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SCOTTISH BORDERS COUNCIL TWEEDDALE AREA PARTNERSHIP

MINUTES of Meeting of the TWEEDDALE
AREA PARTNERSHIP held in Walkerburn
Village Hall, Galashiels Road, EH43 6AA on
Tuesday, 31 October 2023 at 7.00 pm

Present:- Councillors M. Douglas (Chair), J. Pirone, E. Small, R. Tatler, V. Thomson

Apologies:- Councillor D. Begg

In Attendance:- Community Engagement Officer (K. Harrow), Democratic Services Officer (L. Cuerden).

Also In Attendance:- C. Lewin (Tweeddale Assessment Panel), P. Maudsley (Chair, Peebles Community Council), Crick Carleton (Chair, Tweeddale Area Partnership Place Making Working Group), S. Meikle (Innerleithen & District Community Council), C. Kerr, L. Thornton, P. Waller (Walkerburn & District Community Council); J. Jepson (Clovenfords & District Community Council) C. Oliver, R. Roberts (NHS Borders), M. Davey (Peeblesshire News)

1. **WELCOME AND INTRODUCTIONS**

The Chair welcomed everyone to the meeting of the Tweeddale Area Partnership and outlined how the meeting would be conducted.

2. **MINUTE AND ACTION TRACKER**

There had been circulated copies of the Minute of the Meeting held on 22 August 2023.

DECISION

NOTED and AGREED the Minute of 22 August 2023.

3. **NHS TIME FOR CHANGE INPUT**

3.1 Ralph Roberts, Chief Executive NHS Borders delivered a short presentation, the slides for which were to be circulated as an Appendix to this Minute. This was to be the first of the five Area Partnership sessions to present 'Time For Change' a wide ranging conversation with communities to consider the range of NHS services in the Scottish Borders and to feed into a refresh of NHS Borders Medium Term Plan. The scale of challenges in planning and delivering health services to meet need were unprecedented; significant workforce challenges allied with a smaller working age population (45% vs 65% nationally), over a large rural area and a growing financial deficit. Under the four suggested discussion headings: Services In the Community; Community Bed Based Services; Acute Hospital Services; and Mental Health Services there had been an audit of provision, public feedback, achievements and areas of focus. A further community engagement drop-in session was to be held in the Drill Hall, Walker's Haugh, Peebles on 14 November from 2pm-7pm, with sessions taking place in each of the five localities in the Borders. The planned public conversations were to be a means to discuss further how to start doing things differently. Crick Carleton, Chair of Peebles Placemaking Working Group and NHS Borders were to arrange to meet to share information that they had gathered already from community members during place making workshops.

3.2 There followed a discussion during which several questions were raised. The review was to feed into a wider national discussion on the future of NHS services and would overlap

with the Lothians and South of Scotland. In relation to pandemic planning, it was acknowledged that there was currently not enough capacity in the system and there were lessons to be learned from the outcome of the Covid-19 inquiry. In response to a question about shared public services outreach in smaller communities, further discussions were needed with communities to identify the kind of services they wanted in the future and how they would like to access them. It was confirmed that there was to be online and face to face consultations in the future within an evolving engagement plan. The need for the consultation process to be accessible for all was highlighted. It was envisaged that this 3-year plan was to inform much longer-term plans into the future and a Borders specific plan was needed. In response to a question about doctor/GP shortages, there was an acknowledgement that workforce planning was needed in the face of increasing challenges around the percentage of working age population.

DECISION

NOTED the presentation.

4. FLOOD MANAGEMENT IN TWEEDDALE

With reference to paragraph 6 of the Minute of 22 August 2023, Colin Kerr provided an update on the progress of the Flood Management Working Group. Mr Kerr reiterated the benefit of communities working together to establish an early warning system for rising river levels. Walkerburn, Innerleithen, Peebles and Upper Tweeddale had agreed to participate in the group with a view to improving the communications between communities. There was to be a meeting with Resilience Groups on 1 November. A wider discussion was to be had later, potentially involving local communities, SEPA, SBC and Scottish Water. There followed a brief discussion during which the quantity and availability of sandbags was raised. It was acknowledged that the strategic siting and deployment of equipment was important; there was a sandbag store at Innerleithen Fire Station from which individuals could collect. The distribution of flood defence equipment and signage was already undertaken by Infrastructure and Environment and local contractors where necessary. Input from Councillor Marshall who had been involved with the Hawick Flood Group was to be welcomed and Ralph Roberts, Chief Executive, NHS Borders had expressed interest in any upcoming discussions to help target vulnerable people in communities. An update was to be provided at the meeting of 6 February 2024.

