19 May 2021

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Mr Ralph Roberts
Chief Executive
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Dear Mr Roberts

Feedback from the Sharing Intelligence for Health & Care Group – NHS Borders

The Sharing Intelligence for Health & Care Group (referred to as ‘the Group’) considered NHS Borders at our meeting on 26 April 2021, as part of our routine annual programme of work. We are writing now to summarise the main points we discussed collectively as seven national organisations.¹

First, we would like to thank colleagues from NHS Borders and Borders Health & Social Care Partnership for their tremendous efforts in the ongoing response to the COVID-19 pandemic. We know that the pandemic will continue to cause enormous challenges for front line services for some time to come (thank you for sending us NHS Borders’ remobilisation plan for 2021/22), and there will be an impact on those heavily involved in the COVID-19 response even once the current challenges recede.

The pandemic has also impacted on the work programmes of the seven national organisations on the Group, and in doing so, on some of the intelligence that is available to us. We are, however, continuing to share and consider intelligence regularly – as this helps us identify things that are working well, and also any emerging problems which can then be acted upon. The remit of the Group does not, however, extend to making a comprehensive, system-wide assessment of the quality of care. The intelligence we considered on 26 April should already be known to NHS Borders, including a range of information which is already in the public domain.

¹ The Sharing Intelligence for Health & Care Group is a partnership involving: Audit Scotland; Care Inspectorate; Healthcare Improvement Scotland; Mental Welfare Commission for Scotland; NHS Education for Scotland; Public Health Scotland, and: Scottish Public Services Ombudsman.
NHS Borders

When we considered NHS Borders on 26 April 2021, the partner agencies on the Group found it helpful to learn from each other about various aspects of the health and social care system in the Borders. This will help inform the work we carry out as national organisations. The Group agreed that, at this time, there are no actions beyond any already planned that any of the seven national agencies need to take.

As a Group, we have previously acknowledged the environment of extreme pressure that the leaders of today’s health and social care systems are working within – together with the significant level of change across Scotland within the senior leadership of NHS boards. When we considered NHS Borders in July 2020, we noted that there had been significant change in the senior leadership of your NHS board. We understand that you are currently seeking to recruit to the post of Director of Nursing & Midwifery.

The Care Inspectorate explained that Borders Health & Social Care Partnership has recently implemented a new management structure, with the aim of strengthening the commissioning function and to invest in greater capacity to deliver strategic priorities. There is also evidence of improved collaborative working relationships. In relation to governance, we learned that a Public Protection Committee was established in December 2019, covering both Child Protection and Adult Protection – and this has improved the consistency of governance and performance reporting over the last 12 months.

Audit Scotland informed the Group that NHS Borders continues to have significant challenges in achieving financial sustainability, and currently remains elevated at level 4 of the Scottish Government’s performance framework in relation to this. We noted that NHS Borders’ financial turnaround programme was paused in March 2020 due to COVID-19, and you are planning to restart this programme from June 2021. We understand that NHS Borders is finalising a one year financial plan for 2021/22, with a revised three year financial plan to be ready by September 2021.

NHS Education for Scotland explained that the percentage of consultant vacancies for NHS Borders, and also nursing and midwifery vacancies, is close to the Scottish average. Medical agency costs have decreased, as have nursing and midwifery bank costs (information about agency costs was not available). We also noted that your Allied Health Professional vacancies are relatively high compared with the national average. We understand that overall governance and oversight of workforce planning activities has been identified as an area that requires strengthening.

Healthcare Improvement Scotland carried out an inspection at Hay Lodge Community Hospital in December 2020. The standard of environmental and equipment cleanliness was very good, and nursing staff felt well supported and informed during the COVID-19 pandemic. There was also evidence that learning from falls incident reports has driven quality improvement work to reduce the number of falls. Areas for improvement included how older people are assessed on admission to hospital (for food, fluid and nutrition, and pressure ulcer care), and also hand hygiene.

Healthcare Improvement Scotland’s Community Engagement Team has a good working relationship with NHS Borders, and our understanding is that yours is the only NHS board that has a Board sub-committee focusing specifically on public involvement/community engagement (NHS Borders Public Governance Committee). The Scottish Public Services Ombudsman explained that it has made some recommendations to NHS Borders about its complaints handling processes, and that your processes have been updated to ensure that responses are tailored to individuals.

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The Mental Welfare Commission for Scotland explained that there have been some significant incidents in the Borders and it has made some recommendations, including on your process for reviewing such incidents. The Commission highlighted that NHS Borders is typically responsive to its requests/recommendations. The Commission also highlighted challenges with access to Child & Adolescent Mental Health Services in the Borders. There is a new lead psychologist in post, however there are still significant waiting times for psychology input.

We hope you find this summary of our discussions helpful, and we would be grateful if you share this letter with Borders Health & Social Care Partnership, together with the Board of NHS Borders. We will also welcome your feedback on how we can improve how we share and use intelligence as a Group, including how this can be of greatest value to NHS Borders.

Yours sincerely

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NHS Education for Scotland

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