherever possible whilst ensuring that hospital care is focussed on specialist interventions where this is necessary to deliver the right balance of efficiency and quality.
- In order to manage the changes necessary and to develop a resource plan which supports this shift we are introducing a new commissioning framework. This framework will set out the expected levels of demand and capacity across each of our services and map out the impact of changes in our plan.
- By setting out the plan for both activity and resources this framework will change how we manage and report our performance, focussing on the metrics necessary to drive improvement and deliver our strategy.
- This commissioning approach will be integral to how we make the shift towards new ways of working, managing how we allocate resources and measure the effectiveness of our services.

**ACTION:** We will develop and implement a new framework for Activity-Based Commissioning for implementation by April 2026.



#### **Objective 2 - Prioritisation Framework**

- Making best use of our resources is an essential requirement for how we deliver the outcomes we need to achieve through our Clinical Strategy and, alongside this, improve our financial sustainability.
- Given the pressures on our financial position, it is increasingly important that we understand the relative benefits and risks of every choice which impacts on how we spend our money.
- Our Clinical Strategy sets out the reasons why a shift towards prevention and earlier intervention will support more effective delivery of healthcare. Alongside this we need to ensure that the case for change is supported by clear metrics for how this will increase value and support improvement.
- For every area where we increase our spend, we will need to identify the areas which will release the resources to finance this investment.
- We will introduce a new planning and prioritisation framework which provides a robust mechanism for identifying the potential benefits of each individual proposal. This will be supported by a commissioning approach to business case development.
- Alongside this, our framework will provide a mechanism for relative prioritisation, recognising the competing demands for limited resources and the need to ensure that these resources are directed to the areas where they will deliver the greatest impact.

**ACTION:** We will introduce a new prioritisation framework in advance of April 2026 and embed this in our annual planning cycle over the next twelve months.



#### **Objective 3 - Improving Productivity**

- We know that too many people already wait too long to access our services.
- As our population ages, we anticipate this will further increase demand for our services.
- Our capacity is limited not only by financial constraints but also through availability of workforce.
- We need to maximise the productivity of our clinical services by removing waste from our processes, freeing our clinical teams to concentrate on the interventions which will deliver greatest benefit.
- We will continue to benchmark our services, implementing opportunities identified through national and local workstreams.
- This will include identifying how we can manage increased demand within existing capacity wherever possible.
- We will ensure that the resources are available to support continuous quality improvement across our services, and to measure the impact of this work.
- We will develop a clear plan for how clinical productivity will be measured, identifying opportunities for improvement, and setting goals for how this will be achieved.

**ACTION:** We will develop an improvement plan which sets out the expected impact of changes in our clinical productivity over the next five years.



#### **Objective 4 - Reducing Waste**

- Our financial improvement programme (FIP) has delivered significant savings over the past few years; however, we continue to face increases to costs which exceed growth in our resources.
- As we seek to improve the value of all our services, we will also focus on how we can ensure our expenditure is as efficient as possible through a relentless drive to eliminate unwarranted variation and waste.
- This approach will be underpinned by embedding a Quality Improvement methodology across our services and management teams.
- We will develop a sustainable plan for our workforce which will focus on supporting our staff to deliver high quality care, promoting attendance at work, improving recruitment and retention, and rebalancing workload across clinical professions and services, reducing our reliance on premium rate staffing solutions.
- We will mitigate growth in the costs of our medicines and clinical supplies by ensuring that we implement national and local contracts and price changes which reduce variation in product selection, maximise economies of scale, and ensure effective use of high-cost equipment and supplies.
- We will support clinical services to explore service redesign which will maintain the quality and capacity of services whilst reducing costs by minimising variation, eliminating waste and making structural changes which release resources to direct clinical care.
- We will review our back office and support services to identify where we can improve resilience and reduce overhead costs through introduction of digital processes and by exploring the potential for collaborative working with local and regional partners.

**ACTION:** We will refresh our financial improvement programme and set out the actions necessary to deliver 3% annual savings over the next five years.



#### **Objective 5 - Reducing Waste**

- Constraints on both capital and revenue resources have limited the pace at which we adopt new technologies; this in turn means that we continue to operate services on the basis of a '20<sup>th</sup> century model'.
- New medical devices and technologies offer opportunity to transform how care is delivered, improving productivity by releasing clinician's time to focus on the interventions where their expertise can deliver greatest impact.
- Developments such as the Digital 'Front Door', will support improvement in how our services are accessed and organised.
- Our current patient administration and business systems are often a barrier to delivering the changes we need to make to improve the quality and productivity of our services.
- Digital health records are a prerequisite for the future of healthcare delivery, supporting effective information flows across clinical pathways and ensuring that citizens and health and care staff can access the information required to deliver effective and timely care.
- We will develop the case for change to support a significant shift in our use of digital technologies, seeking investment from Scottish Government where necessary to achieve the changes set out in our clinical strategy.

**ACTION:** We will work with clinicians and digital services to develop a business case for digital investment and engage with Scottish Government to seek funding to address this requirement.



#### **Objective 6 - Improving Value**

- We know that a significant proportion of healthcare interventions are unnecessary or can be delivered more effectively through a shift in how and where care is delivered.
- Our approach to Value Based Health & Care (VBHC) will help us identify the treatments and interventions which provide greatest benefit to our patients. We will look to eliminate waste in clinical practice by reducing those treatments and interventions which offer limited value.
- Our clinicians have asked us to empower them to make changes to maximise the value of the services we deliver.
- To do this we need to provide information which demonstrates how clinical outcomes are impacted by the choices made throughout the care pathway.
- We also need to model different scenarios so that we can demonstrate the incremental benefit of these choices and to identify the steps we need to take to make these changes by shifting resources across the whole patient journey.
- We will develop our use of patient-level costing and information in order to support clinical decision makers to understand and influence the cost and benefits of their services.

**ACTION:** We will work with clinicians to improve financial information supporting clinical decision-making and to develop our patient level costing and information system.