DECISION

NOTED the update.

5. PEEBLES PARKING WORKING GROUP

There had been circulated copies of a final report by Councillor Tatler, Chair of the Peebles Parking Working Group. The following recommendations had been agreed at the meeting of the Working Group on 25 October 2023:

- 1. Any changes to the off-street parking regime in Peebles were to be reviewed after a period of 18 months from implementation.**
- 2. There were to be no changes to the charging regime for the Neidpath, Kingsmeadows, Greenside or Swimming Pool car parks.**
- 3. There should be improved signage at entrances (and possibly junctions) in the Town indicating the name, capacity and charging regime for all Car Parks. Consideration should be given to including information about the availability of public toilets at the Kingsmeadows and East Station Car Parks.**
- 4. There should be improved signage at the Pay Stations at the Greenside, Swimming Pool and East Station Car Parks, indicating that funds from parking fees and fines (less maintenance and staff costs) were to go directly towards Town Centre improvements. These improvements could be better visitor information, path and pavement maintenance, environmental work (flower beds and baskets) and promotion of the Town for visitors.**
- 5. For the benefit of residents there should be a promotional campaign to encourage the purchase of Annual Car Parking Passes which were available**

from Scottish Borders Council for £26 a year. The Pass allowed for free parking in any of the Peebles Car Parks and some of the other Car Parks across the Scottish Borders.

6. There was to be no change to the current charging regime at East Station Car Park.

Councillor Tatler informed attendees of a proposed parking charge pilot at Innerleithen whereby drivers were to be invited to contribute to the local community via a QR code in lieu of standardised parking charges. The remarking of the parking bays at East Station and Kingsmeadows car parks was welcomed. Councillor Tatler thanked all those involved in the work of the Peebles Parking Working Group, the business of which was now concluded.

DECISION

NOTED the report recommendations.

6. FUNDING TABLE OVERVIEW

There had been circulated copies of the Tweeddale Funding Table which showed available funds in the Tweeddale area. Kenny Harrow reported that there was an opening balance of £60,138.77 at 1 April 2023. Were both applications under consideration to be successful, there would be £45,766.78 left. There was a request that the local media publicised the availability of the Neighbourhood Support Fund and the deadline of early January 2024 for applications to be considered at the February meeting.

DECISION

NOTED

7. NEIGHBOURHOOD SUPPORT FUND

- 7.1 Chris Lewin of the Tweeddale Assessment panel provided an overview of each of the applications. The Assessment Panel had carefully considered each application and any conflicts of interest were declared during the Panel's deliberations.

Linton Hotspur Football Club had requested £3671.99 towards the purchase of a new set of mobile goals to allow more than one group to play 11-a-side matches at a time. The Club was to pay the balance of the £4079.99 total cost for which a supplier's quotation had been provided. The award was approved.

DECISION:

AGREED TO FUND £3671.99 to Linton Hotspur Club towards the cost of a new set of mobile goals.

Conservation Without Borders had resubmitted their request for £7,500 to make a documentary about the flight of Ospreys through the Tweed Valley. The Panel felt that the project was still insufficiently Tweeddale specific. The group were unable to provide assurances that arrangements with local schools, retirement homes and community centres had been made and there had been no other applications to other Neighbourhood Support Funds in other localities to offset any contribution by the Tweeddale Area Partnership.

DECISION

AGREED NOT TO FUND

- 7.2 There followed a brief discussion on the possibility of allocating some of the £45k balance in the Neighbourhood Support Fund (NSF) to Resilience Groups to purchase additional equipment/supplies. Kenny Harrow agreed to investigate the process by which this might be possible. There was to be a meeting of the SBC Resilience Groups on 1 November at

which Colin Kerr undertook to question what can and cannot be funded from SBC Resilience Group funding.

8. **DATE OF NEXT MEETING**

The next meeting of the Tweedale Area Partnership was noted as 6 February 2024 which was to be online via Microsoft Teams.

The meeting concluded at 8.30 pm



Time for Change



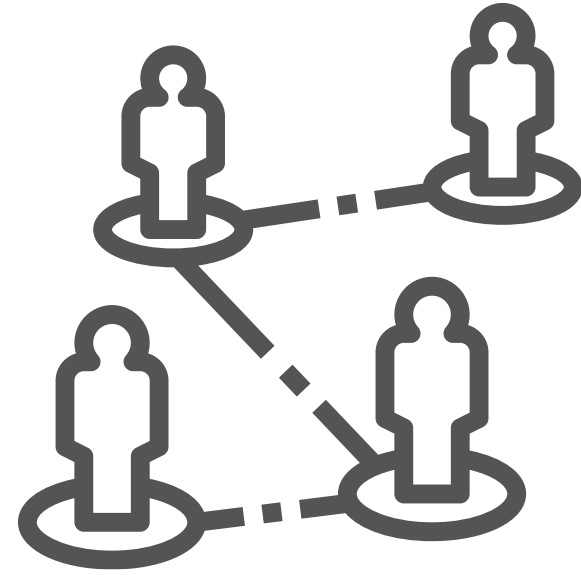

**Think
Different**
And help us make
vital savings


**Think
Different**
And help us plan
for the future


**Think
Different**
And help us change
for the better



Developments in
healthcare



Demographics

Drivers for change



Workforce



Money



Setting the scene

- The scale of the challenges faced in planning and delivering health services to meet need are unprecedented
- We must balance the delivery of safe, quality care within the financial and human resources available to us
- We have significant workforce challenges, with a smaller working age population (45% vs 65% nationally) operating across a large rural area and national shortages of specialist workforce in many areas
- Our financial deficit has continued to increase over the past few years due to growth in demand and changes in the cost of healthcare. We are projecting an overspend of £26 million by March 2024

We need to start doing things differently



We cannot meet infinite demand with the resources available

This means we must consider options and make decisions about which services we do or do not provide, where from and who by

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We are committed to involving our staff and communities in the development of options and the decision making process

Sometimes developments are out of our control (e.g. independent contractor decisions)

It is important that we trust one another



Social determinants of health & wellbeing

- The population of the Borders is 116,000
- Social determinants of health are the conditions in which we are born, grow, age, live and work
- They can be more important than healthcare or lifestyle choices in influencing our health outcomes, and often lead to health inequalities
- That's why it is important that people play their part in their own health and wellbeing

Services you can access in the community



Community Bed Based Services (e.g. Care homes, community hospitals)



Acute Hospital Services



Mental Health Services



Services in the community | Where are we now?

- **Recruitment and Retention Challenges** with independent contractors; GPs Dentists, Pharmacists, Opticians
 - 15% of Community Pharmacists have no regular Pharmacist on a day-to-day basis
 - 10% GP vacancy rate
- **Demand for NHS dental services** continues to increase but there are significant national challenges in recruitment and retention of general dental practitioners
- Many **buildings in the community** are old and require upgrading and expansion
- **Primary Care Improvement Plan (PCIP)**: many services that used to be delivered by GPs are now provided by the Health Board (e.g. vaccinations and treatment rooms)
- **Pharmacy First** is an excellent service where you can receive treatment for a range of ailments direct from the community pharmacy
- **Diversified and upskilled workforce** – new roles, e.g. Advanced Nurse Practitioners mean you don't always need to see a GP
- **Health creating capacity** – what can you do to take responsibility for your own health?

What you have already told us

- Access to local primary care is important to people
- When asked what the gaps in health and social care are, the second most common response was “access to a GP”
- In Berwickshire people said that GP recruitment and access to Dentists is an issue
- In Tweeddale feedback showed that GP communication has improved
- Carers reported needing more support from their GP in their caring role
- Post-diagnostic support for people with dementia is lacking
- Face to face appointments are important to many people

Achievements and areas of focus

- **GP Fellowship scheme** to attract 'first five' GPs to the Borders
- **First Contact Practitioner:** Musculoskeletal Physiotherapy
- **Renew service:** a centralised service offering a 'see and treat' model for anxiety and depression
- **Urgent care pathway:** established in 2019, led by an Advanced Nurse Practitioner (ANP)
- **Service / Workforce Reviews:** operationally led reviews to forward plan safe, effective, equitable and both clinically and financially viable services
- **Primary Care Improvement Plan (PCIP):** continue to develop multi-disciplinary teams to support GPs, providing access to a range of healthcare professionals who support GPs providing comprehensive care to patients.
- **Increasing capacity of the dental service**

How you can look
after your own
health & social care
needs



Value Based Health & Care
Pharmacy First

Right place, right care

Oral Health care

Social Prescribing

Getting vaccinated

Self-Care; NHS Inform

Future Care Plans for the Frail

Connect with others

Live a healthy lifestyle



What matters to you?

- How do you feel about what we have shared with you today?
- How does this reflect your own experiences?
- What matters to you?
 - What matters most?
 - What matters least?
- What steps have you taken to look after your own health?
 - What do you need from us to support that?



Community Bed Based Services | Where are we now?

- Many people in Community Hospitals do not need acute nursing care
- People are remaining in Community Hospitals for longer than they need to
- Health & Social Care availability is very limited
- It is difficult to recruit care staff



What you have already told us

- In Cheviot and Teviot & Liddesdale people said the Community Hospitals are good but have limitations in beds and what they can do
- The role of the community hospital seems to be unclear to the public– is it urgent care recovery, hospice, specialist?
- There are ideas about expanding what the community hospital does to reduce pressure on the BGH

Achievements and areas of focus

- Joint working across the Health and Social Care Partnership
- Borders View (BGH)
- Care Villages and Extra Care Housing
- Technology Enabled Care
- Purpose and role of Community Hospitals
- Hospital at Home pilot
- Respiratory virtual ward
- Discharge without Delay
- Prevention and wellbeing

How you can look after your own health & social care needs

Value Based Health & Care
Power of Attorney
Consider your home environment
Have a network of support
Look after elderly relatives (falls, isolation)
NHS Inform for guidance
Get vaccinated
Move more



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Acute Hospital Services | Where are we now?

- All our beds are open all year round so we have no extra space when things get very busy
- Lots of beds are occupied by people who are ready to move to their next place of care. Hospital is not the safest place to be if you are medically fit to move on, especially if you are frail
- We have faced some significant staffing challenges, although this is improving but there are still national shortages of registered nursing and medical staff
- Our performance is not where we want it to be (e.g. A&E 4 hour target)
- Recovery following the Pandemic is difficult with lots of people waiting a very long time to get their treatment
- We need to consider how the Borders General Hospital operates over the next 10–20 years

What you have already told us

- It was a common theme that we are generally good in a crisis but we need to ease pressure by reducing need for crisis response
- There was generally positive feedback about inpatient care
- The BGH is not easy to get to for everyone in the Borders, especially in an emergency



Achievements and areas of focus

- Successful International recruitment: 60 Registered Nurses/Allied Health Professionals and 15 International Medical Graduates
- Virtual Ward pilot (respiratory)
- Hospital at Home pilot
- Near Me appointments
- 'Surge' planning process underway to free up beds for patients requiring planned treatment (e.g. surgical procedures)
- Service / Workforce Reviews: operationally led reviews to forward plan safe, effective, equitable and both clinically and financially viable services

How you can look after your own health & social care needs



Value Based Health & Care

Waiting Well

Patient Initiated Review

Move More



Connect with others

Use NHS Inform for advice

Get vaccinated



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Mental Health Services | Where are we now?

- Significant staffing challenges e.g. Psychiatry Consultant staffing is 43% below establishment
- 'Safe staffing' levels are difficult to achieve across inpatient areas
- Performance is much lower than we would like (e.g. Child and Adolescent Mental Health Services)
- Recovery following the Pandemic is difficult with lots of people waiting a very long time to get their treatment
- Many buildings are old and require upgrading and expansion
- Health creating capacity – what can you do to take responsibility for your own health?



What you have already told us

- Across localities it was perceived that there are challenges within Mental Health services
- The Mental Health Forum said that they had good experiences of multi-agency responses, Local Area Co-ordinators providing support and good co-production of service design and delivery
- Waiting times for mental health services are concerning
- Some people accessing mental health services said they had good experiences with their GPs but those in the LGBTQ+ community said that GPs could improve their support

Achievements and areas of focus

- Renew service: a centralised service offering a 'see and treat' model for mild to moderate anxiety & depression
- Millar House: offering supported accommodation for patients with varying mental health disorders
- Mental Health Community based teams and services
- Dementia Transformation (Borders Specialist Dementia Unit, Extra Nursing Care)
- Service / Workforce Reviews: operationally led reviews to forward plan safe, effective, equitable and both clinically and financially viable services

How you can look after your own health & social care needs

Have a network of support

Connect with others

Get vaccinated

If you are worried, speak to
someone

Stay active & spend time
outside if you can

Wellbeing Service

Breathing Space



What matters to you?

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- What steps have you taken to look after your own health?
 - What do you need from us to support that?





THANK YOU



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